

October 21, 2008

Acting Administrator
Centers for Medicare and Medicaid Services
Department of Health and Human Services
Room 445-G, Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

Dear Mr. Weems:

The undersigned medical societies and organizations request that the Centers for Medicare and Medicaid Services (CMS) instruct all contractors, including Recovery Audit Contractors (RACs), to refrain from conducting any audits of visits that are billed as consultations (CPT codes 99241 - 99255).

Significant and ongoing concerns over CMS' consultations policy published December 2005 (Transmittal #788) make contractor audits, which are designed to identify improper billing, problematic at this time. These concerns were outlined in a letter signed by 51 medical societies and organizations sent to CMS on October 23, 2006. If CMS permits contractors to audit consultations at this time, audit results would only serve to underscore the widespread confusion among physicians about the Agency's consultations policy.

Many physicians feel that the portion of the policy involving "Consultation Followed by Treatment" (Section 30.60.10 B) involving "transfer of care" is inconsistent with the way medicine is practiced. The application of this policy to the inpatient setting is especially misunderstood. Until physicians are clear about how consultations involving "transfers of care" should be billed, they should not be audited on these services.

It has come to our attention that at least one Medicare contractor currently is informing providers that if the intent of the referral is for the consultant to assume management of the care of the patient for the condition that necessitated the consultation then the initial service could not be billed as a consultation; instead, it should be billed as a new patient or established patient office visit. This same contractor also has informed providers that prepayment reviews of consultation services will begin shortly.

The provider community is committed to correct billing, and over the years has devoted significant time and effort to understanding Medicare requirements and complying with them. Medicare contractors have made efforts to educate providers about correct coding and billing, but at times there is no consistency about the interpretation and implementation of the rules. Such is the case for Medicare's consultations policy.

It is not reasonable to allow prepayment reviews to begin at a time when providers are struggling to understand Medicare's consultations rules and apply them properly. All stakeholders will benefit by allowing extra time for CPT review, Agency clarification, and provider education. We are committed to an ongoing dialogue with CMS on the concerns involving billing consultations.

Sincerely,

American Academy of Child and Adolescent Psychiatry
American Academy of Dermatology Association
American Academy of Family Physicians
American Academy of Hospice and Palliative Medicine
American Academy of Neurology Professional Association
American Academy of Ophthalmology
American Academy of Neurology Professional Association
American Academy of Otolaryngology—Head and Neck Surgery
American Association of Clinical Urologists
American Association of Neurological Surgeons
American Association of Orthopaedic Surgeons
American College of Cardiology
American College of Gastroenterology
American College of Obstetricians and Gynecologists
American College of Osteopathic Internists
American College of Osteopathic Surgeons
American College of Physicians
American College of Radiation Oncology
American College of Rheumatology
American Gastroenterological Association
American Geriatrics Society
American Medical Association
American Osteopathic Academy of Orthopedics
American Osteopathic Association
American Psychiatric Association
American Society for Gastrointestinal Endoscopy
American Society of Cataract and Refractive Surgery
American Society of Clinical Oncology
American Society of Hematology
American Society of Nephrology
American Society of Pediatric Nephrology
American Society of Plastic Surgeons
American Thoracic Society
American Urological Association
Association of American Medical Colleges
Congress of Neurological Surgeons
Heart Rhythm Society
Infectious Diseases Society of America

International Spine Intervention Society
Joint Council of Allergy, Asthma and Immunology
Medical Group Management Association
Renal Physicians Association
Society for Cardiovascular Angiography and Interventions
Society of Hospital Medicine
The Endocrine Society

cc:

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