



Radiology Trends

Medical Billing and Management Services

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Did You Know?

GlaxoSmithKline was fined \$3 billion and plead guilty to two criminal charges in the largest U.S. healthcare fraud settlement. The charges were brought over safety, branding and pricing issues with several drugs including Paxil, Wellbutrin and Avandia.

CMS announced 89 new Medicare Accountable Care Organizations (ACOs) in 40 states and Washington, D.C. that began July 1st. There are now 154 ACOs serving more than 2.4 million beneficiaries. Nearly half of the participants are physician-led practices with less than 10,000 beneficiaries.

What's Next With Healthcare Reform?

The recent Supreme Court decision in support of the Affordable Care Act requires most individuals to carry health insurance or pay a tax for failure to do so, as of January 1, 2014. Insurers will no longer be able to discriminate based on pre-existing conditions or health status. Children may remain on their parents' coverage until age 26 and state and federal governments will offer health insurance exchanges.

The expansion of Medicaid program was ruled unconstitutional in that the federal government cannot withhold funding to states that do not expand Medicaid to include those with incomes up to 133% of the federal poverty level (FPL). The law does allow the federal government to withhold funding for the expansion but not existing programs. Under the Affordable Care Act the federal government will initially fund 100% of a

state's expansion to cover those with incomes 133% of the federal poverty level, while transitioning to 90% in 2020.

Some states may choose to expand only partially (120% to 125% of FPL), while others not at all. This could still leave a significant number of people uninsured.

CMS Proposed 2013 Fee Schedule

CMS has released its proposed Medicare Physician Fee Schedule (MPFS) for 2013. In order to maintain budget neutrality while giving primary care physicians a 7% in-

crease, other specialties, including radiology are facing more decreases.

Radiologists will see an overall decrease of 4% but radiation ther-

apy centers face a 19% decrease in payment. Radiation oncology can expect a 15% payment reduction, interventional radiology 3% and nuclear medicine 4%.

ICD-10 Corner

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Coding and Compliance Tips by Lori Shore, CPC, RCC

I have recently been working with one of our business partners who developed a program to compare reports for ICD-10 readiness. 80% of the over 2,000 reports reviewed were able to be coded in ICD-10 without any documentation changes. The remaining 20% required additional information such as laterality, site specification or information regarding the encounter.

Most of the reports requiring additional information were injury cases. Any type of trauma or fracture re-

quires the knowledge of whether the case is the initial visit, subsequent care or a sequala. Digits to indicate the intent of the injury are built into trauma codes.

There are intent digits for accidental, intentional harm, assault and undetermined. Undetermined intent, according to the ICD-10 guidelines, is only to be used when the documentation specifies that the intent cannot be determined.

External cause codes will also be required for initial trauma encounters. This is a series of codes to describe what

One advantage of ICD-10 is that multiple codes may now be represented by just one combination code. Some examples follow.

J44.0 — COPD with acute lower respiratory infection

J85.1 — Abscess of lung with pneumonia

K50.011 — Crohn's disease of small intestines with rectal bleeding

K57.21 — Diverticulitis of large intestine with perforation and abscess with bleeding

M32.12 — Pericarditis in systemic lupus erythematosus

Q07.03 — Arnold-Chiari syndrome with spina bifida and hydrocephalus

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