

Quarterly Provider Update-Regulations
July 1 – September 30, 2018

Key:

ASCs - Ambulatory Surgical Centers
 CLIA – Clinical Diagnostic Laboratories
 CMHCs - Community Mental Health Centers
 CORF – Comprehensive Outpatient Rehabilitation Facility
 DME – Durable Medical Equipment
 DMEPOS - Durable Medical Equipment, Prosthetics, Orthotics, and Supplies
 FQHC – Federally Qualified Health Center
 HHA- Home Health Agency

IDTF - Independent Diagnostic Testing Facility
 MA – Medicare Advantage
 OPO – Organ Procurement Organization
 OPT - Outpatient Physical Therapy
 RNHCI - Religious Non-medical Health Care Institution
 RHC - Rural Health Clinic
 SNF - Skilled Nursing Facility

Code	Subject	Issue or Publication Date	Provider Type
CMS-3348-N	Secretarial Review and Publication of the National Quality Forum 2017 Annual Report to Congress and the Secretary of the Department of Health and Human Services Submitted by the Consensus-Based Entity Regarding Performance Measurement	07/25/2018	All Providers
CMS-9920-F	Adoption of the Methodology for the HHS-operated Permanent Risk Adjustment Program under the Patient Protection and Affordable Care Act for the 2017 Benefit Year	07/30/2018	All Providers
CMS-9924-F	Short Term Limited Duration Insurance	08/03/2018	All Providers
CMS-9919-P	Patient Protection and Affordable Care Act; Adoption of the Methodology for the HHS-operated Permanent Risk Adjustment Program for the 2018 Benefit Year Proposed Rule	08/10/2018	All Providers
CMS-9110-N	Quarterly Issuances Notice—April-June 2018	08/13/2018	All Providers
CMS-3346-P	Medicare and Medicaid Programs; Regulatory Provisions To Promote Program Efficiency, Transparency, and Burden Reduction	09/20/2018	All Providers
CMS-4184-N	Medicare Program; Medicare Appeals; Adjustment to the Amount in Controversy Threshold Amounts for Calendar Year 2019	08/20/2018	All Providers
CMS-6073-N2	Medicare, Medicaid, and Children's Health Insurance Programs: Announcement of Revisions to the Provider Enrollment Moratoria Access Waiver Demonstration for Part B Non-Emergency Ground Ambulance Suppliers and Home Health Agencies in Moratoria-Designated Geographic Locations	08/20/2018	Ambulance
CMS-3362-PN	Medicare and Medicaid Programs: Application From the Accreditation Association for Ambulatory Health Care, Inc. (AAAHC) for Continued Approval of Its Ambulatory Surgical Center Accreditation Program	07/26/2018	ASC

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CMS-1695-P	CY 2019 Hospital Outpatient PPS Policy Changes and Payment Rates and Ambulatory Surgical Center Payment System Policy Changes and Payment Rates	07/31/2018	ASC
CMS-6073-N2	Medicare, Medicaid, and Children's Health Insurance Programs: Announcement of Revisions to the Provider Enrollment Moratoria Access Waiver Demonstration for Part B Non-Emergency Ground Ambulance Suppliers and Home Health Agencies in Moratoria-Designated Geographic Locations	08/20/2018	HHA
CMS-1689-P	Medicare and Medicaid Programs; CY 2019 Home Health Prospective Payment System Rate Update and CY 2020 Case-Mix Adjustment Methodology Refinements; Home Health Value-Based Purchasing Model; Home Health Quality Reporting Requirements; Home Infusion Therapy Requirements; and Training Requirements for Surveyors of National Accrediting Organizations	07/13/2018	HHA
CMS-1692-F	Medicare Program; FY 2019 Hospice Wage Index and Payment Rate Update and Hospice Quality Reporting Requirements	08/06/2018	Hospice
CMS-1709-N	Medicare Program; Certain Changes to the Low-Volume Hospital Payment Adjustment Under the Hospital Inpatient Prospective Payment Systems (IPPS) for Acute Care Hospitals for Fiscal Years 2011 Through 2017	08/23/2018	Hospital

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CMS-1694-F	Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2019 Rates; Quality Reporting Requirements for Specific Providers; Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs (Promoting Interoperability Programs) Requirements for Eligible Hospitals, Critical Access Hospitals, and Eligible Professionals; Medicare Cost Reporting Requirements; and Physician Certification and Recertification of Claims	08/17/2018	Hospital
CMS-3357FN	Medicare and Medicaid Program; Application From DNV GL-- Healthcare (DNV GL) for Continued Approval of Its Hospital Accreditation Program	08/17/2018	Hospital
CMS-1690-F	Medicare Program; FY 2019 Inpatient Psychiatric Facilities Prospective Payment System and Quality Reporting Updates for Fiscal Year Beginning October 1, 2018 (FY 2019)	08/06/2018	Hospital
CMS-1688-F	Medicare Program; Inpatient Rehabilitation Facility Prospective Payment System for Federal Fiscal Year 2019	08/06/2018	Hospital
CMS-1695-P	CY 2019 Hospital Outpatient PPS Policy Changes and Payment Rates and Ambulatory Surgical Center Payment System Policy Changes and Payment Rates	07/31/2018	Hospital
CMS-3364-PN	Medicare and Medicaid Programs: Application From the Joint Commission (TJC) for Continued Approval of its Psychiatric Hospital Accreditation Program	08/15/2018	Hospital

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CMS-2414-N	Medicaid Program; Final FY 2016 and Preliminary FY 2018 Disproportionate Share Hospital Allotments, and Final FY 2016 and Preliminary FY 2018 Institutions for Mental Diseases Disproportionate Share Hospital Limits	07/06/2018	Medicaid
CMS-2413-P	Medicaid Program; Reassignment of Medicaid Provider Claims	07/13/2018	Medicaid
CMS-7051-N	Meeting of the Advisory Panel on Outreach and Education (APOE)—September 19, 2018	08/30/2018	Meeting Notes
CMS-7051-CN	Medicare & Medicaid Programs, and Other Program Initiatives, and Priorities; Meeting of the Advisory Panel on Outreach and Education (APOE), September 26, 2018; Correction	09/17/2018	Meeting Notes
CMS-1701-P	Medicare Program; Medicare Shared Savings Program; Accountable Care Organizations--Pathways to Success	08/17/2018	Physician
CMS-1693-P	Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule and Other Revisions to Part B for CY 2019; Medicare Shared Savings Program Requirements; Quality Payment Program; and Medicaid Promoting Interoperability Program	08/09/2018	Physician
CMS-1693-P	Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule and Other Revisions to Part B for CY 2019; Medicare Shared Savings Program Requirements; Quality Payment Program; and Medicaid Promoting Interoperability Program	07/27/2018	Physician
CMS-3362-PN	Medicare and Medicaid Programs: National Dialysis Accreditation Commission (NDAC) for Approval of its End Stage Renal Disease (ESRD) Facility Accreditation Program	08/07/2018	RDF/ESRD

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CMS-1691-P	Y 2019 Changes to the End-Stage Renal Disease (ESRD) Prospective Payment System, Quality Incentive Program, Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)	07/19/2018	RDF/ESRD
CMS-1696-F	Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities (SNF) Final Rule for FY 2019, SNF Value-Based Purchasing Program, and SNF Quality Reporting Program	08/08/2018	SNF
CMS-6059-N9	Medicare, Medicaid, and Children's Health Insurance Programs: Announcement of the Extension of Temporary Moratoria on Enrollment of Part B Non-Emergency Ground Ambulance Suppliers and Home Health Agencies in Designated Geographic Locations	08/02/2018	Supplier
CMS-6073-N2	Medicare, Medicaid, and Children's Health Insurance Programs: Announcement of Revisions to the Provider Enrollment Moratoria Access Waiver Demonstration for Part B Non-Emergency Ground Ambulance Suppliers and Home Health Agencies in Moratoria-Designated Geographic Locations	08/20/2018	Supplier