

The New York Eye & Ear Infirmary PHO Newsletter  
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The NYEE PHO Newsletter disseminates articles of interest and classifieds to participating physicians only.

#### NPI

On May 23, 2007, the NPI will become the only means Medicare will use in identifying you in all standard transactions. All former, often called legacy numbers, which you use to identify yourself to Medicare will be replaced by your new NPI. The NPI will also replace the number you use in communicating with other payers as well. All HIPAA covered entities except small health plans must begin using NPI in standard transactions by May 23, 2007 (small health plans have until May 23, 2008). You can learn more about the NPI by going to <http://www.cms.hhs.gov/NationalProidentstand> on the CMS Web site.

#### CarePlus

CarePlus is in the process of applying for the Medicare product to the State. They have sent an addendum to all participating physicians, asking that you sign, and mail it back; **please do not sign the addendum** because the PHO is looking to secure a higher reimbursement than the 95% or in some cases, 90% they are offering specialty physicians. If you are in receipt of the addendum, please call the PHO office so that we can add you to the higher reimbursement we are working on securing.

#### Form CMS-1500 (12-90)

On April 2, 2007, the current Form CMS-1500 (12-90) version of the claim form will be discontinued; only the revised Form CMS-1500 (08-05) is to be used. **Note:** All rebilling of claims should use the **revised** Form CMS-1500 (08-05) from this date forward, even though earlier submissions may have been on the current Form CMS-1500 (12-90)

#### 2007 Medicare Fee Schedules

The 2007 Medicare Physician fee Schedules that were posted to the CMS Web site on 11/10/2006 contained a minor rounding error. The Center for Medicare & Medicaid Service have revised the fees, and the corrected fees are now posted on their Web site. Please be sure to dispose of any version you may have printed or downloaded.

#### OXFORD RATE CHANGE

Being billed at out-of-network rates for a stay in a network hospital when referred by an out-of-network physician is not an issue for current Oxford HMO members. Oxford changed its policy effective May 25th, according to the State Department of Insurance. Oxford now considers physician and hospital status separately. Patients referred by non-network physician will be charged only applicable co-pay if they receive care at a network hospital. Under the previous policy, Oxford reimbursed all fees under the out-of-network rates if the referring physician was not in the network.