

## Part B Insider (Multispecialty) Coding Alert

### PHYSICIAN NOTES: Health Care Legislation Extends Therapy Cap Exceptions Process and Lab Billing Moratorium

Plus: CMS issues comprehensive guidance regarding the ordering/referring provider edits.

Outpatient therapy providers and labs that bill the technical component of pathology services for hospital patients are both winners, thanks to President Obama's new health care legislation, HR 3590.

As the ink continues to dry on the Patient Protection and Affordable Care Act (PPACA), CMS is slowly but surely releasing details on how the law will impact practices that treat Part B patients.

**Outpatient therapy:** Section 3103 of the law extends the exceptions process for outpatient therapy caps, which means that these providers "may continue to submit claims with the KX modifier (Specific required documentation on file), when an exception is appropriate," for services furnished between Jan. 1 and Dec. 31, 2010, according to a March 31 CMS news release.

The current outpatient therapy cap is \$1,860 for physical therapy and speech language pathology services combined, and a separate \$1,860 limit for occupational therapy services provided in a calendar year.

**Labs:** Section 3104 of the PPACA indicates that effective retroactive to Jan. 1, 2010, independent labs can submit claims to Medicare for the technical component of physician pathology services furnished to hospital patients, "regardless of the beneficiary's hospitalization status (inpatient or outpatient) on the date the service was performed," the CMS news release indicates. Labs that were previously denied for such services should contact their MACs "for further instructions," CMS advises.