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Hurricane Katrina Claim Identification Numbers (CIDs) Reactivated

As you may recall, following the aftermath of Hurricane Katrina, Center for Medicare and Medicaid Services (CMS) suspended the issuance of CERT medical request letters for all providers in zip codes affected by the hurricane. On October 25, 2005, CMS reactivated the suspended CIDs. The CERT Documentation Contractor (CDC) began issuing medical request letters as well as making phone calls to those providers for medical record documentation to support the earlier claims. All new claims selected from the sample of Medicare claims submitted to CMS will also be initiated. While recognizing that some providers have not fully recovered from the devastation, CMS has decided not to send out the 4th letter, commonly referred to as the OIG letter, in cases where previous phone calls and letters have failed to secure the provider medical record

documentation since language in the letter could be perceived as insensitive to the conditions providers have endured and may be continuing to endure.

Please remember that if providers have lost records due to flooding, etc. they can obtain an Attestation Form from www.certprovider.org, complete the form and send it to Livanta LLC, CERT Documentation Contractor, 9090 Junction Drive, Annapolis Junction, MD 20701 or to the address on the Attestation form. After validation of the facts, the claim is pulled from the sample and another claim is selected as a replacement. The claim that is pulled is not considered a "no documentation" error. A copy of the [Attestation Letter](#) is attached to the newsletter.



Little Known Facts About CDC
1. In October 2005 CDC made 19,620 outgoing phone calls
2. One out of every four phone calls reaches the person having access to the Medical Records
3. CDC receives the Billing Address from the Provider Address File
4. In many cases, the Billing Address is not the location of the Medical Records
5. In eight months CDC has sent out 26,646 faxed Medical Request Letters
6. During that same time CDC has sent out 32,215 Medical Request Letters by mail
7. CDC is required to make up to 3 phone calls and send out up to 4 Medical Request Letters to providers to secure medical record documentation in support of the claim
8. In many cases CDC exceeds 3 phone calls in an effort to secure the medical record documentation
9. In many cases CDC has to contact three or more locations to secure the medical record documentation



Provider Responses to Calls from Customer Service Representatives (CSRs)

A surprising number of providers have responded to calls from our CSRs with answers that have puzzled us. The calls placed by CSRs are based on claims originating from providers so claim information should be correct. However, we have been receiving an unusual number of responses such as: (1) not our patient and (2) wrong date of service.

When a CSR receives one of the stated responses, he/she sends a Problem Ticket to the Problem Resolution Office (PRO). PRO specialists research the claim by contacting the Affiliated Contractors (ACs) to obtain a copy of the original claim for review. During one business day, PRO received 14 problem tickets showing a "not our patient" response and 8 problem tickets showing a "wrong date of service" response. After researching each of those tickets, the PRO specialist found only one actual mistake in a medical request. One request had a provider number with transposed digits. All the other "problems" turned out to be human errors on the part of the providers. The PRO specialists are continuing to track these problems.

CDC CSR's Notes on Responses From Provider Offices Upon Initial Telephone Contact

- Called general contact and spoke with Carrie. She said this is their patient but the computer does not show any visits.
- There are no records for this patient on this DOS.
- Correct phone number but no doctor here by that name.
- Patient's birthday is wrong, yet name, date of service, and social security number are correct.
- Debbie called and stated that this is not a patient of theirs. She also said that the provider number in the letter is not their provider number. CDC needs to update provider info and stop sending CERT requests to this address.
- Wrong number.
- This patient has never been seen in this office.
- This is a fax number.
- Spoke to Tanay. She has nothing in her computer since 04.
- I tried to contact the provider regarding the correct dates of service not being sent, but when I called the Gastonia location, I learned that there were no records for this patient at their location. The records were at the university location. I called the university location and was told the records were at the satellite office. I was given a phone number for the medical records located in Charlotte, NC. However, when I called that number, there were no patient records there either. I am unable to contact the correct facility to obtain the correct date of service on this patient.
- Call cannot be completed as dialed.
- No documentation sent. Provider states they can only answer requests from Dr. Cain himself.
- I spoke with Bea in Medical Records and she said that this patient was seen at another clinic for this DOS and that she doesn't have records for this DOS.
- This is a cell number with no response.
- We received a letter from Bayfront Medical Center stating that the LRMR they received should have been sent to Family Health Center. I called Family Health

- Center and was told that the patient was supposed to come to the facility but never showed up and there are no records for this patient.
- I spoke with Peggy and she cannot send us the requested records unless we know which pharmacy the patient used. We need the address to the pharmacy to match the patient since they have many different locations.
 - Number has been disconnected.
-

CDC Adds 4 More Incoming Fax Lines

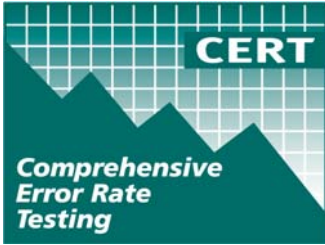
Performance monitoring tools recently disclosed that CDC's 8 incoming fax lines were at times being fully utilized. On November 4, 2005, CDC added 4 more incoming fax lines to our fax servers bringing the total number of incoming fax lines to 12. At present, CDC has 12 outgoing fax lines. Our goal is to allow every provider to fax us medical record documentation without experiencing any busy signals or delays.

Reminder to Providers—Address Update Procedures

Providers are encouraged to update provider name, name of contact for medical records, address, phone, and fax numbers online at the CERT website. **However, all providers must provide address updates through the CMS approved methodology to the AC/FI with jurisdiction for their claims. Updates via the CERT portal (www.certprovider.org) cannot replace that process.**

The purpose of the CERT Newsletter is to provide for an exchange of information among the Centers for Medicare and Medicaid Services (CMS), the CERT Review Contractor (CRC), the CERT Documentation Contractor (CDC), Affiliated Contractors (ACs) and Providers. The Newsletter is not intended to set CMS policy or replace CMS directives. The newsletter is published monthly by CDC. Archived copies are available on the CERT Website: <http://www.certprovider.org>

Send in questions, suggestions, and/or articles for inclusion in the newsletter to marylou@certcdc.com
Deadline for December issue is November 29.



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Date

Dear Ms. Combs:

Due to extenuating circumstances beyond my control, I am unable to provide the requested medical documentation in support of my Medicare claim, CID Number _____ (please include number).

I attest that the medical record documentation was:

- completely destroyed on _____ (please include date).
- partially destroyed on _____ (please include date);
however, I am providing any remaining medical record documentation.

The medical record documentation was destroyed by:

- flood
- fire
- hurricane
- other _____ (please specify).

Attached is evidence of the flood/fire/hurricane/other:

- copy of FEMA check
- letter from property insurance company
- other _____.

Under penalties of perjury, I declare to the best of my knowledge and belief, that the information I have provided is true, correct, and complete.

Printed Full Name: _____

Signature: _____

Date of Signature: _____

Address: _____

City, State, Zip Code: _____

Occupation: _____

Phone Number: _____