

## Part B Insider (Multispecialty) Coding Alert

### PHYSICIAN NOTES: Watch Out For These Common Billing Errors

#### Prepare to bill Medicare for ultrasound cardiac monitoring

You can't write the word -SAME- to indicate the place your physician provided services to the patient on your Medicare claims--even if it really is the same as the information you've entered elsewhere.

That's just one of the common mistakes that is causing Medicare to reject your claims, according to MLN Matters article SE0712. Other common mistakes include leaving out the patient's Medicare number, forgetting the referring physician's provider number, billing emergency department codes with an office place of service, or not having enough digits on your diagnosis codes.

#### In other news:

- Three doctors paid off patients or offered a free tummy tuck in exchange for consenting to unnecessary procedures to remove cysts or treat sweaty hemorrhoids, prosecutors claim. The authorities arrested the trio as part of a probe of an alleged \$96-million scam at the **Unity Surgery Center** in Buena Park, CA, according to the Orange County Register.

- A new federal bill would provide \$4 billion in grants to help physicians and other providers pay for information technology. **Sens. Debbie Stabenow** (D-MI) and **Olympia Snowe** (R-ME) introduced the Health Information Technology Act of 2007, which targets 20 percent of its money to rural areas.

- Medicare plans to start covering ultrasound monitoring of cardiac output for ICU patients in and operative patients who need intra-operative fluid optimization. Monitoring the volume of blood ejected from the heart can help physicians gauge the need for intravenous fluid replacement and drug therapy to maintain adequate blood flow. But Medicare won't cover lumbar artificial disc replacement for patients over 60 years old, according to a proposed coverage decision.

- A state regulation in Ohio saying that anesthesiologist assistants can't perform epidural and spinal anesthetic procedures isn't valid, the Supreme Court of Ohio ruled in Hoffman vs. State Med. Board of Ohio. Ohio state law specifically states that assistants can perform those spinal procedures.

- Find the July update for the Medicare Physician Fee Schedule, including new codes for the physician quality reporting initiative in Transmittal 1258. CMS also deleted the oncology demonstration codes, corrected the Diagnostic Supervision Indicators for some codes, and assigned multiple procedure codes of -0- and diagnostic facility imaging indicators of -99- to G0389, 70554-70555 and 76776. CMS also established RVUs for new CPT codes 38204 and 38207-38215, even though Medicare won't pay for them.