

December 2011

KUDOS to... WPS 2011 PCSP of the Year Award!!!!

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Wisconsin Physicians Service (WPS), the Jurisdiction 5 A/B Medicare Administrative Contractor, was selected as the winner of the third annual Provider Customer Service Program (PCSP) of the Year.

The honor was announced by Jonathan D. Blum, Deputy Administrator for the Centers for Medicare & Medicaid Service and received by Ms. Jared Adair, Senior Vice President of Medicare Operations at WPS, during the Contractor Executive Meeting in Baltimore, Maryland on November 30, 2011.



WPS was acknowledged for excellence in implementing a comprehensive, effective and efficient PCSP approach that included enhancements to its customer service contact center model, self-service technology to providers, and technology to support customer service representatives. Also, WPS embraced the goal of PCSP integration through the use of a variety of PCSP resources (i.e., data analysis, training, technology and provider education) to exceed program requirements, resulting in consistent performance, savings to the operation and outstanding collaboration.

Congratulations to the Jurisdiction 5 Provider Contact Center staff, Provider Self-Service Technology staff and the Provider Education and Outreach staff for winning this prestigious award!



Website Survey and Customer Satisfaction

Submitted by: Alikia Mack



"Snowflakes are one of nature's most fragile things, but just look what they do when they stick together."

- Verna M. Kelly

The Medicare Modernization Act of 2003 requires Medicare contractors to maintain a website to educate providers on the various aspects of the Medicare program. To see how well these websites are doing, the Centers for Medicare and Medicaid Services (CMS) began measuring customer satisfaction with contractor websites using a nationally recognized website satisfaction survey. Here are a few questions and answers about the survey and how you make a difference.

What is the Medicare Website Satisfaction Survey?

The Medicare Website Satisfaction Survey is a tool that measures customer (provider/suppliers) satisfaction with Medicare contractors' websites and is managed by ForeSee Results. The survey looks at various elements and functions of the website such as Content, Functionality, Navigation, Site Performance, and Search. The survey also asks direct questions about customer satisfaction and future behavior.

Who is ForeSee Results?

ForeSee Results is a leading national company for the measurement of customer experience with electronic communications. ForeSee Results captures and analyzes the customer data and manages the day-to-day

operation of the website satisfaction survey. Using the methodology of the American Customer Satisfaction Index (ACSI), ForeSee Results identifies potential areas for improvement and touch points that drive satisfaction. The ACSI is a national economic indicator of customer satisfaction and was founded at the University of Michigan.

Why are these results important?

The results of Website Satisfaction Survey are important to the contractor because it indicates how well the website is doing in the eyes of the customer/provider in communicating information. It is one indicator, which identifies how satisfied the provider is with the contractor's ability to effectively communicate Medicare program information.

It is important to understand the website satisfaction survey scores are nationally benchmarked. This means the marks from the contractors' surveys can be reliably compared to the hundreds of other similar website surveys at organizations nationwide. With all the federal requirements dictating the design of government agencies' and contractor, the fact that contractors' scores compare favorably to the private sector is a major accomplishment.

It is important for these websites to provide information effectively and efficiently so providers will continue to use the contractor's website for their information needs instead of calling the Provider Contact Center (PCC).

How does my work support Website Satisfaction Survey results?

The work performed at the contractor supports the Website Satisfaction Survey with the information available and the services offered through the contractor's website. Having providers educate themselves by using the contractor's website increases their satisfaction while reducing the number of customer service calls.

Often, the Website Satisfaction Survey not only captures the provider's satisfaction with the contractor's website, but it can also capture the provider's experience with the contractor in other areas. For example, if a provider has a positive or negative experience when contacting the PCC, that experience may be reflected in a future website survey. It's one more reason to give providers a productive and positive experience whenever they contact you.

NHIC J14's 2011 Customer Service Week

Submitted by: Jeanne Winslow

For those of us in Customer Service, the first week of October represents a well-deserved week of recognition! Other departments may question why we deserve a whole week rather than just a day. So let's take a look at a day in the life of a Customer Service Representative.

There are days when it seems as though you're in a horse race... You put that headset on and the gates open, we're off and running! Forrest Gump's famous line comes to mind - "Life is like a box of chocolates! You never know what you're gonna get!". That audible beep signals your first call - is it an Acute Care Hospital, a SNF, LTCH, CAH, HHA or Hospice? Perhaps it's a Rehab, Psych or Dialysis Facility. Maybe it's a beneficiary that has been misdirected, an accountant, a lawyer or a biller that has never billed before! Are they calling to check on Eligibility, Overlaps or Timely Filing? Perhaps they want to know why they got paid or why they didn't, why so little or why so much! Is there an NCCI, LCD, or NCD edit? Is their claim denying for the 72-hour rule, Overlap, Consolidated Billing or Patient Status -- just to name a few!

Should we be sending it to Claims, BSO, Cash, Med Review? Is it a RAC, Appeal, Credit Balance or HIGLAS inquiry? Are we going to have to take a leisurely stroll through the World Wide Web as the provider peruses the CMS or Medicare websites?

Should they seek some extra help from POE, perhaps attend a teleconference or just read the billing guides? Maybe they need to add a modifier, remove a modifier, add a diagnosis or correct one, correct the units or the code. The problem could be with the CC, OC, OSC, VC, HCPC, Hipps, RUG, MDS, BSO,

PS&R, A&R, CB, PTAN, ANSI, POA, DOS, NPI, PRVN, DLYS, ESRD, IDE, DCN, MSP, OTAF, PE, HIC, DOB, DOD, INCR, SCRN, REV, LUPA, IVR, FISS, HIMR, CWF, INPL, OUTL, PPS, IPPS, OPPS,.....OMG, LOL! There are days when all you can do is just laugh, laugh out loud!



Because you will be blamed, yelled at, and occasionally sworn at. You will want to yell, scream and swear right back. Yet through it all, you will be courteous, helpful, understanding and polite. Then another call will come through and you will be thanked, congratulated, and most of all appreciated. Those are the moments that make this all worthwhile. It's a great feeling to hear that familiar provider's voice, the one that makes you smile -- the one that recalls something you said during a previous call, while you were filling the time waiting for the system to catch up and asks you how you're doing! For all the people we speak with throughout the course of a day, a week or a month, a few will capture your heart and you will always be looking forward to their next call!

Customer Service Appreciation Week came around pretty quickly this year it seems. It's not something we really think about ahead of time because customer service is just something we do. So to be recognized and appreciated is very uplifting. Our Manager and Business Leads did a great job of showering us with

kindness during the week. We enjoyed a Breakfast Buffet, a Pizza Party and some delicious ice cream for a tasty treat! We also were rewarded with Best Buy gift cards and movie tickets if you were "Caught in the Act" of providing exceptionally great service! During the week, we also celebrated Breast Cancer Awareness with a "Pink" Party, which included all things Pink...Pink Cookies, Pink Cupcakes, Pink Drinks and Pink Clothes!! Additionally, we received Breast Cancer Awareness T-Shirts and had some fun company pictures taken, which are proudly displayed in our lobby.

Customer service sent tasty treats to other departments during this week to thank them for their cooperation and assistance. We realize without their help we would not be able to do our job as efficiently as we do!

So the next time you're talking to a Customer Service Representative remember to say "Thank You" and be sure to express your appreciation. Oops! Got to go! The phones are ringing!

"The color of springtime is in the flowers, the color of winter is in the imagination" – Terri Guillemets

CMS Award Winners

Congratulations!!!

ROCSTAR:

The following individuals received the ROCSTAR awards in 2011:

Provider Written Inquiries – April 2011

Tashana Bray – Palmetto Legacy B

Provider Telephone Inquiries July 2011

Julie Green - WPS A/B MAC
Donna McCollum - WPS Legacy B
Gustavus Mead - NGS Legacy A
Christine Smith - CGS DME MAC

Provider Outreach and Education November 2011

Outreach Specialist Team: Liz Daniels, Jim Hardiman, Judie Roan,
Mindy Schuler and Denise Winsock – NHIC DME MAC

KUDOS:

The following individuals received Kudos awards for
June - October 2011:

October 2011

Patricia Humphrey – NHIC DME A

September 2011

Marcy Hammonds – Wisconsin Physicians Service Legacy Part B

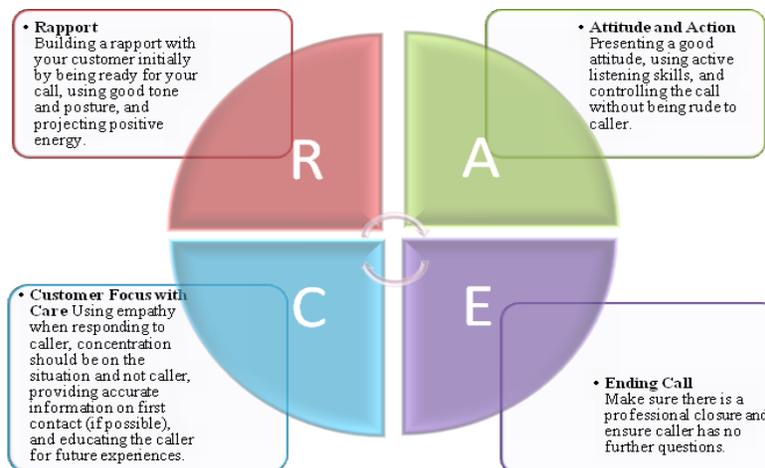
August 2011

Andrea Flemmer –NAS
Samantha Bohrer –WPS
Gabrielle Snell – Pinnacle Legacy Part A
Kristy Bailey –NAS Legacy Part A
Patty Baker –NHIC)

TWO MACs JOIN TOGETHER TO 'R.A.C.E.' to the Next Level of Excellence

Submitted by FCSO

In an effort to explore the best practices for handling difficult callers, First Coast Service Options, Inc. and Palmetto GBA combined efforts to conduct and promote positive interaction between the Customer Service Associates and potential irate callers. The first training session, 'R.A.C.E. to the Next Level of Excellence,' was held on September, 23 2011. Each contractor produced videos using their Customer Service Associates demonstrating a call with and without the R.A.C.E. model.



Based on the associates' feedback, the session was a resounding success. CSRs realized their experiences with difficult callers were universal and they now have a "best practice" to use to help foster a positive experience in handling these types of calls.

Coming Soon to the Medicare Learning Network® (MLN)!

The Medicare Billing Certificate Program for Part A Providers

AND

The Medicare Billing Certificate Program for Part B Providers



Providers can learn about the Medicare Program with a special focus on Medicare Billing specific to their billing or provider type. They will be able to receive a certificate in Medicare Billing from the Centers for Medicare & Medicaid Services (CMS)! Look for these programs to become available in early 2012.

MLN PRODUCT UPDATES:

Revised -- The "Medicare Physician Guide", ICN 005938, CD ROM Format. This guide includes the following information: an introduction to the Medicare Program, becoming a Medicare provider or supplier, Medicare reimbursement, Medicare services, protecting the Medicare Trust Fund, Medicare overpayments and Fee-For-Service appeals, and provider outreach and education. To place your order, visit the MLN Products page, scroll to the "Related Links Inside CMS," and select the "MLN Product Ordering Page."

Revised -- [Medicare Fraud & Abuse: Prevention, Detection, and Reporting](#), Fact Sheet, ICN 0006827, downloadable. This fact sheet is designed to provide education on preventing, detecting and reporting Medicare fraud and abuse. It includes definitions, as well as, information on laws, partnerships with other organizations and resources for additional information.

From the MLN: "Guidance on Completing the CMS-855A Enrollment Form" MLN Matters® Article Released

New – [MLN Matters® Special Edition Article #SE1135](#), "Guidance on Completing the CMS-855A Enrollment Form", Downloadable. This article is designed to provide education on how to complete the Medicare Enrollment Application for Institutional Providers, Form CMS-855A. It provides a brief guide that providers may use when completing the CMS-855A application. Please note, this article is not mandatory and does not ensure Medicare enrollment.

From the MLN: "Advanced Diagnostic Imaging Accreditation Enrollment Procedures" MLN Matters® Article Revised

Revised – [MLN Matters® Article #MM7177](#), "Advanced Diagnostic Imaging Accreditation Enrollment Procedures", Downloadable. This article is designed to provide education on the accreditation requirements for providers who submit claims for advanced diagnostic imaging services, as outlined in Change Request (CR) 7177. It was revised to add a reference to MLN Matters Article #SE1122 for additional information about these requirements.

From the MLN: "Important Reminders about HIPAA 5010 & D.0 Implementation" MLN Matters® Article

Reminder – [MLN Matters® Special Edition Article #SE1106](#), "Important Reminders about HIPAA 5010 & D.0 Implementation", Downloadable. This article is designed to provide education on how to prepare for the Health Insurance Portability and Accountability Act (HIPAA) 5010/D.0 implementation. It includes a list of assessment questions and educational materials to help providers prepare for the implementation.

From the MLN: "Important Update Regarding 5010 Implementation – Action Needed Now" MLN Matters® Article

Reminder – [MLN Matters® Special Edition Article #SE1131](#), "Important Update Regarding 5010 Implementation – Action Needed Now", Downloadable. This article is designed to provide education on the actions providers must take **NOW** to prepare for the Health Insurance Portability and Accountability Act (HIPAA) 5010/D.0 implementation. It includes important action steps and a list of questions that providers can use to determine whether they are at risk of not being able to meet the January 1, 2012, deadline and submit claims.

STATISTICAL CORNER

Medicare Provider Contact Center Performance Data

Where do you fit in?



FY 2011 STATISTICAL DATA

October 2010 – September 2011

OCM

Knowledge Skills - 95%
Customer Skills - 99%
Privacy Act - 98%

QWCM

Knowledge Skills - 97%
Customer Skills - 99%
Privacy Act - 99%

Top 5 Telephone Inquiries

Claim Denials
Eligibility/Entitlement
Claim Status
General Information
RTP/Unprocessable Claim

Top 5 Written Inquiries

Claim Denials
Appeals
Claim Status
General Information
RTP/Unprocessable Claim

Call Center Data

CSR Completion Rate - 95.5%
IVR Handle Rate - 66.9%
ASA – 64.2 seconds

Direct Monitoring

Correct – 93.32%
Incorrect – 0.88%
Incomplete - 5.81%

Top CSR Training Topics

Medicare Basics
Reference Resources
Medicare Claims Processing/Data Systems
Contractor Operations
PCSP Operation

STATISTICAL DATA

April 2011 - September 2011

OCM

Knowledge Skills - 95%
Customer Skills - 99%
Privacy Act - 98%

QWCM

Knowledge Skills - 97%
Customer Skills - 99%
Privacy Act - 99%

Top 5 Telephone Inquiries

Claim Denials
Claim Status
Eligibility/Entitlement
General Information
Financial Information

Top 5 Written Inquiries

Claim Denials
Appeals
Claim Status
General Information
RTP/Unprocessable Claim

Call Center Data

CSR Completion Rate - 95.3%
IVR Handle Rate – 68.7%
ASA – 67.2 seconds

Direct Monitoring

Correct – 92.42%
Incorrect – 1.02%
Incomplete - 6.55%

Top CSR Training Topics

Contractor Operations
Training Evaluation
PCSP Operation
Reference Resources
Medicare Basics

Highmark Medicare Services Toll-Free Consolidation

Submitted by Highmark

Customers contacting Highmark Medicare Services (HMS) have experienced a change, in both service and ease. On December 1, 2011, the toll-free numbers used to contact the various help desks within HMS were consolidated into a single toll-free point of entry. Customers no longer need to determine which help desk best resolves their issue. By calling our single line solution, customers are prompted to answer simple questions which assess the level of assistance needed to resolve their inquiry. Based on the caller's input, the call is delivered either to our sophisticated IVR or to one of our many subject matter experts.

The HMS solution includes the consolidation of our Claim Correction (Telephone Re-openings), Provider Enrollment, EDI, and the Part A/Part B Inquiry help desks into one Customer Service Center. Working collectively, these four units now provide a consistent approach to customer service and performance. As a result, the service and performance standards typically associated with the Customer Contact Center now apply to the full array of HMS help desks supporting our customers. To further enhance this solution, several improvements were made to the IVR, providing more self-service options and expanding the information provided on several of our existing applications.

As part of this initiative, we'll monitor a variety of performance metrics and customer feedback very closely. Working collaboratively with CMS, HMS has deployed the best possible customer experience while maintaining a high level of efficiency. By consolidating our toll-free numbers, HMS ensures customer satisfaction while supporting the service and performance our customers have come to expect.

"May your walls know joy, may every room hold laughter, and every window open to great possibility" - Mary Anne Radmacher

QTIPS For Quality Is On The Move Across MACs!!

Submitted by First Coast Service Options, Inc. (FCSO)

In previous editions, the Synergy newsletter featured FCSO's implementation and expansion of the QTIP program to other departments within its organization. The QTIP Program allows Customer Service Representatives (CSRs) and Written Analysts to engage in informal sessions to play the role of a Quality Auditor.

QTIPS for Quality is on the move and making strides in improving quality across MACs! FCSO, Cahaba GBA and Palmetto GBA partnered to introduce the program to their CSRs and Written Analysts. The QTIP inaugural conference call was held in October 2011 between FCSO and Cahaba GBA CSRs. QTIPS participants had very positive feedback and it seems to be a worthwhile collaboration.

Paul's Poem

Synergy may go
Collaboration remains
Strive for excellence



Lynn.er.gy

As the end of December approaches, we all naturally reflect on what happened in the past year and what changes may be made in the New Year. In the Division of Contractor Provider Communications we have been examining our oversight of the Provider Customer Service Program (PCSP) and how we can make the best use of our resources in the coming year. Our goal is to continuously improve Medicare provider satisfaction through the timely delivery of accurate and consistent information. This is realized through the oversight of the contractors' PCSPs and the tools CMS provides contractors, such as Quality Call Monitoring, Quality Written Correspondence Monitoring and the website satisfaction survey, among other things.

In looking at our work and ways to enhance our support of the contractors' PCSPs, I wanted to pass along some changes for 2012. To provide contractors relevant information in a timely manner, we are planning to post more frequently on the PCSP web pages on cms.gov at <https://www.cms.gov/FFSPProvCustSvcGen/> and <https://www.cms.gov/ContractorLearningResources/>. We are in the planning stages and will provide more information in the future, but the intent is to more regularly post information and links to resources that will assist contractors in serving providers and in sharing information with one another. Obviously, the information posted will not be official CMS guidance, but will simply be information and resources we believe will be helpful. We welcome your ideas and input. Please send feedback to providerservices@cms.hhs.gov. Some of the information already posted on these pages will continue to be available, so let us know what you like on these pages currently as well. Because of the resources that will be needed to work on the web page updates, we will no longer publish the *Synergy* newsletter. We hope that the enjoyment and information shared in *Synergy* over the last two and a half years will be enhanced by more frequent posting on the web pages.

One of the great pleasures of this position has been to recognize many deserving customer service representatives, correspondents and outreach and education specialists with ROCSTAR and Kudos awards. We are lucky to have so many dedicated contractor staff

that are committed to making a difference and genuinely take pride in serving the provider community.

With sadness, we have decided to discontinue the ROCSTAR and Kudos awards and focus on the PCSP of the Year award program. We realize that this may come as a disappointment to many of you and your associates, but we take great solace in knowing that exceptional work will continue. After all, the awards were not the cause of extraordinary work, but merely a reflection of how appreciated and valued our contractors are and always will be. We will continue the PCSP of the Year award program to recognize excellence in PCSP operations.



We believe that the PCSP of the Year award reflects the hard work of all of the PCSP staff at contractors, which contributes to the overall service given providers every day.

Speaking of the PCSP of the Year, I want to congratulate the PCSP team at the Wisconsin Physicians Service for winning the PCSP of the Year Award! We appreciate the hard work that staff in provider telephone and written inquiries, provider outreach and education, and provider self-service perform every day for the providers in Jurisdiction 5. Be sure to read about what makes the WPS PCSP staff an award winning team on the cover page. Also, please enjoy the other articles in this last edition of *Synergy*. Even though *Synergy* will no longer be published, know that we are dedicated to continuing the spirit of synergy and believe that "cooperative interaction among groups creates an enhanced combined effect."

I wish each of you a wonderful holiday season and a Happy New Year!

Lynne

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- Highmark
- NHIC



And to all contractors and past newsletter team members who have contributed in past Synergy Newsletters.

THANK YOU!