

*Another Possible Way to Deal with New 3P Services Issue.*

The new law (the Healthcare Act\* and the proposed Rules\*\*) does not change the availability or nature of the Welcome to Medicare Physical (WTMP). While very similar in terms of content to the 3P Services, the WTMP continues to exist in its prior form, in apparent harmony with the 3P Services. What has changed is the addition of the 3P Services (see the prior posts for a description). For FNCS practices searching for a way to accommodate these new services, they might consider the following.

In my Article posted immediately below, I pointed out the problem for practices that provide some form of annual “wellness planning,” since that is pretty much what the 3P Services are. But there does not appear to be any conflict between the WTMP, which has been in existence for five years, and the 3P Services. So, if a practice just eliminated the wellness planning services (that is, as part of the annual fee) and simply continued with an “annual physical,” the problem may be mitigated. The only issue that would seem to be unanswered by this is in the patient’s WTMP year. It might be best to give the patient a credit against his or her annual fee for the amount Medicare pays for the WTMP. This should eliminate a claim that the practice was charging for the physical (as part of the annual fee) yet billing Medicare too in the year when the annual physical became the WTMP.

Just a thought. (Anyone who might consider this approach should first consult his or her attorney for advice. This posting is not and should not be taken as legal advice.)

\* The 2010 Patient Protection and Affordable Care Act

\*\* See postings immediately below