

Part B Insider (Multispecialty) Coding Alert

PHYSICIAN NOTES: Don't Submit Claims With Modifier KX to Medicare for Your Therapy Services

Plus: The OIG finds massive overbilling of some cancer drug units, demanding thousands back from providers

Legislators may be playing political football with your pay, but until the physician pay fix is signed into law, physical, speech and occupational therapists face caps on their services for Medicare beneficiaries.

Although H.R. 6331 would reinstate the therapy exceptions process that therapists have benefited from this year, the law is not yet in effect, so Medicare beneficiaries are limited to just \$1,810 in occupational therapy services and a separate \$1,810 cap for a combination of physical therapy and speech-language pathology.

For dates of service of July 1 and thereafter, you should not append modifier KX (Specific required documentation on file) to your therapy claims, according to a July 1 CMS news brief.

For more information on the Medicare therapy limits, visit the CMS Web site at www.medicare.gov/Publications/Pubs/pdf/10988.pdf.

In other news ...

- If you aren't keeping a close eye on the number of units you report for cancer drugs, it's time to tighten up your billing policies.

This week, the OIG released the results of five regional audits, and they revealed massive errors in units billed for cancer drugs.

For example: A review of claims billed to Cahaba Medicare revealed that one practice overbilled the drug Neulasta by an extra 19 units, resulting in a Medicare overpayment of over \$38,000.

Meanwhile, an audit of Trail-blazer Medicare found that a practice billed 200 units of a chemotherapy injection and 500 units of a cancer treatment drug, resulting in an overpayment of nearly \$31,000.

Because the audits reviewed claims prior to 2007, they did not benefit from the -medically unlikely edits- (MUEs) that went into effect that year. In all likelihood, the MUE process would have kicked out the excessive units of the cancer drugs noted in the audits.

To read the OIG audits, visit www.oig.hhs.gov.