

mln call

A MEDICARE LEARNING NETWORK® (MLN) EVENT

Part A Providers: QIC Appeals Demonstration Call

Thursday, March 5, 2020

Information for Part A Providers on the Centers for Medicare & Medicaid Services Qualified Independent Contractor (QIC) Telephone Discussion and Reopening Process Appeals Demonstration







A MEDICARE LEARNING NETWORK® (MLN) EVENT

Presenters:

Emily Barnes, Education and Outreach Specialist, C2C Innovative Solutions, Inc. Kathleen McCracken, Technical Advisor, CMS, Division of Appeals Operations Lynnsie Kelley, Health Insurance Specialist, CMS, Division of Appeals Operations Teri White, Health Insurance Specialist, CMS, Division of Appeals Operations





Acronyms in this Presentation

- ALJ Administrative Law Judge
- CMS Centers for Medicare & Medicaid Services
- DME Durable Medical Equipment
- HH Home Health
- HHH Home Health & Hospice
- MAC Medicare Administrative Contractor
- OMHA Office of Medicare Hearings and Appeals
- PAE Part A East
- QIC Qualified Independent Contractor





Agenda

- Medicare Fee-For-Service (FFS) Appeals Process Overview
- Medicare Appeals Demonstration
- Scope of the Part A Appeals Demonstration
- Eligible Jurisdictions
- Demonstration Features
- Telephone Discussion Process
- Benefits to Telephone Discussion Participation
- Frequently Asked Questions
- Reopening Process Benefits
- Reopening Process Provider Actions
- Education & Outreach
- Questions





Medicare Fee-For-Service (FFS) Appeals Process Overview

- Level 1: Redetermination by a Medicare Administrative Contractor (MAC)
- Level 2: Reconsideration by a Qualified Independent Contractor (QIC)
- Level 3: Decision by the Office of Medicare Hearings and Appeals (OMHA)
- Level 4: Review by the Medicare Appeals Council
- Level 5: Judicial Review in Federal District Court





Who is C2C Innovative Solutions, Inc. (C2C)

C2C is a Qualified Independent Contractor (QIC) processing second level appeals (reconsiderations) for CMS.

C2C currently is adjudicating Medicare appeals on behalf of CMS for:

- QIC Part B (North) 35 northern states, Washington DC, and three U.S. territories.
- QIC Part B (South) 15 southern states and two U.S. territories.
- QIC Part A (East) 26 eastern states, Washington D.C. and two U.S. territories. This jurisdiction also includes reconsiderations involving MSP recoveries.





Medicare Appeals Demonstration

January 1, 2016: Centers for Medicare & Medicaid Services (CMS) implemented the Telephone Discussion and Reopening Process Demonstration in the Durable Medical Equipment (DME) QIC Jurisdiction

 The demonstration was originally limited to oxygen and glucose diabetic testing supplies, and MAC Jurisdictions C & D. Now includes all 4 DME MAC Jurisdictions and all claim types (except for diabetic testing strip supplies in JA & JB)

May 1, 2019: Demonstration expanded to include appeals in the Part A East QIC jurisdiction





Medicare Appeals Demonstration

Overall Goal of the Demonstration: Test whether further engagement between suppliers/providers and the QIC, entity responsible for conducting 2nd level appeals, will improve the understanding of the cause of appeal denials, and over time, result in more proper claim submissions at the Medicare Administrative Contractor (MAC) from suppliers/providers participating in the Demonstration; thus improving the efficiency of the Medicare fee-for-service appeals process. This 5 year Demonstration is currently scheduled to end December 31, 2020.

- Evaluation of the Demonstration is being performed by IMPAQ International LLC (IMPAQ)
- Demonstration participants may be contacted by IMPAQ to provide feedback on their experience





Positive Outcomes – DME Demonstration Activities

As of the end of calendar year 2018---

- Supplier Acceptance Rate: 82%
- DME conducted over 134,000 telephone discussions
- 63% of reconsideration decisions issued after a telephone discussion were fully or partially favorable
- DME Demonstration reopening activities have reopened and favorably resolved or assisted suppliers in withdrawing more than 247,000 claims previously pending in the Administrative Law Judge (ALJ) backlog within the Office of Medicare Hearings and Appeals (OMHA)
- We look forward to similar success with the PAE Demonstration





Positive Feedback from Demonstration Participants

"The most helpful part to the demonstration is the reviewer discussing <u>exactly</u> what documentation is being requested or needed. At times the denial can seem a bit confusing (i.e. requesting supporting documentation, but for what?) During the discussions it is obvious the time the reviewers are taking to make sure they are well prepared and are able to discuss the patient in depth."

"I love the reopening process and hope that it continues. It has been so nice not to have to wait at the ALJ level for a hearing any longer on appeals that C2C was able to reopen."





Positive Feedback from Demonstration Participants, Cont.

"We have had over a 75% favorable rate since we have begun participating in the phone discussions, this is wonderful!"

"Each C2C Reviewer who I have worked with has been very professional and always ensures to ask if I have any questions. Our company is very pleased with the C2C Telephone Discussion Demonstration and continues to look forward to participating in these discussions."

"I'm really excited about the chance to actually talk to someone; to finally have a voice. This demonstration is also going to be a great educational opportunity."





Scope of the Part A Appeals Demonstration

Reconsideration requests received by the Part A East QIC- C2C Innovative Solutions, Inc. (C2C)

Eligible participants are providers who submit Part A claims to the following MACs:

- All Part A appeals: JH, JJ, JK, JL, JM, and JN
- Home health and hospice (HHH) appeals in J6 and J15

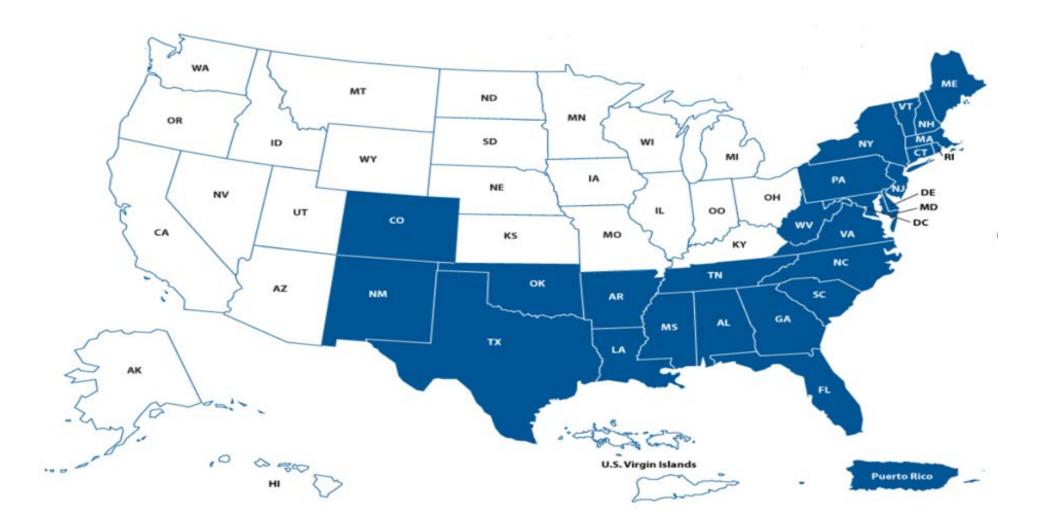
Not currently eligible for the Part A Demonstration activities:

- Expedited appeals for service termination
- Appeals that are subject to another CMS initiative





Part A East Jurisdictions







FFS Medicare Part A Appeals Eligible for QIC Demonstration

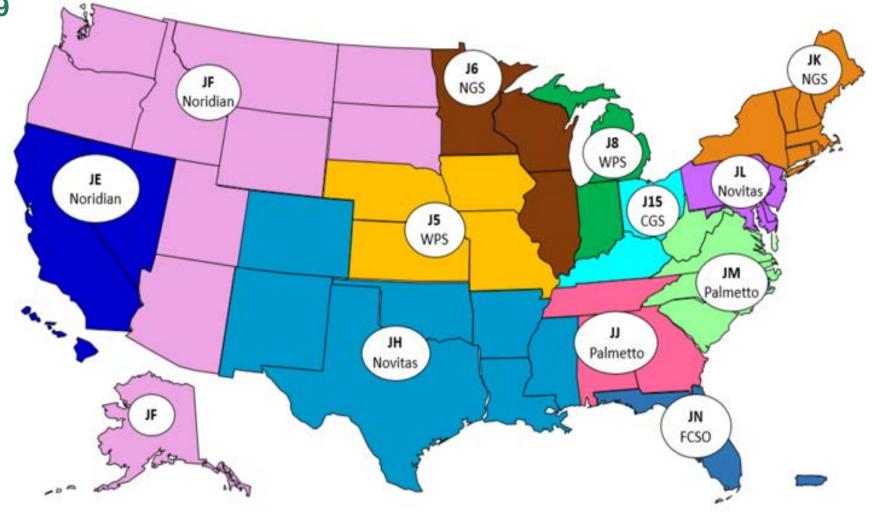
Novitas - JH	Arkansas, Colorado, Louisiana, Mississippi, New Mexico, Oklahoma, and Texas
Novitas - JL	Delaware, District of Columbia, Maryland, New Jersey, and Pennsylvania
Palmetto - JJ	Alabama, Georgia, and Tennessee
Palmetto - JM	North Carolina, South Carolina, Virginia, and West Virginia
NGS - JK	Connecticut, Maine, Massachusetts, New Hampshire, New York, Rhode Island, and Vermont
First Coast - JN	Florida, Puerto Rico, and U.S. Virgin Islands





A/B MAC Jurisdictions

as of June 2019







FFS Medicare HHH Appeals Eligible for QIC Demonstration

Palmetto - JM	Alabama, Arkansas, Florida, Georgia, Louisiana, Mississippi, New Mexico, North Carolina, Oklahoma, South Carolina, Tennessee, and Texas
CGS – J15	Colorado, Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, and West Virginia
NGS - JK	Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont
NGS – J6	New Jersey, New York, Puerto Rico, and U.S. Virgin Islands





HH&H MAC Jurisdictions

as of June 2019 JK NGS J15 J6 CGS NGS JM Palmetto





Demonstration Features

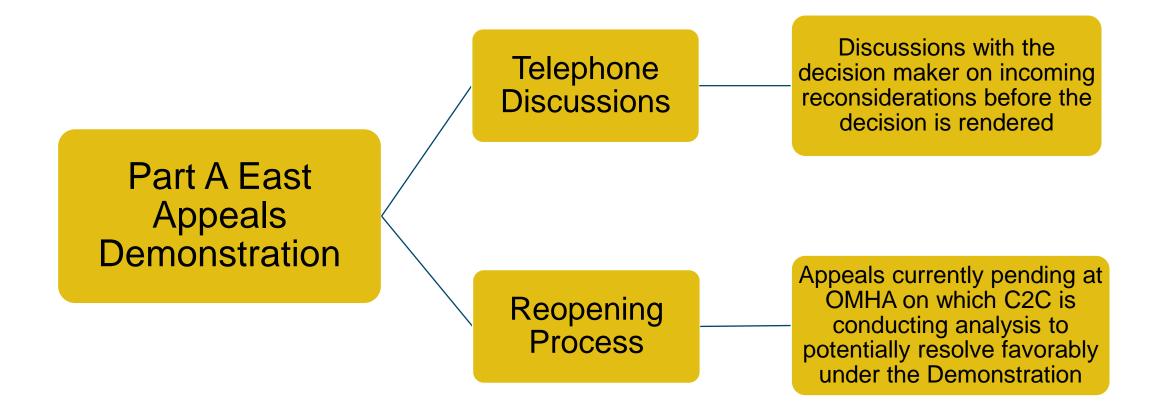
Audio recordings and evidence are included in the administrative case file forwarded to OMHA

Under the Demonstration, the QIC may conduct reopenings on appeals previously adjudicated by the Part A East QIC which are either currently pending at OMHA, or have not yet been appealed to OMHA. To reopen cases which are pending at OMHA, the QIC will request the case to be remanded.





Two Components of the Demonstration







Telephone Discussion Process

Part A East QIC reviews all reconsiderations received to identify eligible appeals and select for discussion process

Eligible claims are identified and scheduling letter is sent

Provider accepts call and submits any identified documentation

→ Call is conducted

Any additional documentation identified on the call is submitted by the provider within 14 days Decision is rendered, taking into consideration additional documentation received and any verbal testimony provided





Telephone Discussion Process

Participation in this process is voluntary

Agreement to participate in the telephone discussion process allows the QIC **120 days** to process the reconsideration, rather than the existing 60 day standard

Participation in a telephone discussion <u>does not</u> impact future appeal rights. You will still have the opportunity to appeal the QIC decision to OMHA

If you utilize a third party to handle submission of your reconsiderations, please reach out to C2C if you are interested in participating in a phone discussion





Benefits of Telephone Discussion Participation

Selected providers who elect to participate in the Demonstration will have the opportunity for direct interaction with the reconsideration decision maker to:

- Engage in a discussion of appealed claims prior to the issuance of a reconsideration decision
- C2C health care professionals have the opportunity to educate providers on complex medical necessity documentation requirements for specific services
- Providers will have an enhanced understanding of Medicare requirements for their medically necessary services, and improve future claim submissions





Benefits of Telephone Discussion Participation, Cont.

Providers have the opportunity to provide verbal testimony and become an active participant in the appeals process

- Prior to the Demonstration, providers had to wait until the Administrative Law Judge (ALJ) hearing to have this same level of participation
- Submit any missing/critical documentation needed to further support a favorable decision prior to the Part A East QIC rendering a decision





Notification and Scheduling Letter

Medicare Appeal Number:

1-123456789

May 09, 2019

PAE PROVIDER 111 SOUTH STREET JACKSONVILLE, FL 32034

DE

Telephone Discussion Demonstration Notification and Scheduling

Beneficiary: S. Smith Med ID#: ******00033A Appellant: PAE Provider

Dear PAE Provider:

This letter is to inform you that the claim(s) under appeal number 1-123456789 has been selected to participate in a voluntary telephone discussion as part of the Medicare Appeals Demonstration. The purpose of this Demonstration is to conduct telephone discussions with providers prior to the Medicare Part A East Qualified Independent Contractor (QIC) decision to ensure that all documentation and testimony related to the reconsideration appeal can be considered prior to rendering the decision.

The benefits of participating in this telephone discussion includes: direct interaction with the decision maker, the ability to provide verbal testimony, the ability to submit missing or critical documentation prior to the QIC decision and to receive feedback that will assist in your understanding of the applicable payment policies going forward. The telephone conversation will be recorded and the recording will be part of the case file.

Should you choose to participate in the Telephone Discussion Demonstration, the QIC decision shall be rendered within 120 days of receipt rather than the existing policy of 60 days. Under this Demonstration, the reconsideration is no longer subject to the 60 day processing requirements and rights to escalation as outlined in section 1869 (c)(3)(C)(i) and (ii) of the Social Security Act.

Contact Information

If you have questions, write or call:

C2C Innovative Solutions, Inc.

QIC PAE Telephone Discussion Demonstration P.O. Box 45310 Jacksonville, FL 32231-5310

Telephone: (904) 224-7371

Fax: (904) 224-2732

Who we are:
We are a Qualified
Independent
Contractor (QIC).
Medicare has
contracted with us to
review your file and
make an independent
decision

If you agree to participate in this demonstration, please return the completed Telephone Discussion Demonstration Contact Information Form (attached) within 14 calendar days from the date of this letter. Instructions on how to return the form are included below.

The recorded Telephone Discussion for the claim(s) under this appeal will be held on:

Jun 20, 2019 from 09:00 am - 09:45 am EST

at which time a Reconsideration Professional from C2C will contact you at the number you have provided on your Telephone Discussion Demonstration Contact Information Form.

Upon a cursory review of the case we have found that the documentation listed below is either missing, or insufficient:

· Lab work including hemoglobin and hematocrit results for dates of service.

Please be prepared to discuss the claim(s), provide verbal testimony, and any additional requested documentation. Please submit the attached Telephone Discussion Supporting Documentation Cover Letter form with the supporting documentation, within 14 calendar days from the date of your Telephone Discussion.

If you need to reschedule, you may request in writing (accepted via mail/fax) that the call be rescheduled. Please note that rescheduled discussions are granted at the discretion of C2C Innovative Solutions. Inc.

Appeal Details

Appellan	PAE Provider
AC	Novitas Solutions, Inc.(12501)

Redetermination Number	Beneficiary	Date of Service
N/A	*******00033A	08/25/80
	S. Smith	

Sincerely,

Ben Chang,

Medicare Part A East - C2C Innovative Solutions, Inc. Medicare Contractor





Contact Information Sheet and Cover Page

•	viscussion Demonstration Contact Form our contact information for the Telephone Discussion. Return	
	calendar days of the date noted in the attached letter.	
Part P.O Jack	C Innovative Solutions, Inc. t A East Telephone Discussion Demonstration . Box 45310 scowalle, FL 32232 :: (904)224-2732	
The recorded Telephone Discussion	on for the claim(s) under this appeal will be held on:	
Jun 31, 2019 from 09:00 am - 09:	45 am EST	
Medicare appeal number:	1	
Medicale appear number.	1-123456789	
Supplier/provider/appellant name:	PAE Provider	
Contact Person For Discussion:	~	
Phone Number:	~~~	
Fax Number:		
Email Address:		
\		
X		
Signature of Representative	Da	te

Medicare Appeal Number: 1-123456789 Telephone Discussion Supporting Documentation Cover Letter Please submit this form with the supporting documentation discussed during your Telephone Discussion, within 14 calendar days from the date of your Telephone Discussion. C2C Innovative Solutions, Inc. Part A East Telephone Discussion Demonstration P.O. Box 45310 Jacksonville, FL 32232-5310 Fax: (904)224-2732 Please include the following documentation: · Lab work including hemoglobin and hematocrit results for dates of service.





Frequently Asked Questions





Who can I contact if I want to participate in or have more questions related to the Discussions Process?

To participate in a Telephone Discussion

 You may indicate your interest in participating in a discussion on your reconsideration request that is mailed to C2C

For more information visit:

www.c2cinc.com

For general comments or questions:

Ademofeedback@c2cinc.com

C2C Innovative Solutions, Inc. - Part A East Appeals Demonstration

- 904-224-7371 (phone)
- 904-224-2732 (fax)





I used a third party to manage my QIC and ALJ appeals. Who can I contact if I want to participate in or have more questions related to the Discussions and Reopening Process?

If you hire a company to submit your appeals to Medicare, but would like to participate in the telephone discussions and/or the reopening process you can:

- Indicate on your reconsideration request that you would like a phone discussion, or include a cover letter to your reconsideration request that indicates you would like a phone discussion;
- Send an email to Ademofeedback@c2cinc.com that includes your NPI;
- Contact our Education & Outreach Specialist (<u>Emily.Barnes@c2cinc.com</u>);
 or
- Contact C2C at 904-224-7371





What if I have to cancel my telephone discussion?

Please call and leave a message at 904-224-7371. C2C Innovative Solutions, Inc. will contact you regarding your request to reschedule. When leaving a message:

 Please include your name, appeal number and best number to contact you





Where can I fax additional materials for consideration as part of the phone discussion?

Additional materials should be addressed to the following: QIC PAE – Phone Discussions Fax Line of C2C Innovative Solutions, Inc. at 904-224-2732





What happens if I cannot find and do not submit the documentation requested prior to or during the telephone discussion?

A reconsideration professional will continue to make a determination on your appeal based upon the previously submitted documentation





May I decline to participate in a telephone discussion?

Yes, participation in this demonstration is voluntary. If you receive a notice that your appeal has been selected for participation in this demonstration and you do not wish to participate or do not agree with the 120-day processing timeframe, call and leave a message at 904-224-7371. C2C will cancel your scheduled discussion, and your appeal will continue through the standard reconsideration process. C2C will make every effort to complete the review within 60 days from the day the appeal was received by C2C, but will have up to an additional 14 calendar days. When leaving a message, include your name, appeal number and the best number to contact you should we have any questions.





How long do the phone discussions take?

On average, 20-30 minutes for the first call and 15 minutes for subsequent calls.





Telephone Discussion Findings





Telephone Discussion Findings

Thus far for the Part A Appeals Demonstration (May 2019 – February 2020), the highest MAC denial reasons overturned are:

- Evidence did not support medical necessity
- Covered diagnosis/Covered indication
- Face To Face (FTF) issues (e.g., not related to primary reason for Home Health services or didn't support need for skilled services or homebound status)





Telephone Discussion Findings

Common types of issues resolved through a Phone Discussion

- For inpatient claims that were denied by the MAC due to no covered indication or diagnosis, a phone discussion has been beneficial because C2C could look at the medical record as a whole, and if a covered dx/indication was supported, the provider could submit a corrected UB-04.
- Providers have said that the discussion was very helpful for the provider's understanding of exactly why the case was denied and what specifically was needed to support payment





Telephone Discussion Findings

Common types of issues resolved through a Phone Discussion, Cont.:

- For home health homebound status denials, if C2C was able to find that it was supported in other parts of the record, e.g., medical records other than the face-to-face visit, etc., the reviewer was able to overturn the decision.
- Discussions are helpful because there is clarity on what is needed and why, and the provider may be able to either send in additional records or provide verbal testimony that points out specifics in documentation already submitted





Telephone Discussion Findings

Common types of issues resolved through a Phone Discussion, Cont.:

A specific example was a cataract surgery case that had been denied by the MAC because the records did not support that macular degeneration was ruled out prior to the surgery. The physician participated in the phone discussion and was able to clarify parts of the record which supported coverage. Additional documentation was not required, and the case was found favorable

Phone discussions with the therapist for a therapy case have been helpful because the therapist could point out parts of the record which they felt supported coverage





Telephone Discussion Findings

Overall, C2C reviewers have said there have been many providers who were not clear on specifically why the case was denied, or specifically what additional information/documentation was required. These providers were very glad to finally understand the documentation needed and be able to provide exactly what was missing, or to point out/explain what parts of the record supported payment through a telephone discussion





Reopening Process





Benefits of Reopening Process Participation

C2C will identify missing documentation that may allow your appeal to be favorably resolved

Opportunity for favorable resolution by the Part A East QIC, through the reopenings process, of claims that are currently pending assignment at OMHA

If through the course of the Demonstration activities, the provider determines that they no longer wish to appeal, or find that they do not have the necessary documentation, the Part A East QIC can facilitate withdrawals of any pending appeals at OMHA

Reopenings are currently limited to request for hearing dates of April 1, 2017 to current





Demonstration Reopening Process – Provider Actions

Providers will be notified in writing if an appeal is identified as a potential reopening, along with the missing or insufficient documentation required to allow payment

Providers have **30 days** from the date of the letter to return requested documentation

If the requested documentation is not received, C2C will not proceed with the Reopening

Providers may submit a request for a potential reopening





Reopening Document Request Letter

1-123456789

May 24, 2019

PAE PROVIDER PO BOX 123 JACKSONVILLE, FL 32034

RE: Appeal Demonstration Reopening Process Documentation Request

Dear PAE Provider.

This letter is to inform you that the claim(s) under appeal number 1-123456789 has/(have) been selected for potential reopening as part of the Medicare Appeals Demonstration that the Centers for Medicare & Medicaid Services has contracted with C2C Innovative Solutions Inc. (C2C) to perform. As part of this Demonstration, C2C is conducting an analysis of claims previously adjudicated unfavorably by the Qualified Independent Contractor (QIC) that are currently pending at the Office of Medicare Hearings and Appeals (OMHA) and may be resolved favorably by the QIC, should the requested documentation indicated below be provided.

To participate in the reopening process under this Demonstration, please review the enclosed Documentation Cover Letter and return to C2C with the requested documentation. This cover letter includes a list of the required documents to initiate the reopening process, and require submission within 30 calendar days from the date of this letter.

Once we receive the requested information, we will carefully review the additional documentation. If we determine a favorable reopening decision can be issued following the documentation review, while the case is currently pending at the OMHA, C2C will work with the OMHA to remand the case back to C2C for processing of the favorable reopening decision. If we are unable to render a favorable decision, your placement at the OMHA will not be affected and we will provide you with written notification regarding why we were unable to proceed with the reopening.

Should a follow up call be requested, a C2C Reconsideration Professional will contact you at the number you have provided.

Sincerely,

QIC Part A East Medicare Contractor Contact Information

Medicare Appeal

Number:

If you have questions, write or call:

C2C Innovative Solutions, Inc. QIC PAE Reopening Process Demonstration P.O. Box 45310 Jacksonville, FL 32232-5310

Telephone: (904) 224-7349

Fax: (904) 224-2732

Who we are: We are a Qualified Independent Contractor (QIC). Medicare has contracted with us to review your file and make an independent decision.

Medicare Appeal Number: 1-123456789

Appeal Details

Appellant PAE Provider
MAC CGS 15004

BENEFICIARY: S. SMITH, *****1111A

DENERICIANI. S. SMITH, ITTIA				
ICN	Denied Services During		Redetermination Number	
	From DOS	To DOS		
12345678900000ABC	August 18,	September 10,		
	2013	2013		





Documentation Submission Cover Sheet

Medicare Appeal Number: 1-123456789 Demonstration Reopening Process Documentation Cover Letter THIS COVER LETTER MUST BE RETURNED AS THE FIRST PAGE OF THE DOCUMENTATION FOR EACH CASE. FAILURE TO DO SO MAY RESULT IN SIGNIFICANT DELAYS DUE TO DIFFICULTIES IN IDENTIFYING THE PROPER Please submit this form with the documentation, requested below, within 30 calendar days of the date noted in the attached letter. C2C Innovative Solutions, Inc. QIC PAE - Reopening Process Demonstration P.O. Box 45310 Jacksonville, FL 32232-5310 Fax: (904)224-2732 In order to reopen the case above, please submit the following documentation: Records - Physician Additional Information: Please submit documentation, such as physician progress notes, from around the time the initial face to face encounter occurred that supports the beneficiary's homebound status. The documentation should indicate that human assistance or an assistive device was required by the beneficiary. By submitting this form, I agree to participate in the Reopening Process Demonstration as outlined in the Telephone Discussion Demonstration. I understand that the eligible appeals will be remanded from OMHA to be resolved at the QIC level once I have submitted the necessary documentation. Signature of Representative Date





Demonstration Reopening Process, Cont.

Upon receipt of the requested documentation, C2C will confirm that the documents support a favorable decision

If the documentation supports a favorable decision, upon receipt of the remand from OMHA, C2C will reopen and render favorable decision

If a favorable decision cannot be rendered, the provider will be notified in writing, and the appeal will remain at OMHA and will not lose placement at the ALJ





Demonstration Reopening Process, Cont.

Providing documentation as part of the reopening process <u>does not</u> impact your appeal pending OMHA. If your appeal cannot be favorably resolved through the reopening process, your appeal will retain its place in line at OMHA

To support a favorable reopening under the Demonstration, providers <u>must</u> supply the Part A East QIC with requested documentation in accordance with the timeframes provided in the reopening documentation request letter from the QIC

If you utilize a third party to handle submission of your reconsiderations, please reach out to C2C if you are interested in participating in the reopening process





Education & Outreach





Education & Outreach

Website

- <u>C2C website</u> (www.c2cinc.com)
- Appeals Demonstration Tab (Part A East Appeals Demonstration)
 - Purpose
 - Reopening Process
 - FAQ
 - Newsletter
 - Forms







Education & Outreach, Cont.

Initiatives:

- ACT Calls (Ask the Contractor teleconferences with the MACs)
- Webinars
- Quarterly newsletters
- State association meetings
- MAC education workshops
- National conferences





Question & Answer Session





Resources

- C2C website: www.c2cinc.com
- Submit questions to C2C: <u>ADemoFeedback@c2cinc.com</u>
- Emily Barnes: Emily.Barnes@c2cinc.com
- CMS website: https://www.cms.gov/Medicare/Appeals-and-grievances/OrgMedFFSAppeals/index.html
- Submit questions to CMS: <u>MedicareFFSappeals@cms.hhs.gov</u> with "Appeals Demonstration" in the subject line





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