

Provider Partnership Program (PPP) E-mail Notification Archives

November 2005

November 1, 2005

Medicare Prescription Drug Coverage Ask the Experts (Session II)

A live web cast will be held TODAY ~ Wednesday, November 2, 2005, at 2:00 PM EST. Go to

<http://www.cms.hhs.gov/partnerships/news/mma/webcasts.asp> for viewing instructions and additional information. This live event will feature Questions & Answers on Medicare Prescription Drug Plans Related to:

- Original Medicare
- Employer or Union Coverage
- Joining a Prescription Drug Plan
- Medicaid
- Medigap
- Medicare Advantage

There will also be a discussion on the Training Resources available on Medicare Prescription Drug Coverage.

If you cannot attend the live presentation, you can view the web cast at <http://cms.archivevideo.com/>

Special Open Door Forum Recovery Audit Contractors: 3 Year Demonstration Project RESCHEDULE Notice

NEW DATE and TIME:

November 18, 2005

1:00 -3:00 PM (Eastern Time)

CMS has been contacted by several external stakeholders interested in attending this Special Open Door Forum (ODF), who have noted that the previously scheduled meeting date conflicts with other national meetings.

In order to better ensure health care provider, supplier, and beneficiary advocate participation, the ODF will be **rescheduled for Friday, November 18, 2005.**

The Centers for Medicare & Medicaid Services (CMS) recently implemented a new demonstration project using Recovery Audit Contractors (RACs) as part of CMS' efforts to ensure accurate payments. Under the conditions of this three-year demonstration project, the RACs will review Medicare claims to identify improper-Medicare payments that have been made to healthcare providers and that were not detected through the prepayment review process. The RACs will review claims processed in the states of California, Florida and New York.

CMS is holding this Special Open Door Forum to provide a broad audience of health care providers, suppliers, and beneficiary advocates, with an opportunity to review the purpose and scope of this demonstration project, to allow for further public discussion on the roles and responsibilities of the RACs, and to give a better understanding of how they will conduct their operations during this three-year demonstration. The forum will begin with an update of the RAC demonstration, and will then transition into an open question and answer period with CMS policy experts and with the RAC contractor representatives from the three states.

We look forward to your participation.

Open Door Participation Instructions:

Dial: 1-800-837-1935 & Reference Conference ID **1661424**:

Note: TTY Communications Relay Services are available for the Hearing Impaired. For TTY services dial 7-1-1 or 1-800-855-2880 and for Internet Relay services click here <http://www.consumer.att.com/relay/which/index.html>. A Relay Communications Assistant will help.

ENCORE: 1-800-642-1687

"Encore" is a recording of this call that can be accessed by dialing 1-800-642-1687 and entering the Conf. ID # **1661424**.

The recording begins November 21st, and expires after 4 business days.

For automatic emails of Open Door Forum [schedule updates](#) (Listserv registration) and to view Frequently Asked Questions please visit our website at: www.cms.hhs.gov/opendoor.

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November 2, 2005

CMS ANNOUNCES 2.8 PERCENT INCREASE IN MEDICARE HOME HEALTH PAYMENT RATES

Centers for Medicare & Medicaid Services (CMS) Administrator Mark B. McClellan, M.D., Ph.D., today announced a 2.8 percent increase in Medicare payment rates to home health agencies for calendar year 2006. The increase will bring an estimated extra \$370 million in payments to home health agencies next year.

Medicare pays home health agencies through a prospective payment system (PPS), which pays at higher rates to care for those beneficiaries with greater needs. Payment rates are based on relevant data from patient assessments conducted by clinicians as already required for all Medicare-participating home health agencies.

Click here to view the full press release:

<http://www.cms.hhs.gov/media/press/release.asp?Counter=1707>

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New Information Available on the Physician Voluntary Reporting Program (PVRP)

Medicare is making it easier for physicians to participate in a voluntary program to report evidence-based, consensus quality measures--an important step toward supporting higher quality physician care. In support of its **Physician Voluntary Reporting Program (PVRP)**, the Centers for Medicare & Medicaid Services' (CMS) has just launched a new web page at <http://www.cms.hhs.gov/providers/p4p/> on the CMS website. The **new PVRP web page** has links to CMS resources to assist physicians and other health care providers in understanding this new voluntary reporting program and the use of G-codes to report data.

In addition to providing quick access to related press releases, fact sheets, program instructions, and Frequently-Asked Questions, the web page will also link to a **Medlearn Matters** article (MM4183) entitled: *Physician Voluntary Reporting Program Using Quality G-codes*, which is now available on the Medlearn Matters webpage at:

<http://www.cms.hhs.gov/medlearn/matters/mmarticles/2006/MM4183.pdf>. This

article provides additional details for health care professionals on this important new CMS initiative!

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I thought it was important that you be aware of this information as you may get questions about it from your patients.

Medicare will mail people with Medicare and full Medicaid coverage an auto-enrollment notice **on yellow paper by November 5th** to inform them about the change in their drug coverage from Medicaid to Medicare. The notice explains the following:

- that these people will be enrolled in a Medicare Prescription Drug Plan if they don't join one by the end of the year;
- what plan Medicare will enroll them in;
- their costs in the plan; and
- that starting January 1, 2006, Medicare will help pay for their prescription drugs instead of Medicaid.

The notice includes a one-page letter, and two pages of questions and answers about Medicare prescription drug coverage. The notice is available at

<http://www.cms.hhs.gov/medicarereform/Enrollment-Q&A-10-20-05-with-cover-sheet.pdf>

A fact sheet describing the mailing of the auto-enrollment notice is available at

<http://www.cms.hhs.gov/media/press/release.asp?Counter=1705>.

Best regards ~ Valerie

November 3, 2005

Hello everyone. I know I sort of showered you with various e-mails yesterday and here I am starting again ~ but there's so much going on in the Medicare world! I'll try and condense things for you today. In this e-mail, I've included information on ~

- 1. Medicare Physician Fee Schedule**
- 2. Hospital Outpatient PPS**
- 3. The Competitive Acquisition Program (CAP)**
- 4. New Beneficiary-Related Publications**

Enjoy!

CMS ANNOUNCES PAYMENT UPDATE AND POLICY CHANGES FOR MEDICARE PHYSICIAN FEE SCHEDULE

The Centers for Medicare & Medicaid Services (CMS) expects to pay approximately \$57.6 billion to 875,000 physicians and other health care professionals in 2006, according to a final rule released today that will update payment rates and revise payment policies under the Medicare Physician Fee Schedule. The final rule expands Medicare coverage of glaucoma screening; expands access for rural beneficiaries enrolled in Medicare Advantage plans to services of federally qualified health centers (FQHCs); adopts a modified approach to reforming payment for multiple imaging procedures performed on a beneficiary at one session; and revises payment for inhalation therapy and end stage renal disease (ESRD) treatment.

The physician fee schedule specifies payment rates to physicians and other providers for more than 7,000 health care services and procedures, ranging from simple office visits to complex surgery. The fee schedule is updated on an annual basis according to a formula specified by statute that takes into account the rate of growth in overall Medicare spending for physicians' services in recent years.

The final rule indicates that, based on the update formula, payment rates per service for physicians' services will be reduced by 4.4 percent for 2006.

Click here to view the full press release:

<http://www.cms.hhs.gov/media/press/release.asp?Counter=1709> .

Click here to view the display version of the final rule (CMS-1502-FC):

<http://www.cms.hhs.gov/physicians/pfs/ama.asp?URL=/physicians/pfs/CMS-1502-FC.pdf> . Read through the "Copyright Statement for the National Physician Fee Schedule" and select Accept.

Click here to view more information for Physicians: <http://www.cms.hhs.gov/physicians/> . The final rule (CMS-1502-FC) can be found in the Highlights section.

MEDICARE ANNOUNCES PAYMENT RATES AND POLICY CHANGES FOR HOSPITAL OUTPATIENT SERVICES IN 2006

BENEFICIARY COINSURANCE RATES CONTINUE TO FALL

Acute care hospitals will receive a 3.7 percent inflation update in Medicare payment rates in 2006 for outpatient services under a final Outpatient Prospective Payment System (OPPS) rule announced today by the Centers for Medicare & Medicaid Services (CMS) that also continues to lower the coinsurance rates that patients in Medicare have to pay for outpatient services.

Sole community hospitals in rural areas will receive an additional 7.1 percent payment adjustment, a move that stems from a study of rural hospital costs authorized by the Medicare Modernization Act of 2003 (MMA). This adjustment, which is higher than the 6.6 percent in the proposed rule, will benefit about 400 sole community hospitals.

Click here to view the full press release:

<http://www.cms.hhs.gov/media/press/release.asp?Counter=1711> .

Click here to view the display version of the final rule with comment period (CMS-1501-FC): <http://www.cms.hhs.gov/providers/hopps/2006fc/CMS-1501-FC.pdf> . To view the final rule and the supporting data files, click here:

<http://www.cms.hhs.gov/providers/hopps/2006fc/default.asp>

Click here to view more Hospital information:

<http://www.cms.hhs.gov/providers/hospital.asp> . The final rule (CMS-1501-FC) can be found in the Highlights section. For more Hospital Outpatient Prospective Payment System information, go to <http://www.cms.hhs.gov/providers/hopps/default.asp> .

MEDICARE ANNOUNCES NEW COMPETITIVE ACQUISITION PROGRAM

Physicians who administer certain drugs – including oncology drugs – in their offices to Medicare beneficiaries will have the option of obtaining many of these drugs under a new competitive acquisition program (CAP) starting on July 1, 2006. In the refinements CMS is announcing today, certain aspects of the CAP are being revised to improve the bidding process, increase the number of drugs that can be furnished under the CAP, improve access to newly approved drugs, clarify how unused drugs should be treated under CAP, and establish a framework by which vendors may enter into arrangements with CAP physicians for the collection of coinsurance and related information.

Most revisions to the CAP have been included in the final Medicare Physician Fee Schedule rule. In a separate rulemaking to be released in the future, CMS will address the implications of the negotiated sales prices of drugs furnished by vendors under the CAP for calculating the Average Sales Price (ASP) used to determine the payment rates for drugs furnished by physicians who choose not to participate in the CAP.

The CAP, which was mandated by the Medicare Modernization Act of 2003 (MMA) is a voluntary program that offers physicians an option to acquire drugs from vendors who are selected in a competitive bidding process. The vendors would then be responsible for billing the program and collecting any applicable deductible and coinsurance from beneficiaries for drugs included in the CAP. Physicians who choose to participate in the CAP will continue to be paid for the costs of administering the drugs. This program could save physicians time and paperwork and, in the long term, could lower drug costs for beneficiaries and the Medicare program.

The CAP applies only to certain drugs covered under Medicare Part B which are administered to a Medicare beneficiary in the physician's office. This rule does not apply to drugs included in the Medicare prescription drug benefit (Medicare Part D) which goes into effect January 1, 2006.

The specific actions CMS is announcing today include the following:

- Establishing processes for approved vendors to furnish additional drugs under the CAP.

- Establishing processes for approved vendors to furnish newly approved drugs under the CAP.
- Improving consistency between how the CAP policy and Medicare Part B drug policy on unused drugs.
- Updating the list of CAP drugs to incorporate the latest changes in the drug marketplace.
- Establishing a framework for vendors to enter into arrangements with CAP physicians for the collection of coinsurance, issuing advance beneficiary notices, and other appropriate activities, provided such agreements comply with Stark and all applicable anti-fraud provisions.

Click here to view the full press release:

<http://www.cms.hhs.gov/media/press/release.asp?Counter=1713> .

Click here to view the display version of the 2006 Physician Fee Schedule final rule with comment (CMS-1502-FC):

<http://www.cms.hhs.gov/physicians/pfs/ama.asp?URL=/physicians/pfs/CMS-1502-FC.pdf> . Read through the "Copyright Statement for the National Physician Fee Schedule" and select Accept.

Click here to view more information about the Competitive Acquisition Program for Part B Drugs and Biologicals: <http://www.cms.hhs.gov/providers/drugs/compbid/default.asp>. The 2006 Physician Fee Schedule final rule with comment (CMS-1502-FC) can be found in the Highlights section.

BENEFICIARY-RELATED PUBLICATIONS

The following publications are now available to order. Go to <http://pubordering.cms.hhs.gov/maillinglist> to place your order. These publications can be found by selecting the current button and choosing beneficiary-mma off the drop down menu.

- | | |
|---|---|
| 1. Publication Number: 10050-29
Tennessee (icn 006601) - 2005" | Title: "Medicare and You 2006- Alabama + |
| 2. Publication Number: 10050-14
006589) - 2005" | Title: "Medicare and You 2006- Arkansas (icn |
| 3. Publication Number: 10050-09
006586) - 2005" | Title: "Medicare and You 2006- Colorado (icn |
| 4. Publication Number: 10050-05
(006582) - 2005" | Title: "Medicare and You 2006- Idaho + Utah |
| 5. Publication Number: 10050-4S
(icn 006614) - 2005" | Title: "Medicare and You 2006- Illinois (Spanish) |
| 6. Publication Number: 10050-15
Kentucky (icn 006590) - 2005" | Title: "Medicare and You 2006- Indiana and |
| 7. Publication Number: 10050-13
006509) - 2005" | Title: "Medicare and You 2006- Kansas (icn |
| 8. Publication Number: 10050-18
006593) - 2005" | Title: "Medicare and You 2006- Louisiana (icn |

9. Publication Number: 10050-30 Title: "Medicare and You 2006- Mid Atlantic (Deleware, DC, MD) (icn 006602) - 2005"
10. Publication Number: 10050-16 Title: "Medicare and You 2006- Missouri (icn 006591) - 2005"
11. Publication Number: 10050-1S Title: "Medicare and You 2006- New Jersey, Puerto Rico, VI,Atlantic-Eruo Mil (Spanish) (icn 006611) - 2005"
12. Publication Number: 10050-2S Title: "Medicare and You 2006- New York City Vicinity (Spanish) (icn 006612) - 2005"
13. Publication Number: 10050-34 Title: "Medicare and You 2006- North Carolina (icn 006604) - 2005"
14. Publication Number: 10050-7S Title: "Medicare and You 2006- Northern and Central California (Spanish) (icn 006642) - 2005"
15. Publication Number: 10050-8S Title: "Medicare and You 2006- Northern Florida (Spanish) (icn 006643) - 2005"
16. Publication Number: 10050-2S Title: "Medicare and You 2006- South Carolina (icn 006597) - 2005"
17. Publication Number: 10050-6S Title: "Medicare and You 2006- Southern California (Spanish) (icn 006616) - 2005"
18. Publication Number: 10050-3S Title: "Medicare and You 2006- Southern Flordia (Spanish) (icn 006613) - 2005"
19. Publication Number: 10050-19 Title: "Medicare and You 2006- Texas (icn 0066594) - 2005"
20. Publication Number: 10050-5S Title: "Medicare and You 2006- Texas (Spanish) (icn 006615) - 2005"
21. Publication Number: 10050-36 Title: "Medicare and You 2006- Vermont + Massachusetts (icn 006606) - 2005"
22. Publication Number: 10050-32 Title: "Medicare and You 2006- West Virginia (icn 006514) - 2005"
23. Publication Number: 10050-21 Title: "Medicare and You 2006- Western + Southern Ohio (icn 006510) - 2005"

For questions, e-mail MAILPUBS@CMS.HHS.GOV.

Best regards ~ Valerie

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November 9, 2005

The Medicare Durable Medical Equipment Regional Carriers (DMERCs) have posted a document on their websites to provide guidance to physicians and other treating practitioners involved in the prescription of Medicare covered Power Mobility Devices (PMD). PMDs include motorized wheelchairs and power operated vehicles, more commonly called scooters. This information was developed to assist physicians and treating practitioners in understanding their roles and responsibilities in this process, given Medicare's recent policy changes. To view the letter to physicians, link to one of the following DMERC websites:

Region A:

http://www.tricenturion.com/content/whatsnew_dyn.cfm

Region B:

<http://www.adminastar.com/News/DMERCNews/files/DocumentationMDletter.pdf>

Region C:

<http://www.palmettogba.com/palmetto/Providers.nsf/12a24b80b4b368c385256ecb00760037/85256d580043e7548525709a004bf310?OpenDocument>

Region D:

<http://www.cignagovernmentservices.com/MDCorner/Documentation/index.html>

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November 14, 2005

Hello everyone. We have recently released two new Medlearn Matters articles regarding Medicare Prescription Drug Coverage:

SE0570 - Important Information about Medicare Coverage of Drugs under Part B and the New Medicare Prescription Drug Coverage (Part D), and Vaccines Administered in a Physician's Office – The Ninth in the Medlearn Matters Series on the New Prescription Drug Plans -- <http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/SE0570.pdf>

SE0575 - Important Message to Nursing Home Administrators About Medicare Prescription Drug Coverage – The Tenth in the Medlearn Matters Series -- <http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/SE0575.pdf>

Take a look at them when you get a chance--I think you'll find them both interesting and helpful as we draw closer to the January 1, 2006 implementation date.

With best regards ~ Valerie

**Correct Coding Initiative (CCI) Edits
To Apply to Outpatient Providers that Furnish Rehabilitation Therapy
Services
Provider Training Conference Call with Question & Answer Session**

The Centers for Medicare & Medicaid Services' (CMS) Provider Communications Group will host a toll-free Provider training conference call about the CCI Edits as they will apply to providers of outpatient rehabilitation therapy services. Effective January 1, 2006, the outpatient providers impacted for the first time include:

- Skilled Nursing Facilities (SNFs), Inpatient, Part B (**TOB 22X**)
- Skilled Nursing Facilities (SNFs), Outpatient Part B (**TOB 23X**)
- Comprehensive Outpatient Rehabilitation Facilities (CORFs) (**TOB 75X**)
- Outpatient Physical Therapy and Speech-Language Pathology Providers (OPTs) also known as Rehab Agencies (**TOB 74X**)
- Home Health Agencies (HHAs), Part B, services not under a home health plan of treatment (**TOB 34X**)

The training will include a presentation on the basic CCI concepts and structure, as well as its application to outpatient provider services, including physical, occupational, and speech therapy services. A PowerPoint slide presentation will be posted to the Medicare Learning Network's *Coding Educational Resources Web Guide*

<http://www.cms.hhs.gov/medlearn/icd9code.asp> for you to download prior to the call so that you can follow along with the presenter, Pamela R. West, PT, DPT, MPH.

Following the presentation, providers will have an opportunity to ask questions of CMS subject matter experts concerning this topic.

The call will take place:

Date: Tuesday, **December 6, 2005**

Conference Title: **CCI Edits**

Time: **1:00 – 3:00 ET**

1. To register for the call participants need to go to:
 - https://ww4.premconf.com/webbrsvp/register?conf_id=4001635j
 - The call in number will be given after the registration is completed
 - **All call participants must register**
 - Registration for the call will end on December 5, 2005 at 5:00 pm ET
2. To view the time the call will start, registrants will need to select their time zone in the drop down box under "Time."
3. Scroll down to the second orange box and Select "**Click here to create a profile**"
4. Fill in the field with an asterisk (*)
 - *Email address
 - *Password (6 characters in length containing both numbers and letters)
 - *First name
 - *Last Name
 - *Phone number
 - *Time Zone: **your time zone**
 - *Completed click **Submit**
5. Next screen says, "Welcome, Participant Name". Answer the next set of questions:
 - *Choose your salutation
 - *What is your name?
 - *What is your organization?
 - *What is your email address?
 - *How many people are sitting with you?
 - *Submit
6. Click "**Confirm Registration**" to receive a confirmation email.

Online Evaluation Form:

We have developed an online evaluation form that can be quickly completed and submitted. We ask that participants complete this online evaluation form to help us make informed decisions to improve our training activities. The online evaluation form titled "Training Evaluation Form" can be found on the registration page, http://www.cms.hhs.gov/medlearn/cont_eval_form.asp. We look forward to hearing your comments.

In the interim, a Special Edition Medlearn Matters article, SE0545, posted on the Medicare Learning Network can be referenced prior to the call. The article outlines the changes in Medicare's payment processes for the CCI edits application to services furnished by the above-noted outpatient providers. SE0545 is available at the following link: <http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/SE0545.pdf>.

If you have questions, or require special accommodations, please contact Geanelle E. Griffith at geanelle.griffith@cms.hhs.gov or at (410) 786-4466.

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November 15, 2005

This is a reminder - **Beneficiary Enrollment for Medicare Rx Coverage Begins November 15**. Visit the Medicare Prescription Drug Coverage Information for Providers Web Page to ensure that you will:

- Be prepared; beneficiary enrollment begins November 15th and this new coverage could save your Medicare patients money on prescription drug costs
- Have resources available that will help you respond to questions from your Medicare patients
- Stay informed on all the latest news and information regarding the new drug coverage

Please bookmark www.cms.hhs.gov/medlearn/drugcoverage.asp; it has everything you need to know to help your Medicare patients make this important choice.

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The Centers for Medicare & Medicaid Services (CMS) reported today that quality of care has improved significantly in hospitals participating in the Premier Hospital Quality Incentive demonstration, a groundbreaking Medicare pay-for-performance demonstration project.

Medicare is awarding \$8.85 million to hospitals that showed measurable improvements in care during the first year of the program. Improvement in these evidence-based quality measures is expected to provide long term savings, because of their demonstrated relationship to improved patient health, fewer complications and fewer hospital readmissions.

Please click here to view the full press release:

<http://www.cms.hhs.gov/media/press/release.asp?Counter=1729>

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November 18, 2005

Please be aware that effective October 1, 2005, the Centers for Medicare & Medicaid Services will no longer allow freestanding providers that enter the Medicare program to select their FI. The attached Fact Sheet provides additional details.

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Fact Sheet New
Providers.doc (...)

November 22, 2005

“A National Day of Conversation - *Friends and Family First*”

This holiday season is a great time to pull up a chair and have a conversation with a friend or loved one about the new Medicare Prescription Drug Coverage.

The day after Thanksgiving, November 25, will be a national day of conversation about the new Medicare prescription drug coverage. Here's how to get started:

Use these **five simple steps** to help guide you through your conversation -

1. Understand the basics of Medicare Prescription Drug Coverage.
2. Determine how your friend or family members gets prescription drug coverage.
3. Gather some information.
4. Review the plan choices.
5. Help them enroll.

For more information on the "**National Day of Conversation: Friends and Family First,**" please see the attached pdf. Internet links to helpful information are included.



FamilyFirst
51118c-N.pdf (4 M..)

This PDF is available at the following link to the CMS web site:

[Five Simple Steps: "A National Day of Conversation - Friends and Family First"](#)
(PDF, 4.1 MB)

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November 23, 2005

The following is information on the posting on FedBizOpps of the ESRD Network Organization draft statement of work for comment. As a valued partner in the renal community, we wanted to make sure you were aware of this opportunity for comment. CMS encourages you to take this opportunity to help set the future direction of the ESRD Network Program.

-End Stage Renal Disease Network Organizations - Draft Statement of Work

The ESRD Network Organization Draft Statement of Work is posted on FedBizOpps for review and comment.

The Centers for Medicare & Medicaid Services is issuing the attached draft Statement of Work (SOW) and Evaluation Criteria for the 18 End Stage Renal Disease Network Organizations (ESRD). The draft SOW and Evaluation Criteria are being issued solely for the purpose of obtaining industry comment. Therefore, this is not a solicitation for proposals. Any resulting industry comments will be taken into consideration and may be included in the final RFP. Interested parties may submit comments during the comment period beginning November 17 through December 7, 2005. Comments shall be sent to: ESRD_SOW@cms.hhs.gov utilizing the format provided on FedBizOpps. CMS anticipates that a final RFP for the ESRD Network Organizations will be posted in FedBizOpps sometime in late February or early March 2006.

To view the entire Draft Statement of Work, please click here:

<http://www.fedbizopps.gov/spg/HHS/HCFA/AGG/Reference%2DNumber%2DHHS5002006ESRD/Synopsis.html>

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November 25, 2005

Good Friday everyone ~ I truly hope you all enjoyed a wonderful Thanksgiving. Personally, I'm thankful for the tremendous help that all of you lend CMS in getting out our messages to your members and giving us your extremely helpful feedback on our draft educational products. In addition to wanting to extend that message to you, I thought you might be interested in this batch of Medlearn Matters articles that we have just posted--especially the first two: SE0579 - Hurricanes Katrina and Rita – Transportation of Evacuees with Medical Needs, and SE0580 - Influenza/Flu Season and Available Resources for Providers.

New:

SE0579 - Hurricanes Katrina and Rita – Transportation of Evacuees with Medical Needs
<http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/SE0579.pdf>

SE0580 - Influenza/Flu Season and Available Resources for Providers

<http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/SE0580.pdf>

MM3845 - MMA - Enrolling Indian Health Service (IHS) Facilities as Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Suppliers

<http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/MM3845.pdf>

MM4161 - Changes to the Laboratory National Coverage Determination (NCD) Edit Software for January 2006

<http://www.cms.hhs.gov/medlearn/matters/mmarticles/2006/MM4161.pdf>

MM4164 - Resubmission of Inpatient Psychiatric Facilities (IPF) Prospective Payment System (PPS) Claims with Chronic Renal Failure Comorbid Condition

<http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/MM4164.pdf>

Revised:

MM4019 - MMA – Changes to Chapter 29 – General Appeals Process in Initial Determinations (Revised: 11/18/2005)

<http://www.cms.hhs.gov/medlearn/matters/mmarticles/2005/MM4019.pdf>

MM4023 - Stage 2 Requirements for Use and Editing of National Provider Identifier (NPI) Numbers Received in Electronic Data Interchange Transactions, via Direct Data Entry Screens or Paper Claim Forms (Revised: 11/21/2005)

<http://www.cms.hhs.gov/medlearn/matters/mmarticles/2006/MM4023.pdf>

Enjoy your weekend ~ Valerie

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