



Part B Insider (Multispecialty) Coding Alert

Physician Notes: ACOs Saved Medicare \$317 Million in Two Year Study

Plus: Your MAC doesn't want a preauthorization request.

You may be aware of the fact that the government wants to tie more Medicare payments to alternative payment models, but it's possible that you don't know why. A new report indicates that it's all about the money.

CMS hopes to pay for quality—not quantity—of care in the future, which means many of the payments could take place through accountable care organizations (ACOs). The Journal of the American Medical Association recently reported that participants in the Pioneer ACO program saved \$212 million in 2012 and \$105 million in 2013. When using ACOs, practitioners can get incentives for any money that they save the government over traditional Medicare payment models.

Resource: To read more about the Pioneer ACO program, visit <http://innovation.cms.gov/initiatives/Pioneer-aco-model>.

In other news...

You'd probably feel better about submitting your claims if your MAC first gave you pre-authorization for your services, but this is probably not a feasible route. In fact, Part B MAC National Government Services recently sent out a news blast reminding practices to stop requesting preauthorizations.

"National Government Services has seen an increase in calls to our provider contact center, asking if Medicare preauthorizes coverage for provided items and services," the email said. "As a reminder, Medicare does not preauthorize coverage for items or services that will receive payment under Part A or Part B, except for custom wheelchairs."

Resource: For more on Medicare authorizations, visit www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/SE0916.pdf.
