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Official CMS news from the Medicare Learning Network®

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News

Improving Accuracy of Medicare Payments

The U.S. Bureau of Labor Statistics (BLS) conducts numerous surveys of hospitals and health care providers that are used by the government to make economic decisions that affect the entire medical care system. Key users include CMS, the Federal Reserve Bank, and the U.S. Congress. CMS uses these surveys to adjust Medicare Fee-for-Service payments each year, affecting approximately \$300 billion in payments.

If you're contacted by BLS, please participate in the survey to help ensure the data are as accurate as possible. Recently, many health care providers didn't complete the survey, which can reduce the representativeness of the data and increase volatility in estimates. Your participation in these surveys helps address these issues and increase the validity of the data. Participation is voluntary, confidential, and the data are only used for statistical purposes.

More Information:

- [BLS Survey Respondents](#) webpage
- [BLS Confidentiality Pledge and Laws](#) webpage
- [CMS Market Basket Data](#) webpage
- [BLS Geographic Information](#) webpage: Contact a BLS expert or get information on surveys, data, and reports

Cardiovascular Health: Medicare Covers Screening & Therapy

Medicare covers cardiovascular disease screening tests and intensive behavioral therapy for cardiovascular disease. Your patients pay nothing if you accept assignment. During American Heart Month, help your patients identify their risk factors and make healthy lifestyle choices.

More Information:

- [Medicare Preventive Services](#) educational tool
- [Preventive Services](#) webpage
- [Million Hearts®](#): An HHS initiative to prevent a million heart attacks and strokes

- [CDC Heart Disease](#) webpage
- [American Heart Month](#) webpage
- Information for your patients on cardiovascular [disease screenings](#) and [behavioral therapy](#)

Claims, Pricers, & Codes

OPPS Pricer File: January 2021

CMS posted the first quarter 2021 Pricer text file and outpatient provider specific file data on the [Outpatient Prospective Payment System \(OPPS\) Pricer](#) webpage.

The outpatient provider specific file doesn't include the supplemental wage index indicator and fields, which are used to apply the 5% cap on wage index decreases. We anticipate adding this information to the file in March. This missing data won't impact claims processed through the Medicare claims processing systems but may impact claims priced using this file.

FQHC Claims: Retroactive Adjustment for Geographic Adjustment Factor

Due to the extension of the work geographic index floor under Section 101 of the Consolidation Appropriations Act, 2021, CMS will retroactively adjust Federally Qualified Health Center (FQHC) claims. Medicare Administrative Contractors will adjust FQHC claims with dates of service on or after January 1 until the revised calendar year 2021 geographic adjustment factor table is implemented on or about February 15.

HCPCS Code G2211 is a Bundled Service & Not Separately Paid

Medicare Administrative Contractors are denying separate payment for HCPCS code G2211: "Visit complexity inherent to evaluation and management associated with medical care services that serve as the continuing focal point for all needed health care services and/or with medical care services that are part of ongoing care related to a patient's single, serious condition or a complex condition. (Add-on code, list separately in addition to office/outpatient evaluation and management visit, new or established)."

Under Section 113 of the Consolidated Appropriations Act, HHS is not paying for this code under the Physician Fee Schedule until January 1, 2024. HCPCS code G2211 is a bundled service. Medicare Administrative Contractors will automatically reprocess claims that were paid. You don't need to do anything.

Events

ICD-10 Coordination & Maintenance Committee Meeting — March 9-10

Tuesday, March 9 and Wednesday, March 10

[Register for this virtual zoom webinar.](#)

For More Information:

- [CMS ICD-10 Coordination and Maintenance Committee](#) webpage: Procedure code topics
- [CDC ICD-10 Coordination and Maintenance Committee](#) webpage: Diagnosis code topics

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