

Provider Communications (PCOM) Advisory Group Minutes

8:30a.m.-12:00 noon

June 12, 2003

Southfield, Michigan

Facilitator:

Matthew C. Friedrichs, Senior Analyst, Provider Education and Outreach (www.mfriedrichs@wpsic.com)

Fran Plets, Assistant Manager, Beneficiary Education and Outreach (www.fplets@wpsic.com)

Members:

Marsha Benedict, Karen Berdy, Katherine Casey, Lisa McFarland, Nancy Connor, Melody Czapski, Kathy DiCenzo, Valarie J. Fane, Roxanne Harris, Judy Murray, Judy Poff, Susan Pridemore, Diane Rebori Koski, Marion Salwin, Judy Shubow, Kathleen Sporn, Lynette Spry, Melissa Weintraub, Victoria Tran, Connie S. Waddell, Elizabeth Zahodne,

Guest Speakers: Linda Mann, Fraud Information Specialist, Program Safeguard Contractor, Beverly Bruner, Training Specialist, United Government Services

Other Guests: Michael Rosenberg, M.D. Michigan Medicare Part B Carrier Medical Director

Agenda Item	Discussion	Outcome/Action
1. Welcome and Introductions	Meeting facilitators began the meeting with a note of thanks to those in attendance, followed with brief round-table introductions to familiarize the new members with charter members of the group thus promoting networking activities within the forum.	

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<p>2. Medicare Program Safeguard Contractor (PSC) – Trust Solutions, LLC</p>	<p>A representative from the Program Safeguard Contractor (PSC) presented a power-point presentation highlighting objectives and goals established by the Centers for Medicare and Medicaid Services for the PSC. The primary focus of the PSC is to reduce Fraud, Abuse and claims payment error beginning July 1, 2003. Wisconsin Physicians Service is referred to as the Affiliated Contractor and will continue to perform all current functions of the Medicare Part B carrier such as Medicare Secondary Payor, Medical Review, Audit, Appeals, Data Analysis, Claims, Customer Service, Provider Enrollment, Harkin Grantees, Education and Outreach. Trust Solutions, the Program Safeguard Contractor will be responsible for Benefit Integrity, Data Analysis, Fraud Education, assisting the Office of Inspector General (OIG), Federal Bureau of Investigation (FBI), Assisted United States Attorney (AUSA), and other Law Enforcement (LE) Agencies. The PSC will service the following areas:</p> <p>Part A</p> <p style="padding-left: 40px;">American Samoa, California, Guam, Hawaii, No. Mariana Islands, Michigan, Nevada, Virginia, West Virginia, Wisconsin.</p> <p>Home Health and Hospice - RHHI</p> <p style="padding-left: 40px;">Region II, Region V (Michigan, Minnesota, Wisconsin) and Part B Region IX, Region.</p> <p>Federally Qualified Health Care Centers – FQHC All 50 states and U.S. Territories</p>	

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3. Medical Review	<p>The Medical Review findings for completed probes during the 2nd quarter of 2003 are as follows.</p> <p>January 2003</p> <p>Podiatry (3 cases)</p> <p>E & M Services with Modifier 25</p> <ul style="list-style-type: none"> • One service denied for PCA issue – procedure code should have been billed in place of the E&M and there should have been no modifier 25 (PCA error rate 1.75%) • Non-PCA denial rate for various other issues 85% <p>Billed encounters with a lone E & M (CPT 99311)</p> <ul style="list-style-type: none"> • 37 services should have been billed with appropriate procedure code and were denied (PCA error rate 92.4%) • No denial rate for other issues <p>Billed encounters with only E & M codes 99214 and 99349 (Expanded Review)</p> <ul style="list-style-type: none"> • 214 services denied for E & M billed in place of appropriate procedure codes (PCA error rate 45.94%) • Non-PCA denial rate for various other issues 32% <p>Psychotherapy (1 Expanded Review)</p> <p>Psychotherapy with Dementia (CPT) 90817)</p> <ul style="list-style-type: none"> • Patients unable to benefit from psychotherapy due to cognitive status (PCA error rate 53.87%) • Non-PCA denial rate for various other issues 47% <p>February</p> <p>Podiatry</p> <p>E & M Services with Modifier 25</p>	

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- 10 services denied for PCA issue-insufficient documentation in medical records to support use of modifier 25 (PCA error rates 23.48% and 0%)
- Non-PCA denial rate for various other issues 56.02% and 15.96%

March

Podiatry

E & M Services with Modifier 25 (1 case)

- PCA issue- E & M services billed w/25 modifier but documentation does not support separately identifiable service (PCA error rate 6.2%)
- Non-PCA denial rate for various other issues 18.81 %

Billed encounters with a lone E & M (2 cases)

- PCA issue- Billed E & M when medical records documented a procedure was performed (PCA error rates 100% and 18.48%)

Non-PCA denial rate for various other issues 2.38%

Psychotherapy (1 Expanded Case)

Psychotherapy with Dementia (CPT 90817)

- Patients unable to benefit from psychotherapy due to cognitive status (PCA error rate 33.10%)
- Non-PCA denial rates for various other issues 56.20%, 7.66%, and 2.55%

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3. Medical Review	Review findings that result from this process are to be incorporated in the development of educational materials that are disseminated through workshops, events, monthly publications, WPS Web-site, email list-serves and shared with providers on a one on one basis.	
4. Customer Service	<p>Handouts detailing various types of inquires that are identified as causing high volume of work loads are as follows:</p> <p>Claim Submission Errors Performing Provider does not equal Billing Provider Rendering Physician number is Invalid/Missing</p> <p>Eligibility Information Providers are determining patient eligibility through telephone inquires rather that establishing eligibility with the patient.</p> <p>Unprocessable Claims One of the top reasons for telephone calls into the Customer Service call center are questions on unprocessable claims. Medicare is looking for ideas and suggestions on training, education, articles, web site information etc. that would be used to reduce the number of calls.</p> <p>New Provider Monitoring Providers are monitored for the first three months after a Medicare provider number is assigned. A baseline error rate is established by dividing the number of denied lines of service by the number of total lines billed to get the baseline percentage. After this three-month period another review is performed to determine whether or not additional education is needed.</p>	

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<p>5. Financial</p>	<p>Refunds The Medicare Customer Service Department and Financial Department reports an increase in phone calls regarding offsets for money previously refunded to Medicare.</p> <p>In researching this situation, we offer the following suggestions, which may help to avoid some of these situations:</p> <ol style="list-style-type: none">1. Send one check per Medicare provider number.2. Separate refunds into the following categories - Voluntary Refunds where MSP is involved; All other Voluntary Refunds; Request Refunds where MSP is involved, and all other Request Refunds.3. If Medicare has requested a refund from you, please send the letter you received along with your refund check. Do not only send a check, as we need the letter to identify what the check is for.4. When you identify an overpayment and are voluntarily refunding money to Medicare, clearly identify the beneficiary, the date of service, the procedure code and reason for the refund. See the refund from on our website at: http://www.wpsic.com/medicare/provider/vol_refund_prov_supp.shtml	
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<p>5. Financial</p>	<p>5. Please do not call Customer Service to verify WPS's receipt of your voluntary refund check, as this will result in an automatic overpayment being set up for offset.</p> <p>Reminder: All providers need to send their checks to WPS's Marion, IL mailroom. Please send checks for Michigan providers of service to:</p> <p>WPS Medicare Part B P.O. Box 5511 Marion, IL. 62959</p>	
<p>6. Provider Education</p>	<p>1. Members discussed past and upcoming training sessions to be conducted by Provided Education and Outreach staff and volunteered to assist in the development of new educational programs to be offered this fall. Members also agreed that current proposed table of contents for the 2003 Medicare Updates seminar series was comprehensive and would meet the needs of the provider community. In addition to assisting WPS staff with the development of educational programs this fall, they also agreed to assist with the development of both provider and beneficiary Q and A area on the WPS web-site.</p>	<p>Members agreed to meet during this next quarter and discuss the development of educational material that will be used during training sessions.</p>

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<p>7. Beneficiary Services</p>	<p>The Centers for Medicare & Medicaid Services (CMS) recently reinstated funding for the Customer Service Plan (CSP) which includes support of Beneficiary Outreach activities.</p> <p>The funding is prioritized towards activities that reach Medicare beneficiaries impacted by language, location, literacy and culture (LLC). The focus is to expand the reach of our limited resources by funding activities that reach a large portion of the Medicare LLC population, either through minority-oriented/non-English media programs, senior expos in rural areas, outreach to the Native-American population in MI and MN, and/or through collaboration with our partners serving the LLC population. WPS submitted a proposal of suggested activities to support, which was enthusiastically received by CMS. It includes activities that provide optimum value in reaching the LLC population in all four states.</p> <p>Our Beneficiary Outreach calendar of events continues to be modified on an ongoing basis as we continue to receive requests to support events in the communities we serve. We welcome input or suggestions for activities from the provider community that support CMS' focus.</p> <p>If you have any questions, please contact Fran Plets in Michigan at 248-395-7543 or Kim Slater in Illinois at 618-998-5236.</p>	
<p>7. Medicare Part A Update</p>	<p>A representative from United Government Services (UGS) provided a handout detailing future educational events offered by UGS. Also discussed were various Program Memorandums effecting benefit changes in Outpatient Rehabilitation Services, HIPAA, Appeals Process and Screening Pap and Pelvic Examinations.</p>	