

## PCOM Advisory Committee Minutes (PCOM)

Monday, March 6, 2006

9:30 a.m. – 12:00 p.m.

WPS Medicare, Nordby Building, LL1

Attending Members: Advanced Health Care, General Medical Laboratories, Gunderson Lutheran, Marshfield Clinic, Medical College of Wisconsin, Mile Bluff Clinic, SVA Healthcare Services, WEA Trust, United Government Services, Wisconsin State Medical Society, UW Health.

Members: (11)

Agenda Item	Discussion	Outcome/Action
Welcome and Introductions	<ul style="list-style-type: none"> <li>• Julie Christensen and Pete Scheller Co-Chairpersons welcomed attendees.</li> <li>• Six groups participated by telephone.</li> </ul>	
Approval of Minutes from December 2005 PCOM meeting		<ul style="list-style-type: none"> <li>• <b>There were no objections</b>, therefore the December 2005 minutes were approved.</li> </ul>
Function of PCOM Group – 2006 Meetings	<ul style="list-style-type: none"> <li>• Pete Scheller covered the Internet-only Manual, Pub. 100-09, Chapter 4, Section 30.1.4 A. Purpose of (P/SCOM Advisory Group)</li> </ul>	<ul style="list-style-type: none"> <li>• <b>The PCOM group determined</b> acknowledged their understanding as the focus of the meetings to be mainly feedback and suggestions for WPS educational programs.</li> </ul>

<p>Provider Education Strategies – New Provider Basics Workbook</p>	<ul style="list-style-type: none"> <li>• Julie Christensen provided a summary of the different WPS educational opportunities currently available to providers.             <ul style="list-style-type: none"> <li>○ On-Line Tutorials</li> <li>○ In-person seminars</li> <li>○ Teleconferences                 <ul style="list-style-type: none"> <li>• ACTs</li> </ul> </li> <li>○ Lunch N’ Learn</li> </ul> </li> <li>• Pete Scheller and Julie Christensen solicited the group for input and discussion in regards to the New Provider Medicare Basics workbook.             <ul style="list-style-type: none"> <li>○ A lot of discussion took place amongst the group about the book, what it contains, what it may not contain, etc.</li> <li>○ Some of the represented providers use the book as a resource for new employees.</li> </ul> </li>   <li>• Pete Scheller also solicited the members for suggestions not only on the content of the book but also on the process we use to educate the provider community.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>One PCOM member</b> suggested utilizing the Listserv to let providers know of new programs and that a new version of the workbook has been released.</li> <li>• <b>Suggestions made</b> – add information in the book explaining the claim development process and rural health carriers.</li>   <li>• <b>PCOM members suggested</b> – do not read to the audience, use examples, request questions before the seminar, more interaction/discussion, use both a powerpoint and a workbook, and do not allow Q&amp;A to get off topic. <b>Pete Scheller</b> will follow-up with optional dialogue for presenters.</li> <li>• <b>PCOM member suggested</b> offering programs close to the state borders to target</li> </ul>
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	<ul style="list-style-type: none"> <li>• Julie Christensen asked for suggestions for locations of seminars.</li>   <li>• A major topic of discussion amongst members was reducing the no-show rate since this has been an increasing issue in the last few years.</li> </ul>	<p>providers of both states and ask larger providers for use of their facilities to save on costs.</p> <ul style="list-style-type: none"> <li>• <b>PCOM members suggested</b> charging a nominal fee (suggestions ranged between \$15 - \$60) and providing a confirmation as well as a follow-up e-mail closer to the program date to reduce this problem.</li> </ul>
<p>Changes to the Appeals Process</p>	<ul style="list-style-type: none"> <li>• <b>Sue Brewer provided a short summary of the different changes made to the appeals process.</b> <ul style="list-style-type: none"> <li>○ Level II – Fair Hearings are now called Reconsiderations.</li> <li>○ New Independent Contractor – Qualified Independent Contractor (QIC) will process Reconsiderations effective 1/1/06 and after.</li> <li>○ January 2006 Communiqué has all the details of the changes.</li> <li>○ Telephone redeterminations are permitted until the end of April. Providers can only request a reopening based on clerical errors or omission by telephone for very simple issues (such as adding or changing a modifier). Reopenings that will create an overpayment cannot be done on the telephone. Providers should use the appeals telephone number to ask for a clerical error/omission reopening. Appeals staff will inform the provider if a reopening can be performed, and if not, they will inform the provider how to proceed in requesting an appeal in writing.</li> </ul> </li> </ul>	

	<ul style="list-style-type: none"> <li>○ Use the same telephone number that is currently used for telephone appeals. These numbers are published in the January Communiqué article and on the WPS Medicare website.</li> <li>○ New CMS Forms – Redeterminations – CMS-20027. Reconsiderations – CMS 20033.</li> </ul> <p>Note: These two forms look very similar, so be sure you use the correct form for the type of appeal you are requesting.</p> <ul style="list-style-type: none"> <li>○ There are no changes in the time limits for appeal request submission.</li> <li>○ As of 1/1/06, there will be no amount in controversy limit for Reconsiderations.</li> <li>○ The Administrative Law Judge amount in controversy is now \$110.</li> <li>○ The Judicial Review amount in controversy is now \$1090.</li> <li>○ There will be an Ask the Contractor teleconference offered by WPS on Wednesday, 3/15/06.</li> </ul>	
<p>CMS Directives – Updates</p>	<ul style="list-style-type: none"> <li>● <b>The following topics were briefly reviewed:</b> <ul style="list-style-type: none"> <li>○ <b>Medlearn Matters (MM 4215)</b> – Consultation Services Current Procedural Terminology (CPT) Codes 99241-99255</li> <li>○ <b>Medlearn Matters (MM 4246)</b> – Nursing Facility Services (Codes 99304-99318)</li> <li>○ <b>Change Request 4177</b> – Elimination of the Use of Surrogate UPINs (OTH-000) on Medicare Claims</li> <li>○ <b>Medlearn Matters (MM 4364)</b> – Therapy Caps Exception Process</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>● <b>A PCOM member</b> questioned a diagnosis code listed in CR 4364 that is not listed as covered in PHYSMED-009 (WPS Local Coverage Decision). <b>Julie Christensen</b> will follow-up with policy</li> </ul>

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Medicare Publications	<ul style="list-style-type: none"> <li>• On 2/9/06, the Deficit Reduction Act went into effect.</li> <li>• The new fees are available on the WPS Medicare Website.</li> </ul>	
Open Discussion	<ul style="list-style-type: none"> <li>• PCOM member brought up a question regarding an NPI vendor offering services to providers.</li> </ul>	<ul style="list-style-type: none"> <li>• <b>PCOM member</b> will follow-up with EDI for more information.</li> </ul>
<b>Next Meeting</b>	<ul style="list-style-type: none"> <li>• The next meeting is June 5, 2006 at Wisconsin Physicians Service in the Lower Level of the Nordby building.</li> </ul>	