



# mlnconnects

Official CMS news from the Medicare Learning Network

Thursday, September 14, 2017

## News & Announcements

Quality Payment Program: New Resources Available  
September is Prostate Cancer Awareness Month

## Provider Compliance

Billing for Ambulance Transports — Reminder

## Upcoming Events

Qualified Medicare Beneficiary Program Billing Requirements Call — September 19  
Reporting Hospice Quality Data: Tips for Compliance Call — September 20  
PQRS: Feedback Reports and Informal Review Process for PY 2016 Results Call — September 26  
Physician Compare Call — September 28

## Medicare Learning Network Publications & Multimedia

Office of Inspector General Reports Highlight Hospital Billing Issues MLN Matters® Article — New  
PECOS for DMEPOS Suppliers Booklet — Reminder  
Medicare Enrollment Resources Educational Tool — Reminder

## News & Announcements

### Quality Payment Program: New Resources Available

CMS posted new and updated resources on the [Quality Payment Program](#) website:

- [Quality Performance Category Fact Sheet](#): Overview of the Quality performance category under the Merit-based Incentive Payment System, including how to submit performance data for the 2017 transition year
- [How to Design an APM Toolkit](#) (updated): Comprehensive set of resources for organizations or individuals interested in developing ideas for Alternative Payment Models (APMs)
- [Quality Payment Program Key Objectives](#) (updated): Summary of the seven strategic objectives for the Quality Payment Program

Additional resources are available on the [Resource Library](#) webpage.

### September is Prostate Cancer Awareness Month

Prostate cancer is the most common non-skin cancer among American men. Talk to your Medicare patients about the nature and risk of prostate cancer and help them make an informed decision about screening.

For More Information:

- [Medicare Preventive Services](#) Educational Tool
- [ZERO - The End of Prostate Cancer](#) website
- [Center for Disease Control and Prevention Prostate Cancer](#) website
- [National Cancer Institute - Prostate Cancer](#) website

Prostate cancer screening is promoted on your patients' Medicare Summary Notices. Visit the [Preventive Services](#) website to learn more about Medicare-covered services.

## Provider Compliance

### Billing for Ambulance Transports — Reminder

In a September 2015 report, the Office of the Inspector General (OIG) released results of a study of Medicare Part B ambulance claims. According to the report, almost 20 percent of ambulance suppliers had inappropriate and questionable billing for ambulance transport, creating vulnerabilities to Medicare program integrity. The OIG identified a number of key problems, including:

- Ambulance transports for beneficiaries who did not receive any Medicare services at the point of origin or destination
- Transports to noncovered destinations
- Excessive mileage reported on claims for urban transports
- Medically unnecessary transports to partial hospitalization programs
- Inappropriate transport service levels

Review the following resources to bill correctly for this service:

- OIG Report: [Inappropriate Payments and Questionable Billing for Medicare Part B Ambulance Transports](#)
- Medicare Benefit Policy Manual: [Chapter 10 – Ambulance Service](#)
- Medicare Benefit Policy Manual: [Chapter 15 - Ambulance](#)
- 42 CFR 410.40: [Coverage of Ambulance Services](#)
- 42 CFR 410.41: [Requirements for Ambulance Suppliers](#)
- 42 CFR 410.41: [Definitions](#)
- 42 CFR 414.610: [Basis of Payment](#)
- [Ambulance Fee Schedule](#) website
- [Ambulance Fee Schedule](#) Fact Sheet
- [Medicare Ambulance Transports](#) Booklet
- [CMS Transmittal 9620](#)

## Upcoming Events

### Qualified Medicare Beneficiary Program Billing Requirements Call — September 19

Tuesday, September 19 from 1:30 to 3 pm ET

[Register](#) for Medicare Learning Network events.

During this call, CMS experts discuss the Qualified Medicare Beneficiary (QMB) billing requirements and their implications. Find out about upcoming changes to the HIPAA Eligibility Transaction System (HETS) and remittance advice to identify the QMB status of your patients and exemption from cost-sharing. Also, learn key steps to promote compliance.

Medicare providers may not bill people in the QMB program for Medicare deductibles, coinsurance, or copays. Visit the [QMB Program](#) webpage for more information.

Target Audience: Medicare Part A and B providers; medical billing specialists; practice administrators; IT vendors; health care industry professionals; and other interested stakeholders.

### Reporting Hospice Quality Data: Tips for Compliance Call — September 20

Wednesday, September 20 from 1:30 to 3 pm ET

[Register](#) for Medicare Learning Network events.

During this call, learn more about Hospice Quality Reporting Program requirements. Find out how to be compliant and successfully submit Hospice Item Set (HIS) data and the Hospice Consumer Assessment of Healthcare Providers and Systems (CAHPS®) Survey in the next reporting year. A question and answer session follows the presentation.

Topics:

- HIS and CAHPS® submission requirements
- Reasons for noncompliance and how to address them
- Timelines for data submission and compliance determinations
- Resources for success, including how to access important websites and helpdesks

Target Audience: Hospice providers.

### **PQRS: Feedback Reports and Informal Review Process for PY 2016 Results Call — September 26**

Tuesday, September 26 from 1:30 to 3 pm ET

[Register](#) for Medicare Learning Network events.

Learn about Physician Quality Reporting System (PQRS) downward payment adjustments, PQRS feedback reports, and the informal review process for Program Year (PY) 2016 results and 2018 payment adjustment determinations.

Note: 2016 was the last program year for PQRS. PQRS transitioned to the Merit-based Incentive Payment System (MIPS) under the Quality Payment Program. The final data submission timeframe for reporting 2016 PQRS quality data to avoid the 2018 PQRS downward payment adjustment was January through March 2017. The first MIPS performance period is January through December 2017. For more information, visit the [Quality Payment Program](#) website.

This event is being evaluated by CMS for CME and CEU continuing education credit (CE). Check the [event webpage](#) for CE Activity Information & Instructions.

Target Audience: Physicians; individual eligible professionals; group practices; Comprehensive Primary Care practice sites; Accountable Care Organizations; therapists; practice managers; medical and specialty societies; payers; and insurers.

### **Physician Compare Call — September 28**

Thursday, September 28 from 1:30 to 3 pm ET

[Register](#) for Medicare Learning Network events.

Are you interested in learning more about [Physician Compare](#)? Find out about the:

- Upcoming 30-day preview period for the 2016 performance data targeted for release in December
- Future of public reporting and what is coming in the next year

Learn how to review your performance information before it is published. A question and answer session follows the presentation.

Target audience: Physicians and other clinicians; medical groups; practice managers; medical and specialty societies; and other interested stakeholders.

## **Medicare Learning Network Publications & Multimedia**

## Office of Inspector General Reports Highlight Hospital Billing Issues MLN Matters® Article — New

An MLN Matters Special Edition Article on [Office of Inspector General Reports Highlight Hospital Billing Issues](#) is available. In recent reports, the Office of Inspector General cites two significant issues leading to coding errors on hospital Medicare claims. Learn about:

- Improper use of modifier -59 for 96 or more continuous hours of mechanical ventilation
- Incorrect procedure codes when billing for mechanical ventilation

## PECOS for DMEPOS Suppliers Booklet — Reminder

A revised [PECOS for DMEPOS Suppliers](#) Booklet is available. Learn about:

- Medicare enrollment application submission options in the Provider Enrollment, Chain and Ownership System (PECOS)
- Individual and organizational Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) suppliers

## Medicare Enrollment Resources Educational Tool — Reminder

The [Medicare Enrollment Resources](#) Educational Tool is available. Learn about:

- How to enroll in the Medicare Program
- What to do if you run into problems
- Where to locate enrollment forms

---

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

[Subscribe](#) to MLN Connects. Previous issues are available in the [archive](#). This newsletter is current as of the issue date. View the complete [disclaimer](#).

**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).

