



April Quarterly Release Training

Presented by Noridian
Part A Provider Outreach and Education (POE)
April 2014

DISCLAIMER

This information release is the property of Noridian Healthcare Solutions, LLC. It may be freely distributed in its entirety but may not be modified, sold for profit or used in commercial documents.

The information is provided “as is” without any expressed or implied warranty. While all information in this document is believed to be correct at the time of writing, this document is for educational purposes only and does not purport to provide legal advice.

All models, methodologies and guidelines are undergoing continuous improvement and modification by Noridian and CMS. The most current edition of the information contained in this release can be found on the Noridian website at <http://www.noridianmedicare.com> and the CMS website at <http://www.cms.gov>

The identification of an organization or product in this information does not imply any form of endorsement.

CPT codes, descriptors, and other data only are copyright 2014 American Medical Association. All rights reserved. Applicable FARS/DFARS apply.

Before We Start...Help Us Help You!

- **CHAT area** – Enter attendee name, facility name and state – do not enter in Q&A section



- Dial into teleconference using assigned Attendee ID number rather than just # sign
 - Check Event Info tab for ID

Workshop Protocol

- Entering workshop
 - Attendee lines are muted upon entry
 - Enter additional attendee names, provider, city in Chat (not Q&A)
- Throughout workshop
 - Questions pertinent to workshop slide addressed
 - Address Q & A to “all panelists”; not to host directly
 - All other questions, call Part A Provider Contact Center
- Workshop conclusion
 - Asking questions aloud? Use “raise/lower hand” feature
 - MUTE phones – never place on HOLD

Continuing Education Units (CEU) Process

- Attend entire workshop
- Type only additional names in Chat
- Take short survey **after** workshop closes
- Certificate of Attendance
 - last slide
- CEU password provided at the conclusion

Agenda

- Noridian Updates
- Endeavor
- CERT Reminders
- Accessing Change Requests (CRs) and Medical Learning Network Matters (MLNs)
- Quarterly Provider Updates
- Recurring Updates
- Special Editions

noridian

Healthcare Solutions

Noridian Updates

Non-Medical ADR Requests

- SB6001 – Edit 32105
- Avoid claim rejections by setting up either:
- 1:1 NPI to PTAN match or
- Set up the 5 or 9 digit Zip Codes with each PTAN for your Facility

```
THE NPI NUMBER IS PRESENT IN THE CROSSWALK FILE BUT THE NPI  
NUMBER CORRESPONDS TO MORE THAN ONE LEGACY (OSCAR) NUMBER.  
*****  
ENTER THE OSCAR NUMBER ASSOCIATED WITH THE NPI NUMBER SUBMITTED.  
*****  
NPI REASON CODE 32105: IF REQUESTED DOCUMENTATION IS NOT RECEIVED WITHIN 14  
DAYS, THE CLAIM WILL BE REJECTED.
```


Non-Medical ADR Requests

- An example of what your provider file would like if you chose to set up different zip codes for each PTAN is listed below

NPI	OSCAR	ENTITY NAME	TAXO. CD	FAC ZIP
1234567890	12S345	Noridian Health	111Y00000X	12345
1234567890	12T345	Noridian Health	111Y00000X	123451111
1234567890	12O345	Noridian Health	111Y00000X	123451112

ACRONYM	DESCRIPTION
ABN	Advanced Beneficiary Notice of Non Coverage
CCI	Correct Coding Initiative
CERT	Comprehensive Error Rate Testing
CR	Change Request
EDISS	Electronic Data Interchange Support Services
IOM	Internet Only Manual
MLN	Medicare Learning Network
MPFS	Medicare Physician Fee Schedule
MSP	Medicare Secondary Payer

Medicare Learning Network® (MLN)

Official CMS Information for Medicare FFS Providers

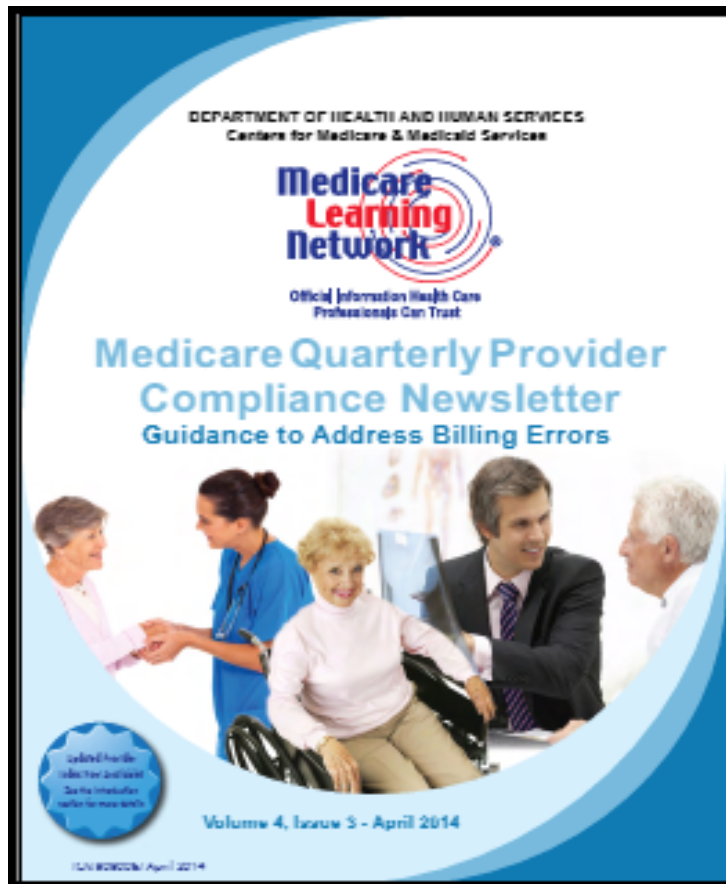
- Products available:
 - Web-based Training
 - Brochures
 - Fact Sheets
 - Quick Reference Charts
- Most products come in downloadable/hardcopy formats
- MLN products FREE of charge/shipping
- MLN dedicated web pages:
 - MLN General Information -- <http://www.cms.gov/MLNGenInfo>
 - MLN Matters Articles -- <http://www.cms.gov/MLNMattersArticles>
 - MLN Products -- <http://www.cms.gov/MLNProducts>
 - MLN Web Guides -- <http://www.cms.gov/MLNEdWebGuide>
 - MLN Connects Provider eNews - <http://www.cms.gov/Outreach-and-Education/Outreach/FFSProvPartProg/index.html?redirect=/FFSProvPartProg>



CMS Provider Compliance Resources

- <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/index.html>
 - MLN Catalog of Products
 - <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/MLNCatalog.pdf>
 - MLN Product Ordering Page
 - http://cms.meridianksi.com/kc/pfs/pfs_Inkfrm_fl.asp?lgnfrm=reqprod&function=pfs
 - MLN Publications List
 - <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/MLN-Publications.html>
 - MLN Provider Compliance Products
 - http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/ProvCmpl_Products.pdf

Medicare Quarterly Provider Compliance Newsletter



- Includes
 - Comprehensive Error Rate Testing (CERT) Findings
 - Recovery Auditor Findings

http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/Downloads/ProvCmpl_Products.pdf

Go Green – Sign up for ERAs!

- Electronic Remittance Advice (ERA) is electronic version of paper remit
- Benefits of ERAs:
 - Faster payment notification
 - Paper reduction helps save money and time
 - Capability of automatically posting
 - Expedite filing to secondary payers
- Simplify your office space and save a tree!
- Contact EDISS at www.edissweb.com
- JF: 877-908-8431
- JE: 855-609-9960

Web-Based Workshops

Date	Time (CT)	Workshop Title
04/29/14	1PM	Hospital-Based Ambulance Coverage and Billing

Register Now!

JF: <https://www.noridianmedicare.com/parta/train/workshops/index.html>

JE: <https://med.noridianmedicare.com/web/jea/education/training-events>

In-Person Seminars

Climbing the Ladder to Success

Noridian Home | Medicare Part A | Site Map | Search Guide | Advanced Search

You are here: [Noridian Home](#) > [Medicare Part A](#) > [Education Center](#)

Select **+** for expanded navigation

Medicare Part A

- +** News and Publications
- +** Fee Schedules
- +** LCDs / Coverage / MR
- +** **Education Center**
- +** Appeals
- +** Enrollment
- +** New Provider / Biller
- +** Claims
- +** Endeavor / Online Claims
- +** Audit / Reimbursement
- +** CERT
- +** RA
- +** ICD-10 Forms
- +** Contact
- +** Links
- +** Help

EDUCATION CENTER

Noridian offers providers a variety of avenues

- Web-Based Workshops (Webinars)
- In-Person Seminars**
- Workshop Archive / Educational Tools
- Calculators/Tools
- Ask the Contractor Teleconferences (ACT)
- Provider Outreach and Education (POE) Advisory Group
- CMS Open Door Forums
- Open Door Coverage Meetings
- Education Request

Noridian Home | Medicare Part A | Site Map | Search Guide | Advanced Search | Quick Search:

You are here: [Noridian Home](#) > [Medicare Part A](#) > [Education Center](#) > [In-Person Seminars](#)

Select **+** for expanded navigation

Medicare Part A

- +** News and Publications
- +** Fee Schedules
- +** LCDs / Coverage / MR
- +** **Education Center**
- +** Appeals
- +** Enrollment
- +** New Provider / Biller
- +** Claims
- +** Endeavor / Online Claims
- +** Audit / Reimbursement
- +** CERT
- +** RA
- +** ICD-10 Forms
- +** Contact
- +** Links
- +** Help

IN-PERSON SEMINARS

Date	Time	Seminar Title	Location	Registration
ALASKA				
05/19/14	1-4 p.m.	Medicare Climbing the Ladder to Success	Homewood Suites 101 West 18th Avenue Anchorage, AK, 99503 907-762-7000	Register Now
05/21/14	1-4 p.m.	Medicare Climbing the Ladder to Success	Westmark Hotel and Convention Center 813 Noble St Fairbanks, AK, 99701 907-456-7722	Register Now
ARIZONA				
05/05/14	1-4 p.m.	Medicare Climbing the Ladder to Success	Hilton Garden Inn Phoenix Airport 3422 E Elwood At University Phoenix, AZ, 85040 602-470-0500	Register Now
05/06/14	1-4 p.m.	Medicare Climbing the Ladder to Success	Hilton Garden Inn 6575 S Country Club Rd Tucson, AZ 85756 520-741-0505	Register Now
05/08/14	1-4 p.m.	Medicare Climbing the Ladder to Success	Hampton Inn 7410 S Reuliah Blvd Flagstaff, AZ 86001 928-913-0900	Register Now

Be the first to receive Medicare news and information!

In-Person Seminars

Climbing the Ladder to Success

Session will include the following topics:

- Noridian - Where We Are Now
 - Enrollment - The First Step
 - Claims - Getting it Right the First Time
 - Medical Review - Seeing Through Medicare's Eyes
 - Reopenings vs. Redeterminations
 - Provider Contact Center - Effective Uses
 - Endeavor, listserv and the Website
 - Resources
-
- View all dates, locations and register at https://www.noridianmedicare.com/parta/train/workshops/in_person_seminars.html.
 - **NOTE:** Space is limited so please limit attendance to two representatives per facility

Sign Up to Get Medicare News Now!

- Receive the most recent Noridian and CMS news and information
 - Regulation and policy updates
 - Payment and reimbursement updates
 - Workshop and educational event notices
 - Noridian hours of availability and related notifications

JF

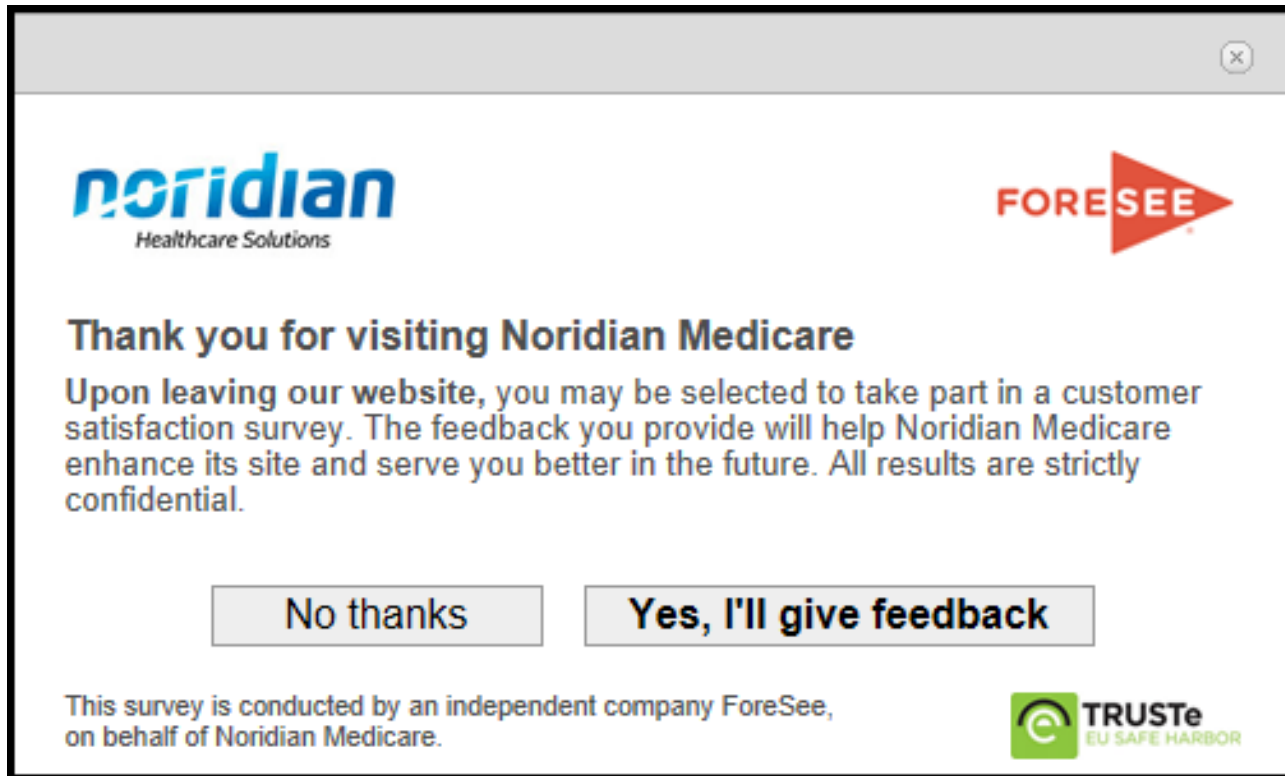


JE



Noridian Loves Website Feedback!

- Please complete Foresee Results Website Survey
- Provide constructive/complimentary feedback



The image shows a screenshot of a website feedback survey pop-up. At the top left is the Noridian Healthcare Solutions logo. At the top right is the ForeSee logo, which consists of the word "FORESEE" in red capital letters next to a red right-pointing triangle. Below the logos, the text reads: "Thank you for visiting Noridian Medicare". Underneath that, it says: "Upon leaving our website, you may be selected to take part in a customer satisfaction survey. The feedback you provide will help Noridian Medicare enhance its site and serve you better in the future. All results are strictly confidential." At the bottom of the pop-up, there are two buttons: "No thanks" and "Yes, I'll give feedback". In the bottom right corner, there is a logo for TRUSTe EU SAFE HARBOR, which includes a green circular icon with a white 'e' and the text "TRUSTe EU SAFE HARBOR".

noridian

Healthcare Solutions

ENDEAVOR

Endeavor – Sign Up Today

- Free secure internet website
 - Verify Eligibility
 - Check claim and check status
 - View and print Remittance Advice
 - Full(Part B Only) or single-claim
 - Reopening/Redetermination requests
 - Submit, view and track

Endeavor – Sign Up Today

- EDI registration required
- Hours of operation nearly 24/7
 - Exception for maintenance and CMS required downtime
- Information, tutorials and User manual on noridianmedicare.com website – Endeavor



New Functionality: Financial Information

Most Recent 50 Checks

Financial Inquiry

Select a provider by clicking on the Select Provider button and complete all mandatory fields marked with an asterisk.

Provider Details

Select Provider *

Identifier Type:* NPI

Identifier:*

Enter the corresponding PTAN:

PTAN*:

Submit Inquiry

Reset Values

Financial Results

Financial Inquiry Results

Provider:

Medicare Contract: A

Recent Check Issued

Only the most recent 50 checks are offered through Endeavor. The Contact Center can assist you if older information is required.

Check Number	Check Amount	Issue Date
--------------	--------------	------------

New Inquiry



Endeavor Reminders

Assistance

- Account access: passwords, locked accounts, functionality access
 - User Security
- Results: specific claim information, eligibility
 - Customer Service
- JE: 855-609-9960
- JF: 877-908-8431

Do Not Share

- Each user must register for his/her own account
- If contacted by anyone other than user, account is deleted

Resources

- User Manual
 - Step-by-step instruction on registration and usage
- JE:
<https://med.noridianmedicare.com/web/jea/topics/endeavor/user-manual>
- JF:
www.noridianmedicare.com/parta/claims/endeavor/endeavor_user_manual.html

Survey

Endeavor Portal

Eligibility Benefits Inquiry

Select a provider by clicking on the Select Provider button and complete all mandatory fields marked with an asterisk.

Provider Details

Select Provider * Identifier Type:* Identifier:*

Mandatory Beneficiary Details

HICN:*

Last Name:*

Provide at Least One of the Following Beneficiary Details

First Name:

Date of Birth:
(mm/dd/yyyy or mmdyyy)

Optional Beneficiary Details

Suffix:

From Date: To Date:
(mm/dd/yyyy or mmdyyy) (mm/dd/yyyy or mmdyyy)

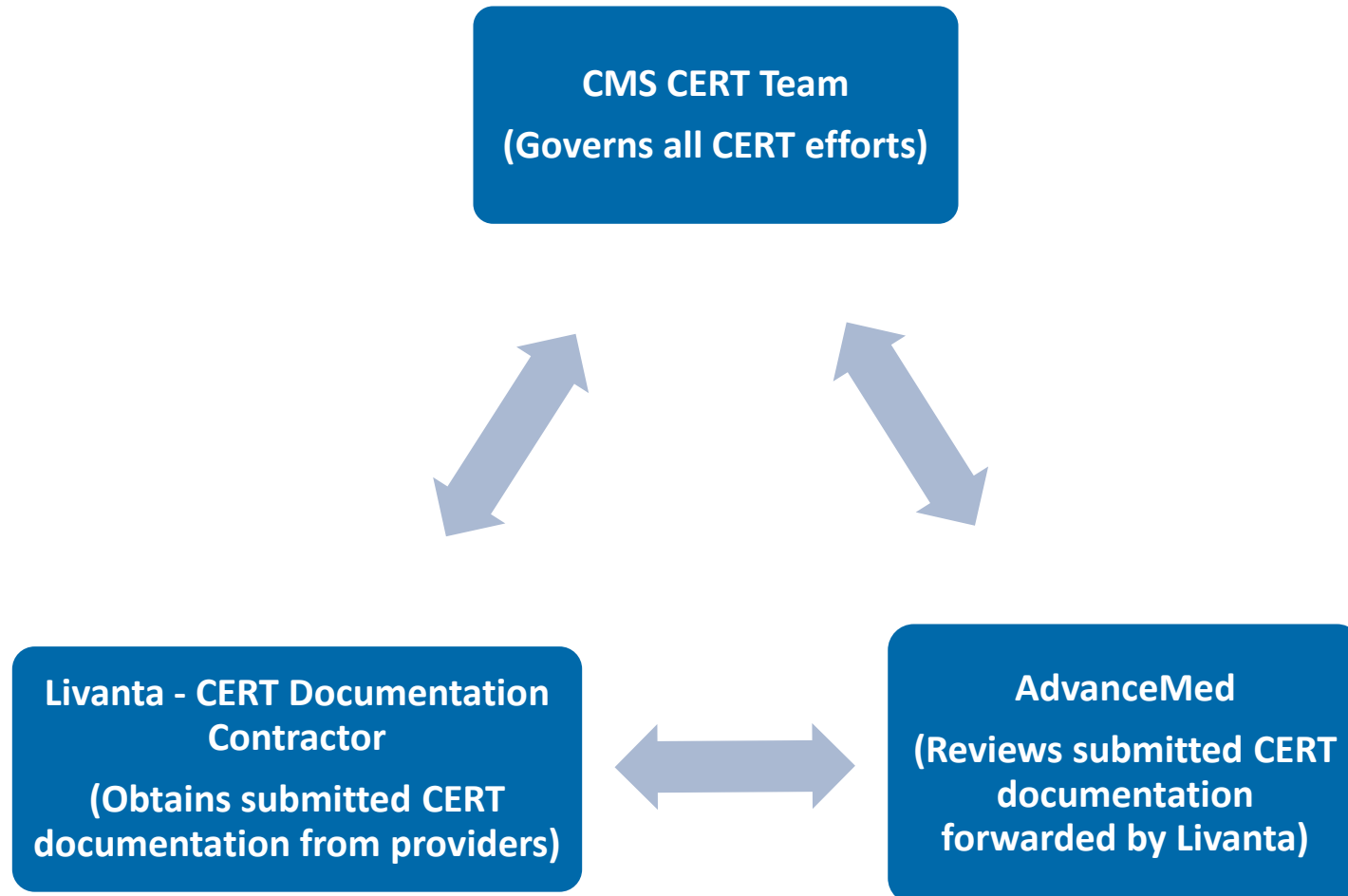
2013 Noridian Healthcare Solutions, LLC
[Contact Us](#) [Endeavor Feedback](#) : External Link



CERT Reminders

Post –Payment Reviews

CERT is Administered by CMS



CERT Envelope

CENTERS FOR MEDICARE AND MEDICAID SERVICES
CERT OPERATIONS CENTER
9090 Junction Drive, Suite 9
Annapolis Junction, MD 20701

Important Dated Information Enclosed

Immediate Response Required

Medicare Record Request



CERT Process

- CERT Documentation Contractor requests medical records - Livanta
- Provider fails to send requested record
 - Error counted for Provider and Noridian
- CERT Review Contractor conducts a review - AdvanceMed
- Claim determined incorrectly paid
 - Error counted for individual Provider and MAC

CERT Documentation Requests Reminders

- Respond to the initial medical records request
 - Send all documentation for the claim selected to avoid denial within 75 days
 - When necessary, all entities must work together to obtain records for patients

CERT Documentation Requests Reminders

- CERT calls or sends another letter for added medical records
 - Additional 15 calendar days given to providers to support medical necessity of billed services
 - Fax to (240) 568-6222
 - Identify the CID on cover page or used the bar-coded cover sheet

CERT Reviewer's Medical Record Request – Update

- CR8547 Third-party Additional Documentation Request CERT
- Instructions will be added to the Program Integrity Manual IOM 100-08 in January 2014
 - this addition does not constitute new instructions; recommended to make clear
- CERT Reviewer will request added evidence from NPI or UPIN on claim to support service billed and coverage of LCD/NCDs

CERT Post Audit Checklists

- **JE** <https://med.noridianmedicare.com/web/jea/cert-reviews/cert/checklists>
- **JF** https://www.noridianmedicare.com/parta/claims/cert/cert_med_doc.html
 - [Ambulance Documentation Checklist](#)
 - [Chemotherapy Documentation Checklist](#)
 - [Dialysis Documentation Checklist](#)
 - [Evaluation and Management \(E/M\) Documentation Checklist](#)
 - [Laboratory Documentation Checklist](#)
 - [Physical, Occupational and Speech Therapies Documentation Checklist](#)
 - [Psychiatric-Mental Health Documentation Checklist](#)
 - [Radiology Documentation Checklist](#)

Noridian CERT Education

- CERT Coordinator
 - Christine Burnside
 - Phone Number 701-277-6789
 - Elisha Jemison
 - Phone Number 701-715-9339
- Send letters or make calls on types of services and providers with frequent errors
 - Provider specific error rate statistics
 - Call when providers do not reply to Documentation Requests from CERT
 - Discusses corrective action plans
 - Updates facility Point of Contact
 - Noridian CERT Fax: 701-277-7860

A/B MAC CERT Contacts

- Who can I contact at Noridian regarding CERT reviewed claims?
- Part A/B Provider Contact Center
 - 1-877-908-8431 (JF)
 - 1-855-609-9960 (JE)
- Noridian Medicare Part A, send an e-mail to CERTPartAQuestion@noridian.com
- Update your Point of Contact (POC) form found on the CERT webpage

noridian

Healthcare Solutions

Change Requests (CR) and Medicare Learning Network Matters (MLN)

Assessing Articles

CRs, MLNs, and SEs

- Two options to access information
 - Noridian website
 - <https://www.noridianmedicare.com>
 - Select JE “Fees & News” home page top ribbon or
 - Left hand navigation click “Read Latest Updates”
 - Select JF “News and Publications” left hand navigation
 - Or use The Top Links “What’s New/Latest Updates” from the home page
 - CMS website
 - <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/index.html>

CMS Web Page

Home > Regulations and Guidance > Transmittals > 2014 Transmittals
RSS FEED

Transmittals

- [2014 Transmittals](#)
- [2013 Transmittals](#)
- [2012 Transmittals](#)
- [2011 Transmittals](#)
- [2010 Transmittals](#)
- [2009 Transmittals](#)
- [2008 Transmittals](#)
- [2007 Transmittals](#)
- [2006 Transmittals](#)
- [2005 Transmittals](#)
- [2004 Transmittals](#)
- [CMS Program Memoranda](#)


2014 Transmittals

Show entries: 10 ▼

Filter On:

Transmittal # ▲	Issue Date ▼	Subject ▼	Implementation Date ▼	CR # ▼	MM Article # ▼	MM Article Release Date ▼
R100MSP	2014-03-26	The Medicare Contractors and the Shared Systems Shall Send the Correct Cost Avoided Indicator and Special Project Type to the Common Working File (CWF) so the Correct Savings is applied both to the Medicare Secondary Payer (MSP) Savings Report and the Originating Contractor	N/A	100-05		
R100SOMA	2014-02-14	State Operations Manual (SOM) Appendix AA revisions for Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)	2014-02-14	N/A		
R101SOMA	2014-02-14	State Operations Manual (SOM) Appendix I revisions for Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID).	2014-02-14	N/A		

JE Fees & News – Latest Updates



Q

[Provider Portal: Endeavor Login](#)
[Contact Us](#)
[Help](#)

JE Part A

Browse by Topic

Browse by Provider Type

Fees & News
Fee Schedules, Articles, Bulletins ...

Policies
LCDs, NCDs, IDEs...

Audit & Reimbursement
Audit, Cost Report, Credit Balance...

CERT & Reviews
CERT, MR, Recovery Auditor...

Education & Outreach
Training Events, Materials, ACTs...

Enrollment
Enroll, Changes, Revalidation...

Forms
Downloadable Forms and Links...

JE Part A / Fees & News / Latest Updates

FEES & NEWS

- [Fee Schedules](#)
- [Bulletins](#)
- [Latest Updates](#)**
- [Email List Sign Up](#)
- [FAQs](#)

Latest Updates

Articles posted in the "Latest Updates" are compiled and published into a bulletin approximately every six weeks.


LATEST UPDATES
SEE ALL >

Oct 21, 2013

Statement Covers Dates for Two-Midnight Inpatient Admission Provisions Noridian has received questions from hospitals regarding the correct way of showing the service dates for situations where the inpatient claim includes outpatient services provided prior to the time of admission, especially as this pertains to the two-midnight inpatient admission provisions.

Positron Emission Tomography Audits Suspended Noridian edits the National Coverage Determination (NCD) on PET scans in order to prevent claims' billing errors. Moreover, unless the Contractor specifically defines the coverage coding, any reviewer may deny any claim the reviewer deems inconsistent with that coverage description in the NCD.

Health Professional Shortage Area (HPSA) Bonus Payments - 2014 Update Change Request (CR) 8463, from which this article is taken, alerts you that the annual HPSA bonus payment file for 2014 will be made available by the Centers for Medicare & Medicaid Services (CMS) to your Medicare contractor and will be used for HPSA bonus payments on applicable claims with dates of service on or after January 1, 2014, through December 31, 2014 CR8463



JF What's New Articles



Medicare Administrative Contract (MAC) Jurisdiction F
Alaska, Arizona, Idaho, Montana, North Dakota, Oregon, South Dakota, Utah, Washington, Wyoming

Medicare Part A

[Noridian Home](#) | [Medicare Part A](#)

You are here: [Noridian Home](#) > [Medicare Part A](#) > [News and Publications](#) > [What's New Articles From the Last 95 days](#)

Select for expanded navigation

Medicare Part A
News and Publications
Fee Schedules
LCDs / Coverage / MR
Education Center
• CMS MLN
• DDE
• Endeavor
POE Advisory Group
Workshops
ACT
Education Requests
Appeals
Enrollment
New Provider / Biller
Claims
Endeavor / Online Claims
Audit / Reimbursement
CERT
RA
ICD-10
Forms
Contact
Links
Help

[Site Map](#) | [Search Guide](#) | [Advanced Search](#) | Quick Search:

WHAT'S NEW ARTICLES FROM THE LAST 95 DAYS

Get the latest news and information in your e-mail box – [Signup Now!](#)
Articles posted in the What's New Section are compiled and published approximately every six weeks in **Bulletins**.

Updates	CR	Posted
Health Professional Shortage Area (HPSA) Bonus Payments - 2014 Update [PDF]	CR8463	10/21/2013
Statement Covers Dates for Two-Midnight Inpatient Admission Provisions		10/21/2013
Appropriate Discharge Status Codes		10/21/2013
Non-Coverage of Injectable Bulking Agents for the Treatment of Fecal Incontinence		10/17/2013
IRF Documentation Requirements		10/16/2013
Prepare to Document Conservative Measures Using ICD-10 Training		10/16/2013
New Direct Data Entry (DDE) Users Guide Available		10/14/2013
Direct Data Entry (DDE) Workshops - Question and Answers		10/9/2013
MSP Claims - Update on Location SMFADJ		10/9/2013
Self-Administered Drug Exclusion List R2		10/8/2013
Register Now for the Quarterly Release Workshop on October 24		10/2/2013
MAC Operations Continue During Shutdown		10/1/2013
Redaction of Health Insurance Claim Numbers (HICNs) in Medicare Redetermination Notices (MRNs) - Revised [PDF]	CR8268	10/1/2013
Mandatory Reporting of an 8-Digit Clinical Trial Number on Claims [PDF]	CR8401	9/30/2013
Healthcare Provider Taxonomy Codes (HPTC) Update, October 2013 [PDF]	CR8417	9/30/2013
Integrated Outpatient Code Editor (I/OCE) Specifications Version 14.3 - October 2013	CR8419	9/30/2013
Holding Claims for Pricing Based on October 2013 FISS Release		9/27/2013
Common Working File (CWF) Dark Days		9/27/2013

WHAT'S NEW

- Medicare Learning Network (MLN) Connects Provider e-News
 - <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/index.html?redirect=/MLNGenInfo/>
- SE and CRs listed from the last 90 days
 - Every six weeks they are included in a Bulletin
- Subscribe to Tuesday and Friday emails
 - Latest news from Noridian and CMS
 - Workshop and educational event notices
 - Medical policy updates and more

noridian

Healthcare Solutions

Hospital Inpatient Admission Order and Certification

Final Rule CMS 1599-F

Inpatient Hospital Admissions

- Effective with admissions 10/01/13 and after
- Expectation that patient will remain in hospital for at least 2 midnights
 - Can consider time spent in outpatient setting; clock starts running when patient begins receiving services
 - Inpatient portion begins with formal admission
- 2 midnight expectation doesn't apply to inpatient procedures

Inpatient Hospital Admissions

- Applies to PPS hospitals, CAHs, Long Term Care Hospitals and Inpatient Psychiatric Hospitals
- Final Rule
<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/AcuteInpatientPPS/FY2014-IPPS-Final-Rule-Home-Page.html>

Inpatient Hospital Admissions

- CMS is handling all education and questions related to the 2 midnight rule
 - Questions can be sent to:
IPPSAdmissions@cms.hhs.gov
- 2-midnight benchmark “clock” starts:
 - When hospital care begins
 - (i.e.) Observation care Emergency department, operating room, other treatment area
 - The start of care after registration and initial triaging activities (such as vital signs)
 - Excludes excessive wait times

Inpatient Hospital Admissions Probe and Educate

- “Probe and Educate” patient status reviews apply to PPS hospitals, Long Term Care Hospitals (LTCH) and Inpatient Psychiatric Hospitals (IPF)
 - Exempt from *review process* CAH and IRF

Inpatient Hospital Admissions Probe and Educate

- Probe and Educate between 10/1/13 – September 2014
- Pre-payment reviews selected will receive Additional Development Request (ADR) – 504IP
 - Submit medical records by using Endeavor, Fax, esMD or Mail to PO Box for your state
 - JF https://www.noridianmedicare.com/parta/coverage/mr/adr_submission.html

Inpatient Hospital Admissions Probe and Educate

- Reopenings and Appeals of Inpatient Probe and Educate Claims
 - CMS requesting re-review of probe and educate claims
- Work with MACs to ensure claims have been re-reviewed prior to submitting appeal
 - CMS will waive 120 appeal timeliness only for claims under the probe and educate review process that occurred prior to January 30, 2014



Quarterly Provider Updates

Effective April 1, 2014

Unless otherwise specified

CR8248 Termination of the Common Working File for Part A Provider Queries

- Key Points
 - CWF queries through MCS PPTN, VMS VPIQ and FISS DDE will be discontinued
 - April 2014 HIQA, HIQH, ELGA, ELGH, and HUQA will no longer be available
 - Termination date has been delayed
 - The use of DDE to submit claims or correct claims will not be impacted

CR8531 Update for DME Fee Schedule

- CR Revised to include HCPCS updates
- The following new codes are in the prosthetics and orthotics (PO) payment category and effective 1/1/2014:
 - L5969, L8679, L0455, L0457, L0467, L0469, L0641-L0643, L0648-L0651, L1812, L1833, L1848, L3678, L3809, L3916, L3918, L3924, L3930, L4361, L4387, and L4397

CR8531 Update for DME Fee Schedule

- L0430 is being deleted from the HCPCS file and DME fee schedule 1/1/2014
- The following codes are deleted from the DMEPOS fee schedule files as of January 1, 2014:
 - A4611, A4612, A4613, E0457, E0459, L8685, L8686, L8687, and L8688.

CR8582 Claim Status Category and Claim Status Code Update

- Effective/Implemented 4/1/2014
- Contractors must use approved codes that meet the Code Maintenance Committee regulations
- Code sets can be found at:
 - <http://www.wpc-edi.com/reference/codelists/healthcare/claim-status-category-codes/>
 - <http://www.wpc-edi.com/reference/codelists/healthcare/claim-status-codes/>

CR8607 Quarterly Average Sales Price (ASP) Drug Pricing Updates

- Effective April 1, 2014
- Implementation April 7, 2014
- Medicare uses the April 2014 quarterly ASP Part B drug pricing files to determine the payment limit for claims
 - In relation to separately payable Medicare Part B drugs processed or reprocessed on or after April 1, 2014, with dates of services from April 1, 2014, through June 30, 2014.

CR8641 Medicare Travel Allowance Fees for Collection of Specimens

- Effective for Dates of Service 1/1/2014
- Implementation Date June 16, 2014
 - P9603 – travel allowance per mileage basis
 - P9604 – travel allowance flat rate basis
- Multiple collections during same trip will receive a prorated travel component payment

CR8658 April 2014 Integrated Outpatient Code Editor Updates

- Status indicators updated
- Edits modified
- HCPCS added or deleted
- Version 20.0 of the NCCI edits implemented
- Updates to procedure/device and add-on/primary procedure codes for specific services
- Full list of I/OCE specifications is available at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R2900CP.pdf>

CR8664 April Update to Medicare Physician Fee Schedule Database (MPFSDB)

- CR Effective January 1, 2014
- CR revisions implemented April 7, 2014
 - Revised to reflect “Protecting Access to Medicare Act of 2014“
 - Signed by President on April 1, 2014
- Per CMS contractors will not search their files to either retract payment for claims already paid or to retroactively pay claims
 - Contractors will adjust claims brought to their attention

CR8488 Incarcerated Beneficiary Liability and Messages for Claims – Revised

- New Claims Adjustment Reason Code (CARC)
 - 258 “Claim/service not covered when patient is in custody/incarcerated. Applicable federal, state or local authority may cover the claim/service.”
- Remittance Advice Remark Code (RARC)
 - N103 Verbiage updated
- Group code OA
 - Other Adjustment

CR8597 - Correction Advanced Beneficiary Notice of Noncoverage (ABN), Form CMS-R-131

- Effective May 15, 2014
- Minor editorial changes to clarify existing manual instructions regarding ABN issuance.
 - Making corrections to CR 8404
 - Expands use of ABN to include home health agency (HHA) providers - Form replaces the HHABN Form CMS-R-296
- ABN allows provider to charge beneficiary
- If ABN isn't issued when required and Medicare doesn't pay – Provider will be liable for charges

CR8585 – Changes to NCD Edit Software

- Effective April 1, 2014 for ICD-09 Coding
- Affects Diagnostic Labs submitting A/B claims to Medicare
- Laboratory Edit Module Updated Quarterly
 - IOM 100-04 Chapter 16, Section 120.2

CR8473 Influenza Virus Vaccine Code

- Implementation April 7, 2014
- Accurate effective dates for Q2033
 - January 1 - July 1, 2013 (corrected dates)
- Effective January 1, 2014 – 90673
 - Contractors can pay claims beginning 1/1/14

Hospitals	TOB	Payment
Hospitals, Skilled Nursing Facilities, Renal Dialysis Facility (hospital-based), Critical Access Hospital	12X, 13X, 22X, 23X, 72X, 85X	Reasonable Cost
CORFs, RDFs (independent)	75X, 72X	Lower actual charge or 95% AWP

CR8473 Influenza Virus Vaccine Code

- Effective January 1, 2014 – 90673
 - Physicians and NPPs must accept assignment
- Institutional claims held until system updated
 - Implementation date April 7, 2014
 - Condition code 15 - Clean Claim Delayed in CMS's Processing System (Medicare Payer Only Code) added

CR8526 – Beta Amyloid Positron Emission Tomography (PET)

- Effective for claims dates of service on or after September 27, 2013
- Medicare will allow one PET AB scan per patient
- Only allowed through evidence development (CED) – (ie): clinical trial data
 - Refer to NCD Manual, Chapter 1, Section 220.6.20, for the coverage Beta Amyloid PET in Neurodegenerative disease and dementia

noridian

Healthcare Solutions

Ambulance

CR8251 Ambulance Services Claims Processing Update

- Nonscheduled transportation services do not require attending provider name and NPI – no change to policy
- Adding HCPC A0888 to list of mileage codes
 - Allows correct billing effective April 2014

noridian

Healthcare Solutions

Hospice

CR8620 – Vaccines Furnished during Hospice Election

- Effective October 1, 2013
 - Implemented April 7, 2014
- Claims for vaccines (Influenza, PPV, and Hepatitis B) and vaccine administrations
- Must contain condition code 07
- Date of service must fall within a hospice election

CR8620 – Vaccines Furnished during Hospice Election

- Updating information posted in CR 8098
- Contractors shall adjust only those claims brought to their attention
 - Must have dates of service on or after October 1, 2013 – processed thru April 6, 2014

noridian

Healthcare Solutions

Hospital

Rescinded - CR8273 Informational Unsolicited Response (IUR) for Inpatient Claims

- Common Working File (CWF) adds IUR for Part A Inpatient Claims in history
- Effective April 2014 inpatient hospital claims with diagnosis codes matching hospice claims will be adjusted to non-covered
 - Group Code: CO
 - MSN 16.29 - Payment is included in another service you have received.
 - CARC B9 - Patient is enrolled in a Hospice
 - RARC MA63- Missing/incomplete/invalid principal diagnosis.

CR8666 – Part B Inpatient Payment Policies CMS-1599-F

- Effective October 1, 2013
- Implementation April 21, 2014
- Applies to claims determined to not be meeting inpatient criteria
 - No Part A Entitlement in CWF
 - Benefits Exhaust
 - Review of claim by facility or external reviewer (ex: Recover Audit) determines Inpatient claim not medically necessary

CR8666 – Part B Inpatient Payment Policies CMS-1599-F

- May bill 12X type of bill for ancillary Part B Services received during inpatient stay
- Who May Bill Part B Claims
 - Short Term Acute Care Hospitals (IPPS)
 - OPPS Hospitals
 - Long Term Care Hospitals (LTCHs)
 - Inpatient Psychiatric Facilities (IPFs) and IPF hospital units
 - Inpatient Rehabilitation Facilities (IRFs) and IRF hospital units
 - Critical Access Hospitals (CAHs)
 - Children's Hospitals
 - Cancer Hospitals
 - Maryland Waiver Hospitals and other facilities as provided by CMS.

CR8666 – Part B Inpatient Payment Policies CMS-1599-F

- Beneficiaries liable for usual Part B financial Liability
 - Dependent on what the Beneficiaries liability is for the Part A claim, they may owe more or receive a refund off of the Part B claim
- Timely filing applies to the 12X claims
 - One year from date of service

noridian

Healthcare Solutions

Outpatient

CR8548 January 2014 Integrated Outpatient Code Editor Updates

- Status indicators updated
- Edits modified
- HCPCS added or deleted
- Version 20.0 of the NCCI edits implemented
- Updates to procedure/device and add-on/primary procedure codes for specific services
- Full list of I/OCE specifications is available at <http://www.cms.gov/Medicare/Coding/OutpatientCodeEdit/index.html>

noridian

Healthcare Solutions

Recurring Updates

CR8539 Home Health Consolidated Billing (CB) Quarterly Update

- Non-routine supply code and speech therapy HCPCS effective 1/1/2014 was not added to previous CR 8539
 - A7047 - Oral Interface Used With Respiratory Suction Pump, each;
 - 92521 – 92524 these four codes replace 92506
 - Review HHCB IOM 100-04 Chapter 10, Section 20

noridian

Healthcare Solutions

Special Editions (SE)

SE0801 Clarification of Patient Discharge Status Codes & Hospital Transfer Policies

- Article Revised March 3, 2014
- Provides Clarification on Correct Patient Status Codes
 - CMS requires patient status codes on
 - Hospital Inpatient Claims (type of bills (TOBs) 11X and 12X);
 - Skilled Nursing Claims (TOBs 18X, 21X, 22X and 23X)
 - Outpatient Hospital Services (TOBs 13X, 14X, 71X, 73X, 74X, 75X, 76X and 85X)
 - All Hospice and Home Health Claims (TOBs 32X, 33X, 34X, 81X and 82X)

noridian

Healthcare Solutions

Questions?



Thank You