

## Provider Communication Advisory Committee Minutes (PCOM)

Members: Mercy Health Systems, UW Health, Marshfield Clinic, Advanced Healthcare S.C., Agnesian Healthcare, Cvikota Company, Affinity Medical Group, EBIX Billing Service, General Medical Laboratories, Gundersen Lutheran, Medical College of Wisconsin, Mile Bluff Clinic

| Agenda Item               | Discussion   | Outcome/Action   |
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| Welcome and Introductions | <ul style="list-style-type: none"> <li>• The group was introduced to the new co-chair Amanda Bolger who was facilitating this meeting with Sharon Fletcher</li> <li>• The group discussed the new meeting location of WMS</li> <li>• Two new members were introduced. One was participating by telephone</li> <li>• Two special guests, one from UGS/Part A and the other from CMS regional office were introduced</li> </ul>  | N/A  |
| Approval of Minutes       | <ul style="list-style-type: none"> <li>• The group reviewed the minutes and there were no changes necessary</li> <li>• Outstanding issues               <ul style="list-style-type: none"> <li>• Communiqué articles on procedure codes 99211 and 99499</li> <li>• Adding CERT letters and information to the website</li> <li>• Publication of a chart showing visit codes and payable location of service</li> <li>• Consultation codes being denied in location 65. Members were informed that WPS system staff was working with CMS on this issue</li> </ul> </li> </ul> | Chairperson will check the possibility of <ul style="list-style-type: none"> <li>• Putting these articles on the website</li> <li>• adding the CERT letter to the website. A member will forward a copy to the chairperson</li> <li>• publishing the visit code chart</li> <li>• researching with the system staff determining resolution on POS 65</li> </ul> |
| Updates on                | The members were given the good news that WPS would  | Member's suggestions and concerns will be  |

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| C-SNAP  | <p>continue to offer the Internet Pilot, C-SNAP for another 6 months. Members were encouraged to register and also have their colleagues do the same. Some members stated they had problems with signing in or getting the information that would be useful to them. Each was given the correct person or area to contact. The members gave input on what was valuable and what changes should be made to C-SNAP. For those providers using C-SNAP, their telephone calls to customer service have been reduced by 50-60%.</p> | <p>shared with the appropriate persons. Members will continue to use the pilot program and provider feedback when necessary.</p>   |
| <p>CMS<br/>Presentation<br/>on Reform<br/>Legislation</p> | <p>Dolores S. Perteet, Manager, CMS<br/>Regional Office<br/>A slide presentation was given to explain the plans for implementation of the new drug program for qualified beneficiaries. Dolores explained the goals, the player's roles including CMS. Beneficiaries will choose a benefit card that will be used prior to the implementation of Medicare D, 1/1/06. CMS' role will be to educate, the enrollment process including verification, manage the price comparison and monitor and oversee all steps.</p>           | <p>Members were given a website address for further information and also names, telephone numbers and e-mail address of individuals at CMS that could answer any questions they may have. These will be available on the WPS Medicare website by the end of March.</p>   |
| <p>Updates</p>  | <p>Telephone Calls</p> <ul style="list-style-type: none"> <li>• Unprocessable</li> <li>• CO-16 does not always mean unprocessable, the claim must also have MA130 <ul style="list-style-type: none"> <li>• Denial Information is on the Provider Remittance Advice</li> </ul> </li> <li>• Medicare Secondary Payer <ul style="list-style-type: none"> <li>• MSP Manual</li> <li>• <a href="http://www.cms.hhs.gov/manuals/105_msp/default.asp">www.cms.hhs.gov/manuals/105_msp/default.asp</a></li> </ul> </li> </ul>          | <p>Members were asked to share information on how to understand why a claim was denied as unprocessable. All needed information is contained in their remittance advice.<br/>To help eliminate MSP calls relating to basic education, the members will utilize contacts and methods for disseminating information received through PCOM. Hopefully this will promote the use of the new MSP Internet-Only-Manual found on CMS website.</p> |

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|  | <p>Extended customer service hours</p> <ul style="list-style-type: none"> <li>• Effective 2/1/04 WPS has extended the hours that providers could contact customer service</li> </ul> <p>IVR/Customer Service toll free numbers in Spring 2004</p> <ul style="list-style-type: none"> <li>• IL and MI will soon have a new toll free telephone number to contact customer service. The current toll free telephone number will continue to be in effect for using the IVR. Now providers will have two different telephone numbers to contact the IVR and CS. This change will allow for many benefits when contacting each telephone area.</li> </ul> <p>National Beneficiary IVR</p> <ul style="list-style-type: none"> <li>• Effective this spring, Minnesota will be first, with our other states following close behind. When beneficiaries call customer service (same WPS telephone number), they will have a choice of talking with individuals at 1-800-Medicare. The carrier will continue to answer claim related questions. Therefore, the caller can choose to talk to the carrier by indicating this by using the voice-activated system – directions exist in the beneficiary handbook “Medicare &amp; You”. Callers can also be transferred to the carrier by 1-800-Medicare.</li> </ul> | <p>New customer services hours are available on the website. Members will share this information</p> <p>The new telephone numbers will be shared with member contacts that may provide services in these states</p> <p>As we get closer to this transition we will ask the members to help in making beneficiaries aware of this change to avoid confusion.</p> |
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|  | <p>Reasons for Appeals</p> <ul style="list-style-type: none"> <li>• Adding modifier 26 to many procedure codes</li> <li>• Adding modifier 76 to procedure code 88305</li> <li>• Adding modifiers 24 and 25 to E/M codes</li> <li>• Adding a payable diagnosis to procedure code 71010</li> </ul> | <p>Members were asked to review the charts given out and provide the chairperson suggestions for reducing these types of requests for review</p> |
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| <b>Agenda Item</b>                     | <b>Discussion</b>   | <b>Outcome/Action</b>   |
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| <p>Provider Educational Activities</p> | <p>Survey results on educational activities</p> <ul style="list-style-type: none"> <li>• The chairperson shared <ul style="list-style-type: none"> <li>• Ranking of suggested topics: Documentation was 1<sup>st</sup> followed by Top ten denials</li> <li>• Format for each session was; 1<sup>st</sup>-seminar, workshop, 2<sup>nd</sup>-web-based, 3<sup>rd</sup> - teleconference</li> <li>• Recommended length of each session was half-day</li> </ul> </li> </ul> <p>Distance Learning</p> <ul style="list-style-type: none"> <li>• WPS is in the process of developing a product that will allow visitors to our website to receive information through distance learning. Early thoughts of how this will take place were shared and discussed with the group.</li> </ul> <p>Seminar schedule</p> <ul style="list-style-type: none"> <li>• Finalization of the Outreach seminar schedule will be released through the website and Communiqué in 2 month increments</li> </ul> <p>E-Newsletter proposal</p> | <p>2004 seminars will be planned taking into account the information from this survey</p> <p>When the on-line-training piece is complete the members will be asked to look over the draft product and evaluate</p> <p>Members are encouraged to attend and encourage others to attend</p> |

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| <ul style="list-style-type: none"> <li>• A discussion took place on the pros and cons for providing the monthly Communiqué in a different format. It would be similar to the way the news articles are presented. This would allow providers to print just the articles that pertained to their facilities with printed the entire Communiqué.</li> <li>• One member indicated that she prints the entire Communiqué in order to meet with 30 employees to discuss content.</li> </ul> <p>CD-ROM</p> <ul style="list-style-type: none"> <li>• Results were shared from PCOM member surveys along with general provider surveys. The members were surveyed from a member and user prospective. 93% of providers found it easy to use and the majority thought we should do it again</li> </ul> <p>Ambulance CD-ROM</p> <ul style="list-style-type: none"> <li>• WPS created a CD-ROM containing polices, FAQ's, guidelines and other helpful information for ambulance</li> </ul> | <p>A decision was made not to pursue due to inability to print entire newsletter as one product.</p> <p>Based on the positive feedback, WPS will let CMS know that providers would like us to disseminate the fee schedule by CD-ROM next year</p> <ul style="list-style-type: none"> <li>• Issue: Many CPOM members' fellow - employees do not have a CD ROM on their computers.</li> <li>• Issue: Loading the information on a shared drive is not allowed by many companies</li> <li>• Issue: A suggestion was made that instead of putting the polices on the CD-ROM, which are available on the web, instead put common denials, issues or FAQ's about the policy topic.</li> </ul> |
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|                                 | suppliers. We are in the process of mailing these to all ambulance providers   | Members were given copies.  |
| Beneficiary Educational Updates | <p>Outreach Educational Efforts</p> <ul style="list-style-type: none"> <li>• We continue to update and add enhancements to the beneficiary portion of our website</li> <li>• Information on the flu shot and diabetes was disseminated through meals on wheels and ethnic newspapers</li> </ul>  | Members can send any suggestions to their chairperson   |
| Medical Review (LPET)           | <p>Podiatrist Comparative Billing Report (CBR) Pilot</p> <ul style="list-style-type: none"> <li>• WPS is moving forward with this initiative by inviting all podiatrists to sign up to receive a copy of their CBR</li> <li>• Requests will be taken up to 4/30/03</li> <li>• The form must be signed by the physician</li> <li>• WPS is considering offering this to the specialty of PT/OT next.</li> </ul>                            | <p>Copies of the request can be given to podiatrists only and require the provider's signature.</p> <p>Chairperson will pursue putting CBR state information on the website</p>   |
| Policy                          | <p>Local Coverage Determination</p> <ul style="list-style-type: none"> <li>• Information contained in a Communiqué article was shared and discussed with the group.</li> <li>• The LCD format is similar to the LMRP format. It will take up to 2 yrs to complete this process. Coding information will no longer be a part of the LCD. A discussion took place and suggestions were made on how to publish this information.</li> </ul> | <p>Members can look for the first coding and billing guideline articles in the March Communiqué</p> <p>The group suggested that we link to and from the policy to the coding guidelines articles.</p> <p>A member suggested that we determine a way to allow retired policeis to be on our website.</p> |
| EDI/HIPAA                       | <p>Medicare HIPAA Contingency Plan</p> <ul style="list-style-type: none"> <li>• CMS is moving forward with enforcing that all providers are compliant. Providers should not be submitting any paper claims. Around mid-year, CMS may enforce a 26-day payment floor to any providers who are not compliant.</li> <li>• EDI will assist provider in any situation to resolve</li> </ul>   | A member suggested that EDI post information prior to implementing a pre-pass edit and denying claims. This could be done through the bulletin board system   |

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|                 | submitting claims electronically.  |   |
| Financial./MSP  | <p>Medicare Secondary Payer</p> <ul style="list-style-type: none"> <li>The MSP area has identified a problem with MSP electronic claims. It seems that claims submitted by many different entities are submitting claims indicating the primary payers paid amount is more than the billed amount. These claims are denied</li> </ul>  | Members were asked to distribute this information in order to help us eliminate these denials   |
| Issues          | <p>Medlearn Matters</p> <ul style="list-style-type: none"> <li>Members were made aware of an encouraged to on a regular basis refer to a new area of CMS's website. CMS is now writing articles on topics that appear in a One Time Notice (OTN). This will allow the information to be communicated in a consistent manner. WPS will also be publishing these articles.</li> <li>Members were encouraged to sign up for the CMS list serv which will alert them when new articles are published</li> </ul> <p>CEU Follow-up</p> <ul style="list-style-type: none"> <li>During Outreach seminars, attendees are asking whether or not CEU's are being offered. We asked the membership to help us determine if this was something we wanted to pursue. Many of the members offered information on the process for getting our programs certified for CEUs. It is not a quick or easy process. Based on the number of requests we have received, it was determined that it was too costly.</li> </ul> | <p>Members will bookmark this new site and use it to educate.</p> <p>The members suggested that we provide information with each seminar on how an attendee could submit a copy of an agenda, turn it in and receive half the CEU's. The chairperson will look into this process.</p> |
| Open Discussion | <p>Meeting start time</p> <ul style="list-style-type: none"> <li>The chairperson made a suggestion to change the meeting start time. It appears that we are running out of time to cover all of the needed information on the agenda.</li> </ul>   | Effective with the June 04 meeting. We will gather for coffee and conversation between 9:00-9:30 and the meeting will be from 9:30 to 12:00   |



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|  | <p>on current problems. When a problem is discovered, many times it is only that entity that knows it is being worked on.</p> <ul style="list-style-type: none"> <li>• It was decided that there needs to be a place possibly on the website or maybe on C-SNAP where we could have “Morning News”. This feature could be viewed daily for any issues or concerns.</li> </ul> <p>ICD-9s and HCPCS codes</p> <ul style="list-style-type: none"> <li>• The members were reminded that about the elimination of the grace period for ICD-9s and HCPCS codes</li> <li>• A suggestion was made that all members bring a business card with them to the next meeting</li> </ul> | <p>Members will prepare with both internal staff and other peers for these changes</p> <p>Chairperson will remind members</p> |
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