

CENTERS FOR MEDICARE AND MEDICAID SERVICES (CMS)

Rosella Norris, Region IX
CMS Native American Contact
Consortium for Division of
Financial Management and
Fee-for-Service Operations
March 24, 2010–IHS Partnership



CMS ORGANIZATION

- CMS Consortium Administrator
- CMS Tribal Affairs Group Director
- CMS Native American Contacts
- CMS Tribal-Technical Advisory Group
- Indian Health Service (IHS)
- National Indian Health Board (NIHB)
- National Congress of American Indians (NCAI)
- Tribal Self-Governance Advisory Committee
- Urban Indian Health Organization

SOCIAL SECURITY ADMINISTRATION (SSA)

Medicare Eligibility and Enrollment

- SSA makes Medicare entitlement decisions
- SSA creates and Maintains Master Beneficiary Records
- SSA withholds Part B premium from S-Security check
- SSA and CMS handles premium notices
- SSA makes Low-Income Subsidy Part D determination
- SSA makes determinations on income-related premium
- SSA toll-free 1-800-772-1213 or www.socialsecurity.gov

RAILROAD RETIREMENT BOARD (RRB)

Railroad Medicare Beneficiaries

- RRB enrolls its Part A and Part B beneficiaries and maintains their eligibility records
- SSA handles all Part D for RRB beneficiaries
- SSA makes Low-Income Subsidy Part D determination
- SSA makes determinations on income-related premium adjustments
- Call RRB toll-free at 1-877-772-5772 for the local field office in your area if you have questions. TTY users: 1-312-751-4701

TRICARE FOR LIFE (TFL)

National Defense Authorization Act

- Requires eligibility for Part A, enrollment in Part B
- SSA handles Medicare enrollment of TFL beneficiaries
- Defense Eligibility Enrollment Reporting System (DEERS)
- TFL beneficiaries have Creditable Coverage for Part D
- Medicare pays first; Tricare pays second
- Medicare claims are automatically crossed over—TFL
- Call TFL toll-free at 1-800-538-9552
- www.tricare.osd.mil/DEERSAddress/

CMS Tribal Technical Advisory Group (TTAG)

- CMS established a TTAG to provide advice and input to CMS on policy, legislative, and programmatic issues affecting Indian health programs and American Indian/Alaska Native (AI/AN) beneficiaries.
- TTAG is comprised of representatives from each of the 12 IHS Areas and a representative from NIHB, NCAI, Tribal Self-Governance Advisory Committee, IHS, and Urban Indian Health Program.

CMS TTAG SUBCOMMITTEES

- Across State Borders
- Budget Committee
- CMS Day Planning
- Data
- Equitable Relief
- Long-Term Care
- MedicaidAdministrative Match

- Outreach and Education
- Medicare-Like Rates
- Part D Implementation
- Policy
- Strategic Plan
- Tribal Consultation Policy

AI/AN POPULATION ENROLLED

Medicare: 179,794

■ Medicaid: 793,835

Children's Health Insurance Program (CHIP): 26,744

FY 2009, IHS estimated Medicare and Medicaid reimbursements of over \$750 million

THIRD-PARTY COLLECTIONS

- Important revenue to Indian health
- Medicare third-party revenue source
- Claims for Al/AN Medicare patients generates revenue and saves CHS Dollars
- Savings could be used to meet the medical needs for patients without Medicare
- Assistance with enrollment of eligible patients in CMS programs very important

WHAT IS MEDICARE?

- A health insurance program for people
 - 65 years of age and older
 - Under age 65 with certain disabilities
 - With End-Stage Renal Disease (ESRD)
- Administered by the CMS
- Enrollment
 - SSA
 - RRB

APPLYING FOR MEDICARE

- Apply 3 months before age 65
 - Don't have to be retired
 - Contact the SSA
- Enrollment automatic if receiving
 - Social Security
 - Railroad Retirement benefits

MEDICARE COVERAGE BASICS

- Part A: Hospital Insurance
- Part B: Medical Insurance
- Part C: Medicare Advantage Plan
- Part D: Medicare Prescription Drug Coverage

MEDICARE PART A

- Most people do not pay a premium for Part A.
- People with less than 10 years of Medicarecovered employment can still get Part A, but will pay a Part A premium.
- For information about Part A entitlement, call:
 - SSA at 1-800-772-1213
 - TTY users call 1-800-325-0778

ENROLLING IN MEDICARE PART B

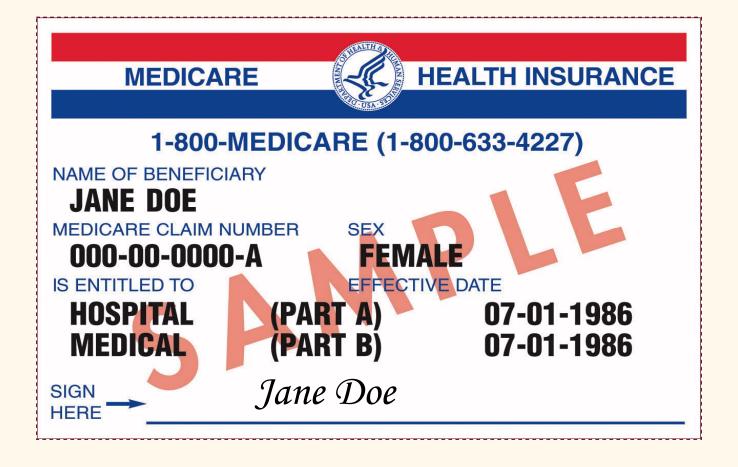
- Automatic Enrollment: Part B is optional
- Initial Enrollment Period
 - Seven months starting 3 months before month of eligibility
- General Enrollment Period (GEP)
 - January 1 through March 31 of each year
 - Coverage is effective July 1
 - Premium penalty
 - * 10% penalty for each 12-month period eligible but not enrolled
 - * Paid for as long as the person has Part B
 - * Limited exceptions

ENROLLING IN MEDICARE PART B

Special Enrollment Period (SEP)

- May delay enrolling in Part B with no penalty if
 - Covered under an employer or union group health plan
 - * Based on current employment of person or spouse
 - * Must sign up within 8 months after coverage ends (during SEP)

MEDICARE CARD



MEDICARE BENEFITS

PART A

- Inpatient hospital care
- Skilled nursing care
- Home healthcare
- Hospice care

PART B

- Doctors' services and outpatient care
- Preventive services
- Diagnostic tests
- Some therapies
- Durable medical equipment

MEDICARE APPEALS (CMS 20027)

Appeals Process–5 Steps

- Redetermination
- Reconsideration
- Administrative Law Judge
- Department Appeals Board (Medicare Appeals Council)
- U.S. District Court (Judicial Review)

Timeline and Amount ...

- 120 days \$0.00
- 180 days \$0.00
- 60 days \$120.00
- 60 days \$1180.00
- 180 days \$1180.00

PART D ENROLLMENT PERIODS

Initial Enrollment Period

Seven months

Starts three months before month eligible for Medicare

Annual Coordinated Election Period

November 15 through December 31 each year Can join, drop, or switch coverage (Effective January 1 of following year)

Special Enrollment Period

MEDICARE COVERAGE

PART D – Prescription Drugs Offered by Prescription Drug Plans

- IHS Creditable Coverage
- No penalties for late enrollment
- Need Creditable Coverage Letter for Plan
- Member can have A or B or Both
- CMS can autoenroll duals In Part D
- Indian Health Provider contract with Part D Plan

MEDICARE-LIKE RATE

Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (MMA)

- IHS Regulation42 CFR 489, Part 136
- Section 506 of MMA limits
 The amount a Medicare hospital may charge the I/T/U is no more than a Medicare-like rate for an authorized referral plus applicable coinsurance.

CMS Process for Handling MLR Noncompliance Cases

- Refer MLR Case to NAC with Documentation
- CMS will review
- Contact Medicare Provider
- Make Determination
- Written response to I/T/U and MCR Provider

CMS OUTREACH

- CMS NACs—All in CMS regional offices
- CMS Central Office
- Outreach through partnerships/associations national or local venues
- Medicare Administrative Contractors MACs A/B – DME MACs

CMS-IHS PARTNERSHIP 2010 OUTREACH

- Alaska Area (2)Anchorage, Fairbanks
- Albuquerque Area (2)
 New Mexico, Colorado
- Aberdeen ND, SD (2)
- Bemidji Area (2)
 Wisconsin, Michigan
- Billings (Montana) (1)
- California Area (2)
 Northern/Southern

- Nashville Area (2)
 NE State, SE State
- Navajo Nation (1)
- Oklahoma Area (2)
 Kansas, Oklahoma
- Phoenix Area (2)
 Phoenix, Nevada/Utah
- Portland Area (2)
 Washington, OR/Idaho
- Tucson Area (1) (21 National I/T/U Trainings)

CMS MAC OUTREACH

Trailblazer Health Enterprises Workshops (CMS MAC) Two-Day Medicare Part A and B 2010 Workshop Schedule

- **April 14-15**^{th:} Navajo Area—Workshop in Gallup (Confirmed by Roland Todacheenie)
- May 5-6^{th:} Alaska Area—Workshop in Anchorage (Confirmed by C. Walker)
- May 19-20^{th:} Albuquerque Area—Workshop in Albuquerque (Confirmed by Connie Loretto)
- **June 16^{th:}** Portland Area—Workshop in Portland (Confirmed by Leah Tom)

CMS MAC OUTREACH

Trailblazer Health Enterprises Workshops (continued)

- June 23-24^{th:} Oklahoma and Nashville Area—Workshop in Oklahoma City (Confirmed by Sandra Lahi/Theresa Cochran)
- **July 14-15^{th:}** Aberdeen and Bemidji Area—Workshop in Fargo, ND (Confirmed by Kathy Keith and James Driving Hawk)
- **July 28-29**^{th:} Phoenix and Tucson Area—Workshop in Phoenix (Confirmed by Denise Exendine/Adam Archuleta)
- August 17-18^{th:} Billings Area—Workshop in Billings (Confirmed by Deanna Stops)

CMS RESOURCES

Our MACs, fiscal intermediaries, and carriers are the face of CMS for Medicare fee-for-service providers

Provide education and outreach

- Toll-free call centers
- Responses to your claims-related inquiries
- In-person or Web-based training workshops, seminars, or conferences
- Through bulletins, newsletters
- Contractor Web sites

CMS MEDICARE ADMINISTRATIVE CONTRACTORS

- Section 911 of MMA requires all MAC to be implemented by October 1, 2011.
- There are 15 A/B MAC jurisdictions.
- http://www.cms.hhs.gov/MedicareContracting g Reform/
- During implementation, existing fiscal intermediaries and carriers will continue to provide Medicare fee-for-service administrative services.

CMS RESOURCES

CMS provides information, education, and outreach on a national level.

- Learn through the Medicare Learning Network, the Official CMS information for Medicare Fee-for-Service Providers.
- Get information you need through customized CMS FFS provider Web sites and other special initiatives.
- Sign up for information through your provider listserv.
- Talk to the experts on provider listening forums—CMS Open Door Forum, CMS Broadcast, and CMS Stakeholder Calls.

CMS RESOURCES

Medicare Learning Network

- http://www.cms.hhs.gov/MLNGenInfo
- http://www.cms.hhs.gov/MLNMattersArticles
- http://www.cms.hhs.gov/MLNProducts
- http://www.cms.hhs.gov/MLNEdWebGuide
- www.medicare.gov

Nancy Grano—Region I: Boston 617-565-1695 nancy.grano@cms.hhs.gov

Region: Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, Vermont

Julie Rand–Region II: New York 212-616-2433 julie.rand@cms.hhs.gov Region: New Jersey, New York, Puerto Rico, Virgin Islands

■ Tamara McCloy—Region III: Philadelphia 215-861-4220 tamara.mccloy@cms.hhs.gov

Region: Delaware, District of Columbia, Maryland, Pennsylvania, Virginia, West Virginia

Dianne P. Thornton–Region IV: Atlanta
 404-562-7464 <u>dianne.thornton@cms.hhs.gov</u>
 Region: Alabama, North Carolina, South Carolina, Florida, Georgia, Kentucky, Mississippi, Tennessee

- Pamela Carson–Region V: Chicago
 312-353-0108 <u>pamela.carson@cms.hhs.gov</u>
 Region: Illinois, Indiana, Michigan, Minnesota, Ohio, Wisconsin
- Dorsey Sadongei–Region VI: Dallas
 214-767-3570 <u>eudora.sadongei@cms.hhs.gov</u>
 Region: Arkansas, Louisiana, New Mexico, Oklahoma, Texas

Nancy Rios–Region VII: Kansas City

816-426-6460 nancy.rios@cms.hhs.gov

Region: Iowa, Kansas, Missouri, Nebraska

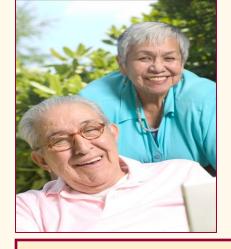
Cyndi Gillaspie–Region VIII: Denver

303-844-4725 cynthia.gillaspie@cms.hhs.gov

Region: Colorado, Montana, North Dakota, South Dakota, Utah,

Wyoming

 Rosie Norris-Region IX: San Francisco 415-744-3611 <u>rosella.norris@cms.hhs.gov</u>
 Region: American Samoa, Arizona, California, Guam, Hawaii, Nevada, Northern Mariana Islands



Thank you and have a great conference!!

...Rosie

