

**WPS Medicare Provider Outreach and Education  
Advisory Group (POE AG)**

**Iowa/Nebraska  
Teleconference  
Minutes  
1 pm – 3 pm  
October 13, 2011**

Attending Members: Advanced Medical Imaging, Downtown Chiropractic, Drs. Sextro, Larsen and Bandel, Grand Island Surgery Center, Kearney Clinic, Iowa Medical Society, Iowa Physical Therapy Association, McFarland Clinic, Mercy Clinics, Waverly Chiropractic

WPS Medicare Staff: Ellen Berra, Holly O'Neal

<b>Agenda Item</b>	<b>Presentation Information</b>	<b>Discussion/Comments</b>	<b>Outcome/Action</b>
<b>Opening</b>			
Welcome	Ellen welcomed members of the POE AG		Members introduced themselves.
Minutes	Ellen asked members for comments on the previous minutes.  There was a discussion concerning the Open and Closed Action/Outcome items. We discussed the resolution to two of the open items; the suggestions for increasing the number of subscribers to eNews, we've responded to all the suggestions. The second one is the C-SNAP appeals decision tree.	We cannot add the tree to C-SNAP, but will add a link to the appeals decision tree.	Members approved the minutes.  We will update the Open Action/Outcome document for the next meetings.
<b>Medicare Publications</b>			
Education Schedule	Holly informed members that they can now sort the Education Schedule on our website by hovering over the column heading until the icon appears, then clicking.	Members were not aware of this and appreciated the information. Members requested we make the information more prominent.	We will forward this to our management staff.
<b>Provider Education</b>			
5010	Chair encouraged members to be ready to transition to the 5010 version by January 1, 2012.  The Centers for Medicare & Medicaid Services	Some members stated they were in 5010 production and others were testing.	Members will continue to get ready for 5010. WPS Medicare will continue to remind providers.

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	(CMS) stated during the last Physician Open Door Forum call that nationally, testing is low thus far and they encouraged providers to consider contingency loans should their vendor or clearing house not be ready for implementation.		
Provider Enrollment and Revalidation	<p>Members received MLN Matters articles about the Revalidation of Provider Enrollment Information.</p> <p>We highlighted the articles with emphasis on the fact that providers need to wait until they hear from us before taking any action.</p>	Members discussed this daunting task.	No further action.
National Correct Coding Initiative	<p>POE AG members suggested the National Correct Coding Initiative (CCI) is a good topic for education.</p> <p>We address CCI in several of our current seminars. We provided several teleconferences but attendance and questions were low.</p> <p>Chair asked members for ideas on how we can be more specific in the education.</p>	Members suggested we make handouts and examples available for discussing NCCI edits. The CMS website contains an NCCI manual providing examples provides may find useful.	WPS Medicare will include CCI as one segment in our series of teleconferences on Modifiers.
e-Prescribing (eRx)	Members received information on the new eRx hardship exemptions. Individual providers must use the Quality Reporting Communication Support Page to enter requests to receive the exemptions. The new deadline for requesting the exemptions is November 1, 2011.	There was no discussion.	No further action.
<b>Suggestions</b>			
Policy and ICD-10	Our Policy Department will revise our Local Coverage Determination (LCD) policies with the new ICD10 information when available. We will post the revisions and notices of the changes on our website and in the eNews.	This process will work like any other years. Providers will want to be proactive in verifying all appropriate diagnosis codes are included in the policies.	Members will watch the website for publication of any new policy changes for ICD-10 closer to the implementation date.
High Dollar Claims	An overview was provided on submission of high dollar claims. Chair asked members for ideas on how to the best get this information out to providers.	Members expressed their frustration with sending information multiple times. We discussed some of the information and instructions we currently have on the	We encourage members to utilize the published information to verify they are submitting all required

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		website.	medical record documentation to support the service billed.
ABN	Chair discussed the new version of the Advance Beneficiary Notice (ABN) dated 03/2011 and informed members that providers only the new version is valid as of January 1, 2012.	The changes were in format only.	No further action.
Annual Wellness Visit	WPS Medicare no longer provides face-to-face education for the beneficiaries. There is a separate call center for beneficiaries. For education, providers can refer the beneficiaries to the Senior Health Insurance Program (SHIP), 1-800-MEDICARE, <a href="http://www.medicare.gov/">http://www.medicare.gov/</a> or post AWW educational materials from the Medicare Learning Network in their offices.	We asked members to provided information to their front-line staff and ask patients if they are making an appointment for the AWW or a yearly physical exam.	Members will determine the best way to incorporate this into their business practices.
Modifier 25	During this discussion, the Chair stated there is still confusion on the correct use of modifier 25 and asked members for suggestions on how we can combat this.	We discussed the education we currently have on our website and what we will include in our presentation material.	No further action.
RAC Demand Letters	Chair let the members know that beginning January 1, 2012, any RAC Demand Letters will come from us.	One member asked if the letter would identify the overpayment as from RAC. It will.	No further action.
<b>Open Discussion</b>			
2012 Meeting Dates	Members did not have any comments on the 2012 meeting dates.		
Financial/MSP questions	Members suggested we develop more information for Financial and MSP. They are looking for questions and answers to know whom they should call with particular questions.		We will pass this along to management staff.
Glycated Hemoglobin (A1C)	Several members expressed concern with WPS Medicare's recent processing of the 83036 procedure code.	Members believe we are not allowing at the frequency as listed in the Internet Only Manual and we are denying as contractual obligation even when the provider appended modifier GA.	We will take this to our processing staff and will respond to members when we have an answer.

**Next Meeting: February 16, 2012**  
**Location: Teleconference**