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 18, 2016

Facilitator: LJ Smith, Senior Provider Relations Representative

Attendees:

- Mary Alexander
- Jane Arnold
- Damon Blue
- Sonya Brown
- Charles Cataline
- Sue Ann Fager
- Janet Creason
- Colleen Deighan
- Latisha Fyffe
- Karen Giacomo
- Denise Gibson
- Dawn GoodlingJann Gravina
- Alyce Kalb
- Robert Kaliszewki

Janet Lazich

- Laura Mariucci
- Julie McTeague
- Kathy Nolan
- Christine Rasmussen
- Michael Shoemaker
- Regina Shorts
- Shawn Stack
- Christy Stansfield
- Katie Stevens
- Kyung-Hee Swihart
- Rita Tarvin
- Shelli Todd
- Dave Walchanowicz
- Jean Wendland Porter

CGS Staff:

- Annie Scriven
- Judy Thomas

AGENDA ITEMS

Welcome - LJ Smith

Attendance/Roll Call - LJ Smith

Purpose and Goals

Provide 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 PCC to disseminate information to providers.

Hot Topics

 National Coverage Determination (NCD) and Local Coverage Determination (LCD)/ ICD-10 Claim Updates – Judy Thomas

The July 2015 Update to the Hospital Outpatient Prospective Payment System (OPPS) includes links to the definition of "campus", "remote locations of a hospital" and "satellite facilities of a hospital" as clarification on the use of HCPCS modifier PO.

- As of March 1, 2016, the revalidation of all LCD edits was completed by CGS. Any claims submitted after March 1 that receive a denial should be correct. Providers should use their appeal rights if they do not agree with the denied services.
- NCDs are still being reviewed at the CMS and contractor levels and clarification will be forwarded as they are resolved.





New Business

Molecular Pathology - Derita Wardell

Current MoIDX Requirements	
No descriptions required	81161-81383, 81500-81595, 88380-88381 G0452
Descriptions required (Tier II and NOC codes)	81400-81479, 81599, 84999, 85999, 86849, 87999, 88199,88299, 88399

- Cardiac Defibrillator Claims (NCD 20.4) Judy Thomas
 - Reason codes 59182, 59183, and 59112-59115 are set to suspend to location SM5DEF.
 Claims will be processed when the NCD policy and edit is corrected by CMS.
- Skilled Nursing Facility (SNF) Special Wage Index Indicator Judy Thomas
 - Due to the volume of claims affected, adjustments are not expected to be completed until the end of April 2016.
- Distinct Procedural Services Modifiers {XE, XP, XS and XU} Annie Scriven
- CMS has not yet published any additional guidance on the proper use of these modifiers
 and reporting is still voluntary. Therefore, you may continue to report modifier 59. Any
 updates received from CMS will be announced via the CGS electronic mailing list and
 added to Hot Topics on our website.
- Modifier PO Annie Scriven
 - CMS updated this policy to include the Federal Register sections that define campus, remote locations of a hospital and satellite facilities of a hospital. CMS also published a list of FAQs. This information is available under Hot Topics on our website.
- EDI News LJ Smith
 - Password resets for Direct Data Entry (DDE), the 277 CA Edit Lookup Tool or security issues with accessing FISS, can be handled by e-mailing the CGS Security Administration Team at cgs.medicare.opid@cgsadmin.com or call 1.615.660.5444.
 Include the user ID that is experiencing problems and the first and last name of the user to which the ID is assigned.
- Hospital Billing requirements for Self-Administered Drugs Annie Scriven
 - The OIG Policy Statement related to this topic was forwarded to POE. Additional discussion and/or guidance is forthcoming.
- · Jimmo vs. Sebelius Annie Scriven
 - Suggestion: Education on how maintenance therapy is handled under medical review.
- Value-Based Programs and Quality Reporting for SNFs Annie Scriven
 - Suggestion: Education on the new reporting requirements for SNFs.
- · Open Accident File on the Common Working File (CWF) LJ Smith
 - Asked members to elaborate on this subject and communicate the issues to Part A POE.
- · myCGS 'Green Mail' LJ Smith
 - Enhancements to the myCGS Web portal are ongoing. The present focus is a 'Green Mail' initiative. Highlights include:
 - Registered users may access Part A Medical Review (MR) decision letters for major joint replacements via myCGS. Other types of decision letters will be made available in the future
 - Coming soon: the ability to submit Cost Reports via myCGS.





Website Enhancements - Judy Thomas

Upcoming:

- Medicare Secondary Payer (MSP) Tool This self-service tool is currently available on the Home Health & Hospice site and will be adapted for Part A. Users will be able to answer a series of questions to determine if Medicare is the primary or secondary payer.
- UB-04 Billing Examples Paper claim examples for each facility type will be added to the Browse by Facility Type Web pages.

New:

 MLN Connects® National Provider Call Program and Open-Door Forums graphics were added to the Part A home page.

Suggestions:

- Medical devices and which modifiers to append
- Top Billing Error tips
- Credit calculator for calculating medical devices
- Additional myCGS 'Green Mail' initiative notifications

Calendar of Events and Training Needs - LJ Smith

- POE will continue to offer basic courses as refreshers and to aid new staffs.
- Rural Health Clinic (RHC)/Federally Qualified Health Center (FQHC) 2016 Updates Ask-the-Contractor Teleconference (ACT) was conducted on March 29, 2016.

Suggestions:

- Articles:
 - > Overview explaining how claims travel through the CGS system and the locations
- Teleconferences:
 - > Quarterly Critical Access Hospital (CAH) updates
- Webinars:
 - Advance Beneficiary Notice of Noncoverage (ABN) and Notice of Medicare Noncoverage (NOMNC)
 - > Additional Documentation Request (ADR) and appeals processes
 - > Clinical trials
 - > myCGS
- In-Person Events:
 - > 2016 'A Day With Medicare' events in Ohio and Kentucky

Provider Contact Center (PCC) Training Opportunities – LJ Smith

- Indirect Medical Education (IME) training conducted on March 24, 2016.
- CMS MLN Matters® article MM9168: https://www.cms.gov/Outreach-and-Education/ Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM9168.pdf

Open Discussion

 Suggestion: Add the End Stage Renal Disease (ESRD) eligibility date to myCGS since it is not available in DDE – As required by CMS, the information available via





the Interactive Voice Response (IVR) and myCGS is obtained via CMS' HIPAA Electronic Transaction System (HETS). Unfortunately, the ESRD eligibility date is not currently available from HETS.

- Suggestion: PCC improvements:
 - Schedule appointment times to review multiple claims Based on current CMS requirements, this service is unavailable.
 - Assist with more than three claims a call CGS' policy is, and CMS concurs, that only three inquiries will be taken per call.

Example: one HIC/three documents or three HIC/one date of service, etc. Information on Call Center rules and guidelines is available in the CMS Medicare Contractor Beneficiary and Provider Communications Manual (Pub. 100-09), chapter 6: https://www.cms.gov/ Regulations-and-Guidance/Guidance/Manuals/Downloads/com109c06.pdf

 For 2016, members agreed to continue meeting from noon – 3:00 p.m. EST for each scheduled meeting. The 2016 meeting dates are available on the CGS website at: http://www.cgsmedicare.com/parta/education/POEAG.html.

Next Meeting – Friday, June 17, 2016 via teleconference

Adjourn



