

Part B Insider (Multispecialty) Coding Alert

PHYSICIAN NOTES: Secrets Of E/M Documentation Are On The CMS Site

Learn the ABC's of AV fistulas

Need a refresher course in evaluation and management (E/M) documentation? Help is at hand.

The **Centers for Medicare & Medicaid Services** posted an electronic version of its E/M Services Guide. It includes a rundown of medical records documentation, ICD-9 diagnosis coding, CPT codes and the key elements of the E/M service. It's available online at www.cms.hhs.gov/MLNProducts/downloads/eval_mgmt_serv_guide.pdf on the CMS website.

Also online is a new "training module" to creating AV fistulas in eligible hemodialysis patients for vascular access surgeons, interventional radiologists, nephrologists and other physicians. You can download it from www.cms.hhs.qov/MLNGenInfo on the CMS website.

In other news:

- CMS should totally rethink the Medically Unbelievable Edits (MUEs); it should also fully explain the reasoning behind the MUEs and allow physician groups to review and comment on the methodology and data used to develop the MUEs, according to an April 17 letter from 16 specialty groups to CMS. After physicians have a chance to comment, CMS should only move forward with a "select, targeted number of MUEs," not 10,000 edits targeting every single CPT code, the groups proposed.
- The **Medicare Payments Advisory Commission** is studying a sample of 5 percent of Medicare physician claims to figure out whether commercial episode groupers and clinical quality indicators can help indicate whether a physician is using resources efficiently.

The Commission also discussed Medicare's estimated cut of 4.6 percent to physician payments for 2007 at its April 19 meeting. (See next week's PBI for more details about the MedPAC meeting.)

• CMS is considering adding new diagnoses to the coverage criteria for some diagnostic tests. If you perform partial thromboplastin time tests for patients with primary hypercoagulable state (**289.81**) or prostate specific antigen tests for patients with hypertrophy of prostate without urinary obstruction (600.00), then now's your chance to comment by going to www.cms.hhs.gov/coverage.

CMS is also considering adding 289.81 (Primary Hypercoagulable State) as a covered indication for prothombin time testing.

• Wrong-site surgery, in which a surgeon operates on the wrong body part or the wrong patient altogether, is "exceedingly rare," according to an article in the latest Archives of Surgery. The researchers found 25 non-spine wrong-site surgeries reported to malpractice insurers, out of 2.8 million operations in U.S. hospitals from 1985 to 2004. The most up-to-date site-verification protocols could have prevented eight out of 13 cases for which the researchers could read the records.