

Accomplishments

1/18/06: MMA Section 302 - Payment for Durable Medical Equipment; Competitive Acquisition of Certain Items and Services

CMS hosted an Open Door Forum addressing three unique health care areas within the Medicare & Medicaid programs. These issues are related to Home Health PPS, the newly proposed competitive bidding for DME, and the Medicare Hospice benefit. The proposed competitive bidding for DME is required by MMA Section 302.

1/6/06: MMA Section 911 - Increased Flexibility in Medicare Administration

CMS announced that it has awarded contracts for four specialty contractors who will be responsible for handling the administration of Medicare claims from suppliers of durable medical equipment, prosthetics and orthotics. The new contracts awarded represent a first step in CMS' initiatives designed to improve service to beneficiaries and providers, support the delivery of coordinated and quality care, and provide greater administrative efficiency and effectiveness for fee-for-service Medicare. This is required in order to fulfill the requirements of the contracting reform provisions of Section 911 of the MMA.

1/5/06: MMA Section 101-4(d) - Electronic Prescribing Standards

CMS hosted a Special Open Door Forum (ODF) focused on clarification of the E-prescribing Final Rule and the adopted standards for e-prescribing that were published in the Federal Register on Monday, November 7, 2005. This rule adopts foundation standards that were not subject to pilot testing because they demonstrated adequate industry experience, and are the first set of final uniform standards for conducting e-prescribing transactions. This was required by MMA Section 101-4(d).

1/1/06: MMA Title I – Medicare Prescription Drug Program

CMS launched the new voluntary prescription drug benefit under Medicare. The new prescription drug benefit will help millions of older Americans and people with disabilities lower the costs they are currently paying for their prescription drugs, make those costs much more predictable, and provide more choices and greater access to high quality care.

What to Expect

Proposed Rule: MMA Section 936(b)(3) - Provider Enrollment Process: Right of Appeal–Hearing Rights

This proposed rule (CMS-6003-P2) would extend appeal rights to all suppliers whose enrollment applications for Medicare billing privileges are disallowed by a carrier or whose Medicare billing privileges are revoked, except for those suppliers covered under other existing appeals provisions of CMS regulations. This rule is required by MMA Section 936(b)(3).

Targeted Release: First Quarter of CY 2006

Notice: MMA Section 623 - Payment for Renal Dialysis Services ESRD Advisory Group Announcement of Meeting – March 2006

This notice (CMS-5033-N7) announces a meeting of the ESRD Advisory Group for March 2006.

Targeted Release: First Quarter of CY 2006

Interim Final Rule: MMA Section 301- Medicare Secondary Payer

This interim final rule with comment period (CMS-6272-IFC) clarifies when CMS may make a conditional Medicare payment when other insurance cannot reasonably be expected to make a prompt payment.

Targeted Release: First Quarter of CY 2006

Notice: MMA Section 434(a) Frontier Extended Stay Clinic Demonstration

This notice (CMS-5030-N) announces the establishment of 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.

Targeted Release: First Quarter of CY 2006

Notice: MMA Section 623 - Demonstration of Bundled Case-Mix Adjusted Payment System for ESRD

This notice (CMS-5034-N) announces a 3-year demonstration to test a fully case-mix adjusted payment system for end stage renal disease (ESRD) services.

Targeted Release: First Quarter of CY 2006

Final Rule: MMA Section 936 (b)(1) - Requirements for Establishing and Maintaining Medicare Billing Privileges and Provider Enrollment Process

This final rule (CMS-6002-F) is needed as part of the Administration's anti-fraud and abuse efforts. It gives CMS the authority to enroll and re-enroll providers, with time frames for re-enrollment. The rule also responds to comments received on the proposed rule and implements section 936 of the MMA, which establishes deadlines for action on enrollments and renewals.

Targeted Release: First Quarter of CY 2006