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News & Announcements

MIPS Annual Call for Measures and Activities through June 30

The Annual Call for Measures and Activities for the Merit-based Incentive Payment System (MIPS) track of the Quality Payment Program (QPP) will be open through June 30. CMS encourages clinicians, measure stewards, organizations, and other stakeholders to identify and submit measures and activities to be considered for three performance categories of MIPS in future years. Submission details:

- Quality: Submit measures through JIRA with the JIRA Measures Under Consideration template and other associated documents
- Advancing Care Information: Submit measures using the Advancing Care Information Submission Form to CMSCallforMeasuresACI@ketchum.com
- Improvement Activities: Submit activities using the Improvement Activities Submission Form to CMSCallforActivitiesIA@ketchum.com

For more information see the Annual Call for Measures and Activities fact sheet. Direct any questions to the Quality Payment Program Service Center at QPP@cms.hhs.gov.
CMS Voluntary Self-Referral Disclosure Protocol: New Form

CMS issued a new Self-Referral Disclosure Protocol (SRDP) Form that provides a streamlined and standardized format for disclosing actual or potential violations of the physician self-referral law. The SRDP Form will reduce the burden on providers and suppliers submitting disclosures to the SRDP and facilitate our review of the disclosures.

Use of the form is mandatory effective June 1, 2017. Parties submitting self-disclosures to the SRDP are encouraged, but not required, to use the SRDP Form now. Visit the SRDP webpage to learn more.

Provider Compliance

Billing For Stem Cell Transplants

In a February 2016 report, the Office of the Inspector General (OIG) determined that Medicare paid for many stem cell transplants incorrectly. The main finding was that providers billed these procedures as inpatient when they should have been submitted as outpatient services. Bill correctly and avoid overpayment recoveries:

- OIG Report Medicare did not Pay Selected Inpatient Claims for Bone Marrow and Stem Cell Transplant Procedures in Accordance with Medicare Requirements
- CMS Transmittal 1805
- MLN Matters® Article

Upcoming Events

MIPS Cost Measure Development Listening Session — April 5

Wednesday, April 5 from 12 to 1:30 pm ET

Register for a Merit-based Incentive Payment System (MIPS) listening session for an opportunity to learn about and provide feedback on episode-based cost measure development. There will be a 30-minute presentation on cost measures and the role of stakeholders in cost measure development, including a discussion of the draft list of episode groups and trigger codes.

Medicare Shared Savings Program ACO: Preparing to Apply for the 2018 Program Year Call — April 6

Thursday, April 6 from 1:30 to 3 pm ET

To register or for more information, visit MLN Connects® Event Registration.

During this call, learn about the Medicare Shared Savings Program and find out how to prepare to apply for the January 1, 2018, program start date, including the Medicare Accountable Care Organization (ACO) Track 1+ Model and Skilled Nursing Facility (SNF) 3-Day Rule Waiver. Topics:

- Introduction to the Shared Savings Program
- Shared Savings Program requirements, including Tracks 1, 2, and 3
- Medicare ACO Track 1+ Model
- SNF 3-Day Rule Waiver
- Antitrust and ACOs
- Preparing to apply
- Application process

If you are planning to apply, you should also attend the call on April 19. Visit the How to Apply webpage to review important information, dates, and materials prior to the call.
Open Payments: Prepare to Review Reported Data Call — April 13
Thursday, April 13 from 1:30 to 3 pm ET

To register or for more information, visit MLN Connects Event Registration.

Industry is currently submitting data to the Open Payments System on payments or transfers of value made to physicians and teaching hospitals during 2016. Beginning in April, physicians and teaching hospitals have 45 days to review and dispute records attributed to them. During this call, find out how to access the Open Payments system to review the accuracy of the data submitted about you before it is published on the CMS website. See the Open Payments Registration webpage for more information. CMS will publish the 2016 payment data and updates to the 2013, 2014, and 2015 data on June 30, 2017.

Topics:
- Overview of the Open Payments national transparency program
- Program timeline
- Registration process
- Critical deadlines for physicians and teaching hospitals to review and dispute data

Target Audience: Physicians, teaching hospitals and physician office staff.

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.

Medicare Shared Savings Program ACO: Completing the 2018 Application Process Call — April 19
Wednesday, April 19 from 1:30 to 3 pm ET

To register or for more information, visit MLN Connects Event Registration.

During this call, learn helpful tips to complete a successful application for the 2018 Medicare Shared Savings Program, the Medicare Accountable Care Organization (ACO) Track 1+ Model, and/or Skilled Nursing Facility (SNF) 3-Day Rule Waiver. Topics:
- Completing an application
- ACO participant lists and agreements
- SNF affiliate lists and agreements (Applicable to the SNF 3-Day Rule Waiver)
- Beneficiary assignment

Visit the How to Apply webpage to review important information, dates, and materials prior to the call. And, review materials from our April 6 call on Preparing to Apply.

Target Audience: Potential 2018 Shared Savings Program initial, renewal, SNF 3-Day Rule Waiver, and Medicare ACO Track 1+ Model applicants.

Global Surgery: Required Data Reporting for Post-Operative Care Call — April 25
Tuesday, April 25 from 1:30 to 3 pm ET

To register or for more information, visit MLN Connects Event Registration.

The CY 2017 Medicare Physician Fee Schedule (PFS) final rule adopted a data reporting requirement for practitioners furnishing specified global procedures in Florida, Kentucky, Louisiana, Nevada, New Jersey,
North Dakota, Ohio, Oregon, and Rhode Island. CMS will use reported data, along with other data to establish payment rates under the PFS.

During this call, learn about the new requirements that go into effect July 1, 2017, and resources you can use for reporting. A question and answer session follows the presentation.

Target Audience: Physicians, physician assistants, nurse practitioners and other clinicians who furnish global services; coders; billers; and practice managers in Florida, Kentucky, Louisiana, Nevada, New Jersey, North Dakota, Ohio, Oregon, and Rhode Island. Practitioners who only work in practices with fewer than 10 practitioners and those furnishing services in other states are not required to report but may report voluntarily.

**Emergency Preparedness Requirements Final Rule Training Call — April 27**
Thursday, April 27 from 2:30 to 3:30 pm ET

To register or for more information, visit [MLN Connects Event Registration](#).

Is your facility prepared to meet the new emergency preparedness requirements by the November 15, 2017, compliance date? During this call, learn about implementation of the final rule, including an overview of the regulation and training and testing requirements. A question and answer session follows the presentation.

Target Audience: Facilities, providers, and suppliers affected by the final rule; state survey agencies; health care coalitions; and state emergency preparedness officials.

**Medicare Learning Network Publications & Multimedia**

**NPI: What You Need to Know Booklet — New**

A new [NPI: What You Need to Know](#) Booklet is available. Learn about:
- Benefits
- National Plan and Provider Enumeration System
- Who must obtain a National Provider Identifier (NPI)
- Health care provider categories
- How to apply for an NPI

**IRF-PAI Call: Video Presentation — New**

A [video presentation](#) is available for the [January 12](#) call on Inpatient Rehabilitation Facility (IRF) - Patient Assessment Instrument (PAI) Therapy Information Data Collection. During this call, CMS reviews the types and methods of therapy collected; examples of each type of therapy; and how to accurately code and complete the therapy information section.

**ESRD QIP Call: Follow-up Questions and Answers — New**

Follow-up [questions and answers](#) are available for the [January 17](#) call on the End-Stage Renal Disease (ESRD) Quality Incentive Program (QIP). During this call, CMS experts discuss the final rule that operationalizes the ESRD QIP for Payment Year 2020.

**SNF Consolidated Billing Web-Based Training Course — Revised**

With Continuing Education Credit
A revised Skilled Nursing Facility (SNF) Consolidated Billing (CB) Web-Based Training (WBT) course is available through the Learning Management System. Learn about:

- SNF coverage and payment guidelines
- Bundled prospective payments
- Services that are excluded from SNF CB

Remittance Advice Resources and FAQs Fact Sheet — Revised

A revised Remittance Advice Resources and FAQs Fact Sheet is available. Learn about:

- Standard Paper Remittance (SPR) vs Electronic Remittance Advice (ERA)
- Enrolling in ERA
- Free Medicare ERA software
- Commercial ERA software

Reading a Professional Remittance Advice Booklet— Revised

A revised Reading a Professional Remittance Advice Booklet is available. Learn about:

- Professional Electronic Remittance Advice (ERA)
- Standard Paper Remittance Advice (SPR)
- Balancing the ERA or SPR so provider records are consistent with Medicare’s records

Medicare Home Health Benefit Booklet — Revised

A revised Medicare Home Health Benefit Booklet is available. Learn about:

- Qualifying for home health services
- Consolidated billing
- Therapy services
- Physician billing and payment

MLN Learning Management System FAQs Booklet — Revised

A revised Medicare Learning Network (MLN) Learning Management System (LMS) FAQs Booklet is available. Learn about:

- Answers to the most frequently asked questions
- Step by step instructions on how to use the MLN LMS

Medicare Enrollment for Physicians and Other Part B Suppliers Booklet — Reminder

The Medicare Enrollment for Physicians and Other Part B Suppliers Booklet is available. Learn about:

- Who are part B suppliers
- Enrolling in the Medicare Program
- Determining if you want to be a participating provider

Medicare Enrollment for Institutional Providers Booklet — Reminder

The Medicare Enrollment for Institutional Providers Booklet is available. Learn about:

- Institutional providers
- Enrolling in the Medicare program
- Resources
Safeguard Your Identity and Privacy Using PECOS Booklet — Reminder

The Safeguard Your Identity and Privacy Using PECOS Booklet is available. Learn about:

- Keeping your enrollment information up to date in the Provider Enrollment, Chain and Ownership System (PECOS)
- Protecting your enrollment information
- Privacy tips

Like the newsletter? Have suggestions? Please let us know!

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