

PROVIDER COMMUNICATIONS (PCOM) ADVISORY GROUP MINUTES

9:30a.m. – 12:00 noon

March 16, 2006

SpringHill Suites

Walker, Michigan

Agenda Item	Discussion	Outcome/Action
Welcome and Introductions	<p>Roll Call</p> <p>Minutes from the December 2005 meeting.</p>	Minutes were approved as written.
Focus of Forum	<p>Members were asked to review a two page document defining the primary responsibilities of Provider Communications Advisory (PCOM) Group members. After reviewing the document it was noted that members reacted in a similar manner to members of the Metropolitan Detroit PCOM forum that met a week prior. In summary of their comments, they too thought the major points of the document were consistent with previous documents that explained the focus of the forum in the past such as Transmittal 146, which was discussed initially at the March 20, 2003 meeting; and Change Request 3376 that followed.</p> <p>The January 2006 publication of the General Medicare Workbook was distributed for all members to participate in the ongoing development of educational materials. This collaborative effort began with members volunteering to review educational material during the June 19, 2003 meeting and has continued to this date.</p> <p>Suggestions/comments received during the meeting will be considered by the Provider Outreach and Education (POE) staff prior to the next update of this publication. A summary of suggestions and comments received are bulleted below as follows:</p>	Members thought this document clearly defined their responsibilities. No concerns were shared.
General	Appearance –	

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Medicare Workbook – <i>continued</i>	<ul style="list-style-type: none"> • The cover looked fine. Table of Contents - <ul style="list-style-type: none"> • An alpha index would make it easier to find topics of interest. • Page 5, there is a reference to the Medicare Carriers Manual (MCM), it should be the Internet On-Line Manual. • Page 7, line four of the third paragraph states patent, should be patient. • Page 13, beneficiary information implies information is for the beneficiary, however this information is for the provider not the beneficiary. • Page 14, hospital is listed twice on the Medicare Card, should only be mentioned once. • Page 76-78, the information on the Unique Physician/Practitioner Identification Number (UPIN) is no longer valid. • Page 88, the information on CMS-1500 Crosswalk to NSF and ANSI X12 4010 is not beneficial to a Medical Biller. This information is for programmers. • Page 104-105, this information should also be removed, this book is for Medical Billers, not programmers • Page 106, the narrative description for each location needs to be updated. 	<p>No suggestions were shared.</p> <p>Members would like to see inclusion of an alpha index to replace the Table of Contents. This would alleviate some frustration when attempting to find items of interest.</p> <p>This forum would like WPS staff to consider inclusion of Medicare Secondary Payer information into this section so that the presenter can illustrate the relationship between patient eligibility into the Medicare Part B program and the MSP rules that apply based on that entitlement when submitting secondary claims.</p>
General Medicare Workbook – <i>continued</i>	<ul style="list-style-type: none"> • We would like examples on how to determine the MSP payments. 	Staff will provide members with a status on actions taken based on their suggestions via e-mail.

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2006 Fee Schedule	<p>On February 28, 2006 a "Ask the Contractor (ACT) teleconference call was hosted by WPS on the 2006 Fee Schedule to address concerns of the provider community regarding the anticipated 0% average decrease for reimbursement of services during this calendar year. Some fees are being reimbursed at a higher rate than in 2005, some at a lower rate, and some have stayed the same as 2005 rates. The Centers for Medicare and Medicaid Services (CMS) had adjusted Geographical Price Cost Indexes (GPCIs) and the Relative Value Units (RVUs) on some procedure codes, resulting in changes from 2005 to 2006 reimbursement rates.</p> <p>WPS Medicare will perform mass adjustments on claims that have dates of service beginning January 1, 2006 through February 8, 2006. This will ensure that accurate reimbursement is made under the newly revised 2006 fee schedule.</p>	<p>Members stated that they did not need to participate in the call because they visited the WPS Web site daily to obtain the new anticipated fees.</p> <p>Members are encouraged to participate on ACT calls and provide staff with feedback regarding the call.</p> <p>No concerns were raised.</p>
Provider Enrollment Applications	<p>Effective 2/10/06, incomplete provider enrollment applications will be returned to providers for completion along with a detailed letter explaining what information is missing. We will no longer routinely contact providers to obtain missing information.</p> <p>Once all missing information, including any related attachments are added to the application, it can be resubmitted again as a new application or change of information request and will be processed as an initial request.</p>	<p>Information is available on the WPS Web site to assist individuals in completing the 855 enrollment applications, in addition to frequently asked questions about provider enrollment at: www.wpsmedicare.com</p>
Medlearn Matters Articles	<p>Members appreciate WPS staff sending frequent updates regarding program benefits and changes as they occur, rather than waiting to share them at the quarterly meeting.</p> <p>Medlearn Matters # 4215 – Consultation Services Current Procedural</p>	

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	<p>Terminology (CPT) Codes 99241 – 99255:</p> <p>Medlearn Matters # 4246 – Nursing Facility Services (Codes 99304-99318):</p> <p>Medlearn Matters # 4177 – Eliminate the Use of Surrogate Unique Physician Identification Numbers:</p> <p>Medlearn Matters # 4364 – Therapy Caps Exception Process:</p>	<p>There were no concerns regarding these Medlearn Matter Articles.</p>
<p>Open Discussion</p>	<p>During the open discussion session of the program members asked for clarification on the following:</p> <p>When providers are searching for information that is not available on the WPS Web site, it is possible that they receive a response back from their search that indicates what Web sites have the information they are looking for?</p> <p>Do Provider Customer Service Representatives at WPS have internet access to the WPS Web sites?</p>	<p>The search engine used to perform this function does not have this capability.</p> <p>Yes, the Customer Service Representatives do have access to the Web site and are more than pleased to assist individuals with their concerns.</p>
<p>Future Meeting Dates</p>	<p>June 15, 2006</p> <p>September 21, 2006</p> <p>December 14, 2006</p>	<p>Hope to see you there!</p>