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What's new in INCISIVE MD?

This is the second quarter release to extend Medicare contract term, add the second quarter (Q1) 2012 National CCI edits, update Illinois Workers' Compensation contract term for revised PPI table, and add a new 2012 contract term for Oregon Workers' Compensation contract.

Who should read these release notes?*If you are an INCISIVE MD user ...*

Read this entire document for revised features included in this update.

If you are the clinic technical contact ...

No action is required to update the software if users have administrative privileges to update the \Program Files directory. The INCISIVE MD application will auto-detect and install the update when the user attempts to log into the application following the release of the update to your clinic. For clinics using terminal services, please contact INCISIVE Support for instructions on manually updating users' profiles.

Medicare 2012 Contract Term Change

On February 17, 2012, Congress approved the Middle Class Tax Relief and Job Creation Act of 2012 to extend the 2012 Medicare conversion factor of \$34.0376 until the end of 2012. Accordingly, we have updated the current Medicare contract term end date to 12/31/2012.

National Correct Coding Initiative (CCI) Version 18.1 Update

At the time of writing these release notes, Version 18.1 of the CCI edits were not posted to the Centers for Medicare and Medicaid Services (CMS) website. The quarterly edits are posted to the website after the effective date, in this case 1 April 2012. However, the Frank Cohen Group has release an analysis of Version 18.1 and have reported that there are with 358 new edit pairs, 23 terminated pairs and 13 changes in the modifier indicator column. For new edit pairs, 90% of the edit pairs are related to surgical procedures (CPT 10000 through 60000).

Once Version 18.1 is posted to the CMS website, we will add this version of the CCI edits to INCISIVE MD. Users do not need to take any action for the new edits to be available within to the application.

Illinois Workers' Compensation 2012 Contract Term Change

With the release of INCISIVE MD 3.7 at the beginning of this year, we included a new contract term for the Illinois Workers' Compensation contract for 2012 that implemented the key provisions of Public Act 97-18. At that time the Illinois Workers' Compensation (ILWC) had not published a revised payment policy indicators (PPI) table to manage when Modifiers 50, 51, 62, 66, AS/80, 81 and 82 can be used. Given this lack of information, we elected to use the Medicare table in the interim. On 2 February 2012,

the Commission released the updated PPI file. INCISIVE Support will be updating customers 2012 Illinois Workers' Compensation contract term to use this PPI file.

Oregon Workers Compensation 2012 Contract Update

With the continued move away from an RVU-based medical fee schedule, the 2012 Oregon Workers' Compensation (ORWC) contract term is now a fee-based schedule. No changes to the PPI or other administrative rules were made with the contract term update. See the table below provides pricing information for frequently billed orthopedic spine procedures and a three level office visit.

Key Oregon Workers Compensation Spine Procedure 2012 Prices

CPT	Medicare Description	2012 Oregon Medicare	2011 Oregon Workers Comp	2011 Oregon Workers Comp	Percent Price Change	Medicare Multiplier
22612	Lumbar spine fusion	\$1,502.52	\$3,715.80	\$3,751.22	1.0%	2.47
22614	Spine fusion extra segment	\$369.48	\$963.73	\$967.05	0.3%	2.60
22633	Lumbar spine fusion combined	\$1,863.90		\$4,359.44		2.24
63030	Laminotomy	\$910.12	\$2,241.98	\$2,277.64	1.6%	2.46
63047	Lateral Recess Laminectomy	\$1,037.08	\$2,552.88	\$2,594.49	1.6%	2.46
99213	3 Level Office Visit	\$68.23	\$138.79	\$140.51	1.2%	2.03

Negative Expected Amounts for Washington Labor & Industry 2012 contract term Corrected

We have corrected an issue with the application where the multiple endoscopic reduction rules for the Washington Labor and Industry (L&I) 2012 contract term showed a negative contractual expected amount when these special payer rules were applied. The application will now show these contractual expected amounts as \$0.00 instead of a negative amount.

The Washington L&I Commission implemented similar multiple endoscopic reduction rules as Medicare. When similar endoscope procedures (CPT 298XX) are done in the same surgical session, the primary procedure of the group is paid at the full amount and the other similar endoscopic procedures are paid by deducting the price of the primary from the similar procedure's price. In most cases, this results in a negative number. So the application corrects this to just show \$0.00.

Meniscectomy

With the 2012 AMA CPT Codebook editorial changes to the meniscectomy procedure (CPT 29880), a chondroplasty (CPT 29877) is now bundled into this procedure. Therefore, for dates of service in 2012, INCISIVE MD shows CPT 29877/G0289 as bundled into CPT 29877 and lists the contractual expected amount as \$0.00. In an odd situation, when users coded a right lateral and medial meniscectomy along with right

lateral and medial chondroplasty for surgical cases where the selected contract used the Medicare endoscopic reduction rules the application would apply the rules to the chondroplasty when it should not have done so because of the bundling. However, because the Chondroplasty is included in the list of procedures for the case, the application was also reducing CPT 29880 by \$400 for the multiple endoscopic reduction rules. This situation is now corrected and INCISIVE MD will show the Chondroplasty with a zero contractual expected amount.

How do I contact INCISIVE Support?

During normal business hours, 8:00 am to 5:00 pm Pacific Time, you may contact technical support at (503) 546-5323 or by email at support@crosscurrentinc.com. Our INCISIVE MD Support website also offers resources to help answer basic questions about the software