



MLN Matters®



Information for Medicare Fee-For-Service Health Care Professionals

MLN Matters Number: MM3376

Related Change Request (CR) #: 3376

Related CR Release Date: September 10, 2004

Effective Date: January 1, 2005

Related CR Transmittal #: 113

Implementation Date: January 5, 2005, unless otherwise indicated

Note: This article was updated on April 5, 2013, to reflect current Web addresses. All other information remains unchanged.

MMA – Implementation of Section 921 of the Medicare Modernization Act (MMA) – Provider Customer Service Program

Provider Types Affected

Physicians, providers, and suppliers

Provider Action Needed



STOP – Impact to You

CR3376 implements Section 921 of the Medicare Modernization Act (MMA). It creates the Provider Customer Service Program (PCSP) at most Medicare contractors.



CAUTION – What You Need to Know

Collectively, carriers and fiscal intermediaries (FIs) are referred to as contractors or Medicare contractors. Because of funding limitations, the Centers for Medicare & Medicaid Services (CMS) is implementing this instruction in phases. Currently, only carriers and some FIs will be implementing this program in January 2005.



GO – What You Need to Do

Refer to the *Background* and *Additional Information* sections below for full details on this requirement and check with your carrier/FI to see if they are participating in the first phase.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

Background

Medicare contractors are required to implement a PCSP designed to meet provider informational and educational needs.

The PCSP flows from provisions in Section 921 of the MMA that strengthen and enhance Medicare's ongoing efforts associated with provider inquiries and education. The PCSP is designed to improve accuracy, completeness, consistency, and timeliness by ensuring that providers' issues are addressed by staff with the appropriate levels of expertise.

The PCSP includes the following three principal components:

- Provider self-service technology
- Provider contact center (PCC)
- Provider outreach and education

Provider Self-Service Technology

- Self-service technology will enable the contact centers to handle the increasing volume of provider calls by allowing providers access to certain information without direct personal assistance from Medicare contractor staff. Contractors will require providers to use the interactive voice response (IVR) systems to access information about claims status, beneficiary eligibility, and remittance advice code definitions.

Provider Contact Center

The PCC will respond to inquiries from the following:

- Telephone calls
- Letters
- Faxes
- E-mails

Contractors will use an inquiry triage process for telephone inquiries to ensure that inquiries are answered by the staff with the appropriate expertise. Each contractor will organize its customer service representatives (CSRs) into at least two levels.

Inquiries that require even more specialized expertise or research or that just require significant additional time to resolve will be referred to a new group, the Provider Relations Research Specialists (PRRSs). The PRRS will provide clear and accurate written answers within 10 business days for at least 75 percent of cases referred by telephone CSRs, 20 business days for 90 percent of the cases referred by telephone CSRs, and 45 business days for 100 percent of all cases

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(referred by CSRs or from the general inquiries area). All general inquiries (letter, fax, and e-mail) will be answered within 45 business days.

Provider Outreach and Education

This component of the PCSP includes all provider outreach, education, and training activities that your carrier/FI currently performs, plus some additional requirements and activities. These new areas include:

- Training tailored for small providers and tailored to reduce the claims error rate
- Enhanced use of the Internet
- Local "Ask-the-Contractor" teleconferences and other new methods of communication

Small providers are defined by law as providers with fewer than 25 full-time equivalents or suppliers with fewer than 10 full-time equivalent staff. Contractors are required to identify providers meeting the definition of small providers and, beginning April 1, 2005, offer to all providers at least two educational programs tailored to the needs of the small providers/suppliers within their jurisdiction. Thereafter, contractors shall offer at least one additional event tailored to small providers per quarter with a minimum of six such events per state per federal fiscal year. (Thus, there may be more than one event in certain quarters of the year.)

Additional Information

For complete details, please see the official instruction issued to your contractor regarding this change. That instruction may be viewed by going to

<http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1130TN.pdf> on the CMS website.

If you have any questions or want to take advantage of any opportunities under this expanded PCSP, visit the web site of your carrier/intermediary or call them at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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