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Official CMS news from the Medicare Learning Network®

Thursday, July 2, 2020

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News

CMS Proposes to Expand Coverage Policy for Transcatheter Edge-to-Edge Repair for Patients with Mitral Valve Regurgitation

On June 30, CMS proposed to update its national coverage policy for a procedure known as Transcatheter Edge-to-Edge Repair (TEER) of the mitral valve to include patients with functional Mitral Regurgitation (MR). TEER is a less invasive treatment option that involves clipping together a portion of the mitral valve leaflets for patients with a condition where their mitral valves do not close properly.

The current national coverage determination, effective since August 2014, established coverage of TEER of the mitral valve only for Medicare patients with significant symptomatic degenerative MR under coverage with evidence development and did not cover patients with functional MR.

Under the coverage proposal, CMS will expand coverage to patients with functional MR so more patients will have access to this procedure. This proposal aligns with the Food and Drug Administration's 2019 expansion of approved indications for Abbott Vascular's MitraClip and provides coverage to patients with functional MR. Additionally, CMS proposes to remove the coverage with evidence development designation and proposes local Medicare Administrative Contractor discretion for coverage of TEER of the mitral valve for patients with degenerative MR. As a result, providers would no longer need a registry or to participate in a clinical study to furnish this heart procedure to Medicare patients.

“Over the last several years CMS has been closely monitoring the evolution of TEER for the mitral valve and today’s proposed decision is another example of our commitment to ensuring Medicare patients have access to the latest technology,” said CMS Administrator Seema Verma. “We recognize that patients with functional MR have limited treatment options beyond medical therapy and we believe this decision provides them with access to a new treatment option that may lead to improved health outcomes.”

CMS [seeks comments](#) on the proposed national coverage determination. A final decision will be issued no later than 60 days after the conclusion of the 30-day public comment period. Read the [proposed decision](#).

See the full text of this excerpted [CMS Press Release](#) (issued June 30).

Physician Compare Preview Period Open through August 20

The Physician Compare preview period is open through August 20 at 8 pm ET. Preview your 2018 Quality Payment Program performance information before it appears on the [Physician Compare](#) website profile pages and in the Downloadable Database. Access the secured preview through the [Quality Payment Program](#) website.

For More Information:

- [Preview Period User Guide](#)
- Performance Year 2018 preview period information for [clinicians](#) and [groups](#)
- [Physician Compare Initiative](#) website
- For questions about Physician Compare, public reporting, or the 60-day preview period, which is extended from 30 days, contact PhysicianCompare-Helpdesk@AcumenLLC.com
- For assistance accessing the Quality Payment Program website or obtaining your Enterprise Identity Management (EIDM) system user role, contact QPP@cms.hhs.gov

ABN Form Renewal

the Office of Management and Budget approved the Advance Beneficiary Notice of Noncoverage (ABN) ([Form CMS-R-131](#)) and [instructions](#) for renewal. You must use the renewed form with the expiration date of June 30, 2023, beginning August 31. There are no other changes to the form. Visit the [ABN](#) webpage for more information.

Medicare Enrollment Application Fee Refunds through EFT

CMS is now issuing application fee refunds through Electronic Funds Transfer (EFT), rather than paper checks. We will request new information if you need an application fee refund for your CMS-855A, CMS-855B, CMS-855S, or CMS-20134 submitted via an automated clearinghouse.

Complete and return the EFT form issued by your Medicare Administrative Contractor, including your account information. This process will expedite your refund processing time.

Claims, Pricers & Codes

SNF Benefit Waiver Period: Billing Update

CMS revised the billing instructions on page 12 of [MLN Matters Article SE20011](#). Changes include instructions to readmit the beneficiary on day 101 to start the Skilled Nursing Facility (SNF) benefit waiver period.

Events

Nursing Home Training Series Webcasts — July 2, 9, and 16

Thursdays from 4 to 5 pm ET

[Register](#) for these webcasts.

This series is brought to you by CMS and the Quality Improvement Organization Program, a national network of Quality Innovation Network-Quality Improvement Organizations serving every state and territory. Upcoming topics:

- July 2: Transparency: Resident and Family Notification
- July 9: Managing Staffing Challenges
- July 16: Reopening Considerations

Miss a training? View recordings, slides, and resources on QIOProgram.org.

Medicare Part A Cost Report: New Online Status Tracking Feature Call — July 9

Thursday, July 9 from 1 to 2:30 pm ET

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

Medicare Part A providers: Learn about updates to the Medicare Cost Report e-Filing (MCR eF) system that allow tracking from submission through finalization. Topics:

- Overview of new online status tracking, including functionality and layout
- Recap of how to access the system and transmit your report
- Frequently asked questions

Use MCR eF to:

- Submit cost reports with fiscal years ending on or after December 31, 2017
- Track the status of cost reports with fiscal years ending after December 31, 2009

You have the option to electronically transmit your cost report through MCR eF or mail or hand deliver it to your Medicare Administrative Contractor. You must use MCR eF if you choose electronic submission.

A question and answer session follows the presentation; however, attendees may email questions in advance to OFMDPAOQuestions@cms.hhs.gov with “Medicare Cost Report e-Filing System Call” in the subject line. We may address these questions during the call or use them for other materials later. For more information, see the [MCR eF](#) MLN Matters Article and [MCR eF](#) webpage.

Target Audience: Medicare Part A providers and entities that file cost reports for providers.

MLN Matters® Articles

July 2020 Update of the Ambulatory Surgical Center (ASC) Payment System

A new MLN Matters Article MM11842 on [July 2020 Update of the Ambulatory Surgical Center \(ASC\) Payment System](#) is available. Learn about billing instructions and updates to HCPCS codes.

Quarterly Update to the National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP) Edits, Version 26.3, Effective October 1, 2020

A new MLN Matters Article MM11840 on [Quarterly Update to the National Correct Coding Initiative \(NCCI\) Procedure-to-Procedure \(PTP\) Edits, Version 26.3, Effective October 1, 2020](#) is available. Learn about availability of test and final files.

International Classification of Diseases, 10th Revision (ICD-10) and Other Coding Revisions to National Coverage Determination (NCDs) – July 2020 Update — Revised

A revised MLN Matters Article MM11655 on [International Classification of Diseases, 10th Revision \(ICD-10\) and Other Coding Revisions to National Coverage Determination \(NCDs\) – July 2020 Update](#) is available. Learn about the removal of CPT code 0048U for next generation sequencing.

National Coverage Determination (NCD) 160.18 Vagus Nerve Stimulation (VNS) — Revised

A revised MLN Matters Article MM11461 on [National Coverage Determination \(NCD\) 160.18 Vagus Nerve Stimulation \(VNS\)](#) is available. Learn about extension of the implementation date to July 22.

Quarterly Update to the Long Term Care Hospital (LTCH) Prospective Payment System (PPS) Fiscal Year (FY) 2020 Pricer — Revised

A revised MLN Matters Article MM11742 on [Quarterly Update to the Long Term Care Hospital \(LTCH\) Prospective Payment System \(PPS\) Fiscal Year \(FY\) 2020 Pricer](#) is available. Learn about the COVID-19 blanket waiver for the average length of stay policy.

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