

The minutes below are a summary of the Advisory group meeting topics, group discussion, actions, and outcomes as a result of this meeting.

MEETING DETAILS

Date: Tuesday, August 13, 2019

Time: 9:30 a.m. – 11:00 a.m. (CST)

Facilitator: Sandy Decker, CGS Senior Provider Education Consultant

ATTENDANCE/ROLL CALL

Attendees:

- | | | |
|-----------------------------------|---------------------------|-------------------|
| • Erin Cubit, Iowa | • Beth Noyce, Utah | CGS Staff: |
| • Renee Hahn, Kansas | • Debra Blom, Virginia | • Julene Lienard |
| • Heather Murphy, Missouri | • Theresa Forster, NAHC | • Nykesha Scales |
| • Dianne Hansen, Montana | • Judi Lund Person, NHPCO | • Sandy Decker |
| • Rochelle Schaffer, North Dakota | • Kerry Stevenson; | |
| • Carla Van Dyke, South Dakota | VITAS Healthcare | |

States not represented on call: Colorado, Delaware, Maryland, Nebraska, Pennsylvania, West Virginia, Wyoming

FOLLOW-UP ITEMS FROM PREVIOUS AG MEETINGS

No comments.

EDUCATION TOPICS FOR GROUP FEEDBACK ON EDUCATION NEEDS

CERT Corner - Julene Lienard, MPA

<https://www.cgsmedicare.com/hhh/education/materials/cert.html>

Recent Hospice CERT Errors (in no particular order)

IDT

- IDT POC review/update, that supports team participation and collaboration with hospice physician;
- IDT sign-in sheets and/or documentation to support team participation and collaboration with hospice physician
- IDT note for [Date of Service] to support plan of care
 - SSA 1862(a)(1)(A), 42 CFR 424.5(a) (6), (sufficient information), 42 CFR §418.56- Condition of participation: Interdisciplinary group, care planning, and coordination of services, PUB 100-2 Ch. 9, § 10-General Requirements for Hospice, § 20-Certification and Election Requirements.

Certification

- Physician narrative as part of the certification/recertification supporting terminal illness - Inadequate
 - SSA 1862 (a)(1)(A), PUB 100-2 Chapter 9 § 20.1 (Timing and Content of Certification), (LCD): Hospice Determining Terminal Status (L34538), rev eff date 10/1/15.

Timed Service

- Missing time-in/time-out or total time spent in direct skilled nursing care
 - SSA 1862[a][1][A], FR/Vol. 80, No. 151 pg. 47173-47175, PUB 100-4 Chapter 11 §30.2 (Payment Rates), §30.2.2 (Service Intensity Add-on, SIA Payments), §30.3 (Data Required on the Institutional Claim to Medicare Contractor), CR 9369.

Service Intensity Add-on

- Missing billed date of service RN visit note that supports nursing care prior to the beneficiary's death to support the billed SIA/service intensity add-on visit.
 - SSA 1862(a)(1)(C); 42 CFR §424.5(a)(6)(sufficient documentation); Change Request CR#9201 (Service Intensity Add-on/SIA Payments); Effective Date 01/01/2016; IOM 100-2 Ch. 9 (Coverage of Hospice Services Under Hospital Insurance) §40 (Benefit Coverage); IOM 100-4 Ch. 11 §30.2.2 (Service Intensity Add-on/ SIA Payments).

The 2018 reporting period will be ending 10/01 and the final report should be published around November 15th. You can impact the CERT error rate by submitting documentation as soon after the request is received as possible. This date does NOT change your appeal deadlines, which remain 120 days after the date on your demand letter.

Targeted Probe and Educate (TPE) Process Update

<https://www.cgsmedicare.com/hhh/pubs/news/2019/0119/cope11067.html>

- **Judi Lund Person** – provider had average census of 25 – 13 claims were pulled. Concerned about payments. Sandy will discuss off line with Judi for information about the individual provider and will reach out with assistance.

2019 MSI

Thank you to everyone who participated. CGS takes the comments very seriously and is involved in studying the results thoroughly before beginning planning for our next fiscal year beginning September 1st.

New Medicare Card Transition

<https://www.cms.gov/Medicare/New-Medicare-Card>

Reminder to begin using the MBI numbers immediately so everyone is comfortable with the process before mandatory use of the MBI numbers begins January 1, 2020.

TOPICS FOR DISCUSSION FROM JUDI LUND PERSON FROM NHPCO

Final Rule Discussion

<https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/Hospice/Hospice-Regulations-and-Notices-Items/CMS-1714-F.html>

- MAC role in the election statement addendum as a condition of payment
- Note: in this year's Congressional discussions on sequestration for some federal government programs, sequestration for Medicare providers will now go out to 2029.
 - Finalize the requirement for the election statement addendum to be provided to the beneficiary upon request for item services or drugs that hospice wouldn't be covering because it's nonrelated. This is a requirement and condition of payment. Language is in the final rule that CMS will be reaching out to all the Medicare Administrative Contractors to discuss how this will work. CGS has not yet had contact from CMS. Doesn't take effect until October 1, 2020, but keep this on the radar.
 - When will 2% reduction payments go away? Sequestration won't be eliminated for Medicare providers. Timeline will be 2029. This is for Medicare providers.

Service Intensity Add On (SIA)

Discussions of ways to promote its use.

- **How can we improve our use of SIA?** Based on claims data. Not seeing much movement from one year to the next. Looking at 3 years' worth of data. Is it working – if not, why not?
- **Diana – Montana:** EMRs set up to make this process on billing end be more straight forward or are there manual processes or software systems. Variable across different EMRs?
- **Renee – Kansas:** Current EMR system catches SIA because it's looking at time logs and sees when patient is in last 7 days – able to grab nurse and SW visits that qualify in that range. Not having problem in claim perspective. How can they proactively in real time identify using EMR to see when patient is within 7 days – look at calendars to see how to bump up SIA? No direct communication within that system that coordinates all aspects.
- **Beth – Utah:** IDGs still not being effective with communication for consistencies of visits. Some continuing with standard frequencies and not changing frequencies to match patient's condition.
- **Judi:** Anything MACs can do to provide additional guidance for providers? Admission teams may want to visit about increased visits at EOL.
- **Elizabeth – Maryland:** Would be great if hospices doing this successfully would share with NHPCO some of their best practice solutions. Compile info to share how other hospices can use this information. Patients/families may deny need for hospice visits.
- **Judi – Staff asking family:** Do we need to visit? Puts pressure on family. Do we need to share expectations with families at beginning of care? Families may deny need for visit because they don't want to be a bother.

Update on Transfers

Success of webinar, questions after, what states and providers can do now.

- **Kerry:** Webinar extremely helpful and needed. It's a point of contention for providers in dealing with transfers. Loved that all 3 MACs came together.
- **Becky – Pennsylvania:** Extremely helpful – loved all 3 MACs working together; several providers concerned about whose transfer form to be used. Make sure both hospices are comfortable with the transfer.

CGS WEBSITE UPDATES

<http://www.cgsmedicare.com/hhh/index.html>

The group was notified of the following updates to the CGS website.

- **Updated: Claims Processing Issues Log (CPIL)**
https://www.cgsmedicare.com/hhh/claims/fiss_claims_processing_issues.html
- Updated with latest reported issues
- **Updated: Top Claim Submission Errors (Reason Codes) and How to Resolve**
<https://www.cgsmedicare.com/hhh/education/materials/cses.html>
Reflects the most recent monthly statistics
- **Updated: Hospice Top Medical Review Denial Reason Codes**
https://www.cgsmedicare.com/hhh/medreview/hos_denial_reasons.html
Includes most recent quarterly data
- **Update: Hospice Certification/Recertification Requirements**
https://www.cgsmedicare.com/hhh/coverage/coverage_guidelines/cert_recert_requirements.html

- Reflects the policy recognizing Physician Assistants (PAs) as designated hospice attending physicians. For additional information refer to MM10217 at <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM10517.pdf>
- **Update: Claim Page 01 – Correcting a Notice of Termination/Revocation – NOTR (8XB)**
 - https://www.cgsmedicare.com/hhh/education/materials/claim_page_1_correcting_notr.html Instructions to correct an NOTR when it was submitted entirely in error.
 - A new Hospice Billing Frequently Asked Question (FAQ) was also added in regard to this process - https://www.cgsmedicare.com/medicare_dynamic/faqs/display_faqs_j15hhh.asp?117
- **Update: Contact Our Medical Director**
 - <https://www.cgsmedicare.com/hhh/medreview/index.html>, you will now see a HHH Medical Director icon. Click on the icon
 - <https://www.cgsmedicare.com/hhh/medreview/md.html> to find information to contact our Medical Director, or to request a teleconference, or request the Medical Director to present at your conference.
- **Update: The Submitting a Hospice Notice of Termination/Revocation of Election (TOB 8XB) Quick Resource Tool**
https://www.cgsmedicare.com/hhh/education/materials/pdf/hospice_not_tob8xb.pdf
 Provides additional information to correct a discharge date on a previously submitted NOTR and removing a revocation date established by an NOTR submitted in error.
- **New: Home Health & Hospice New Provider Resource Center Videos**
<https://www.cgsmedicare.com/hhh/education/video.html>
 Three videos introduce providers to the listserv notification services offered by CGS and CMS, common websites, electronic billing, Calendar of Events, and the Medicare Bulletin.

Video Education

Home Health & Hospice New Provider Resource Center Videos

Are you new to Medicare, or to billing Medicare claims to CGS? CGS is here to help, and we welcome you to the Medicare program. These videos contain basic information and resources to get you started and complement our [New Provider Resource Center Web page](#).



Video 1: Introduction & Step 1

Length: 2:17

Course Summary: In this video we introduce providers to the Listserv notification services offered by CGS and CMS. Registering for the Listserv is the best way to keep up with the ever changing world of Medicare.

Date Recorded: 03.21.2019

- **New: Hospice Targeted Probe & Educate (TPE) Post Probe Education Call Tool**
https://www.cgsmedicare.com/hhh/education/materials/pdf/tpe_post_probe_tool.pdf
 Developed to provide a check list of items to better prepare you before a TPE education call.

HOME HEALTH & HOSPICE

Targeted Probe & Educate (TPE)

POST PROBE EDUCATION CALL TOOL

The purpose of the TPE post probe education call is to offer education, resources, and to answer questions concerning claim denials as a result of TPE medical review. The educator's role is to present information addressing the reason for the denial and communicate insight aimed at the medical review findings; however, the call is not intended to serve as a verbal appeals process.


PRE-CALL	INTRA-CALL
<input type="checkbox"/> Round Results Letter <ul style="list-style-type: none"> Request 1:1 education by deadline Determine call participants Review claims found in error 	<input type="checkbox"/> Join call timely <ul style="list-style-type: none"> Verify time zone of scheduled call All participants connected by call start time Be prepared to introduce self including first and last name and agency role
<input type="checkbox"/> Group claims by denial reason <ul style="list-style-type: none"> Ex. Arrange all 5HC01 claims together Organize claim documentation 	<input type="checkbox"/> Ensure access to an internet connection <ul style="list-style-type: none"> CGSMedicare.com—J15HHH CMS.gov
<input type="checkbox"/> Prepare questions <ul style="list-style-type: none"> Round Results Letter Assembled claim documentation 	<input type="checkbox"/> Materials <ul style="list-style-type: none"> Round Results Letter Questions

During the call, the educator will begin with the denial reason for which the most claims are denied. They will state the beneficiary's name and the dates of service for the claim, the beneficiary's remarks and discuss specific findings related to the documentation submitted. The educator will provide navigation assistance to online resources to mitigate the denial discussed as appropriate.


POST-CALL	INTRA-PROBE
<input type="checkbox"/> Process Evaluation <ul style="list-style-type: none"> Define process issue(s) Develop corrective action plan Educate team Implement action items Assess outcome 	<input type="checkbox"/> Request additional education as needed <ul style="list-style-type: none"> J15HHProbeandEducation@cgadmin.com Furnish agency PTAN Provide specific agenda items
<input type="checkbox"/> Resources <ul style="list-style-type: none"> Distribute resources supplied as appropriate Join ListServ Register for myCGS Portal 	<input type="checkbox"/> Monitor Compliance <ul style="list-style-type: none"> Perform quality review at regular intervals
	<input type="checkbox"/> Prepare for TPE Subsequent Round <ul style="list-style-type: none"> Refine internal ADR procedure Notify billing department/partner of TPE commencement date

RESOURCES:

- Targeted Probe and Educate Process - https://www.cgsmedicare.com/hhh/medreview/tpe_process.html
- Education and Resources - <https://www.cgsmedicare.com/hhh/education/index.html>
- Medical Review Additional Development Request (ADR) Process - https://www.cgsmedicare.com/hhh/medreview/adr_process.html
- Medical Review Activity Log - <https://www.cgsmedicare.com/hhh/medreview/activitylog.html>


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CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

REMINDERS

- The MBI and Name to Number Converters at:** https://www.cgsmedicare.com/medicare_dynamic/j15/ivr_mbi_converters/ivr_mbi_converters.aspx
 - This will prove to become one of your BEST tools! Use it to convert the MBI and patient name into numbers....saving you TONS of time! (August 2019 HHH Bulletin 0 https://www.cgsmedicare.com/hhh/pubs/mb_hhh/2019/j15_hhh_08-19.pdf)
- Hospice Sequential Billing Reminder: Reason Code 37402:** <https://www.cgsmedicare.com/hhh/pubs/news/2019/0619/cope12946.html>

Event Title	Event Date	Time
 Attention myCGS Newbies – Let's Take a Tour!	8/28/2019	01:00 PM-02:00 PM,Central Time
 10 Ways Our CGS Website Can Make Your Life Easier	9/5/2019	11:30 AM-12:30 PM,Central Time
 All Things Medicare for Home Health Providers	9/11/2019	09:00 AM-12:00 PM,Eastern Time
 Bulletin Review for HH&H Providers	10/9/2019	12:00 PM-01:00 PM,Central Time

CGS DATA ANALYSIS

Hospice Claim Submission Error (CSE) Data – Top 5 (Sept. 2018 - Aug 2019)

Rank	Reason Code	Billing Error	# of Errors
#1	37402	Sequential billing – no prior claim	22,181
#2	38200	Duplicate claim	10,373
#3	U5181	Occ cd 27 required when cert date falls within DOS	9,476
#4	U5106	NOE falls within current election period	8,837
#5	34952	Service facility NPI not included	6,756

Hospice Medical Review (MR) Denial Data – Top 5 (September 2018 – July 2019)

Rank	Reason Code	Denial Reason	% of Errors
#1	5PM01	Six-month prognosis not supported	60%
#2	5PX06	The notice of election is invalid because it doesn't meet statutory/regulatory requirements	10%
#3	5PC01	Physician narrative statement was not present or was not valid	8%
#4	5PC08	Face-to-Face Encounter requirements not met	4%
#5	5MP07	MD services not medically necessary	4%

Hospice Claim Submission Error (CSE) Data – Top 5 (Sept. 2018 - Aug 2019)

Reason for Inquiry	Type of Issues	# of Inquiries
RTP/Unprocessable	Missing/invalid codes	3,175 (10.7%)
General Information	Issue not identified	3,158 (10.7%)
Administrative Billing Issues	Filing/Billing Instructions	3,070 (10.4%)
Claim Denials	Claim overlap	1,282 (4.4%)
General Information	Misrouted Telephone Call/Written Correspondence	1,221 (4.1%)
TOTAL – All Inquiries		29,449

OPEN DISCUSSION

- **Next In-Person Meeting**
 - **When:** Spring 2020 was discussed as a potential time for meeting
 - **Where:** Potential locations discussed were in Washington DC to coincide with the NHPCO annual conference
 - **Judi** volunteered to connect to NHPCO at end of conference.
- **Nykesha:** Put heads together and let us know of educational needs.
- **Carol – Kansas:** More education on NOEs to work well and how to turn into electronic one. Losing days when corrected.
- **Judi – GIP education:** Rebasing of rates, etc. and how to mesh with scrutiny of MAC

NEXT CGS ADVISORY GROUP MEETING

Please mark your calendars for our next meeting dates:

- December 3, 2019 – HH POE Advisory Group via Teleconference
- December 10, 2019 – Hospice POE Advisory Group via Teleconference