

“Red Flag” Identity Theft Rules

Blue Shield to Reprocess Denied Claims for New CPT Codes

Blue Shield of California recently Revealed that delays in loading New 2009 CPT codes into its claims Payment system resulted in the Incorrect denial of an as yet undetermined number of physician Claims. Affected were claims with Dates of service of January 1 to March 13, submitted with any of 225 new 2009 CPT codes. Blue Shield has stated that all Codes have now been successfully Loaded into its claims payment System. At CMA/SCCMA's urging, Blue Shield has agreed to automatically reprocess all affected Claims. Physicians do not need To appeal or resubmit. For more Information, call Blue Shield Provider Relations at 800/258-3091 crosses over electronically to Medi-

Did you know...

Injection codes have changed:

Deleted	New
90760	96360
90761	96361
90765	96365
90766	96366
90767	96367
90768	96368
90769	96369
90770	96370
90771	96371
90772	96372
90773	96373
90774	96374
90775	96375
90776	96376
90779	96379

FTC Says Physicians Must Comply with Identity Theft Rules

The Federal Trade Commission's Red Flag Rules require financial institutions and “creditors” to develop and implement identity theft detection and prevention programs by May1, 2009. The CMA/SCCMA and AMA have objected, but the FTC insists that physicians who regularly bill their patients for services (including copayments and coinsurance) are considered “creditors” and must develop and implement written identity theft prevention programs for their practices by the May 1 deadline.

CMA will be hosting a live webinar on April 16 from 12:30pm-1:15pm to help members understand and comply with the Red Flag Rule. You may sign up for this free webinar by going to our website at www.sccma.org under Up and Coming Events. CMA is also preparing a written toolkit to help physicians develop and implement identity theft detection programs. The toolkit will be posted on the CMA website as soon as it is completed.

Begin EHR Needs Assessment Process Now

The 2009 federal economic stimulus package includes \$19 billion for health information technology (HIT), the vast majority of which will be directed to physicians to subsidize the purchase and usage of electronic health record systems. Beginning in 2011, qualifying Medicare providers stand to gain up to \$44,000 under the program; qualifying Medi-Cal providers stand to receive as much as \$64,000. For information and guidance CMA has created an HIT Resource Center you may access on their website at <http://www.cmanet.org/HIT>.

New Echocardiogram Changes

If your practice does a high volume of echocardiography procedures, this year you're adjusting to two new CPT codes that will account for much of your revenue.

Effective January 1, you now must report a full echo with the Doppler and color flow add-on procedures using code **99306**. Before now, you would have been using full echo code **93307** with add-on codes **93320** (Doppler) and **93325** (color flow) for that same procedure.

Similarly, when you do a stress echocardiogram, you now must use the new comprehensive code, **93351**, which includes both the stress test (**93015**) and the echo (**93350**).

Question of the Week:

If I haven't seen a patient in over a year and they have new insurance, can I charge a new patient visit?

You may charge a new patient visit only if you have not had face-to-face contact with the patient within the last three years.