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CMS Medicare FFS Provider e-News

CMS Information for the Medicare Fee-For-Service Provider Community

CMS asks that you share the following important information with all of your association members and state and local chapters. Thank you!

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Colleagues—

I hope March is off to a smooth start for you all and you're looking forward to spring!

Last Tuesday, we noted [in the e-News](#) that March is National Colorectal Cancer Awareness Month, and I wanted to make sure to follow up this week with additional important information on colorectal cancer and ways that you can help protect your patients.

Of cancers that affect both men and women, colorectal cancer is the second leading cause of cancer-related deaths in the United States and the third most common cancer in men and in women. More than 140,000 Americans are diagnosed and more than 50,000 die from the disease each year.

This week, we're focusing on ways to [make sure that your practice is ready to support the delivery of, or referrals for, colorectal cancer screening](#) and follow-up, and have included links to a variety of helpful resources.

Throughout the remainder of March, we'll continue to share news and tips for spreading awareness of colorectal cancer and ways to combat the disease. As always, thanks so much for continuing to partner with CMS to delivery high-quality care and educational information to Medicare beneficiaries throughout the country.

Have a great week—

Robin

The e-News for Tue Mar 13 includes...

NATIONAL PROVIDER CALLS

- Wed Mar 14 – [Physician Value-Based Payment Modifier Program: Experience from Private Sector Physician Pay-for-Performance Programs – Last Chance to Register](#)
- Tue Mar 20 – [Physician Quality Reporting System & eRx: Million Hearts Initiative](#)
- Wed Mar 28 – [Medicare Preventive Services: Initial Preventive Physical Exam and Annual Wellness Visit – Registration Now Open](#)
- Thu Mar 29 – [Medicare & Medicaid EHR Incentive Program Basics for Eligible Professionals – Save the Date](#)

OTHER CALLS, MEETINGS, AND EVENTS

- Thu Mar 29 – [Video Stream Broadcast: Launch of Initiative to Improve Behavioral Health and Reduce Use of Antipsychotic Medications in Nursing Home Residents](#)
- Tue May 1 and Wed May 2 – [“Long Term Care Hospital Quality Reporting Program” Train-the-Trainer Conference – Register by Wed Mar 21](#)
- Wed May 2 – [“Inpatient Rehabilitation Facility Patient Assessment Instrument New Quality Indicators Section” Train-the-Trainer Conference – Register by Fri Mar 16](#)

ANNOUNCEMENTS AND REMINDERS

- [March is National Colorectal Cancer Awareness Month – Is Your Practice Ready?](#)
- [New Information on the Medicare Shared Savings Program is Now Available](#)

CLAIMS, PRICER, AND CODE UPDATES

- [Taxonomy Code Reporting Problem Affecting Outbound HIPAA 5010 837 Institutional Claims](#)
- [Inpatient Prospective Payment System FY2012 Pricer File Update](#)

UPDATES FROM THE MEDICARE LEARNING NETWORK®

- [“855-O Medicare Enrollment Application Ordering and Referring Physicians or Other Eligible Professionals” MLN Matters Article Released](#)
- [“Provider Inquiry Screens Regarding Telehealth Services Eligibility Dates” MLN Matters Article Released](#)

Special National Provider Call Series: Physician Value-Based Payment Modifier Program: Experience from Private Sector Physician Pay-for-Performance Programs – Last Chance to Register [[↑](#)]

Wed Mar 14; 1:30-3pm ET

Section 3007 of the *Affordable Care Act* requires CMS to apply a Value Modifier, which compares the quality of care furnished to the cost of that care, to physician payment rates under the Medicare Physician Fee Schedule starting with specific physicians and physician groups in 2015 and expanding to all physicians by 2017.

This National Provider Call is in support of the efforts of CMS to implement the Medicare Physician Feedback and Physician Value-Based Payment Modifier Programs. This call is last in a series of calls CMS will hold to engage the public in dialogue about physician level value-based purchasing and obtain stakeholder input on how best to implement the physician value modifier.

This National Provider Call will include presentations from a panel of three private sector experts who have had experiences in implementing physician-level pay-for-performance programs.

Target Audience: Medicare Fee-For-Service physicians, specialty medical societies, and other interested parties.

Agenda:

- Opening Comments and Background
 - Background on the Value-Based Payment Modifier
 - Introduction of Speakers
- Private Sector Presentations
- General Question and Answer Session
- CMS Comments & Closing

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/PhysicianFeedbackProgram/PFP/list.asp>. 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.

National Provider Call: Physician Quality Reporting System & eRx: Million Hearts Initiative [[↑](#)]

Tue Mar 20; 1:30-3pm ET

CMS will host a National Provider Call on the Physician Quality Reporting System and Electronic Prescribing (eRx) Incentive Program, during which subject matter experts will provide an overview of the HHS [Million Hearts Initiative](#).

Target Audience: All Medicare FFS providers, medical coders, physician office staff, provider billing staff, Electronic Health Records staff, and vendors

Agenda:

- Opening remarks
- Program announcements
- Overview of Million Hearts Initiative
- Question & 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/PQRS/04_CMSSponsoredCalls.asp. 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.

National Provider Call: Medicare Preventive Services: Initial Preventive Physical Exam and Annual Wellness Visit – Registration Now Open [[↑](#)]

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.

National Provider Call: Medicare & Medicaid EHR Incentive Program Basics for Eligible Professionals – Save the Date [[↑](#)]

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.

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.

Video Stream Broadcast: Launch of Initiative to Improve Behavioral Health and Reduce Use of Antipsychotic Medications in Nursing Home Residents [[↑](#)]
premieres Thu Mar 29, 1-2pm ET

On Thu Mar 29, CMS will launch a new initiative aimed at improving behavioral health and safeguarding nursing home residents from unnecessary antipsychotic drug use. As part of the initiative, CMS is developing a national action plan that will use a multidimensional approach including public reporting, raising public awareness, regulatory oversight, technical assistance/training, and research. The action plan will be targeted at enhancing person-centered care for nursing home residents, particularly those with dementia-related behaviors.

Join Patrick Conway (MD, MSc, Chief Medical Officer for CMS and Director of the Office of Clinical Standards and Quality), Shari Ling (MD, CMS, Deputy Chief Medical Officer serving in the Office of Clinical Standards and Quality), and Alice Bonner (PhD, RN, Director for the Division of Nursing Homes in the Office for Clinical Standards and Quality) in the overview of this national initiative and resources for technical assistance, discussion of behavioral health opportunities, and plans for upcoming training sessions. Handouts for the broadcast are available at <http://surveyortraining.CMS.hhs.gov>.

Target Audience: State Survey Agencies, residents and family members, nursing home staff, clinicians, providers, advocates, CMS Regional Offices, and others

Registration and Viewing Instructions: Can be found at <http://surveyortraining.CMS.hhs.gov>. The program will continue to be available for viewing for up to one year following Thu Mar 29.

“Long Term Care Hospital Quality Reporting Program” Train-the-Trainer Conference – Register by Wed Mar 21 [\[↑\]](#)

Tue May 1 and Wed May 2

Sheraton Baltimore City Center Hotel; 101 West Fayette Street, Baltimore, MD 21201

To support the implementation of the Long Term Care Hospital (LTCH) Quality Reporting Program (QRP), for which data collection begins Mon Oct 1, 2012, CMS is hosting a LTCH QRP Train-the Trainer Conference on Tue May 1 and Wed May 2 (at the Sheraton Baltimore City Center Hotel, 410-742-1100).

This conference is open to all long-term care hospital providers, associations, and organizations that support quality care in the nation’s long-term care hospitals. The goals of the conference are to:

- Introduce the structure of the LTCH Care Data Set, the data collection instrument that will be used by LTCHs to collect data on the measure, Percent of Patients with a Pressure Ulcer That is New or Worsened
- Discuss assessment procedures and coding for key sections
- Discuss and understand data submission specifications
- Presentations by the Centers for Disease Control and Prevention on the Catheter Associated Urinary Tract Infection (CAUTI) and Central Line Associated Blood Stream Infection (CLABSI) measures as well as the use of the National Health Safety Network (NHSN) for submitting data associated with these measures

Registration for the conference ends Wed Mar 21. Hotel registrations will not be accepted until registration begins, at which time reservations may be made by phone or online.

Additional information is available at the conference website at www.totalsolutions-inc.com/natconference, and questions can be submitted to conference2@totalsolutions-inc.com.

For more information on the LTCH QRP, visit the [Long Term Care Hospital Quality Reporting Program](#) website.

“Inpatient Rehabilitation Facility Patient Assessment Instrument New Quality Indicators Section” Train-the-Trainer Conference – Register by Fri Mar 16 [\[↑\]](#)

Wed May 2

Sheraton Baltimore City Center Hotel; 101 West Fayette Street, Baltimore, MD 21201

To support the implementation of the Inpatient Rehabilitation Facility (IRF) Quality Reporting Program (QRP), for which data collection begins Mon Oct 1, 2012, CMS will host an “IRF Patient Assessment Instrument (PAI) New Quality Indicators” Train-the-Trainer Conference on Wed May 2 (at the Sheraton Baltimore City Center Hotel, 410-742-1100).

This conference is open to all Inpatient Rehabilitation Facility providers, associations, and organizations that support quality care in inpatient rehabilitation

facilities. The goals of the conference are to:

- Introduce the Quality Indicator item set that has been added to the IRF-PAI
- Discuss assessment procedures and coding for the 2 quality measures:
 - Catheter Associated Urinary Tract Infections (CAUTI), and
 - Pressure Ulcers
- Discuss data submission specifications, including presentations by the Centers for Disease Control and Prevention on the CAUTI, and the use of the National Health Safety Network for submitting data associated with this measure

Note that this training is specific to the new Quality Indicators Section of the IRF-PAI and the reporting of CAUTI data to the CDC. The training will not cover the IRF-PAI in its entirety.

Registration for the conference ends Fri Mar 16. Hotel reservations will not be accepted until registration has closed, at which time reservations may be made by phone or online; each participant will be limited to one room reservation.

Additional information is available at the conference website at www.totalsolutions-inc.com/natconference, and questions can be submitted to conference2@totalsolutions-inc.com.

March is National Colorectal Cancer Awareness Month – Is Your Practice Ready? [[↑](#)]

March is National Colorectal Cancer Awareness Month – is your practice or office organized to support either the delivery of, or referrals for, colorectal cancer screening and follow-up? Several resources are available to help practitioners and their office staff improve their practices' support for colorectal cancer screening.

What Can You Do?

To help improve office practice to support either the delivery of or recommendations for colorectal cancer screening, please review the “[What You Should Know about Screening for Colorectal Cancer: A Primary Care Clinician’s Evidence-Based Toolbox and Guide](#),” which was developed by the American Cancer Society, Thomas Jefferson University, and the National Colorectal Cancer Roundtable.

More Information for Healthcare Professionals:

- [MLN Guide to Medicare Preventive Services for Healthcare Professionals](#) (see Chapter 11)
- [MLN Preventive Services Educational Products webpage](#)
- [MLN Cancer Screenings Brochure](#)
- [MLN Quick Reference Information: Medicare Preventive Services](#)
- [National Colorectal Cancer Roundtable](#)
- [National Colorectal Cancer Awareness Month website](#)

Colorectal cancer is preventable, treatable, and beatable. Encourage your patients to get screened – it could save their lives.

New Information on the Medicare Shared Savings Program is Now Available [[↑](#)]

On Thu Oct 20, 2011, CMS issued a final rule under the *Affordable Care Act* to establish the Medicare Shared Savings Program. New information about this program is now available on the [Shared Savings Program website](#).

Of note:

- The [Shared Savings Program Application webpage](#) includes an updated version of the Medicare Shared Savings Program Application and Appendices for the July 1, 2012 program start date.
- A new [Shared Savings Program ACO Agreement webpage](#) has been added that includes a link to the agreement that approved applicants will be required to sign.
- On Thu March 8, CMS hosted a National Provider Call on the Medicare Shared Savings Program electronic application submission through the Health Plan Management System (HPMS). Presentation materials are available on the [Shared Savings Program CMS Teleconferences and Events webpage](#).
- Also, the [Shared Savings Program Quality Measures and Performance Standards webpage](#) has been updated with the “Guide to ACO Participation in the 2012 Physician Quality Reporting System and Electronic Prescribing Incentive Program.”

Taxonomy Code Reporting Problem Affecting Outbound HIPAA 5010 837 Institutional Claims [[↑](#)]

CMS is alerting all providers to a problem that has been discovered with taxonomy code reporting that is affecting outbound *HIPAA* 5010 837 institutional claims. (Note, though, that the current situation *is not* affecting production version 4010A1 837 institutional claims.)

Our Part A claims processing system (FISS) maintainer has identified a situation whereby taxonomy codes reported on incoming version 5010A2 claims are not reliably mapping to outbound version 5010A2 COB/crossover claims. This issue is precipitating numerous problems for State Medicaid Agencies as well as a small number of commercial payers.

Though a precise fix date has not yet been identified, the FISS maintainer is addressing this as a high priority to implement a fix as soon as possible. Please know that CMS is earnestly working to address this problem, and will issue an update when a fix has been scheduled.

Inpatient Prospective Payment System FY2012 Pricer File Update [[↑](#)]

The FY2011 Inpatient Prospective Payment System (INP PPS) PC Pricer has been updated with newer 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 the update is dated 03/09/2012.

From the MLN: “855-O Medicare Enrollment Application Ordering and Referring Physicians or Other Eligible Professionals” MLN Matters Article Released [[↑](#)]

MLN Matters Special Edition Article #SE1208, “[855-O Medicare Enrollment Application Ordering and Referring Physicians or Other Eligible Professionals](#),” has been released and is now available in downloadable format. This article is designed to provide education on the Medicare Enrollment Application for Eligible Ordering and Referring Physicians and Non-Physician Practitioners (form CMS-855O), and includes an overview of the enrollment process and eligibility

requirements for those physicians or other eligible professionals who wish to enroll in Medicare solely for the purpose of ordering and referring.

From the MLN: “Provider Inquiry Screens Regarding Telehealth Services Eligibility Dates” MLN Matters Article Released [[↑](#)]

MLN Matters Special Edition Article #SE1209, “[Provider Inquiry Screens Regarding Telehealth Services Eligibility Dates](#),” has been released and is now available in downloadable format. This article is designed to provide education on telehealth services, as previously described in Change Request #7049, and includes information about the use of telehealth services and examples of CWF provider inquiry screens that provide the date on which the beneficiary is next eligible for these services.

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More Helpful Links...

The Medicare Learning Network

www.CMS.gov/MLNGenInfo

Archive of Provider e-News Messages

www.CMS.gov/FFSProvPartProg/EmailArchive