

Part B Insider (Multispecialty) Coding Alert

Physician Notes: New CMS-1500 Requires Letters, Not Numbers, for Dx Pointer

Plus: HIPAA gets its random audit program into gear.

Although CMS's latest iteration of the CMS-1500 form (version 02/12) doesn't include drastic changes, it does feature one adjustment that appears to be tripping up coders across the country, according to a news blast from Part B MAC National Government Services. And since you can only use the previous CMS-1500 form through the end of March, now is the time to adjust to the new form's rules.

Background: In the past, you would list your diagnosis codes, along with numbers to indicate the priority (for instance, you would place a "1" next to your primary diagnosis, a "2" next to your secondary, and so on.) However, under the new form's rules, you will no longer list the order using numbers, you'll use letters.

New way: You can list 12 diagnosis codes in box 21, and then place letters in box 24E to signify which diagnosis code is the primary (A), secondary (B), and so on. However, some coders haven't caught on to the new rules just yet.

"You must first have the codes in Item 21 (Diagnosis or nature of illness or injury) listed correctly before item 24E can be labeled with the diagnosis pointer," NGS says in the news flash, which the payer disseminated on March 24. "Item 24E shall report the primary diagnosis code letter by listing either an A, or a B, or a C, or a D, etc., as the pointer," NGS says.

In other news...

Get ready: All signs point to an imminent return of random HIPAA audits from the Department of Health and Human Services.

In the Feb. 24 Federal Register, HHS announced that it will conduct a HIPAA Covered Entity and Business Associate Pre-Audit Survey. The survey will include up to 1,200 covered entities (CEs) and business associates (BAs), with an aim to determine their suitability for the HHS Office for Civil Rights (OCR) HIPAA Audit Program.

The survey will gather information about CEs and BAs for OCR to assess the respondents' size, complexity, and fitness for an audit, HHS states. The survey will collect recent number of patient visits or insured lives, use of electronic health information, revenue, business locations, and much more.

Significance: "This means that the 2014 HIPAA random audit program is now ramping up, with the first wave of contracts going out once the comment period is over," warns **Jim Sheldon-Dean**, founder and director of compliance services for Lewis Creek Systems in Charlotte, Vt. CMS will take comments on the information collection request until April 25.

"The time to get ready is now," Sheldon-Dean urges.

Note: You can view the Federal Register posting at www.federalregister.gov/articles/2014/02/24/2014-03830/agency-information-collection-activities-proposed-collection-public-comment-request.