Insufficient documentation
CERT review denials

DME CERT Outreach and Education Task Force
May 16, 2017
Today’s Presenters

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  Provider Outreach & Education Consultant
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  Provider Outreach and Education Consultant
- Jurisdiction C: Elizabeth Daniels
  Provider Outreach and Education Consultant
- Jurisdiction D: Cindy White
  Provider Outreach & Education Consultant
Agenda

- CERT Contractor Update
- Insufficient Documentation - Oxygen
- Insufficient Documentation - PAP
- Insufficient Documentation – Ankle Foot/Knee Ankle Foot Orthosis (AFO/KAFO)
- Insufficient Documentation - Nebulizer and External Infusion Pumps
- Questions and answers
CERT Documentation Requests

- CERT Program

- CERT Documentation Contractor
  - AdvanceMed (phone – 1.888.779.7477)
  - Public Website [https://certprovider.admedcorp.com/](https://certprovider.admedcorp.com/)
    » Collect and review submitted documentation
    » Decisions based on Medicare guidelines and procedures
  - Measure claims paid error rate
These are the ways to respond to a CERT request:

- *Fax: 1.804.261.8100 (preferred method)
- *Mail: CERT Documentation Center
  Attn: CID #XXXXX
  1510 East Parham Road
  Henrico, VA 23228
- Encrypted CD: (using the same address as above)
  - Use bar-coded page as cover sheet
  - Extension requests by phone only
    - 1.888.779.7477 or 1.443.663.2699
Appeal Rights from CERT Audits

- Claim errors identified by CERT result in
  - Overpayment Demand Letter
  - Revised Medicare Remittance Advice.

- Suppliers disagreeing with CERT review decision
  - File redetermination with correct DME MAC within 120 days of demand letter
  - Redetermination filed within 30 days of the letter/MRA,
    - Recoupment activities cease until the redetermination decision is made
What does insufficient documentation mean?

- Lack of required documentation as defined by policy requirements
  - Found in Local Coverage Determination (LCD), Policy Article and Standard Documentation Article
- Not included at all in documents submitted
- Not complete in the records that were submitted
- Missing elements
Insufficient Documentation
Oxygen and Oxygen Equipment
> 90% error rate
## Common CERT Errors – Oxygen and Oxygen Equipment

<table>
<thead>
<tr>
<th>Errors</th>
<th>Resolution</th>
</tr>
</thead>
</table>
| Missing qualifying oximetry report under conditions as indicated on the submitted Recertification CMN | 1. Obtain medical records supporting testing reported on the CMN.  
2. Submit request for appeal with correct testing documentation. |
| Missing NPI                                      | 1. For oxygen codes requiring NPI on the order prior to delivery, once the claim is billed to the Medicare program, this error cannot be corrected.  
2. Transition beneficiary to another supplier for oxygen HCPCS not meeting ACA requirements. |
Common CERT Errors – Oxygen and Oxygen Equipment

- Missing Qualifying oximetry report under conditions as indicated on the submitted Recertification CMN
Common CERT Errors – Oxygen and Oxygen Equipment

- Missing Physician NPI
Insufficient Documentation

PAP and Accessories

> 85% error rate
# Common CERT Errors – PAP and Accessories

<table>
<thead>
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| Proof of delivery was received without beneficiary address and tracking without delivery information | 1. Secure documentation to support the address the device/accessories were delivered to.  
2. Submit an appeal with supporting documentation. |
| Detailed written order did not include all items ordered or did not match item delivered/billed to the Medicare program | 1. Review orders received for PAP device/accessories.  
2. If the incorrect order was submitted, request an appeal with the valid order.  
3. If the order was incomplete/incorrect this error cannot be resolved via the appeals process. |
| Missing date stamp or equivalent from required documents             | 1. Review documents in the beneficiary records for evidence of receipt prior to delivery.  
2. Submit an appeal request with documentation supporting receipt of the document prior to delivery. |
Common CERT Errors – PAP and Accessories

- Order for ResMed Cushion Quantity 1 – missing the frequency to be dispensed

<table>
<thead>
<tr>
<th>DIAGNOSIS</th>
</tr>
</thead>
<tbody>
<tr>
<td>ICD-9 Code</td>
</tr>
<tr>
<td>327.23</td>
</tr>
<tr>
<td>ICD-10 Code</td>
</tr>
<tr>
<td>G47.33</td>
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</table>

<table>
<thead>
<tr>
<th>EQUIPMENT/SERVICES</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qty</td>
</tr>
<tr>
<td>1</td>
</tr>
</tbody>
</table>
Common CERT Errors – PAP and Accessories

- Orders not detailed to include frequency of use
Invalid order for accessories – Missing detailed descriptions for A7037, A7032 and A7034 is not clearly specified the order says “nasal or full face mask”.

Comments

Replacement RESMED AIRSENSE 10 AUTOPIP set 8-12, flex/epr; Heated humidity (1); Nasal or Full face mask with cushion (1) to fit per pt. preference; Headgear with mask (1); Tubing (1); Chinstrap (1) if needed; reusable and disposable filters; water chamber (1). Download that includes compliance and efficacy data in 4 weeks. Lifetime need. DX: OSA.

Please give us access to their data on Airview.
Insufficient Documentation

AFO/KAFO

> 86% error rate
## Common Errors – AFO/KAFO

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</table>
| No documentation of customized fitting of the Knee Orthosis by an individual with expertise. | 1. Review beneficiary records to confirm the orthotic was properly coded.  
   a. Was the device trimmed, bent, molded, assembled or otherwise customized to fit a specific beneficiary by a certified orthotist or an individual with equivalent experience?  
   b. Were minimal adjustments performed that included the device being trimmed, bent, molded assembled or otherwise adjusted to fit the beneficiary, however the adjustments did not require the expertise of the certified orthotist or an individual with equivalent experience?  
   2. Submit supporting documentation with an appeal for the custom fitted device or with a request to change the code to an OTS code. |
| Proof of delivery missing/incomplete                                 | 1. Review records to support proof of delivery requirement for Methods 1, 2 or 3  
   2. Submit an appeal with supporting documentation.                                                                                   |
| Order missing sufficient detail to support custom fitting            | 1. All custom orthotics must be supported by a detailed written order showing the physician ordered a custom fitted item. Review all orders in the beneficiary record for the custom fit orthotic.  
   2. Submit an appeal with the appropriate item.                                                                                         |
Common Errors – AFO/KAFO

- No documentation of customized fitting of the Knee Orthosis by an individual with expertise
Common Errors – AFO/KAFO

- Missing order detailed for Custom Fit Orthosis billed
- Proof of delivery not detailed
- No documentation of substantial modification

A left knee freestyle OA brace was dispensed today. The patient was consulted and educated regarding the left knee brace. She was fitted for it and was told the risks and benefits regarding it. The patient was felt comfortable after wearing and was able to show the use of it as well.
Common Errors – AFO/KAFO

- Missing order with sufficient detail
Insufficient Documentation

Nebulizers
> 85% error rate

External Infusion Pumps
> 67% error rate
## Errors Resolution

<table>
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| Missing detailed written order for supplies billed | 1. Review records to determine if a detailed written order exists for supplies billed and was omitted in error.  
2. If yes, the claim may be appealed.  
3. If no detailed written order for supplies billed there is no resolution for this error. |
| Missing signature date                       | 1. There is no remedy for claims filed with invalid detailed written order.  
2. Obtain valid detailed written order prior to billing future dates of service. |
Common errors – Nebulizers and External Infusion Pumps

- Missing detailed written order for supplies billed

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**PRESCRIPTION INFO**

- Rx Number: 91089
- Original Rx Date: 07/21/2016
- Qty/Doses Allowed: 365
- Rx Expiration Date: 07/20/2017
- Prescription: Milrinone 1000mcg/ml, 220ml, CADD-Solls
  - Admin. Directions: Infuse Milrinone 2.2 ml/hr IV continuously via CADD pump. One bag will last for 96 hours (4 days). Rec. Vol: 220 ml, Rate: 2.2 ml/hr, Dose: 0.6 mcg/kg/min, Pt. Wt: 60 Kg, Conc: 1000 mcg/ml (generic for Primacor)

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**NEW/VERBAL ORDERS**

- Dispense supplies, needles, syringes and disposables necessary for administration of home intravenous inotropic therapy.
Common errors – Nebulizers and External Infusion Pumps

- Missing signature date
  - Cannot be typed
Resources
Resources

- Jurisdiction DME MAC Websites:
  - Jurisdiction A – https://med.noridianmedicare.com/web/jadme/
  - Jurisdiction B – https://www.cgsmedicare.com/jb
  - Jurisdiction C – https://www.cgsmedicare.com/jc
  - Jurisdiction D – https://med.noridianmedicare.com/web/jddme/
Questions?
Disclaimer

The DME MAC CERT Outreach and Education Task Force consists of representatives from each of the DME MACs and is independent from the CMS CERT Team and CERT Contractors, who are responsible for the calculation of the Medicare Fee-for-Service Improper Payment Rate.

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