

## Health Information Compliance Alert

### Coding DON'T TAKE CCI EDITS AT FACE VALUE

The latest version of the Correct Coding Initiative edits is causing cardiologists some heartache, and other specialties likely will find similar trouble □ but organizations that give up on CCI altogether are sitting ducks for the feds, experts warn.

CCI version 8.0 took effect Jan. 1, and an apparent communication breakdown already is causing trouble, notes consultant Jim Collins, president of Compliant MD Inc. in Matthews, NC. Some codes were changed in the most recent edition of the CPT manual, but CCI didn't get the message.

The problem lies in the electrophysiology section of the manual, Collins explains. Two CPT codes, 93621 and 93622, that formerly stood alone have been changed to add-on codes. Physicians now should bill these codes as add-ons to 93620 (comprehensive electrophysiological examination), he reports. This in itself is tricky enough, because it goes against the way cardiologists have been billing all along, Collins says.

To complicate matters further, CCI still identifies 93621 and 93622 as stand-alone codes that physicians can't bill in conjunction with 93620, Collins notes. "CPT is telling us to bill this way, but [the claim] is going to automatically be denied by Medicare or any other payors who use these CCI edits," he laments.

The Centers for Medicare & Medicaid Services has been informed of this mistake, and plans to fix it in the next release of CCI, Collins reports. Once that fix is in place, carriers will go back and reimburse physicians for any claims denied because of this goof, he says.

But that won't happen until April 1, and many practices don't have the resources to keep up with all those claims, Collins worries. Plus, quite a bit of money could be tied up in the claims, and four months is a long time to wait.

It's very likely that cardiologists won't be the only providers who suffer for Medicare's mistakes. This kind of scenario is played out time and again, says Quin Buechner, president of ProActive Consultants in Cumberland, WI. Physicians should pay close attention to strange denials, because often the mistake isn't theirs, he notes. And don't be afraid to appeal a denial you think is based on faulty edits.

As tempting as it might be to throw in the towel and forget about CCI altogether, don't risk it. If you ignore the CCI edits and consistently bill pairs together that CCI deems inappropriate, sooner or later the feds will notice, Buechner warns. "If you stick your head out of the fox hole, you're likely to find a sharpshooter there," he quips.

Therefore, as frustrating as it is to keep up with CCI, physician practices must persevere. "It's willful ignorance to ignore CCI," Buechner reminds physicians.

Editor's Note: For more information about CCI, go to [www.hcfa.gov/medlearn/ncci](http://www.hcfa.gov/medlearn/ncci)