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## 061810 NEWS BLAST

### **SENATE PASSES DOC FIX – PENDING HOUSE APPROVAL SHOULD BE DETERMINED THE FIRST OF NEXT WEEK (Carrier's did release claims they were holding which will be processed with the cut)**

The Senate is using the old House-passed health care reform bill (**H. R. 3962**) as the vehicle for the doc fix.

The Senate, by unanimous consent, today approved a six month extension of the **so-called Medicare "doc fix."** The provision would be offset through the pension provisions that mirror those contained in the extenders bill originally passed by the Senate and in the Republican substitute amendment proposed by Sen. John Thune (R-SD). View the text of the measure approved by the Senate at:

<http://www.medtronsoftware.com/pdf/2010/MDG10394.pdf>.

The bill now goes to the House for its consideration.

This fix IMPACTS -Medicare allowables for dates of service: 06012010-11302010  
House Bill HR3962 ~ *should* pass first of next week to protect us!

*Updated info @ 3pm today:*

*According to a source at the OK MC carrier's office, claims for dos 06012010 forward are being released today and processed at the 21.3% reduction.....same source says she's not real optimistic that the House will pass the short term fix ~ guess we'll find out early next week!!*

#### **From another source:**

CMS is expected to begin processing claims today with a 21 percent payment reduction to physicians. HOWEVER- The Senate passed this afternoon a 6-month fix that includes a 2.2% increase,(from the 2009 fee schedule impacted by the RVU for PE adjustment rolled out 05102010-see below in **green**) but the House will not be able to act until Monday at the earliest. According to our House sources, the House will likely pass the Senate's version next week. If my calculations are correct new CF: 36.8728402

Once signed into law, likely next week, CMS will restore the payment reductions (produced if carriers did process the claims they were holding for dos 06012010-06182010 at the 21.3% cut) and include the 2.2% increase.

Unfortunately, the other provisions important to providers in the "extenders" bill, i.e. the FMAP and COBRA extensions and all other Medicare provisions were stripped out of the physician payment bill and it is unclear when Congress will take them up again. **It could be weeks.**

Visit [this website](http://www.strategichealthcare.net) for the latest news [www.strategichealthcare.net](http://www.strategichealthcare.net).

#### **CY 2010 Physician Fee Schedule Update**

...Therefore, for services provided from January 1, 2010 through May 31, 2010, the PFS update remains at zero.

Finally, we note that on **May 10, 2010**, revised payment files for physician claims were released to Medicare Contractors. These revised payment files incorporate changes to payments as a result of the CY 2010 correction notice (on display at the Federal Register on May 5, 2010) and changes resulting from the Patient Protection and Affordable Health Care Act. These changes also result in a change to the conversion factor for claims provided from January 1, 2010 through May 31, 2010. The **resulting conversion factor applicable to services provided during this time period is \$36.0791.**

Instructions regarding the reprocessing of claims paid prior to the implementation of these revised files will be forthcoming. Please watch your listserv and contractor's website for more information.

The conversion factor for CY 2010 is \$36.0846.

[http://www.cms.gov/PhysicianFeeSched/01\\_Overview.asp#TopOfPage](http://www.cms.gov/PhysicianFeeSched/01_Overview.asp#TopOfPage)