

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: March 15, 2022

Facilitator: Nykesha Scales, CGS Provider Outreach & Education Representative

Attendees: 25 state/national association representatives

AGENDA ITEMS

Welcome/Purpose

The primary function of the Advisory Group is to assist the contractor in the creation, implementation, and review of provider education strategies and efforts. The Advisory Group provides input and feedback on training topics, provider education materials, and dates and locations of provider education workshops and events. The group also identifies salient provider education issues and recommends effective means of information dissemination to all appropriate providers and their staff, including the use of the Provider Contact Center (PCC) to disseminate information to providers.

POE AG Recommendations

Notice of Admission (NOA) Resources

Group discussed highlights from final rule and were asked if there was anything POE should focus on for provider education. The group asked if there was data that could be shared pertaining to cohort data concerning value-based purchasing, such as the breakdown of formulas amongst their peers and total performance. Please refer to the following website for additional information and contacts: <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits>.

Notice of Admission (NOA) Readiness

Nykesha shared NOA resources and advised of recent updates to job aids in light of system limitations identified after implementation. Aaron (BKD) commended CGS and the other Medicare Administrative Contractors (MACs) for the resources and asked if more information could be added to the Claims Processing Issues Log (CPIL), to ensure providers have enough instruction as to how to manage open system issues. CGS has updated the CPIL to provide more instruction.

- Jackie (Encompass) asked about issues with the no pay Requests for Anticipated Payments (RAPs) for future periods from other providers. Please continue to utilize the transfer dispute resolution process, Notification of Disputed Home Health Agency (HHA) Transfer (Home Health & Hospice) (https://www.cgsmedicare.com/hhh/claims/fees/pdf/resolving_transfer_dispute2_5.pdf). This information was also shared with CMS during our monthly claims call.

Current Tasks

Advisory Group Recruitment

During the December meeting, a member recruitment campaign was suggested. CGS did pursue this campaign during the first quarter of 2022 and shared the prospects with POE AG members during this meeting and asked them to send their recommendations after the meeting. The group suggested the following providers who will be contacted by CGS POE in regard to

their participation: Amedisys Inc., UnityPoint at Home, and Visiting Nurses. Other suggestions were made due to recent staffing changes amongst the associations that will be taken into consideration as well.

Feedback on Recent Education

Kim (Gentiva) advised she joined the Targeted Probe & Educate Ask the Contractor Teleconference (ACT) and found the information very helpful. Nykesha reminded the group to register for and attend educational sessions to provide feedback. Group was also shown how to access the recorded events.

Comprehensive Error Rate Testing (CERT) Program Education

CERT education will continue this year and AG members were encouraged to sign up to attend. One member complimented CGS for using medical necessity examples in their education and asked if this is something CMS can include in their manual updates.

myCGS Enrollment/News

Group members apprised of recent enhancements and asked if they were utilizing the portal to its maximum potential. Recent enhancements include recertification process changed from 90 days to 360 days, accessibility to overpayment data, messages delivered at NPI level, new look and feel to My Account tab, and enhanced MBI Look-up Tool security feature.

Annual Direct Data Entry (DDE) Recertification

Nykesha advised group that annual DDE recertification process will be initiated again and the due date for HHH providers is April 30, 2022. Please reach out to our EDI Team at 1.877.299.4500, option 2 for assistance.

Future Tasks

Review of Upcoming Educational Material

Group will be asked to review upcoming presentation material.

Identify Collaboration Opportunities

- As 2022 continues and based on industry feedback, please identify, and share collaboration opportunities for education/outreach.
- Please continue to attend, provide feedback and suggest future topics: https://cgsmedicare.com/medicare_dynamic/wrkshp/pr/hhh_report/hhh_report.aspx.

Customer Experience Survey

Nykesha advised the group to take advantage of surveys when visiting our education web page or viewing educational videos.

Social Media Discussion

<https://www.cgsmedicare.com/socialmedia/index.html>

- LinkedIn
- YouTube

Group members encouraged to view social media pages and follow CGS on LinkedIn. Marlene (Bayada) suggested the creation of videos (no longer than two minutes) concerning physician certification and homebound status.

CGS Online Education Discussion

https://www.cgsmedicare.com/medicare_dynamic/education/education/001.aspx

Members were tasked with reviewing online education center courses and letting Nykesha know of needed changes or other topics to be added.

CGS Data Analysis

The group reviewed the top Claim Submission Errors (CSEs) and Medical Review denials.

- Aaron (BKD) inquired about MR denial code 56900 and how most of the requested documentation is being returned since CGS has a lower number of denials than some other MACs. Per MR, most of the documentation is returned via myCGS or esMD.

Open Forum

Review Choice Demonstration (RCD) concerns were raised. Nykesha advised RCD is specific to Palmetto GBA at this time. Group also discussed TPE to ensure all providers know where to find TPE activity and results when shared. Annette (Provider Insights) suggested a reminder regarding diabetic food care as a qualifying skill and cited differences in opinions in the industry and MACs with this issue: Is it allowed for a physician partner to sign a plan of care (POC) (and not the original physician) when the original ordering provider is unavailable? Can POE get anything in writing published regarding what is allowed /not allowed per CGS medical review? Per MR, they refer to Ch. 7 Medicare Benefit Policy Manual Section 30.5.3 and would accept if they are able to determine they were under the same roof and are partners at the clinic.

CGS Advisory Group Next Meeting Date

July 12, 2022 (Microsoft Teams)