CERT & You:
Understanding J6 Hospice CERT Denials

Today's Presenters

Corrinne Ball, RN, CPC, CAC, CACO

Provider Outreach and Education Consultant

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Acronyms

Acronyms used in this presentation can be viewed on the **NGSMedicare.com** website. On the **Welcome** page, click on **Provider Resources > Acronyms**.

Today's Presentation

Presentation is available on our website

- Go to http://www.NGSMedicare.com

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- Under the **Register** button for this event, you will see the **Presentation** link

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Objectives

Provide education about the Comprehensive Error Rate Testing (CERT) Program and J6 CERT hospice denials from the 2014 CERT reporting period.

Agenda

- CERT
  - Overview
  - Processes
  - Findings
  - Appeals

- Q & A

CERT Overview

CERT & You

- CERT & You is a J6 provider outreach and education campaign focused on explaining what the CERT program means to you--at a level that is immediately applicable in your practice area.

- The ultimate goal of CERT & You is to reduce the J6 CERT rate by directly engaging with and partnering with you to prevent CERT errors.

CERT History

- The Medicare fee-for-service (FFS) improper payment rate was first measured in 1996.

- The Department of Health and Human Services (HHS) Office of Inspector General (OIG) was responsible for estimating the national Medicare Fee-for-Service improper payment rate from 1996 through 2002

- CMS began producing the Medicare FFS improper payment rate in 2003

CERT Contractors

- CERT Documentation Contractor

  - Responsible for requesting and obtaining documentation to support the payments for the selected claims

- CERT Review Contractor

  - Responsible for reviewing submitted documentation to determine if Medicare payment was supported

CERT Process

CERT Website
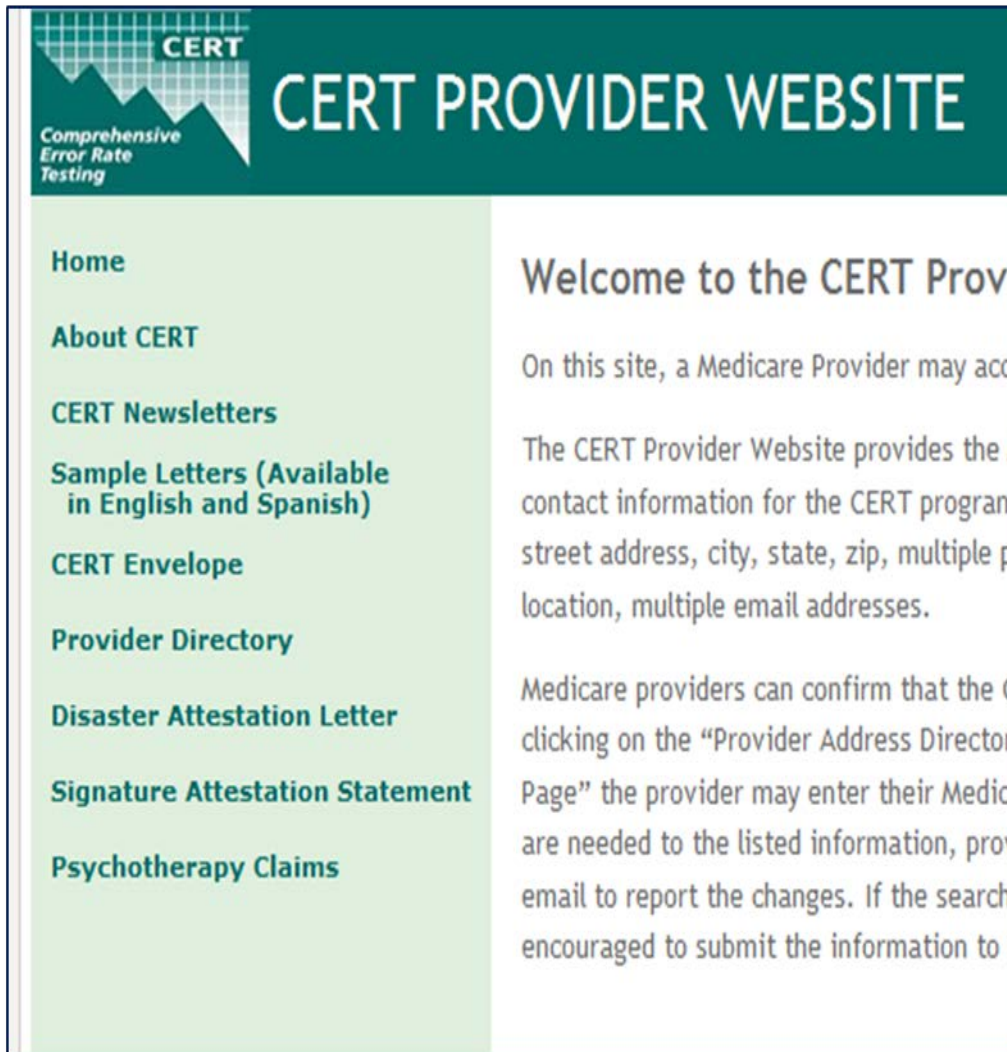
www.certprovider.com

Provider Directory

Provider ID (Medicare #)

Contractor ID HHH

06014 – California

06001- Wisconsin

CERT Requests

The CERT Documentation contractor will send requests for medical records to the billing and ordering providers— either   by letter, phone or fax

CERT Findings

CERT Findings

- CERT findings are used for data analysis and possible review of additional claims and medical records by the Medicare and the RA (formerly known as RAC [contractors])

  - CERT can review claims that were reviewed by Medicare Contractor to be sure of accuracy of contractor's review

  - RA is required to exclude CERT reviewed claims from their review samples but can do additional reviews based on CERT findings

Hospice Percentage of Errors
2014 Preliminary Report
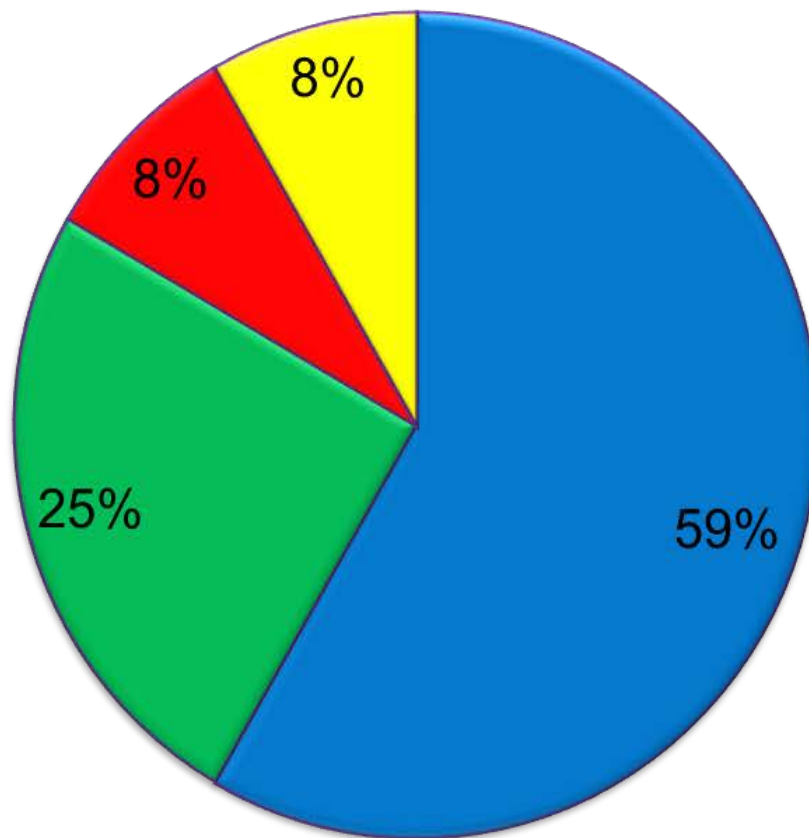
- 90 - Other Errors
- 21 - Insufficient documentation
- 25 - Medical Unnecessary Service or Treatment
- 31 - Service Incorrectly coded

Hospice Percentage of Errors 2015 Interim Report

- 90 - Other Errors
- 21 - Insufficient documentation
- 25 - Medically unnecessary service or treatment

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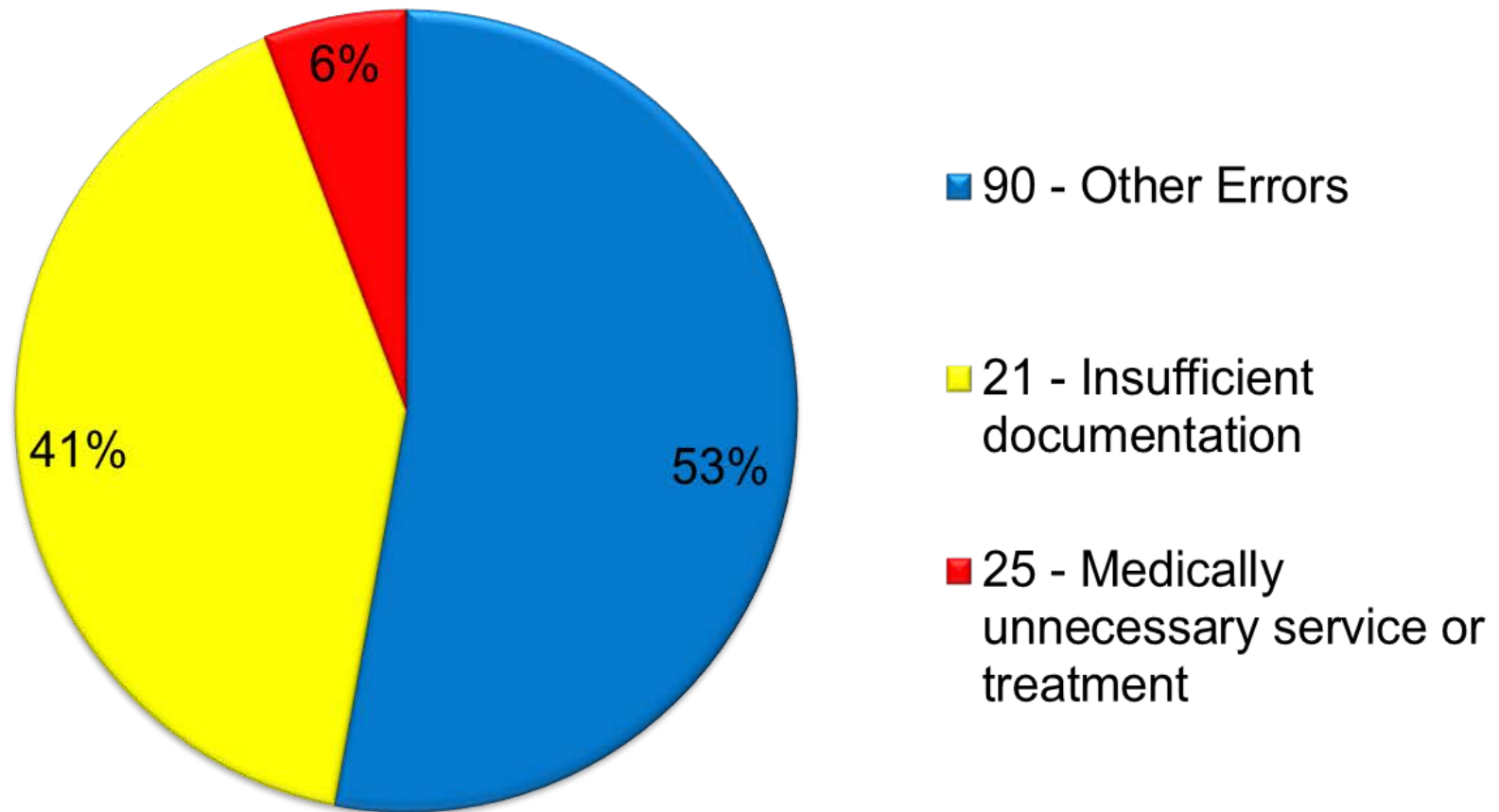
CERT Error Code 21

Insufficient Documentation

Reasons for denials:

Missing Physician Certification

Missing hospice medical director signature on the initial physician certification

Missing the attending physician signature on the initial physician certification

Missing the physician narrative to support a life expectancy of less than six months to live

CMS IOM Publication 100-02 Medicare Benefit Policy Manual Chapter 9 Hospice Section 20.1 Timing and Content of Certification

CERT Error Code 25

Medical Necessity

Terminal Prognosis not supported in the medical records

Local Coverage Determination LCD L-25678 Hospice- Determining Terminal Status

CMS IOM Publication 100-02 Medicare Benefit Policy Manual Chapter 9 Section 10 Requirements- General

CERT Error Code 31

Services Incorrectly Coded

Billed 25 days of routine hospice care and day 5 days of respite care

Should have billed:

  19 days of routine hospice care

  5 days of respite care

  6 days of respite care

CMS IOM Publication 100-04 Claims Processing Manual Chapter 11 Processing Hospice claims Section 30.3 Data Required on the Institutional Claim to Medicare Contractors

CERT Error Code 90

Hospice – No Dollar Errors

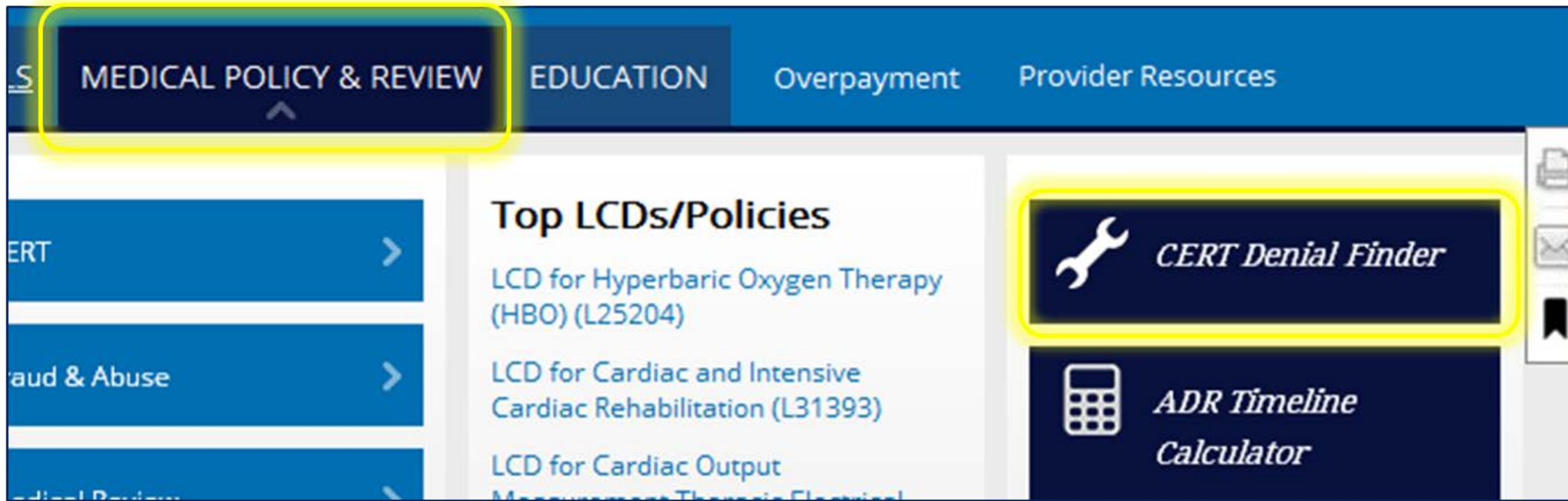Documentation did not support the dates of service billed

Example:

G0154 date of service 11/2/2014

Nurses notes date of service 11/1/2014, 11/3/2014, 11/6/2014

CMS IOM Publication 100-04 Claims Processing Manual Chapter 11 Processing Hospice claims Section 30.3 Data Required on the Institutional Claim to Medicare Contractors
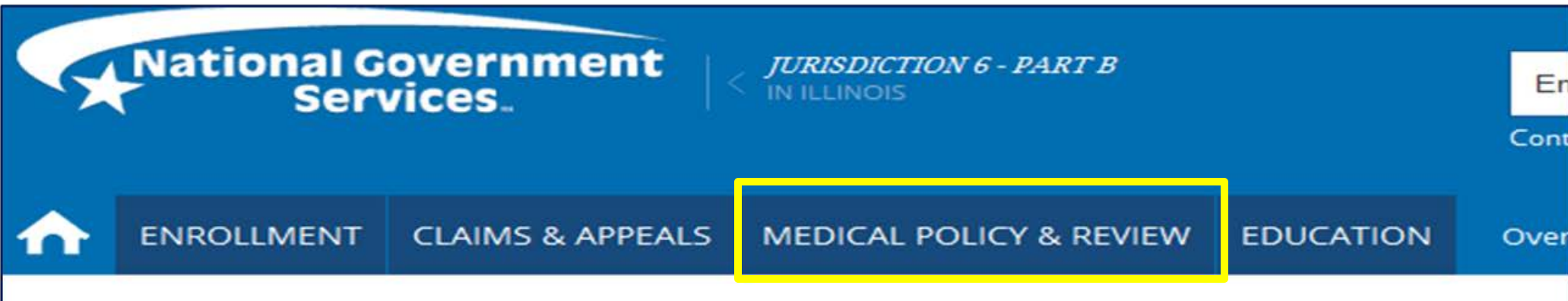
CERT Denial Reason Finder

www.ngsmedicare.com

- CERT Denial Finder
  - CERT Claim Identification Number (CID)

Resources

- www.cms.gov/manuals
  – Publication (Pub)

- www.ngsmedicare.com
  – Local Coverage Determinations (LCD)
  – National Coverage Determination (NCD)

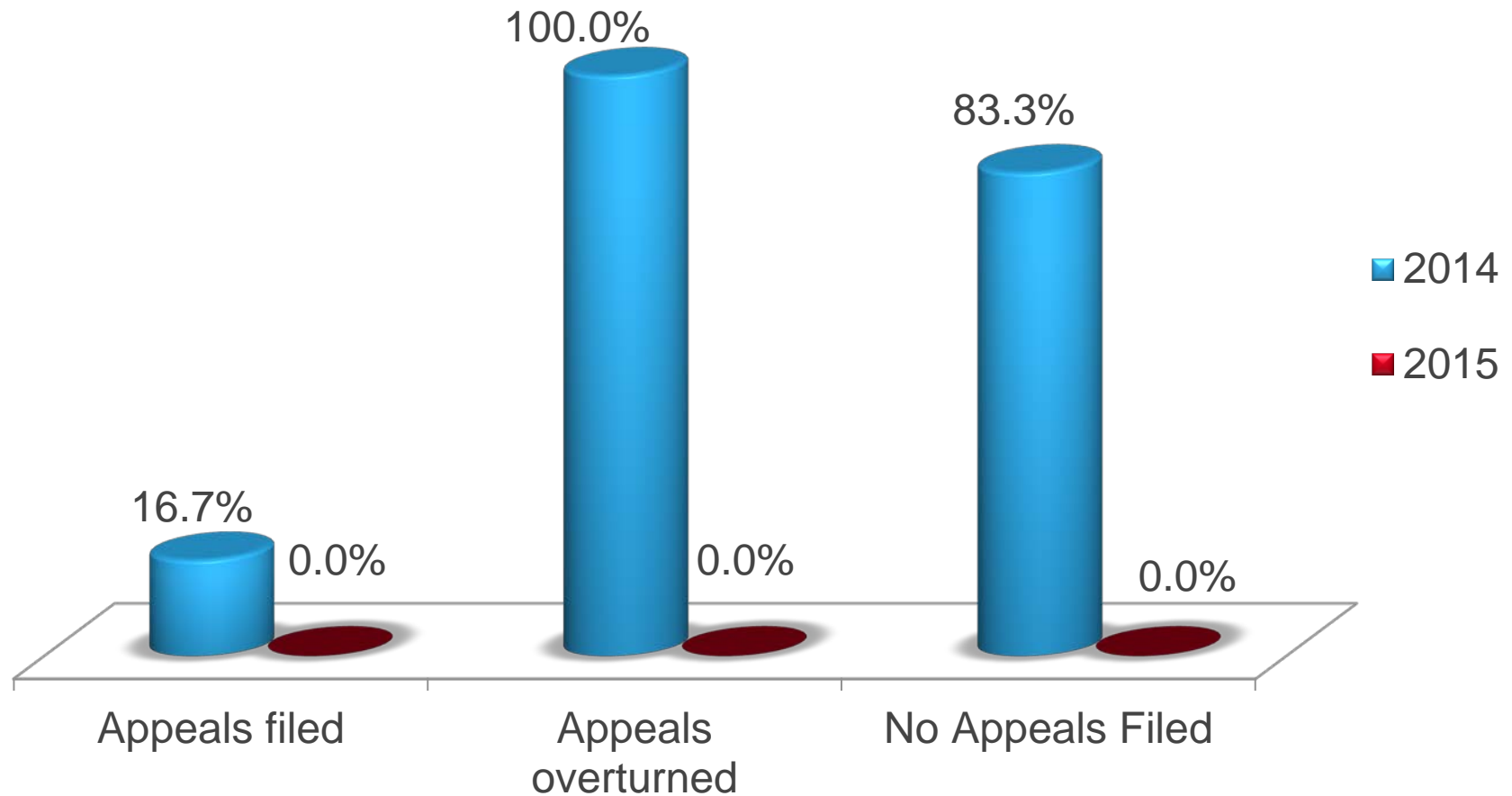# NGSMedicare YouTube Channel

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Jurisdiction 6- HH+H CERT & You

Appeal Process

Hospice CERT Appeals Data

Five Level of Appeals

Level of Appeal	Timely filing	Amount in Controversy
Redetermination	120 days from the denial	No Minimum
Reconsideration	180 days from the redetermination decision	No Minimum
Administrative Law Judge (ALJ)	60 days from the reconsideration decision	$140
Medicare Appeals Council Review	60 days from ALJ decision	No Minimum
Federal Court Review	60 days from the Medicare Appeals Council Decision	$1,040 after 01/01/2014

How to Submit an Appeal

Recommended- NGSConnex

Mail

- Form CMS-20027

Contact Information

CERT Contact Information

Request a copy…	Submit Medical Records
Telephone: (888) 779-7477	Fax: (240) 568-6222 CERT Documentation Office Attn: CID # 9090 Junction Drive, Suite 9 Annapolis Junction, MD 20701

NGS J6 CERT Team Contact Information

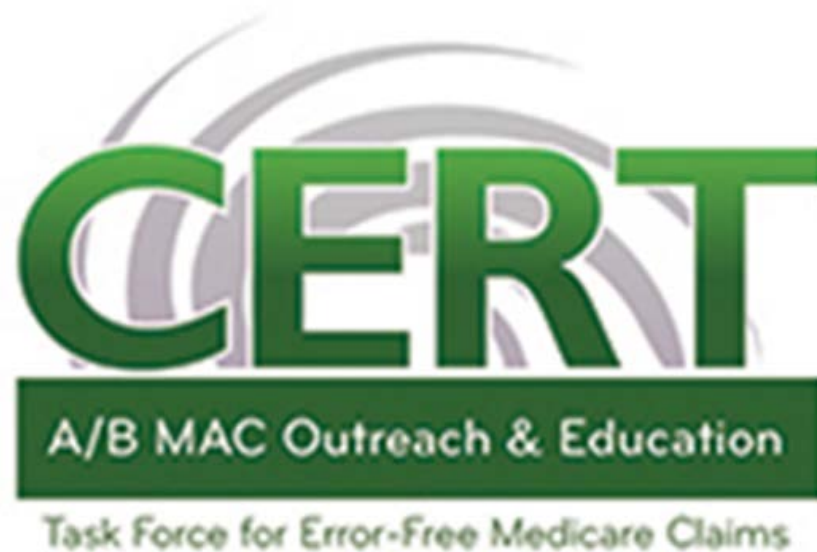## J6CERT@wellpoint.com

Include

- CERT CID #

- State

Never send

- PHI

- PII

CERT A/B MAC Outreach & Education Task Force

CERT A/B MAC Outreach & Education Task Force

- A joint collaboration of the A/B MACs to communicate national issues of concern regarding improper payments to the Medicare Program

- Shared goal of reducing the national improper payment rate as measured by the CERT program

- Partnership to educate Medicare providers on widespread topics affecting most providers and complement ongoing efforts of CMS, the MLN and the MACs individual error-reduction activities within its jurisdictions

Disclaimer

The CERT A/B MAC Outreach & Education Task Force is independent from the CMS CERT team and CERT contractors, which are responsible for calculation of the Medicare fee-for-service improper payment rate.

Participating Contractors

- Cahaba Government Benefit Administrators, LLC/J10

- CGS Administrators, LLC/J15

- First Coast Service Options, Inc./J9

- National Government Services, Inc./J6 and JK

- Noridian Healthcare Solutions, LLC/JE and JF

- Novitas Solutions, Inc./JH and JL

- Palmetto GBA/J11

- Wisconsin Physicians Service Insurance Corporation/J5 and J8

CERT A/B MAC Outreach & Education Task Force

The CERT Task Force educates on common billing errors and contributes educational Fast Facts to the CMS website

- CMS MLN Provider Compliance Fast Facts web page

  - http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/ ProviderCompliance.html

- In addition, the CERT Task Force section on the NGSMedicare.com website provides a link to the CMS MLN Provider Compliance Fast Facts

CERT A/B MAC Outreach & Education Task Force

CERT Task Force Web Page

- Go to our website, http://www.NGSMedicare.com; in the **About Me** drop down box, select your provider type and applicable state, click on **Next,** accept the Attestation. Choose the **Medical Policy & Review** tab, then choose **CERT**, the **CERT Task Force** link is located to the right of the web page.

Task Force Scenario's

- Insufficient documentation
- Documenting therapy and rehabilitation services

Look for new articles added to this page and provided in your Email Updates

CERT A/B MAC Outreach & Education Task Force

CMS works closely with the CERT A/B MAC Task Force and the CERT DME MAC Outreach & Education Task Force

- CMS has a web page dedicated to education developed by the CERT A/B MAC Outreach & Education Task Force

  - http://www.cms.gov/Medicare/Medicare-Contracting/FFSProvCustSvcGen/CERT-Outreach-and-Education-Task-Force.html

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  - numbers
  - special characters (with the exception of <, >, and |)

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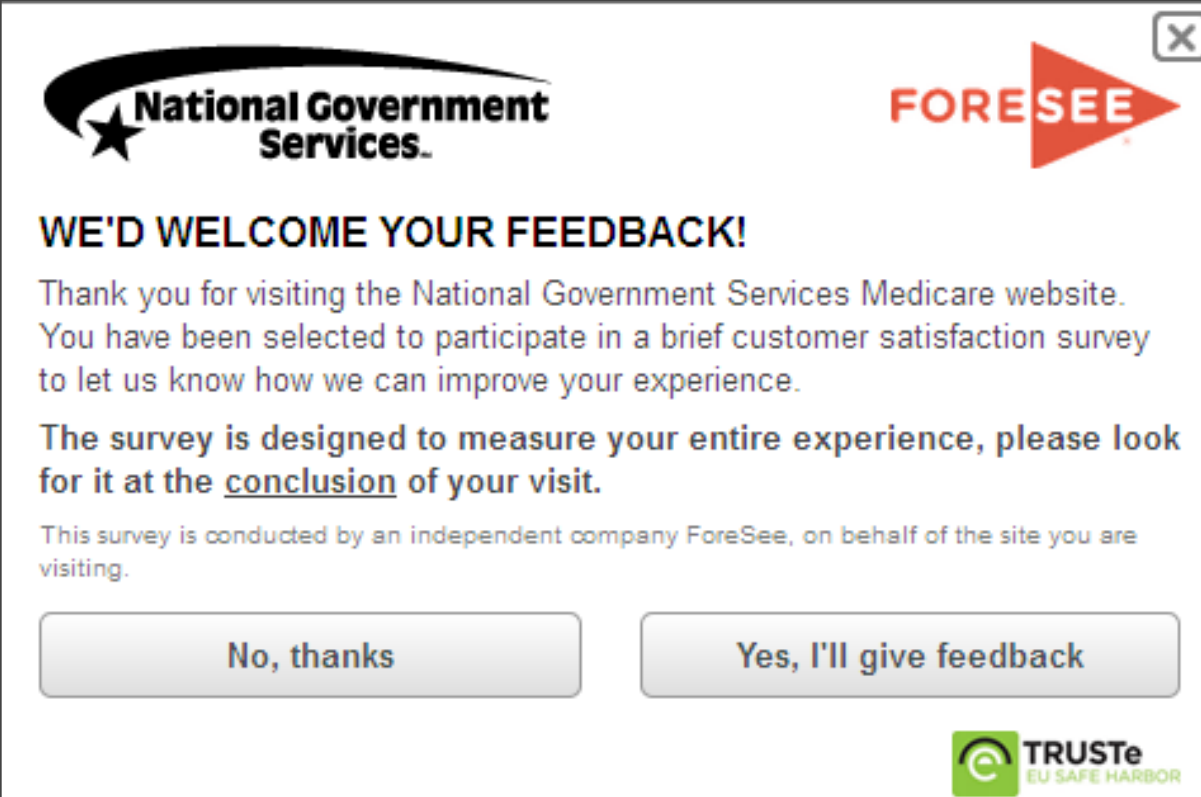- Unsubscribe

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Medicare University

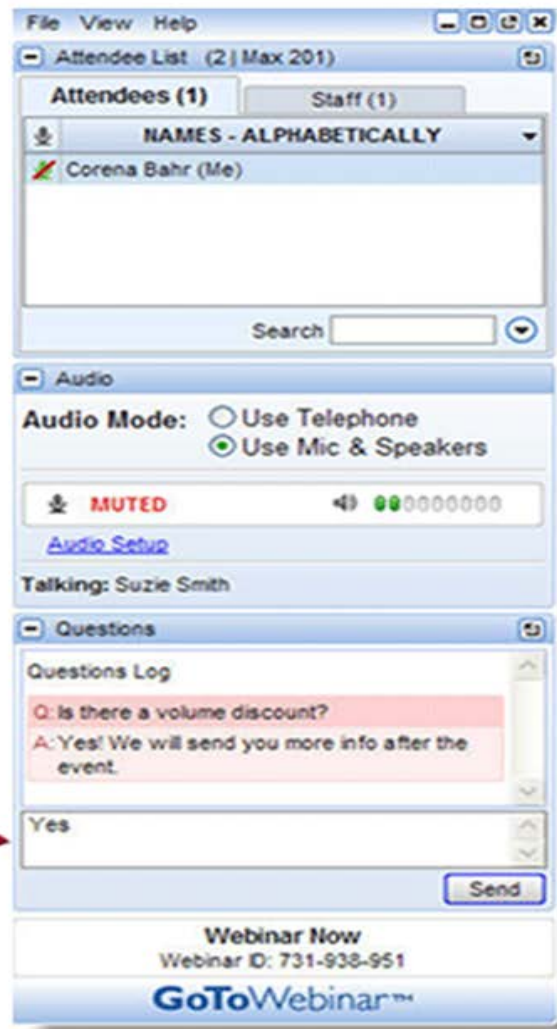Interactive online system available 24/7

Educational opportunities available

- Computer-based training courses
- Teleconferences, webinars, live seminars/face-to-face training

Self-report attendance

Website

- http://www.MedicareUniversity.com

To Ask a Question
Using the Question Box

Medicare University Self-Reporting Instructions

Log on to the National Government Services Medicare University site at
http://www.MedicareUniversity.com

- Topic = **Understanding J6 Hospice CERT Denials**

- Medicare University Credits (MUCs) = **Enter number**

- Catalog Number = To be provided

- Course Code = To be provided

- Visit our website for step-by-step instructions on self-reporting. Click on the **Education** tab, then the **Get Credit** link. This will open the **Get Credit for Completed Courses** web page.

Thank You!

Follow-up email

- Attendees will be provided a Medicare University Course Code

Questions?