CMS Medicare FFS Provider e-News
CMS Information for the Medicare Fee-For-Service Provider Community

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National Provider Call: Medicare Preventive Services: Initial Preventive Physical Exam and Annual Wellness Visit – Register Now [↑]
Wed Mar 28; 2:30-4pm ET

Don't miss this opportunity to get the information you need about the Initial Preventive Physical Exam (IPPE – also known as the "Welcome to Medicare" Preventive Visit) and the Annual Wellness Visit (AWV). This year, the CY2012 Medicare Physician Fee Schedule Final Rule added a Health Risk Assessment to the AWV. CMS experts will be on hand to discuss both the IPPE and AWV, when to perform them, who can perform each service, who is eligible, and how to code and bill for each service, followed by a question and answer session.

Target Audience: Physicians, physician assistants, nurse practitioners, clinical nurse specialists, health educators, registered dietitians, nutrition professionals, medical billers and coders, and other interested healthcare professionals

Registration Information: In order to receive call-in information, you must register for the call at http://www.eventsvc.com/blhtechnologies. Registration will close at 12pm on the day of the call or when available space has been filled; no exceptions will be made, so please register early.

Presentation: The presentation for this call will be posted at least one day beforehand at http://www.CMS.gov/NPC/Calls/itemdetail.asp?itemID=CMS1256439. In addition, the presentation will be emailed to all registrants on the day of the call.

To learn more about CMS National Provider Calls, visit http://www.CMS.gov/NPC. This website includes a list of upcoming and past National Provider Calls and call materials (slide presentations, written transcripts, audio files, podcasts, and video slideshow presentations on the CMS YouTube Channel). Bookmark this site for newly-listed National Provider Calls and related call materials.

CMS.gov Website Upgrade: Please take note that CMS is in the process of making upgrades to the www.CMS.gov website. If you encounter problems accessing information while on the site, please refresh the page or check back later. We appreciate your understanding and apologize for any inconvenience.

➢ Additional material related to Preventive Health Services in today's e-News… [next]

National Provider Call: Medicare & Medicaid EHR Incentive Program Basics for Eligible Professionals – Register Now [↑]
Thu Mar 29; 3-4:30pm ET

As of Tue Jan 31, more than $3.2 billion in Medicare and Medicaid electronic health record (EHR) incentive payments have been made; more than 191,000 eligible professionals, eligible hospitals, and critical access hospitals are actively registered. Learn if you are eligible and, if so, what you need to do to earn an incentive. This session will inform individual practitioners about the basics of the Medicare & Medicaid EHR Incentive Programs. *Remember: This is the last year that eligible professionals can participate in Medicare and get the maximum incentive payment.*

Target Audience: Eligible Professionals (EPs), which include Doctors of Medicine or Osteopathy, Doctors of Dental Surgery or Dental Medicine, Doctors of Podiatric Medicine, Doctors of Optometry, Chiropractors, Nurse Practitioners, Certified Nurse Midwives, and Physician Assistants (PA) who practice at an FQHC/RHC led by a PA. (Note that hospital-based EP's may not participate; an EP is considered hospital-based if 90% or more of the EP's services are performed in a hospital inpatient or emergency room setting.) Medicaid eligible professionals must meet patient-volume criteria, providing services to those attributable to Medicaid or, in some cases, needy individuals.)

Agenda:
- Are you eligible?
- How much are the incentives and how are they calculated?
- How do you get started?
- What are major milestones regarding participation and payment?
- How do you report on meaningful use?
- Where can you find helpful resources?
- Question and Answer Session

Registration Information: In order to receive call-in information, you must register for the call at http://www.eventsvc.com/blhtechnologies. Registration will close at 12pm on the day of the call or when available space has been filled; no exceptions will be made, so please register early.

Presentation: The presentation for this call will be posted at least one day beforehand at http://www.CMS.gov/NPC/Calls. In addition, the presentation will be emailed to all registrants on the day of the call.

For more information about the Medicare and Medicaid EHR Incentive programs, visit http://www.CMS.gov/EHRIncentivePrograms.

To learn more about CMS National Provider Calls, visit http://www.CMS.gov/NPC. This website includes a list of upcoming and past National Provider Calls and call materials (slide presentations, written transcripts, audio files, podcasts, and video slideshow presentations on the CMS YouTube Channel). Bookmark this site for newly-listed National Provider Calls and related call materials.

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➢ Additional material related to EHR in today's e-News… [next]

Audio Recording and Written Transcript from "Medicare Shared Savings Program and Advance Payment Model Application Process" National Provider Call Now Available [↑]

CMS has posted an audio recording and written transcript from the "Medicare Shared Savings Program and Advance Payment Model Application Process" National Provider Call, originally hosted on Thu Mar 1, to the call detail page on the CMS National Provider Call website.

Webinar: Introduction and Overview of the EHR Incentive Programs [↑]
Thu Mar 22; 3-4pm ET

CMS and the Professional Association of Health Care Office Management (PAHCOM) are holding a free webinar on the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs. The webinar will provide an overview of how the Medicare and Medicaid EHR Incentive Programs are structured and administered, and will provide key insights for providers regarding their participation and navigation of the programs.

Registration Information: Register online.

Want more information about the EHR Incentive Programs? Make sure to visit the EHR Incentive Programs website for the latest news and updates on the EHR Incentive Programs.

➢ Additional material related to EHR in today's e-News… [previous]

Happy Second Anniversary to the *Affordable Care Act* [↑]

Two years after the passage of the *Affordable Care Act*, it has continued to provide thousands of Americans with insurance protections, preventive benefits, and resources to improve care. For more information on the benefits of the law in a particular state, please visit http://www.HealthCare.gov/law/resources/index.html.

The *Affordable Care Act* has the potential to bring considerable financial and clinical benefits for providers across the healthcare spectrum. The law enacts comprehensive reforms that will hold health insurance companies accountable, protect you and your patients, and guarantee choice and control. Here are 5 specific ways you and your practice can benefit:
- New consumer protections hold health insurers accountable.
- Expanded insurance coverage to more than 34 million people.
- Reduced administrative burdens and more time seeing patients.
- New models create more opportunities to coordinate care.
- New protections strengthen patient coverage, your practice, and the entire healthcare system.

Read "Healthcare Providers: The Top Five Things You Need to Know About the *Affordable Care Act*" to find out more.

➢ Additional material related to the *Affordable Care Act* in today's e-News… [next]

CMS Prevention Modules to be Included in Medscape CMEPulse Mailers Next Week [↑]

On Mon Mar 26, the following CMS Prevention Modules will be included in Medscape's CMEPulse Mailers. These modules provide information and CME about Medicare's preventive services and can be accessed on Medscape with a free registration.
- Clinical Anthology: Implementing Medicare Preventive Services – http://www.Medscape.org/viewprogram/32124?src=cmsaca6
- Video Expert Interview: Making Preventive Services Part of your Practices – http://www.Medscape.org/viewarticle/751965?src=cmsaca7
- Advisory: Making the Most out of Medicare Preventive Services – http://www.Medscape.org/viewarticle/743624?src=cmsaca8

➢ Additional material related to Preventive Health Services in today's e-News… [previous]

Announcements from the ICD-9-CM Coordination and Maintenance Committee [↑]

Summary Report from Committee Meeting on Mon Mar 5, 2012
The Summary Report from the procedure part of the Mon Mar 5 ICD-9-CM Coordination and Maintenance Committee Meeting is now available at http://www.CMS.gov/ICD9ProviderDiagnosticCodes/ICD9/list.asp.

For information related to diagnosis code issues, please visit the Classifications of Diseases, Functioning, and Disability page on the Centers for Disease Control and Prevention (CDC) website. The CDC will post the Summary Report of the diagnosis part of the meeting on this webpage.

Registration for Meeting on Wed Sep 19 and Thu Sep 20, 2012
Registration for the ICD-9-CM Coordination and Maintenance Committee to be held Wed Sep 19 and Thu Sep 20 will open on Fri Aug 17. More information will be posted soon on the ICD-9-CM Coordination and Maintenance Committee webpage.

➢ Additional material related to ICD-9 and ICD-10 in today's e-News… [next]

New Materials Now Available for the ICD-10 MS-DRG Conversion Project [↑]

CMS has posted v29 of the *ICD-10 MS-DRGs* and an updated version of the v27 *Medicare Code Editor (MCE)* on the ICD-10 MS-DRG Conversion Project webpage. These materials are available in the "Downloads" section of the webpage.

The updated version of the v27 *MCE* is being referred to as v27.0 R1 (MCE v27 R1). This Wed Mar 14 update corrects some errors in the documentation previously posted. The v27 MCE logic is used in the *CMS Medicare Severity Grouper* with MCE ICD-10 R1 Pilot Software (Version 28.0) that is being sold by NTIS.

➢ Additional material related to ICD-9 and ICD-10 in today's e-News… [previous]

New Initiative to Bolster Primary Care Workforce – Demonstration Will Assist with Training of Advanced Practice Registered Nurses [↑]

On Wed Mar 21, CMS announced a call for applications for a new *Affordable Care Act* initiative designed to strengthen primary care in the United States. Under the Graduate Nurse Education Demonstration, CMS will provide hospitals working with nursing schools to train advanced practice registered nurses (APRNs) with payments of up to $200 million over four years to cover the costs of APRNs' clinical training.

APRNs – whether they are nurse practitioners, clinical nurse specialists, nurse anesthetists, or nurse midwives – play a pivotal role in primary care. This new initiative will provide funds to eligible hospitals to increase the availability of clinical training settings that will bolster the skills and supply of APRNs. Payments to the participating hospitals will be linked directly to the number of additional APRNs that the hospitals and their partnering entities are able to train as a result of their participation in the demonstration.

The demonstration requires that half of clinical training occur in non-hospital settings in the community. Most clinical training in large hospitals already includes some rotations in settings that treat minority and underserved populations; this demonstration sets a higher requirement for training in non-hospital community-based settings. Students receiving training funded by the demonstration will be encouraged to practice in non-hospital community-based settings, including in underserved areas.

CMS will select up to five eligible hospitals to participate in the demonstration, which is expected to run for four years. The demonstration was authorized by the *Affordable Care Act*, and will be operated by the Center for Medicare & Medicaid Innovation. It is part of the Administration's overall effort to strengthen the healthcare workforce.

For more information, including how to apply, visit http://innovation.CMS.gov/initiatives/GNE.

➢ Additional material related to the *Affordable Care Act* in today's e-News… [previous]

CMS.gov Website Upgrade [↑]

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Inpatient Prospective Payment System FY2012 Pricer File Update [↑]

The FY2011 Inpatient Prospective Payment System (INP PPS) PC Pricer has been updated with corrected provider data, and is now available on the CMS website at http://www.CMS.gov/PCPricer/03_inpatient.asp. This Pricer is for claims dated from 10/01/2010 to 09/30/2011, and is dated 03/20/2012.

From the MLN: Now Available – Medicare Billing Certificate Programs for Part A and Part B Providers [↑]

Learn about the Medicare Program, and the specifics for your provider type with a special focus on Medicare billing, and receive a certificate in Medicare billing from CMS for successful completion of the Program. Successful completion consists of completion of all required web-based training courses, required readings, and a 75-percent or higher score on the post-assessment.

To participate in either the Part A or Part B provider type program, visit http://www.CMS.gov/MLNproducts and click on 'Web-Based Training Modules' under 'Related Links Inside CMS.'

From the MLN: "DMEPOS Information for Pharmacies" Fact Sheet Revised [↑]

The "DMEPOS Information for Pharmacies" fact sheet (ICN 905711) has been revised and is now available in downloadable format. This fact sheet is designed to provide education for pharmacies on durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS), and includes information on accreditation by a CMS-approved independent national accreditation organization as well as information for pharmacies want to be considered for an exemption from the accreditation requirements.

From the MLN: "Home Health Agencies Avoid Payment Reductions – Participate in HHCAHPS Now" MLN Matters Article Released [↑]

MLN Matters Special Edition Article #SE1214, "Home Health Agencies (HHAs) Avoid Payment Reductions – Participate in HHCAHPS (Home Health Consumer Assessment of Healthcare Providers and Systems) Now," has been released and is now available in downloadable format. This article is designed to provide education on the HHCAHPS, in which HHAs must participate to be eligible for the full market basket payment increase for CY2014. It includes important resource and contact information that HHAs can use to meet this requirement and also help ensure that Medicare beneficiaries and their families benefit from HHCAHPS data about patients' perspectives on care received from nationally-certified Medicare HHAs.

From the MLN: "*Affordable Care Act*, Section 3113 – Laboratory Demonstration for Certain Complex Diagnostic Tests" MLN Matters Article Available [↑]

Please remember that MLN Matters Article #MM7516, "*Affordable Care Act*, Section 3113 – Laboratory Demonstration for Certain Complex Diagnostic Tests (This Article Fully Rescinds and Replaces MM7413)," has been made available in downloadable format. This article is designed to provide education on the demonstration project that CMS implemented for certain complex diagnostic laboratory tests, which *began on Sun Jan 1, 2012*, as outlined in Change Request 7516 and required under Section 3113 of the *Affordable Care Act*. It includes information about the provisions under Section 3113 and the demonstration, which will be conducted for two years, or until the $100 million payment ceiling established by the *Affordable Care Act* has been reached.

More Helpful Links…

Check out CMS on

Twitter, LinkedIn, YouTube, and Flickr!

The Medicare Learning Network
www.CMS.gov/MLNGenInfo
Archive of Provider e-News Messages
www.CMS.gov/FFSProvPartProg/EmailArchive