## UMeNewsletter



January 7, 2012

## CMS coverage for Morbid Obesity effective 2012

CMS has published guidelines for coverage of morbid obesity for providers. Intensive behavioral therapy for obesity consists of the following:

- 1. Screening for obesity in adults using measurement of BMI calculated by dividing weight in kilograms by the square of height in meters (expressed in kg/m<sup>2</sup>);
- 2. Dietary (nutritional) assessment; and
- 3. Intensive behavioral counseling and behavioral therapy to promote sustained weight loss through high intensity interventions on diet and exercise.

The intensive behavioral intervention for obesity should be consistent with the 5-A framework that has been highlighted by the USPSTF:

- 1. **Assess**: Ask about/assess behavioral health risk(s) and factors affecting choice of behavior change goals/methods.
- 2. **Advise**: Give clear, specific, and personalized behavior change advice, including information about personal health harms and benefits.
- 3. **Agree**: Collaboratively select appropriate treatment goals and methods based on the patient's interest in and willingness to change the behavior.
- 4. **Assist**: Using behavior change techniques (self-help and/or counseling), aid the patient in achieving agreed-upon goals by acquiring the skills, confidence, and social/environmental supports for behavior change, supplemented with adjunctive medical treatments when appropriate.
- 5. **Arrange**: Schedule follow-up contacts (in person or by telephone) to provide ongoing assistance/support and to adjust the treatment plan as needed, including referral to more intensive or specialized treatment.

For Medicare beneficiaries with obesity, who are competent and alert at the time that counseling is provided and whose counseling is furnished by a qualified primary care physician or other primary care practitioner and in a primary care setting, CMS covers:

- One face-to-face visit every week for the first month;
- One face-to-face visit every other week for months 2-6;
- One face-to-face visit every month for months 7-12, if the beneficiary meets the 3kg weight loss requirement as discussed below.

Source: <a href="http://www.cms.gov/medicare-coverage-database/details/nca-decision-memo.aspx?&NcaName=Intensive%20Behavioral%20Therapy%20for%20Obesity&bc=ACAAAA">http://www.cms.gov/medicare-coverage-database/details/nca-decision-</a> memo.aspx?&NcaName=Intensive%20Behavioral%20Therapy%20for%20Obesity&bc=ACAAAA</a> AAIAAA&NCAId=253

## ICD-10 is Coming! Find the information you need!

The International Classification of Diseases, Tenth Revision (ICD-10) Implementation is coming quickly. To help you locate information on this transition, Highmark Medicare Services has developed a dedicated webpage. The page contains links to the Centers for Medicare & Medicaid Services (CMS) dedicated ICD-10 website. Highmark Medicare Services will be adding more information on this important implementation in the future. Don't miss out! Bookmark the <u>ICD-10 webpage</u> today! https://www.highmarkmedicareservices.com/claims/coding/icd10/index.html

Source : MSD

## **Tips for Modifier 25**

The AMA's Practice Management Center has recorded a brief, instructive webinar, "<u>Definitions and use</u> of <u>Modifier 25</u>," to help you correctly and confidently record the performance of procedures and services. AMA experts Marie Mindeman, of CPT Coding and Regulatory Affairs, and Danielle Pavloski, of CPT Education and Information Services, walk you through the proper and improper uses of Modifier 25. The approximately 20-minute webinar includes a checklist to evaluate the appropriate use of the modifier, as well as answers to the most common questions about this important topic. You can reach the recorded webinar from the links.

https://cc.readytalk.com/cc/playback/Playback.do?id=68732i

Source: MSD

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