

Eli's Rehab Report

News Briefs: MAC Transition Proves Rocky for California Therapists

If your Medicare contractor hasn't yet transitioned to a Medicare Administrative Contractor, be aware of potential problems ahead. Therapists in California experienced some major problems with the shift from National Heritage Insurance Corp to Palmetto GBA, according to the Sept. 26 edition of PT Bulletin Online, the American Physical Therapy Association's (APTA's) weekly newswire. To begin with, therapists had difficulties contacting the contractor's customer service department and experienced delays in processing enrollment applications.

Once enrolled, many providers were unaware of a new local coverage determination (LCD) they had to abide by and therefore received denials, APTA said. In addition, the new LCD had "an extensive crosswalk," in which ICD-9 codes were linked to CPT codes for reimbursement -- and certain ICD-9 codes were excluded from coverage. To top it off, providers and patients had difficulties determining dollars accrued toward the therapy cap, as well as difficulties in resolving outstanding issues from the previous contractor, NHIC, according to APTA.

Physical therapists in other parts of the country may experience similar problems as the Centers for Medicare & Medicaid Services implements contracting reforms, the Bulletin warned.

The good news: Palmetto GBA issued a revised LCD in response to APTA's and its California chapter's complaints, according to the Oct. 17 edition of the Bulletin. The revised LCD eliminated the existing ICD-9/CPT crosswalk and replaced it with a list of ICD-9-CM codes for reporting physical medicine and rehabilitation services. Palmetto told APTA that if claims are denied due to the crosswalk and contain an ICD-9 code that is included on the new list of ICD-9 codes in the revised policy, it will reprocess those claims automatically and make the appropriate payment adjustment, the Bulletin said.