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Official CMS news from the Medicare Learning Network®

Friday, April 16, 2021

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News

Medicare FFS Claims: 2% Payment Adjustment (Sequestration) Suspended Through December

The Coronavirus Aid, Relief, and Economic Security (CARES) Act suspended the sequestration payment adjustment percentage of 2% applied to all Medicare Fee-for-Service (FFS) claims from May 1 through December 31, 2020. The Consolidated Appropriations Act, 2021, extended the suspension period to March 31, 2021. An Act to Prevent Across-the-Board Direct Spending Cuts, and for Other Purposes, signed into law on April 14, 2021, extends the suspension period to December 31, 2021.

Medicare Administrative Contractors will:

- Release any previously held claims with dates of service on or after April 1
- Reprocess any claims paid with the reduction applied

You don't need to take any action.

COVID-19 Vaccine: Check Medicare Eligibility Starting April 16

Starting April 16, in addition to screening your patients, you can [check Medicare eligibility](#) for COVID-19 vaccine administration history from Fee-for-Service (FFS) claims paid for calendar years 2020 and 2021. This includes Medicare Advantage patients.

You can get the following eligibility information for each paid vaccine administration claim:

- CPT or HCPCS codes
- Date of service

- National provider identifier for who administered the vaccine

We can only provide this information if the provider billed Medicare for administering the vaccine. If your patients got vaccinated and the provider didn't submit a Medicare claim (like if they got vaccinated at a free event), ask your patients about their COVID-19 vaccination history.

Johnson & Johnson COVID-19 Vaccine: Information for Long Term Care Facilities

CMS is sharing an update from the CDC:

On April 13, 2021, [CDC and FDA recommended a pause](#) in the use of the Johnson & Johnson (Janssen) COVID-19 vaccine pending an investigation into six reported U.S. cases of a rare and severe type of blood clot in individuals who received the vaccine. COVID-19 vaccine safety is a top priority for the federal government, and CDC takes all reports of health problems following COVID-19 vaccination very seriously.

If any residents or staff in your facility develop severe headache, abdominal pain, leg pain, or shortness of breath within three weeks of receiving the J&J vaccine, please seek medical care, and report the event to the Vaccine Adverse Event Reporting System at <https://vaers.hhs.gov/reportevent.html>.

CDC has notified all federal pharmacy partners about the recommendation to pause the use of the J&J vaccine and is exploring options to minimize any potential interruption in ongoing access to vaccine for long-term care facility (LTCF) residents and staff. Importantly, CDC is not seeing these events with the Pfizer-BioNTech or Moderna COVID-19 vaccines.

We realize there may be concern among LTCF staff and residents who have received the J&J vaccine, but it's important to note these adverse events appear to be extremely rare - with six reported cases out of more than 6.8 million doses of J&J vaccine administered in the U.S.. All of the cases occurred among women between the ages of 18 and 48, with symptom onset 6 to 13 days after vaccination.

Additional Resources:

- [Joint Media Call: FDA & CDC to Discuss Janssen COVID-19 Vaccine](#)
- Latest News from [CDC's Health Alert Network](#)
- [Frequently Asked Questions about VAERS Reporting for COVID-19 Vaccines](#)

Medicare Telehealth Services: Updated List

On March 30, CMS published an updated [Medicare telehealth services list](#). Due to the public health emergency, we temporarily added many audiology and speech-language pathology services, effective March 1.

Medicare Pays to Help Patients Plan

Did you know that Medicare pays for Advance Care Planning (ACP)? There are 2 ways to provide this covered service:

- Optional element of [Medicare Wellness Visit](#)
- Separate [Medicare Part B medically necessary service](#)

During National Health Care Decisions Day, discuss ACP, including advance directives, with your patients.

More Information:

- [ACP](#) fact sheet
- [The Conversation Project](#) website
- Information for your patients on [ACP](#)

Sexual Health: Medicare Covers Preventive Services

Did you know that Medicare covers the following preventive services to protect your patients' sexual health?

- Screening for Sexually Transmitted Infections (STIs) and high intensity behavioral counseling to prevent STIs
- Hepatitis B screening
- Hepatitis B shot and administration
- Human Immunodeficiency Virus (HIV) screening

During Sexually Transmitted Disease (STD) Awareness Week, take 3 simple actions to protect your patients: talk, test, and treat.

More Information:

- [Medicare Preventive Services](#) educational tool
- [Preventive Services](#) webpage
- [CDC STDs](#) webpage
- [CDC STD Awareness Week](#) webpage
- Information for your patients on [STI screenings and counseling](#), [Hepatitis B virus infection screenings](#), [Hepatitis B shots](#), and [HIV screenings](#)

Compliance

Telehealth Services: Bill Correctly

An [Office of Inspector General \(OIG\) report](#) found that CMS improperly paid for some telehealth claims associated with services that didn't meet Medicare requirements. Watch the [Medicare Coverage and Payment of Virtual Services](#) video to help you bill correctly. Additional resources:

- [Telehealth Services](#) Medicare Learning Network booklet
- [Medicare Claims Processing Manual, Chapter 12](#), Section 190
- [Medicare Telehealth Payment Eligibility Analyzer](#)
- [List of Covered Telehealth Services](#) webpage

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

Multimedia

IRF Providers: Assessment of Cognitive Function Web-Based Training

During this [web-based training course](#), learn how to conduct a standardized cognitive assessment and brief interview for mental status. Visit the [Inpatient Rehabilitation Facility \(IRF\) Quality Reporting Program Training](#) webpage for more information.

Diagnosis Coding: Using the ICD-10-CM Web-Based Training — Revised

A revised Medicare Learning Network [Diagnosis Coding: Using the ICD-10-CM](#) web-based training course is available. Learn how to:

- Identify structure and format
- Recognize features
- Find codes

Visit the [MLN Web-Based Training](#) webpage for a current list of courses.

Procedure Coding: Using the ICD-10-PCS Web-Based Training — Revised

A revised Medicare Learning Network [Procedure Coding: Using the ICD-10-PCS](#) web-based training course is available. Learn how to:

- Identify structure and format
- Recognize guidelines
- Find codes

Visit the [MLN Web-Based Training](#) webpage for a current list of courses.

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