

**Provider Education and Training Quarterly Meeting  
Minutes  
January 15, 2003**

**Attendees:**

Anita Antkowiak, CareFirst of MD; Kim Droboniku, CareFirst of MD; Jason Kerr, CareFirst of MD; Valeri Ritter, CareFirst of MD; Maria Persaud, CareFirst of MD; Ella Glover, CareFirst of MD; Diane Zekoll, CareFirst of MD; Bill Foster, St. Agnes Health Care; Erma Brutscher, Johns Hopkins Health System, Randy Zimmerman JHHS, Cyndi Benson, I.H.S., Nigel Jamison, Ultimate Renal Care; Patrick Liedtka , Centers for Medicare and Medicaid Services; Pat Lowery, Centers for Medicare and Medicaid Services; Angie Ligon, Maryland Hospital Association.

Anita Antkowiak, supervisor of Provider Education and Training, welcomed everyone to the meeting. Maria Persaud and Valeri Ritter were introduced as the newest members of the Provider Relations team. Anita explained the purpose and expectations of the meeting. Members are expected to bring ideas to assist with the development of new training, providers are to take back information to your counterparts.

**CMS Updates-** A schedule was distributed for the Open Door Forum phone calls. This is an excellent forum to express your concerns; the issues are directed to the highest level of CMS, issues are resolved. There are 12 different calls based on provider/supplier type. You can also dial in up to 72 hours after the call to listen to the call.

**FI Updates-**

Anita Antkowiak updated the group on a new seminar we are developing on Admissions, the purpose is to bring admissions and billing staff together to explain the importance of working together and how information gathered at the time of admission is important to billing. Possible topics for discussion are MSP questionnaire, MSP audit and conditional payments.

Advanced Medicare is also going to be changing topics. Medical Review issues will be more of a focus.

Anita Antkowiak gave a live demonstration of the new provider training schedule feature on our web site. It lists available training course's, descriptions, locations of workshops, dates and times. When someone registers it also will tell him or her if space is available and will automatically send a confirmation. To access the web site: [www.marylandmedicare.com](http://www.marylandmedicare.com)

Randy Zimmerman suggested including system down time on our web site, Anita explained that we usually get it out on our phone message. We will try to include it on our web site, Anita explained that we have to rely on a person at our corporate office to update the web site.

Anita also discussed the therapy cap; we have received many questions on this issue. At this time the therapy cap was put on hold, continue business as usual.

An issue was brought up about TRICARE not appearing on HIQA. This is becoming an issue for providers who can not determine who the correct payer is; beneficiaries do not always provide all of their insurance cards. CMS has agreed to research this further.

Kim Droboniku passed out a handout on the January 2003 changes to Direct Data Entry (DDE). Listed below are the highlights:

Page 1- Hour & Minutes were added for the time a patient was admitted.

Page 3- IDE (Investigational Device Exemption) Number was added. 1 number per claim

Page 5- Employment status no longer needed must enter sex and date of birth with MSP information.

Jason Kerr discussed the top ten reason codes that claims were returned to providers.

Diane Zekoll advised the group to pay attention to NCD's and LMRP's. Make sure your coders are coding accurately. It appears that denials on NCD's involve inaccurate coding, not medical necessity. SNF's also need to be careful with their HIPPS codes, billing the correct modifier is important on the claim. It is also important to bill the correct assessment reference date (ARD) and the appropriate days associated with the ARD and the modifiers. The ARD is not the same as the admission date.

**Round Table Discussion:**

Erma Brutscher brought up crossover issues. It is still a significant problem with CareFirst . Angie Ligon expressed that CareFirst is going to be discussing this issue at the next MHA meeting in a few weeks.

Erma Brutscher also asked if a report could be posted to our web site that a provider could access by reason codes returned by a provider. She is not looking for the current report that only provides a snap shot, but something that would provide expanded information. Anita advised the only problem with the web site, would be protected information and access. Cyndy Benson from I.H.S., explained that she gets a report that is very helpful. Jason Kerr is going to find out what report she is getting , and if it is something we can do for all providers.

Cyndy Benson asked when HIQA was going to change to ELGA as discussed at the last meeting. We have no further updates on this topic.

Nigel Jamison has contacted several renal facilities and their main concern involves HIPAA and how to prepare, Anita advised that we have not been told we are going to have any formal training. Several members from the group suggested consultants that specialize in HIPAA. The immediate concern is the privacy piece. It was also suggested to look at the CMS web site, HIPAA page, they also have a HIPAA provider hotline number posted as well.

CMS announced the name of this meeting is changing from PET to PCOM (Provider Communication).

The next meeting will be on Wednesday, April 16, 2003.