

COMMUNIQUE



SEPTEMBER 2010

REMINDER: Medicare Requires Physician Enrollment in PECOS

Physicians who are currently enrolled in Medicare but do not have an established enrollment record in PECOS must take action. If you have not submitted any updates or changes to your Medicare enrollment information since 2003, you must enroll in PECOS. Failure to do so can result in non-payment of services you submit for payment to Palmetto as well as your Medicare patients being unable to obtain durable medical equipment or services you might order or refer for them.

IMPORTANT: Even if you have been practicing at the same location and same practice for many years, **if you haven't filed a CMS 855 since 2003**, you still have to complete this process. Failure to update will cause Medicare payment interruption beginning Jan. 1, 2011. You can update your information in one of two ways:

1. **Paper Application Process.** To apply by paper, download and complete the Medicare application(s) from the CMS website at www.cms.hhs.gov/MedicareProviderSupEnroll or contact Palmetto, GBA at (866) 308-5439.

2. **Internet-Based Provider Application.** You can complete this form on the CMS website. Access this through the OSMA website at www.osma.org/pecos.

Be sure you have your NPI and have created a user ID and password in the National Plan and Provider Enumeration System (NPPES). You will need the NPPES user ID and password in order to access the internet-based PECOS. If you have questions or want to check if your information is in PECOS, please contact Palmetto's Provider Enrollment Support Line at 866/308.5439.

Coding Confidential

Q: What modifier should be used when billing for interpretation of multiple vascular studies?

A: Modifier 26 is used whenever interpretation is performed without the technical component. Multiple studies should not need any other modifiers, unless are inclusive according to NCCI edits. This is most often the case in vascular because intervention is frequently done at the same time as the diagnostic study. The diagnostic study is denied as inclusive with the intervention. In that case, presuming a full diagnostic study was performed and the results are dictated in the operative note, you would need modifier 59 in addition to 26.

Coding Confidential is written by Kathy Stull, CPC, CMRS. Ms. Stull is president of Superior Resources, Inc. If you have a question for Coding Confidential, e-mail it to KathyStull@SuperiorResources.info. Your question will be answered by return email and may be included in a future issue.

United Way Kicks Off 2010 Campaign

On Wednesday, September 8, United Way of Greater Toledo kicked off the 2010 campaign, encouraging the community to GIVE. ADVOCATE. VOLUNTEER. Sharon Speyer, regional president of Huntington and 2010 campaign chair, announced the 2010 goal of \$13.3 million.

Following the big announcement at the campaign breakfast, volunteers from local organizations participated in United Way Day of Caring, a program that matches up local companies with volunteer projects at area nonprofit organizations. Days of Caring can also be coordinated through the United Way Volunteer Center year round if your employees are interested. United Way strives to advance the common good through improving education, income and health, in addition to community outreach and essential services—the five areas of focus for United Way.

A recent example of outreach was the immediate action United Way took to mobilize the community in assisting tornado victims after the deadly storm struck Northwest Ohio Saturday, June 6. Within hours of the tragedy, United Way was on the scene organizing efforts to help the families whose homes and lives were torn apart. Within the first two weeks, more than 3,500 volunteers were deployed in Wood and Ottawa counties to help with cleanup efforts. It's estimated these volunteers logged at least 14,000 hours of work. United Way is also coordinating long-term relief efforts for storm victims and to date, has received more than \$81,000 for these efforts.

Every gift counts and no donation is too small. Please give today to help as we're advancing the common good. Contributions to the 2010 United Way campaign can be made securely online at www.unitedwaytoledo.org, by calling 419-248-2424, or by pledging at your workplace.

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Updates to ADA Regulations Will Affect Physician Offices

Under the Americans with Disabilities Act (ADA), physician offices are places of public accommodation that must comply with the requirements in Title III of the Act. In July of 2010, the Department of Justice (DOJ) finalized rule updates that change many of the requirements related to places of public accommodation.

The requirement that is likely to be of most interest to physicians pertains to the use of devices or services to provide effective communication to hearing impaired patients.

What are the new requirements for effective communication? According to the DOJ ADA Fact Sheet:

The rule includes video remote interpreting (VRI) services as a kind of auxiliary aid that may be used to provide effective communication. VRI is an interpreting service that uses video conference technology over dedicated lines or wireless technology offering a high-speed, wide-bandwidth video connection that delivers high-quality video images. To ensure that VRI is effective, the Department has established performance standards for VRI and requires training for users of the technology and other involved individuals so that they may quickly and efficiently set up and operate the VRI system.

The rule also adds exchange of written notes, real time captioning, voice, text and video-based telecommunications products and systems, including text telephones (TTY), videophones and captioned telephones as examples of permitted auxiliary aids. The rule also more precisely defines effective communication and specifically states that the means of communication may vary with the individual and the complexity and nature of the communication involved. The rule also states some specific dos and don'ts.

The OSMA encourages practices to review the full text of the auxiliary aid changes. These sections are reprinted at <http://www.osma.org/ada> with changes in bold type.

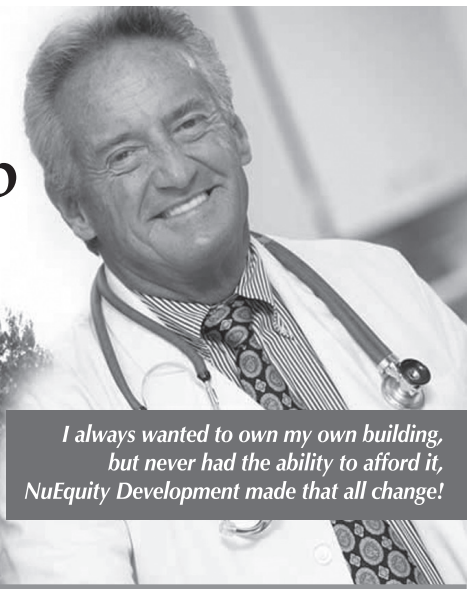
The 2010 Standards take effect 18 months from the publication date,

likely making the "compliance date" around January 2012. Until the compliance date, covered entities can choose whether to comply with the prior standards ("1991 Standards") or the 2010 Standards.

University of Toledo College of Medicine Student Survey

David Koslov, MS3, and Jonathan Bonchak, MS3, under the supervision of Dr. Reginald Baugh from the Department of Surgery at The University of Toledo College of Medicine, will be distributing a short 15 question survey to selected members of The Academy of Medicine for completion. The questions are based around a series of possible scenarios where physicians will be asked to indicate their preference. The results of the conjoint analysis will be used to gauge physicians' views on providing various otolaryngology services. The survey will arrive at the mailing addresses as listed in the directory and a stamped return addressed envelope will be included. The students realize time is valuable and appreciate the willingness of the selected physicians to complete the survey and contribute to their education.

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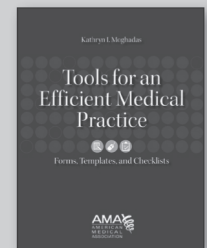
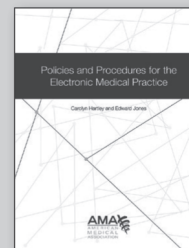
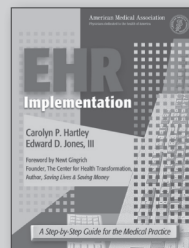
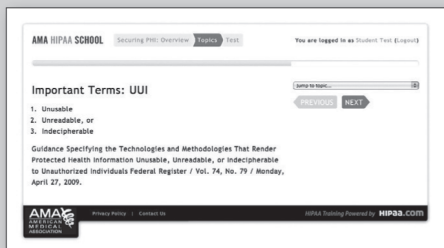
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5010: The Next Version of the HIPAA Standard Transactions

Version 5010 of the HIPAA standard transactions go into effect January 1, 2012. Will you be ready?

Version 5010 of the HIPAA transactions will be required for use by physicians and other health care providers, payers and clearinghouses on Jan. 1, 2012. Version 5010 corrects technical issues, accommodates new business needs, and provides overall improvements from the current 4010 version. If you currently conduct electronic administrative transactions, such as checking a patient's eligibility, filing a claim, or receiving a remittance advice, either directly with a health plan payer or a clearinghouse, you will need to be prepared to send and receive only the 5010 version of the HIPAA transactions starting on the compliance deadline.

The American Medical Association (AMA) can help! The AMA has various resources to help you implement the 5010 HIPAA transactions. Start preparing today to prevent future cash flow interruptions and disruptions in transaction processing.



Complimentary AMA Web resources available:

www.ama-assn.org/go/5010

- 7 Steps Practices Can Take Now to Prepare for 5010
- 5010 Project Plan Template – Helping Practices Prepare for the New HIPAA Standards
- 5010 Checklist
- 5010 Fact Sheet Series
 - #1 HIPAA 101: How It Started and What's New
 - #2 5010 Timeline: Getting the Work Done in Time for the Deadline
 - #3 The Language of HIPAA
 - #4 What's Different in the 5010 Transactions
 - #5 Testing Your Readiness for the 5010 Transactions
 - #6 Complying with the HIPAA Transactions and Code Sets

AMA Business Products publications and training available:

www.amabookstore.com

- AMA HIPAA School – an online training solution to achieve HIPAA and HITECH compliance. Visit ama.hipaaschool.com
- HIPAA Plain & Simple, second edition: A Health Care Professionals Guide to Achieve HIPAA and HITECH Compliance
- EHR Implementation: A Step-by-Step Guide for the Medical Practice
- Policies and Procedures for the Electronic Medical Office
- Tools for an Efficient Medical Practice



In addition to the 5010 HIPAA transactions, practices also need to be implementing the ICD-10 code set to meet the Oct. 1, 2013 compliance deadline. Visit www.ama-assn.org/go/ICD-10 to access various ICD-10 related resources.

IN MEMORIAM

GEORGE N. BATES, MD
6/24/1916 - 7/30/2010

BERNARD J. CULLEN, MD
11/3/1918 - 8/19/2010

RANIERI ROCCHI, MD
2/28/1931 - 8/1/2010



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Help Heal the Claims Process

This November, join physicians nationwide in the AMA's "Heal that Claim"™ month, part of an ongoing campaign to eliminate waste in the claims process. The "Heal the Claims Process"™ campaign calls on all participants in the health care claims process—physicians, their practice staff, and their billing partners; payers; employers; and patients—to do their part by committing to efficiencies and getting it right the first time. Be a part of the solution. Help heal the claims process by streamlining your claims process, reviewing and reconciling claims payments, and evaluating your practice management system to prepare for the approaching 5010 and ICD-10 mandated updates and use of electronic transactions. Get started by visiting the AMA's Practice Management Center at www.ama-assn.org/go/pmc for resources that can help.

COMMUNIQUE is published monthly. All contributing information is due by the first of each month. Send information via email to Joey Begeman @ joey.begeman@gmail.com. Questions? PHONE 419.471.3210 FAX 419.475.6744.

APPLICATIONS

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MATTHEW H. GREENSPAN, MD
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