

PUBLICATION

Fee Policies for Missed Appointments [Ober|Kaler]

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Providers may charge for missed appointments, but...

Policies for missed-appointment fees must be clear and conspicuously posted, and are best acknowledged in writing by practice patients. However, when charging a Medicare patient for a missed appointment, special consideration must be given to ensure that such a policy is designed to apply equally to all patients, both Medicare and non-Medicare, and does not discriminate against Medicare beneficiaries. CMS's policy permitting such charges is articulated in Medicare Claims Processing Manual section 30.3.13, "Charges for Missed Appointments." That Medicare permits a nondiscriminatory missed-appointment fee, however, does not necessarily mean that providers are free to charge one.

Since a charge for a missed appointment is not a "covered service," Medicare's assignment and limiting rules do not apply. As the Medicare Claims Processing Manual explains,

The charge for a missed appointment is not a charge for a service itself (to which the assignment and limiting charge provisions apply), but rather is a charge for a missed business opportunity. Therefore, if a physician's or supplier's missed appointment policy applies equally to all patients (Medicare and non-Medicare), then the Medicare law and regulations do not preclude the physician or supplier from charging the Medicare patient directly.

[CMS Pub. 100-04, Medicare Claims Processing Manual, Ch. 1, § 30.3.13](#). Before providers may charge, then, they must ensure that they can charge all patients, both Medicare and private insurance patients, equally.

Making this determination requires a close review of all of a provider's third-party payor contracts, not all of which permit missed-appointment fees. In fact, some contracts specifically prohibit charging patients directly, even for services that would otherwise be considered "noncovered." Similarly, these obligations may not be clearly spelled out in a payor contract; they may be listed separately as part of a manual or collection of billing policies.

CMS has made its position on missed-appointment charges clear, but implementation of a missed-appointment fee in practice may depend entirely on the not-so-clear policies of other third-party payors. Providers intending to charge a missed-appointment fee should review their third-party payor contracts carefully or, even better, contact their payors directly and obtain confirmation that assessing this fee will not violate any aspect their provider agreement.

Bottom line: You can charge a reasonable missed-appointment fee if you can and do charge the fee to all your patients.