Thursday, January 23, 2020

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News

Medicare Learning Network Celebrates 20 Years
The Medicare Learning Network® (MLN) is celebrating 20 years of producing free, high quality educational resources for health care providers and professionals.

Visit the MLN Homepage to learn about CMS programs, policies, and initiatives. Find educational materials in a variety of formats, including:

- MLN Matters Articles
- Calls & Webcasts
- Web-Based Training
- Publications
- Multimedia
- Social Media

Thank you for trusting us as your source for Medicare information.

**CMS Updates Open Payments Data**

CMS updated the Open Payments Data Set to reflect changes to the data that took place since the last publication in June 2019. The refresh includes:

- Record updates: Changes to non-disputed records that were made on or before November 15 are published.
- Disputed records: Dispute resolutions completed on or before December 31 are displayed with the updated information. Records with active disputes that remained unresolved as of December 31 are displayed as disputed.
- Record deletions: Records deleted before December 31 were removed from the Open Payments database. Records deleted after December 31 remained in the database, but will be removed during the next data publication in June 2020.

CMS updates the Data Set at least once annually to include updates from disputes and other data corrections made since the initial publication of the data.

For More Information:

- Open Payments website
- Resources webpage
- Submit questions to openpayments@cms.hhs.gov or call 855-326-8366 (TTY: 844-649-2766)

**Open Payments Search Tool: New Features**

The updated Open Payments search tool has the following features:

**Entity Profile:**
- The profile pages for companies, physicians, and teaching hospitals are redesigned to present the payment data in a dashboard format
- Apply filters to update the data sections: Sort the data by year, payment type, entity making or receiving payment, and nature of payment

**Advanced Search:**
- Query Builder is renamed “Advanced Search”; still located on the homepage
- Includes advanced search features, autocomplete for entity lookup, and an improved searching experience

For More Information:

- Open Payments website
- Resources webpage
- Submit questions to openpayments@cms.hhs.gov or call 855-326-8366 (TTY: 844-649-2766)
Shoulder Arthroscopy: Comparative Billing Report in January

In late January, CMS will issue a Comparative Billing Report (CBR) on Shoulder Arthroscopy, focusing on providers who submit Medicare Part B claims. These reports contain data-driven tables with an explanation of findings that compare your billing and payment patterns to those of your peers in your state and across the nation.

CBRs are not publicly available. Look for an email from cbrpepper.noreply@religroupinc.com to access your report. Update your contact email address in the Provider Enrollment, Chain, and Ownership System to ensure accurate delivery. Visit the CBR website for more information.

Medicare Diabetes Prevention Program: Become a Medicare Enrolled Supplier

Medicare pays Medicare Diabetes Prevention Program (MDPP) suppliers to furnish group-based intervention to at-risk eligible Medicare beneficiaries:
- Centers for Disease Control and Prevention (CDC)-approved National Diabetes Prevention Program curriculum
- Up to 2 years of sessions delivered to groups of eligible beneficiaries

Find out how to become a Medicare enrolled MDPP supplier:
- Obtain CDC preliminary or full recognition - Takes at least 12 months to obtain preliminary recognition and up to 24 additional months to achieve full recognition: See the Supplier Fact Sheet and CDC website
- Prepare for Medicare enrollment: See the Enrollment Fact Sheet and Checklist
- Apply to become a Medicare enrolled MDPP supplier (existing Medicare providers must re-enroll): See the Enrollment Webinar Recording and Enrollment Tutorial Video
- Furnish MDPP service: See the Session Journey Map
- Submit claims to Medicare: See the Billing and Claims Webinar Recording, Billing and Claims Fact Sheet, and Billing and Payment Quick Reference Guide

For More Information:
- MDPP Expanded Model Booklet
- Materials from Medicare Learning Network call on June 20, 2018
- MDPP webpage
- CDC - CMS Roles Fact Sheet
- Contact mdpp@cms.hhs.gov

Issues Viewing the CMS Website?

Do you use Internet Explorer to access cms.gov? If the website is not displaying correctly, use another browser, such as Chrome or Firefox.

Continue Seasonal Influenza Vaccination through January and Beyond

Vaccinate as long as influenza activity continues, even in January or later. People 65 years and older are at high risk of developing serious complications from seasonal influenza. The Centers for Disease Control and Prevention (CDC) recommends annual influenza vaccination for everyone 6 months and older – to help protect your patients, your staff, and yourself.

Medicare Part B covers:
- Influenza virus vaccine once per influenza season
- Additional influenza vaccines if medically necessary
For More Information:

- [Medicare Preventive Services](#) Educational Tool
- [Influenza Resources for Health Care Professionals](#) MLN Matters Article
- [Influenza Vaccine Payment Allowances](#) MLN Matters Article
- [CDC Influenza](#) website
- [CDC Information for Health Professionals](#) webpage
- [CDC Fight Flu Toolkit](#) webpage
- [CDC Make a Strong Flu Vaccine Recommendation](#) webpage

## Compliance

### DMEPOS: Bill Correctly for Items Provided During Inpatient Stays

In a recent report, the Office of Inspector General (OIG) determined that Medicare improperly paid suppliers for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) items provided during inpatient stays. Medicare should not pay a supplier for items furnished to a beneficiary when the beneficiary is still an inpatient.

CMS developed the [Medicare DMEPOS Improper Inpatient Payments Fact Sheet](#) to help you bill correctly. Additional resources:

- [Medicare Quarterly Provider Compliance Newsletter](#), Volume 9, Issue 2
- [Medicare Claims Processing Manual, Chapter 20](#), Section 10
- [Medicare Claims Processing Manual, Chapter 30](#), Section 130.1
- [Medicare Improperly Paid Suppliers for DMEPOS Provided to Beneficiaries During Inpatient Stays](#) OIG Report
- [Medicare Inappropriately Paid Acute-Care Hospitals for Outpatient Services They Provided to Beneficiaries Who Were Inpatients of Other Facilities](#) OIG Report
- [Medicare Paid New England Providers Twice for Nonphysician Outpatient Services Provided Shortly Before or During Inpatient Stays](#) OIG Report
- [Medicare Continues To Pay Twice for Nonphysician Outpatient Services Provided Shortly Before or During an Inpatient Stay](#) OIG Report

## Claims, Pricers & Codes

### Medicare Diabetes Prevention Program: Valid Claims

For a claim to be valid under the Medicare Diabetes Prevention Program (MDPP), you must have both:

- Centers for Disease Control and Prevention (CDC) preliminary or full recognition; see the [Supplier Fact Sheet](#) and [CDC](#) website for more information
- Separate Medicare enrollment as an MDPP supplier (Specialty D1); see the [Enrollment Fact Sheet](#) and [Checklist](#)

**Important:**

If you do not have a separate Medicare enrollment as an MDPP supplier and you submit a claim for MDPP services, your claim will be rejected.

Medicare enrolled MDPP suppliers: See the [Quick Reference Guide to Payment and Billing](#) and the [Billing and Claims Fact Sheet](#) for information on valid claims:

- MDPP Medicare beneficiary eligibility data is returned via the [HIPAA Eligibility Transaction System (HETS)](#) on the 271 response; use this data to determine if a beneficiary meets the criteria to receive MDPP services
- Submit claims when a performance goal is met, and report codes only once per eligible beneficiary (except G9890 and G9891)
List each HCPCS code with the corresponding session date of service and the coach’s National Provider Identifier
List all HCPCS codes associated with a performance payment (including non-payable codes) on the same claim
Include Demo code 82 in block 19 (Loop 2300 segment REF01 (P4) and segment REF02 (82)) to identify MDPP services
Do not include codes for other, non-MDPP services on the same claim

For More Information:
- MDPP Expanded Model Booklet
- MDPP webpage
- For trouble with MDPP billing and claims, contact your Medicare Administrative Contractor

Events

Listening Sessions on MAC Opportunities to Enhance Provider Experience — January 29
Wednesday, January 29 from 2 to 3 pm ET

Register for Medicare Learning Network events.

As part of our 2020 priorities, we are holding listening sessions to gather feedback and improve your experience with the Medicare Fee-For-Service (FFS) program. Through competitive cost-plus award-fee contract procurements, CMS encourages Medicare Administrative Contractors (MACs) to innovate and respond to provider, practitioner, and supplier expectations in their jurisdictions.

We invite you to participate. CMS wants to hear your feedback to improve processes and enhance interactions with your MAC related to operations, technology, and business functions. We are particularly interested in hearing provider, practitioner, and supplier ideas about actions we could take to improve the overall beneficiary quality of care and customer service experience they may have with the MACs. CMS Administrator, Seema Verma will open this call.

You can email comments or questions in advance of the listening session to CMSListens@cms.hhs.gov with “MAC Provider Experience” in the subject line. We may address them during the listening session or use them to develop other resources following the session.

Target Audience: Medicare FFS providers, practitioners, suppliers, their representative associations, and any interested stakeholders.

Shoulder Arthroscopy: Comparative Billing Report Webinar — February 4
Tuesday, February 4 from 3 to 4 pm ET

Register for this webinar.

Join us for a discussion of the Comparative Billing Report (CBR) on Shoulder Arthroscopy, an educational tool for providers who submit Medicare Part B claims. Visit the CBR website for more information.

CMS Quality Conference — February 25-27
Tuesday, February 25 through Thursday, February 27

Register for this conference.

Each year CMS brings together over 3,000 leaders across the health care spectrum, to explore how patients, advocates, providers, researchers, and champions in health care quality improvement can develop and spread solutions to address to America’s most pervasive health system challenges.
Highly Pathogenic Infectious Disease Training and Exercise Resources Webinar — March 5
Thursday, March 5, from 1:30 to 3 pm ET

Register for this webinar.

Join the Office of the Assistant Secretary for Preparedness and Response (ASPR) Technical Resources, Assistance Center, and Information Exchange (TRACIE) and the National Ebola Training and Education Center to learn about new online courses and exercise templates. See the announcement for more information.

MLN Matters® Articles

Quarterly Update to the National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP) Edits, Version 26.1, Effective April 1, 2020

A new MLN Matters Article MM11628 on Quarterly Update to the National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP) Edits, Version 26.1, Effective April 1, 2020 is available. Learn about availability of the final file on or about February 14.

2020 Durable Medical Equipment Prosthetics, Orthotics, and Supplies Healthcare Common Procedure Coding System (HCPCS) Code Jurisdiction List

A new MLN Matters Article MM11596 on 2020 Durable Medical Equipment Prosthetics, Orthotics, and Supplies Healthcare Common Procedure Coding System (HCPCS) Code Jurisdiction List is available. Learn about updates to the list of HCPCS codes.

Clinical Laboratory Fee Schedule – Medicare Travel Allowance Fees for Collection of Specimens

A new MLN Matters Article MM11641 on Clinical Laboratory Fee Schedule – Medicare Travel Allowance Fees for Collection of Specimens is available. Learn about payment of travel allowances for HCPCS codes P9603 and P9604.

Home Health (HH) Patient-Driven Groupings Model (PDGM) - Split Implementation — Revised

A revised MLN Matters Article MM11081 on Home Health (HH) Patient-Driven Groupings Model (PDGM) - Split Implementation is available. Learn about the corrected request for anticipated payment percentage.

Implementation to Exchange the List of Electronic Medical Documentation Requests (eMDR) for Registered Providers via the Electronic Submission of Medical Documentation (esMD) System — Revised

A revised MLN Matters Article MM11003 on Implementation to Exchange the List of Electronic Medical Documentation Requests (eMDR) for Registered Providers via the Electronic Submission of Medical Documentation (esMD) System is available. Learn about the February 3 effective date.

Publications

Quality Payment Program: 2020 Resources
CMS posted new Quality Payment Program (QPP) resources to help you understand how to participate in the 2020 performance period:

Merit-based Incentive Payment System (MIPS) Quick Start Guides:
- Overview
- Eligibility and Participation
- Part B Claims Reporting
- Quality Performance Category
- Promoting Interoperability Performance Category
- Improvement Activities Performance Category
- Cost Performance Category

Other resources:
- MIPS Data Validation Criteria
- Quality Benchmarks
- Shared Savings Program and QPP Interactions Guide
- Scores for MIPS Alternative Payment Models (APMs) Improvement Activities
- Comprehensive List of APMs
- Qualified Registries Qualified Posting
- Qualified Clinical Data Registries Qualified Posting

For More Information:
- Resource Library webpage
- Contact qpp@cms.hhs.gov or 866-288-8292 (Customers who are hearing impaired can dial 711 to be connected to a TRS communications assistant)

Multimedia

Quality Payment Program: 2019 Data Submission Videos

CMS posted new Quality Payment Program (QPP) FAQs and videos to help you submit your 2019 Merit-based Incentive Payment System (MIPS) data. The submission period closes on March 31 at 8 pm ET.

Data Submission Demonstration Videos:
- Introduction and Overview of 2019 Data Submission
- File Upload and Quality Scoring
- Manual Attestation of Improvement Activities Measures
- Manual Attestation of Promoting Interoperability Measures

Opt-In Demonstration Videos:
- Opt in as a QPP Eligible Clinician
- Opt in as a Registry

2019 Web Interface Demonstration Videos: Series of videos on Excel templates, data irregularities, planning the work, PREV-10, resolving errors, 2019 data submission, and tracking progress

For More Information:
- Resource Library webpage
- Contact qpp@cms.hhs.gov or 866-288-8292 (Customers who are hearing impaired can dial 711 to be connected to a TRS communications assistant)

Health Care Challenges in Chemical Incidents Webinar Recording
The presentation and recording are available from the January 14 webinar hosted by the Office of the Assistant Secretary for Preparedness and Response (ASPR) Technical Resources, Assistance Center, and Information Exchange (TRACIE). Enter your name and email address to access the recording.

**Infection Prevention and Control: Environmental Safety Web-Based Training Course — Revised**

With Continuing Education Credit

A revised Infection Control: Environmental Safety Web-Based Training (WBT) course is available through the Medicare Learning Network Learning Management System. Learn about:
- Categories of environmental surfaces
- Differentiating between types of disinfection and cleaning
- Regulations, procedures, and policies for environmental cleaning

**Infection Prevention and Control: Hand Hygiene Web-Based Training Course — Revised**

With Continuing Education Credit

A revised Infection Prevention and Control: Hand Hygiene Web-Based Training (WBT) course is available through the Medicare Learning Network Learning Management System. Learn about:
- Methods and recommendations
- Recognizing opportunities for correct hand hygiene

**Infection Prevention and Control: Injection Safety Web-Based Training Course — Revised**

With Continuing Education Credit

A revised Infection Prevention and Control: Injection Safety Web-Based Training (WBT) course is available through the Medicare Learning Network Learning Management System. Learn about:
- Fundamentals and standards of practice
- Assessing Injection practices

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

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