



March 8, 2019



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### Ortho News This Week

#### UnitedHealthcare to discontinue payment of consultation services



CMA

UnitedHealthcare (UHC) has announced that it will no longer reimburse consultation services for commercial product lines. Consultation services previously represented by CPT codes 99241-99245 and 99251-99255 will need to be billed utilizing the appropriate evaluation and management (E/M) procedure code that describes the office visit, hospital care, nursing facility care, home service or domiciliary/rest home care. [READ MORE](#)

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#### Share Orthopaedic Office — Toluca Lake/North Hollywood



Part-time shared orthopedic/medical office for lease. Common lobby, reception and administrative area. Currently 4 to 6 treatment rooms and 1 private office with x-ray facility plus a cast room.

All rooms have upper/lower cabinets. Private office has window. Available days are Monday, Wednesday, Friday and also Saturday. Free-standing office building with ample parking in Toluca Lake/North Hollywood on Riverside Drive.

**For immediate showing and more information please contact Marina Mazanians at 818-209-6528 or [overload805@yahoo.com](mailto:overload805@yahoo.com).**

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## Payer responses: Guile, waiting and crickets

Daisy Bill



Today we report on the responses from Sedgwick, Liberty Mutual, York, and State Compensation Insurance Fund (SCIF), following our posts detailing their systematic underpayment of 2019 workers' comp medical bills. We identified these four claims administrators in our series of articles alerting readers to the incorrect underpayments of bills for 2019 dates of service (DOS) in California. These claims administrators non-compliantly reimbursed providers by using the lower-paying 2018 fee schedule. [READ MORE](#)

### PRODUCT SHOWCASE



## When to Be a Nice Doctor - and When to Stop

In his most recent medical malpractice case study, CAP's General Counsel Gordon Ownby analyzes a lawsuit against an internist who was alleged to have improperly prescribed Durezol to his patient. Every month Mr. Ownby provides commentary on a real-life litigated case for his monthly column "Case of the Month." Read it here:

<https://www.caphysicians.com/cotm1>

## 2018 average days to payment for medical-legal services

Daisy Bill



In 2018, for California medical-legal bills submitted using DaisyBill software, the average processing time is 13 business days to receive payment for the top 20 claims administrators by volume. Last week, we published the data for medical treatment bills, which were processed even faster, in just 11 days. Listed by volume of processed bills from January 1 through December 31, 2018, the statistics below reflect payment speed — the average number of business days between the electronic submission of a medical-legal bill and receipt of the explanation of review (EOR) — for the 20 top claims administrators. [READ MORE](#)

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## A Physician's guide to preventing data breaches

Medical Economics



During each of the past three years, covered entities paid more than \$20 million in HIPAA fines. While a handful of major breaches made headlines—most notably Anthem's \$16 million mistake—small practices can't afford to be complacent about security. The more negligent a healthcare organization is found to be at the time of a HIPAA violation, the higher the penalty. According to the U.S. Department of Health and Human Services, fines can range from \$100 to \$50,000 per violation or record, with a maximum penalty of \$1.5 million per year for each violation. For physician practices, even minor penalties can take a major financial toll. And that's where the trouble just begins. [READ MORE](#)

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### Cerner Ambulatory Practice Management

Specialty Practice Management is a complete front and back-office solution that offers a rapid return on investment and improved satisfaction among your patients. Practices with 10 or fewer providers turn to this comprehensive solution to manage self-pay accounts, reduce denials, and eliminate the common mistakes that prevent timely insurance reimbursement. [Read more](#)

## How to survive high-deductibles health plans

Medical Economics



More Americans are choosing high-deductible health plans for their lower monthly premiums, though this results in steeper out-of-pocket costs for care. According to the Centers for Disease Control and Prevention (CDC), in 2017 42.3 percent of insured patients were enrolled in high-deductible health plans, up from 39.4 percent in 2016. This leaves some physicians scrambling to collect payments and manage shrinking cash flow. What can physicians do to improve their cash flow in this new landscape? Experts suggest that successful practices will review and establish new financial policies, do a better job of educating patients, and consider cash-pay services. [READ MORE](#)

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