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"Using the WPS Medicare Website" Webinar: Follow-up Questions and Answers

Question: I was at a vascular conference and was told that we can obtain benchmarking for E/M on the Medicare Website? Do you have this information?

Answer: We do not have a benchmarking tool available for Evaluation and Management (E/M) services.

The information located on our Website regarding Evaluation and Management (E/M) is located at: http://www.wpsmedicare.com/part_b/education/specialty.shtml#evaluation

The Centers for Medicare & Medicaid Services (CMS) also has information on cms.hhs.gov regarding E/M services. The E & M service guide is available at http://www.cms.hhs.gov/MLNProducts/downloads/eval_mgmt_serv_guide.pdf on the CMS Website.

The 95 and 97 E/M guides are at http://www.cms.hhs.gov/MLNEdWebGuide/25_EMDOC.asp on the CMS Website.

We hope these links will help you locate the necessary information.

Question: What is the difference between Par, Non-Par, and Limiting Charge Fees?

Answer: Based on the provider's participation status, Medicare has three different payment levels a provider can be paid. All three payment levels are listed on the physician fee schedule.

Par providers- sign an agreement with Medicare to accept the Medicare allowed amount as payment in full. Participating providers receive 10% higher reimbursement than a non-par provider.

Non-par providers – have the option of accepting assignment on a claim-by-claim basis. Medicare's approved charge for services provided by non-par providers is 95 percent of the approved charge of a participating provider.

Limiting charge – The limiting charge is the maximum amount that most non-participating providers are allowed to charge for services to a Medicare beneficiary on an unassigned basis. The limiting charge is 115% of the Medicare allowed amount for services of nonparticipating physicians. The limiting charge does not apply to participating providers, non-participating providers when assignment is accepted, and some non-physician practitioner specialties that are required to bill on an assigned basis.