

## July Website Updates

### Accomplishments

#### **7/14/06: MMA Section 936- Provider Enrollment Appeals Process**

CMS issued a manual issuance (CR 4354) that revises the appeals process for providers and suppliers that wish to appeal a decision to deny or revoke enrollment in the Medicare program. Providers and suppliers will be given the right to a hearing by the administrative law judge within the Department of Health and Human Services.

#### **7/26/06: MMA Section 923 - Medicare Beneficiary Ombudsman**

CMS hosted an Open Door Forum on the Medicare Beneficiary Ombudsman program. This forum provided an opportunity for beneficiaries, caregivers, and advocates to discuss issues and concerns regarding ways to improve the systems within the Medicare program. This is required by Section 923 of the MMA.

### What to Expect

#### **Final Rule: Physicians' Referrals to Health Care Entities with Which They Have Financial Relationships – E-Prescribing Exception (CMS-1303-F)**

This final rule creates an exception to the physician self-referral prohibition for certain non-monetary remuneration related to electronic prescribing. This is required by Section 1860D-4 of the MMA.

*Targeted Release: Third Quarter of CY 2006*

#### **Final Rule: Prospective Payment System for Inpatient Rehabilitation Facilities for FY 2007**

This final rule updates rates for the prospective payment system for inpatient rehabilitation facilities for FY 2007. This rule establishes certain requirements related to competitive acquisition for durable medical equipment, prosthetics, orthotics, and supplies (DMEPOS). This rule also establishes requirements for accreditation for DMEPOS suppliers as required by MMA Section 302.

*Targeted Release: Third Quarter of CY 2006*

#### **Proposed Rule: Hospital Outpatient Prospective Payment System Changes and Calendar Year 2007 Payment Rates (CMS-1506-P)**

This proposed rule would revise the Medicare hospital outpatient prospective payment system to implement applicable statutory requirements and changes arising from our continuing experience with this system and to implement certain related provisions of the MMA. In addition, the proposed rule describes proposed changes to the amounts and factors used to determine the payment rates for Medicare hospital outpatient services paid under the prospective payment system.

*Targeted Release: Third Quarter of CY 2006*

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### **Notice: Solicitation for Organizations to Accredite DME Suppliers (CMS-6040-N)**

This notice will solicit accrediting organizations to accredit DME suppliers by the first phase of DME Implementation (January 2007). Section 302 of the MMA required CMS to issue these quality standards for DME suppliers.

*Targeted Release: Third Quarter of CY 2006*

### **Notice: Frontier Extended Stay Clinic Demonstration (CMS-5030-N)**

This notice establishes a demonstration project under which frontier extended stay clinics in isolated rural areas are treated as providers of items and services under the Medicare program. This is required by MMA Section 434(a) of the MMA.

*Targeted Release: Third Quarter of CY 2006*