

# Medicare Minutes

## Register Now for IACS-PC

The Centers for Medicare and Medicaid Services (CMS) will soon start an online application that will allow Medicare fee-for-service (FFS) providers to access, update, and submit information over the Internet through the Individuals Authorized Access to CMS Computer Services—Provider Community (IACS-PC). CMS recommends that providers set up online accounts now. See more information at: [www.cms.hhs.gov/MLNMattersArticles/downloads/SE0747.pdf](http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0747.pdf).

## New CMS Listserv

CMS is offering a new e-mail listserv that allows you to choose between many audience types and subjects of information, such as the National Provider Identifier (NPI), the Physician Quality Reporting Initiative (PQRI), and Preventive Services. No action is needed. CMS will migrate your current e-mail service to the most appropriate corresponding subject/audience type.

## Updated CMS Web Course

*Medicare Preventive Services Series: Part 3 Expanded Benefits* is an updated Web-based training course to help FFS providers and suppliers understand Medicare's coverage and billing guidelines for preventive services. To register for this free course, go to: [http://cms.meridianksi.com/kc/main/kc\\_frame.asp?kc\\_ident=kc0001&loc=5](http://cms.meridianksi.com/kc/main/kc_frame.asp?kc_ident=kc0001&loc=5).

## CMS Exposes Poor-performing SNFs

The first rankings of the nation's poor-performing skilled nursing facilities (SNFs) was released by

CMS at [www.cms.hhs.gov/CertificationandCompliance/Downloads/SFFList.pdf](http://www.cms.hhs.gov/CertificationandCompliance/Downloads/SFFList.pdf). Fifty-four facilities failed to make significant improvements that were called for by their state survey agencies. Families looking for a SNF for a family member can find *A Guide to Choosing a Nursing Home* on the CMS Web site at: [www.medicare.gov/Publications/Pubs/pdf/02174.pdf](http://www.medicare.gov/Publications/Pubs/pdf/02174.pdf). The American Health Care Association (AHCA), which praised CMS' transparency efforts, also provides helpful information on SNFs at [www.longtermcareliving.com](http://www.longtermcareliving.com).

## Two CMS Errata Sheets

The following 2 errata sheets are available on the CMS Web site. *Medicare Physician Guide: A Resource for Residents, Practicing Physicians, and Other Health Care Professionals* at: [www.cms.hhs.gov/MLNProducts/downloads/MedPhysGuideErrataSheet.pdf](http://www.cms.hhs.gov/MLNProducts/downloads/MedPhysGuideErrataSheet.pdf), and *Facilitator's Guide: Companion to the Medicare Physician Guide: A Resource for Residents, Practicing Physicians, and Other Health Care Professionals* at: [www.cms.hhs.gov/MLNProducts/downloads/MedPhysFacGuideErrata.pdf](http://www.cms.hhs.gov/MLNProducts/downloads/MedPhysFacGuideErrata.pdf).

## 2008 PQRI

The list of 119 measures that are part of the 2008 Physician Quality Reporting Initiative (PQRI), effective January 1, 2008, is available at: [www.cms.hhs.gov/PQRI/Downloads/2008PQRIMPFS\\_Summary.pdf](http://www.cms.hhs.gov/PQRI/Downloads/2008PQRIMPFS_Summary.pdf). More information can be found on the CMS Web site at: [www.cms.hhs.gov/PQRI/35\\_2008PQRInformation.asp#TopOfPage](http://www.cms.hhs.gov/PQRI/35_2008PQRInformation.asp#TopOfPage).

## Bad Claims Rate Falls

Aggressive oversight by CMS has resulted in a decline in improper Medicare claims from 14.2% in 1996 to 4.4% in 2006 and 3.9% in 2007.

## Hospice Providers Take Note

The date for mandatory reporting of additional data for hospice claims has been extended to July 1,

2008. More information is available at: [www.cms.hhs.gov/MLNMattersArticles/downloads/MM5567.pdf](http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5567.pdf).

## CMS Sets Key Dates for NPI

As of January 1, 2008, 8371 electronic claims and UB04 paper claims without a National Provider Identification (NPI) in fields identifying the primary provider (billing and pay-to) will be rejected. Legacy identifiers paired with NPIs in the primary provider fields will still be acceptable as will legacy-only numbers in secondary provider fields. As of March 3, 2008, Medicare fee-for-service 837P and CMS-1500 claims must include an NPI in the primary fields on the claim. NPI/legacy pairs will also be accepted in these fields. By May 23, 2008, only NPIs will be accepted on HIPAA electronic transactions (837I, 837P, NCPDP, 276/277, 270/271 and 835), paper claims, and SPR remittance advice. For more information, see: [www.cms.hhs.gov/MLNMattersArticles/downloads/MM5726.pdf](http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5726.pdf).

## Demo Project for EHRs

US Health & Human Services Secretary Mike Leavitt announced a 5-year demonstration project to encourage small- and medium-sized physician practices to adopt electronic health records (EHRs). This CMS project will be open to up to 1200 physician practices this spring. Financial incentives will be given to those practices that meet clinical quality measures. Participating practices will use a certified EHR system to perform functions such as clinical documentation and prescription ordering.

## Final Physician Payment Rule

Under the CMS finalized Medicare Physician Fee Schedule, effective January 1, 2008, Medicare estimates it will pay about \$58.9 billion to some 900,000 physicians and other healthcare professionals. The Physician Assistance and Quality Initiative Fund will provide \$1.35 billion for physician payment and quality improvement initiatives for services furnished in 2008. Details of the ruling are available at: [www.cms.hhs.gov/PhysicianFeeSch/](http://www.cms.hhs.gov/PhysicianFeeSch/).

## Facilitators' Kits

The revised *Medicare Resident, Practicing Physician, and Other Health Care Professional Training Facilitator's Kit* (July 2007) includes everything that facilitators need to prepare for and present Medicare training courses. *Medicare Resident, Practicing Physician, and Other Health Care Professional Training Program Bookmark* provides information about the Medicare Resident, Practicing Physician, and Other Health Care Professional Training Program. Also available is the *Rural Health Bookmark*, which offers Medicare providers, suppliers, and physicians information about rural educational resources. To order, visit [www.cms.hhs.gov/mlngeninfo](http://www.cms.hhs.gov/mlngeninfo), scroll down to "Related Links Inside CMS," and select "MLN Product Ordering Page."

## Off to the Slammer for Some; Big Fines for All

According to the Department of Justice (DOJ), a former Medicare fraud investigator for the Office of the Inspector General (OIG), Special Agent Scott Allen Gompert, has pleaded guilty to two felonies after he allegedly stole \$1 million from government bank accounts. He faces up to 35 years in prison and \$1.25 million in fines. Four family members of a durable medical equipment company, Select Medical Equipment, Inc., pleaded guilty in March to Medicare fraud. Each will have to pay more than \$1.4 million in restitution, according to the DOJ, and spend 57 months in the slammer. Randy Lentz, who operated a medical practice in Jesup, GA, pleaded guilty to conspiracy to commit Medicare and Medicaid fraud, after being indicted in 2006 for submitting false claims for physical therapy. Lentz's restitution will be \$250,000 to \$300,000. His wife, Rebecca Lentz, who submitted the claims, will be excluded from Medicare and Medicaid.

## OOP Spending Rises as Share of Income

A new study in the journal *Health Affairs* reports that median out-of-pocket (OOP) health spending rose from 11.9% of income in 1997 to 15.5% in 2003. To read the full study, see: <http://content.healthaffairs.org/cgi/content/abstract/26/6/1692>.

## 2008 Physician Fee Schedule

The Medicare, Medicaid and SCHIP Extension Act of 2007 made several changes affecting payments to physicians. One change provides for a 0.5% increase to the physician fee schedule conversion factor for dates of service from **January 1 through June 30, 2008**, instead of the -10.1% that was scheduled to take place. Effective for dates of service on and after **July 1, 2008**, the -10.1% update to the physician fee schedule will go into effect. The new fees will be posted on your local contractor's Web site as soon as possible.

Since there is a change to the 2008 Medicare Physician Fee Schedule rates, CMS is extending the Participation Decision Period an additional 45 days to **February 15, 2008**. All participating status changes will be effective January 1, 2008. To become a participating physician, complete the CMS-460 form found on the CD that was mailed to physicians in November or request the form from your local contractor.

## It's Not Too Late to Get the Flu Shot

Encourage your Medicare patients who haven't already done so to get their annual flu shot, and don't forget to immunize yourself and your staff. Influenza vaccination is a covered Part B benefit. For more information about vaccination coverage see <http://www.cms.hhs.gov/MLNMattersArticles/downloads/SE0748.pdf>.

## National Glaucoma Awareness Month

Approximately 3 million Americans have glaucoma. Because the disease often progresses silently in the initial stages, it is estimated that up to half of the approximately 3 million Americans with the disease don't know they have it. Vision loss from glaucoma is permanent and irreversible.

Medicare provides coverage of an annual glaucoma screening for beneficiaries in at least 1 of the following high-risk groups:

- Individuals with diabetes mellitus
- Individuals with a family history of glaucoma
- African-Americans age 50 and older

- Hispanic-Americans age 65 and older

A covered glaucoma screening includes a dilated eye examination and a direct ophthalmoscopy examination or a slit-lamp biomicroscopic examination.

Remind your high-risk Medicare patients to get an annual glaucoma screening exam. See [http://www.cms.hhs.gov/MLNProducts/35\\_PreventiveServices.asp](http://www.cms.hhs.gov/MLNProducts/35_PreventiveServices.asp) for more information.

## Updated MLN Matters Articles

For the following articles, visit <http://www.cms.hhs.gov/MLNMattersArticles/downloads/>.

SE0753 and SE0754: Individuals Authorized Access to CMS Computer Services (2nd and 3rd in series)

MM5813: 2008 Annual Update for Clinical Laboratory Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment

MM5770: Handling Personally Identifiable Information (PII) on the Medicare Summary Notice

MM5829: Annual Update of Healthcare Common Procedure Codes System (HCPCS) Codes Used for Home Health Consolidated Billing Enforcement

MM5830: Update to Medicare Deductible, Coinsurance and Premium Rates for 2008

MM5839: Quarterly Competitive Acquisition Program (CAP) Drug and Annual CAP Drug Price Updates

MM5846: The Supplemental Security Income (SSI)/Medicare Beneficiary Data for Fiscal Year (FY) 2006 for Inpatient Prospective Payment System (IPPS) Hospitals, Inpatient Rehabilitation Facilities (IRFs), and Long Term Care Hospitals (LTCHs)

MM5567: Reporting of Additional Data to Describe Services on Hospice Claims

## Election Period for CAP

An additional election period for the 2008 Medicare Part B Drug Competitive Acquisition Program (CAP) began on January 15, 2008, and concludes on February 15, 2008. This additional election period is for physicians who have not already elected to participate in the CAP for 2008. Effective dates of participation for physicians who elect to join the CAP during this additional election period will be April 1, 2008, to December 31, 2008. For more information, see [http://www.cms.hhs.gov/CompetitiveAcquisforBios/01\\_overview.asp](http://www.cms.hhs.gov/CompetitiveAcquisforBios/01_overview.asp)

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