

MDS Alert

MDS & Billing News

DAVE is making a comeback. Pronouncements of DAVE's demise were apparently exaggerated. The **Centers for Medicare & Medicaid Services** has awarded a contract similar to the one it had for the Data Assessment Verification MDS watchdog program.

DAVE reviewers will be doing reviews probably beginning in the second quarter of 2006, according to a presentation by CMS' **Mary Pratt, MSN, RN**, at the recent annual NASPAC conference in Washington, DC. CMS wants the reviews to be a mutually respected opportunity to have experts take a look at the MDS process, Pratt said.

Has your SNF been receiving bills for certain physician professional services that Medicare carriers have been erroneously denying as subject to consolidated billing? In recent months, physicians serving your residents may have come to you for payment of services associated with 25 different therapy-related professional service codes involving application of casts and splinting, etc. That's because Medicare contractors began denying physicians' professional charges related to the codes.

SNFs are not responsible for the following codes when billed for the physician services, which include application of casts and splints, etc., according to CMS:

29065, 29075, 29085, 29086, 29105, 29125, 29126, 29130, 29131, 29200, 29220, 29240, 29260, 29280, 29345, 29365, 29405, 29445, 29505, 29515, 29520, 29540, 29550, 29580, 29590

As of Oct. 13, CMS has corrected the Common Working File. CMS has instructed Medicare carriers to automatically adjust any claims that were previously denied incorrectly no later than Dec. 31, 2005.