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DME MAC Status During the Coronavirus (COVID-19) Pandemic

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Noridian Healthcare Solutions and
CGS Administrators, LLC Cobranded Education



Disclaimer

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This presentation was prepared as a tool to assist providers and is not intended to grant rights or impose obligations. Although every reasonable effort has been made to assure the accuracy of the information within these pages, the ultimate responsibility for the correct submission of claims and response to any remittance advice lies with the provider of services.

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The information in this presentation is only applicable for the duration of the COVID-19 Public Health Emergency(PHE)

This presentation may not be recorded for any purpose.

- Noridian Medicare Website (<https://med.noridianmedicare.com>)
- CGS Medicare Website (<https://www.cgsmedicare.com>)
- CMS Website (<https://www.cms.gov>)

Agenda

- **Business Continuity**
- **Top Supplier Questions**
- **What we know**
 - Part B Drugs
 - Advanced Payment
 - Proof of Delivery
 - ABN Delivery
 - Medical Review
 - Condition of Payment Prior Authorization (COPPA)
 - Interim Final Rule with Comment Period
 - Telehealth
 - Oxygen
 - Appeals
 - Provider Enrollment
- **Resources**

Business Continuity

The DME MACs are open

DME MAC Business Continuity

Normal operations continue

- Contact centers are taking calls
- Claims are being processed
- Appeals are being processed
- Outreach and Education is available
- Websites are being updated

Supplier Questions Are Being Shared

The DME MACs are in communication with CMS

Top Questions Received

- DME MACs are forwarding questions to CMS daily
- Examples included:
 - In what instances can telehealth be used to meet the established requirements?
 - Examples: face-to-face encounters, evaluations, in-person visits and evaluations, custom fitting, monthly wound assessments, etc..
 - Interim Final Rule with Comment Period
 - Will nebulizers be covered for beneficiaries diagnosed with COVID-19?

What We Know

Part B Drugs

Requests for Prescription Drug Refills

- DME MACs allowed to make payment for greater than 30 day supply
 - Immunosuppressive drugs, oral anticancer drugs, and intravenous immune globulin (IVIG)
 - Effective for all Part B drug dates of service on or after March 1, 2020
 - Append the CR modifier to the HCPCS code
 - Enter “COVID-19” in the claim narrative

Part B Drugs (2)

March 19, 2020 Medical Director Joint Article published

- Billing of Part B Drugs to DME MACs During COVID-19 Pandemic – Dispensing Amounts
- Jurisdiction A: <https://med.noridianmedicare.com/web/jadme/topics/emergencies-disasters>
- Jurisdiction B: <https://www.cgsmedicare.com/jb/pubs/news/2020/03/cope16419.html>
- Jurisdiction C: <https://www.cgsmedicare.com/jc/pubs/news/2020/03/cope16419.html>
- Jurisdiction D: <https://med.noridianmedicare.com/web/jddme/topics/emergencies-disasters>

Advance Payment During Covid-19 Emergency

To increase cash flow to providers and suppliers impacted by the COVID-19 pandemic

- CMS expanded Advance Payment Program
- Expansion limited to duration of public health emergency
- Qualified suppliers asked to request specific amount
- Use Advance Payment Request form on your MAC website
- Most suppliers able to request up to 100% of Medicare payment for a three-month period

Advance Payment During Covid-19 Emergency ⁽²⁾

- Processing Time:
 - Each MAC to review and issue payments within seven (7) calendar days of receiving the request
- Repayment:
 - Part B suppliers will have 210 days from the date of the accelerated or advance payment was made to repay the balance
- <https://www.cms.gov/files/document/Accelerated-and-Advanced-Payments-Fact-Sheet.pdf>

Advance Payment During Covid-19 Emergency ⁽³⁾

Hotline numbers available for questions:

- **Jurisdiction A:** 1.866.575.4067
Hours of operation: Monday – Friday 8 a.m.- 6 p.m. CDT
- **Jurisdiction B:** 1.855.769.9920
Hours of operation: Monday – Friday 7 a.m. - 4 p.m. CDT
- **Jurisdiction C:** 1.855.769.9920
Hours of operation: Monday – Friday 7 a.m. - 5 p.m. CDT
- **Jurisdiction D:** 1.866.575.4067
Hours of operation: Monday – Friday 8 a.m.- 6 p.m. CDT
- Watch for updates on weekend hours

Proof Of Delivery (POD)

- **Question:** Is CMS waiving signature requirements on proof of delivery slips in response to the COVID-19 pandemic, for Dates of Service (DOS) within the PHE for the COVID-19 pandemic?
- **Answer:** Yes, given the nature of the pandemic and the inability to collect signatures during this time, CMS will not be enforcing the signature requirement. Typically, Part B drugs and certain Durable Medical Equipment (DME) covered by Medicare require proof of delivery and/or a beneficiary's signature. Suppliers should document in the medical record the appropriate date of delivery and that a signature was not able to be obtained because of COVID-19.
 - Additional clarification - Method 2 POD which is delivery via shipping or delivery service directly to a beneficiary Medicare does not require a signature only evidence of delivery is required

ABN Delivery

- Current notice delivery instructions provide flexibilities for delivering notices to beneficiaries in isolation.
 - Hard copies of notices may be dropped off by any hospital worker able to safely enter
 - Contact phone number provided for beneficiary questions
- When hard copy delivery not possible
 - Notices may be delivered via email if beneficiary has email access in isolation room
 - Notices should be annotated with circumstances of delivery
 - Who completed delivery
 - When and to where was the email sent
- Notices may be delivered via telephone or secure email to beneficiary representatives offsite

ABN Delivery (2)

- Notices should be annotated with circumstances of delivery
 - Person delivering notice via telephone
 - Time of call, or
 - Where and when the email was sent
- Review the specifics of notice delivery, as set forth in Chapter 30 of the Medicare Claims Processing Manual [https://www.cms.gov/media/137111 \(PDF\)](https://www.cms.gov/media/137111)
- **Note:** CMS-R-131 (Exp. 3/2020) remains valid until further notice
 - <https://www.cms.gov/Medicare/Medicare-General-Information/BNI/ABN>

Pre/Post Payment Medical Review

- CMS has suspended most Medicare Fee-For-Service (FFS) medical review during the emergency period due to the COVID-19 pandemic.
 - This includes pre-payment medical reviews conducted by Medicare Administrative Contractors (MACs) under the Targeted Probe and Educate program, and post-payment reviews conducted by the MACs, Supplemental Medical Review Contractor (SMRC) reviews, and Recovery Audit Contractor (RAC)
 - No additional documentation requests will be issued for the duration of the PHE for the COVID-19 pandemic
 - Current post payment MAC, SMRC, and RAC reviews will be suspended and released from review
 - This suspension of medical review activities is for the duration of the PHE
 - CMS may conduct medical reviews during or after the PHE if there is an indication of potential fraud.
- <https://www.cms.gov/files/document/provider-burden-relief-faqs.pdf>

Targeted Probe and Educate (TPE)

- Contractors directed by CMS to suspend all current TPE reviews
- Current selected claims to be released for payment
- Consideration given for supplier review when normal operations resume
- TPE education sessions for probes completed prior to the TPE suspension will continue to be offered; but, may be rescheduled or postponed at supplier request

Comprehensive Error Rate Testing (CERT)

- Effective immediately, CMS is exercising its enforcement discretion to adopt a temporary policy regarding the CERT Medicare program
 - CERT will not send documentation request letters to or conduct phone calls with suppliers to request medical documentation until further notice
 - Questions:
 - Contact the CERT Review Contractor at: 1.888.779.7477
 - <https://certprovider.admedcorp.com>

Condition of Payment Prior Authorization (COPPA)

- All condition of payment prior authorization requirements have been suspended during the COVID-19 public health emergency (PHE)
 - Suppliers for power mobility and PRSS established programs allowed to continue to seek prior authorization voluntarily
 - Claims submitted with a non-affirmation or by-passing prior authorization will require on initial and all subsequent rentals:
 - CR modifier to be appended
 - Narrative indicating “COVID-19”
 - Claims bypassing PA may be selected for post-payment review after the PHE has ended.
- Addition of lower limb prosthetics to Condition of Payment Prior Authorization delayed due to the PHE

Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency - IFC

- Allows waiver of face-to-face encounter requirements in NCDs, LCDs and Policy Articles
 - Does not waive face-to-face encounter for PMDs; however, does allow these to be accomplished via Medicare's "relaxed" telehealth requirements
 - Does not waive face-to-face encounter for the certifying statement for Therapeutic Shoes for Persons with Diabetes; this is a statutory requirement

Policy and Regulatory Revisions in Response to the COVID-19 Public Health Emergency - IFC ⁽²⁾

- DME MACs will not enforce the clinical indications for coverage across respiratory and infusion pump NCDs and LCDs (including articles). **This enforcement discretion will only apply during the PHE for the COVID-19 pandemic.** These policies include, but are not limited to:
 - NCD 240.2 Home Oxygen.
 - NCD 240.4 Continuous Positive Airway Pressure for Obstructive Sleep Apnea
 - LCD L33800 Respiratory Assist Devices (ventilators for home use)
 - NCD 240.5 Intrapulmonary Percussive Ventilator
 - LCD L33797 Oxygen and Oxygen Equipment (for home use)
 - NCD 280.14 Infusion Pumps
 - LCD L33794 External Infusion Pumps

Telehealth and Telemedicine

Telehealth and Telemedicine Tool Kit

<https://www.cms.gov/files/document/covid-19-nursing-home-telehealth-toolkit.pdf>

- Access broadened as a result of COVID-19
- Expanded access on temporary and emergency under 1135 waiver
- DOS starting March 6, 2020
- Three main types of visits
 - Medicare Telehealth visits
 - Only one applicable to DME – treated same as face-to-face for all policies
 - Applicable to both new and established beneficiaries
 - Virtual Check-In
 - E-visits

Telehealth and Telemedicine (2)

1135 Waiver Information

- Clinical indications for coverage suspended during Coronavirus pandemic
- Allow seniors access to their practitioners while limiting exposure to spread of the coronavirus
- Removes restriction for use in rural areas only (temporarily)
- Allows for use with beneficiary in their “home” (temporarily)
- Allows for “common office visits” without regard to diagnosis
 - Prevents unnecessarily entering health care facilities

Oxygen

- Will short term oxygen be covered for beneficiaries diagnosed with COVID-19?
 - Yes, CMS is exercising enforcement discretion to cover medically necessary home use of oxygen for patients diagnosed with COVID-19 during the emergency.
 - <https://www.cms.gov/files/document/03092020-covid-19-faqs-508.pdf>
- Are there special billing requirements?
 - Additional information will be provided by the DME MACs

Appeals

- Effective immediately, Medicare Administrative Contractors (MACs) that process appeals for beneficiaries, providers, and suppliers affected by COVID-19 shall exercise good cause in accordance with the regulations and follow the guidance in Internet Only Manual (IOM)
- Publication 100-04, Chapter 29, Section 240.4, Good Cause - Administrative Relief Following a Disaster
 - <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c29.pdf>

Waiver under §1135 or §1812(f) of the Social Security Act

Medicare Fee-for-Service (FFS) Response to the Public Health Emergency on the Coronavirus (COVID-19) SE20011

- Includes information on CR Modifier usage on claims under waiver
- Links to Q&As with a §1135 waiver or, when applicable, a §1812(f) waiver are posted and Q&As applicable without any §1135 or other formal waivers
- <https://www.cms.gov/files/document/se20011.pdf>

National Supplier Clearinghouse

Questions regarding hours of operation, closures, enrollment, supplier standards, etc.

- These questions should be referred to the National Supplier Clearinghouse (NSC)
 - <https://palmettogba.com/nsc>

Provider Enrollment

2019-Novel Coronavirus (COVID-19) Medicare Provider Enrollment Relief Frequently Asked Questions (FAQs)

- Expedited enrollment allows temporary billing privileges, waives the application fees, site-visits, and postpones revalidation actions
 - National Supplier Clearinghouse (NSC)
 - The Hotline Telephone Number: 1.866.238.9652 9:00 a.m. - 5:00 p.m. EST
 - 2019-Novel Coronavirus (COVID-19) Medicare Provider Enrollment Relief Frequently Asked Questions (FAQs)
 - <https://www.cms.gov/files/document/provider-enrollment-relief-faqs-covid-19.pdf>

Resources

CMS is your “one stop shop”

COVID-19 CMS Resources

- CMS Current Emergencies: <https://www.cms.gov/About-CMS/Agency-Information/Emergency/EPRO/Current-Emergencies/Current-Emergencies-page>
- Coronavirus Waivers & Flexibilities: <https://www.cms.gov/about-cms/emergency-preparedness-response-operations/current-emergencies/coronavirus-waivers>
- Telehealth Toolkit for General Practitioners: <https://www.cms.gov/files/document/general-telemedicine-toolkit.pdf>
- End-Stage Renal Disease Providers Toolkit : <https://www.cms.gov/files/document/esrd-provider-telehealth-telemedicine-toolkit.pdf>
- CMS FAQ: <https://www.cms.gov/files/document/provider-enrollment-relief-faqs-covid-19.pdf>
- Impact on Appeals: <https://www.cms.gov/files/document/covid19-emergency-declaration-health-care-providers-fact-sheet.pdf>
- White House COVID Taskforce updates: <https://www.coronavirus.gov/>

CGS and Noridian Healthcare Solutions COVID-19 Pages

- Includes DME MAC specific information including: Accelerated/Advance Payment, and answer to questions, and additional resources
 - Jurisdiction A: <https://med.noridianmedicare.com/web/jddme/topics/emergencies-disasters>
 - Jurisdiction B: <https://www.cgsmedicare.com/jb/covid-19.html>
 - Jurisdiction C: <https://www.cgsmedicare.com/jc/covid-19.html>
 - Jurisdiction D: <https://med.noridianmedicare.com/web/jddme/topics/emergencies-disasters>

Questions

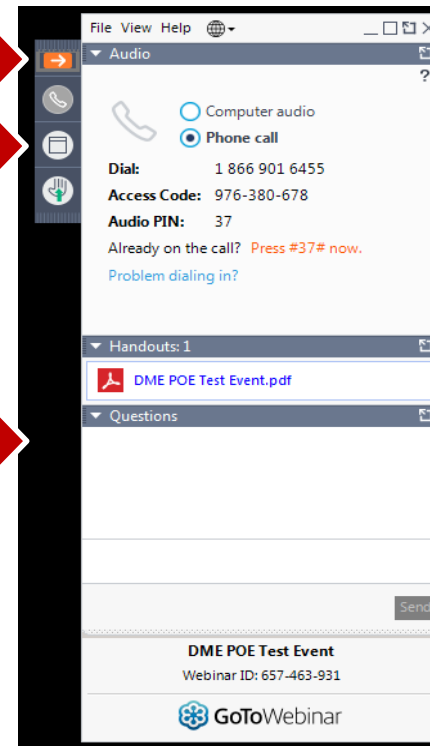
Please note that only written questions will be taken today in order to capture all questions and responses for future use.

Webinar Product Navigation

Open/Close the access panel

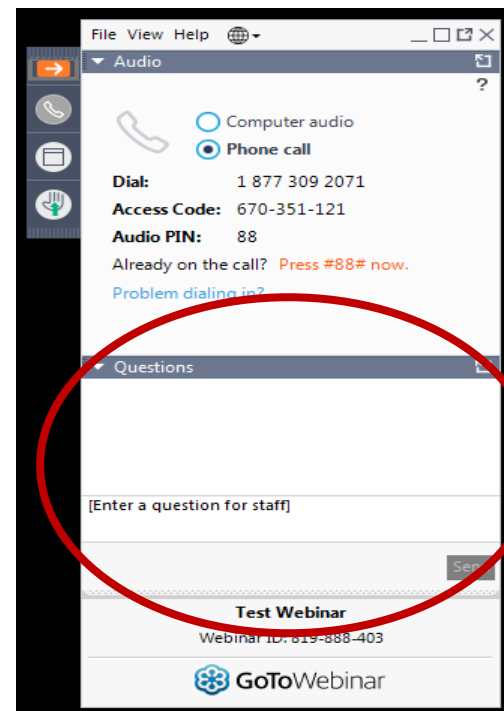
Full screen mode

Submit written questions



How to Ask a Written Question

- From the access panel
- Type your question into the Questions field
 - Be concise
- Click “Send”



Questions

If you have additional questions that are not previously submitted or captured in the top questions received slides please type them into the question panel.

CERTIFICATE *of Completion*

This is to certify that



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