

Part B Insider (Multispecialty) Coding Alert

PHYSICIAN NOTES: NQF Proposes Objective Physician Quality Measures

Standards address chronic illnesses, testing and immunization

Part of the problem with rewarding physicians for high quality has been the lack of objective measures. But that may not be a problem much longer.

The **National Quality Forum** issued 51 proposed quality standards for ambulatory care, including care in physicians' offices, emergency rooms and outpatient departments.

The proposed "voluntary consensus standards" include evidence-based performance measures for asthma and respiratory conditions; depression and behavioral health; bone diseases; heart diseases; hypertension; prenatal care; and prevention, immunization and screening.

The NQF wants to support standards that apply to individual physicians and practices, and allow for physician accountability. They should refer to areas of care physicians can control, and be derived from all available data sources.

The draft standards are online at www.qualityforum.org. [You have until May 16 to comment.](#)

In other news:

1. The **Centers for Medicare and Medicaid Services** issued Transmittal 21 on April 29 instructing carriers to stop printing patients' Medicare numbers on provider reimbursement checks.
2. **The Recovery Audit Contractors (RACs) only receive** payment based on how many overpayments they recoup from providers, but they may also identify underpayments to increase provider good will, CMS officials insisted in an Open Door Forum on the contractors. After all, CMS noted, the RACs may want providers as clients in the future.
3. Physicians who failed to send documentation to the Comprehensive Error Rate Testing contractor made up part of the 10.1 percent error rate for Medicare paid claims, CMS says in a May 2 Medlearn Matters article. Providers who fail to respond to CERT requests will find their claims deemed in error and face overpayments. You don't need patients' permission to send documentation to the CERT contractor.
4. **CMS is seeking provider** comment on its proposed coverage determination that there isn't enough clinical evidence to change its current policy banning the off-label use of Zevalin or Bexxar. The draft decision is under number CAG-00163 and you can find it at www.cms.hhs.gov/coverage.
5. **A federal jury convicted Miami physicians Jorge Humberto Forcada and Clark Carlton Mitchell** of fraud. The two physicians purportedly falsified patients' medical diagnoses and documentation to bill Medicare for the HIV medications Neupogen and Procrit that they never administered to patients or weren't medically necessary, the **Department of Justice** says.