

Part B Insider (Multispecialty) Coding Alert

Studies & Surveys: Emergency Care Costs Doctors \$4.2 Billion a Year

Think it's just emergency department physicians who suffer from unreimbursed emergency care? You're off your gurney.

In fact, chances are your office picks up the tab for tens of thousands of dollars in emergency care that you can't retrieve a penny for. The average physician shoulders about \$12,300 per year in bad debt due to the [Emergency Medical Treatment and Active Labor Act](#), which requires physicians to screen and treat emergency patients regardless of ability to pay, according to a new study by the **American Medical Association**.

Sure, ED physicians take the biggest bite of the rotten apple - an average of \$138,000 per year in bad debt - but EMTALA hits physicians in all disciplines, the AMA says. The average physician writes off about 13.7 percent of his or her bad debt due to EMTALA. General surgeons and internal medicine doctors write off \$25,000 on average due to EMTALA.

The AMA called on the **Centers for Medicare & Medicaid Services** to boost emergency doctors' practice expense pay. The association also hopes CMS will clarify that hospitals don't need constant on-call services for specialties when they have access to three or more specialists. Physicians complain that non-stop on-call at hospitals drains their private practices.

RVUs Held Steady ... Barely

"Doctors are losing tons of money providing uncompensated care," says **Steve Verno**, director of reimbursement with **Emergency Medicine Specialists** in Hollywood, Fla. Medicare claims it has already boosted practice expenses for ED physicians, but the overall drop in physician expense payments has meant evaluation and management payments in the ED have barely held steady.

Meanwhile, Verno says Medicare is making ED physicians' lives harder by probing them for fraud and abuse, trying to prove that patients billed at level five could have been billed at level four instead.

The requirements for EMTALA are much too loose, Verno adds. "You don't have to present any ID whatsoever, you can give a fake name," and "they have to take you." If a patient says his name is Joe Smith, a physician may find herself "trying to bill Joe Smith, who doesn't really exist." Policy-makers wrongly believe that ED physicians don't have many expenses, but they rack up huge attorney costs both coping with malpractice issues and helping patients who need their records for lawsuits against third parties.