

Thursday, August 27, 2015

## Countdown to ICD-10

Get ICD-10 Answers in One Place

ICD-10 Resources

Coding for ICD-10-CM: Continue to Report CPT/HCPCS Modifiers for Laterality

Claims that Span the ICD-10 Implementation Date

ICD-10-CM POA Exempt Codes for FY 2016 Available

MS-DRG Grouper and MCE Software Available

Video Slideshow from June 18 MLN Connects ICD-10 Call Available

## MLN Connects<sup>®</sup> National Provider Calls and Events

National Partnership to Improve Dementia Care and QAPI Call — Last Chance to Register

Overview of the 2014 Annual Quality and Resource Use Reports Webcast — Register Now

Medicare Quality Reporting Programs: 2017 Payment Adjustments Call — Registration Now Open

New MLN Connects National Provider Call Audio Recordings and Transcripts

## Other CMS Events

PQRS Webinars: Public Reporting of 2014 Measures

## Announcements

Medicare ACOs Continue to Improve Quality of Care, Generate Shared Savings

Registration Now Open for Round 1 2017 DMEPOS Competitive Bidding

## Medicare Learning Network<sup>®</sup> Educational Products

“Medicare Enrollment for Physicians and Other Part B Suppliers” Fact Sheet – Revised

New Medicare Learning Network Educational Web Guides Fast Fact

## Countdown to ICD-10

### Get ICD-10 Answers in One Place

The [ICD-10-CM/PCS Frequently Asked Questions](#) web page has answers to your questions about:

- Claims processing and billing
- Coding
- General Equivalence Mappings (GEMs)
- Home Health
- National Coverage Determinations (NCDs)
- Local Coverage Determinations (LCDs)

Visit the [ICD-10 Medicare Fee-For-Service Provider Resources](#) web page for a complete list of Medicare Learning Network educational materials.

## ICD-10 Resources

CMS has released a [concise guide to ICD-10 resources](#). The guide focuses on quick references and key steps you can take to get ready for the October 1 transition. Resources include:

- New Clinical Concepts Guides for specialties
- [The Road to 10 online tool for physicians and other clinicians](#)
- [Brief animated videos](#)
- Infographics
- A Quick Start Guide featuring 5 basic steps

Visit the CMS [ICD-10](#) website and [Roadto10.org](#) for the latest news and resources to help you prepare.

## Coding for ICD-10-CM: Continue to Report CPT/HCPCS Modifiers for Laterality

On October 1, 2015, ICD-10-CM will replace the ICD-9-CM code set currently used by providers for reporting diagnosis codes. Implementation of ICD-10-CM will not change the reporting of Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) codes, including CPT/HCPCS modifiers for physician services. While ICD-10-CM codes have expanded detail, including specification of laterality for some conditions, providers will continue to follow CPT and CMS guidance in reporting CPT/HCPCS modifiers for laterality.

## Claims that Span the ICD-10 Implementation Date

Do you have claims that will span the ICD-10 implementation date of October 1, 2015? CMS has guidance for providers:

- [MLN Matters® Special Edition Article SE1408](#), “Medicare FFS Claims Processing Guidance for Implementing ICD-10 – A Re-Issue of MM7492”
- [MLN Matters Special Edition Article SE1325](#), “Institutional Services Split Claims Billing Instructions for Medicare FFS Claims that Span the ICD-10 Implementation Date”
- [MLN Matters Special Edition Article SE1410](#), “Special Instructions for ICD-10 Coding on Home Health Episodes that Span October 1, 2015”

Visit the [ICD-10 Medicare Fee-For-Service Provider Resources](#) web page for a complete list of Medicare Learning Network educational materials.

## ICD-10-CM POA Exempt Codes for FY 2016 Available

The Centers for Disease Control and Prevention (CDC) updated list of [FY 2016 ICD-10-CM Present on Admission \(POA\) exempt codes](#) is now available on the [2016 ICD-10-CM and GEMs](#) web page.

## MS-DRG Grouper and MCE Software Available

The FY 2016 Medicare Severity-Diagnosis Related Group (MS-DRG) Grouper version 33 and Medicare Code Editor (MCE) software is now available to order through the [National Technical Information Service \(NTIS\)](#). CMS is also providing an ICD-9-CM version of the MS-DRG Grouper and MCE software, which can be used to analyze ICD-9-CM data or to create weights using ICD-9-CM data. Links to both versions are available on the [FY 2016 IPPS Final Rule](#) web page in the Downloads section.

CMS has posted the complete ICD-10 MS-DRG Definitions Manual and the Medicare Code Edits for version 33 on the [FY 2016 IPPS Final Rule](#) web page, which will be implemented for services on or after October 1, 2015. These files are included under the link for FY 2016 Final Rule Data Files. See the descriptions for number 10, 11, and 12.

### **Video Slideshow from June 18 MLN Connects ICD-10 Call Available**

A [video slideshow presentation](#) is now available from the June 18 MLN Connects National Provider Call on “Preparing for Implementation and New ICD-10-PCS Section X.” More information is available on the [call detail](#) web page.

## **MLN Connects® National Provider Calls and Events**

### **National Partnership to Improve Dementia Care and QAPI Call — Last Chance to Register**

*Thursday, September 3; 1:30-3pm ET*

*To Register:* Visit [MLN Connects Event Registration](#). Space may be limited, register early.

During this MLN Connects National Provider Call, two nursing homes will share how they successfully implemented person-centered care approaches and overcame the barriers of cost and staff. Additionally, CMS subject matter experts will update you on the progress of the National Partnership and Quality Assurance and Performance Improvement (QAPI). A question and answer session will follow the presentations.

The [National Partnership to Improve Dementia Care in Nursing Homes](#) and [QAPI](#) are partnering on MLN Connects Calls to broaden discussions related to quality of life, quality of care, and safety issues. The National Partnership was developed to improve dementia care in nursing homes through the use of individualized, comprehensive care approaches to reduce the use of unnecessary antipsychotic medications. QAPI standards expand the level and scope of quality activities to ensure that facilities continuously identify and correct quality deficiencies and sustain performance improvement.

#### *Discussion Topics:*

- Person-Centered Care Implementation Success - Hillcrest Health Services and Washington Rehabilitation & Nursing
- QAPI
- National Partnership

Target Audience: Consumer and advocacy groups, nursing home providers, surveyor community, prescribers, professional associations, and other interested stakeholders.

Continuing education credit may be awarded for participation in certain MLN Connects Calls. Visit the [Continuing Education Credit Information](#) web page to learn more.

### **Overview of the 2014 Annual Quality and Resource Use Reports Webcast — Register Now**

*Thursday, September 17; 2:30-4pm ET*

*To Register:* Visit [MLN Connects Event Registration](#). Space may be limited, register early.

In late August 2015, CMS will make the 2014 Annual Quality and Resource Use Reports (QRURs) available to group practices and solo practitioners nationwide, including groups and solo practitioners who participated in the Medicare Shared Savings Program, the Pioneer Accountable Care Organization (ACO) model, or the Comprehensive Primary Care (CPC) initiative in 2014. This MLN Connects Event provides an overview of the 2014 Annual QRUR and explains how to interpret and use the information in the report.

The 2014 Annual QRURs contain quality and cost performance data for CY 2014, which is the performance period for the Value-Based Payment Modifier that will be applied to physician payments for items and services furnished under the Medicare Physician Fee Schedule for groups of 10 or more eligible professionals in 2016. Learn more about the reports on the [2014 QRUR website](#). The event will be more meaningful if you have your QRUR in front of you to follow along. Visit [How to Obtain a QRUR](#) and access your report prior to the event.

CMS will use webcast technology for this event with audio streamed through your computer. Please note: if you are unable to stream audio through your computer, phone lines are available.

#### *Agenda:*

- Overview of the 2014 Annual QRUR
- How to understand and use the 2014 Annual QRUR

*Target Audience:* Physicians, Medicare eligible professionals, medical group practices, practice managers, medical and specialty societies.

This MLN Connects Event is being evaluated by CMS for CME and CEU continuing education credit (CE). Refer to the [call detail page](#) for more information.

### **Medicare Quality Reporting Programs: 2017 Payment Adjustments Call — Registration Now Open**

*Thursday, September 24; 1:30-3pm ET*

*To Register:* Visit [MLN Connects Event Registration](#). Space may be limited, register early.

This MLN Connects National Provider Call will provide guidance and instructions on how individual Eligible Professionals (EPs) and group practices can avoid the 2017 Physician Quality Reporting System negative payment adjustment, satisfy the clinical quality measure component of the Medicare Electronic Health Records Incentive Program, earn an incentive based on performance, and avoid the automatic 2017 downward payment adjustment under the Value-Based Payment Modifier.

Various scenarios on how EPs and group practices will be affected by the 2017 payment adjustments will be presented, along with a preview of the Remittance Advice messaging that affected EPs will receive in 2017.

### Agenda:

- Presentation
- Resources/where to call for help
- Questions and answer session

*Target Audience:* Physicians, Medicare eligible professionals, therapists, medical group practices, practice managers, medical and specialty societies, payers, and insurers.

This MLN Connects Call is being evaluated by CMS for CME and CEU continuing education credit (CE). Refer to the [call detail page](#) for more information.

## New MLN Connects National Provider Call Audio Recordings and Transcripts

Audio recordings and transcripts are now available for the following calls:

- August 11 — *Proposed Reform of Requirements for Long-Term Care Facilities:* [audio recording](#) and [transcript](#). More information is available on the [call detail](#) web page. This call provided an overview of the proposed rule to reform the requirements for long-term care facilities.
- August 13 — *Hospital Compare Overall Star Ratings Methodology:* [audio recording](#) and [transcript](#). More information is available on the [call detail](#) web page. This call will help you understand the proposed methodology for determining your Hospital Compare Overall Star Rating

## Other CMS Events

### PQRS Webinars: Public Reporting of 2014 Measures

Did you know that some 2014 Physician Quality Reporting System (PQRS) quality measures will be publicly reported on Physician Compare later this year? CMS will host a series of one-hour webinars about public reporting and the [Physician Compare](#) website. Each webinar will present the same information and provide stakeholders the opportunity to ask questions about public reporting on Physician Compare and this year's measure preview period. See the [announcement](#) for more information and to register.

- Tuesday, September 22 at 1pm ET
- Wednesday, September 23 at 4pm ET
- Thursday, September 24 at 11am ET

## Announcements

### Medicare ACOs Continue to Improve Quality of Care, Generate Shared Savings

CMS has issued the 2014 quality and financial performance results showing that Medicare Accountable Care Organizations (ACOs) continue to improve the quality of care for Medicare beneficiaries, while generating financial savings.

The results demonstrate significant improvements in the quality of care ACOs offered to Medicare beneficiaries. Pioneer ACOs showed improvements in 28 of 33 quality measures and experienced average improvements of 3.6% across all quality measures. Shared Savings Program ACOs that reported quality measures in 2013 and 2014 improved on 27 of 33 quality measures.

When an ACO demonstrates that it has achieved high-quality care and effectively reducing spending of health care dollars above specified thresholds, it is able to share in the savings generated for Medicare. In 2014, 20 Pioneer and 333 Shared Savings Program ACOs generated more than \$411 million in savings, which includes all ACOs savings and losses. The results show that ACOs with more experience in the program tend to perform better over time. Of the 333 Shared Savings Program ACOs, 119 are in their first performance year in Track 1, which involves standing up the program without the financial risk associated with later tracks.

*For More Information:*

- [Fact Sheet](#)
- [Pioneer ACO Model](#)
- [Medicare Shared Savings Program](#)

See full text of this excerpted [CMS press release](#) (issued August 25).

## **Registration Now Open for Round 1 2017 DMEPOS Competitive Bidding**

Authorized Officials (AOs) should register now

Registration is now open to all suppliers interested in participating in Round 1 2017 of the Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program. In order to submit a bid, you must be registered in the CMS Enterprise Identity Management (EIDM) system to obtain a user ID and password, which will be used to access the online DMEPOS bidding system (DBidS). You will not be able to bid if you do not register on time and add the DBidS application to your profile. [Register](#) on the Round 1 2017 web page.

CMS strongly recommends that you review the [EIDM Reference Guide](#) and [EIDM: Getting Started Registration Checklist](#). For more information about how to register and upcoming deadlines, please see the [Latest News and Announcements](#) web page.

## **Medicare Learning Network® Educational Products**

### **“Medicare Enrollment for Physicians and Other Part B Suppliers” Fact Sheet – Revised**

The “[Medicare Enrollment for Physicians and Other Part B Suppliers](#)” Fact Sheet (ICN 903768) was revised and is now available in a downloadable format. This fact sheet is designed to provide education on Medicare enrollment information and how to ensure that physicians and other Part B suppliers are qualified and eligible to enroll in the Medicare Program. It includes information on how to enroll in the Medicare Program, how to report changes, and a list of resources.

### **New Medicare Learning Network Educational Web Guides Fast Fact**

A new fast fact is now available on the [Medicare Learning Network Educational Web Guides](#) web page. This web page provides information on Evaluation and Management services; Guided

Pathways that contain resources and topics of interest; lists of health care management products; and easy-to-understand billing and coding educational products. It is designed to provide educational and informational resources related to certain CMS initiatives. Please bookmark this page and check back often as a new fast fact is added each month.

**[Like the eNews? Have suggestions? Please let us know!](#)**

**[Subscribe](#)** to the eNews. Previous issues are available in the [archive](#).

**Follow the MLN on [Twitter](#) #CMSMLN, and visit us on [YouTube](#).**

The Medicare Learning Network®, MLN Connects®, and MLN Matters® are registered trademarks of the U.S. Department of Health and Human Services (HHS).