

POE Advisory Group Meeting Minutes – Central Region

Wisconsin Physicians Service (WPS) Medicare Part A

December 13, 2007

10:00 – 11:30 p.m. CT

Present:

Paulett Anderson, St. John's Hospital – Springfield (H, R, P, S)
Kathy Boschert, BJC HealthCare (H, R, P, S, D, CAH, RHC)
Kevin Conway, Nebraska Hospital Association
Carolyn Duncan, Skaggs Community Health Care (RHC)
Kelli Schroeder, North Kansas City Hospital (H, R, S)
Tina Davis, University of Missouri Health Care (H, R, P, D)
Lisa Wright, University of Missouri Health Care (H, R, P, D)
Roger Weis, MO HealthNet Division
Judy Gelsheimer, Cox Health (H, R, P, S, D, RHC)
Rodney Gibson, Missouri Delta Medical Center (H, R, P, D, RHC)
Sanoria Taylor, Missouri Delta Medical Center (H, R, P, D, RHC)
Mike Gorman, Key Rehabilitation, Inc. (OPT)
JP Greco, eSolutions
Robert Henderson, Skaggs Community Health Center (H, S)
Becky Miller, Cox Health (H, R, P, S, D, RHC)
Judy Gelsheimer, Cox Health (H, R, P, S, D, RHC)
Linda Knox, Cox Health (H, R, P, S, D, RHC)
Janie Elliott, Cass Medical Center (RHC)
Joanne Hollett, SSM Health Care (H, R, P, S, RHC)
Donna Coates, St. Mary's Health Center (H, P, RHC)
Joan Guthmiller, St. Mary's Health Center (H, P, RHC)
Marissa Smith, Southeast Hospital (H, R, P)
April Roark-Durbin, St. Anthony's Medical Center (H, R, P)
Jackie Burcxyk, St. Luke's – Kansas City (H, R)
Jan Godley, St. Luke's – Kansas City (H, R)
Jon Dolan, Missouri Health Care Association
Gary Toliver, Missouri Hospital Association
Carolyn Volden, Cooper County Memorial Hospital (H, S, RHC)
Amy Banks, Cooper County Memorial Hospital (H, S, RHC)

Facilitator:

Bob Haisch, Wisconsin Physicians Service (WPS)

The Provider Outreach and Education (POE) Advisory Group Meeting was held via conference call. The provider members on the call represented hospitals, skilled nursing facilities, rehabilitation agencies, dialysis, and rural health clinics.

- **Medicare Contractor Beneficiary and Provider Communications Manual (Pub. 100-09), Provider Customer Service Program (Chapter 6), Section 20.4**

The primary function of POE Advisory Groups is to assist the FI in the creation, implementation and review of provider education strategies and efforts. The function of these groups can also be found on the WPS Medicare Website www.wpsmedicare.com

under Education, POE AG. Please contact Bob Haisch with any suggestions about future topics for seminars, teleconferences or computer based training. Bob can be reached at 816-891-6500, ext. 227 or bob.haisch@wpsic.com.

- **Seminars / “Act-the-Contractor” Teleconferences (ACTs)**
Refer to the WPS Medicare Website, under Education, for a listing of seminars, ACTs, etc.
- **Computer Based Training (CBT)**
The WPS Website, under Education, lists several CBTs that are available.
- **WPS PowerPoint Modules**
The following is a list of educational PowerPoint modules developed by WPS:

Ambulance Services	Long Term Care Hospital
Appeals	Medical Review / Progressive Corrective Action
CERT	Medicare Secondary Payer
Critical Access Hospital	OPPS
End stage Renal Disease	Outpatient Rehab
FISS/DDE	Rural Health Clinic
Inpatient Psych Facility	SNF
Inpatient Rehab Facility	WPS Communications
IPPS	

Miscellaneous Business Modules:
 - Basic Preventative Services
 - CCI Therapy Edits
 - IM & Expedited Reviews
 - Medicare 101
 - NPI

Please contact Bob Haisch if you have any suggestions about information you believe should be included in these modules.

- **Jurisdiction 5 (J5) A/B Medicare Administrative Contract (MAC)**
CMS announced on 09/05/07 that the J5 A/B MAC was awarded to Wisconsin Physicians Service Health Insurance Corporation (WPS). WPS will be responsible for the workload in Iowa, Kansas, Missouri and Nebraska. Effective 11/05/07 Mutual of Omaha – Medicare employees became WPS employees. The WPS Medicare and Mutual Medicare Websites have merged. The Website address is www.wpsmedicare.com. Providers that were formerly with Mutual of Omaha, known as legacy providers, should refer to Part A Information on the Website. Providers included in the J5 transition should refer to J5 MAC on the Website.
- **Medicare Advantage Plans (Part C) & Prescription Drug Coverage (Part D)**
Providers can contact the CMS Kansas City Regional Office with complaints about either Medicare Advantage Plans or Prescription Drug Coverage. Their phone number is 816-426-5783 and the fax number is 816-426-7604.
- **Capturing Days on Which Medicare Beneficiaries are Entitled to Medicare Advantage (MA) in the Medicare/Supplemental Security Income (SSI) Fraction (Change Request 5647)**
As of January 7, 2008, IPPS hospitals, IRFs, and Long Term Care Hospitals (LTCH) are required to submit information only bills to their Medicare contractor for the MA beneficiaries they treat, in order for these days to be captured in the DSH (or LIP for IRF) calculations.

Non teaching hospitals claims are to be submitted as covered claims (covered bill type and covered charges) with Condition Code 04. Teaching hospitals claims are already submitting their claims with Condition Codes 04 and 69 in order to be reimbursed for their Indirect Medical Education payment. Hospitals may go back and submit claims with discharge dates on or after October 1, 2006 (FY 2007), so that SSI data for FY 2007 and beyond will include MA patient days.

- **Medicare Severity Diagnosis Related Groups (MS-DRGs)**

There were significant changes to DRGs effective with discharges on or after October 1, 2007. These changes were implemented to recognize severity of illness and resource usage, and reflected in the FY2008 Grouper, Version 25.0. Refer to FY 2008 Inpatient Prospective Payment System (IPPS) Final Rule with Comment Period, CMS-1533-FC, Published August 22, 2007.

- **New Patient Status Discharge Code 70 (Change Request 5764)**

This code is used to define discharges or transfers to other types of health care institutions not defined elsewhere in the UB-04 (CMS-1450) Manual Code List. Effective for use by providers for discharges on or after April 1, 2008. For IPPS hospitals, the post acute transfer payment policy will not apply to claims that contain patient discharge status code 70.

Patient discharge status code 05 has been redefined, effective April 1, 2008, to indicate a discharge/transfer to a designated cancer center or children's hospital.

- **National Uniform Billing Committee (NUBC) Update on Revenue Codes (Change Request 5734)**

The NUBC reviewed "9 - Other" revenue codes for necessity, clarity, and redundancy. Specific revenue codes removed include 0599, 0709, 0719, 0749, 0759, 0779, 0789, and 0799. Pub. 100-04, Chapter 4, Section 20.5.1.1 – Packaged Revenue Codes, lists revenue codes when billed under OPPS without HCPCS codes are packaged services for which no separate payment is made. However, the cost of these services is included in the transitional outpatient payment (TOP) and outlier calculations. Any other revenue codes that are billable on a hospital claim must contain a HCPCS code in order to assure payment under OPPS. Medicare contractors should return to provider (RTP), claims which contain revenue codes that require HCPCS when no HCPCS is shown on the line. The effective date of Change Request 5734 is October 1, 2007, and the implementation date is January 22, 2008.

- **Corrected SNF Spell of Illness Chart (Change Request 5734)**

The SNF Spell of Illness Chart contained formatting errors. This chart is located in Pub. 100-04, Chapter 6, Section 40.8.1.

- **Additional CWF Editing for SNF Consolidated Billing (CB) (Change Request 5757)**

SNF CB requires SNFs to bill for therapy services when a Medicare beneficiary is in a certified bed, whether the beneficiary is receiving Part A or Part B benefits. For claims processed on or after April 7, 2008, with dates of service on or after April 1, 2001, Change Request 5757 provides instructions for additional CWF editing.

- **2008 Deductibles and Coinsurance**

Hospital Stay:

\$1,024 deductible

\$256 per day coinsurance for days 61-90

\$512 per day "lifetime reserve day" coinsurance for days 91-150

SNF Stay:

\$128 per day for days 21-100

Part B:

\$135 yearly deductible

- **Medicare Learning Network (MLN)**

MLN offers official CMS national provider education products such as articles, brochures, fact sheets, Web-based training courses, and videos providing information on changed or new Medicare Program policies. MLN information is located at <http://www.cms.hhs.gov/MLNGenInfo>

- **December POE Advisory Group Meeting**

The next POE Advisory Group meeting will be held in either February or March. Meeting information will be posted to the WPS Medicare Website.