CMS Manual System

Pub 100-20 One-Time Notification

Transmittal 206

Department of Health & Human Services (DHHS)

Centers for Medicare & Medicaid Services (CMS)

Date: FEBRUARY 1, 2006 Change Request 4138

SUBJECT: Modifications/Additions to CR 3730, Frequent Hemodialysis Network (FHN) Payments for Approved Clinical Trial Costs

I. SUMMARY OF CHANGES: CMS is jointly sponsoring two clinical trials evaluating the benefits of more frequent hemodialysis with the National Institute of Diabetes and Digestive and Kidney Diseases. One of these trials compares conventional, thrice weekly hemodialysis to 6-times per week hemodialysis in a dialysis center and the other compares conventional, thrice weekly in-center hemodialysis to 6-times per week nocturnal hemodialysis performed at home. For Medicare beneficiaries enrolled in the experimental arm (more frequent dialysis) of these trials, CMS authorizes payment for one additional composite rate per week for the duration of the trial. The duration of the daily in-center hemodialysis trial will be 12 months after patient enrollment. The duration of the nocturnal hemodialysis trial will be 14 months after patient enrollment. For patients enrolled in the experimental arm of the nocturnal hemodialysis trial, CMS also authorizes additional home dialysis training payment at the composite payment rate plus \$20 for each training session incurred up to a maximum of 30 training session payments per patient.

NEW/REVISED MATERIAL

EFFECTIVE DATE: February 1, 2006

IMPLEMENTATION DATE: March 3, 2006

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R = REVISED, N = NEW, D = DELETED

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
N/A	

III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2006 operating budgets.

IV. ATTACHMENTS:

One-Time Notification

*Unless otherwise specified, the effective date is the date of service.

Attachment – One-Time Notification

Pub. 100-20 Transmittal: 206 Date: February 1, 2006 Change Request 4138

SUBJECT: Modifications/Additions to CR 3730, Frequent Hemodialysis Network (FHN) Payments for Approved Clinical Trial Costs

I. GENERAL INFORMATION

A. Background: The Centers for Medicare and Medicaid Services (CMS) is jointly sponsoring with the National Institute of Diabetes and Digestive and Kidney Diseases (NIDDK) two clinical trials to evaluate the effectiveness of more frequent hemodialysis sessions compared with conventional thrice-weekly hemodialysis. One of these trials compares daily in-center hemodialysis (6 times per week) with conventional in-center hemodialysis (3-times per week). The other compares nocturnal hemodialysis (6 times per week in the home) with conventional in-center hemodialysis. CMS has agreed to pay for covered patient care-related expenses for Medicare beneficiaries enrolled in these trials. For patients enrolled in the experimental arms of these trials (more frequent in-center or nocturnal hemodialysis), CMS also authorizes payment for one additional composite for the duration of the trial. The duration of the daily in-center hemodialysis trial will be 12 months after patient enrollment. The duration of the nocturnal hemodialysis trial will be 14 months after patient enrollment. For patients enrolled in the experimental arm of the nocturnal hemodialysis trial, CMS also authorizes additional home dialysis training payment at the composite payment rate plus \$20 for each training session incurred not to exceed 30 training session payments per patient. The standard Medicare deductibles and co-payments will apply to both composite rate payments and training session payments.

B. Policy: Authority to enter into this agreement is contained in Section 601 of the Economy Act of 1932 as amended (31 USC 1535). CMS' program authority is CFR 42 USC 1310. The program authority for NIDDK is the Economy Act, as amended (31 USC 1535).

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement

"Should" denotes an optional requirement

Requirement	Requirements	Responsibility ("X" indicates the							
Number		co	lum	ns 1	that	app	ly)		
		F I	R H H I	C a r r i e r	D M E R C	Shar Mai F I S		•	Other
4138.1	The FIs shall collect attestation forms from provider demonstration sites for all beneficiaries qualified and enrolled in the ESRD Daily Trial. This requirement is the same	X							Provider Demonstration Sites

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
Number		F I	R H H	C a r	D M E	Shared System			Other	
			Ι	r i e r	R C	I S S	C S	M S	W F	
	as requirement 3730.1 in CR 3730 but this addendum includes updated attestation forms - attachments 1 and 2.									
4138.2	The FIs shall instruct the provider demonstration site (attachment 3 lists participating facilities as of CR submission – an up to date list can be found at http://www.cms.hhs.gov/DemoProjectsEvalRpts/downloads/FHN List of Facilities.pdf) to populate Form Locator (FL) 63 or the 837I equivalent on the 72X Type of Bill (TOB) with "Trial 49" for dialysis services provided to the trial beneficiaries. This requirement modifies requirement 3730.2 in CR 3730 to include the Web site with the most up to date list of participating facilities.	X								Provider Demonstration Sites
4138.2.1	The FIs shall consult the list of provider demonstration sites on CMS' Web site at http://www.cms.hhs.gov/DemoProjectsEvalRpts/downloads/FHN List of Facilities.pdf to ensure that facilities billing for "Trial 49" participate in the ESRD Daily Trial. This is a new requirement to support requirement 3730.2 in CR 3730.	X								
4138.2.2	The FIs shall reprocess claims for payment, with Trial 49 populated in FL 63, for any partial-month claims submitted after the effective date and before the implementation date of this change request. This is a new requirement to support requirement 3730.2 in CR 3730.	X								

III. PROVIDER EDUCATION

Requirement	Requirements	Re	espo	nsi	bilit	ty ("	X" :	indi	cate	es the
Number		columns that apply)								
		F I	R H H I	C a r r i e	D M E R C		mtain M C S	Systemers V M S	C W F	Other
4138.3	Contractors shall post this entire instruction, or a direct link to this instruction, on their Web site and include information about it in a listserv message within 1 week of the release of this instruction. In addition, the entire instruction must be included in your next regularly scheduled bulletin and incorporated into any educational events on this topic.	X		r						

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: February 1, 2006

Implementation Date: March 3, 2006

Pre-Implementation Contact(s): Brady Augustine

e-mail: brady.augustine@cms.hhs.gov

telephone: 410-786-5323

Post-Implementation Contact(s): Regional

Offices

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2006 operating budgets.

3 Attachments

^{*}Unless otherwise specified, the effective date is the date of service.

ATTACHMENT 1

FREQUENT HEMODIALYSIS NETWORK (FHN) NOCTURNAL HEMODIALYSIS ATTESTATION FORM

I hereby attest that the patients listed below have been enrolled in the Centers for Medicare and Medicaid Services (CMS) and National Institute of Diabetes and Digestive and Kidney Disorders (NIDDK) FHN clinical trial (Trial 49) in the nocturnal hemodialysis arm. I also attest these patients are Medicare-eligible and qualify for Medicare payments for their hemodialysis treatments. Their enrollment in the nocturnal hemodialysis arm of this trial qualifies them for up to 4 hemodialysis composite rate payments per week for up to 14 months after enrollment (projected disenrollment date). In addition, these payments qualify for a maximum number of dialysis composite rates with Condition Code 73 present for training to be billed at 4 hemodialysis training session composite rates per week up to a maximum of 30 training session payments. I will include "Trial 49" on Form Locator 63 or the 837I equivalent on the 72X Type of Bill for hemodialysis services provided to the trial beneficiaries.

	Patient name	HIC number	Enrollment date	Projected disenrollment date
C	hief executive officer			
F	acility name			
C	MS Provider ID			
D	ate			

ATTACHMENT 2

FREQUENT HEMODIALYSIS NETWORK (FHN) DAILY IN-CENTER HEMODIALYSIS ATTESTATION FORM

I hereby attest that the patients listed below have been enrolled in the Centers for Medicare and Medicaid Services (CMS) and National Institute of Diabetes and Digestive and Kidney Disorders (NIDDK) FHN clinical trial (Trial 49) in the daily in-center hemodialysis arm. I also attest these patients are Medicare-eligible and qualify for Medicare payments for their hemodialysis treatments. Their enrollment in the more frequent dialysis arm of this trial qualifies them for up to 4 hemodialysis composite rate payments per week for up to 12 months after enrollment (projected disenrollment date). I will include "Trial 49" on Form Locator 63 or the 837I equivalent on the 72X Type of Bill for dialysis services provided to the trial beneficiaries.

Patient name	HIC number	Enrollment date	Projected disenrollment date
Chief executive officer			
Facility name			
CMS Provider ID			
 Date			

Attachment 3: P	l's Centers, Core Centers, Participating Di	alysis Units for the Frequent Hemodialysis Network	(
	Data through Friday, August 19, 2005	* Indicates location of MRI imaging sites	
Clinical Center Consortium Center #, name	Core Center Number	Participating Dialysis Unit Number and CMS Provide	
Center #1 RRI, Dr. Levin	Core Centers	Participating Dialysis Units	CMS Provider Number
(DAILY)	11: RRI New York City	1101 Harlem Dialysis Center 1102 City Dialysis Center-Midtown Manhattan	332564 332524
	*5 MRI sites in NYC	1103 Nephrocare, Inc. 1104 Southern Manhattan Dialysis Center	332534 332530
	Martin Kuhlmann, M.D.	1105 Mt. Sinai Dialysis Centers (Joseph Vassalotti) 1105 Mt. Sinai Dialysis Centers (Joseph Vassalotti) 1106 Queens Artificial Kidney Center 1107 South Queens Dialysis Center	330024 333511 332517 332531
		1108 Yorkville Dialysis Center 1109 Place Dialysis Center 1110 Upper Manhattan Dialysis Center	333506 333524 333539
	12: London, Ontario Robert Lindsay, MD	1201 LHSC - WC (Westminster Campus) 1202 LHSC - SSC (South Street Campus) 1203 LHSC - UC (University Campus) 1204 LHSC - LS (London Satellite)	Canada N/A
	13 RRI CT	1301 Branford 1302 Milford	072522 072513
	Fredrick Finkelstein, MD	1303 St. Raphael	072512
	14 RRI Michigan	1401 Ann Arbor (Rajiv Saran) 1402 Livonia	232576 232577
	Joseph Messana, MD		
	15 – RRI Rochester,	1501 Finger Lakes 1502 Highlands Living Center	332631 332630
	Strong Health Dialysis Jeremy G. Taylor, MD	1503 Clinton Crossing 1504 Strong Memorial Hospital 1505 Highlands SelfCare	332629 332626 332628
	16 RRI NC, Carolina Dialysis *1 MRI site at UNC Philip Klemmer, MD	1601 Carrboro 1602 Sanford	342622 342620

	17 RRI Missouri Brent Miller, MD	1701 Chromalloy American Kidney Center	
0 / "0 11005	,		l
Center #2, UCSF, Dr.	24. Can Francisco Maria Conomo	2101 UCSF-Mt. Zion (adult)	053523
Chertow	21: San Francisco, Marin, Sonoma,	2102 UCSF (pediatrics)	053501
	Contra Costa	2103 San Francisco General	052813
(DAILY)		2104 CPMC Pacific	050047
	Glenn Chertow, MD	2105 CPMC Davis	050008
	,	2106 Kaiser San Francisco	050076
	*Will have all MRIs at UCSF Medical	2107 Davita Ocean Garden	052728
	Center	2108 Davita Community (Haight)	052507
		2109 Davita Potrero Hill	052775
		2110 Gambro San Francisco	052719
		2111 Gambro Chinatown	052769
		2112 Satellite Larkspur	052526
		2113 Satellite Santa Rosa	052630
		2114 Davita Antioch	052841
		2115 Davita Walnut Creek	052689
		2123 Gambro Daly City	052546
		, ,	
	22: Sacramento	2201 DCI University	052676
	22. Sacramento	2202 DCI Southgate	052711
	Tom Donner MD	2203 DCI Madison	052796
	Tom Depner, MD	2204 DCI Rancho Cordova	052774
	OO. Baninavila Catallita	2301 El Camino Hospital	050308
	23: Peninsula, Satellite	2302 Satellite Redwood City	052793
		2303 Satellite Sunnyvale	052870
	George Ting, MD	2304 El Camino Rose Garden	053520
		2305 El Camino Evergreen	053514
	*Will have all MRIs at UCSF Medical	2306 Satellite San Jose (East)	052572
	Center	2307 Satellite San Jose (South)	052600
		2308 Satellite San Jose (West)	052514
		2309 Satellite Santa Cruz	052555
		2310 Satellite Watsonville	052629
		2311 Satellite Gilroy	052751
		2312 Satellite Modesto	052531
		2313 Satellite Sonora	052609
		2314 Satellite Turlock	052647
		2315 Satellite Windsor	052887

			0-4
	24: Los Angeles	2401 UCLA Medical Center (adult)	052865
	21. 200 / (ligolog	2402 UCLA Medical Center (pediatrics)	052865
		2403 UC Irvine Medical Center	052589
	Allen Nissenson, MD	2404 Davita Hollywood	052801
		2405 Davita Valley Dialysis	052554
	UCLA Med Center (Adult) will be the	2406 Davita Beverly Hills	052599
	site of all MRIs for this core.	2407 Davita Los Angeles	052695
		2408 South Valley Regional	052744
		2409 USC Medical Center	052794
	OF, Can Diago	2501 UCSD Medical Center (adult)	052818
	25: San Diego	2502 UCSD Medical Center (pediatrics)	052818
		2503 San Diego VA Medical Center	05114F
	Ravindra Mehta, MD	2504 Davita Mission Dialysis	052779
		2505 Davita Chula Vista	052835
	UCSD Medical Centers (2501 and 2502)	2506 Davita Oceanside	052834
	will be the site of all MRIs for this core	2507 Gambro Chula Vista	052731
	Will be the one of all white for the core	2508 Gambro Encintas	052756
		2510 Gambro Escondido	052525
0			"
Center #3, Wake	31: Barnes-Jewish/Washington University	3101 Barnes-Jewish	262565
Forest,	32: Indiana University	3201 Indiana University	153510
Dr. Michael	33 Kidney Associates KC	3301 DCI Kansas City	262517
Rocco, M.D.	34: Lynchburg Nephrology	3401 Lynchburg Nephrology	202017
(Nocturnal)	o i. Lynonbarg Nopiliology	- o to t Lyttoributy (topinology	
		UVA Amherst Dialysis	493512
		UVA Lynchburg Dialysis	493513
		UVA Page Dialysis	493511
		UVA Augusta Dialysis	493509
		UVA Renal Services (hospital)	490009
		UVA Renal Services (dialysis)	492301
		UVA Orange Dialysis	493507
		UVA Zions Crossroad Dialysis	493505
	36: Rubin Dialysis	3601 Clifton Park	332632
	*1 MRI site	3602 Saratoga Springs (Rubin Dialysis)	332557
	37: U of Iowa	3701 University of Iowa	160058
	38: U of Toronto		Canada
	30. U UI TUTUTILU	3801 U of Toronto	
	20. H of Vancouner	3802 Humber River Regional Hospital	NA
	39: U of Vancouver	3901 SPH – Vancouver	Canada
	Vancouver General Hospital will be the	3902 VGH - Vancouver	NA
	site for all MRIs for this core	3903 Fraser - Royal Columbian	
		3904 Vancouver Island - Royal Jubilee	

40: U of W Ontario	4001 LHSC - WC (Westminster Campus) 4002 LHSC - SSC (South Street Campus) 4003 LHSC - UC (University Campus) 4004 LHSC - LS (London Satellite)	Canada NA
41: Wake Forest University	4101 Piedmont Dialysis Center 4102 Salem Dialysis 4103 Northside Dialysis	342505 On hold On hold