JURISDICTION B & C DME MAC POE O&P

ADVISORY GROUP MEETING MINUTES

Meeting date and time: May 25, 2022, 12:00 - 1:00 p.m. ET

Facilitator: Judie Roan, JC POE Senior Analyst

Advisory Group Members: Danielle Sparks, Jane Talley,

Maggie Kling, Curt Bertram

Agenda

- I. Roll Call & Purpose
- II. Suggestions Last Meeting
- III. Updates and Changes
- IV. Educational Feedback
- V. Online Tools & Spotlight
- VI. Upcoming Events & 2022 Educational Planning
- VII. Feedback & Suggestions
- VIII. Open Discussion

I. Roll Call & Purpose

Judie welcomed the group, introduced new members, and then reviewed the purpose of the advisory group:

- The primary function of the Orthotics and Prosthetics (O&P)
 Provider Outreach and Education (POE) Advisory Group is
 to assist CGS in the creation, implementation, and review of
 provider education strategies and efforts.
- The advisory group provides input and feedback on training topics, educational materials, and dates and locations of provider education workshops and events.
- The group also identifies relevant provider educational issues and provides recommendations of how to effectively distribute the information to all appropriate suppliers and their staff.

II. Suggestions

Judie provided an update on the suggestions from the last meeting.

Suggestion: In myCGS, can the physician who ordered the item or the diagnosis code be added to items to assist with same and similar?

Response: This suggestion is in the process of being implemented. Checking same/similar for JB and JC at the same time is also in the process of being implemented.

Suggestion: Add pre-claim review for custom fitted and custom fabricated orthotics.

Response: CGS added the additional AFO/KAFO codes L1902, L1930, L4360 to CGS Connect. We are currently considering additional codes as well. Below is a list of all orthoses codes that are currently included in CGS Connect:

- Ankle Foot Orthosis & Knee Ankle Foot Orthosis (L1902, L1906, L1930, L1971, L4360, L4361, L4396, and L4397)
- Knee Orthoses (L1832 and L1833)

- Lumbar Sacral Orthoses (L0637 and L0650)
- Therapeutic Shoes for Persons with Diabetes (A5500, A5512, A5513, and A5514).

III. Updates & Changes

Judie provided information regarding the CMS announcement of the selection of certain lower limb orthoses, lumbar sacral orthoses, and power mobility devices to be subject to required prior authorization (PA), beginning April 13, 2022.

 CMS selected five orthoses HCPCS codes (L0648, L0650, L1832, L1833, and L1851) subject to required PA.

Implementation of this requirement will be completed in three phases:

- Phase one began April 13, 2022, in New York, Illinois, Florida, and California.
- Phase two begins July 12, 2022, in Maryland, Pennsylvania, New Jersey Michigan, Ohio, Kentucky, Texas, North Carolina, Georgia, Missouri, Arizona, and Washington.
- CGS will begin accepting PA requests for Phase 2 on June 28, 2022
- Phase three begins October 10, 2022, in all remaining states and territories.
- CGS will begin accepting PA requests for Phase 3 on September 26, 2022.

CGS has created web pages specific to prior authorization of orthoses located at:

- JB: Prior Authorization (https://www.cgsmedicare.com/jb/mr/condition-of-payment-prior-auth.html)
- JC: Prior Authorization (https://www.cgsmedicare.com/jc/mr/condition of payment prior auth.html)

Judie then reviewed the items that will require a face-to-face (F2F) encounter and written order prior to delivery (WOPD) as a condition of payment, effective April 13, 2022.

 Six orthosis codes - L0648, L0650, L1832, L1833, L1851, L3960

Judie reviewed that a practitioner visit is required within six months preceding the order.

- The encounter must be used to gather information associated with the condition for which the item is ordered.
- The F2F encounter must be documented in the medical record.
 - The supporting documentation must include subjective and objective, beneficiary-specific information used for diagnosing, treating, or managing a clinical condition for which the DMEPOS is ordered.
- If the encounter is performed via telehealth, the requirements for telehealth services (https://www.ecfr.gov/cgi-bin/text-idx ?SID=0633f2eef4266870a4b409e5f902380d&mc=true&nod





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<u>e=pt42.3.414&rgn=div5</u>) and payment for telehealth services (https://www.ecfr.gov/cgi-bin/text-idx?SID=0633f2eef426687 0a4b409e5f902380d&mc=true&node=pt42.3.414&rgn=div5) must be met.

 A supplier must maintain the written order and the supporting documentation must be available upon request. Additional information is available at https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medical-Review/FacetoFace-EncounterRequirementforCertainDurableMedicalEquipment.

Judie then also stated that information regarding the WOPD and F2F is available in the Article - Standard Documentation Requirements for All Claims Submitted to DME MACs (A55426) (https://www.cms.gov/medicare-coverage-database/view/article.aspx?articleid=55426)

IV. Educational Feedback & Online Tools

Judie asked if anyone attended webinars, workshops, association meetings, councils, or the Ask-the-Contractor Teleconferences (ACTs).

 Members stated that that numerous staff have attended workshops and webinars and stated they were very helpful.

Judie then asked if the members used any online tools.

Numerous members stated they use myCGS.

V. Online Tool Spotlight

Judie reviewed the Written Order Prior to Delivery Look-up tool in the spotlight and mentioned that it is currently our most popular tool:

- JB: Written Order Prior to Delivery Lookup Tool (https://www.cgsmedicare.com/medicare_dynamic/jb/wopd/wopd.aspx)
- JC: Written Order Prior to Delivery Lookup Tool (https://www.cgsmedicare.com/medicare_dynamic/jc/wopd/wopd.aspx)

Judie also provided information on additional online resources, including the Online Education Portal, recorded webinars, and "Listen & Learn" sessions. Judie asked for any feedback or suggestions.

VI. Upcoming Events & Educational Planning

Judie provided members with the upcoming webinar schedule through June. She then asked for suggestions and feedback for the educational plan for the rest of 2022.

VII. Feedback & Suggestions

Judie asked the group if they have feedback or suggestions regarding anything we have discussed or any other topics.

A member questioned the CO-206 rejection. Judie stated that we were currently working on the issue and additional information may be forthcoming.

A member asked about PA and non-contract suppliers providing competitive bid items to beneficiaries that reside in competitive bid areas. Judie stated there is information available in the Prior Authorization Process for Certain Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Items Operational Guide (https://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/Medicare-FFS-Compliance-

<u>Programs/DMEPOS/Downloads/Operational-Guide-for-DMEPOS-PA-current.pdf</u>) regarding the use of advance beneficiary notices (ABNs) with PA.

13.1 Advance Beneficiary Notice – If an applicable claim is submitted without a PA decision and is flagged as having an ABN, it will be stopped for additional documentation to be requested and a review of the ABN shall be performed (to determine the validity of the ABN) following Updated April 12, 2022, 34 standard claim review guidelines and timelines. The supplier should submit the claim with the GA modifier appended to it. The Contractor shall determine the validity of the ABN in accordance with standard ABN policies. (See IOM 100-04, Chapter 30, § 40).

She also stated that the ABN usage for non-contract suppliers has been in effect for quite a while.

Under 42 CFR §414.408(e)(3)(ii) when a noncontract supplier furnishes an item included in the Durable Medical Equipment, Prosthetic, Orthotics, and Supplies (DMEPOS) Competitive Bidding Program (CBP) for a Competitive Bidding Area (CBA). Although all other denial reasons triggering mandatory use of the ABN are found in §1879 of the Act, in this situation, §1847(b)(5)(D) of the Act permits use of the ABN with respect to these items and services.

Judie then asked if there were any suggestions or additional hot topics in the industry.

Suggestion: Is it possible to create groups of orthoses to avoid same/similar denials?

Suggestion: When checking claim history in myCGS, is it possible to reduce the number of data elements required?

Suggestion: When checking claim history in myCGS, is it possible to make the search default to 5 years when no dates are entered?

VIII. Open Discussion

Judie asked if there was anything for open discussion. The meeting was adjourned.