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A Snapshot of CMS Improper Payment Data

CMS recently posted detailed information on 2019 Medicare fee-for-service improper payments. One of many findings: 59.5% were caused by insufficient documentation. But some of the errors may be more about process than substance.^[1] Visit <https://go.cms.gov/2MgcnqR>.

Table D4: Top 20 Service Types with Highest Improper Payments: Part A Hospital IPPS

Part A Hospital IPPS Services (MS-DRGs)	Projected Improper Payments	Improper Payment Rate	95% Confidence Interval	Percentage of Service Type Improper Payments by Type of Error					Percent of Overall Improper Payments
				No Doc	Insufficient Doc	Medical Necessity	Incorrect Coding	Other	
Major Hip And Knee Joint Replacement Or Reattachment Of Lower Extremity (469, 470)	\$693,508,390	10.1%	7.9% – 12.2%	0.0%	35.3%	63.3%	1.3%	0.0%	2.3%
Psychoses (885)	\$378,171,886	9.9%	3.0% – 16.7%	7.9%	80.1%	11.8%	0.1%	0.0%	1.3%
Septicemia Or Severe Sepsis WO MV >96 Hours (871, 872)	\$275,840,496	3.1%	(1.9%) – 8.1%	0.0%	0.0%	0.0%	100.0%	0.0%	0.9%
Endovascular Cardiac Valve Replacement (266, 267)	\$236,231,903	12.3%	6.4% – 18.1%	0.0%	83.7%	6.1%	0.8%	9.4%	0.8%
Spinal Fusion Except Cervical (459, 460)	\$164,937,576	8.7%	1.3% – 16.2%	0.0%	31.9%	40.8%	27.3%	0.0%	0.6%
Heart Failure & Shock (291, 292, 293)	\$125,598,571	2.6%	0.3% – 4.8%	0.0%	0.0%	51.1%	48.9%	0.0%	0.4%

Organic Disturbances & Intellectual Disability (884)	\$109,540,492	21.1%	7.4% – 34.8%	0.0%	10.5%	85.3%	4.1%	0.0%	0.4%
Degenerative Nervous System Disorders (056, 057)	\$103,318,415	13.7%	10.4% – 17.0%	0.0%	31.8%	64.5%	3.6%	0.0%	0.3%
Esophagitis, Gastroent & Misc Digest Disorders (391, 392)	\$88,617,581	7.6%	3.5% – 11.8%	7.3%	0.0%	92.6%	0.1%	0.0%	0.3%
Cardiac Arrhythmia & Conduction Disorders (308, 309, 310)	\$85,869,565	6.6%	3.1% – 10.1%	0.0%	0.0%	89.7%	10.3%	0.0%	0.3%
Other Musculoskeletal Sys & Conn Tiss O.R. Proc (515, 516, 517)	\$81,117,774	19.1%	7.7% – 30.5%	0.0%	0.0%	97.4%	2.6%	0.0%	0.3%
Chest Pain (313)	\$73,056,701	26.9%	18.0% – 35.9%	0.0%	0.0%	100.0%	0.0%	0.0%	0.2%
Kidney & Urinary Tract Infections (689, 690)	\$72,819,946	4.7%	0.5% – 8.9%	0.0%	0.0%	86.0%	14.0%	0.0%	0.2%
Cervical Spinal Fusion (471, 472, 473)	\$70,841,951	12.2%	4.7% – 19.8%	0.0%	23.8%	66.8%	9.4%	0.0%	0.2%
Extensive O.R. Procedure Unrelated To Principal Diagnosis (981, 982, 983)	\$67,881,752	5.1%	1.6% – 8.7%	0.0%	0.6%	79.4%	20.1%	0.0%	0.2%
Percutaneous Intracardiac Procedures (273, 274)	\$66,765,399	15.4%	1.2% – 29.6%	0.0%	54.8%	44.8%	0.4%	0.0%	0.2%

Lower Extrem & Humer Proc Except Hip, foot, femur (492, 493, 494)	\$62,762,497	9.4%	4.0% – 14.8%	0.0%	0.0%	98.6%	1.4%	0.0%	0.2%
Signs & Symptoms (947, 948)	\$57,215,765	20.8%	11.4% – 30.2%	2.1%	4.8%	80.6%	12.5%	0.0%	0.2%
Seizures (100, 101)	\$53,402,312	10.9%	3.4% – 18.3%	0.0%	0.0%	73.2%	26.8%	0.0%	0.2%
Cardiac Defibrillator Implant WO Cardiac Cath (226, 227)	\$53,375,432	13.3%	7.9% – 18.7%	0.0%	17.9%	73.2%	8.9%	0.0%	0.2%
All Type of Services (Incl. Codes Not Listed)	\$5,273,215,801	4.2%	3.7% – 4.8%	1.0%	21.0%	59.0%	18.5%	0.5%	17.7%

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