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News

Peripheral Vascular Intervention for Claudication: Comparative Billing Report

CMS issued a Comparative Billing Report (CBR) on Peripheral Vascular Intervention for Claudication, 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@reigroupinc.com to access your report. Update your contact email address in the Provider Enrollment, Chain, and Ownership System to ensure accurate delivery.

For More Information:
• View a webinar recording
• Visit the CBR website

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
Claims, Pricers & Codes

SNF Patient Driven Payment Model Interrupted Stay Issue

A new issue is affecting some inpatient hospital and Skilled Nursing Facility (SNF) claims when an interrupted stay is billed at the end of the month. The system incorrectly assigns edits U5601-U5608 (overlapping a hospital claim). If you billed the interrupted stay correctly, and your claim is rejected, modify your billing so the claim spans past the last day of the interrupted stay:

- Bill two months at a time, or
- Bill a month plus the days in the following month that span the interrupted stay plus 1 day

Adjusting the statement covered from and through dates to encompass the entire interrupted stay will allow your claim to process and pay correctly. Medicare Administrative Contractors will finalize any suspended claims that meet the criteria, so you can make corrections and resubmit your claim.

If we rejected an inpatient hospital claim, the hospital should ask the SNF to modify their claim. Until October 5, a SNF cannot submit an adjustment to a paid claim; they must cancel the paid claim and all subsequent claims in the same stay and resubmit them in sequential order.

CMS will correct the system in the future.

Events

Telemedicine Hack: A 10-Week Learning Community to Accelerate Telemedicine Implementation for Ambulatory Providers: July 22–September 23

What: HHS Telemedicine Hack (TM Hack) is a 10-week virtual, peer-to-peer learning community to accelerate telemedicine implementation for ambulatory providers. Components of TM Hack include: Five teleECHO sessions; five virtual "office hour" discussion panels; and Inter-session peer-to-peer learning facilitated via virtual discussion boards. CME/CEU credits are available at no cost to participants.

When: Telemedicine Hack sessions will take place on Wednesdays from July 22 to September 23, 2020, Noon–1 pm ET.

How to sign up: Click here.

See the HHS Telemedicine Hack Flyer for more information. Follow this link for a list of all upcoming HHS/ASPR COVID-19 Clinical Rounds Project ECHO training opportunities.

National CMS/CDC Nursing Home COVID-19 Training Series Webcast — July 23

Assessing Readiness: Advice from the CDC

Thursday, July 23 from 4 to 5 pm ET

Register for this webcast.

Is your nursing home ready to handle the demands of the Coronavirus Disease 2019 (COVID-19) pandemic? In this session, Centers for Disease Control and Prevention (CDC) staff discuss the COVID-19 Infection
Control Assessment and Response tool. Learn about opportunities and strategies to improve infection prevention control implementation. This series is brought to you by CMS, CDC, and hosted by the Quality Improvement Organization Program, a national network of Quality Innovation Network-Quality Improvement Organizations serving every state and territory.

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

**MLN Matters® Articles**

**Change to the Payment of Allogeneic Stem Cell Acquisition Services**

A new MLN Matters Article MM11729 on Change to the Payment of Allogeneic Stem Cell Acquisition Services is available. Learn about payment for these services on a reasonable cost basis.

**July 2020 Update of the Hospital Outpatient Prospective Payment System (OPPS) — Revised**

A revised MLN Matters Article MM11814 on July 2020 Update of the Hospital Outpatient Prospective Payment System (OPPS) is available. Learn about changes to payment policies and billing instructions.

**Multimedia**

**Part A Cost Report Call: Audio Recording and Transcript**

An audio recording and transcript are available for the July 9 Medicare Learning Network call on Medicare Part A Cost Report: New Online Status Tracking Feature. Learn about updates to the Medicare Cost Report e-Filing (MCReF) system that allow tracking from submission through finalization.

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

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