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News

COVID-19: Vaccinate Your Patients

Help protect your patients from COVID-19. Medicare covers the COVID-19 vaccine administration. There's no cost to your Medicare patient for the vaccine and its administration.

Find out if your Medicare patient is fully vaccinated:

- <u>Check Medicare eligibility</u> for COVID-19 vaccine administration history from Fee-for-Service claims paid for calendar years 2020 and 2021. This includes Medicare Advantage patients.
- You'll get the CPT or HCPCS codes, date of service, and national provider identifier for who
 administered the vaccine for each paid vaccine administration claim.
- If you don't see information about Medicare claims, ask your patients about their COVID-19 vaccination history; they may have been vaccinated, and the provider didn't submit a Medicare claim (like if they got vaccinated at a free event).

More Information:

- <u>COVID-19 Provider Toolkit</u>: Enroll with Medicare to administer the vaccine; get information on coding, payment, and billing
- <u>CDC Vaccines & Immunizations</u> webpage: Enroll with the CDC to get the vaccine; get information on training, reporting, and support
- CDC Vaccines and Administration webpage: How to talk to your patients about COVID-19 vaccination

CMS Resumes Targeted Probe & Educate Program

CMS is restarting the <u>Targeted Probe and Educate (TPE) program</u> to help educate providers and reduce future denials and appeals. If your Medicare Administrative Contractor audits you, take advantage of the TPE education, and get up to 3 rounds of educational claim review to help you bill accurately.

Compliance

Cardiac Device Credits: Medicare Billing

A 2018 Office of the Inspector General report found that payments for recalled cardiac medical devices didn't comply with Medicare requirements for reporting manufacturer credits. Hospitals didn't adjust these claims with the right condition codes, value codes, or modifiers to reduce payment, as required. Review the Medicare Billing for Cardiac Device Credits fact sheet to avoid overpayment recoveries.

More Information:

- Medicare Claims Processing Manual, Chapter 3, Section 100.8
- Medicare Claims Processing Manual, Chapter 4, Section 61.3.5

Claims, Pricers, & Codes

Non-Drug & Non-Biological Items and Services: HCPCS Application Summaries & Coding Decisions

CMS published the first bi-annual 2021 <u>HCPCS Application Summaries and Coding Decisions</u>. Visit the <u>HCPCS Level II Coding Decisions</u> webpage for more information.

The October 2021 HCPCS update file will be available soon on the Alpha-Numeric HCPCS webpage.

MLN Matters® Articles

Internet Only Manual Updates to Pub. 100-01, 100-02, and 100-04 to Implement Consolidated Appropriations Act Changes and Correct Errors and Omissions (SNF)

Skilled Nursing Facilities (SNFs): Learn about changes to clarify existing content.

Internet Only Manual Updates to Publication (Pub.) 100-02 to Implement Updates to Policy and Correct Errors and Omissions (Inpatient Rehabilitation Facility (IRF))

IRFs: Learn about finalized policies.

New Waived Tests

Learn about waived laboratory tests, effective October 1.

Update to Hospice Payment Rates, Hospice Cap, Hospice Wage Index and Hospice Pricer for FY 2022

Learn about this annual update.

Multimedia

SNF Section K: Height, Weight, and Nutritional Approaches Web-Based Training

This <u>web-based training course</u> for Skilled Nursing Facility (SNF) providers covers assessment and coding of K0200: Height and Weight and K0500: Nutritional Approaches.

Visit the SNF Quality Reporting Program Training webpage for more information.

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