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

MEETING DETAILS

Date: July 16, 2024

Facilitator: Ariel Taylor, Sr. Provider Relations Representative & Nykesha Scales, CGS J15 POE Manager

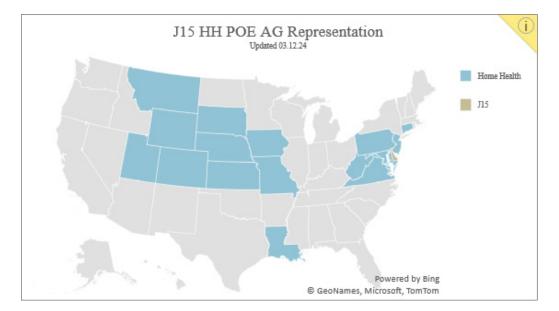**Attendees:** 34 state/national association representatives alongside CGS and CMS

AGENDA ITEMS

Welcome/Purpose

- The primary function of the Advisory Group (CMS Manual link for review: https://www.cms.gov/regulations-and-guidance/guidance/manuals/downloads/com109c06.pdf) 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.

  - Jurisdiction 15 Home Health & Hospice Provider Outreach and Education (POE) Advisory Group (https://www.cgsmedicare.com/hhh/education/advisory_groups.html) – Houses manual, covenant, group member list (updating after 2024 Membership Drive), meeting dates, past minutes. New members recognized and welcomed.

  - Provider Outreach & Education (POE) Advisory Group (AG) Covenant (Home Health & Hospice) (https://www.cgsmedicare.com/hhh/education/pdf/hhh_poe_ag_covenant.pdf) – Covenant reviewed and discussed to cover responsibilities of membership as outlined.

Follow-Up Items from Previous AG Meeting

2024 POE AG Membership Drive

J15 HH POE AG Representation
Updated 03.12.24

Home Health
J15

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- Increased from 23 to **35 state/national association representatives!**

  - Any remaining prospective members or new nominations, please send completed membership form to J15_HHH_Education@cgsadmin.com. Members also asked to ensure membership delegation information is correct on the POE AG webpage.

- CGS Webinar Platform Feedback (https://web.cvent.com/event/a64b8e73-c925-4e3f-a190-8d61ecdd86f8/regProcessStep1) SIGN UP TODAY!

  - AG members asked if about webinar platform performance and a few members mentioned it works well. Nykesha advised the POE team is testing out a new webinar function within CVENT that is labor intensive and more engaging for participants.

- Reminded members that there will be a combined HH&H POE AG Meeting October 15th, 2024, via Microsoft Teams.

Current Tasks

- Targeted Probe & Educate (TPE)

  - Some members express they are now seeing progress and payment. One group member suggested that others with denials follow the appeal process as soon as possible. A question was asked regarding if denial rates get updated on the website and expressed concern as to how long the process for updating individual provider stats can take. Medical Review staff advised while TPE is a MR process, there are a lot of contributing factors during the appeals process that MR is not aware of. If a claim denial is appealed and overturned, this would result in an adjusted denial rate for the effected TPE round. Please refer to the CMS Frequently Asked Question (FAQ), below, related to this topic.

    - **Q8.** Can claims reviewed as part of the TPE process be appealed? If a claim is appealed and overturned, would this impact the provider denial rate?

    - **A8.** The appeals process is unchanged under the TPE process. If a claim denial is appealed and overturned, this would be taken into consideration in subsequent TPE rounds. If the appeals results are not available at the time a provider progresses to a second or third round of TPE but are available when the provider is referred to CMS, CMS takes these results into consideration when determining the need for additional action. If a provider's adjusted error rate, after appeals, indicates no need for additional review, CMS will make that recommendation, and the provider will be monitored by the MAC as they would be had they passed the TPE process and been released from review, https://www.cms.gov/files/document/updated-tpe-qas.pdf.

  - A member asked if MR uses the summary included with TPE. Yes, these summaries are reviewed and validated against the medical record documentation. AG reminded to email the Medical Review TPE mailbox for specific TPE concerns, J15HHPROBEANDEDUCATION@cgsadmin.com.

  - Concerns about a suspicious letter received concerning an OIG audit were raised, both Nykesha and Katie (NAHC) urged providers to be very cautious when responding to such requests given the uptick in scamming and other security threats as mentioned in a recent CMS weekly newsletter.

- Hot Topic Discussion: Change Request13342: Implementation Edits on Hospice Claims, https://www.cms.gov/regulations-and-guidance/guidance/transmittals/2024-transmittals/r12636otn.

  - CGS advised that there has not been a lot of issues reported surrounding the erroneous 17729 rejections/denials (CGS saw denials not rejections), however, the issue was researched internally and with CMS, which determined physicians were missing from or had incorrect records in the Hospice PECOS Physician File that is used for this edit. The file issues were corrected on July 16, 2024, and claims received since should not erroneously deny with this reason code. Within 30 days of this update, the Medicare Administrative Contractors (MACs) will begin the reprocessing of all claims with the following criteria: Rejected/denied with reason code 17729, Types of Bill 081X or 082X, Claims with 'From' dates on or after June 3, 2024. This information is also available on our Claims Payment Alert webpage, https://cgsmedicare.com/hhh/claims/fiss_claims_processing_issues.html. Many members reported they haven't seen denials yet.

KEEP, START, or CHANGE Roundtable

- **myCGS**: Members commented the portal works great and is preferred amongst other MACs. A question was asked if the issue with the viewing of remits has been resolved. At the time of the meeting, CGS advised there was information on the website concerning this matter that is available when providers click on the myCGS status bar. This issue has since been resolved. A question about finding e-letters was posed as well. There is a new filtering method that went live this year. One member offered the solution. Additional instructions are available in the myCGS User Manual, https://cgsmedicare.com/mycgs/mycgs_user_manual.html.

- **Website**: CGS advised a website clean-up project is underway removing broken links and outdated content.

- **Provider Contact Center**: No feedback.

  - AG member suggested that a DDE password reset option be available in DDE instead of having to call into EDI. Advice was given that there is an email option for CGS to reset passwords and the response is fast.

Suggested Topics

- **Proposed HOPE Assessment Tool:** Members raised concerns about the association with HOPE and quality reporting. Since the tool has yet to go live, slated for October 2025, CGS can't speak to the topic. Group was advised to be on the look out for the FY2025 Hospice Final Rule which normally is released in late July or early August for more information on the progress and launch of HOPE. Since the meeting date, the final rule was issued, https://www.cms.gov/medicare/payment/fee-service-providers/hospice/hospice-regulations-and-notices/cms-1810-f.

- **Are Hospice Agencies Using Mental Health Counselors or Marriage & Family Therapists:** Group asked if they've incorporated these provider types into their agencies. The feedback indicated providers have not added these provider types, however they would be interested in more education on the topic. CGS advised since these provider types were recently added, there is limited data and no reports of claim processing issues or denials.

- **Hospice Election Requirements Checklist:** Nykesha shared the updated Hospice Election Requirements webpage with the group, https://cgsmedicare.com/hhh/coverage/coverage_guidelines/election_requirements.html. They agreed this would serve as a checklist for providers. Group discussed election statements, and all agreed it is best to use the CMS models available, using the most recent. POE advised that regardless which model or template is used to ensure providers are including the requirements outlined on the referenced webpage.

- A question was asked about the use of DocuSign for signatures. Please refer to the following guidance concerning signatures, https://cgsmedicare.com/partb/pubs/news/2013/0913/cope23262.html. Providers are reminded to check with state regulations and guidelines on this matter as well. The more stringent regulation applies.

Future Tasks

- **Annual Direct Data Entry (DDE) Recertification –** Ariel advised AG members there is an article with instructions available on the provided link. If you want to continue to have access to DDE, this will need to be completed by 8/31/24. If not completed in time, your DDE access will be terminated. Fax is the only way listed on the form, but users may also mail to J15 - Correspondence, CGS, PO Box 20018, Nashville TN 37202.

  - https://cgsmedicare.com/hhh/pubs/news/2024/07/cope158856.html

- **Review of Upcoming Educational Material**

  - Monthly Welcome Week for New Providers

- Notes: No feedback
- **Identify Collaboration Opportunities**
  - Please identify and share collaboration opportunities for education/outreach.
  - Please continue to attend, provide feedback and suggest future topics, https://www.cgsmedicare.com/medicare_dynamic/wrkshp/pr/hhh_report/hhh_report.aspx
- **Customer Experience Survey**
  - Group reminded to take advantage of surveys when visiting our webpage and/or utilizing resources.
  - Customer Experience Page Launch
    - https://www.cgsmedicare.com/hhh/pubs/reviews.html

CGS Data Analysis

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

CGS Home Health & Hospice Data Analysis: September 2023 – May 2024

Sept 2023-May 2024

Month	# of HH Claims Submitted	Total # of HH CSEs	HH CSE Error Rate	# of Hospice Claims Submitted	Total # of Hospice CSEs	Hospice CSE Error Rate	# of HH+H Claims Submitted	Total # of HH+H CSEs	HH+H CSE Error Rate
Sep-23	112,210	20,085	17.90%	95,034	11,375	11.97%	207,244	31,460	15.18%
Oct-23	118,827	20,912	17.60%	96,909	11,831	12.21%	215,736	32,743	15.18%
Nov-23	122,753	21,090	17.18%	98,831	12,907	13.06%	221,584	33,997	15.34%
Dec-23	117,093	20,399	17.42%	98,533	11,640	11.81%	215,626	32,039	14.86%
Jan-24	141,097	23,443	16.61%	106,035	13,808	13.02%	247,132	37,251	15.07%
Feb-24	117,334	25,664	21.87%	101,118	12,974	12.83%	218,452	38,638	17.69%
Mar-24	122,366	29,121	23.80%	99,551	16,761	16.84%	221,917	45,882	20.68%
Apr-24	129,167	23,001	17.81%	104,015	10,819	10.40%	233,182	33,820	14.50%
May-24	129,438	25,664	19.83%	106,597	14,319	13.43%	236,035	39,983	16.94%
Total	1,110,285	209,379	18.86%	906,623	116,434	12.84%	2,016,908	325,813	16.15%

Hospice Claim Submission Error (CSE) Data: September 2023 – May 2024

Rank	Reason Code	Billing Error	# Of Errors
#1	37402	Hospice sequential billing error	17,942
#2	U523A	Hospice election period & Medicare Advantage Period that is Value-Based Insurance (VBID)	9,217
#3	U5106	NOE falls within current hospice election	8,173
#4	38200	Duplicate claim	7,886
#5	U5181	OCC 27 required with cert date falls within DOS	4,885

Hospice Medical Review (MR) Denial Data: September 2023 – May 2024

Rank	Reason Code	Denial Reason	# Of Denials
#1	5PM01	Terminal prognosis not supported	759
#2	5PX06	Notice of election is invalid	322
#3	56900	Medical records not received/not received timely	63
#4	5PC08	Face-to-face encounter requirements not met	30
#5	5PC01	Physician narrative missing/invalid	29

CGS ADVISORY GROUP NEXT MEETING DATE

October 15, 2024 – Home Health & Hospice Combined (Microsoft Teams)