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## **Medicare Reimbursement**

Trends in Medicare billing and procedural reimbursement for outpatient office visits remain unclear within the field of neurosurgery.

Objective: To analyze financial trends of neurosurgeon reimbursement for Medicare office visits in 2010 compared to 2018.

Methods: The 2010 and 2018 physician/supplier files from the Centers for Medicare and Medicaid Services website were utilized. All payments submitted by neurosurgeons (provider ID 14) were included. Trends in office visit Current Procedural Terminology codes 99201 to 99205 and 99211 to 99215 were analyzed.

Results: Neurosurgeons billed for 1 109 979 office visits (463 611 h) in 2010 and Medicare denied 63 704 payments (totaling \$11 205 283). Neurosurgeons billed for 1 189 046 office visits (508 526 h) in 2018 and Medicare denied 57 048 payments (totaling \$15 103 879). This is a 7.1% increase in total neurosurgery office visits billed to Medicare, 9.7% increase in total office hours, and 34.8% increase in the payment amounts denied over 8 yr. Furthermore, after adjusting for inflation, the average amount paid to physicians by Medicare decreased by 8.3% per office visit. Additionally, Medicare paid 36.1% of the total neurosurgeon submitted charge amount for all office visits in 2010 but paid only 27.8% in 2018 (-8.3%).

Neurosurgeons are performing more office visits and billing for more time with patients. Meanwhile, Medicare has been paying physicians less per office visit, denying higher amounts of payments and reimbursing a decreasing percentage of submitted charges for office visits. An understanding of these trends is necessary to ensure continued equity and quality access to neurosurgical care in the United States <sup>1)</sup>.

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Harrington MT, Pollock JR, Haglin JM, Richter KR, Patel NP. An Analysis of Medicare Reimbursement for Neurosurgeon Office Visits: 2010 Compared to 2018. Neurosurgery. 2021 May 17:nyab131. doi: 10.1093/neuros/nyab131. Epub ahead of print. PMID: 34000736.

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Last update: 2024/06/07 02:51

