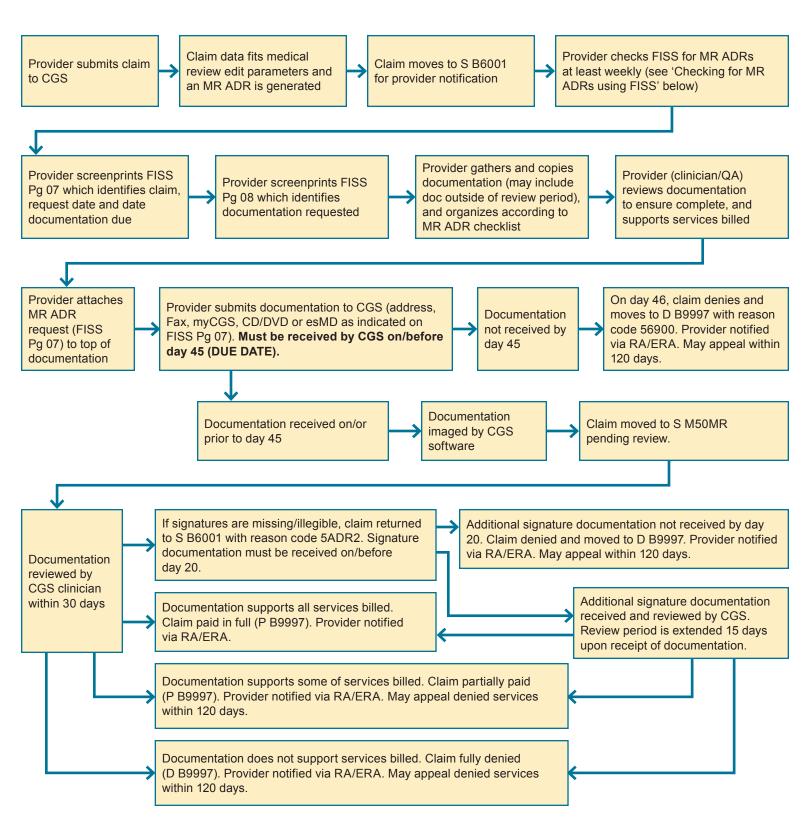
Medical Review Additional Development Request (MR ADR) Quick Resource Tool







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Checking for MR ADRs using FISS		
Step 1	Choose FISS Main Menu option 01 (Inquiries)	
Step 2	Choose FISS Inquiry Menu option 12 (Claims)	
Step 3	Press 'Shift' and 'Tab' to move to the NPI field and enter your NPI number	
Step 4	Tab to S/LOC field and enter 'S B6001'	
Step 5	Press Enter	
Step 6	MR ADR claims will appear (Reason Code 39700)	
Step 7	Select each MR ADR claim (key 'S' in SEL field)	
Step 8	Go to FISS Page 07 to view the MR ADR message. Press F6 to continue reviewing the message. Press F5 to return.	
Step 9	Screenprint FISS Page 07	
Step 10	Identify the data in the following fields: DUE DATE, MEDICARE ID, PATIENT NAME, FROM DATE and THRU DATE Note: The DUE DATE that appears is day 45. Allow enough time for CGS to receive the documentation by day 45. If not received by day 46, the claim will be denied.	
Step 11	Go to FISS Page 08	
Step 12	Screenprint FISS Page 08	
Step 13	On FISS Page 08, identify the documentation requested for the MR ADR. Note: You may need to press F6 to view all requested documents.	
Step 14	Copy/print requested documentation and arrange per preferred order on MR ADR checklist	
Step 15	Ensure internal QA process to review documentation is complete and mailed timely	
Step 16	Attach screenprint of FISS Page 07 to top of documentation. Mail to CGS (address shown on Page 07) by the DUE DATE (day 45). J15 — HHH Correspondence CGS PO Box 20014 Nashville, TN 37202 MR ADR documentation may also be submitted via fax (1.615.660.5981), myCGS, CD/DVD, or esMD. To respond to an MR ADR via myCGS, refer to the "myCGS MR ADR Job Aid" at http://www.cgsmedicare.com/hhh/pubs/news/2015/0415/cope28413.html	
Step 17	Monitor MR ADR in FISS, using option 12, to identify when documentation received by CGS (appears in S M50MR)	

ADR Process Resources

- Program Integrity Manual (CMS Pub. 100-08) Ch. 3 http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/pim83c03.pdf
- myCGS MR ADR Job Aid http://www.cgsmedicare.com/hhh/pubs/news/2015/0415/cope28413.html
- CMS Medicare Claim Review Programs: MR, NCCI Edits, MUEs, CERT, and RAC booklet - http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/MCRP Booklet.pdf
- FISS Guide, Chapter 3: Inquiry Menu, Accessing Additional Development Request Information section http://www.cgsmedicare.com/hhh/education/materials/pdf/chapter-3-inquiry-menu.pdf
- Medical Review Additional Development Request (ADR) Process Web page, http://www.cgsmedicare.com/hhh/medreview/adr_process.html
- Electronic Submission of Medical Documentation Web page, <u>https://www.cgsmedicare.com/hhh/medreview/ESMD.html</u>
- myCGS User Manual, Chapter 7: 'Forms' Tab https://www.cgsmedicare.com/pdf/mycgs/chapter7.pdf

Recommendations

- Review chart documentation prior to sending. Ensure documentation complete and supports all services/ levels of care billed. Documentation for dates before/ after the claim may be necessary to support services.
- CGS recommends organizing documentation according to the MR ADR Checklist below, which will expedite the review process.
- Ensure documentation is received by CGS on/ before 45 calendar days (DUE DATE on FISS Page 07). Please allow enough time for mailing, and movement of the claim to S M50MR. MR ADR documentation may also be submitted via fax (1.615.660.5981), myCGS, CD/DVD, or esMD.
- If claim is denied, review FISS Page 04 for Medical Review staff remarks to identify reason for denial.
- Review denial reasons and identify action plan to prevent further denials.
- Review, assess, and implement internal processes and plans to ensure staff understands the MR ADR process.
- Call the CGS Provider Contact Center (PCC) at 1.877.299.4500 (option 1) with questions about MR ADR process or denied claims.

Hos	Hospice MR ADR Checklist - Preferred Order	
1	FISS Page 7 screenprint	
2	Signed election statement	
3	Plan of care with physician certification/ recertifications	
4	Physician Face-to-Face documentation (for third and later benefit periods)	
5	Physician orders	
6	IDG reviews/POC updates Note: Include reviews for each 15-day period to cover the billing period. This may include reviews/updates that occurred prior to the billing period.	
7	Admission initial assessment	
8	Visit notes (nursing, social worker, chaplain, etc.)	
9	Physician visit notes	
10	Other relevant documentation	

	Home Health MR ADR Checklist - Preferred Order		
	1	FISS Page 7 screenprint	
	2	Physician Face-to-Face documentation	
	3	Plan of care with physician certification/ recertifications	
	4	Interim/verbal orders	
	5	OASIS assessment	
	6	Nursing visit notes	
	7	Therapy visit notes including evaluations/re-evaluations	
	8	Social work visit notes	
	9	Aide visit notes	
	10	Other relevant documentation	

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