











### Contractor: Carrier

- The Carrier processes Medicare claims under Part B for non-institutional providers (e.g., physicians, suppliers, laboratories, therapists in independent practice).
- Wisconsin Physician Services (WPS) is the Carrier for Wisconsin (among other states).
- Web site: [www.wpsic.com/medicare/](http://www.wpsic.com/medicare/)
- Customer Service: 1-877-567-7176

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### Contractors: Durable Medical Equipment Regional Carriers (DMERCs)

- Carriers that CMS has designated to process DME (Durable Medical Equipment) claims.
- There are 4 Medicare carriers nationally that process DMERC claims on CMS 1500 claims.
- AdminaStar Federal serves as the DMERC for Wisconsin (as well as other states).
- Web site: [www.astar-federal.com/anthem/affiliates/adminastar/new/providers/DMERC.html](http://www.astar-federal.com/anthem/affiliates/adminastar/new/providers/DMERC.html)
- 1-877-299-7900

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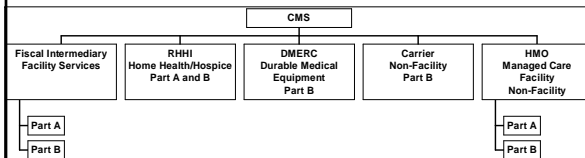
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### Review: Traditional Contractors



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**Pop Quiz**

**When Was Medicare Born?**

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**We Need Your Help to Keep Medicare Healthy**

**Medicare wants to “Pay It Right”:**

- the right amount
- to the right provider
- for the right service
- for the right beneficiary

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**Identifying Issues and Correcting Errors - It Takes Teamwork**

- Comprehensive Error Rate Testing, better known as CERT
- Contractors (UGS) Medical Review
- The Provider Community



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## Medical Review Communications

- Probe Letters
- ADR: Additional Development Request
- Remarks Page
- Education Letter
- Post Pay Info Request

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## Excerpt- Probe Notification Letter

Initial data analysis of physical therapy services (claims paid 01/01/05 to 06/01/05) revealed that your facility billed xx% of patients with the procedure code 97597 (selective wound debridement) compared with the state average of 2%. Please see the enclosed graph for a comparison of your facility's results versus other UGS providers.

Due to these findings, and in accordance with PCA, we will be conducting a pre-pay probe review of physical therapy services. The probe review will be performed on 20 to 40 claims submitted by your facility. Once the probe is completed we will be sending you a result letter that summarizes our findings. Please note that although the focus of the probe is physical therapy services, other errors (if any) will also be addressed.

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## Excerpt Probe Notification Letter (cont'd)

Your facility will receive additional development requests (ADR's) requesting specific documentation for individual claims with specific dates of service. These ADR's are system generated and sent to the designated individual on our provider files. You may wish to notify the person in your facility who handles the Medicare mail of the importance of the ADR's to assure that they are handled appropriately. The ADR must be attached to the information requested (and any additional information that may justify the services billed) and returned to UGS within 30 days of receipt of the request.

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## TMR Letter Excerpt

The data for your claims processed from July to September 2005 for Physical Therapy Services (reason code 51212 ) found your error rate to be **21%**. **This is an increase from your error rate of 16% last quarter. Therefore, your facility will continue to be on Targeted Medical Review (TMR), and your review level has been increased from 10% to 20%.** Under the Progressive Corrective Action guidelines, a provider cannot be removed from target medical review until their error rate is less than ten percent or there are extenuating circumstances. A Revised Corrective Action Plan (CAP) may be requested if there is no significant improvement in your error rate in the future.

The following are the reasons for your denied claims as identified in our review:

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## Fiscal Year



- Quarter 1  
October - December
- Quarter 2  
January - March
- Quarter 3  
April - June
- Quarter 4  
July - September

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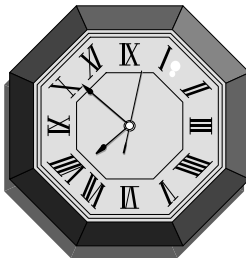
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## Time line for TMR Claims



- ADR (medical record request) submitted to provider
- Provider has 30 days to respond. Claims will deny on day 45.
- MR has 60 days to adjudicate claim from date of receipt

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