Editor’s Note:
This edition includes a new section, Information for Your Medicare Patients, which mirrors information your patients get from Medicare. We’ll include occasional messages to help you answer questions from your patients.

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News

Hospital Price Transparency: Requirements Effective January 1

Starting January 1, 2021, each hospital operating in the United States is required to provide clear, accessible pricing information online about the items and services they provide in two ways:
• Comprehensive machine-readable file with all items and services
• Display of shoppable services in a consumer-friendly format

Is your organization prepared to be compliant? Visit the new Hospital Price Transparency website for resources to help you prepare:
  • Final Rule
  • FAQs
  • 8 Steps to a Machine-Readable File
  • 10 Steps to a Consumer-Friendly Display
  • Quick Reference Checklists

IRF Provider Preview Reports: Review Your Data by October 26

Review your performance data on quality measures in your Inpatient Rehabilitation Facility (IRF) Provider Preview Report by October 26, prior to public display on the IRF Compare website in December. Visit the IRF Quality Public Reporting webpage for more information.

LTCH Provider Preview Reports: Review Your Data by October 26

Review your performance data on quality measures in your Long-Term Care Hospital (LTCH) Provider Preview Report by October 26, prior to public display on the LTCH Compare website in December. For more information, visit the LTCH Quality Public Reporting webpage.

Therapeutic Injections and Infusions: Comparative Billing Report

CMS issued a Comparative Billing Report (CBR) on Part B claims for Therapeutic Injections and Infusions. Use the data-driven tables to compare your billing and payment patterns with peers in your state and across the nation.

The public can't view CBRs. Look for an email from cbrpepper.noreply@religroupinc.com to access your report. Update your email address in the Provider Enrollment, Chain, and Ownership System to ensure delivery.

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

SNF Healthcare-Associated Infections Confidential Dry Run Report

CMS added confidential Dry Run Reports for the Skilled Nursing Facility (SNF) Healthcare-Associated Infections Requiring Hospitalizations measure to your Certification and Survey Provider Enhanced Reports folder. These reports have fiscal year 2018 and 2019 performance scores based on draft measure specifications.

Read the September 28 update on the Spotlight and Announcements webpage for more information. Send questions or feedback on this measure to SNFQualityQuestions@cms.hhs.gov.

COVID-19: Optimizing Health Care PPE and Supplies

The Office of the Assistant Secretary for Preparedness and Response (ASPR) Technical Resources, Assistance Center, and Information Exchange (TRACIE) released an Express message with new resources:
• COVID-19: Optimizing Healthcare Personal Protective Equipment (PPE) and Supplies webinar recording: Hear from public and private sector partners
• COVID-19 Response Assistance Field Observations webpage: Learn about institutions of higher learning, K-12 schools, minority/vulnerable populations, and critical infrastructure
• Maintaining Healthcare Safety During the COVID-19 Pandemic speaker series: Listen to health care professionals share their experiences

For More Information:
• ASPR TRACIE Fact Sheet
• ASPR TRACIE website
• ASPR TRACIE Novel Coronavirus Resources webpage

Hospice Quality Reporting Program News

Read the December Hospice Quality Reporting Program (HQRP) outreach email for information on:
• Reporting for CY 2020
• Provider Preview Reports
• Hospice Outcomes & Patient Evaluation tool

For more information, visit the HQRP Requirements and Best Practices webpage.

October is National Breast Cancer Awareness Month

Doctors find most breast cancers in women over 50. Talk to your patients about the importance of breast cancer screening.

Medicare Part B covers:
• Screening mammography
• Clinical breast exam as part of the screening pelvic examination for patients who meet the coverage criteria

For More Information:
• Medicare Preventive Services Educational Tool
• Screening Pap Tests and Pelvic Examinations Booklet
• CDC Breast Cancer Awareness webpage

Your patients’ Medicare Summary Notices promote mammograms. Visit the Preventive Services website to learn more about Medicare-covered services.

MLN Matters® Articles

Fiscal Year (FY) 2021 Inpatient Prospective Payment System (IPPS) and Long-Term Care Hospital (LTCH) PPS Changes

CMS issued a new MLN Matters Article MM11879 on Fiscal Year (FY) 2021 Inpatient Prospective Payment System (IPPS) and Long-Term Care Hospital (LTCH) PPS Changes. Learn about payment policy.

Quarterly Update to the National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP) Edits, Version 27.0, Effective January 1, 2021

CMS issued a new MLN Matters Article MM11984 on Quarterly Update to the National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP) Edits, Version 27.0, Effective January 1, 2021. Learn about the test and final files available in November.
Change to the Payment of Allogeneic Stem Cell Acquisition Services — Revised

CMS revised MLN Matters Article MM11729 on Change to the Payment of Allogeneic Stem Cell Acquisition Services to reflect the revised release date of the MAC instruction. The implementation date didn’t change.

New Physician Specialty Code for Micrographic Dermatologic Surgery (MDS) and Adult Congenital Heart Disease (ACHD) and a New Supplier Specialty Code for Home Infusion Therapy Services — Revised

CMS revised MLN Matters Article MM11750 on New Physician Specialty Code for Micrographic Dermatologic Surgery (MDS) and Adult Congenital Heart Disease (ACHD) and a New Supplier Specialty Code for Home Infusion Therapy Services to reflect the revised release date.

October 2020 Update of the Ambulatory Surgical Center (ASC) Payment System — Revised

CMS revised MLN Matters Article MM11963 on October 2020 Update of the Ambulatory Surgical Center (ASC) Payment System to update Healthcare Common Procedure Coding System code C9066.

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

CMS revised MLN Matters Article MM11960 on October 2020 Update of the Hospital Outpatient Prospective Payment System (OPPS) to make a number of changes.

Penalty for Delayed Request for Anticipated Payment (RAP) Submission -- Implementation — Revised

CMS revised MLN Matters Article MM11855 on Penalty for Delayed Request for Anticipated Payment (RAP) Submission -- Implementation to add instructions for service date reporting and remarks.

Quarterly Update for Clinical Laboratory Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment — Revised

CMS revised MLN Matters Article MM11937 on Quarterly Update for Clinical Laboratory Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment to add new coronavirus disease 2019 and advanced diagnostic laboratory test codes.

Multimedia

ICD-10 Coordination and Maintenance Committee Meeting Materials

CMS posted the audio and transcript, questions and answers, and presentations from the September ICD-10 Coordination and Maintenance Committee Meeting on procedure codes. Visit the Meeting Materials webpage for more information.

See the CDC webpage for diagnosis code information.

SNF Consolidated Billing Web-Based Training Course — Revised
CMS revised the SNF Consolidated Billing Web-Based Training (WBT) course available through the Medicare Learning Network Learning Management System. Learn about:

- Coverage and payment guidelines
- Excluded services
- Services included in a noncovered stay

Information for Medicare Patients

Making Insulin More Affordable for Medicare Patients Beginning January 1

The Part D Senior Savings Model allows Medicare patients who use insulin to choose a prescription drug plan that covers multiple types of insulin for $35 or less each for a month’s supply. Starting October 1, patients can visit Medicare.gov/plan-compare and filter on “Insulin Savings” to find plans that cap out-of-pocket costs. Patients should check plans to:

- Make sure their type and brand of insulin is covered
- Find out about the deductible, initial coverage, and coverage gap periods that should be no more than $35 for a month’s supply of different insulin types

Patients can enroll in a participating plan from October 15 to December 7, with coverage starting on January 1, 2021. Patients who enroll in a plan participating in the model can save an average of $446 in annual out-of-pocket costs, or over 66 percent, compared to their average cost sharing today. This more predictable copay for your patients will improve access and help you manage their care.

For More Information:

- Press Release
- Fact Sheet

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