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News

Critical Care Evaluation & Management Services: Comparative Billing Report in May

In late May, CMS will issue a second letter in the Special Edition Comparative Billing Report (CBR) series on Part B claims for critical care evaluation & management services. 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.

More Information:
- View a webinar recording
- Visit the CBR website
- Register for a live webinar on June 9 from 3-4 pm ET
Medicare Shared Savings Program: Submit Notice of Intent to Apply Beginning June 1

Beginning June 1, CMS will accept Notices of Intent to Apply (NOIAs) for the Medicare Shared Savings Program January 1, 2022, start date. Visit the Application Types & Timeline and Application Toolkit webpages to help you prepare your applications.

If you intend to apply, you must submit a NOIA via the ACO Management System by June 7 at noon ET. This doesn’t bind your organization to submit an application. Each ACO should only submit one NOIA. After you submit a NOIA, submit your application from June 8-28 by noon ET.

More Information:
- Shared Savings Program webpage
- Shared Savings Program final rule
- Email SharedSavingsProgram@cms.hhs.gov

Submit Medicare GME Affiliation Agreements during COVID-19 PHE by January 1

CMS extended the deadline to submit Medicare Graduate Medical Education (GME) affiliation agreements to January 1, 2022. Two or more teaching hospitals can form a GME group to combine direct and indirect medical education resident caps and train residents. During the Public Health Emergency (PHE), email new or amended agreements by January 1 to Medicare_GME_Affiliation_Agreement@cms.hhs.gov with “new” or “amended” in the subject line, and send a copy to your Medicare Administrative Contractor.

For more information, see page 8 in the COVID-19 Emergency Declaration Blanket Waivers for Health Care Providers.

Compliance

Home Health LUPA Threshold: Bill Correctly

In a recent report, the Office of Inspector General found that Medicare improperly paid some claims for home health services with 5-7 visits in a payment episode. Review the Medicare Home Health Benefit and Home Health Prospective Payment System booklets to properly bill for services slightly above the Low Utilization Payment Adjustment (LUPA) threshold.

For more information, visit the Home Health Prospective Payment System (PPS) webpage and view these additional resources to stay informed on the latest policy and payment updates:
- Home Health PPS final rule
- Medicare Benefit Policy Manual, Chapter 7, Section 10.6
- Medicare Claims Processing Manual, Chapter 10, Section 10.1.17
- Medicare Program Integrity Manual, Chapter 6, Section 6.2

Events

Hospice Quality Reporting Program: Composite Quality Measure Webinar — June 2

Wednesday, June 2 from 2-3:30 pm ET

Register for this webinar.

During this training, learn about the Hospice Quality Composite Measure and how it’s different from individual quality measures. Topics:
- Current measure and calculation
- Interpreting and using results
- Resources
MLN Matters® Articles

Addition of the Shared System CWF to the Business Requirements for the Healthcare Common Procedure Coding System (HCPCS) codes U0002QW and 87635QW Mentioned in Change Request 11765

CMS issued a new MLN Matters Article MM12294 on Addition of the Shared System CWF to the Business Requirements for the Healthcare Common Procedure Coding System (HCPCS) codes U0002QW and 87635QW Mentioned in Change Request 11765. Learn about the change for laboratories billing COVID-19 testing services.

International Classification of Diseases, 10th Revision (ICD-10) and Other Coding Revisions to National Coverage Determination (NCDs)--July 2021

CMS issued a new MLN Matters Article MM12124 on International Classification of Diseases, 10th Revision (ICD-10) and Other Coding Revisions to National Coverage Determination (NCDs)--July 2021. Learn about updated ICD-10 conversions.

Quarterly Update to the Medicare Physician Fee Schedule Database (MPFSDB) - July 2021 Update

CMS issued a new MLN Matters Article MM12289 on Quarterly Update to the Medicare Physician Fee Schedule Database (MPFSDB) - July 2021 Update. Learn about new and updated codes.

Remittance Advice Remark Code (RARC), Claims Adjustment Reason Code (CARC), Medicare Remit Easy Print (MREP) and PC Print Update

CMS issued a new MLN Matters Article MM12220 on Remittance Advice Remark Code (RARC), Claims Adjustment Reason Code (CARC), Medicare Remit Easy Print (MREP) and PC Print Update. Learn about updates effective October 1.

Publications

Collaborative Patient Care is a Provider Partnership — Revised

CMS revised the Medicare Learning Network Collaborative Patient Care is a Provider Partnership fact sheet to:
- Update the title
- Add information on quality of care, other coverage and payment rules, and the supplemental medical review contractor
- Clarify that your patient may pay additional costs if documentation is incomplete
- Emphasize that all partnering providers must have necessary information and documentation
- Remove list of medical directors

Complying with Medicare Signature Requirements — Revised

CMS revised the Medicare Learning Network Complying with Medicare Signature Requirements fact sheet to add information about signing documentation written by a medical student.

Medicare Diabetes Prevention & Diabetes Self-Management Training — Revised
CMS revised the Medicare Learning Network Medicare Diabetes Prevention & Diabetes Self-Management Training booklet to:

- Extend COVID-19 flexibilities to all patients getting services as of March 31, 2020
- Update information for the Association of Diabetes Care & Education Specialists

Medicare Mental Health — Revised

CMS revised the Medicare Learning Network Medicare Mental Health booklet to:

- Add an outpatient psychiatric services medical records checklist and acute care hospital information
- Update CPT codes and descriptions on Table 9

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

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