

Part B Insider (Multispecialty) Coding Alert

PHYSICIAN NOTES: Medicare Wants Your Input

CMS- survey shows which carriers get high marks--and which don't

CMS is eager to get feedback from physicians, providers and suppliers, but it hasn't heard from most of you yet.

The third annual Medicare Contractor Provider Satisfaction Survey (MCPSS) is underway, and only 32 percent of those invited to complete the survey have done so, although CMS would like to capture a 65 percent response rate before it closes out the survey next month.

CMS uses the survey to evaluate the performance of its contractors, so if you have a beef with your payer, now's the time to speak up.

-The MCPSS provides contractors with greater insight into their provider communities, and allows them to make process improvements based on provider feedback,- said **CMS Acting Administrator Kerry Weems** in a news release.

CMS will share the results of the survey in July.

You can use last year's results as a guideline of what type of information the survey will ask. For instance, last year's results indicated that on a six-point scale (with 1 being -not satisfied- and 6 denoting -completely satisfied-), fiscal intermediaries (FIs) averaged a satisfaction rating of 4.66, carriers rated a 4.42, and durable medical equipment (DME) contractors were scored 4.34.

More information on the program is available on the CMS Web site at www.cms.hhs.gov/MCPSS.

In other news-

Do you need to append modifier QW (CLIA-waived test) to pregnancy test code 81025? How about metabolic panel code 80048?

CMS has updated its listing of which tests hold CLIA-waived status, which require modifier QW, and which don't (and for the record, 81025 does not require QW to attain CLIA-waived status, but 80048 does require the modifier).

To read the full list of CLIA-waived lab tests, check out the new MLN Matters article MM5913 at www.cms.hhs.gov/MLNMattersArticles/downloads/MM5913.pdf.

CMS maintains that its competitive bidding program will be a huge advantage for Medicare beneficiaries, saving patients an average of 26 percent for some durable medical equipment, orthotics, prosthetics and supplies, according to a March 21 CMS news release. The first round of the program begins July 1 in 10 communities. For more information on the program, go online to www.cms.hhs.gov/CompetitiveAcqforDMEPOS.