

## Part B Insider (Multispecialty) Coding Alert

### Reader Question: CMS Proposed Changing Payment Guidelines for Non-Credentialed Physicians

Under proposed plan, CMS would no longer allow retroactive billing for newly-credentialed doctors.

Question: In your last issue, your reader question discussed how practices can hold a physician's claims while waiting for Medicare to credential the doctor, and then the practice can later send in all of that doctor's claims for retroactive payment after Medicare has credentialed him. However, I heard that Medicare is planning to end the retroactive billing rule and allow us to only bill for services the physician provides after Medicare credentials him. Is this accurate?

**Answer:** Medicare did propose such a plan with an announcement in the July 7, 2008 Federal Register, says **Robert B. Burleigh, CHBME**, of **Brandywine Healthcare Services** in West Chester, Penn.

The Federal Register notes that currently, practitioners "may retroactively bill the Medicare program for services that were rendered up to 27 months prior to being enrolled to participate in the Medicare program." However, CMS solicited comments this past summer for a new proposed system that would follow one of two plans, as follows:

- "The first approach would establish the initial enrollment date for physician and NPP organizations and for individual practitioners, including physician and NPPs, as the date of approval by a Medicare

contractor," the Federal Register says. Under this plan, you would not be able to bill Medicare services retroactively -- instead, you could only bill for services performed after Medicare credentialed your physician.

- Under the second approach, the effective date would be the later of either the filing date of the

Medicare enrollment application that was subsequently approved by a fee-for-service (FFS) contractor, or the date an enrolled supplier first started rendering services at a new practice location.

"Many healthcare associations filed comments opposing CMS' proposed enrollment changes," Burleigh says. Although the comment period expired in August, CMS has not announced when it will determine whether to adopt one of these two proposed policies going forward.