

Thursday, September 10, 2020

News

CMS Care Compare Empowers Patients When Making Important Health Care Decisions

Open Payments: Adding 5 Provider Types in 2021

Breast Re-Excision: Comparative Billing Report in September

Events

CMS-CDC Fundamentals of COVID-19 Prevention for Nursing Home Management Call — September 10

Dementia Care Call — September 22

MLN Matters® Articles

October 2020 Update of the Hospital Outpatient Prospective Payment System (OPPS)

Update to Hospice Payment Rates, Hospice Cap, Hospice Wage Index and Hospice Pricer for FY 2021 Inpatient Rehabilitation Facility (IRF) Annual Update: Prospective Payment System (PPS) Pricer Changes for FY 2021

Internet Only Manual Update to Pub. 100-04, Chapter 16, Section 60.1.2 and Pub. 100-04, Chapter 26, Section 10.4, Item 19

Update to the Model Admission Questions for Providers to Ask Medicare Beneficiaries National Coverage Determination (NCD 30.3.3): Acupuncture for Chronic Low Back Pain (cLBP) — Revised

Publications

Understanding Your Remittance Advice Reports
Home Health, Hospice, IRF, LTCH, & SNF Quality Reporting Programs: COVID-19 Public Reporting

Multimedia

Pain Management Listening Session: Audio Recording & Transcript Introduction to the LTCH Quality Reporting Program Web-Based Training Introduction to the Home Health Quality Reporting Program Web-Based Training

News

CMS Care Compare Empowers Patients When Making Important Health Care Decisions

On September 3, under the leadership of President Trump, CMS launched <u>Care Compare</u>, a streamlined redesign of eight existing CMS health care compare tools available on <u>Medicare.gov</u>. Care Compare provides a single user-friendly interface that patients and caregivers can use to make informed decisions about health care based on cost, quality of care, volume of services, and other data. With just one click, patients can find information that is easy to understand about doctors, hospitals, nursing homes, and other health care services instead of searching through multiple tools.

"President Trump has long recognized that a free and vibrant health care market is one in which patients have what they need to make informed decisions based on cost and quality," said CMS Administrator Seema Verma. "By aggregating all eight of CMS' quality tools into a single interface, patients can easily research different providers and facilities before they entrust themselves to their care. Today's launch of Care Compare is the next step in fulfilling our eMedicare promise. Our Administration is committed to ensuring our tools are robust and beneficial to patients."

Currently, someone who is planning to have bypass surgery would need to visit Hospital Compare, Nursing Home Compare, and Home Health Compare individually to research providers for the different phases of their surgery and rehabilitation. Now, those patients can start their search at Care Compare to find and compare providers that meet their health care needs that includes information about quality measures presented similarly and clearly across all provider types and care settings.

Patients will also find helpful hints and guides throughout Care Compare. While the measures and data used for Care Compare have not changed, the way information is displayed is now different. During a transition period, consumers and other stakeholders will be able to use the original eight compare tools while CMS continues to gather feedback and considers additional improvements to the tool. As new information about quality and cost are added to the compare tools, Care Compare will be updated to reflect that information.

In conjunction with the launch of Care Compare, additional improvements have been made to other CMS data tools to help Medicare beneficiaries compare costs:

- <u>Procedure Price Look Up</u> tool now includes physician fees in addition to facility fees, offering people with Medicare a more accurate prediction of the true out-of-pocket costs
- <u>Provider Data Catalog</u> better serves innovators and stakeholders who are interested in detailed CMS
 data and use interactive and downloadable datasets like those currently available on data. Medicare.gov

See the full text of this excerpted CMS Press Release (issued September 3).

Open Payments: Adding 5 Provider Types in 2021

Every year, drug and medical device companies report payments or other transfers of value made to physicians and teaching hospitals (covered recipients). You have an opportunity to review your data before CMS publishes it on the Open Payments website in June each year. In 2021, CMS will add five new provider types as covered recipients:

- Physician assistants
- Nurse practitioners
- Clinical nurse specialists
- Certified registered nurse anesthetists and anesthesiologist assistants
- Certified nurse midwives

Visit the <u>Newly Added Covered Recipients</u> webpage and <u>Open Payments Program</u> website to learn how the program affects you.

Breast Re-Excision: Comparative Billing Report in September

In September, CMS will issue a Comparative Billing Report (CBR) on Breast Re-Excision, focusing on providers who submit Medicare Part B claims. These reports contain data-driven tables with an explanation of findings that compare your billing patterns with peers in your state and across the nation.

CBRs are not publicly available. Look for an email from cbrpepper.noreply@religroupinc.com to access your report. Update your email address in the Provider Enrollment, Chain, and Ownership System to ensure delivery.

For More Information:

- Register for webinar on September 23 from 3 to 4 pm ET
- Visit the CBR website

Events

CMS-CDC Fundamentals of COVID-19 Prevention for Nursing Home Management Call — September 10

Thursday, September 10 from 4 to 5 pm ET

Register for this live Q&A session.

This live Q&A series is brought to you by CMS, CDC, and the Quality Improvement Organization (QIO) Program:

- Register for these calls held twice a month through January
- Submit questions in advance to DVACSupport@thebizzellgroup.com
- Visit the QIO Program FAQ webpage for questions not addressed during the live sessions

Target Audience: Clinical and administrative nursing home staff members.

Dementia Care Call — September 22

National Partnership to Improve Dementia Care and Quality Assurance Performance Improvement Tuesday, September 22 from 1:30 to 3 pm ET

Register for Medicare Learning Network events.

During this call, learn about the unique challenges facing nursing home residents living with dementia during the COVID-19 pandemic and best practices to support them. A question and answer session follows the presentations.

Speakers:

- Cathleen Lawrence and Dara Graham, CMS
- Kara Jacobs Slifka, MD, MPH, Centers for Disease Control and Prevention
- Douglas Pace, Alzheimer's Association

Target Audience: Consumer and advocacy groups; nursing home providers; surveyor community; prescribers; professional associations; and other interested stakeholders.

MLN Matters® Articles

October 2020 Update of the Hospital Outpatient Prospective Payment System (OPPS)

CMS issued a new MLN Matters Article MM11960 on October 2020 Update of the Hospital Outpatient Prospective Payment System (OPPS). Learn about changes to payment policies and billing instructions.

Update to Hospice Payment Rates, Hospice Cap, Hospice Wage Index and Hospice Pricer for FY 2021

CMS issued a new MLN Matters Article MM11876 on <u>Update to Hospice Payment Rates</u>, <u>Hospice Cap</u>, Hospice Wage Index and Hospice Pricer for FY 2021. Learn about this annual update.

Inpatient Rehabilitation Facility (IRF) Annual Update: Prospective Payment System (PPS) Pricer Changes for FY 2021

CMS issued a new MLN Matters Article MM11858 on <u>Inpatient Rehabilitation Facility (IRF) Annual Update:</u> <u>Prospective Payment System (PPS) Pricer Changes for FY 2021</u>. Learn about a new IRF Pricer software package.

Internet Only Manual Update to Pub. 100-04, Chapter 16, Section 60.1.2 and Pub. 100-04, Chapter 26, Section 10.4, Item 19

CMS issued a new MLN Matters Article MM11935 on Internet Only Manual Update to Pub. 100-04, Chapter 16, Section 60.1.2 and Pub. 100-04, Chapter 26, Section 10.4, Item 19. Learn about removal of electrocardiogram services.

Update to the Model Admission Questions for Providers to Ask Medicare Beneficiaries

CMS issued a new MLN Matters Article MM11945 on <u>Update to the Model Admission Questions for Providers</u> to Ask Medicare Beneficiaries. Learn about revised questions in the Medicare Secondary Payer Manual.

National Coverage Determination (NCD 30.3.3): Acupuncture for Chronic Low Back Pain (cLBP) — Revised

CMS revised MLN Matters Article MM11755 on <u>National Coverage Determination (NCD 30.3.3)</u>: Acupuncture for Chronic Low Back Pain (cLBP) to revise messaging from the Medicare Administrative Contractors.

Publications

Understanding Your Remittance Advice Reports

A new <u>Understanding Your Remittance Advice Reports</u> Medicare Learning Network Booklet is available. Learn about:

- Types
- Content
- FAQs

Home Health, Hospice, IRF, LTCH, & SNF Quality Reporting Programs: COVID-19 Public Reporting

COVID-19 public reporting tip sheets are available for hospice, Inpatient Rehabilitation Facility (IRF), Long-Term Care Hospital (LTCH), and Skilled Nursing Facility (SNF). These tip sheets explain:

- Strategy for CMS quality data exempted from public reporting due to COVID-19
- Impact on Compare website refreshes

Multimedia

Pain Management Listening Session: Audio Recording & Transcript

An <u>audio recording</u> and <u>transcript</u> are available for the <u>August 27</u> Medicare Learning Network listening session on the Dr. Todd Graham Pain Management Study. This study will give CMS important information about treatment and outcomes and help us understand the roles of behavioral health, specialty care integration, care planning, health disparities in pain, opioid use, and opioid use disorders treatment.

Introduction to the LTCH Quality Reporting Program Web-Based Training

Are you new to the Long-Term Care Hospital (LTCH) Quality Reporting Program? This <u>web-based training</u> <u>course</u> provides a general overview, information on the Continuity Assessment Record & Evaluation (CARE) data set, and resources. Visit the <u>LTCH Quality Reporting Training</u> webpage for more information.

Introduction to the Home Health Quality Reporting Program Web-Based Training

Are you new to the Home Health Quality Reporting Program? This <u>web-based training course</u> provides a general overview, information on the Outcome and Assessment Information Set (OASIS), and resources. Visit the <u>Home Health Quality Reporting Training</u> webpage for more information.

Like the newsletter? Have suggestions? Please let us know!

<u>Subscribe</u> to MLN Connects. Previous issues are available in the <u>archive</u>. This newsletter is current as of the issue date. View the complete <u>disclaimer</u>.

Follow the MLN on Twitter #CMSMLN, and visit us on YouTube.

The Medicare Learning Network®, MLN Connects®, and MLN Matters® are registered trademarks of the U.S. Department of Health and Human Services (HHS).

