

# Pain Management Coding Alert

## News You Can Use: Brush Up on Fee Schedule Specifics Before 2020

### **Anesthesia conversion factor remains virtually the same.**

Changes are coming to certain reimbursement and documentation requirements for 2020.

If you haven't had a chance to plow through the 2020 Medicare Physician Fee Schedule (MPFS) proposed rule yet, here's a quick look at some changes that could be implemented.

**1. Expect more documentation reductions.** The Centers for Medicare & Medicaid Services (CMS) doubles down on another Patients Over Paperwork-backed idea, honed from stakeholder feedback. This time around the agency proposes to significantly modify documentation requirements, so that physicians and some auxiliary clinical staff can "review and verify (sign and date)" instead of redocumenting notes, according to the proposed rule.

**2. Think telehealth services, but for opioid abuse treatment.** As telehealth services continue to pick up steam, CMS hopes to add three more options for providers in 2020. The HCPCS codes "describe a bundled episode of care for treatment of opioid use disorders," according to the CMS fact sheet. The codes include:

- GYYY1 (Office-based treatment for opioid use disorder, including development of the treatment plan, care coordination, individual therapy and group therapy and counseling; at least 70 minutes in the first calendar month)
- GYYY2 (Office-based treatment for opioid use disorder, including care coordination, individual therapy and group therapy and counseling; at least 60 minutes in a subsequent calendar month)
- GYYY3 (Office-based treatment for opioid use disorder, including care coordination, individual therapy and group therapy and counseling; each additional 30 minutes beyond the first 120 minutes (List separately in addition to code for primary procedure))

**3. Anticipate a loosening of PA restrictions.** Because of a combination of relaxed state laws and the need for more flexibility, CMS wants to allow physician assistants (PAs) to work more "broadly" with modified levels of physician supervision, the rule suggests.

**4. Don't expect any big Medicare payouts.** It's a little bit better than the status quo, but the national CY 2020 MPFS conversion factor (CF) is only increasing from \$36.0391 to \$36.0896.

**5. Send CMS your thoughts on Stark.** According to the proposed rule, CMS is still sifting through public comments from last year's Request for Information (RFI) on the unnecessary burdens of the Physician Self-Referral Law or Stark Law. But, the agency needs more time to figure things out, and now wants stakeholders' input on how to address changes to the advisory opinion process, CMS says.

**Resource:** Review these CY 2020 MPFS proposals and more at

[www.federalregister.gov/documents/2019/08/14/2019-16041/medicare-program-cy-2020-revisions-to-payment-policies-under-the-physician-fee-schedule-and-other](http://www.federalregister.gov/documents/2019/08/14/2019-16041/medicare-program-cy-2020-revisions-to-payment-policies-under-the-physician-fee-schedule-and-other).