## Dear AHCA/NCAL Member:

Late last year, the Centers for Medicare and Medicaid Services (CMS) published the <u>Calendar Year 2020</u> <u>Physician Fee Schedule Payment Final Rule</u>. This rule implements several changes that are effective **January 1, 2020**, including:

- updated payment rates for individual billing procedure codes used to report outpatient therapy services; and
- finalized coding requirements for the reporting of therapy services furnished in whole or in part by a therapy/therapist assistant.

CMS also posted updated National Correct Coding Initiative (NCCI) edits with unexpected changes that impact outpatient therapy coding and payment.

AHCA has prepared several fact sheets related to these changes. We highly recommend that providers share these resources with in-house and/or contracted therapy staff, as well as billing staff so everyone is aware of these important changes and can take any necessary actions to ensure accurate outpatient therapy coding and payments in 2020.

- Medicare Part B Therapy Procedure Payment Rates for 2020
- New Medicare Part B Claim Coding Modifiers for Therapy Assistants Effective 1/1/2020
- <u>New Medicare Part B NCCI Edits Impacting Therapy Services Effective 1/1/2020</u>

Please contact <u>Dan Ciolek</u>, AHCA's Associate Vice President, Therapy Advocacy with questions.

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