

### Thursday, March 5, 2020

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- Quarterly Update for the Temporary Gap Period of the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program (CBP) - April 2020
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- Guide to Reducing Chronic Kidney Disease Disparities in the Primary Care Setting

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Ambulance Services Call: Audio Recording and Transcript

### News

Under Section 106 of the <u>Further Consolidated Appropriations Act, 2020</u>, Medicare fee schedule amounts for complex rehabilitative and certain manual wheelchair accessories and cushions cannot be adjusted based on information from the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) competitive bidding programs between January 1, 2020, and June 30, 2021. Visit the <u>Durable Medical Equipment Center</u> webpage for a list of affected codes.

CMS welcomes public input on this list. Submit your comments to <a href="mailto:DMEPOS@cms.hhs.gov">DMEPOS@cms.hhs.gov</a> by March 12.

# Medicare Promoting Interoperability Program: CAH Reconsideration Forms due March 6

Critical Access Hospitals (CAHs): If you received notification that you are subject to a Medicare Promoting Interoperability payment adjustment and believe there is an error, you can apply for reconsideration. The deadline to submit a reconsideration form for your 2018 payment adjustment is March 6.

#### For More Information:

- Scoring, Payment Adjustment, and Hardship Information webpage
- CAH Reconsideration Form

### Medicare Promoting Interoperability Program: Submit Proposals for New Measures by July 1

The CMS Annual Call for Measures for eligible hospitals and critical access hospitals participating in the Medicare Promoting Interoperability Program is open. Submit a measure proposal by July 1. For more information see the <u>Annual Call for Measures</u> webpage, <u>fact sheet</u> and <u>submission form</u>.

### **PEPPERs for Short-term Acute Care Hospitals**

Fourth quarter FY 2019 Program for Evaluating Payment Patterns Electronic Reports (PEPPERs) are available for short-term acute care hospitals. These reports summarize provider-specific data statistics for Medicare services that may be at risk for improper payments. Providers can use the data to support internal auditing and monitoring activities. The PEPPER files were recently distributed through a QualityNet secure file exchange to hospital QualityNet Administrators and user accounts with the PEPPER recipient role.

# For More Information:

- Visit the <u>PEPPER Resources</u> website for the <u>user's guide</u>, <u>recorded training sessions</u>, QualityNet account information, <u>FAQs</u>, and examples of how other hospitals are using the report
- Visit the Help Desk if you have questions or need help obtaining your report
- Send us your <u>feedback or suggestions</u>

### 2018 Geographic Variation Public Use File

CMS posted the Geographic Variation Public Use File (PUF) and dashboards with data for 2018 on the <u>PUF</u> webpage. The PUF is a series of downloadable tables and reports with demographic, spending, utilization, and quality indicators for the Medicare fee-for-service population. It presents data at the state, hospital referral region, and county-level. For 2018, the PUF includes data for 33.5 million Medicare beneficiaries and \$357.8 billion in Medicare costs.

# **Help Your Patients Make Informed Food Choices**

March is National Nutrition Month® - "Eat Right Bite by Bite". Good nutrition does not have to be restrictive or overwhelming. Help your patients make informed food choices and develop sound eating habits by setting small, attainable goals. These changes will help prevent or reduce nutrition-related health conditions, including diabetes, chronic kidney disease, and obesity. Encourage your patients to take advantage of appropriate Medicare-covered preventive services:

- Medical Nutrition Therapy
- Diabetes Screening
- Diabetes Self-Management Training
- Intensive Behavioral Therapy for Obesity
- Intensive Behavioral Therapy for Cardiovascular Disease
- Annual Wellness Visit

### For More Information:

- Medicare Preventive Services Educational Tool
- National Nutrition Month website
- National Institute of Diabetes and Digestive and Kidney Diseases website
- Million Hearts® website
- Find a Registered Dietitian/Nutritional Professional

Visit the Preventive Services website to learn more about Medicare-covered services.

# Compliance

# **Ambulance Fee Schedule and Medicare Transports**

In a recent <u>report</u>, the Office of Inspector General (OIG) determined that Medicare made Part B payments to ambulance suppliers for transportation services that were also included in Medicare Part A payments to Skilled Nursing Facilities, as part of consolidated billing requirements. CMS developed the <u>Ambulance Fee Schedule</u> and Medicare Transports Booklet to help you bill correctly. Additional resources:

- Ambulance Fee Schedule webpage
- Sections 1861(e)(1) or 1861(j)(1) of the Social Security Act
- Medicare Benefit Policy Manual, Chapter 10, Section 10.3.3
- Medicare Claims Processing Manual, Chapter 15
- Medicare Claims Processing Manual, Chapter 30, Section 50
- Medicare Paid Twice for Ambulance Services Subject to Skilled Nursing Facility Consolidated Billing Requirements OIG Report

# Claims, Pricers & Codes

### **Average Sales Price Files: April 2020**

CMS posted the April 2020 Average Sales Price (ASP) and Not Otherwise Classified (NOC) pricing files and crosswalks on the <u>2020 ASP Drug Pricing Files</u> webpage.

### **Events**

# Ground Ambulance Organizations: Data Collection for Public Safety-Based Organizations Call — March 12

Thursday, March 12 from 1 to 2 pm ET

Register for Medicare Learning Network events.

During this call, ground ambulance organizations that also provide fire, police, and other public safety services learn how to collect information for reporting to the new Ground Ambulance Data Collection System.

A question and answer session follows the presentation; however, you may email questions in advance to <a href="mailto:AmbulanceDataCollection@cms.hhs.gov">AmbulanceDataCollection@cms.hhs.gov</a> with "March 12 Call" in the subject line. These questions may be addressed during the call or used for other materials following the call. For more information, including ground

ambulance organizations selected for the first round of reporting, see the <u>Ambulances Services Center</u> webpage, CY 2020 Physician Fee Schedule <u>final rule</u>, and <u>Bipartisan Budget Act of 2018</u>.

Target Audience: Ground ambulance organizations that also provide fire, police, or other public safety services.

### Open Payments: Your Role in Health Care Transparency Call — March 19

Thursday, March 19 from 2 to 3 pm ET

Register for Medicare Learning Network events.

Did you know that <u>reporting entities</u> annually submit records to CMS of payments or transfers of value they made to physicians and teaching hospitals? Beginning in April, you have 45 days to review and dispute Program Year 2019 records. CMS will publish this data and updates to previous program years' data by June 30. Topics:

- Overview of the Open Payments national transparency program
- Program timeline
- Registration process
- Critical deadlines for physicians and teaching hospitals to review and dispute data

A question and answer session follows the presentation.

Target Audience: Physicians, teaching hospitals, and physician office staff.

### Anesthesia Modifiers: Comparative Billing Report Webinar — March 19

Thursday March 19 from 3 to 4 pm ET

Register for this webinar.

Join us for a discussion of the Comparative Billing Report (CBR) on Anesthesia Modifiers, an educational tool for providers who submit Medicare Part B claims. Visit the <u>CBR</u> website for more information.

#### Ground Ambulance Organizations: Data Collection for Medicare Providers Call — April 2

Thursday, April 2 from 2 to 3 pm ET

Register for Medicare Learning Network events.

During this call, learn how to allocate costs, collect data, and report data for the new Ground Ambulance Data Collection System.

A question and answer session follows the presentation; however, you may email questions in advance to <a href="mailto:AmbulanceDataCollection@cms.hhs.gov">AmbulanceDataCollection@cms.hhs.gov</a> with "April 2 Call" in the subject line. These questions may be addressed during the call or used for other materials following the call. For more information, including ground ambulance organizations selected for the first round of reporting, see the <a href="mailto:Ambulances Services Center">Ambulances Services Center</a> webpage, CY 2020 Physician Fee Schedule <a href="mailto:final rule">final rule</a>, and <a href="mailto:Bipartisan Budget Act of 2018</a>.

Target Audience: Ground ambulance organizations that are Medicare providers, including hospitals, critical access hospitals, skilled nursing facilities, home health agencies, comprehensive outpatient rehabilitation facilities, and hospices.

### LTCH and IRF Quality Reporting Programs: SPADEs In-Depth Training Event — June 9-10

Tuesday, June 9 through Wednesday, June 10 Baltimore, MD

Register for this in-person training.

CMS is hosting a 2-day "Train the Trainer" event for Inpatient Rehabilitation Facility (IRF) and Long-Term Care Hospital (LTCH) providers. Topics:

- Implementation of the Standardized Patient Assessment Data Elements (SPADEs)
- Revisions to the IRF-Patient Assessment Instrument and the Long-Term CARE Data Set

#### For More Information:

- LTCH Quality Reporting Training webpage
- IRF Quality Reporting Training webpage

# **MLN Matters® Articles**

Standard Elements for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Order, and Master List of DMEPOS Items Potentially Subject to a Face-to-Face Encounter and Written Orders Prior to Delivery and, or Prior Authorization Requirements

A new MLN Matters Special Edition Article SE20007 on <u>Standard Elements for Durable Medical Equipment</u>, <u>Prosthetics</u>, <u>Orthotics</u>, <u>and Supplies</u> (<u>DMEPOS</u>) <u>Order</u>, <u>and Master List of DMEPOS Items Potentially Subject to a Face-to-Face Encounter and Written Orders Prior to Delivery and, or Prior Authorization Requirements is available. Learn about requirements from the CY 2020 final rule.</u>

Remittance Advice Remark Code (RARC), Claims Adjustment Reason Code (CARC), Medicare Remit Easy Print (MREP) and PC Print Update

A new MLN Matters Article MM11638 on Remittance Advice Remark Code (RARC), Claims Adjustment Reason Code (CARC), Medicare Remit Easy Print (MREP) and PC Print Update is available. Learn about updated RARC and CARC lists and MREP and PC Print software.

Quarterly Update for the Temporary Gap Period of the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program (CBP) - April 2020

A new MLN Matters Article MM11652 on <u>Quarterly Update for the Temporary Gap Period of the Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program (CBP) - April 2020 is available. Learn about changes to the HCPCS, ZIP code, and supplier files.</u>

International Classification of Diseases, 10th Revision (ICD-10) and Other Coding Revisions to National Coverage Determination (NCDs) -- July 2020 Update

A new MLN Matters Article MM11655 on <u>International Classification of Diseases</u>, 10th Revision (ICD-10) and <u>Other Coding Revisions to National Coverage Determination (NCDs) -- July 2020 Update</u> is available. Learn about ICD-10 conversions and coding updates.

# **Publications**

#### **Administrative Simplification: Claim Status Basics**

The <u>Claim Status Basics</u> fact sheet covers claim status inquiry and response and provides information on the adopted standards and operating rules for these transactions. This fact sheet is part of a <u>series of fact sheets</u> on Administrative Simplification.

# Hospice Quality Reporting Program: Timeliness Compliance Threshold for HIS Submissions

CMS posted an updated <u>fact sheet</u> on the timeliness compliance threshold for Hospice Item Set (HIS) submissions, including policies finalized in the FY 2016 final rule and a preliminary algorithm for the calculation. Visit the HIS webpage for more information.

### Guide to Reducing Chronic Kidney Disease Disparities in the Primary Care Setting

During National Kidney Month, learn more about chronic kidney disease from our new kidney disease resource, <u>Guide to Reducing Chronic Kidney Disease Disparities in the Primary Care Setting</u>. The guide includes resources for primary care teams that treat vulnerable populations.

# Multimedia

# **Ambulance Services Call: Audio Recording and Transcript**

An <u>audio recording</u> and <u>transcript</u> are available for the <u>February 20</u> Medicare Learning Network call on Ground Ambulance Organizations: Reporting Volunteer Labor. Learn how to report in the new Ground Ambulance Data Collection system.

### Like the newsletter? Have suggestions? Please let us know!

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