

CEO/CFO Memo

June 29, 2018

TO: Executive Officers and Chief Financial Officers, Member Institutions

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NCHA Submits Comment Letter Addressing IPPS Proposed Rule for Fiscal Year 2019

On April 24, 2018, the Centers for Medicare & Medicaid Services (CMS) issued its hospital inpatient prospective payment system (IPPS) proposed rule for fiscal year 2019. The proposed rule affects inpatient PPS hospitals, critical access hospitals (CAHs), long-term care hospitals (LTCHs) and PPS-exempt cancer hospitals. Major provisions of the proposed rule related to inpatient PPS, CAHs, and PPS-exempt cancer hospitals include operating payment rate updates, public reporting of standard changes, documentation and coding adjustments, disproportionate share hospital (DSH) payment adjustments and uncompensated care payment, and changes to the hospital-acquired Conditions (HAC) Reduction Program, Hospital Readmissions Reduction Program (HRRP), Hospital Value-Based Purchasing Program, Inpatient Quality Reporting Program and Electronic Health Records Incentive Program (Promoting Interoperability).

NCHA prepared a comment letter that was submitted on Monday, June 25, 2018. We focused our comments on transparency, reducing regulatory barriers, the nationwide rural floor budget neutrality adjustment, and the transition to Worksheet S-10 for determining the amount of uncompensated care provided by hospitals. The comment letter is available on NCHA's website at https://www.ncha.org/wp-content/uploads/2018/06/Comment-Letter_IPPS-for-FY-2019_20180625.pdf.

Reminder - LTCHs and IRFs Have Until July 1, 2018 to Review Preview Reports

Long-term Care Hospital (LTCH) and Inpatient Rehabilitation Facility (IRF) Provider Preview Reports have been updated and are now available. Providers have until July 1, 2018 to review their performance data on quality measures based on Quarter 4 – 2016 to Quarter 3 – 2017 data, prior to the September 2018 LTCH Compare and IRF Compare site refreshes. Corrections to the underlying data will not be permitted during this time however; providers can request a CMS review during the preview period if they believe their data scores displayed are inaccurate. Additional information can be found at: https://go.cms.gov/2tEBDNR and https://go.cms.gov/2tDpRmS.

Palmetto GBA Announces New Way to Submit Wage Index Data

Starting this Fall, providers will be able to electronically submit their wage index and occupational mix data through Palmetto GBA's on-line eServices portal. This new process will ensure that all information is received and loaded directly into Palmetto's electronic workflow system. Providers will receive a confirmation of receipt. Palmetto GBA will be releasing additional information regarding this new enhancement in the upcoming weeks. The complete Provider Communication can be found at: https://bit.ly/2MAshKm.

OIG Posts Updated Work Plan

The Office of Inspector General (OIG) Work Plan sets forth various projects including OIG audits and evaluations that are underway or planned to be addressed during the fiscal year and beyond by OIG's Office of Audit Services and Office of Evaluation and Inspections. The OIG's work planning process is dynamic and adjustments are made throughout the year to meet priorities and to anticipate and respond to emerging issues with the resources available. In June 2018, the OIG added a new project that focuses on the inappropriate denial of services and payment by Medicare Advantage Plans. Additional information can be found at: https://oig.hhs.gov/reports-and-publications/workplan/index.asp.

Palmetto GBA Posts July 2018 Part A Medicare Advisory

The July 2018 Palmetto GBA Medicare Advisory for JM Part A has been posted to the Palmetto GBA website and contains several updates that affect hospitals including but not limited to revisions to Telehealth billing requirements for distant site services, July 2018 update of the hospital outpatient prospective payment system (OPPS), the Medicare Beneficiary Identifier (MBI) Look-up Tool, Part A/B Local Coverage Determinations (LCDs) updates, and upcoming education offerings. The complete Advisory can be found at the following link by clicking on the July 2018 JM Part A Medicare Advisory: https://bit.ly/2wpaXTm.

Palmetto GBA Releases Provider Contact Center Training and Holiday Closure Schedule

The Palmetto GBA Provider Contact Center (PCC) will continue to close up to eight hours per month for customer service representative (CSR) training and staff development. Palmetto's Interactive Voice Response (IVR) unit will be available during these scheduled training sessions for automated customer service transactions. Providers may use Palmetto's on-line provider portal called eServices to obtain claim status, duplicate remittances, patient eligibility and much more. The training closure dates and times can be found at: https://bit.ly/2jYme6s.

Palmetto GBA Provides Summary of Targeted Probe and Educate Teleconference

Palmetto GBA released a summary of the Medical Review Targeted Probe and Educate (TPE) Process Hot Topic teleconference that was held on June 19, 2018 for those providers who were unable to attend. The summary includes answers to questions that were presented during the teleconference. The summary can be found at: https://bit.ly/2IDG4xg.

NCTracks Confirms that Fingerprint Evidence Forms Only Valid for Six Months

NCTracks confirmed that fingerprint evidence forms are only valid for submission up to six months after the fingerprinting is done. Some providers have attempted to upload evidence forms older than six months, which are no longer valid. If it has been more than six months, providers/owners must get their fingerprints retaken with the most recent forms sent via their Message Center Inbox on the secure NCTracks provider portal. These forms have the appropriate case number to validate relevancy.

Please contact Ronnie Cook (rcook@ncha.org or 919-677-4225) or Jeff Weegar (jweegar@ncha.org or 919-677-4231) with any questions.