



June 22, 2009
Volume 2 issue 6

Reimbursement/Coding News

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In a recent opinion, CMS confirmed that non-contracted physicians do not have the right to dispute down-coded Medicare Advantage claims. Unlike the Medicare Fee-For-Service Program, the Medicare Advantage Program does not afford payment dispute rights to non-contracted physicians. CMA is working with CMS to address this issue. CMS has indicated that it plans to extend the current FFS payment dispute rights to Medicare Advantage plans in 2010.

CMS Scam Alert

The Centers for Medicare & Medicaid Services (CMS) has become aware of a scam where perpetrators are sending faxes to physician offices posing as the Medicare carrier or Medicare Administrative Contractor (MAC). The fax instructs physician staff to respond to a questionnaire to provide an account information update within 48 hours in order to prevent a gap in Medicare payment. The fax may have the CMS logo and/or the contractor logo to enhance the appearance of authenticity. Medicare providers should be wary of this type of request. If you receive a request for information in this manner, check with Palmetto GBA before submitting any information, at 866-931-3901

Billing Medicare for Anticoagulant Management

Q: How do I bill Medicare for anticoagulant management? I tried using CPT 99363 but was denied.

A: According to the Medicare Physician Fee Schedule Data Base (MPFSDB), 99363 (*anticoagulant management for an outpatient taking warfarin, physician review and interpretation of international normalized ratio (INR) testing, patient instructions, dosage adjustment (as needed) and ordering of additional tests; initial 90 days of therapy...*), has a status B for Bundled. This means that this code will **always** be bundled into payment for other services not specified and will never be paid separately. The codes to choose from instead are:

- G0248 – demonstrate use of home INR monitoring
- G0249 – provide INR test materials/equipment
- G0250 – physician review, interpretation, and patient management of home INR testing