

Frontier Focus: A Medicare Update

9/25/10

EHR Certification Capacity Expanded: Additional Certification Body Named by ONC

The Office of the National Coordinator for Health Information Technology (ONC) named InfoGard Laboratories, Inc., San Luis Obispo, Calif. as an ONC-Authorized Testing and Certification Body (ONC-ATCB). The addition of InfoGard Laboratories, Inc. as an ONC-ATCB provides more options for EHR vendors to have their products tested and certified for compliance with the standards and certification criteria that were issued by the U. S. Department of Health and Human Services earlier this year.

Certification of EHRs is part of a broad initiative undertaken by Congress and President Obama under the Health Information Technology for Economic and Clinical Health (HITECH) Act, which was part of the American Recovery and Reinvestment Act (ARRA) of 2009. HITECH created new incentive payment programs to help health providers as they transition from paper-based medical records to EHRs. Incentive payments totaling as much as \$27 billion may be made under the program. Individual physicians and other eligible professionals can receive up to \$44,000 through Medicare and almost \$64,000 through Medicaid. Hospitals can receive millions.

To qualify for the incentive payments offered by the Centers for Medicare & Medicaid Services (CMS) providers must not only adopt, but also demonstrate the meaningful use of, certified EHR systems.

ONC authorized the first two ONC-ATCBs in late August, 2010. Additional applications are under review.

For more information about the ONC certification programs visit <http://healthit.hhs.gov/certification>.

To learn more about InfoGard Laboratories, Inc. visit www.infogard.com

Information about the Medicare & Medicaid EHR Incentive Programs, may be found at <http://www.cms.gov/EHRIncentivePrograms>.

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### **The 2010 Medicare Contractor Provider Satisfaction Survey (MCPSS) Results Are Now Available!**

The Centers for Medicare & Medicaid Services (CMS) has completed the administration of the 2010 MCPSS. The 2010 results reflect the percentage of provider satisfaction as distributed on the new, fully labeled, 5-point scale: 1-very dissatisfied / 2-dissatisfied / 3-neither satisfied nor dissatisfied / 4-satisfied / 5-very satisfied.

A random sample of over 33,000 providers was selected to participate in this year's survey. Providers were asked to rate their satisfaction with services provided by the Fee-

for-Service (FFS) Medicare contractors. Of all providers who responded, more than 69 percent stated they were satisfied or very satisfied with their contractor's overall performance. Approximately 13 percent stated they were dissatisfied or very dissatisfied.

From the results, CMS is able to identify the contractor services that providers value the most, as well as areas that need improvement. CMS will use this information to encourage process improvements with the FFS Medicare contractors.

The 2010 MCPSS public report details findings from the survey and can be accessed at <https://www.cms.hhs.gov/MCPSS>.

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Medicare Advantage Premiums Fall, Enrollment Rises, Benefits Similar Compared to 2010: Wide range of Medicare health and drug plan options continues in 2011

The Centers for Medicare & Medicaid Services (CMS) announced today that, on average, Medicare Advantage premiums will be 1 percent lower in 2011 than today. The majority of Medicare beneficiaries, on average, enrolled in Medicare health and prescription drug plans this year should find little or no change in their benefits in 2011, in addition to seeing more drug plans offering coverage in the prescription drug coverage gap or "donut hole." Medicare Advantage plans project that enrollment will increase by 5 percent in 2011. And, consistent with the Affordable Care Act, beneficiaries, in most Medicare Advantage plans and Original Medicare, will gain access to preventive benefits with no out of pocket costs.

Through the new tools provided to Medicare under the Affordable Care Act, and working closely with Medicare Advantage Organizations and Prescription Drug Plan, CMS took steps to:

- Protect beneficiaries from excessive increases in premiums and cost sharing through aggressive bid reviews;
- Consolidate low enrollment and duplicative plans so beneficiaries have meaningful differences between plans offered by the same organization;
- Set limits on out-of-pocket expenses;
- Cover preventive services with no cost sharing; and
- Limit plan cost sharing for skilled nursing care, chemotherapy and renal dialysis to the amounts paid by beneficiaries in Original Medicare.

The Affordable Care Act also provides some new benefits to Medicare beneficiaries in 2011 like free wellness visits, some new free health screenings, and a 50 percent discount on brand-name drugs for seniors who fall into the coverage gap.

CMS is encouraging beneficiaries enrolled in Medicare Advantage and Medicare Prescription Drug plans to review their current health and drug plan coverage for any changes their plans may be making for 2010 before the annual enrollment period begins November 15. In addition to the 5-Star ratings on the Medicare Plan Finder at

www.Medicare.gov, users will find an icon that shows those plans that had a low overall quality rating the past three years.

Additional Resources are available at the following links:

- National Press Release issued today (9/21):
http://www.cms.hhs.gov/apps/media/press_releases.asp
- Medicare Health and Drug Plan State-by-State Fact Sheets:
<http://www.cms.hhs.gov/center/openenrollment.asp>
2011 Plan Landscape Files: <http://www.cms.hhs.gov/PrescriptionDrugCovGenIn/>

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## **CMS Is Here to Help in the Transitions to Version 5010 and ICD-10**

Have questions about the Version 5010 and ICD-10 transition? CMS is here to help!

We have resources for providers, vendors, and payers to prepare for the transition. Fact sheets available for educating staff and others about the transition include:

- The ICD-10 Transition: An Introduction
- ICD-10 Basics for Medical Practices
- Talking to Your Vendors About ICD-10 and Version 5010: Tips for Medical Practices
- Talking to Your Customers About ICD-10 and Version 5010: Tips for Software Vendors

Compliance timelines, materials from CMS-sponsored calls and conferences, and links to resources are available at [www.cms.gov/icd10](http://www.cms.gov/icd10). Check back often for the latest information and updates.

Keep Up to Date on Version 5010 and ICD-10. Please visit [www.cms.gov/icd10](http://www.cms.gov/icd10) for the latest news and sign up for Version 5010 and ICD-10 e-mail updates! Version 5010 and ICD-10 are coming. Will you be ready?

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September Flu Shot Reminder

Vaccinate Early to Protect Against the Flu. The Centers for Disease Control and Prevention (CDC) recommends a yearly flu vaccination as the first and most important step in protecting against flu viruses. Medicare pays for the flu vaccine and its administration for seniors and other Medicare beneficiaries with no co-pay or deductible. This year's vaccine will protect against three different flu viruses, including the H1N1 virus that caused so much illness last flu season. Take advantage of each office visit and start protecting your patients as soon as your 2010-2011 seasonal flu vaccine arrives. And, don't forget to immunize yourself and your staff. Get Your Flu Vaccine - Not the Flu.

Remember – Influenza vaccine plus its administration are covered Part B benefits. Note that influenza vaccine is NOT a Part D covered drug. For information about Medicare's coverage of the influenza vaccine and its administration, as well as related educational

resources for health care professionals and their staff, please visit
<http://www.cms.gov/AdultImmunizations>.

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## Updates from the Medicare Learning Network ...

### **“Medicare Secondary Payer (MSP) Fact Sheet, for Provider, Physician, and Other Supplier Billing Staff”**

The “Medicare Secondary Payer (MSP) Fact Sheet, for Provider, Physician, and Other Supplier Billing Staff” (revised May, 2010), is now available in hardcopy from the Medicare Learning Network®. This resource provides a general overview of the MSP provisions for individuals involved with admission or billing procedures in provider, physician, and other supplier settings. To order your copy, free of charge, please visit the MLN Products page at [http://www.cms.gov/MLNProducts/01\\_Overview.asp](http://www.cms.gov/MLNProducts/01_Overview.asp) on the Internet. From this page, scroll down to the “Related Links Inside CMS” section and select the “MLN Product Ordering Page” link. To view the online version, please visit [http://www.cms.gov/MLNProducts/downloads/MSP\\_Fact\\_Sheet.pdf](http://www.cms.gov/MLNProducts/downloads/MSP_Fact_Sheet.pdf) on the Internet.

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### **“UB-O4 Overview Fact Sheet” Now Available in Print**

The new Medicare Learning Network® (MLN) “UB-O4 Overview Fact Sheet” (revised July, 2010) is now available in both downloadable and hardcopy formats. This fact sheet details the UB-04 paper claim form, also known as the Form CMS-1450, which is only accepted from institutional providers who are excluded from the mandatory electronic claims submission. A downloadable version is available at [http://www.cms.gov/MLNProducts/downloads/ub04\\_fact\\_sheet.pdf](http://www.cms.gov/MLNProducts/downloads/ub04_fact_sheet.pdf) on the Internet. To order a print version free of charge, please visit the MLN homepage at <http://www.cms.gov/mlngeninfo> on the Internet. Click on “MLN Product Ordering Page” in the “Related Links Inside CMS” section.

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### **Sun Sep 26 is World Heart Day**

The Centers for Medicare & Medicaid Services (CMS) is asking the provider community to keep their patients with Medicare healthy by encouraging them to take advantage of Medicare-covered preventive services. Medicare provides coverage for several Preventive Services to help keep patients with Medicare healthy, including cardiovascular screenings, ultrasound screening for abdominal aortic aneurysms (AAA), and smoking and tobacco-use cessation counseling for eligible beneficiaries.

What Can You Do? As a health care professional who provides care to patients with Medicare, you can help protect the health of your Medicare patients by encouraging them to take advantage of Medicare-covered preventive services that are appropriate for them.

For More Information: CMS has developed several educational products related to Medicare-covered preventive services. They are all available, free of charge, from the Medicare Learning Network®:

- The MLN Preventive Services Educational Products Web Page ~ provides descriptions and ordering information for Medicare Learning Network® (MLN) educational products for health care professionals related to Medicare-covered preventive services.
- [http://www.cms.hhs.gov/MLNProducts/35\\_PreventiveServices.asp](http://www.cms.hhs.gov/MLNProducts/35_PreventiveServices.asp)
- The Guide to Medicare Preventive Services for Physicians, Providers, Suppliers, and Other Health Care Professionals ~ provides comprehensive coverage and coding information on Medicare-covered preventive services.  
[http://www.cms.hhs.gov/MLNProducts/downloads/mps\\_guide\\_web-061305.pdf](http://www.cms.hhs.gov/MLNProducts/downloads/mps_guide_web-061305.pdf)
- Quick Reference Information: Medicare Preventive Services ~ this chart provides coverage and coding information on Medicare-covered preventive services.  
[http://www.cms.hhs.gov/MLNProducts/downloads/MPS\\_QuickReferenceChart\\_1.pdf](http://www.cms.hhs.gov/MLNProducts/downloads/MPS_QuickReferenceChart_1.pdf)
- The Expanded Benefits brochure~ this brochure provides information on coverage for cardiovascular screening blood tests and AAA screening.  
[http://www.cms.gov/MLNProducts/downloads/Expanded\\_Benefits.pdf](http://www.cms.gov/MLNProducts/downloads/Expanded_Benefits.pdf)
- The Smoking and Tobacco-Use Cessation brochure~ this brochure provides information on coverage for smoking and tobacco-use cessation services.  
<http://www.cms.gov/MLNProducts/downloads/smoking.pdf>
- The Medicare Preventive Services Series: Part 2 Web-Based Training Course (WBT) ~ This WBT includes lessons on coverage, coding, and billing for several Medicare-covered preventive services, including cardiovascular screening blood tests, AAA screening, and smoking and tobacco-use cessation counseling. To access the WBT, please visit the MLN homepage at: <http://www.cms.gov/mlngeninfo> on the internet. Scroll down to “Related Links Inside CMS” and click on “WBT Modules”

Please visit the [Medicare Learning Network](#)® for more information on these and other Medicare fee-for-service educational products. For more information on World Heart Day, please visit <http://www.worldheart.org> on the internet.

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### **Wed Sep 29 is National Women’s Health and Fitness Day**

The Centers for Medicare & Medicaid Services (CMS) is asking the provider community to keep their patients with Medicare healthy by encouraging them to take advantage of Medicare-covered preventive services.

Medicare provides coverage for several Preventive Services to help keep women with Medicare healthy, including bone mass measurements, screening pap tests, screening pelvic exams and screening mammograms.

What Can You Do? As a health care professional who provides care to patients with Medicare, you can help protect the health of your Medicare patients by encouraging them to take advantage of Medicare-covered preventive services that are appropriate for them.

**For More Information:** CMS has developed several educational products related to Medicare-covered preventive services. They are all available, free of charge, from the Medicare Learning Network®:

- **The MLN Preventive Services Educational Products Web Page** ~ provides descriptions and ordering information for Medicare Learning Network® (MLN) educational products for health care professionals related to Medicare-covered preventive services.  
[http://www.cms.hhs.gov/MLNProducts/35\\_PreventiveServices.asp](http://www.cms.hhs.gov/MLNProducts/35_PreventiveServices.asp)
- **The Guide to Medicare Preventive Services for Physicians, Providers, Suppliers, and Other Health Care Professionals** ~ provides comprehensive coverage and coding information on Medicare-covered preventive services.  
[http://www.cms.hhs.gov/MLNProducts/downloads/mps\\_guide\\_web-061305.pdf](http://www.cms.hhs.gov/MLNProducts/downloads/mps_guide_web-061305.pdf)
- **Quick Reference Information: Medicare Preventive Services** ~ this chart provides coverage and coding information on Medicare-covered preventive services.  
[http://www.cms.hhs.gov/MLNProducts/downloads/MPS\\_QuickReferenceChart\\_1.pdf](http://www.cms.hhs.gov/MLNProducts/downloads/MPS_QuickReferenceChart_1.pdf)
- **The Cancer Screenings brochure**~ this brochure provides information on coverage for Medicare-covered cancer screenings, including screening mammograms.  
[http://www.cms.hhs.gov/MLNProducts/downloads/cancer\\_screening.pdf](http://www.cms.hhs.gov/MLNProducts/downloads/cancer_screening.pdf)
- **The Bone Mass Measurements brochure**~ this brochure provides information on coverage for Medicare-covered bone mass measurements.  
[http://www.cms.gov/MLNProducts/downloads/bone\\_mass.pdf](http://www.cms.gov/MLNProducts/downloads/bone_mass.pdf)
- **The Medicare Preventive Services Series: Part 3 Web-Based Training Course (WBT)** ~ This WBT includes lessons on coverage, coding, and billing for several Medicare-covered preventive services, including screening mammography, pap tests, pelvic exams, and bone mass measurements. To access the WBT, please visit the MLN homepage at: <http://www.cms.gov/mlnngeninfo> on the internet. Scroll down to “Related Links Inside CMS” and click on “WBT Modules”

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Please visit the [Medicare Learning Network](#)® for more information on these and other Medicare fee-for-service educational products. For more information on National Women’s Health and Fitness Day, please visit <http://www.fitnessday.com> on the internet.

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A new "twist" in the law makes it easier to save on your prescription drug costs.

<http://www.ssa.gov/prescriptionhelp/>

Under a new law, more Medicare beneficiaries could qualify for Extra Help with their Medicare prescription drug plan costs because some things no longer count as income and resources. The Extra Help is estimated to be worth an average of \$3,900 per year. To qualify for the Extra Help, a person must be on Medicare, have limited income and resources, and reside in one of the 50 states or the District of Columbia.

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