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AAPC Code Updates

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OPPS Proposed Rule Puts

Site-neutral Payments on the Horizon

The long-awaited 2019 Outpatient Prospective Payment System (OPPS) and Ambulatory Surgical Center (ASC) proposed rule, released July 25, sets the wheels in motion for significant reforms in the way Medicare will pay providers in hospital outpatient settings. [Read More.](#)

2019 Performance Requirements for 2021 Medicare Payments

Medical professionals and other stakeholders have until September 10 to make a difference in the course of future healthcare reforms. Tucked into a proposed rule to update the Medicare Physician Fee Schedule for 2019, released for public inspection on July 12, the Centers for Medicare & Medicaid Services (CMS) proposes policy changes for Year 3 of the Quality Payment Program (QPP). [Read More.](#)

Fee Schedule Conversion Factor Rises in 2019

The conversion factor (CF) that is used to determine payments under Medicare Part B will be adjusted upward slightly for 2019, meaning a slight overall rise in payments to providers who accept Medicare patients. [Read More.](#)

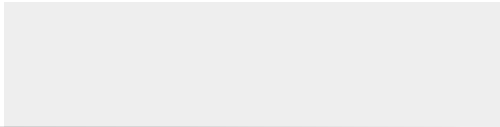
Virtual Care Coverage May Expand

Virtual care—also known as telehealth or telemedicine—leverages technology (such as audio/video applications or patient-accessed health portals) to allow patients quick and convenient remote access to quality healthcare. Now, the Centers for Medicare & Medicaid Services (CMS) is proposing increased coverage for virtual care services. [Read More.](#)

Spec Update Changes MIPS Reporting Requirements

An updated version of Quality Measure Specifications supporting documents was released June 25. Clinicians participating in the Merit-based Incentive Payment System (MIPS) and using either a registry or claims submission method will need this information to ensure proper reporting of quality measures on qualified patients. [Read More.](#)





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