

**Mutual of Omaha – Medicare
National PCOM Advisory Group Meeting Minutes
Las Vegas, NV
February 21, 2006
9:00 a.m. – 11:30 a.m.**

Members Present

Home Office Staff, Omaha, NE:

Mary Woon, Provider Communications Manager, Mutual of Omaha – Medicare
Janelle Herman, Business Analyst, Mutual of Omaha – Medicare
Sheryl Torres, Education Coordinator, Mutual of Omaha - Medicare

Central Region:

Bob Haisch, Mutual of Omaha – Medicare, Kansas City Field Office
Kathy Maris, Mutual of Omaha – Medicare, Dallas Field Office
Aileen Sigler, Mutual of Omaha – Medicare, Home Office Omaha
Aaron Burky, Tenet Health System, Texas
Carolyn Duncan, Skaggs Community Health Clinics, Missouri
Becky Fisk, North Kansas City Hospital, Missouri
Margaret Gregg, Skaggs Community Hospital, Missouri
Christy Hargis, Columbia Regional Hospital, Missouri
Rona McNally, Project Manager, Missouri S.O.R.T.
Jean O’Neal, Columbia Regional Hospital, Missouri
Gary C. Toliver, V.P. Federal Relations, Missouri Hospital Association
Lisa Wright, University of Missouri Health Care, Missouri

Northeast Region:

Janet Mateo, Mutual of Omaha – Medicare, Chicago Field Office
John Wrynn, Mutual of Omaha – Medicare, Hartford Field Office
Bill Major, Memorial Hospital-York, Pennsylvania

Southeast Region:

Marijean Schindler, Mutual of Omaha – Medicare, Atlanta Field Office
Janice Tait, Mutual of Omaha – Medicare, Clearwater Field Office
Rudy Braccili, Tenet Health System, Florida
Sunny Doiron, Tenet Health System, Florida
Rose Hall, Tenet Health System, Florida
Laurie Holtsford, Community Health System, Tennessee

West Region:

Kelly Collins, Mutual of Omaha – Medicare, Sacramento Field Office
Judy Lee, Mutual of Omaha – Medicare, Sacramento Field Office
Wesla Arambulo, Skilled Healthcare, California

Meg Gelvezon, R.N., N.H.A., North American Healthcare, California
Charlie Harrison, Boulder City Hospital, Nevada
Diane Olivas, Tenet Health System, Western States Region
Gloria Patterson, Pakson, Inc., California
Stacy Razevich, ICMRS, California
Amy Rodriguez, LTC Consulting Associates, California
Cathy Schmidt, The Ensign Group, California, Arizona, Texas
Nancy Strand, ICMRS, California
Debbie Wickersham, LTC Quick Recovery, California
Nanci Wilson, RPT, North American Healthcare, California

Meeting

The first National PCOM Advisory Group Meeting was called to order by Mary Woon, Provider Education Manager, Mutual of Omaha – Medicare, at 9:00 a.m.

After welcoming all of the attendees to the meeting, Mary asked each of the Field Representatives who lead PCOM Advisory Groups in their Region to explain how the meetings are handled in each respective region.

John Wrynn, Northeast Region Field Representative, explained that he hosts two quarterly PCOM Advisory Groups in the Northeast Region, one in Massachusetts and one in Pennsylvania. During the first couple of years these meetings were held in person but have since evolved into quarterly teleconference meetings due to difficulty of travel for participants and the time involved. The groups have discussed the possibility of meeting face-to-face perhaps once per year in the future. Each of the two groups suggests training topics for seminars and other educational options, as well as to decide when and where the seminars should be held. The group then discusses any recent changes in policy or regulations that have come from CMS that may impact the providers.

Bob Haisch, Central Region Field Representative, Kansas City Field Office, introduced the other two Field Representatives in the Central Region: Kathy Maris, Dallas Field Office, and Aileen Sigler from the Home Office in Omaha, NE. Bob hosts the one PCOM Advisory Group that is held in the Central Region in the State of Missouri. The Missouri PCOM Advisory Group prefers face-to-face meetings in Jefferson City, which is centrally located within the state. Each meeting averages 15-25 participants, including representatives from hospitals, rural health clinics, skilled nursing units, dialysis facilities as well as representatives from the Missouri Hospital Association, Missouri Medicaid, the QIO, the Missouri SORT Program, CMS Kansas City Regional Office, and several consultants. As a courtesy, Bob also includes the Nebraska Hospital Association and IntegriGard, the national fraud and abuse contractor for CMS in the membership. At each three-hour meeting Bob explains the function and purpose of the PCOM Advisory Group, discusses future training topics and provider needs with the members, ending the meeting with a guest speaker.

Kelly Collins, West Region Field Representative, Sacramento Field Office, introduced the other Field Representative in the Sacramento Field Office, Judy Lee, and explained that both Field Reps share the responsibility of hosting the PCOM Advisory Group meetings in alternating quarters. All of the West Region meetings are now held by teleconference due to the size of the Region and at the preference of the members. When the PCOM Advisory Groups began several years ago, the meetings were held in person, alternating quarterly meetings between the Sacramento Field Office and various Southern California sites. Members have expressed the preference of having teleconference meetings over face-to-face meetings due to the cost of travel and time constraints. Members are always welcome to attend the meetings in person in the Sacramento Field Office. The one-hour teleconference meetings have one major purpose, that of generating ideas for training topics and workshop locations for the West Region. The West Region PCOM Advisory Group membership includes various provider types, including hospitals, skilled nursing facilities, consultants and organizations such as the California Hospital Association and CMS Region IX. Since the West Region provider base is heavily weighted with skilled nursing facilities, the membership reflects that fact. We rely on our members to tell us which specific issues they are having so that our training may be directed to those subjects.

Janice Tait, Southeast Region Field Representative, Clearwater Field Office and chairperson of the Southeast PCOM Advisory Group, introduced Marijean Schindler, the Senior Field Representative in the Atlanta Field Office. Janice stated that the Southeast PCOM Advisory Group is very similar to the Northeast and West Region PCOM Advisory Groups in that their meetings are held quarterly by teleconference at the preference of the members. Janice also emphasized that she depends heavily on the members of her PCOM Advisory Group to recommend the educational topics and seminar locations that are needed by providers in the Southeast Region. The minutes of the quarterly PCOM Advisory Group meetings are posted at www.mutualmedicare.com so that they are available to anyone throughout the country.

Following the PCOM Advisory Group introductions, Mary introduced Janet Mateo, Field Representative in the Chicago Field Office, and the other two Home Office representatives present at the meeting: Sheryl Torres, Medicare Program Management Education Coordinator and Janelle Herman, Medicare Program Management Business Analyst. Each of the 26 meeting attendees was asked to introduce themselves and to state which PCOM Advisory Group they represent.

Before getting into the main purpose of today's meeting ((gathering training topics and locations for seminars, Ask the Contractor Teleconferences (ACT), Small Provider teleconferences, Computer Based Training (CBT), and other training types)), Mary reviewed the meeting handout folders with the attendees. The folders contained the Agenda, PowerPoint presentation for the afternoon training module review, evaluation forms for the PCOM Advisory Group morning meeting and one form for each presenter in the afternoon portion of the meeting.

Mary emphasized the importance of the evaluation forms in obtaining feedback from the members regarding the national meeting format and the new training materials that we have prepared for the members' review and recommendations.

Mary explained that our education typically includes 34 workshops per year throughout the country. We want to ensure that the workshop topics are what our providers want and need. Other educational types include 16 Ask the Contractor Teleconferences (ACT), each beginning with a 15 to 20-minute PowerPoint presentation, followed by an open question and answer session, and the 6 Small Provider teleconferences (defined by CMS as providers with 25 or less full time employees), with a similar format. Another educational type is Computer Based Training (CBT) courses (6 per year) that are posted to our web page annually based on the topics representing frequently asked questions and the PCOM Advisory Group recommendations. The most recent CBT topics are "National Coverage Determinations" and "Outpatient Therapy Limits". Other available CBT topics include "Observation" and "SNF Consolidated Billing". We are very interested in our providers' opinions about each of the training types and topics.

The next portion of the meeting, "Group Input and Feedback" will be chaired by one of the Field Representatives from each of the four PCOM Advisory Groups.

Group Input and Feedback:

- **Recommended topics for upcoming training sessions – Judy Lee**
 1. Outpatient Observation – specifically observation after surgery and recovery room
 2. Hospital Reimbursement – cost reports, bad debts, etc. and how they are impacted by the claims billed by hospitals; suggestion was made to involve the Audit & Reimbursement Department in the PCOM Advisory Group meetings
 3. Medical Necessity – appropriate diagnoses, coding, test results, etc.
 4. Pre-Entitlement Billing – when beneficiary become entitled to Medicare after admission to the facility.
 5. HBO Therapy
 6. New and Retired LCD and NCD – these may be addressed in newsletter articles or EML when changes are made
 7. Benefits Exhaust/CWF – using CWF and determining when benefits are exhausted, HMO enrollment, COB contractor issues, when to involve beneficiaries in CWF updates – could be handled as "helpful hints", newsletter topics, etc.
 8. FISS DDE Issues – reason codes, claims correction, adjustments, etc.
 9. Navigating the CMS Web Page – new links, etc.
 10. SNF No-Pay Billing – seminar, CBT, ACT, newsletter
 11. Probe Reviews – processes, documentation requirements, triggers for medical review, etc.; providers come to the Home Office for training?

12. Medicare Secondary Payer – liability cases, patient refusal to provide information vs. non-response, incarcerated beneficiaries, etc.
13. Consolidated Billing Exclusions – specific categories, HCPCS, etc.
14. Routine vs. Non-routine – what is included in the room charge, etc.
15. CAH Billing - inpatient vs. outpatient, HCPCS codes
16. Coverage Exclusions
17. Mutually Exclusive and CCI Edits – use of modifiers, etc.
18. Physician Documentation – as it relates to hospital and other provider billing and payment
19. RHC Billing
20. RUG 53 Grouper Software

▪ **Tentative Locations for Training Sessions – Judy Lee**

1. Arizona – Phoenix and Tucson
2. Missouri - Springfield
3. Florida – Boca Raton
4. Nevada – Las Vegas, Reno
5. Locations currently used in each Region

BREAK

• **Timing of Workshops – Judy Lee**

1. Third week of the month
2. No Friday, Monday, or Holiday workshops
3. Starting and ending later, such as 9:00 AM to 3:00 or 4:00 PM with 1 hour lunch break

• **Most Effective Means of Disseminating Training – Janice Tait**

1. Weekly informational e-mail to summarize all EML topics for the week
2. Weekly 30-minute teleconference with minutes based on issues that come up during the week, no live Q&A – provider questions may be e-mailed to Field Office for inclusion in the minutes.
3. Weekly or monthly ½-day Field Office training for providers to bring individual issues for resolution – “Open House” format
4. PowerPoint Presentations on web – may download the Microsoft “reader” from the Microsoft web page, similar to the “Adobe reader”
5. Web page calendar of events
6. Claim examples (UB-92 and FISS DDE) on web page – Judy Lee will e-mail these claim examples to all providers in attendance at this meeting

• **Ask the Contractor (ACT)/Small Provider Teleconference Topics – Bob Haisch**

1. Any and all topics mentioned above for seminars
2. Members expressed that they like the format of the current ACT and Small Provider Teleconferences

- **Computer-Based Training (CBT) Topics – John Wrynn**
 1. Benefits Exhaust
 2. MSP Liability Issues – more specific than current CBT
 3. Eligibility – how to read CWF
 4. Claim Correction in FISS DDE – most common errors previous quarter and how to correct them
 5. Claims Processing Flow in FISS DDE – front-end edits, claim path, routing, “life of a claim”, “how to submit a clean claim”, etc. – members would like to see some of the front end edits reinstated since many providers do not use PC-ACE to submit claims
 6. PT Documentation Requirements – referred to Medical Review for inclusion in CBT that they produce
 7. CAH Billing
 8. CCI Edits – Column 1/Column 2 and Mutually Exclusive, describe how the edits work and when they are implemented
 9. RHC Billing
 10. No-Pay Claims
 11. Transplant Billing
 12. Dialysis Billing
 13. New Technology/IDE Billing

Open Discussion – Mary Woon

- Use of SLF000 vs. OTH000 for physician self-referral or physicians who do not have a UPIN – Kelly Collins will verify whether the SLF000 is still valid or not.
- The issue of the physician UPIN going away or for physicians who do not have a UPIN, how do providers bill for screening mammograms, self-referred mammograms, etc.?

The National PCOM Advisory Group meeting was adjourned at 11:30 a.m., to be resumed at 12:30 p.m. with the new training module presentations by each of the Field Representatives, and assessments and comments on the modules by the National PCOM Advisory Group members.

Submitted by: Judy Lee, Field Representative, West Region Sacramento
February 27, 2006