

# DR. KNOW

We won't change the way you do billing...we'll change the way you do business!

An e-newsletter created by **PLEXUS HEALTH SOLUTIONS, INC.**

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**You can view past issues of this newsletter on our website.**

## E-Rx CHANGES *As of 1-1-10*

There has been a change in the reporting to Medicare for the use of electronic prescription software. The three codes you were using last year are no longer valid.

As of 1-1-10 there is only one code to use (G8553) and you only need to use it on 25 Medicare claims for the year.

We would suggest using it on all Medicare claims just to get used to it.

Be sure to update your encounter forms with this new code.

Be sure you are using an electronic program for this, faxing prescriptions to pharmacies does not count for this incentive money.

If you would like to begin using an e-Rx program give us a call and for only \$87.50 per provider per month we can get you set up. Plexus is waiving the start up fees.

This is an extra \$2000 a year in your pocket (sliding scale applies).

We have already updated our system to reflect this code change.

## CONSULTATION CODES *New Rule Effective 1-1-10*

As of this year Medicare will no longer pay you for any of the consultation codes – no matter what place of service you are using.

When another medical professional calls on your services for a patient, you must use the other E&M codes, if it is in your office or the applicable hospital/nursing home visit codes.

We have made those codes inactive in our system, so we will not be able to use them accidentally for Medicare.

## MAYO CLINIC OF AZ NO LONGER ACCEPTING MEDICARE

One of the primary care clinics owned and operated by Mayo Clinic in Arizona will stop accepting Medicare patients as of 1-1-10. They claim they are not paid enough to continue treating this patient base.

In 2008 the Mayo organization had 3,700 staff physicians and scientists and treated 526,000 patients. They

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*Mayo Clinic and Medicare*

lost \$840 million in 2008 on Medicare.

Mayo's hospital and four clinics in Arizona alone lost \$120 million on Medicare in 2008.

This news was on the heels of President Obama praising Mayo Clinic as a national model for efficient health care.

NEW EMPLOYEE

*As of 1-4-10*

Plexus has a new employee that began the first of the year. She is Sarah Bilotti. You can reach her at Ext.102 or her email address is [sarahb@plexushealthsolutions.com](mailto:sarahb@plexushealthsolutions.com).

She will be more than happy to help you with any of your questions or concerns. She also is fluent in Spanish.

We are in the process of cross-training her on all our applications and systems.

PECOS ENROLLMENT  
REQUIREMENT

*New Deadline Date*

CMS has pushed back the PECOS deadline for online enrollment. It is now April 5, 2010. If you have already done this – GREAT! If you have yet to do it, don't wait; this will disrupt the mailing of your Medicare payments.

This is a national push to obtain accurate records of physicians who have been on the Medicare roster for at least three years.

Many times physicians move their practice; change their name, incorporate, etc., and do not notify Medicare (or any other insurance carrier) of the change(s).

Also, if you refer out to other medical professionals or vice versa, this information must be updated with CMS by all of those physicians also, in order for you to obtain reimbursement.

MEDICARE PREMIUM/DEDUCTIBLE

*Update for 2010*

As of 1-1-10 the standard premium for Medicare Part B (physician) coverage will be \$110.50 per month.

The deductible has been raised to \$155 per year and the copay is still 20% of Medicare allowable.

Keep in mind that the premium is influenced by the beneficiary's income and can be substantially higher based on income. The exact premium amounts and relative income levels are on CR 6690 which is found on:

<http://www.cms.hhs.gov/transmittals/downloads/R61Gi.pdf>

Don't forget that there are premium penalties for Part B if you do not sign up for this part of Medicare during your initial enrollment period.

Part A (facility) deductible is \$1,100 and the copay varies by number of days in a given facility. The base premium for Part A is \$461 per month.

CONGRESS PROPOSES NEW  
PHYSICIAN PAYMENT SYSTEM

Since I have been in medical billing the method of calculating Medicare payments to physicians has changed a couple of times.

The first method I remember was paying by experience, the number of years you were a physician. The longer you were a doctor the more money you got paid. Then, by region of the country, where the service was performed.

Now, Congress is looking at a method that no one will be fond of, the never popular "capitation" method. They aren't calling it that – I am. Because this is what it reminds me of. The initial payment method of managed care systems.

This will again make primary care physicians (PCP) gatekeepers. PCP's will be responsible for paying all labs, x-rays and specialists. This is the Patient Protection and Affordable Care Act.

[http://dpc.senate.gov/dpcdoc-sen\\_health\\_care\\_bill.cfm](http://dpc.senate.gov/dpcdoc-sen_health_care_bill.cfm)