



May 2021

TELEHEALTH VISITS

Many of our providers have adopted a hybrid practice where patients are sometimes seen in the office and sometimes seen virtually. Please make sure to clearly mark how the visit is performed so we don't bill without the appropriate modifier or location code. Medicare notes that they have paid some claims incorrectly. The link below is a learning tool for providers.

<https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/TelehealthSrvcsfctsh.pdf>

LOW UTILIZATION FOR MEDICARE DEPRESSION SCREENING

Up to 20% of people over 65 suffer from depression, and an estimated 25% of older Americans with a severe illness also suffer from depression. Medicare/WPS wants providers to utilize the Annual depression screening benefit to help patients obtain diagnosis and appropriate treatment. Please go to the link on the Michigan State Medical Society website to learn how to perform, document, and bill for this underutilized Medicare benefit.

<https://www.msms.org/About-MSMS/News-Media/wps-depression-screening-benefit-awareness>

SEQUESTRATION SUSPENDED THROUGH 2021

The 2% payment adjustment (sequestration) has been suspended through December 2021. The CARES Act originally suspended the sequestration payment adjustment of 2% that was applied to all Medicare Fee for Service claims from May 1 through December 31, 2020. The Consolidated Appropriations Act, 2021 now extends the suspension period to December 31 2021. Claims received for services after April 1, 2021 have been released. There should be no interruptions in payments.

MODIFIER 24

This modifier is used when billing for an E & M code during a global period for a procedure. The visit must be an problem unrelated to the procedure. Please make sure that your documentation supports that the service was unrelated and solely for the treatment of a new problem or underlying condition.

And remember, we're here to help you. Don't hesitate to call at any time for any reason.