



HHS Issues Advisory Opinion on the “Company Model”

ASA was pleased to see that the Department of Health and Human Services Office of Inspector General (HHS-OIG) issued an Advisory Opinion (No. 12-06) on a “company model” arrangement and expressed the view that it could violate the federal anti-kickback statute. ASA has repeatedly brought this issue to the attention of the HHS-OIG and in February of this year sent formal communication to Inspector General Levinson outlining ASA’s concerns with the “company model”. [Read More](#)

Fee-For-Service Is Here to Stay for Now, Says Health Policy Expert

The U.S. health care system will continue to rely on a fee-for-service payment model for at least the next eight to 10 years, making it incumbent on policymakers to work on fixing flaws in the system for the short term. [Read More](#)

Medicare Medical Records: Signature Requirements, Acceptable and Unacceptable Practices

CMS guidelines mandate the presence of signatures for ‘medical review’ purposes. However, records pertaining to any procedures billed to Medicare are potentially subject to review by not only Palmetto GBA, but other CMS contractors. Because of this, we are alerting you to the importance of these signature requirements and if changes are needed, we suggest you take immediate action. [Read More](#)

MEDPAC’s Recommendation to Congress

The Congress should direct the Secretary of Health and Human Services to reduce payment rates for evaluation and management office visits provided in hospital outpatient departments so that total payment rates for these visits are the same whether the service is provided in an outpatient department or a physician office. These changes should be phased in over three years. During the phase-in, payment reductions to hospitals with a disproportionate share patient percentage at or above the median should be limited to 2 percent of overall Medicare payments. [Read More](#)

(Pg. 74, Recommendation 3-2)

CMS Proposes Payment Increases for Hospitals

The Centers for Medicare & Medicaid Services is proposing a 2.3 percent increase in payment rates to acute care hospitals in FY13 and said it expects total Medicare spending on inpatient hospital services to increase by \$175 million. [Read More](#)

HHS Launches Web-Based Performance Tool

The Department of Health and Human Services unveiled a new web-based tool, the Health System Measurement Project, which is designed to make it easier for the public to track healthcare performance indicators. [Read More](#)

CMS releasing Comparative Billing Reports to providers

The Centers for Medicare and Medicaid Services (CMS) has announced three new reports comparing select providers with their peers. [Read More](#)

Compliance Corner – Supervision vs Medical Direction

The words "supervision" and "medical direction" have very distinct meanings:

- **Supervision** refers to an anesthesiologist who is involved in more than four concurrent procedures in which one or more CRNAs, AAs or medical residents or interns are involved.
- **Medical direction** refers to an anesthesiologist's involvement with a CRNA or AA in one, two, three or four concurrent procedures where the anesthesiologist is physically present.

If the physician leaves the immediate area of the operating suite for other than short durations, or devotes extensive time to an emergency case, or is otherwise not available to respond to the immediate needs of the surgical patients, the physician's services are considered supervisory. An anesthesiologist may not be involved in both medical direction and medical supervision at

the same time. [Read More](#)
(Pg. 120, Section 50 C-Payment for Anesthesiology Services)

D. Payment at Medically Supervised Rate

The Part B Contractor may allow only three base units per procedure when the anesthesiologist is involved in furnishing more than four procedures concurrently or is performing other services while directing the concurrent procedures. An additional time unit may be recognized if the physician can document he or she was present at induction.