

MEDICARE PART A BULLETIN

February 10, 1999

SNF Medicare Bulletin S-21

To: All Medicare Providers
From: Medicare Program Relations
Subject: CPT Code - 82962: Blood Glucose Monitoring

ATTENTION MEDICARE BUSINESS OFFICE: Please distribute to all appropriate health care facility personnel.

It has been brought to our attention that many Skilled Nursing Facilities (SNFs) have been contacted by consultants who are providing misleading information about the billing of blood glucose monitoring services (CPT code 82962) for your Part B patients (type of bill 22x). It is important that we notify you that these issues have been shared with our regional HCFA office and our local fraud and abuse unit. Services that are found to be billed where services are neither documented nor justified as being medically necessary will be denied payment.

Remember that facilities are responsible for ensuring that laboratory services being billed to the Medicare program are ordered by a physician and are medically justified.

This contractor has been requested by HCFA to immediately develop a local medical review policy for blood glucose monitoring (CPT code 82962). We would expect that all patients who are having this test performed are unstable diabetics requiring close monitoring and/or medication alterations. Clinically stable diabetics who need to periodically monitor their blood glucose levels should have obtained their own personal monitors and supplies through the DMERC benefit.

It is also not appropriate for facilities to falsely report that this Intermediary has experienced "systems processing issues" in an attempt to allow for any extensions in timely filing of claims. We take these false accusations seriously as intent to abuse the Medicare program, and will forward such correspondence to the fraud and abuse unit. The Intermediary has utilized system data to identify those facilities involved in extensive billing for this lab service. The Intermediary has also initiated payment cancellations on all claims that were received untimely and inadvertently reimbursed by either AETNA or this Intermediary.

We will be conducting post-payment reviews on all other claims to determine whether or not the services were ordered and medically justified. We caution all providers to protect themselves against consultants who have access to their billing systems and who promote "get rich quick" schemes. The integrity of the Medicare program is everyone's responsibility.

Questions regarding this bulletin may be addressed to Medicare Part A Customer Service by calling (904) 355-8899.