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Official CMS news from the Medicare Learning Network®

Thursday, April 1, 2021

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News

Repayment of COVID-19 Accelerated and Advance Payments Began on March 30, 2021

CMS issued information about repayment of COVID-19 accelerated and advance payments. If you requested these payments, learn how and when we'll recoup them:

- Identify payments we recovered
- Prepare your billing staff

More Information:

- [COVID-19 Accelerated and Advance Payments](#) webpage
- [MLN Matters Article](#)

COVID-19 Vaccine Administration – No Out-of-Pocket Cost to Patients

If you participate in the [CDC COVID-19 Vaccination Program](#), you must:

- Administer the vaccine with no out-of-pocket cost to your patients for the vaccine or administration of the vaccine

- Vaccinate everyone, including the uninsured, regardless of coverage or network status

You also can't:

- Balance bill for COVID-19 vaccinations
- Charge your patients for an office visit or other fee if COVID-19 vaccination is the only medical service given
- Require additional medical or other services during the visit as a condition for getting a COVID-19 vaccination

Report any potential violations of these requirements to the HHS Office of the Inspector General:

- Call 1-800-HHS-TIPS
- [Submit an online complaint](#)

Submit claims for administering COVID-19 vaccines to:

- [Medicare](#), if your patient has Medicare Part B coverage or, for 2020 and 2021, Medicare Advantage (Part C)
- [Private insurance company](#), including if your patient only has Medicare Part A coverage with supplemental coverage from a private insurer
- [Your state's Medicaid program](#) for patients with Medicaid and Children's Health Insurance Program (CHIP) coverage
- [Health Resources & Services Administration \(HRSA\) COVID-19 Uninsured Program](#), including if your Medicare patient only has Part A coverage with no supplemental coverage

Alcohol Misuse: Medicare Covers Screening & Counseling

Medicare covers alcohol misuse screening and counseling, and your patients pay nothing if you accept assignment. During Alcohol Awareness Month, perform a brief screening and intervention, if appropriate.

More Information:

- [Medicare Preventive Services](#) educational tool
- [Screening, Brief Intervention, and Referral to Treatment Services](#) fact sheet
- [Preventive Services](#) webpage
- [National Institute on Alcohol Abuse and Alcoholism](#) website
- Information for your patients on [alcohol misuse screenings and counseling](#)

Compliance

DMEPOS: Bill Correctly for Items Provided During Inpatient Stays

In a recent [report](#), the Office of Inspector General (OIG) determined that Medicare improperly paid suppliers for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) items provided during inpatient stays. Review the [Medicare DMEPOS Improper Inpatient Payments](#) fact sheet to help you bill correctly.

Additional resources:

- [Medicare Quarterly Provider Compliance Newsletter](#), Volume 9, Issue 2
- [Medicare Claims Processing Manual, Chapter 20](#), Section 10
- [Medicare Claims Processing Manual, Chapter 30](#), Section 130.1
- [Medicare Inappropriately Paid Acute-Care Hospitals for Outpatient Services They Provided to Beneficiaries Who Were Inpatients of Other Facilities](#) OIG Report
- [Medicare Paid New England Providers Twice for Nonphysician Outpatient Services Provided Shortly Before or During Inpatient Stays](#) OIG Report
- [Medicare Continues To Pay Twice for Nonphysician Outpatient Services Provided Shortly Before or During an Inpatient Stay](#) OIG Report

Claims, Pricers, & Codes

COVID-19: RHC & FQHC Lump Sum Payments

Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs) may request lump sum payments for administering COVID-19 vaccines in advance of cost report settlement. CMS will pay you for COVID-19 vaccines and administration at 100% reasonable cost like influenza and pneumonia vaccines. Contact your [Medicare Administrative Contractor](#) for more information.

Events

Medicare Part A Cost Report: Easier File Uploads for e-Filing in MCR eF Webcast — April 29

Thursday, April 29 from 1 - 2:30 pm ET

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

Medicare Part A providers: Learn about the new user-friendly upload feature for the Medicare Cost Report e-Filing (MCR eF) system. The new feature allows you to:

- Submit documents without turning them into ZIP files
- Tag documents
- Get alerts about missing documents

Also during this webcast:

- Get an overview of the system
- Attend a Q&A session

Use MCR eF to:

- Submit cost reports (Individually or in bulk) for fiscal years ending on or after December 31, 2017.
- Track the status of cost reports with fiscal years ending after December 31, 2009.
- You have the option to electronically transmit your cost report through MCR eF or mail or hand deliver it to your Medicare Administrative Contractor. You must use MCR eF if you choose to submit electronically.

You may send questions in advance to OFMDPAOQuestions@cms.hhs.gov with “MCR eF Webcast” in the subject line. We’ll answer your questions during the webcast or use them to develop educational materials. For more information, see the [MLN Matters Article](#) and [webpage](#).

If you can’t stream audio through your computer for this webcast, you can call in.

Target Audience:

- Medicare Part A providers
- Entities that file cost reports for providers

MLN Matters® Articles

New Provider Enrollment Administrative Action Authorities

CMS issued a new MLN Matters Special Edition Article SE21003 on [New Provider Enrollment Administrative Action Authorities](#). Learn about new revocation, denial, and supporting authorities to stop fraud, waste, and abuse.

April 2021 Quarterly Update to HCPCS Codes Used for Skilled Nursing Facility (SNF) Consolidated Billing (CB) Enforcement

CMS issued a new MLN Matters Article MM12212 on [April 2021 Quarterly Update to HCPCS Codes Used for Skilled Nursing Facility \(SNF\) Consolidated Billing \(CB\) Enforcement](#). Learn about file revisions for 2021, 2020, 2019, and 2017.

Changes to the Laboratory National Coverage Determination (NCD) Edit Software for July 2021

CMS issued a new MLN Matters Article MM12171 on [Changes to the Laboratory National Coverage Determination \(NCD\) Edit Software for July 2021](#). Learn about software changes for clinical diagnostic laboratory services.

Claims Processing Instructions for National Coverage Determination (NCD) 20.4 Implantable Cardiac Defibrillators (ICDs)

CMS issued a new MLN Matters Article MM12104 on [Claims Processing Instructions for National Coverage Determination \(NCD\) 20.4 Implantable Cardiac Defibrillators \(ICDs\)](#). Learn about changes for services provided on or after February 15, 2018.

Update to the Manual for Telephone Services, Physician Assistant (PA) Supervision, and Medical Record Documentation for Part B Services

CMS issued a new MLN Matters Article MM11862 on [Update to the Manual for Telephone Services, Physician Assistant \(PA\) Supervision, and Medical Record Documentation for Part B Services](#). Learn how CMS clarified the manual to bring it in line with payment policy.

Multimedia

Medicare Part A Cost Report Appeals Listening Session: Audio Recording & Transcript

An [audio recording](#) and [transcript](#) are available for the [March 16](#) Medicare Learning Network listening session. Through the Medicare Part A appeals process, you can ask for administrative review of your CMS or Medicare Administrative Contractor final determinations.

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