



National Government Services 2023 Fall Virtual Conference

Understanding Medicare Compliance for Part B Providers

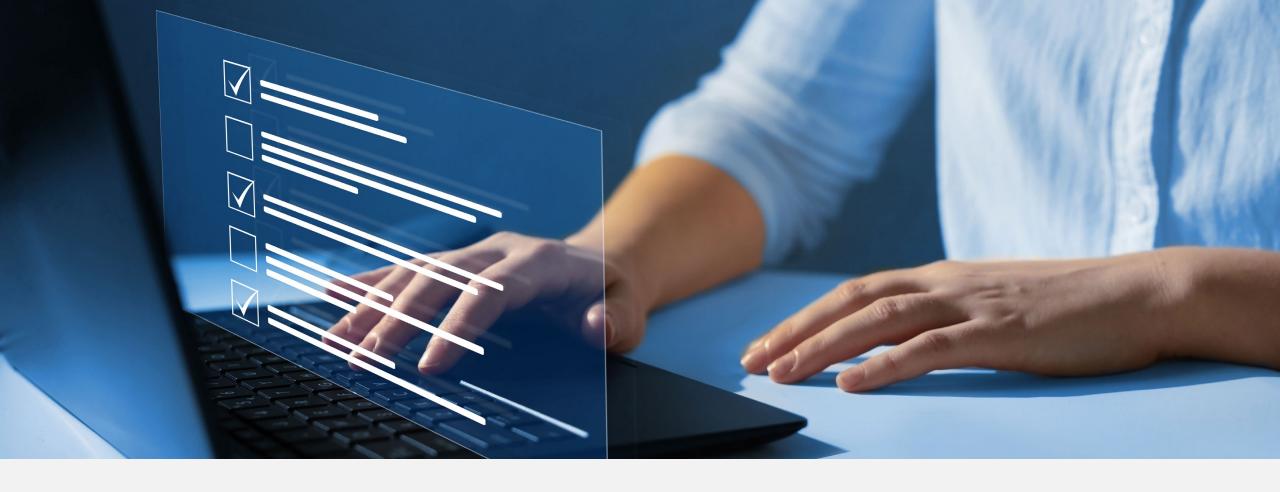
Medicare Compliance with the Incident To Provision

11/6/2023

Closed Captioning: Auto-generated closed captioning is enabled in this course and is at best 70-90% accurate. Words prone to error include specialized terminology, proper names and acronyms.





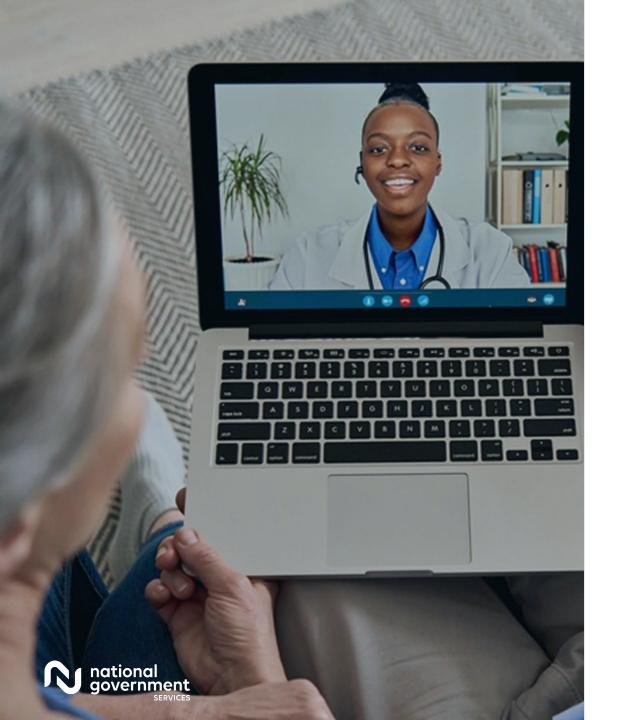


Disclaimer

National Government Services, Inc. has produced this material as an informational reference for providers furnishing services in our contract jurisdiction. National Government Services employees, agents, and staff make no representation, warranty, or guarantee that this compilation of Medicare information is error-free and will bear no responsibility or liability for the results or consequences of the use of this material. Although every reasonable effort has been made to assure the accuracy of the information within these pages at the time of publication, the Medicare Program is constantly changing, and it is the responsibility of each provider to remain abreast of the Medicare Program requirements. Any regulations, policies and/or guidelines cited in this publication are subject to change without further notice. Current Medicare regulations can be found on the CMS website.







Recording

Attendees/providers are never permitted to record (tape record or any other method) our educational events. This applies to webinars, teleconferences, live events and any other type of National Government Services educational events.

Objective

Today's objective is to provide you with an overview of the incident to policy for Medicare fee-for-service. You should walk away with a better understanding of the incident to regulations.

Today's Presenters

Provider Outreach and Education Consultants

 Nathan L. Kennedy, Jr., CHC, CPC, CPPM, CPC-I, CPB, CPMA

Christine Obergfell, CPC, CPCI, AAPC ICD 10
 Approved Instructor













Agenda

- The Basics Who, What, When, Where
- Supervision
- Documentation
- Billing
- You Make the Call







Incident To Who, What, When, Where

Simply Stated

- Incident To
 - One qualified individual rendering service that is billed by different qualified individual





What is Incident To?

 Incident to physician's professional services means that services are furnished as integral, although incidental, part of physician's personal professional services in course of diagnosis or treatment of injury or illness





What It Isn't

- Incident to is not
 - A visit by an established patient for new problem
 - Services which have their own coverage requirements and benefit category
 - Services provided by residents, medical students
 - Services of scribes
 - IPPE, also known as "Welcome to Medicare Preventive Visit"
 - \checkmark Goals of IPPE are health promotion and disease prevention and detection





When Service Provided?

- Physician has performed initial service
- Patient is established patient with established diagnosis
- Patient part of continuing plan of care
 - Physician will be ongoing and active
- Physician's service to which rendering providers' services relate
- Involve a face-to-face encounter
- Physician is physically present in same office suite to provide supervision





Where is Incident To Provided?

- Typically furnished in physician's offices
- NOT in a hospital setting or skilled nursing facility
- If furnished in setting outside the office, such as a home or an institution, there must be direct supervision by physician
- Phone contact with the physician does not constitute direct supervision





When is Reimbursement?

- To qualify for reimbursement, service must be
 - An integral part of physician's professional service
 - Commonly provided without charge or included in physician's bill
 - Commonly furnished in physician's office or clinic
 - Limited to situations in which there is direct physician supervision of auxiliary personnel
 - Without their own benefit category



Who Can Render?

- Qualified individuals
 - Have sufficient training to provide service
 - When appropriate, are licensed under state law to perform within the scope of practice for their individual disciplines
 - ✓ NP
 - ✓ PA
 - ✓ CNM
 - ✓ CNS
 - ✓ Auxiliary staff
 - e.g., medical assistants, licensed practical or vocational nurses, registered nurses



Supervision

Who Can Supervise?

- "Physician" defined as physician or other practitioner (PA, NP, CNS, CNM, etc.) authorized by the Act to receive payment for services incident to his or her own services
- Incident to criteria must be met in all cases
 - Supervising physician must be present in same office suite and immediately available during encounter to furnish assistance and direction when necessary





Supervision in Group Practices

- Not necessarily physician who performed initial patient visit
- Not necessarily patient's primary care physician
- Not necessarily of same specialty as primary physician
- Any physician in same group who is in clinic or office suite and is immediately available to furnish assistance or direction if needed





Documentation

How to Document

- Clearly stated reason for visit
- Means of relating this visit to initial service and/or ongoing service provided by physician
- Patient's progress, response to, and changes/revisions in plan of care
- Date service was provided
- Signature of person providing service
- Reference Signature Guidelines CR 6698 (2010)





How to Document

 While cosignature of supervising physician is not required, documentation should contain evidence that s/he was actively involved in care of patient and was present and available during visit





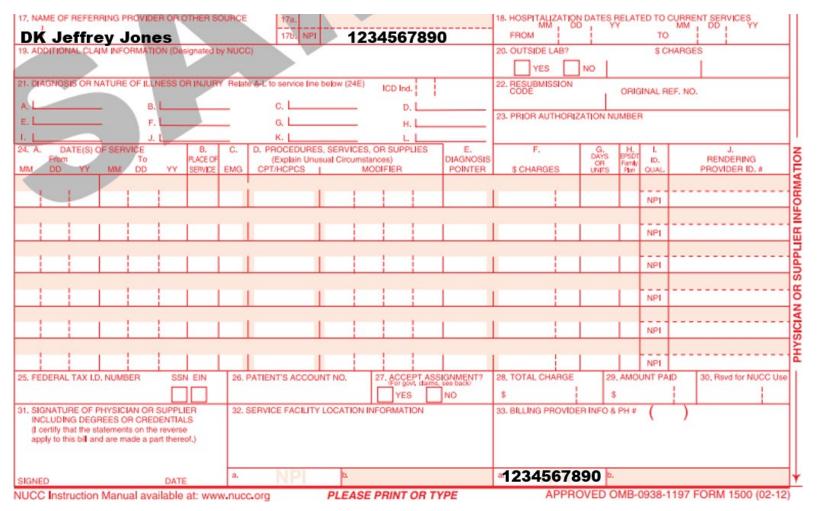


How to Bill

- Completing the CMS-1500 claims form or electronic equivalent
 - Medicare Part B CMS-1500 Crosswalk for 5010 Electronic Claims
- Sole Proprietor
 - Physician's name must be identified in Item 17 and NPI in 17b
 - Physician's billing information must be identified in Item 33 and NPI in Item 33a
- For more information on ordering and referring
 - MLN Matters® SE1305 Revised: Full Implementation of Edits on the Ordering/Referring Providers in Medicare Part B, DME, and Part A Home Health Agency (HHA) Claims (Change Requests 6417, 6421, 6696, and 6856)



Sole Proprietor







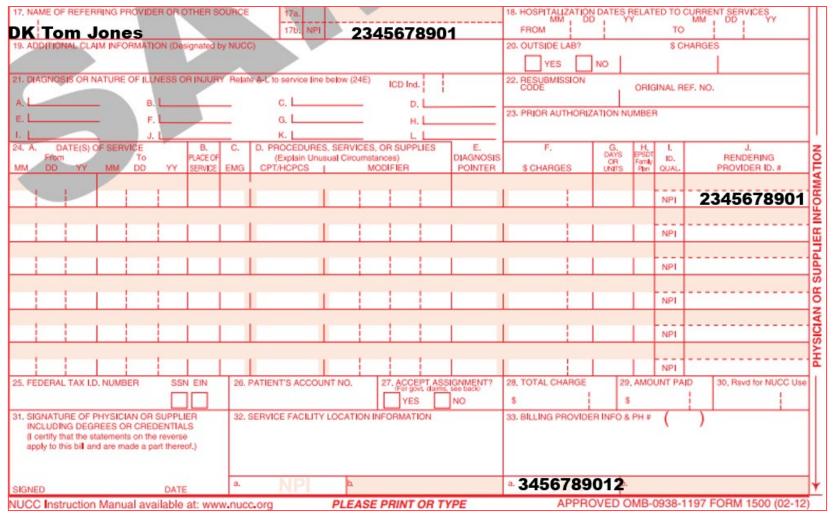
How to Bill

- Completing the CMS-1500 claims form or electronic equivalent
 - Medicare Part B CMS-1500 Crosswalk for 5010 Electronic Claims
- Incorporated/LLC/group/clinic
 - Ordering physician's name must be identified in Item 17 and NPI in 17b
 - Supervising physician's NPI must be in Item 24J
 - Billing entity information must be identified in Item 33 and NPI in Item 33a





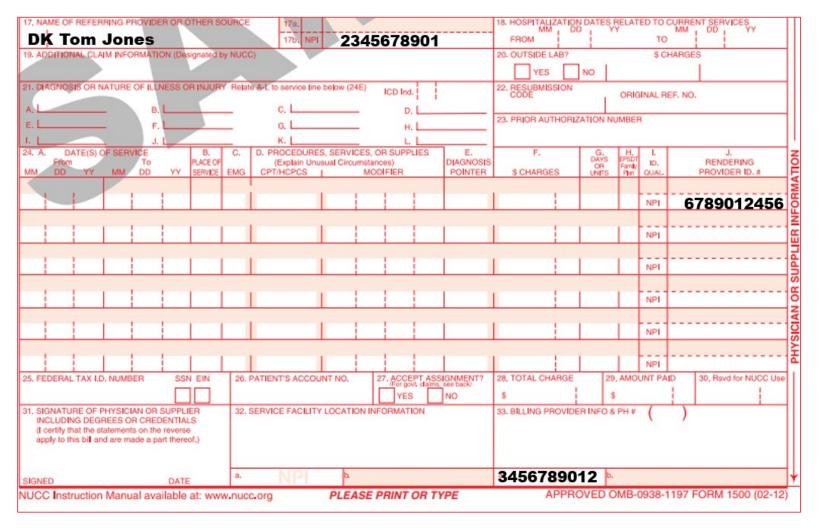
Same Physician/NPP Ordering/Supervising







Different Physician/NPP Ordering/Supervising







You Make the Call Interactive Scenarios

Physician is following a patient with recently diagnosed Type II diabetes

After examining the patient and making medication changes, he advises the patient to return for follow up in two weeks

The patient returns to office and is seen by the PA

The physician is present in the office suite, but does not personally see the patient

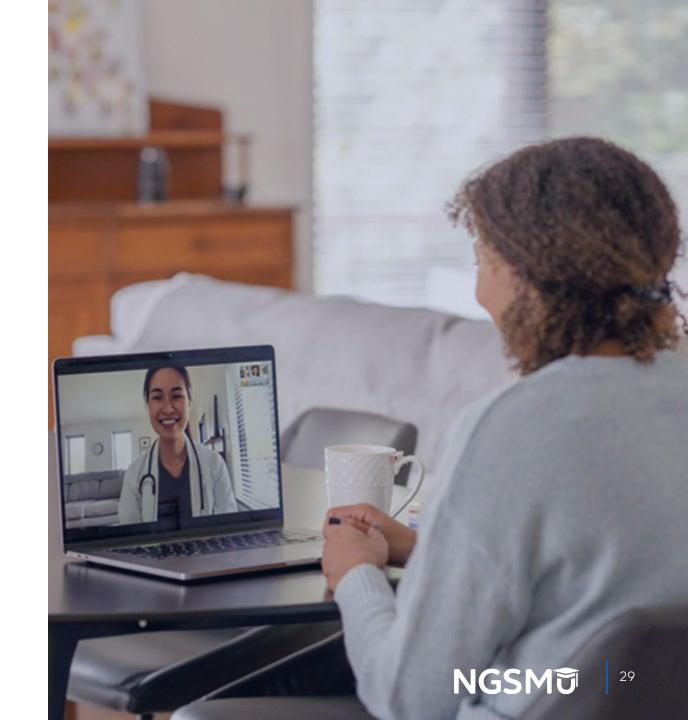






- A new patient presents to the office with complaints of a swollen, reddened and painful great toe joint
- The NP sees the patient, obtains a history, does an exam and consults with the physician by phone before ordering labs and prescribing medications

- Patient is seen by the physician for new diagnosis of CHF
- After evaluation and treatment, physician instructs the patient to return in one week for follow up labs and counseling
- The patient returns one week later and the RN obtains vitals and instructs the patient on diet and life style changes
- She confers with the physician, who is in the office, regarding lab results, but the physician does not personally see the patient







- NP makes a visit to the hospital in the morning to see a patient in a cardiac step-down unit for unstable angina, evaluating him for possible discharge the next day
- The physician is doing procedures in the cath lab but stops in the unit in the afternoon to review the chart
- He does not see the patient on this date of service





Resources

- MLN Matters® MM6698 Signature Guidelines for Medical Review Purposes
- MLN® Fact Sheet <u>Complying with Medicare Signature Requirements</u> <u>MLN 905364</u>
- Ordering & Certifying CMS web page
- CMS IOM Publication 100-02, Medicare Benefit Policy Manual, Chapter 15, Section 60





Questions?

Thank you! A follow-up email will be sent to attendees with the Medicare University Course Code.







Text NEWS to 37702; Text GAMES to 37702

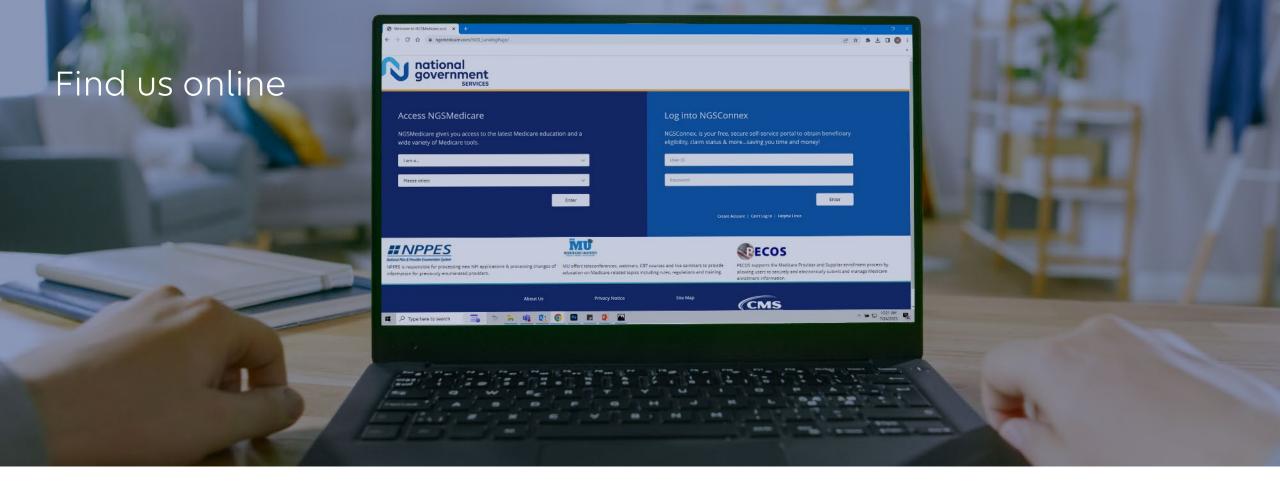


www.MedicareUniversity.com Self-paced online learning











www.NGSMedicare.com

Online resources, event calendar, LCD/NCD, and tools



IVR System

The interactive voice response system (IVR) is available 24-hours a day, seven days a week to answer general inquiries



NGSConnex

Web portal for claim information



Sign up for Email Updates

Subscribe for Email updates at the top of any NGSMedicare.com webpage to stay informed of news



