



# mlnconnects

Official CMS news from the Medicare Learning Network®

**Thursday, June 18, 2020**

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## News

### Hospitals: Submit Medicare GME Affiliation Agreements by October 1 During the COVID-19 PHE

Two or more teaching hospitals may form a Medicare Graduate Medical Education (GME) affiliated group to aggregate direct and/or indirect medical education resident caps to provide flexibility for cross-training residents. During the Public Health Emergency (PHE), teaching hospitals may have until October 1, 2020 (rather than July 1 or June 30, 2020) to submit new or amended Medicare GME affiliation agreements. As under existing procedures, hospitals should email new and/or amended agreements to CMS at [Medicare\\_GME\\_Affiliation\\_Agreement@cms.hhs.gov](mailto:Medicare_GME_Affiliation_Agreement@cms.hhs.gov), and indicate in the subject line whether the Medicare GME affiliation agreement is a new one or an amended one. Copies must be sent to the hospitals' Medicare Administrative Contractors as well.

For More Information:

- [COVID-19 Emergency Declaration Blanket Waivers for Health Care Providers](#): See top of page 9 (location may change if document is updated)
- [MLN Matters Article SE20011](#): Clarification of other key waivers

## Claims, Pricers & Codes

## COVID-19 Diagnostic Laboratory Tests: Billing for Clinician Services

Physicians and Non-Physician Practitioners (NPPs): Here are several reminders related to billing for COVID-19 symptom and exposure assessment and specimen collection performed on and after March 1, 2020:

- Use CPT code 99211 to bill for assessment and collection provided by clinical staff (such as pharmacists) incident to your services, unless you are reporting another Evaluation and Management (E/M) code for concurrent services. This applies to all patients, not just established patients.
- Submit the CS modifier with 99211 (or other E/M code for assessment and collection) to waive cost sharing.
- Contact your Medicare Administrative Contractor if you did not include the CS modifier when you submitted 99211 so they can reopen and reprocess the claim.
- We will automatically reprocess claims billed for 99211 that we denied due to place of service editing.

## Events

### COVID-19: Lessons from the Front Lines Call — June 19

Friday, June 19 from 12:30 to 2 pm ET

These calls are a joint effort between CMS Administrator Seema Verma, Food and Drug Administration (FDA) Commissioner Stephen Hahn, MD, and the White House Coronavirus Task Force. Physicians and other clinicians: Share your experience, ideas, strategies, and insights related to your COVID-19 response. There is an opportunity to ask questions.

To Participate:

- Conference lines are limited; we encourage you to join via [audio webcast](#)
- Or, call 833-614-0820; Access Code: 2258722

For More Information:

- [Coronavirus.gov](https://www.cdc.gov/coronavirus)
- [CMS Current Emergencies](#) website
- [Podcast and Transcripts](#) webpage: Audio recordings and transcripts

Target Audience: Physicians and other clinicians.

### Medicare Part A Cost Report: New Online Status Tracking Feature Call — July 9

Thursday, July 9 from 1 to 2:30 pm ET

[Register](#) for Medicare Learning Network events.

Medicare Part A providers: Learn about updates to the Medicare Cost Report e-Filing (MCR eF) system that allow tracking from submission through finalization. Topics:

- Overview of new online status tracking, including functionality and layout
- Recap of how to access the system and transmit your report
- Frequently asked questions

Use MCR eF to:

- Submit cost reports with 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 electronic submission.

A question and answer session follows the presentation; however, attendees may email questions in advance to [OFMDPAOQuestions@cms.hhs.gov](mailto:OFMDPAOQuestions@cms.hhs.gov) with “Medicare Cost Report e-Filing System Call” in the subject line.

We may address these questions during the call or use them for other materials later. For more information, see the [MCR eF](#) MLN Matters Article and [MCR eF](#) webpage.

Target Audience: Medicare Part A providers and entities that file cost reports for providers.

## MLN Matters® Articles

### New Point of Origin Code for Transfer from a Designated Disaster Alternate Care Site

A new MLN Matters Article MM11836 on [New Point of Origin Code for Transfer from a Designated Disaster Alternate Care Site](#) is available. Learn about Code "G", effective July 1.

### July 2020 Update of the Hospital Outpatient Prospective Payment System (OPPS)

A new MLN Matters Article MM11814 on [July 2020 Update of the Hospital Outpatient Prospective Payment System \(OPPS\)](#) is available. Learn about changes to payment policies and billing instructions.

### Quarterly Update for Clinical Laboratory Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment

A new MLN Matters Article MM11815 on [Quarterly Update for Clinical Laboratory Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment](#) is available. Learn about the data reporting period for clinical diagnostic laboratory tests, COVID-19 updates, and new codes.

### Quarterly Update to Home Health (HH) Grouper

A new MLN Matters Article MM11839 on [Quarterly Update to Home Health \(HH\) Grouper](#) is available. Learn about the October software update, including annual diagnosis code changes.

### NCD (20.32) Transcatheter Aortic Valve Replacement (TAVR) — Revised

A revised MLN Matters Article MM11660 on [NCD \(20.32\) Transcatheter Aortic Valve Replacement \(TAVR\)](#) is available. This article was revised to reflect a revised change request issued on June 10.

### Value-Based Insurance Design (VBID) Model – Implementation of the Hospice Benefit Component — Revised

A revised MLN Matters Article MM11754 on [Value-Based Insurance Design \(VBID\) Model – Implementation of the Hospice Benefit Component](#) is available. The effective date is January 1, 2021, when the hospice election start date is on or after January 1, 2021, and prior to January 1, 2025.

## Publications

### CLIA Program and Medicare Laboratory Services — Revised

A revised [CLIA Program and Medicare Laboratory Services](#) Medicare Learning Network Fact Sheet is available. Learn about:

- Enrollment
- Types of laboratory certificates
- Test method categorization

## Medicare Preventive Services — Revised

A revised [Medicare Preventive Services](#) Medicare Learning Network Educational Tool is available. Learn about:

- Coding
- Coverage
- Copayment/coinsurance and deductible

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