Facilitator: Paul Zawicki

# Welcome / Updates

#### Paul Zawicki

Paul welcomed everyone to the call and introduced Gerry Nicholson, Director of the Provider Communications Group.

Gerry talked about outreach and DMEPOS Competitive Bidding. She wanted to be sure contractors were aware that CMS understood the contractors will be doing different types of outreach, and CMS will be holding a separate call with the DMEMAC contractors. For other programs with a population of primarily referral agents, outreach involves a more general understanding of the program and knowing the information they need to relay to the beneficiary. CMS will be supplying information to the contractors that have this important role to educate providers who will be acting as referral agents.

# **DMEPOS Competitive Bidding**

#### Valerie Haugen

Valerie introduced representatives from the Chronic Care Policy Group and the Competitive Bidding Implementation Contractor (CBIC) as experts available to answer questions.

**DMEMAC Jurisdiction D**: When will the PowerPoint presentation and speaker notes be available from the training?

**Shana**: They were sent yesterday on the contractor resources learning listserv.

**Valerie**: We will eventually post a PowerPoint presentation with speaker notes for public consumption, but we need to get the information together.

**CMS**: Are any of the contractors getting calls about the nature of the program?

**Cahaba**: We have not gotten calls. I know our Provider Outreach & Education group is working on it, and will educate us before the need for it, but up to this point we have not gotten anything.

First Coast: We have not received any calls yet.

**DMEMAC Jurisdiction B**: We have not received any calls yet.

**DMEMAC Jurisdiction C**: Most of what we are hearing is like "what happens if something happens" and there are questions about the validity or fairness of the bidding structure:

**DMEMAC Jurisdiction D**: We have also had a few calls per day on the CBIC.

**Shana**: In the JSM, we indicated we would have a special training for the DMEMAC contractors between today and May 22, but that will not happen because our policy experts are testifying to Congress, so we are trying to find a new time. If you let us know of any questions you receive, we can include them in the training. You can send your feedback to the Provider Services mailbox. The training session should be in late May or early June.

**Valerie:** We have three MLN Matters articles out, and other materials coming soon to help you with your outreach.

**Shana**: CR5978 was released and is available on the web site. It provides good background information on the program.

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**DMEMAC Jurisdiction C:** We have been getting a few calls from suppliers about how this will affect them. They are confused and want a bit more clarification.

**Shana**: That may be because the list of winning suppliers has not been announced yet. Once that list is out, that might help you.

**CBIC**: The IOM chapter released has good information on what to do as a grandfathered supplier. It has new information not contained in the articles.

#### **Provider Authentication**

# Patricia Snyder / Shana Olshan

Shana opened with an NPI update and asked contractors to continue to report volume on a weekly basis. For spikes in call volume, Shana asked contractors to please send an email to the Provider Services mailbox immediately. CMS did send out a JSM regarding authentication, and did receive some questions.

Emily received a number of questions, and waited to respond on PCUG. CMS realizes there are discrepancies in the manuals and between the manuals and the JSM. The JSM directs authentication using NPI and PTAN. In the Manual, Chapter 6 uses provider name and NPI in one place; however, in another it uses PTAN and NPI. To be clear, authenticate using NPI and PTAN beginning May 23. The manual and desk reference will be corrected.

**First Coast**: In relation to the JSM, if a provider does not have an NPI and they had billed with just their PTAN, should we follow the guidelines in the JSM? Do we apply the same rules?

**Shana**: Do you think this will be a common situation?

**First Coast**: No. We have some providers who have chosen not to get an NPI.

**Shana**: It will have to go to a CSR and you will have to authenticate on other elements.

**First Coast**: We are putting together some scripts for CSRs to address pushing providers back when we know they have an NPI.

**Shana**: If any of you begin to see a trend, please let us know.

**WPS**: We are already dealing with this issue in claims processing. There are also situations with change of ownership, where the new owner took over and did not own the prior PTAN.

**Shana**: Are you already seeing this at your site?

**WPS**: Yes, because we switched over in January for Part A.

Patty let callers know CMS held a workgroup and decided providers would give the last five digits of the tax ID number. The original plan was to use NPI and PTAN, but they are both available to the public through the Freedom of Information Act. Contractors can expect to see a new draft CR for comment before the end of May. Shana commented this will require systems changes, so the earliest it could be put in would be January, and there is no guarantee it would be in then. CMS believes contractors would need two months to test it in their IVRs, so that would

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target March 2009 at the earliest. Contractors should consider the funding impact for changes and work with their vendors.

**Noridian**: We are already seeing the issue where providers do not know what their PTANs are on their remittance advice. Right now we are coming up with a script for CSRs to respond and they will need to find out what the PTANs are. The issue is coming from a larger billing company.

**Nancy Strong**: We are also receiving those calls, and the calls are extremely long in those cases. In cases where we know a call has dropped from the IVR because it was not a match on NPI and PTAN, what should we use?

**Shana**: You need to use at least two additional elements beyond NPI and PTAN, and because you would not have a match, you would use the two other elements.

**Nancy Strong**: Because they say they could not get the information, we would ask for a tax ID or remittance address or two other elements.

Shana: Right.

**WPS**: As an authentication, they have to have an NPI and at least one PTAN, not necessarily the one for the transaction. I believe how MCS built the AIUP transaction is that it looks under the original PTAN, and if it is not there, another PTAN can be used.

**Shana**: Correct, but we are talking about the smaller case where there is not a match in the crosswalk file. We are hoping there are very few cases.

# **Telephone Update**

#### Paul Zawicki

AB MAC call volume was still being compiled at the time of the call, so AB MAC call volume was not available. Paul reviewed the April call volume for programs that were available (all numbers are approximate) – FI: 450,000 attempts and 420,000 completions, Carrier: 4.1 million attempts and 3.6 million completions, DME MAC: 890,000 attempts and 860,000 completions, and RHHI: 68,000 attempts and 61,000 completions.

## **QCM Update**

## **Emily Norment / Amy Abel-Matkins**

CMS encountered a situation in QCM where a contractor was scoring conversations between Level I and Level II CSRs instead of between the CSRs and the providers. Are other contractors doing this?

First Coast: We do not score our CSRs on conversations they have with Tier II staff.

Cahaba: We do not.

**NGS**: We no longer do that, but we used to. When a Tier I CSR would call a Tier II CSR, we wanted to be sure that CSR was getting accurate information. If the Tier II representative gave

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inaccurate information, the Tier II representative would be scored down. We did enter them in the QCM database.

**Emily**: And they would count as part of the three cards for the CSR?

NGS: Yes.

TrailBlazer: We do not score calls between CSRs.

CMS would like to make it clear that calls between CSRs are not to be scored in QCM. QCM is for the calls between CSRs and providers. Also, as a reminder, the calibration call will be held on May 21st at 1:30 PM (Eastern).

## **Monitoring Update**

### **Lisandra Torres Guzman**

Lisandra covered the most recent trends in callbacks. The CSR has the opportunity to callback once, so we will not be giving credit for calling back multiple times. The first callback answer is the response we will keep on file. We do not have a mechanism to change the CSR answers. We will not allow corrections to the records. The other issue is related to when quality monitors call and the CSR opens the call, but the call is transferred and dropped. There are some cases where we are not sure if the drop is accidental. There are circumstances where we feel the CSR has opened the record, and if the call is dropped they should call back. We are currently considering this option.

Relative to the most common errors, we are seeing a decrease in the errors related to incorrect URLs, so that is good.

**First Coast**: It sounds like some contractors are using Tier II staff to answer CMS questions. I thought these were questions directed to Tier I staff.

**Shana**: We have not said it is limited to Level I. Contractors can use their triage process as they need to, but we like when the Level I CSRs are used.

#### **Inquiry Tracking**

#### **Lisandra Torres Guzman**

Related to the Inquiry Tracking Summary sent for FY2007, most of the top ten significant issues went down after the second quarter. Coding errors (modifiers) and duplicate claims are becoming pretty big. Most of the coding errors are related to modifiers. Most of the errors seem to be related to the CCI, so that may be something you want to bring to your providers not using the appropriate level of specificity. Regarding duplicate claims, the two areas are with the same date of service and previously paid claims. There seems to be confusion where it is not clear when the provider needs to resubmit the claim or call to make an adjustment or make an appeal.

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# **Open Forum/Questions, Answers, or Comments**

Shana opened the forum with a comment that at least one call center has been receiving calls from OIG, and they were unaware of this. Shana was curious if anyone was receiving calls from OIG, and if so, what were they being asked.

**DMEMAC Jurisdiction C**: We did receive a few calls, and one of the questions was "who is your supervisor, and who is their supervisor, and who is theirs".

**Shana**: That is helpful, thank you.

Amy asked if the contractors had feedback on using the new PCID database to enter their information. She also notified the contractors she had entered information from the prior quarter.

**NGS**: Is the NPI/PTAN JSM for all contract types?

Shana: Yes.

The next PCUG call is scheduled for June 11, 2008, from 2:00pm - 3:30pm, EST. The conference dial-in number is 800-857-2655. The authorization code is PCUG.

The Provider Services mailbox is: providerservices@cms.hhs.gov.