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## Monthly Report

### July 2009

#### From the President

Joseph P. Costabile, MD

My fellow colleagues,

With healthcare reform at the top of the government's agenda, it is vital that we, as practitioners, are engaged in the process. President Obama addressed the AMA House of Delegates on Monday June 15th and officers of the AMA have already met with him at the White House several times. They have expressed the wishes and ideas of the medical community regarding healthcare reform. It is up to us to inform our Senators and Congressmen as well and be engaged in the dialog. Now is the time to be proactive and have some input. It is as easy as an E-mail to your representatives.

The RAC (Recovery Audit Contractor) is coming to NJ. CMS has contracted with companies to review Medicare charges focusing on E & M codes. They are attempting to recuperate previous expenditures, due to incorrect billing and over charges. The contracted company will receive 20% of the collectibles. Therefore it is clearly in their interest to find as much overcharging due to incorrect coding or poor documentation. Please be aware of this situation and be careful. Don't get caught on the "rack." Have a healthy and happy 4th of July holiday and a pleasant summer.

#### From the Statehouse

Beverly J. Lynch

We're in the home stretch of the 213<sup>th</sup> New Jersey Legislative session, with just six months remaining before the session adjourns in early January, 2010. Over 7,500 bills have been introduced (and 211 signed into law).

The budget process is complete - and, as we go to print, the Governor has signed the FY 2010 \$28.9 billion budget (about \$4 billion less than last year).

The Legislature is now on its traditional summer hiatus, and the Senate will most likely return to business after Labor Day. This year, the 80-member Assembly is on the November ballot, and therefore, isn't expected to return to Trenton until the election is complete. We will then move into the "lame duck" session, 2 ½ month timeframe between the election and the swearing in of the new Legislature in January, 2010. This is traditionally a crazy, frenzied period where hundreds of bills are pushed through quickly. If a bill is not on the Governor's desk by the close of business on the second Monday of January, 2010 (January 11), it will be thrown out. So the rush will be on to advance legislation.

This year is the first time a Lieutenant Governor will be on the ballot with the gubernatorial candidates. Rumors are swirling about possible names for this new slot.

Important issues facing the New Jersey physician community include:

- Assignment of Benefits - legislation that would direct reimbursement to the physician who cared for the out-of-network patient.
- Chiropractic Scope of Practice - legislation which increases their ability to treat patients.
- PIP Fee Schedule - we're awaiting the Appellate Court decision on the implementation of the Department of Banking and Insurance regulations, that will guide our strategy.

For information on these or any legislative or regulatory activity, please don't hesitate to contact Beverly Lynch, at (609) 392-7553 or [BLYNCH@BLYNCHASSOCIATES.COM](mailto:BLYNCH@BLYNCHASSOCIATES.COM).

## Report from CAC

Clifford Sales, MD

At the June 10th Medicare Carrier Advisory Committee (CAC) meeting, it was stated that the auditing of physician billings in New Jersey is about to begin. It will NOT be performed by an outside third party--rather by the carrier itself. They intend to focus on the following areas:

1. Consultations (level of service)
2. 99238 and 99239 charges
3. Professional Component Fees --that is, the -26 modifier!!!! Specifically, they will be looking for a written report stating the results of the examination performed. They offered no further explanation. However, it is their belief that there are tests being performed that do not have a written report to document that the test was done. Previously, they have stated that it is acceptable for the result to be in the body of another document (i.e., the interpretation of an SFA angiogram dictated as part of the procedure note.)
4. Dates of Service and Physician order's for lab testing

**\*\*NEW DATE\*\***

**VSNJ Fall Dinner/Membership Meeting  
Thursday, October 29, 2009**

**Highlawn Pavilion, West Orange**

## Medicare Part B Updates

Medical Review Service Specific Widespread Reviews Evaluation and Management (E/M) services are and have been a leading driver nationally and locally relative to the claims error rate. In fact, for the part B business in Jurisdiction-12 (J12) approximately 1/3 of all services are E/M services while 2/3 of all dollars-in-error are from E/M services.

This data has prompted Medical Review to conduct service specific widespread reviews on evaluation and management services. The focus of a widespread review is on the procedure code, not any specific provider(s). Specifically, Medical Review will be conducting widespread

reviews on consultation services and subsequent inpatient hospital services provided in New Jersey.

<http://www.highmarkmedicare services.com/bulletins/partb/newsroom.html>

## Advanced Office and Outpatient Evaluation and Management (E/M) Workshop in VA, MD and NJ

Having a hard time determining which code to bill for your office and outpatient evaluation and management services? Join the Highmark Medicare Services Outreach and Education Team at a workshop on Advanced Office and Outpatient Services to learn the tools you need to code it right!

This workshop has been redesigned to address the specifics of billing and coding of New and Established Patient Visits, Incident To and Observation Services.

In this interactive three hour workshop, you will explore the Medicare rules regarding these services, review medical documentation, plus learn about the Comprehensive Error Rate Testing (CERT) program. CERT is how the Centers for Medicare and Medicaid Services (CMS) measures your coding and billing performance. The more you know about the program, the easier it will be to code it right! Register Today!

<http://www.highmarkmedicare services.com/calendar/partb/ws-em-adv.html>

## NJ Bill Encourages Doctors to Practice in Underserved Areas

New Jersey is one step closer to expanding a state program that helps repay the loans of new doctors who open primary-care medical practices in underserved areas. (The Star-Ledger)

[http://www.nj.com/politics/index.ssf/2009/06/trenton\\_new\\_jersey\\_is.html](http://www.nj.com/politics/index.ssf/2009/06/trenton_new_jersey_is.html)

## Governor Corzine Files Plan to Facilitate Third Allopathic Medical School in New Jersey

With the state facing a chronic shortage of doctors and schools at which to train them, Governor Jon S. Corzine today announced the filing of an executive reorganization plan that will facilitate construction of a third four-year allopathic medical school in New Jersey.

The medical school will be part of Rowan University in affiliation with Cooper University Hospital and will be located in Camden on the Health Care Campus of Cooper University Hospital. To allow Rowan to move forward with the creation of the new, four-year medical school, the reorganization plan will transfer from the University of Medicine and Dentistry of New Jersey to Rowan University certain functions and resources now used by UMDNJ's Robert Wood Johnson Medical School-Camden for its third- and fourth-year medical school related programs. The plan, which was submitted to the Legislature, provides a transition period to allow for an orderly transfer and ensure proper allocation of resources.

The new four-year school would build on the existing Robert Wood Johnson Medical School, which has been located in Camden since 1981. Three hundred Cooper physicians comprise the clinical faculty at RWJMS and provide training for third- and fourth-year medical students. Those Cooper physicians would become faculty of the new school. A dean and basic sciences faculty would be recruited while Rowan University applied for formal accreditation by the Liaison Committee on Medical Education.

Existing resources and annual level of funding to RWJMS-Camden are sufficient to fully fund the four-year medical school, when the inclusion of tuition from additional students and research grants and contracts are taken into account. The plan provides for teaching to continue by RWJMS-Camden medical students in Camden until 2013.

The Legislature, which first appropriated funds toward this project in 2002, has sixty days to review the plan. It will become effective at the end of that period, unless the Legislature votes to disapprove the plan.