

# What's **NEW** in

CGS Administrators, LLC | January 2018



## Overall Payment Update and Misvalued Code Target

- The overall update to payments under the MPFS based on the finalized CY 2018 rates will be +0.41 percent
- This update reflects the +0.50 percent update established under the Medicare Access and CHIP Reauthorization Act (MACRA) of 2015, reduced by 0.09 percent, due to the Misvalued code target recapture amount, required under the Achieving a Better Life Experience (ABLE) Act of 2014.
- **CGS:** <https://www.cgsmedicare.com/partb/fees/index.html>
- **CMS:** <https://www.cms.gov/apps/physician-fee-schedule/overview.aspx>
- **Final Rule:**
  - <https://www.gpo.gov/fdsys/pkg/FR-2017-11-15/pdf/2017-23953.pdf>
  - <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Federal-Regulation-Notices-Items/CMS-1676-F.html>

## Physician Quality Reporting System (PQRS)

- 2016 was the last reporting period for PQRS
- PQRS payment adjustment:
  - Individual eligible professionals and group practices who did not satisfactorily report data on quality measures for the CY 2016 reporting period are subject to a downward payment adjustment of 2.0 percent in 2018 to their Physician Fee Services (PFS) covered professional services
- PQRS is being replaced by the Merit-based Incentive Payment System (MIPS) under the Quality Payment Program (QPP).
- Make inquiries regarding the PQRS negative payment adjustment to the Quality Net Help Desk at:
  - **Phone:** 1.866.288.8912
  - **TTY:** 1.877.715.6222
  - **Email:** [Qnetsupport@hcqis.org](mailto:Qnetsupport@hcqis.org)
- **PQRS:** <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/PQRS/Spotlight.html>

## Global Surgery Data Collection

<https://www.cms.gov/medicare/medicare-fee-for-service-payment/physicianfeesched/global-surgery-data-collection-.html>

As of January 1, 2018, there are some changes made to the list of codes for which reporting is required. These changes are made necessary by changes in the coding system.

- The following CPT codes no longer need to be reported: CPT codes 15732, 34802, and 34825 are deleted. Reporting is not required after December 31, 2017.
- CPT codes 30140, 36470, and 36471 have a 0-day global period so reporting is not needed.

- The 2018 list of codes <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/Downloads/CY-2018-Codes-for-Required-Global-Surgery-Reporting.zip> for which reporting is required on or after January 1, 2018 can be downloaded from the link above. Except for the changes noted above, the list is the same.

## Quality Payment Program Year 2: MIPS Highlights

- More Options for Small Practices
- Gradual Implementation
- Quality Payment Program Year 2: APM Highlights
- Better Coordination and Promoting Alignment
- Year 1 first MIPS performance period January through December 2017
  - CMS now has a new system to submit 2017 performance data by March 31, 2018. Details are available at <https://www.cms.gov/Medicare/Quality-Payment-Program/Resource-Library/QPP-2017-Data-Submission-Factsheet.pdf>.
- **QPP:** <https://www.cms.gov/Medicare/Quality-Payment-Program/Quality-Payment-Program.html>

## Increasing APM Participation: CMS is Taking Steps to Increase APM Participation

- Reducing Complexity
- **APM Lookup Tool:** <https://data.cms.gov/qplookup>
- **APM:** <https://qpp.cms.gov/apms/overview>
- For more information, go to: <https://qpp.cms.gov>

### Have Questions???

The Quality Payment Program Service Center can be reached at:

- 1.866.288.8292 (TTY 1.877.715.6222), Monday through Friday, 8:00 a.m.-8:00 p.m. Eastern time
- Email at: [QPP@cms.hhs.gov](mailto:QPP@cms.hhs.gov)
- Website: <https://www.cms.gov/Medicare/Quality-Payment-Program/resource-library/QPP-Year-2-Final-Rule-Fact-Sheet.pdf>

## Medicare Telehealth Services

### Elimination of the GT Modifier for Telehealth Services

- Effective January 1, 2018, the requirement to use the GT modifier on professional claims for telehealth services has been eliminated. Use of the telehealth POS code 02 certifies that the



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service meets the telehealth requirements (via interactive audio and video telecommunications systems). The GQ modifier is still required when applicable.

- Telehealth <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM10393.pdf>

## For CY 2018, CMS finalized the addition of several codes to the list of telehealth services, including:

- HCPCS code G0296 (visit to determine low dose computed tomography (LDCT) eligibility);
- CPT code 90785 (Interactive Complexity);
- CPT codes 96160 and 96161 (Health Risk Assessment);
- HCPCS code G0506 (Care Planning for Chronic Care Management); and
- CPT codes 90839 and 90840 (Psychotherapy for Crisis).

## Effective January 1, 2018 New HCPCS Modifier FY for Computed Radiography

- The FY modifier will be included in the 2018 Healthcare Common Procedure Coding System update.
- We will apply a 7 percent reduction to the MPFS amount for services billed with the
- FY modifier for dates of service January 1, 2018, through December 31, 2022, and a 10 percent reduction for dates of service January 1, 2023, and after.

## 2018 Medicare Parts A & B Premiums and Deductibles

- The standard monthly premium for Medicare Part B enrollees will be \$134 for 2018, the same amount as in 2017.
- The annual deductible for all Medicare Part B beneficiaries will be \$183 in 2018, the same annual deductible in 2017. Premiums and deductibles for Medicare Advantage and Medicare Prescription Drug plans are already finalized and are unaffected by this announcement.
- For additional details on Medicare Part A and B Premiums and Deductible visit: <https://www.cms.gov/Newsroom/MediaReleaseDatabase/Fact-sheets/2017-Fact-Sheet-items/2017-11-17.html>

## Effective January 1, 2018 Provider Enrollment Application Fee Amount

- 2018 Provider Enrollment Application Fee is \$569 for institutional providers that are:
  - Initially enrolling in the Medicare, Medicaid, or the Children's Health Insurance Program (CHIP);
  - Revalidating their Medicare, Medicaid, or CHIP enrollment; or
  - Adding a new Medicare practice location.
- This fee is required with any enrollment application submitted from January 1, 2018 through December 31, 2018.
- <https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/MedicareProviderSupEnroll/index.html>

## New Medicare Card Project Questions?

- What do the new Medicare cards mean for providers?
- What should providers do to get ready for the new Medicare cards and MBIs (Medicare Beneficiary Identifiers)?
- How will providers get patients' MBIs?
  - Register for the myCGS Web portal
  - <https://www.cgsmedicare.com/partb/mycgs/index.html>
- How you can help your patients?

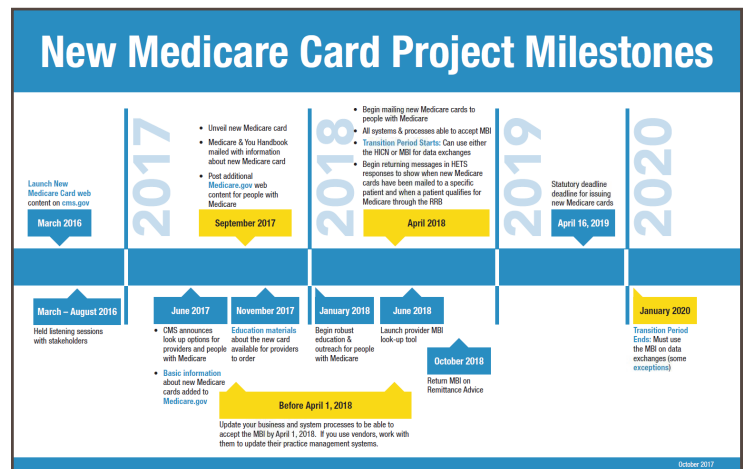
### You're Getting a New Medicare Card!

Medicare will mail new Medicare cards between April 2018 – April 2019. Your card will have a new Medicare Number instead of a Social Security Number.

Make sure your mailing address is up to date so you get your new card. Visit [ssa.gov/myaccount](https://ssa.gov/myaccount) or call 1-800-772-1213 (TTY: 1-800-325-0778) to correct your mailing address.

Visit [Medicare.gov](https://www.Medicare.gov) for the latest updates.

CMS Product No. 12006 August 2017



Visit: <https://www.cms.gov/Medicare/New-Medicare-Card/index.html>

To order posters and education material for staff and patients: <https://www.cms.gov/Medicare/New-Medicare-Card/Partners-and-Employers/Partners-and-employers.html>



## Targeted Probe and Educate (TPE) Process

CMS Implemented the Targeted Probe & Educate (TPE) process, effective October 1, 2017. Based on data analysis of claims payment, CGS will identify areas with the greatest risk of inappropriate program payment. Refer to the Medical Review Activity Log Web page at [https://www.cgsmedicare.com/partb/mr/activity\\_log.html](https://www.cgsmedicare.com/partb/mr/activity_log.html) for a list of Part B review topics. All service-specific reviews will be phased out.

**TPE Web page:** <https://cgsmedicare.com/partb/mr/tpe.html>

### Key Points

CGS selects providers for the TPE process based on the following:

- Analysis of billing data indicating aberrancies that may suggest questionable billing practices; or
- On targeted review and is transitioned to the TPE process based on error rate results; or
- On service specific review error rate results.
- CGS will mail a letter to those who have been selected for TPE review. The letter will outline the reason for selection, and will provide an overview of the TPE process and contact information.
- TPE consists of up to three rounds of review with up to 20-40 claims selected (pre or post payment) with each round. Subsequent rounds will begin 45-56 days after individual provider education is completed. Discontinuation of review may occur if appropriate improvement, and error rate below the target threshold is achieved during the review process.
- An Additional Document Request (ADR) will be generated for each claim selected. CGS has 30 days from the date the documentation is received to review the documentation, and make a payment decision.
- A letter with the review results will be mailed at the conclusion of each round. The letter will include the number of claims reviewed, the number of claims allowed in full, the number of claims denied in full or in part.
- Providers with a moderate to high error rate will be offered an individualized education session where each claim found in error will be discussed and any questions will be answered. CGS offers education sessions via webinar, web-based presentation, or traditional teleconferences. Other methods may also be available. Providers may also submit questions or request education via the Part B TPE email box at [J15BprobeandEducation@cgsadmin.com](mailto:J15BprobeandEducation@cgsadmin.com)

When high denial rates continue after 3 rounds of TPE, CGS will send a referral to CMS for additional action.

**Note:** No response to ADRs count as an error when calculating the error rate. CGS recommends using myCGS, our secure online Web portal to submit documentation in response to medical review ADRs. For additional information, refer to the myCGS User Manual Part B Chapter 7: Forms Tab at <https://www.cgsmedicare.com/pdf/mycgs/chapter7/partb.pdf> for instructions.

If you are not already registered to use myCGS, refer to the enrollment instructions found in Chapter 1 of the *myCGS User Manual* at <https://www.cgsmedicare.com/pdf/mycgs/chapter1.pdf>

## Resources

- **Change Request 10249:** <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2017Downloads/R1919OTN.pdf>
- **CMS Publication 100-02, Medicare Benefit Policy Manual:** <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs-Items/CMS012673.html?DLPage=1&DLEntries=10&DLSort=0&DLSortDir=ascending>
- **Additional Documentation Requests (ADRs):** What to Send: <https://www.cgsmedicare.com/partb/pubs/news/2014/1114/cope27375.html>
- **Targeted Probe and Educate Frequently Asked Questions:** [https://www.cgsmedicare.com/partb/faqs/tpe\\_faqs.html](https://www.cgsmedicare.com/partb/faqs/tpe_faqs.html)

## Additional CGS Resources

- **Education and Events:** <https://www.cgsmedicare.com/partb/education/index.html>
- **myCGS Updates:** <https://www.cgsmedicare.com/partb/mycgs/index.html>
- **Opt in/Opt Out Green Mail Options:** <https://www.cgsmedicare.com/articles/cope5235.html>

## CGS Go Mobile App Now Available!



### CGS is keeping you connected with our new CGS Go Mobile app!

With CGS GO Mobile, you can access and share our Dear Physician Letters, view and share the results of CGS Wizard inquiries, and more! Our new CGS Mobile app is available for both iOS (Apple) and Android phones and tablets. CGS GO Mobile makes it easier for supplier field service personnel to view and share important information!

- **Read CGS GO Mobile FAQs:** <https://www.cgsmedicare.com/jc/help/faqs/current/gomobile.html>
- To download CGS Go Mobile, just visit the
  - **Apple Store:** <https://itunes.apple.com/us/app/cgs-go-mobile/id918556619?ls=1&mt=8>
  - **Google Play Store:** <https://play.google.com/store/apps/details?id=com.cgs.android.cgsgomobile>