

MEMBER RESOURCE - Ensuring Your Documentation Supports the

Medical Necessity of EDX Testing

The Medicare definition of medical necessity under the Social Security Act states “no Medicare payment shall be made for items or services that are not reasonable and necessary for the diagnosis or treatment of illness or injury or to improve the functioning of a malformed body member.”

Both the Center for Medicare and the Office of the Inspector General (OIG) view repeated submission of claims that are in violation of medical necessity rules as healthcare abuse.

Documentation is integral to supporting the medical necessity for any EDX service. Remember that from a coding and auditing perspective, nothing can be assumed. The most clear cut way to support medical necessity in an audit is ensuring documentation reflects medical decision-making. Complete documentation of the physician “thought process,” including comments about any medical conditions being ruled out will support medical necessity and the services billed.

The AANEM has published several position statements that address medical necessity, including the *Proper Performance and Interpretation of Electrodiagnostic Studies* (inset link). The Centers for Medicare and Medicaid Services (CMS) and the Office of the Inspector General are two additional resources on the topic of medical necessity. CMS and Medicare provide medical necessity guidance via national carrier determinations. Medicare also provides medical necessity guidance at the state level via local coverage determinations. And finally, the OIG work plan should be reviewed annually to identify specific documentation concerns that would be included in any audits conducted by their staff.

Complete documentation shows payers the physician knows what is happening clinically with the patient. AANEM encourages EDX providers to regularly perform audits and verify medical necessity is clearly documented in the medical record.

Examples of Potential Quality Measures in Electrodiagnostic and Neuromuscular Practice include:

Documentation of adequate patient identifiers

Documentation of antithrombotic medication use

Documentation of implanted device(s)

Documentation of limb temperature

Performing appropriate nerve conduction studies in peripheral neuropathy suspects

Performing appropriate nerve conduction studies in carpal tunnel syndrome suspects

Reliable reporting of clinical findings back to patient and referring provider

For more information on how to evaluate the quality of EDX reports and identify areas of potential improvement, see the AANEM's Performance in Practice modules:

PIP ABPMR - Performance in Practice - Electrodiagnostic Report Writing link to

https://webportal.aanem.org/Purchase/ProductDetail.aspx?Product_code=4037b6a3-8a82-e111-ba15-00155da01401

PIP ABPN - Performance in Practice - Electrodiagnostic Report Writing link to

https://webportal.aanem.org/Purchase/ProductDetail.aspx?Product_code=f319a413-3f2b-e111-8670-00155da01401