

MDS Alert

RAC READINESS: Make Time to Target Untimed Codes on Part B Therapy Claims

Don't let the RACs bilk you out of this one example of appropriate billing.

RACs are already going after SNFs for overbilling untimed therapy codes, so take a quick look to make sure your facility isn't wide open for payment recoupments and related compliance woes.

In a nutshell: "An untimed code, according to the CPT code definition, is one billed irrespective of the time spent on the service," says **Nancy Beckley, MB, MBA, CHC**, a consultant with Bloomingdale Consulting Group Inc. in Brandon, Fla. And three out of four RACs have published untimed codes as an approved issue for automated review, she warns. Automated RAC reviews are ones "where the computer rolls away in the middle of the night and determines if a particular code has been billed in units of more than one."

A potential problem: "The therapy documentation may include the number of minutes," says **Victor Kintz, MBA, CHC, LNHA, RACCT, CCA**, managing director of operations for The Polaris Group based in Tampa, Fla. "But a biller who isn't familiar with the codes may bill for four units or an hour for an [untimed code]. And if the MAC or FI system pays it by mistake, then there's an overpayment," Kintz cautions providers.

Ouch: In the RAC demo alone, RACs recovered \$3.2 million on the issue of speech therapy untimed codes, noted **Betsy Anderson**, a VP at FR&R Healthcare Consulting in Deerfield Ill., in a presentation on RACs at the 2009 American Association of Homes & Services for the Aging annual meeting.

Examples of untimed codes:

Speech and language pathology has the most commonly used untimed codes, says Kintz.

"Speech/hearing therapy and swallowing therapy are examples of two," he says. Examples for physical therapy include electrical stimulation for stage III and IV ulcers, and paraffin bath therapy, Kintz adds. Also keep in mind that all rehab therapy evaluations are untimed codes -- "no matter how long the evaluation took," he says.

Know When to Use the 59 Modifier

"Medicare does allow you to use 59 modifiers to identify situations where you provided therapy to more than one body site," says **Pauline Franko**, a physical therapist and principal of Encompass Consulting & Education in Tamarac, Fla. But you can't do that for an untimed code, she stresses. Ultrasound, on the other hand, is a timed code. And "if you did ultrasound and billed two units, which is outside the norm, I would probably put the 59 modifier showing I had given the ultrasound treatment to several different areas," Franko says.

Make Sure You Appeal This Unfair RAC Denial

Some providers in Florida have had Part B therapy claims denied because claims had two untimed codes appearing on the same claim, says Beckley. Yet "there is no prohibition against billing two untimed codes -- the approved [RAC] issue is for two units of an untimed code," Beckley points out. And Florida providers are appealing those denials, she says. "An example would be a speech swallowing evaluation and a speech swallowing service on the same claim."