

Jurisdiction B Durable Medical Equipment

Medicare Administrative Contractor (DME MAC) Council Meeting Minutes

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| Date: | April 24, 2014 | | |
| Time: | 12:30 p.m. – 3:30 p.m. ET | | |
| Location: | Castleton Park Conference Center 6415 Castleway West Drive Indianapolis, IN 46250 | | |
| Information | <i>Phone #:</i> | 1-866-308-0254 | <i>Login/Password:</i> 3178414601 |
| Attachments Included with Agenda: | April 24, 2014 DME MAC Council Q and A Jurisdiction B DME MAC Action Items | | |

Meeting Agenda:

| <i>Item</i> | <i>Assigned To</i> | <i>Duration</i> |
|---|------------------------------|-----------------|
| 1. Introductions | All | 10 minutes |
| 2. National Competitive Bidding Updates | Elaine Hensley | 60 minutes |
| 3. DCR Audit Update | Nina Gregory | 10 minutes |
| 4. DME MAC Medical Policy Update | Stacey V. Brennan, MD, FAAFP | 20 minutes |
| 5. Self-Service Enhancements | Vicky Combs/Charity Mahurin | 10 minutes |
| 6. Action Items | POE Department | 10 minutes |
| 7. Open Discussion | All | 30 minutes |
| 8. Next Meeting | All | 5 minutes |

1. Introductions – All

Staffing Changes

- Jennifer Saalfrank (new position) - Director of Provider Communications for Provider Outreach and Education and Call Center
- Charity Mahurin (new position) - Manager of Provider Outreach and Education

2. National Competitive Bidding Updates – Elaine Hensley

- a. CBIC is seeing an increase in complaints for both Round 1 Recompete and Round 2.
 - i. Variety of issues relating to PAPs, diabetics, oxygen, and wheelchair repairs.
 - ii. Round 1 re-compete:
 1. Documentation issues with transitioning patients.
 2. Same issues seen with Round 1 - insulin pump patients who have been on therapy for over 10 years and the documentation is not available for the new supplier. CMS is discussing these situations - not sure what the outcome will be. Confusion with suppliers who never did insulin pumps with A4221 and the number of cannulas needing to be dispensed. This code was meant to be vague for a reason as they feel the quantity/need is to be individualized.
 3. Seeing issues with oxygen patients where previous patient's supplier went out of business and having difficult changing providers.
 4. No guidance on modifier issue with wheelchairs. Revision language is in draft format and being worked on by policy group.
 5. Modifiers for Round 1 Re-bid were to be released after Round 2 issues cleared up but since they are not cleared up they have not addressed the Round 1 Re-bid modifiers yet.
 6. Dennis Myrick is new Kentucky/Indiana liaison.
 - iii. Council questions
 1. When will we see information on rebids for diabetic supplies and Round 2 Recompete.
 - a. Answer: Information will be released in 2014.
 2. ANPRM - would this eliminate need to re-bid any of the contracts - Round 1, Round 2, national diabetic supplies?
 - a. Answer: Intent is not for the ANPRM to replace competitive bidding contracts, but rather as an extension of the law.
 3. Suppliers are receiving calls from someone who announces they are from "Medicare." We would like for them to share what part of Medicare they are from. Number of calls being received has grown in volume.
 4. 1-800 Medicare is not necessarily providing the right information to the beneficiary because we don't believe they are asking enough questions before answering the question asked. Some of the 1-800 Medicare personnel are stating negative remarks about particular companies.
 - a. Elaine suggests obtaining beneficiary information, time, date and discussion and they can forward the information to CMS for

education purposes.

- b. Hard to train everyone on all policies and if they don't use knowledge for a long time they start to lose their expertise which makes answering calls challenging.
 - c. If the liaison is asking you to do things that are inappropriate let the CBIC know so they can investigate and educate.
5. Some of the callers have patient specific information and are looking for answers but DME provider is reluctant to provide due to HIPAA and there is no way for us to confirm who we are speaking with.

3. DCR Audit Update – Nina Gregory

- a. Glucose, oxygen and nebulizers continue to be looked at - looking at first claim only right now.
 - i. As of 1/1/14 looking at the WOPD for HCPCS impacted by the Affordable Care Act requirements.
- b. Council questions
 - i. How do we know what type of audit we are receiving?
 - 1. Go by letter and what it is requesting.
 - 2. Medical review would be looking for more detailed information.
 - 3. DCR - no request for Medical records on letter. If they want it, they will let you know.
 - 4. Multiple audits are going on right now.

4. DME MAC Medical Policy Update – Stacey V. Brennan, MD, FAAFP

- a. ICD-10 update - awaiting further updates from CMS.
 - i. Future effective policies with ICD-10 diagnosis information found on the CMS website. There is a link on the NGS medical policy website page.
- b. E-mailing Medical Director - please do not put PHI in the e-mail.
 - i. Could use DCN or CID numbers.
 - ii. If need to include PHI you could fax it to 317-595-4990.
- c. Policy updates:
 - i. Additions of codes, suction pump activity, and external infusion pump policy change.
 - ii. ACA 6407 - language added to impacted policies:
 - 1. Policies now much longer due to ACA, delivery information and now ICD-10 diagnosis. Council asked if the policies could be re-worked to put this information at the end to make it easier to share policy information with physicians.
 - iii. HCPCS code updates - several policies impacted and updated.
 - iv. Modification of off-the-shelf (OTS) and custom fitted orthoses:

1. Comments are being received.
 2. Published list serve message to help educate but was rescinded and revised - on website.
- v. Bulletin articles published:
1. Face-to-face Dear Physician letter published in addition to an article for further explanation.
 2. PECO's Dear Physician letter published.
 3. Three published 04/24/14:
 - a. Oxygen - CERT errors.
 - b. Therapeutic shoes for those with diabetes.
 - c. Medical grade honey.
- vi. Council Questions
1. Use of CAD/CAM or similar technology - can you give us an example of similar technology?
 - a. No, can't provide one today.
 2. Orthotics only: manufactured at another location and not specifically selected for that customer. Custom is not "at the time of placing on the patient".
 3. We can accept PT, OT, and home health notes.
 4. If OT or PT sends documentation to physician and they sign off that they concur - is this acceptable to support need for device?
 - a. Yes per both NGS Medical Directors.
- vii. Face-to-Face Questions
1. Council has concerns related to policies updated with face-to-face but CMS has not enforced yet. Other auditing entities are enforcing based on policies. Dr. Brennan stated just because in LCD does not mean enforced - not until law enforces.
 2. Date stamp requirement (or similar) - doesn't have to be the hand stamp - can be fax stamp.
 3. Council has concerns over requirement to have signed medical records at time of dispensing as many signed medical records may not be available at time of dispensing - some hospitals don't require notes to be signed until 30 days.
 4. Physician records - original guidance stated diagnosis and condition not specifically all key points of policy. NGS states progress note must reflect medical need for item - can be supporting documentation from another source. If doctor forgets to document - that is a problem.
 5. Wheelchair repairs - ACA now requires physician visit. Need to

encourage CMS to remove these. If seat upholstery rips and is not safe to use, patient may not have time to wait for the doctor's appointment to replace.

6. Council has concerns with regard to physician involvement and who performs face-to-face vs. who writes the order. NGS expecting to give clarification in the future - Jurisdictions are trying to get their hands around this.
7. Questions 5/6 - geared toward small prescription pad where date is at top of the script was fine. NGS states: If only one date, that could be interpreted as start date and signature date. Question 6 should be re-looked at as it contradicts what instructions we have received. Dr. Brennan said she would take back to DMDs. Deleting from this question set.
8. Send face-to-face questions to Vicky and she will share with her Jurisdiction counterparts to review and get back with us.
 - a. If an order is missing a component of face-to-face WOPD - do we have an ABN opportunity or can we use EY? It is a statutory denial situation. Is there a way to end the first rental agreement and begin a second agreement once the WOPD is accurate and/or signed notes are received?

5. Self-Service Enhancements – POE

- a. ALV same similar checks have been added to NGSConnex.
 - i. Only codes within an LCD are included in the ALV code search. NGS plans to enhance NGSConnex in the future to include other codes that are not in a Policy. Until those codes are added you can call PCC.
 - ii. Searches Region B only.
- b. PCC
 - i. CMN checks Common Working File (CWF).
 - ii. Same and Similar checks Region B records.
- c. Medical Review Denial tool - live March 3, 2014:
 - i. Put in 14 digit CCN number and specific denial information will be provided.
 - ii. Any internal review completed by January 15, 2014 can be accessed.
- d. New NGS website to be deployed late summer/early fall.
- e. CEDI question - type in claim form and changes diagnosis code via PCA software. Charity will pass on to CEDI.

6. Action Items – POE Department

- a. Item #1 – An enhancement request has been submitted. This action item will be removed from list.
- b. Item #2 - Topic discussed at length across the DME MAC contractors. No common editing approach agreed upon based on current instructions on the CMN. NGS will forward concern to CMS. Action item to be removed.
- c. Item #3 - Waiting on info from CBIC. Removed article on website as it referred to Round 1. Modifier tool is still there but doesn't match how claims are processed - but not NGS fault.
- d. Item #4 - examples faxed to Charity and discussing with NCB workgroup (CMS, Shared System Maintainers, CBIC, and the DMEMACs).
- e. Follow-up from other meeting
 - i. reviewed question and responses with minimal feedback

7. Open Discussion – All

- a. Sleep study date - titration testing with oxygen order.
 - i. Problems with date of titration, office visit and receipt date of order - Teresa will write up question and give to Dr. Brennan
- b. Ventilator clarification article
 - i. Same and Similar is crossing RAD items with Ventilator codes - no edit is in place within claims processing.
 - ii. Cannot do an upgrade between products in different payment categories - Paula can't find this anywhere in the PIM or Medical policies - Does NGS know where this can be found?
Post meeting update: Reference CMS IOM 100-04, Section 120, *Billing Procedures Related To Advanced Beneficiary Notice (ABN) Upgrades*, and 100-04, Chapter 30, Section 50.8, *ABN Standards for Upgraded Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)*.
- c. PMD prior authorization – proposal to add 12 new states:
 - i) All is status quo right now - nothing new to report.
 - ii) Have not heard anything about expansion yet.
- d. Q & A - any issues we have need to be written and submitted to Vicky
 - i. Question 6 – remove.
 - ii. Question 8 - CMS is reviewing.
 - iii. Question 9 -clarification: continued use is refill; continued need is a recent order. Provider wouldn't necessarily need office notes.
 - iv. Question 11 - all ties in with face-to-face documentation.
 - v. Question 12 - AAHomecare is taking to CMS. How is NGS treating in audits - they are accepting initials.

- vi. Question 17 - still don't like answer.
- vii. Question 18 - two questions in question but one no? The older the test, the less valid it is. They don't want to put a time frame in.
- viii. Question 26 - wheelchair parts included in ACA 6407 - still not sure why need face to face for seat upholstery.
- e. Request EOBs - Provider requested EOB, NGS staff could see them, provider asked to be sent, never received. Cycled twice with two different providers - Tamara had to have them sent to her and then she faxed them.

8. Schedule Next Meeting - All

- a. Next meeting dates
 - i. July 24, 2014
 - ii. October 16, 2014