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Official CMS news from the Medicare Learning Network®

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News

COVID-19 Vaccine Codes: EUA Effective Date for Janssen Biotech Inc.

On February 27, 2021, the U.S. Food and Drug Administration issued an [Emergency Use Authorization \(EUA\) for the Janssen Biotech Inc.'s COVID-19 Vaccine](#) for the prevention of COVID-19 for individuals 18 years of age and older. Review [Janssen's Fact Sheet for Healthcare Providers Administering Vaccine \(Vaccination Providers\)](#) regarding the limitations of authorized use.

During the COVID-19 Public Health Emergency (PHE), Medicare will cover and pay for the administration of the vaccine (when furnished consistent with the EUA). Review our [payment and HCPCS Level I CPT code structure](#) for specific COVID-19 vaccine information. Only bill for the vaccine administration codes when you submit claims to Medicare; don't include the vaccine product codes when the vaccines are free.

Related links:

- CMS [COVID-19 Provider Toolkit](#)
- CMS [COVID-19 FAQs](#)
- CDC [COVID-19 Vaccination Communication Toolkit](#) for medical centers, clinics, and clinicians
- FDA [COVID-19 Vaccines](#) webpage

COVID-19 Vaccine Administration: Insurance Coverage, MBI, & MSP

CMS updated the [Medicare Billing for COVID-19 Vaccine Shot Administration](#) toolkit:

- Learn who to bill if your patients only have Medicare Part A
- Ask for your patients' Medicare Beneficiary Identifier (MBI) to bill Original Medicare even if they're enrolled in a Medicare Advantage Plan (Part C), or use the look-up tool in your Medicare Administrative Contractor's [portal](#)
- Bill the correct payer by [asking Medicare Secondary Payer \(MSP\) questions](#) and [checking eligibility](#)
- Request payment from the [Provider Relief Fund](#) if your patients don't have insurance coverage

More Information:

- [Check out the COVID-19 provider toolkit](#)
- [See FAQs](#)

COVID-19 FAQs on Medicare FFS Billing to Administer Vaccines

CMS released new [COVID-19 FAQs](#):

Orders:

- Vaccine — See pages 27 (hospitals) and 137 (other providers)
- Monoclonal antibody infusion — See page 137

Billing:

- Vaccine doses or monoclonal antibody products obtained for free — See page 136
- Monoclonal antibody products and infusion — See page 135 (institutional providers) and page 136 (physicians and other clinicians)

Ambulatory Surgical Center temporarily enrolling as a hospital:

- Claim form — See page 152
- Remittance Advice — See page 152
- Bill type and revenue code — See page 153
- Payment — See page 153
- Deactivated provider transaction access number — See page 153

More Information:

- [Read about billing to administer COVID-19 vaccines](#)
- [Check out the COVID-19 provider toolkit](#)

COVID Vaccine Resources for Hard to Reach Patients

The COVID-19 pandemic is disproportionately affecting Medicare-Medicaid dually eligible individuals, racial and ethnic minority groups, and individuals with disabilities. You can help make sure hard to reach Medicare patients get COVID-19 vaccination information during this public health emergency.

More Information:

- CMS Office of Minority Health [COVID-19 Resources on Vulnerable Populations](#) with fact sheets in multiple languages to assist organizations who work with those most vulnerable, such as older adults, those with underlying medical conditions, racial and ethnic minorities, rural communities, and people with disabilities
- CDC [Communication Toolkit](#) for migrants, refugees, and other limited-English-proficient populations

Cybersecurity Resources

Do you know how to prevent and react to cyberattacks that could impact the health and safety of your patients? Learn how with resources from the Office of the Assistant Secretary for Preparedness and Response (ASPR) Technical Resources, Assistance Center, and Information Exchange (TRACIE):

- [Healthcare System Cybersecurity: Readiness & Response Considerations](#)
- [Healthcare Operations Considerations](#) webinar
- [Cybersecurity Topic Collection](#) webpage

More Information:

- [ASPR TRACIE](#) fact sheet
- [ASPR TRACIE](#) website

Nutrition-related Health Conditions: Medicare Covers Preventive Services

Did you know that Medicare covers the following preventive services for nutrition-related health conditions like diabetes, chronic kidney disease, and obesity?

- Medical nutrition therapy
- Diabetes screening
- Diabetes self-management training
- Intensive behavioral therapy for obesity
- Intensive behavioral therapy for cardiovascular disease
- Annual wellness visit

During National Nutrition Month®, encourage your patients to develop healthy eating patterns and make food choices to meet their individual nutrient needs, goals, backgrounds, and tastes.

More Information:

- [Medicare Preventive Services](#) educational tool
- [Preventive Services](#) webpage
- [National Nutrition Month](#) website —“Personalize Your Plate”
- [National Institute of Diabetes and Digestive and Kidney Diseases](#) website
- [Million Hearts®](#) website
- [Find a Registered Dietitian/Nutritional Professional](#)
- Information for your patients on [nutritional therapy services](#), [diabetes screenings](#), [diabetes self-management training](#), [obesity behavioral therapy](#), [cardiovascular behavioral therapy](#), and [yearly “wellness” visits](#)

Compliance

IRF Services: Follow Medicare Billing Requirements

An Office of Inspector General [report](#) found that payments for Inpatient Rehabilitation Facility (IRF) services didn't meet Medicare coverage and documentation requirements for reasonable and necessary care. Review the [IRF Prospective Payment System](#) booklet to help you bill correctly. Additional resources:

- [IRF Annual Update: Prospective Payment System \(PPS\) Pricer Changes for FY 2020](#) MLN Matters Article
- [FY 2019 IRF PPS Final Rule](#)
- [IRF Quality Reporting Program](#) webpage
- [Medicare Benefit Policy Manual Chapter 1](#), Section 110

Claims, Pricers, & Codes

DMEPOS: Corrected 2021 Fee Schedule Amounts

In December, CMS released the 2021 Medicare Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) fee schedule amounts. We identified errors for some items and released revised January 2021 DMEPOS and parenteral and enteral nutrition fee schedule files on March 1, 2021.

More Information:

- [DME Center](#) webpage
- [DMEPOS Fee Schedule](#) webpage

Events

Medicare Part A Cost Report Appeals Listening Session — March 16

Tuesday, March 16 from 1:30 to 3 pm ET

[Register for our Medicare Learning Network listening session.](#)

Medicare Fee-for-Service (FFS) Part A providers can ask for administrative review of their CMS or Medicare Administrative Contractor final determinations through the Medicare Part A appeals process. CMS is reviewing this process, including barriers that impact resolution of issues. During this listening session, CMS seeks your feedback from the following questions:

- Individual states improved their processes for obtaining Medicaid eligibility information. What else causes delays with obtaining Medicaid eligibility supporting documentation?
- Are you reluctant to request reopenings to resolve solely documentation-based reimbursement issues under appeal? Why?
- What resource issues impact your ability to proceed with reopening, administrative resolution, or appeal hearing?

Target Audience:

- All Medicare FFS Part A providers
- Industry-wide stakeholders

Long-Term Care: Dementia-related Psychosis Call — March 23

National Partnership to Improve Dementia Care and Quality Assurance Performance Improvement

Tuesday, March 23 from 1:30 to 3 pm ET

[Register for our Medicare Learning Network call.](#)

During this call, learn about the appropriate assessment, accurate diagnosis, and approaches to care for dementia-related psychosis in the long-term care setting. Hear about customized care strategies for nursing home residents. A question and answer session follows the presentations.

Speakers: Dr. George Grossberg, Dr. Alexis Eastman, Susan Scanland, and Dr. Chad Worz from the Gerontological Society of America's Workgroup on Dementia-Related Psychosis

Target Audience:

- Consumer and advocacy groups
- Nursing home providers
- Surveyor community
- Prescribers
- Professional associations
- Other interested stakeholders

Open Payments & You Call — March 25

Thursday, March 25 from 2 to 3 pm ET

[Register for our Medicare Learning Network call.](#)

Reporting entities submit data to the Open Payments system about payments or transfers of value made to physicians and teaching hospitals. Beginning in April, you have 45 days to review and dispute 2020 payment data before it's published on the CMS website by June 30.

Topics:

- Overview of the Open Payments program and what it means to you
- Program timeline
- Registration process
- Accessing the system
- Critical deadlines for physicians and teaching hospitals to review and dispute data

A question and answer session follows the presentation. See the [Open Payments](#) webpage for program information and resources.

Target Audience:

- Physicians
- Physician office staff
- Teaching hospitals

Publications

Intravenous Immune Globulin Demonstration

CMS released a Medicare Learning Network fact sheet, [Intravenous Immune Globulin Demonstration](#). Learn about:

- Supplier eligibility and participation
- Patient eligibility and participation
- Billing and coding requirements

Multimedia

Section J: Health Conditions: Coding the SPADEs Related to Falls Web-Based Training

During this [web-based training course](#), learn how to assess and code the Standardized Patient Assessment Data Elements (SPADEs) related to falls.

Target audience:

- Home health agencies
- Inpatient rehabilitation facilities
- Long-term care hospitals
- Skilled nursing facilities

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