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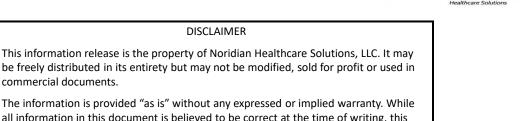


#### **HCCA** Regional Conference **Medicare Hot Topics**

Part B Provider Outreach and Education

Lori Weber, CPC

February 2019



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## Agenda

- Medicare Updates 2019
- Compliance/Documentation Reminders
- Post Pay Audit Reviewer Updates
- Noteworthy Reminders



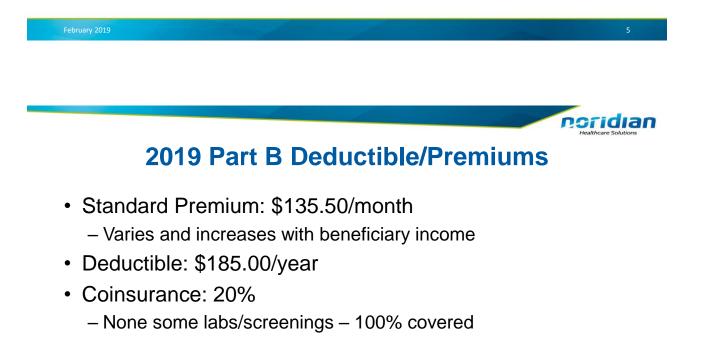
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Medicare Updates 2019

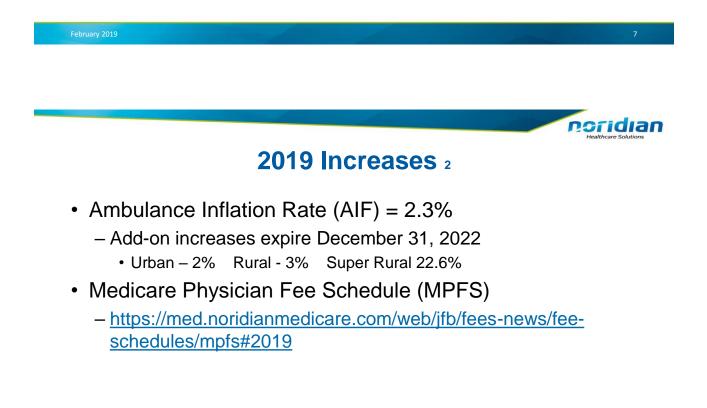
## **CMS 2019 Final Rule**

- Mere 2300+ pages including
  E/M documentation updates
- 335 new/revised codes
  - <u>https://www.cms.gov/newsroom/fact-sheets/final-policy-payment-and-quality-provisions-changes-medicare-physician-fee-schedule-calendar-year</u>



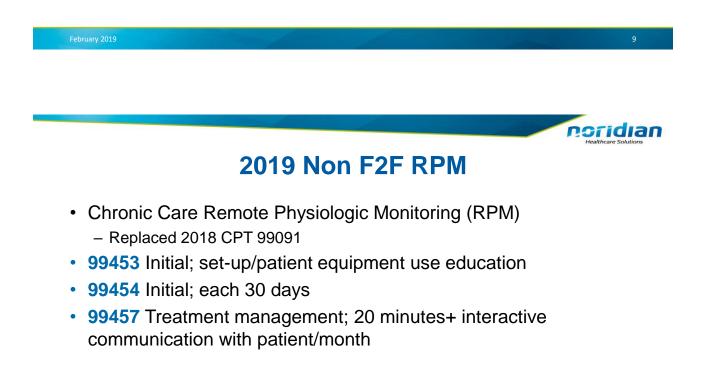
#### 2019 Increases

- National Conversion Factor (CF) = \$36.04
- Outpatient Therapy Threshold = \$2040
  - Physical Therapist (PT) & Speech Language Pathologist (SLP) combined
  - Occupational Therapist (OT) alone



### **Inter-professional Internet Consultation**

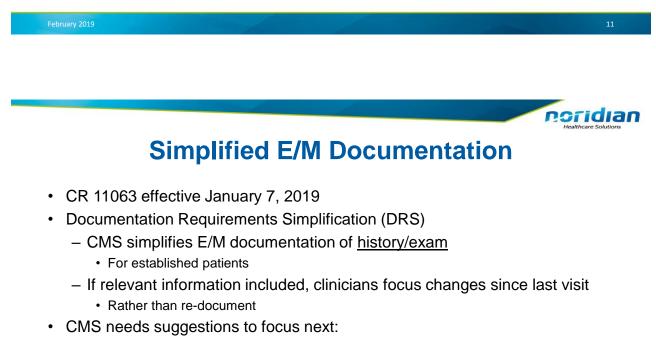
- 99451 (5+ mins) and 99452 (30 mins)
  - Revised current 99446 (5-10 mins), 99447 (11-20 mins), 99448 (21-30 mins) & 99449 (31+ mins)
- Inter-professional consultations performed via medical review via communications technology (phone/Internet/EHR)
- Supports team-based approach (medical records, medication profiles, lab and imaging studies, pathology specimens, etc.)



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## **CCM CPT 99491**

- 99491 (Chronic care management services, provided personally by physician or other qualified health care professional; at least 30 minutes of professional time, per calendar month with required elements)
  - For CCM patients needing greater acuity
- Same as 99490; except performed by Physician
  - "Incident to" not recognized



- <u>ReducingProviderBurden@cms.hhs.gov</u>

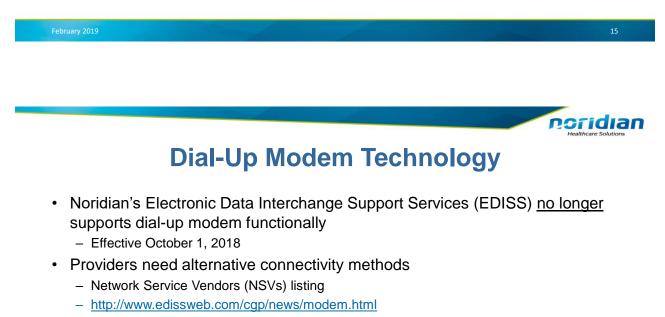
# Simplified E/M Documentation 2

- New/established E/M visits
  - Chief Complaint/other historical information already entered by ancillary staff/patients
  - Simply review and verify-rather than re-entered
- Eliminate med. nec. documentation requirement
  - To furnish visits in patient's home versus office



## **Communication Technology-Based**

- · Beneficiary convenience & provider efficiency
  - Codes decide if office visit or other service necessary
- G2010 (remote evaluation of recorded video and/or images submitted by established patient)
  - Review patient-transmitted photo/video with pre-recorded store/forward
- G2012 (brief communication technology-based service {e.g., virtual check-in)
  - Via telephone or other telecommunications device



- · Noridian and EDISS cannot makin this decision for your organization
  - Research internally to determine which NSV fits

# **NCD Diagnoses Revisions**

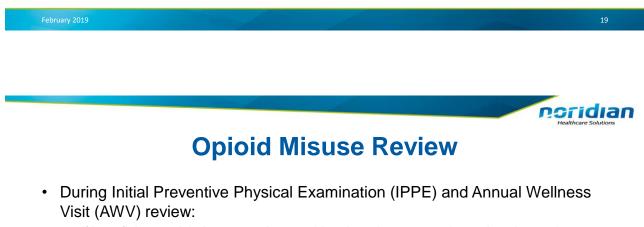
- CR 10622 October 1, 2018
  - NCD 150.3 Bone Mineral Density Studies
  - NCD 190.11 Prothrombin Time/International Normalized Ratio (PT/INR)
  - NCD 220.6.16 Positron Emission Tomography (PET) for Infection/Inflammation
  - NCD 220.6.17 PET for Solid Tumors
  - NCD 220.13 Percutaneous Image-Guided Breast Biopsy
- <u>https://www.cms.gov/Outreach-and-Education/Medicare-Learning-</u> Network-MLN/MLNmattersArticles/downloads/MM10622.pdf



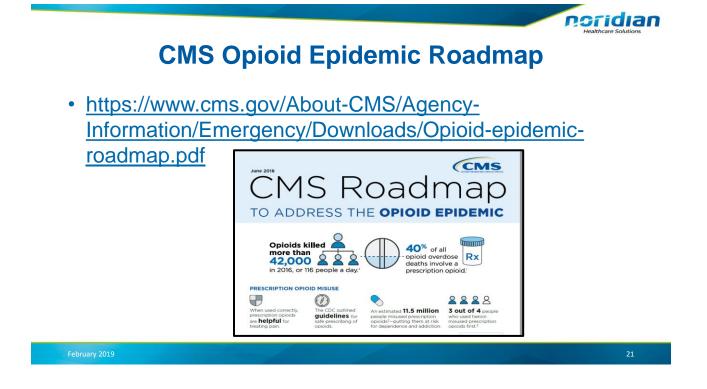
- NCD 220.6.17 Positron Emission Tomography (PET) for Oncologic Conditions
- NCD 270.3 Blood-Derived Products for Chronic, Non-Healing Wounds
- NCD 260.1 Adult Liver Transplantation
- NCD 110.18 Aprepitant for Chemo-Induced Emesis
- NCD 270.1 Electrical Stimulation, Electro Therapy for Wounds

# **NCD Diagnoses Revisions** 3

- CR 11005 effective April 1, 2019
  - NCD 20.7 Percutaneous Transluminal Angioplasty (PTA)
  - NCD 80.11 Vitrectomy
  - NCD 110.21 Erythropoiesis Stimulating Agents (ESAs) in Cancer and Neoplastic Conditions
  - NCD 210.2 Screening Pap Smears and Pelvic Examinations for Early Detection of Cervical or Vaginal Cancers
  - NCD 220.4 Mammograms
  - NCD 230.18 Sacral Nerve Stimulation (SNS) for Urinary Incontinence



- If beneficiary at risk: Important that providers introduce prevention, education and treatment
- CMS Special Edition (SE) 18004
  - <u>https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/ downloads/SE18004.pdf</u>
- CMS Reducing Opioid Misuse
  - https://www.cms.gov/about-cms/story-page/reducing-opioid-misuse.html





## **Telehealth Updates**

- CR 11063 effective January 7, 2019
- Added prolonged preventive services (beyond typical service time of primary procedure); office/outpatient setting; requiring direct patient contact beyond usual service(s)
- **G0513** (first 30 minutes in addition to preventive)
- G0514 (additional 30 minutes)

#### **Telehealth Updates 2**

- CR 11043 effective January 2, 2019
- Telehealth for Acute Stroke Individuals
  - G0 (zero) append modifier for evaluation, diagnosis or treatment of symptoms
  - Q3014 adds additional original site facilities
- Diabetic Self-Management Training (DSMT)
  - Initial 10 hours & 2 hours annual follow-up added to Telehealth, when injection training not applicable

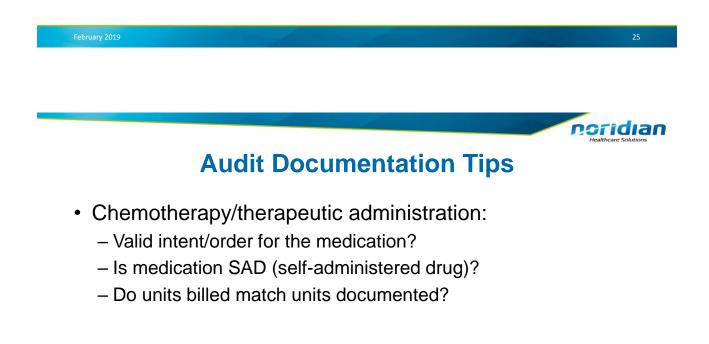


# Compliance/Documentation Reminders



## **Medicare Compliance Program**

- When providers enroll, they promise truthful, accurate claim submission and documentation
- Compliance Quarterly Newsletter Medicare Learning Network (MLN)
  - <u>https://www.cms.gov/Outreach-and-Education/ Medicare-Learning-</u> <u>Network-MLN/MLNProducts/ downloads /MedQtrlyCompNL\_Archive.pdf</u>



## Audited Documentation Tips 2

- Hydration:
  - Order older than 12 months?
  - Excessive units billed?
  - IV fluids supported as medically necessary?
  - Another infusion concurrently furnished?

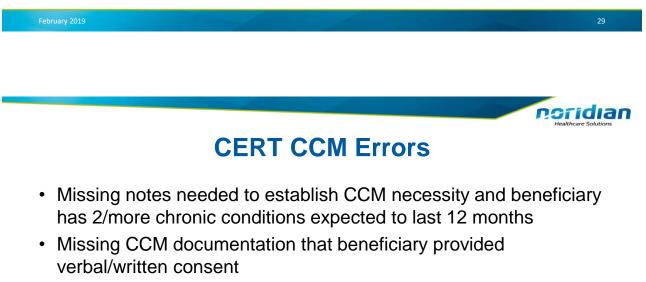


# **Post Pay Reviewers**



## **Who Reviews Medicare Claims?**

- Multiple post-pay contractors review
  - 1. Comprehensive Error Rate Testing (CERT)
  - 2. Office of the Inspector General (OIG)
  - 3. Recovery Auditor Contractor (RAC)
  - 4. Supplemental Medical Review Contractor (SMRC)
  - 5. Unified Program Integrity Contractor (UPIC)
    - Replaced ZPIC



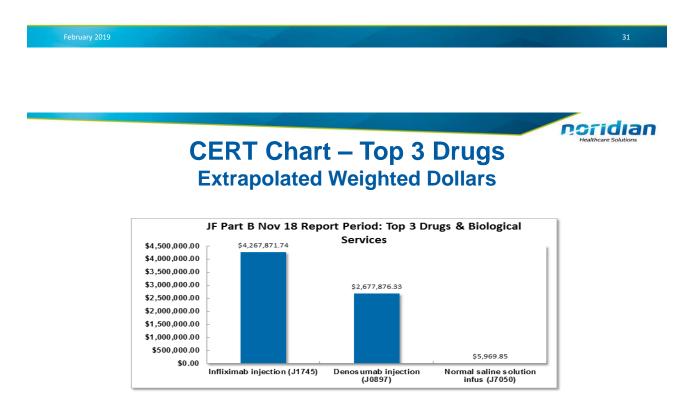
 Need notation that patient/caregiver provided copy of care plan (name/date)

# **CERT Top 3 Drug Error Findings**

J1745 (Remicade; Infliximab)

 MISSING: 1) Treating physician's medical necessity of Infliximab administration; 2) Signed and dated orders by treating physician including drug name, administered dose/route and frequency

- J0897 (Prolia; Denosumab)
  - MISSING: 1) Physician's signed and dated order for medication; 2) Physician's medication medical necessity
- J7050 (Saline Solution)
  - BUNDLED: Billed normal saline solution for infusion of Remicade included in chemotherapy administration billed on other lines-not separately billable



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# **OIG – Physician Risk Areas**

- Office of Inspector General (OIG)
  - https://oig.hhs.gov/
  - Work Plan annually now monthly
- Accurate coding and billing
  - Billing non-covered services as covered
  - Unbundling
  - Upcoding
- Monthly Medicare Provider Exclusions
  - <u>https://oig.hhs.gov/exclusions/exclusions\_list.asp</u>





- For healthcare providers, compliance professionals and attorneys
- 2011 initiative developed with OIG's message of compliance and prevention

- https://oig.hhs.gov/compliance/compliance-guidance/index.asp

#### OIG Fraud 2019

- Public information published when a False Claims Act (FCA) defendant falls on this risk spectrum
  - <u>https://oig.hhs.gov/compliance/corporate-integrity-agreements/risk.asp</u>

Risk Spectrum						
Highest Risk				Lower Risk		
Exclusion	Heightened Scrutiny	CIAs	No Further Action	Self-Disclosure		







#### **Medicare Fraud Strike Force**

<u>https://oig.hhs.gov/fraud/strike-force/</u>

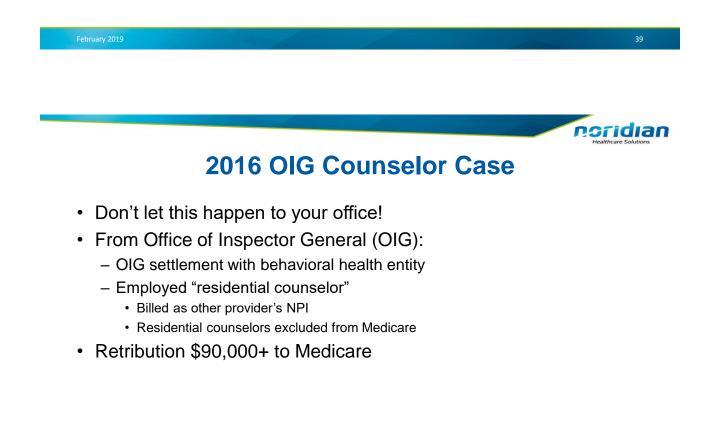


**OIG Investigative Recoveries** 

- Semiannual Report to Congress
  - 90 pages for 2018
  - E.g., Inpatient rehabilitation facilities (IRFs) \$5.7 billion for care not meeting Medicare's "necessary and reasonable"
- <u>https://oig.hhs.gov/newsroom/news-releases/ 2018/sar.asp</u>

# **OIG DME Fugitive Caught!**

- Captured fugitive (over 10 years) as owners of Medical Solutions Management (MSM); NY DME company
  - Posed as health sub-contractors to gain access to nursing home/accessing charts
  - Billed Medicare/Medicaid for wound care supplies never ordered or provided
  - Partner in 2013 sentenced to 12 years & ordered to pay \$4.4. million restitution



# 2017 OIG NH/Psych Testing Fraud

- Psychological testing that nursing home residents did not need or receive
  - Throughout 8 nursing homes in Southeastern U.S.
- Involved 2 owners of psychological service companies
  - Sentenced in \$25.2 million Medicare fraud scheme
  - 264 months imprisonment
- <u>https://www.justice.gov/opa/pr/clinical-psychologist-and-owner-psychological-services-centers-sentenced-264-months-roles-25</u>



 CMS clarified manual instructions on the use of the KX modifier to help pharmacies document medical necessity of organ transplant/eligibility

# **OIG Ambulance Indictment**

- Texas Ambulance owner indicted falsifying records as emergency transports when beneficiaries either
  - Not transported or
  - Non-emergency transports by vans, taxis, etc.
- Faked EMT records with vital signs, patient narratives, mileage & EMT <u>https://www.justice.gov/usao-sdtx/pr/ambulance-company-owner-convicted-</u> <u>3-million-medicare-fraud-conspiracy</u>



July 2018 OIG Report

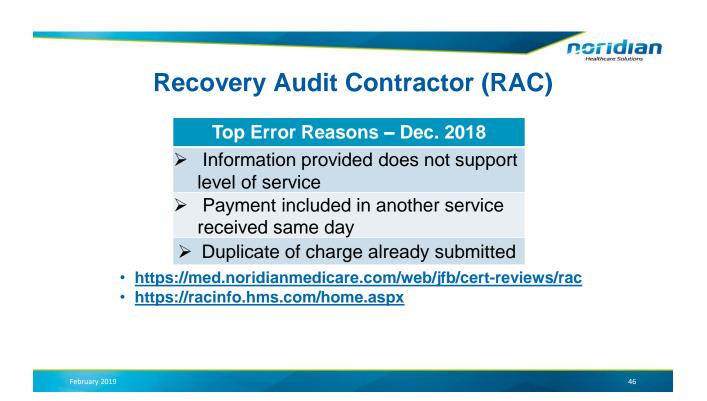
- <u>https://oig.hhs.gov/oas/reports/region9/91703002.asp</u>



# **Report Suspected Fraud**

- OIG Hotline:
  - 1-800-HHS-TIPS (1-800-447-8477)
- Email
  - HHSTips@oig.hhs.gov
- Online
  - <u>https://oig.hhs.gov/fraud/report-fraud/index.asp</u>
- OIG Resource Guide
  - https://oig.hhs.gov/compliance/101/files/HCCA-OIG-Resource-Guide.pdf







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#### Supplemental Medical Review Contractor (SMRC)

- Noridian launched SMRC website November, 2018
  - https://www.noridiansmrc.com/
- Conducts nationwide medical review to cut down Medicare fraud, waste and abuse
  - A/B Documentation Requests
  - Current/Completed Projects
  - Discussion & Education Period







# **Noteworthy Reminders**







#### **Portal Enhancements**

- Eligibility Denial Details below eligibility-related
  - Options link under Claim Status "Related Inquiries"
  - Alien ((unlawfully present/deported)
  - Incarcerated
  - End Stage Renal Disease (ESRD)/Dialysis
  - Skilled Nursing Facility (SNF)/Inpatient
- · Access details determining next step
- <u>NMP User Manual</u>

		Submit Appeal
		View Financials
		View Full Remittance
Chiles Develof Details		Claim Specific Remittance
Claim Denial Details		ESRD/Dialysis Denial Details
The services have not paid due to	an open End-Stage Renal Decase (ESRD) file.	
From Date	Thru Date	Provider NPT
	4 Presidual	1 Net+
Resources:		
		he NPS Registry can be found through the link: <a href="https://www.cms.htm.gov">https://www.cms.gov/https://www</a>

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### **Qualified Medicare Beneficiary (QMB)**

- · Determine if beneficiary under low income QMB
- · Dual-eligible Medicare/Medicaid beneficiaries

Eligibility Benefits Respon	se	New Inquiry 🖶 Print Page
Beneficiary: Gender: M DOB: Date of Death: HECH: Transaction ID: 100002016	Provider/Supplier: NP1: PTAN: TH or SSH: From Date of Service: 01/20/2017 To Date of Service: 08/21/2017	Related Inquiries View Claim Status
View All Eligibility HMO/HCO Eligibility		NF ESRD Preventive
Our records indicate this benefic	ciary is a Qualified Medicare Beneficia	ry Enrollee.
Part A - Beneficiary Details Effective Date: 05/01/2001	Termination Date:	
Part B - Beneficiary Details Effective Date: 08/01/2011	Termination Date:	

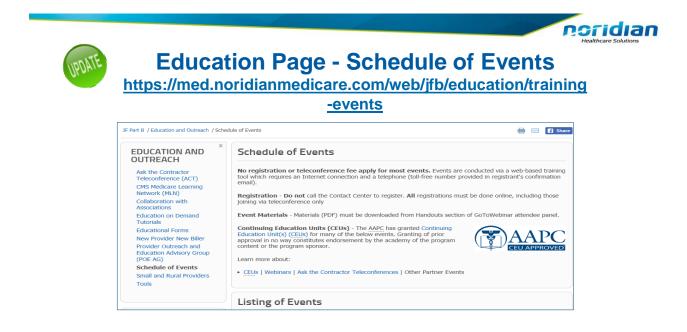


#### **Send Portal Message**

• Send Noridian secure messaging regarding claims only reviewed by CERT or Noridian Medical Review teams

				Welcome	Manage Acco	unt Send Us A Mess	age Sign Out
	No No	ridian Medica	are Portal	Las	t Login on 4/20/2i	018 08:30 AM CDT     A Home 🗩 Co	Failed attempts: 0 ntact Us ② Help
Eligibility	Claim Status	Appeals	Remittance Advices	Financials	Same or Similar DME	Prior Authorizations	Provider Audit
Availability				Notificat	ions & Upda	ates	See All >
System Norm	nal						
Hours of Availa	bility						

February 2019









# Thank you!

Lori