January 2008

Contents

What's new in INCISIVE MD?

This document describes the updated functionality in INCISIVE MD Release 2.0.11. All customers will have access to this new functionality. After completing the update, no action on your part is needed to have these changes available to you.

Who should read these release notes?

If you are clinic technical contact …

You should refer to the CrossCurrent Technical Support Knowledgebase article "How do I use INCISIVE Web Update" for information on how to update INCISIVE MD software.

If you are an INCISIVE desktop software user …

Read this entire document for an overview of new features included in this release of the software.

Medicare 2008 Physician Fee Schedule Update

The Medicare 2008 Physician Fee Schedule released on 1 November 2007 and available on the Centers for Medicare & Medicaid Services (CMS) website on 20 December 2007 is included this update.

As part of the end of year Continuing Resolutions, Congress passed a temporary conversion factor rate of $38.0870 for the next 6 months. Without this, the Omnibus Budget Reconciliation Act of 1989 required a 10.1% reduction in the conversion factor (from $37.8975 in 2007 to $34.0682 for 2008). In addition, the Budget Neutrality factor was adjusted downward 1% (from 0.8994 in 2007 to 0.8806 in 2008) which changes the overall Work RVU value.

AMA CPT 2008 Code Updates

The AMA® CPT® 2008 addition, deletion, and revision changes are incorporated into this release. Customers interested in viewing a list of these changes related to orthopedic coding may view a summary document that is available on our Support website. This document outlines the revisions and discusses the two significant changes related to orthopedic coding:

- Revision of orthopedic codes from Modifier -51 exempt to add-on codes
- The removal of "with or without internal/external fixation" and the addition of "includes internal fixation when performed" to CPT descriptions

National Correct Coding Initiative (CCI) Updates

This update includes both the CCI 13.4 and 14.0 updates. For the First Quarter 2008 revision (verison 14.0), over 300 new coding edits related to orthopedic codes were added by CMS. Customers interested in viewing a list of these CCI edits may view a summary document, which is available on our Support website.

Illinois Workers' Compensation 2008 Fee Schedule

The 2008 Illinois Workers' Compensation Commission physician fee schedule, effective 1 January 2008, is included in this update. This year's fee schedule includes a 1.97% increase from 2007.

Support for Microsoft Windows Vista 64-bit

With this INCISIVE MDrelease, Microsoft® Windows Vista® Business, Enterprise, and Ultimate 64-bit versions are fully supported by the INCISIVE MDdesktop client, the INCISIVE IS data extraction software, and the CrossCurrent Product Updater service.

Selecting Neurosurgical codes as Primary Procedures when Global Days are less than 90 days

The display of the primary procedure box on the Summary tab was based upon a procedure having a Global Day period of 90 days. Some neurosurgical procedures (for example, Burr Hole for implanting ventricular catheter [CPT 61210]) have a Global Day period of 10 days but can be performed as a primary procedure. In order to accommodate these procedures, the primary procedure check now accepts both 10 and 90 days Global Day periods for the display of the primary procedure box.

Changed Procedure Codes require Reselection

The following procedure codes have different changes made to their underlying database structure. Each of these changes are outlined in the next section and will not be repeated here. The result of these changes may require users to reselect these procedure if editing a surgery plan or fee ticket, or if coding from a planned surgery where these procedure codes were present. Given the nature of these changes, we did not feel that we could programmatically set new location values for these codes correctly in 100% of all cases. Given that, it will be a user responsibility to watch for these procedure codes and reselect them as necessary.

- 22800 – 22812, Spine Deformity Fusion
- 63001 – 63005 and 63015 – 63017, Central spinal decompressions
- 64483 – 64484, Transforminal ESI

Minor Issues Corrected with the version of **INCISIVE** MD

Starting a memorized surgery without selecting a surgeon crashes the application

Previously, when a memorized surgery was selected using the right-click context menu without first selecting a surgeon from the **Surgeries For** drop down, INCISIVE MD would crash.

Surgery Date control may require selection of the date twice

This issue appeared only on computers running the Microsoft Windows XP operating system. When trying to select a surgery date within the current month on both the **Modifying Factors** and the **Summary** tabs, the date control selector would reset back to the current date. A user would then have to reselect the date a second time in order for the date to stick.

Display of Left and Right for Osteotomy and Kyphectomy procedure codes

At the request of our surgeon INCISIVE MD Product Advisory Board, we added Left and Right to the spinal decompression codes (CPT 63001 – 63066) to aid in surgical planning. Unfortunately, we also added the Left and Right designators to Osteotomy (CPT 22210 – 22216) and Kyphectomy (22818 – 22819). Since these codes can not be performed unilaterally left and right, we have removed the Left and Right selections from these codes.

Bone Morphogenic Protein (BMP) abbreviation listed on wrong CPT code

With the last revision, the BMP designator was listed with the description for CPT 20936. Based upon advice from the North American Spine Society (NASS) Coding Committee, the BMP designator is now listed with CPT Code 20930.

Locations different for codes for cervical/thoracic than lumbar/sacral

The transforminal epidural spinal injection (ESI) codes for cervical and thoracic locations (CPT 64470 – 64480) were listed as interspaces while the lumbar and sacral (CPT 64483 – 64484) were listed as segments. These procedures are per level and now are listed consistently as interspaces.

Some Illinois Workers' Compensation procedures defaulted to Medicare Fee Schedule for pricing

Some imaging procedures under Illinois Workers' Compensation have different Technical (-TC) and Professional (-26) percentage splits based upon their geographical location. Previously, if INCISIVE MD did not find a particular percentage split for a geographical location, the Medicare split was used.

GPCI adjusted RVU contract terms before 2004 crash when calculating expected amounts

If contract terms for an RVU-based contract included dates before 2004 and those contract terms included Geographic Practice Cost Index (GPCI) adjusting, the application would crash when trying to calculate the expected amount for a fee ticket. CMS only provides GPCI adjustment factors for 2004 and later, so we now default the GPCI factor to 1.0 for all RVU components for dates of service prior to 2004.

Spine Deformity procedures incorrectly listed as interspaces

The initial release of INCISIVE MD had both the spinal deformity (CPT 22800 – 22812) and regular fusion (CPT 22532 – 22632) codes listed as interspaces for consistency. The spine deformity fusion codes are listed as segment codes in the AMA CPT 2008 book. Based upon customer feedback, we have changed the spinal deformity fusion codes to display segments.

Minor application issues corrected with this release

As in any software project, a large number of defects and enhancements of varying importance and severity were reported, corrected, or incorporated with this release of the software. If you have any questions about these issues, please contact the INCISIVE Product Manager at +503 248 2290 for a discussion and a full list of the issues.

How do I contact INCISIVE Technical Support?

During normal business hours, 8:00 am to 5:00 pm Pacific Time, you may contact technical support at +503 546 5323. Our INCISIVE Support website also offers resources to help answer basic questions about the software.