

Socioeconomic tips

A potpourri of items

by the Division of Advocacy and Health Policy

This month's column highlights a number of policy changes that affect surgeons and their staffs, including: an updated Medicare ambulatory surgical center (ASC) list; authorization to release protected health information from a patient using an interpreter; a recent change in Aetna's unbundling rules; and changes in Medicare's appeals process.

Changes to ASC list

Medicare released a new list of procedures that may be done in an ASC. It is effective for dates of service on or after July 5, 2005. The new list contains 65 additions and five deletions. A complete list of changes, including the amount the facility gets paid for the codes that have been added, is available on the College's Web site at www.facs.org. No changes have been made to the facility payment amounts.

The Centers for Medicare & Medicaid Services (CMS) said they received a number of requests for inclusion of laparoscopic cholecystectomies on the list. However, they did not add them because of the risk that the laparoscopic procedure would have to be converted to an open procedure, necessitating a transfer to the hospital for the open procedure.

According to CMS, the deletion of the five codes will not pose a problem of access to care for beneficiaries. Three of the deleted codes are performed 50 percent or more of the time in physicians' offices. They are code 21440, *Closed treatment of mandibular or maxillary alveolar ridge fracture (separate procedure)*; code 23600, *Closed treatment of proximal humeral (surgical or anatomical neck) fracture; without manipulation*; and code 23620, *Closed treatment of greater humeral tuberosity fracture; without manipulation*. The resources required to perform code 53850, *Transurethral destruction of prostate tissue; by microwave thermotherapy*, are greater than the highest payment to the facility. Finally, code 69725, *Decompression facial nerve, intratemporal; including medial to geniculate ganglion*, is always performed as an in-

Around the corner

July

- Quarterly update to 2004 Medicare fee schedule effective July 1.
- Quarterly update to 2004 Correct Coding Edits effective July 1.
- Paper national provider identifier applications may be submitted effective July 1.
- Revised Medicare ASC list effective for dates of service on or after July 5.
- Economedix will hold a teleconference July 13 on Creating an Effective OSHA Compliance Program. For more information and to register, go to <http://yourmedpractice.com/ACS>.
- ACS-sponsored basic and advanced coding workshops for surgeons and their office staff July 14 and 15 in Chicago, IL. To register, visit the ACS coding workshop Web page at <http://www.facs.org/ahp/workshops/index.html>.

August

Economedix will hold two teleconferences this month. The first, on August 10, will be Physician Compensation Formulas of Successful Practices. The second, on August 24, is on Effective Personnel Management...Hiring, Evaluations, and Terminations. For more information and to register, go to <http://yourmedpractice.com/ACS>.

patient procedure. For more information, go to <http://www.cms.hhs.gov/media/press/release.asp?Counter=1438>.

Authorization for interpreters

Surgeons who receive federal funds, such as Medicare or Medicaid reimbursement, must use an interpreter when dealing with a patient who speaks a foreign language or has a hearing impairment. Interpreters, in the course of fulfilling their responsibilities, are likely to receive health infor-

mation that is protected by the Health Insurance Portability and Accountability Act (HIPAA) privacy rule. Recently, the U.S. Department of Health and Human Services (HHS) issued a clarification stating that authorization is waived in the following circumstances:

- The interpreters are members of the physician's workforce either as employees, contractors, or volunteers. They already are covered by the privacy rule.

- The interpreter's employer is a business associate of the practice. Many practices have contractual arrangements with private commercial companies or community-based organizations that should satisfy the business associate agreement requirement of the privacy rule.

- The interpreter is a family member or friend of the patient. The practice may either get the patient's authorization or reasonably infer, based on professional judgment, that the patient agrees to the disclosure of protected health information to the interpreter.

- The physician's office contacts a telephone interpreter service. The interpreter explains to the patient that he or she is available to help the patient communicate with the physician and others in the practice. If the patient accepts the interpreter's help, the practice may conclude, based on professional judgment, that the patient is amenable to the disclosure of protected health information and may proceed without having a signed business associate agreement. For more information, go to <http://www.hhs.gov/ocr/hipaa>.

Aetna's unbundling rules

Effective June 15, Aetna began allowing payment for both CPT code 76872, *Echography, transrectal*, and code 76942, *Ultrasonic guidance for needle placement (eg, biopsy, aspiration, injection, localization device), imaging supervision and interpretation*, if both are performed at the same time by the same physician.

Medicare's appeals process

Legislation passed in 2000 and 2003 made sweeping changes to the Medicare appeals process. The biggest changes are uniform appeals procedures for both Part A and Part B claims; establishment of reduced decision-making time frames; the establishment of qualified independent contractors,

a new entity, to process second-level appeals or reconsiderations; and the transfer of administrative law judges, who hear the third level of appeal, from the Social Security Administration to HHS. All fiscal intermediary initial determinations made on or after May 1 are subject to the new appeals procedures. Carrier initial determinations made on or after January 1, 2006, are subject to the new rules. Complete details will appear in the *Bulletin* later in the year. □