



Official CMS news from the Medicare Learning Network

## Thursday, January 24, 2019

## News & Announcements

New Medicare Card: Web Updates CDC Opioids Training Modules Open Payments Data Update Medicare Shared Savings Program and Quality Payment Program Interactions Guide Continue Seasonal Influenza Vaccination through January and Beyond

## **Provider Compliance**

Reporting Changes in Ownership — Reminder

## **Upcoming Events**

New Electronic System for Provider Reimbursement Review Board Appeals Call — February 5 Home Health Patient-Driven Groupings Model Call — February 12 New Part D Opioid Overutilization Policies Call — February 14

# Medicare Learning Network® Publications & Multimedia

Proof of Delivery Documentation Requirements MLN Matters Article — New New System for PRRB Appeals MLN Matters Article - New Appropriate Use Criteria for Advanced Diagnostic Imaging Fact Sheet — New Canes and Crutches: Provider Compliance Tips Fact Sheet - New Tracheostomy Supplies: Provider Compliance Tips Fact Sheet - New Ventilators: Provider Compliance Tips Fact Sheet — New Commodes, Bed Pans, and Urinals: Provider Compliance Tips Fact Sheet - New Comprehensive Outpatient Rehabilitation Facilities: Provider Compliance Tips Fact Sheet-New New MBI: Get It, Use It MLN Matters Article - Revised CLFS and Laboratory Services: CY 2019 Update MLN Matters Article — Revised ASC Payment System: January 2019 Update MLN Matters Article — Revised DMEPOS Update MLN Matters Article — Revised ESRD PPS: Payment for Dialysis Furnished for AKI: CY 2019 MLN Matters Article — Revised Influenza Virus Vaccine Code Update: January 2019 MLN Matters Article — Revised Next Generation ACO Model 2019 Benefit Enhancement MLN Matters Article — Revised ICD-10-CM, ICD-10-PCS, CPT, and HCPCS Code Sets Educational Tool — Reminder

# **News & Announcements**

### New Medicare Card: Web Updates

New Medicare cards are mailed; visit the <u>New Medicare Cards</u> website for the latest updates. Get answers to your questions and find out what you need to do before the transition period ends this year:

- <u>Provider and Office Manager</u> webpage
- <u>Getting Medicare Beneficiary Identifiers (MBIs)</u> webpage
- Using MBIs webpage

#### **CDC Opioids Training Modules**

Help stop the growing <u>number of drug overdose deaths</u> in the United States. Take the final three modules in a training series from the Centers for Disease Control and Prevention (CDC): <u>Applying CDC's Guideline for</u> <u>Prescribing Opioids</u>. Each module includes clinical scenarios, knowledge feedback prompts, and a resource library to help enhance learning:

- Opioid Use and Pregnancy
- Motivational Interviewing
- Fostering Collaborative Patient-Provider Relationships in Pain Management and Opioid Prescribing

View additional modules on the <u>Interactive Training Series</u> webpage. The modules offer free continuing education.

## **Open Payments Data Update**

On January 18, CMS updated the Open Payments dataset to reflect changes to the data that took place since the last publication in June 2018. Use the <u>Open Payments Search Tool</u> to view the data. The refreshed dataset includes:

- Record updates: Changes to non-disputed records made on or before November 15
- Disputed records: Updated information for dispute resolutions completed on or before December 31
- Record deletions: Removed records deleted before December 31

The <u>Search Tool</u> is updated with the following features:

- Query builder: Conduct payment searches not tied to an entity. The results organize payments by program year with the option to download the results for additional analysis.
- Entity profile updates: Payment types are converted to tabs to make this data easier to access and navigate. The summary table is consolidated with the top summary section and accessible by a "table" toggle button. The Nature of Payment chart includes a "company filter."

For More Information:

- Open Payments website
- Resources webpage
- Submit questions to the Help Desk at <u>openpayments@cms.hhs.gov</u> or 855-326-8366 (TTY: 844-649-2766)

## Medicare Shared Savings Program and Quality Payment Program Interactions Guide

The 2019 Medicare Shared Savings Program and Quality Payment Program <u>Interactions Guide</u> is available, including:

- Overview of Shared Savings Program participation tracks and whether they meet the criteria of a Meritbased Incentive Payment System (MIPS) Alternative Payment Model (APM) or Advanced APM
- Explanation of the APM scoring standard and eligibility for Eligible Clinicians (ECs) participating in a Shared Savings Program Accountable Care Organization (ACO)
- Details on how ECs participating in an ACO are scored under MIPS if their Shared Savings Program participation agreement is terminated during the performance year
- Description of how CMS identifies Qualifying APM Participants for ECs participating in an ACO meeting the Advanced APM criteria

### Continue Seasonal Influenza Vaccination through January and Beyond

Vaccinate as long as influenza activity continues, even in January or later. People 65 years and older are at greater risk of serious complications from seasonal influenza. The Centers for Disease Control and Prevention (CDC) recommends annual influenza vaccination for everyone 6 months and older – to help protect your patients, your staff, and yourself.

Medicare Part B covers the influenza virus vaccine once per influenza season. Medicare covers additional influenza vaccines if medically necessary.

You may also want to recommend the pneumococcal vaccine during the same visit. Medicare covers:

- An initial pneumococcal vaccine for Medicare beneficiaries who never received the vaccine under Medicare Part B
- A different, second pneumococcal vaccine 1 year after the first vaccine was administered

For More Information:

- <u>Preventive Services</u> Educational Tool
- Influenza Resources for Health Care Professionals MLN Matters® Article
- Influenza Vaccine Payment Allowances MLN Matters Article
- <u>CDC Influenza</u> website
- <u>CDC Information for Health Professionals</u> webpage
- <u>CDC Tools to Prepare Your Practice for Flu Season</u> webpage
- <u>CDC Make a Strong Flu Vaccine Recommendation</u> webpage

# **Provider Compliance**

### **Reporting Changes in Ownership — Reminder**

An Office of the Inspector General (OIG) report noted that providers may not be informing CMS of ownership changes. You must update your enrollment information to reflect changes in ownership within 30 days. Owners are individuals or corporations with a 5 percent or more ownership or controlling interest. Failure to comply could result in revocation of your Medicare billing privileges.

Resources:

- <u>Timely Reporting of Provider Enrollment Information Changes</u> MLN Matters Article
- Updated Manual Guidelines for Electronic Funds Transfer Payments and Change of Ownership MLN Matters Article
- <u>Medicare: Vulnerabilities Related to Provider Enrollment and Ownership Disclosure</u> OIG Report, May 2016
- <u>42 CFR 424.516</u>
- PECOS Enrollment Tutorial Change of Information for an Individual Provider
- PECOS Enrollment Tutorial Change of Information for an Organization/Supplier

# **Upcoming Events**

New Electronic System for Provider Reimbursement Review Board Appeals Call — February 5 Tuesday, February 5 from 1:30 to 3 pm ET

Register for Medicare Learning Network events.

Do you want to file or manage a Provider Reimbursement Review Board (PRRB) appeal? Learn how to use the new Office of Hearings Case and Document Management System (OH CDMS) to submit new appeals, transfer issues, file position papers, and manage all aspects of your PRRB appeals. For more information, visit the <u>PRRB OH CDMS</u> webpage.

During this call, PRRB staff discuss:

- How to access the system
- Detailed overview of the system and its capabilities
- Frequently asked questions

A question and answer session follows the presentation; however, attendees may email questions in advance to <u>PRRB@cms.hhs.gov</u> with "Office of Hearings Case and Document Management System Conference Call" in the subject line. These questions may be addressed during the call or used for other materials following the call.

Target Audience: All PRRB appeal stakeholders.

## Home Health Patient-Driven Groupings Model Call — February 12

Tuesday, February 12 from 1:30 to 3 pm ET

Register for Medicare Learning Network events.

During this call, learn about the Patient-Driven Groupings Model (PDGM) that will be implemented on January 1, 2020. CMS will use the PDGM to reimburse home health agencies for providing home health services under Medicare fee-for-service. Topics include:

- Overview of PDGM model
- Walkthrough of payment adjustments, including low utilization payment adjustments, partial payment adjustments, and outliers payments

A question and answer session follows the presentation. For more information, visit the <u>Home Health</u> <u>Prospective Payment System</u> webpage; review the CY 2019 <u>final rule</u> and <u>Overview of the PDGM</u>.

Target Audience: Home health agencies, administrators, clinicians, and other interested stakeholders.

## New Part D Opioid Overutilization Policies Call — February 14

Thursday, February 14 from 1:30 to 3 pm ET

Register for Medicare Learning Network events.

CMS implemented <u>new opioid policies</u> for Medicare drug plans effective January 1. The new policies include:

- Improved safety alerts when patients fill opioid prescriptions at the pharmacy
- Drug management programs for patients at-risk for misuse or abuse of opioids or other drugs

During this call, CMS experts discuss the new policies and answer questions.

Prior to the call, participants should review the following materials:

- Training materials, including slide decks and tip sheets for prescribers, pharmacists, and patients
- <u>A Prescriber's Guide to the New Medicare Part D Opioid Overutilization Policies for 2019</u> MLN Matters Article
- <u>Reducing Opioid Misuse</u> webpage for more information on the CMS strategy

Target Audience: Physicians; physician assistants; nurses; nurse practitioners; dentists and other prescribers; case managers; and other interested stakeholders.

# Medicare Learning Network® Publications & Multimedia

### Proof of Delivery Documentation Requirements MLN Matters Article — New

A new MLN Matters Article SE19003 on <u>Proof of Delivery Documentation Requirements</u> is available. Learn about updates to support compliance for payment purposes.

New System for PRRB Appeals MLN Matters Article — New

A new MLN Matters Article SE19004 on <u>New Electronic System for Provider Reimbursement Review Board</u> (<u>PRRB</u>) Appeals is available. Learn about the new web-based portal.

### Appropriate Use Criteria for Advanced Diagnostic Imaging Fact Sheet - New

A new Appropriate Use Criteria for Advanced Diagnostic Imaging Fact Sheet is available. Learn about:

- Reporting requirements
- Exceptions
- Payment for consultation

#### Canes and Crutches: Provider Compliance Tips Fact Sheet - New

A new Provider Compliance Tips for Canes and Crutches Fact Sheet is available. Learn about:

- Reasonable and necessary requirements
- Documentation requirements
- How to prevent claim denials

#### Tracheostomy Supplies: Provider Compliance Tips Fact Sheet — New

A new Provider Compliance Tips for Tracheostomy Supplies Fact Sheet is available. Learn about:

- Coverage criteria
- How to prevent denials
- Refill requirements

#### Ventilators: Provider Compliance Tips Fact Sheet - New

A new Provider Compliance Tips for Ventilators Fact Sheet is available. Learn about:

- Coverage criteria
- Required documentation
- Common reasons for claim denials
- How to prevent denials

#### Commodes, Bed Pans, and Urinals: Provider Compliance Tips Fact Sheet - New

A new Provider Compliance Tips for Commodes, Bed Pans, and Urinals Fact Sheet is available. Learn about:

- Conditions of coverage
- Reasons for claim denials
- Requirements for payment

#### Comprehensive Outpatient Rehabilitation Facilities: Provider Compliance Tips Fact Sheet—New

A new <u>Provider Compliance Tips for (Clinic) Comprehensive Outpatient Rehabilitation Facilities (CORF)</u> Fact Sheet is available. Learn about:

- Required documentation
- Plan of treatment requirements
- How to prevent claim denials

#### New MBI: Get It, Use It MLN Matters Article - Revised

A revised MLN Matters Article SE18006 on <u>New Medicare Beneficiary Identifier (MBI) Get It, Use It</u> is available. Learn how to look up MBIs for Medicare patients.

### CLFS and Laboratory Services: CY 2019 Update MLN Matters Article — Revised

A revised MLN Matters Article MM11076 on <u>Calendar Year (CY) 2019 Annual Update for Clinical Laboratory</u> <u>Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment</u> is available. Learn about mapping for new codes and updates for laboratory costs.

#### ASC Payment System: January 2019 Update MLN Matters Article — Revised

A revised MLN Matters Article MM11108 on <u>January 2019 Update of the Ambulatory Surgical Center (ASC)</u> <u>Payment System</u> is available. Learn about changes to billing instructions.

#### DMEPOS Update MLN Matters Article — Revised

A revised MLN Matters Article MM10838 on <u>Durable Medical Equipment, Prosthetics, Orthotics, and Supplies</u> (<u>DMEPOS</u>) <u>Update</u> is available. Learn about updating the ViPS Medicare System to process claims for beneficiaries who reside in a previous Competitive Bidding Area.

### ESRD PPS: Payment for Dialysis Furnished for AKI: CY 2019 MLN Matters Article — Revised

A revised MLN Matters Article MM11021 on Implementation of Changes in the End-Stage Renal Disease (ESRD) Prospective Payment System (PPS) and Payment for Dialysis Furnished for Acute Kidney Injury (AKI) in ESRD Facilities for Calendar Year (CY) 2019 is available. Learn about rate updates, payment updates, and changes to Chapter 11, Section 60 of the Medicare Benefit Policy Manual.

### Influenza Virus Vaccine Code Update: January 2019 MLN Matters Article — Revised

A revised MLN Matters Article MM10871 on <u>Quarterly Influenza Virus Vaccine Code Update - January 2019</u> is available. Learn about new influenza virus vaccine code 90689.

### Next Generation ACO Model 2019 Benefit Enhancement MLN Matters Article — Revised

A revised MLN Matters Article MM10824 on <u>Next Generation Accountable Care Organization (ACO) Model</u> <u>2019 Benefit Enhancement</u> is available. Learn about the new Care Management Home Visits Benefit Enhancement for program year four.

### ICD-10-CM, ICD-10-PCS, CPT, and HCPCS Code Sets Educational Tool - Reminder

The <u>ICD-10-CM</u>, <u>ICD-10-PCS</u>, <u>CPT</u>, and <u>HCPCS</u> <u>Code Sets</u> <u>Educational</u> Tool is available. Learn about:

- Code set definitions
- Payment information

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

<u>Subscribe</u> to MLN Connects. Previous issues are available in the <u>archive</u>. This newsletter is current as of the issue date. View the complete <u>disclaimer</u>.

## Follow the MLN on <u>Twitter</u> #CMSMLN, and visit us on <u>YouTube</u>.

The Medicare Learning Network®, MLN Connects®, and MLN Matters® are registered trademarks of the U.S. Department of Health and Human Services (HHS).

