

## November 2024 Third Party Changes of Significance

### MISSISSIPPI MEDICAID

#### HEDIS Measures. Magnolia Health Weekly Updates. November 7, 2024

**Diabetic Measures: Members 18 – 75 years of age with Diabetes (Types 1 and Type 2) who had each of the following during the measurement year:**

**Hemoglobin A1c Control for Patients With Diabetes (HBD)** – HbA1c controlled (<8.0%).

**Blood Pressure Control for Patients With Diabetes (BPD)** – Blood pressure taken during an outpatient visit or remote monitoring event that is adequately controlled (<140/90).

**Eye Exam for Patients With Diabetes (EED)** – A retinal or dilated eye exam by an eye care professional in the measurement year or a negative or dilated eye exam (negative for retinopathy) by an eye care professional in the year prior to the measurement year.

#### **Tips for Rate Improvement:**

- Schedule screenings annually
- Schedule follow-up visits prior to member leaving the office
- Educate member on the importance of completing all annual screenings
- Utilize appropriate CPT II codes
- Submit claims timely
- Results required for HbA1c
- Make sure a digital eye exam, remote imaging, and fundus photography are read by an eye care professional (ophthalmologist or optometrist) so the results count.
- Remember, a PCP can provide a script for the member to see an eye care provider with clear indication that if diabetic, retinopathy needs to be addressed.

<https://mailchi.mp/3b5bfb41a01d/pooscgsvfh-27199?e=6d63e1c4a4>

### CMS, NOVITAS, RAILROAD MEDICARE

#### Merit-based Incentive Payment System (MIPS) Automatic Extreme and Uncontrollable Circumstances (EUC)

#### Policy Applied to MIPS Eligible Clinicians Following Hurricanes Milton, Helene, and Francine. CMS.

#### **November 7, 2024**

“In response to Hurricane Milton, as identified by both the Health and Human Services (HHS) Public Health Emergency (PHE) declaration ([Florida](#)) and Federal Emergency Management Agency (FEMA) disaster declaration ([DR-4834-FL](#)), the Centers for Medicare & Medicaid Services (CMS) has determined that the MIPS automatic EUC policy will apply to MIPS eligible clinicians in designated affected counties of Florida.

In addition, CMS has applied this policy to clinicians in additional designated area(s) that are now listed on the FEMA website under PA-A and PA-B for Hurricanes Helene and Francine. This includes additional affected counties in Florida, Georgia, North Carolina, South Carolina, Tennessee, and Louisiana:

- Health and Human Services (HHS) Public Health Emergency (PHE) declaration
  - Hurricane Helene: [Florida](#), [Georgia](#), [North Carolina](#), [South Carolina](#), and [Tennessee](#)
  - Hurricane Francine: [Louisiana](#)
- Federal Emergency Management Agency (FEMA) disaster declaration
  - Hurricane Helene: [DR-4828-FL](#), [DR-4830-GA](#), [DR-4827-NC](#), [DR-4829-SC](#), and [DR-4832-TN](#)
  - Hurricane Francine: [FEMA-4817-DR](#)

MIPS eligible clinicians in these areas will be automatically identified and have all 4 performance categories reweighted to 0% during the data submission period for the 2024 performance period (January 2 to March 31, 2025). This will result in a score equal to the performance threshold, and they'll receive a neutral payment adjustment for the 2026 MIPS payment year.

However, if MIPS eligible clinicians in these areas submit data on 2 or more performance categories, they'll be scored on those performance categories and receive a 2026 MIPS payment adjustment based on their 2024 MIPS final score.

**NOTE:** The MIPS automatic EUC policy doesn't apply to MIPS eligible clinicians participating in MIPS as a group, subgroup, virtual group, or Alternative Payment Model (APM) Entity. However, groups, virtual groups, and APM Entities can request reweighting through the EUC Exception application. Subgroups will inherit any reweighting approved for their affiliated group; they can't request reweighting independent of their affiliated group's status. For More Information

Please reference the MIPS EUC Exception section on the [Quality Payment Program Exception Applications webpage](#) and [2024 MIPS Automatic EUC Policy Fact Sheet \(PDF, 762KB\)](#).

## **2025 Medicare Parts A & B Premiums and Deductibles. CMS MLN Connects. November 14, 2024**

"On November 8, 2024, CMS released the 2025 premiums, deductibles, and coinsurance amounts for the Medicare Part A and Part B programs and the 2025 Medicare Part D income-related monthly adjustment amounts.

### **Medicare Part B**

The annual deductible for all Medicare Part B beneficiaries will be \$257 in 2025, an increase of \$17 from the annual deductible of \$240 in 2024.

### **Medicare Part A Inpatient Hospital**

The Medicare Part A inpatient hospital deductible that beneficiaries pay if admitted to the hospital will be \$1,676 in 2025, an increase of \$44 from \$1,632 in 2024. The Part A inpatient hospital deductible covers beneficiaries' share of costs for the first 60 days of Medicare-covered inpatient hospital care in a benefit period. In 2025, beneficiaries must pay a coinsurance amount of:

- \$419 per day for the 61st through 90th day of a hospitalization (\$408 in 2024) in a benefit period
- \$838 per day for lifetime reserve days (\$816 in 2024)

### **Skilled Nursing Facility**

For beneficiaries in skilled nursing facilities, the daily coinsurance for days 21 through 100 of extended care services in a benefit period will be \$209.50 in 2025 (\$204.00 in 2024).

See the [full fact sheet](#) for more information."

[https://www.cms.gov/training-education/medicare-learning-network/newsletter/2024-11-14-mlnc#\\_Toc182393960](https://www.cms.gov/training-education/medicare-learning-network/newsletter/2024-11-14-mlnc#_Toc182393960)

<https://www.cms.gov/files/document/mm13796-medicare-deductible-coinsurance-premium-rates-cy-2025-update.pdf>

## **Help Your American Indian & Alaska Native Patients Achieve Optimal Health. CMS MLN Connects. November 14, 2024**

"American Indians and Alaska Natives face [unique health disparities](#). Social determinants of health, including lack of access to health care, contribute to health disparities (see [HHS Office of Minority Health](#)).

During [Native American Heritage Month](#), help address disparities, and recommend [preventive services](#).

Medicare pays for preventive services. Find out when your patient is [eligible](#). If you need help, contact your eligibility service provider.

More Information:

- [CMS Framework for Advancing Health Care in Rural, Tribal, and Geographically Isolated Communities \(PDF\)](#)
- [CDC Healthy Tribes](#) webpage

Information for Your Patients:

- [Preventive & Screening Services](#) webpage
- [Coverage to Care Roadmap to Better Care \(Tribal Version\) \(PDF\)](#)"

[https://www.cms.gov/training-education/medicare-learning-network/newsletter/2024-11-14-mlnc#\\_Toc182393961](https://www.cms.gov/training-education/medicare-learning-network/newsletter/2024-11-14-mlnc#_Toc182393961)

## **Checking Medicare Claim Status — Revised. CMS MLN Connects. November 14, 2024**

“CMS added [additional information \(PDF\)](#) for checking claim status.”

<https://www.cms.gov/files/document/mln3171902-checking-medicare-claim-status.pdf>

### **Checking Medicare Eligibility — Revised. CMS MLN Connects. November 14, 2024**

“CMS will remove your ability to [check patient eligibility \(PDF\)](#) from the Interactive Voice Response System. Your Medicare Administrative Contractor will let you know their timeline for this change.”

<https://www.cms.gov/files/document/mln8816413-checking-medicare-eligibility.pdf>

### **DMEPOS. Railroad Medicare -Palmetto GBA. November 05, 2024**

“Access CMS-level guidance for Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) through the following links.

- CMS [DME Center](#)
- [October 2024 DMEPOS Jurisdiction List \(PDF\)](#): identify the correct Medicare contractor jurisdiction for DMEPOS HCPCS codes
- [CMS DMEPOS Competitive Bidding Program website](#)

#### **Other CMS Guidance**

- [Durable Medical Equipment](#) (PDF) CMS Medicare Benefit Policy Manual, Chapter 15, Section 110
- [DMEPOS](#) (PDF) CMS Medicare Claims Processing Manual, Chapter 20
- [DMEPOS Fee Schedules](#)”

**Railroad Medicare:** <https://www.palmettogba.com/palmetto/rr.nsf/DID/7GYG851325#ls>

### **Disable Beneficiary Eligibility Information from Medicare Administrative Contractor (MAC) Interactive Voice Response (IVR) Systems. Railroad Medicare-Palmetto GBA. November 15, 2024**

“To safeguard beneficiaries from Medicare fraud, the Centers for Medicare and Medicaid Services has issued Change Request 13754, instructing Medicare Administrative Contractors to disable beneficiary eligibility information from their Interactive Voice Response (IVR) systems by March 31, 2025. This means that while eligibility information will no longer be accessible via the IVR, it will still be retained in the system. After the IVR systems are disabled, providers and suppliers will need to verify beneficiary eligibility using the following online tools and services.”

<https://palmettogba.com/palmetto/rr.nsf/DIDC/UQO6ATAG8Y~Customer%20Service>

### **Railroad Medicare: Lunch and Learn Introducing the Codes Under Medical Review Webinar: November 20, 2024. Railroad Medicare-Palmetto GBA. November 11, 2024**

“Event Date: 11-20 1:00 PM EST - 1:30 PM EST      Event Location: Webinar

In this webcast we will focus on the Medical Review (MR) types of review including traditional postpayment reviews, traditional prepayment reviews, and targeted probe and educate (TPE) reviews on both a prepayment and postpayment basis. Register today to enjoy your lunch with us at Railroad Medicare as we highlight Codes Under Medical Review for October 2024 through September 2025.”

<https://www.palmettogba.com/palmetto/rr.nsf/events/EVW9LCEJCOHVJM1120>

### **December 2024 Railroad Medicare News. Railroad Medicare – Palmetto GBA. November 22, 2024**

“The December 2024 Railroad Medicare News is now available. This issue is packed full of useful information for submitting claims.”

<https://www.palmettogba.com/palmetto/rr.nsf/DID/LR9772S6U7#ls>

## **Another Cautionary Tale**

### **Florida Ophthalmology Practice Agrees to Pay \$1.3M to Resolve Allegations of Fraudulent Claims for Cranial Ultrasounds. DOJ. November 12, 2024**

“Brandon Eye Associates P.A. (Brandon Eye), an ophthalmology practice with offices in Brandon, Sun City and Plant City, Florida, has agreed to pay \$1.3 million to resolve alleged violations of the False Claims Act and an analogous Florida statute arising from its billing for trans-cranial doppler ultrasounds (TCDs) provided through a kickback arrangement with a third party. Brandon Eye has agreed to cooperate with the Justice Department’s investigations of other participants in the alleged scheme.

“The payment of kickbacks can bias medical decision making, result in unnecessary services, and drive up health care costs at the expense of the American taxpayers,” said Principal Deputy Assistant Attorney General Brian M. Boynton, head of the Justice Department’s Civil Division. “Today’s settlement demonstrates that the Justice Department will continue to hold accountable those who enter into kickback arrangements that undermine the integrity of federal health care programs.”“

<https://www.justice.gov/opa/pr/florida-ophthalmology-practice-agrees-pay-13m-resolve-allegations-fraudulent-claims-0>

## OTHER

### **UHC Commercial: Medical Policy Update Bulletin. November 2024**

#### **Updated:**

- Office-Based Procedures - Site of Service – Effective Jan. 1, 2025

#### **Revised:**

- Electroretinography – Effective Jan. 1, 2025

#### **Coverage Rationale Multifocal Electroretinogram (mfERG)**

Added language to indicate Multifocal electroretinogram (mfERG) is proven and medically necessary for the following indications:

- ♣ A need to differentiate retinal disease from optic nerve disease when visual field testing is inconclusive or cannot be performed reliably (e.g., advanced disease)
- ♣ Hereditary retinal dystrophies (e.g., birdshot chorioretinopathy or retinitis pigmentosa)
- ♣ Macular dystrophies (e.g., Stargardt disease, Best disease, pattern dystrophy)

Unproven and not medically necessary indications include but are not limited to macular degeneration, macular edema, epiretinal membrane, and glaucoma

**New Language:** “multifocal electroretinogram (mfERG) is proven and medically necessary to assess the health of the retina in patients following long term use of drugs known to cause retinal toxicity (e.g., chloroquine, hydroxychloroquine, vigabatrin, ethambutol)”

#### **Retired:**

- Corneal Collagen Cross-Linking – Effective Nov. 1, 2024

“...Refer to InterQual and/or the Cardiovascular and Radiology Imaging Guidelines for applicable clinical coverage criteria”

**UHC Commercial:** <https://www.uhcprovider.com/content/dam/provider/docs/public/policies/mpub-archives/commercial/medical-policy-update-bulletin-november-2024-full.pdf#corneal>

**UHC Oxford:** <https://www.uhcprovider.com/content/dam/provider/docs/public/policies/mpub-archives/oxford/oxford-policy-update-bulletin-november-2024.pdf>

#### **UMR-Medical Policies:**

Corneal Collagen Crosslinking - UMR2024T0646D November 1, 2024:

<https://www.uhcprovider.com/content/dam/provider/docs/public/policies/umr/corneal-collagen-cross-linking-umr.pdf>

Electroretinography – 2025T0651B January 1, 2025

<https://www.uhcprovider.com/content/dam/provider/docs/public/policies/index/commercial/electroretinography-01012025.pdf>

<https://www.uhcprovider.com/content/dam/provider/docs/public/policies/mpub-archives/umr/umr-medical-policy-update-bulletin-november-2024.pdf>

## **UnitedHealthcare Community Plan of Mississippi Medical Policy Update Bulletin Quick View: November 2024**

**Corneal Collagen Cross-Linking**- Retired Policy

**Electroretinography (for Mississippi Only)** Policy Number: CS370MS.B January 2025

Added language to indicate:

Multifocal electroretinogram (mfERG) is proven and medically necessary for the following indications:

A need to differentiate retinal disease from optic nerve disease when visual field testing is inconclusive or cannot be performed reliably (e.g., advanced disease)

♣ Hereditary retinal dystrophies (e.g., birdshot chorioretinopathy or retinitis pigmentosa)

♣ Macular dystrophies (e.g., Stargardt disease, Best disease, pattern dystrophy) o Unproven and not medically necessary indications include but are not limited to macular degeneration, macular edema, epiretinal membrane, and glaucoma

Replaced language indicating “multifocal electroretinogram (mfERG) is proven and medically necessary to assess the health of the retina in patients following long term use of drugs known to cause retinal toxicity (e.g., chloroquine, hydroxychloroquine, vigabatrin, ethambutol)”

<https://www.uhcprovider.com/content/dam/provider/docs/public/policies/index/comm-plan/ms/electroretinography-ms-cs-01012025.pdf>

**Ocular Photostreaning (for Mississippi Only)** Policy Number: CS378MS.A. January 2025

<https://www.uhcprovider.com/content/dam/provider/docs/public/policies/index/comm-plan/ms/ocular-photostreaning-ms-cs-01012025.pdf>

<https://www.uhcprovider.com/content/dam/provider/docs/public/policies/mpub-archives/comm-plan/ms/community-plan-ms-medical-policy-update-bulletin-november-2024.pdf>

## **UnitedHealthcare Medicare Advantage Medical Policy Update Bulletin Quick View: November 2024**

Category III CPT Codes Policy Number: MMP043.41 Last Committee Approval Date: October 9, 2024 Effective Date: November 1, 2024

<https://www.uhcprovider.com/content/dam/provider/docs/public/policies/medadv-mp/category-iii-cpt-codes.pdf>

<https://www.uhcprovider.com/content/dam/provider/docs/public/policies/mpub-archives/mamp/medicare-advantage-medical-policy-update-bulletin-november-2024.pdf>

## **Change Healthcare Restores Claims Clearinghouse: 5 Things To Know. Giles Bruce. Becker’s Health IT. November 18, 2024**

“UnitedHealth Group claims processing subsidiary Change Healthcare has restored its clearinghouse services and received \$3.2 billion in loan repayments from providers following a February cyberattack. ...”

[https://www.beckershospitalreview.com/cybersecurity/change-healthcare-restores-clearinghouse-services-5-things-to-know.html?origin=PayerE&utm\\_source=PayerE&utm\\_medium=email&utm\\_content=newsletter&oly\\_enc\\_id=5767J801653418J](https://www.beckershospitalreview.com/cybersecurity/change-healthcare-restores-clearinghouse-services-5-things-to-know.html?origin=PayerE&utm_source=PayerE&utm_medium=email&utm_content=newsletter&oly_enc_id=5767J801653418J)