



NFUR Quarterly Stakeholder Meeting

June 12, 2023

Texas Health and Human Services
Sylvia Hernandez Kauffman, Inspector General





Introduction of Speakers

- Maureen T Power RN MPH
Deputy Inspector General SUR
- Nicodemus Thiongo RN
Team Lead Reconsideration





Purpose and Disclaimer

Purpose:

To promote dialogue regarding Nursing Facility Reviews between and among the attendees. The group will meet periodically to discuss nursing facilities and obtain stakeholder input.

Disclaimer:

The discussions at these stakeholder meetings are for informational purposes only and are not binding on the Health and Human Services Commission Office of Inspector General or its representatives.





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Agenda

1. Welcome
2. Introductions
 - a. Maureen T. Power RN MPH Deputy SUR
 - b. Nicodemus Thiongo (Nick) RN Team Lead Recon
3. SharePoint - Update
4. Reconsideration
5. Questions & Answers





Sharepoint – Response Time

Status Updates on access request

- Based on the volume and day of the week of incoming requests - most requests are addressed within 1-2 hours.
- OIG SharePoint Support staff will respond to all requests from each business day, no later than 8 business hours after the request is submitted to the OIG SharePoint mailbox.





SharePoint Email Template

From: Firstname.Lastname@provider.com (Requestor's email)

To: oigsharepoint@txhhs.onmicrosoft.com

Cc: OIG Staff Contact; E###@provider.com; Additional requestors

Subject: SharePoint Access Request - SUR Deadline: [DATE]

Body:

- Vendor number
- Nursing Facility Name
- OIG Regional Office OR Reconsideration Request

OR:

Subject: SharePoint Troubleshooting Request - SUR Deadline: [DATE]

Body:

- OIG Regional Office OR Reconsideration Request
- Vendor number
- Nursing Facility Name
- List the troubleshooting issue with screenshot/snippet
- Add the confirmation emails for researching medical records not received by OIG Nurse Reviewer or Recon Nurse





Sharepoint - Common Errors

- Not submitting troubleshooting request to correct mailbox. Send request to the OIG SharePoint Mailbox: OIGSharePoint@txhhs.onmicrosoft.com
- Remember when submitting trouble shooting requests - include the vendor number, facility name and program designation (NFUR or Reconsideration)
- This information helps to expedite the request, as NFUR Onsite Reviews will take priority





SharePoint – Common Errors

- Requests for assistance must be made within the US. HHS IT does not allow access to SharePoint from outside the US.
- Select the correct NFUR link, division, unit or region when uploading records. Facility staff must select the correct **regional office location or reconsideration**.
- Using special characters in the file name

Uploaded medical records with special characters in the file name will not route the documents to the correct region

Examples: ~, #, %, &, *, {, }, :, <, >, ?, /, \





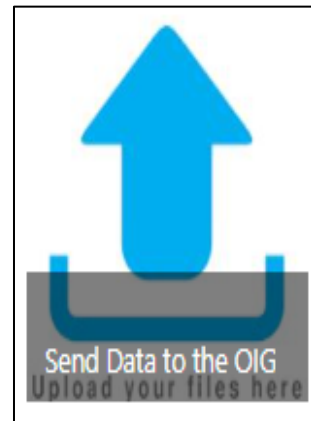
SharePoint - Timeline

- External Data Transfer portal is available for record transfer from facility to OIG SUR.
- Onsite Review – records submission continues Monday through Friday with all records received to OIG no later than 12:00 PM.
- Record submission should be completed in orderly method as trained by the nurse reviewer.
- Please ensure your records are in order to enable prompt telephone exit conference the Wednesday after your review.





SharePoint – External Data Transfer Link



Click Here

OIG Areas:

- Nursing Facility Utilization Review
- Reconsideration

The complex block contains an illustration of a two-story nursing home building with a red roof and orange and grey walls. Below the illustration is a large blue arrow pointing upwards, with the text "Click Here" in a large blue font. A dashed line is positioned below the text. Underneath the dashed line is the heading "OIG Areas:" in bold blue text. Below this heading is a bulleted list with two items: "Nursing Facility Utilization Review" and "Reconsideration".



SharePoint – Hours

EDT SITE SHAREPOINT SYSTEM AVAILABILITY:

24 HOURS A DAY, 7 DAYS A WEEK

SUPPORT HOURS:

oigsharepoint@txhhs.onmicrosoft.com

7:30 AM – 4:30 PM, Monday – Thursday

7:30 AM – 12 Noon, Friday

After hours support requests are reviewed the next business day.





Reconsideration

- Must meet criteria outlined by the new TAC (RULE §371.222)

[Texas Administrative Code \(state.tx.us\)](https://state.tx.us)





Nursing Facility MDS 3.0 Reviews

- FY 2023 Work Plan is to review approximately 400 nursing facilities.
- Review samples contain managed care and fee-for-service claims.
- The sample period is 09/1/2020 through 8/31/2021.
- FY23: September 1, 2022, through June 05, 2023, 358 onsite reviews have been completed and 340 telephone exits have been conducted.





Certification of Therapy

Medicare Benefit Policy Manual; Chapter 15 – Covered Medical and Other Health Services:
<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c15.pdf>

Certifications are required for each interval of treatment based on the patient's needs, not to exceed 90 calendar days from the initial therapy treatment.

Certifications are timely when the initial certification (or certification of a significantly modified plan of care) is dated within 30 calendar days of the initial treatment under that plan.

Recertification is timely when dated during the duration of the initial plan of care or within 90 calendar days of the initial treatment under that plan, whichever is less.

Certifications are acceptable without justification for 30 days after they are due.





Delayed Certification

Medicare Benefit Policy Manual; Chapter 15 – Covered Medical and Other Health Services:
<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/bp102c15.pdf>

Delayed certification and recertification requirements shall be deemed satisfied where, at any later date, a physician/NPP makes a certification accompanied by a reason for the delay.

Delayed certification should include one or more certifications or recertifications on a single signed and dated document.

In the case of a long-delayed certification (over 6 months), the provider or supplier may choose to submit with the delayed certification some other documentation (e.g., an order, progress notes, telephone contact, requests for certification or signed statement of a physician/NPP) indicating need for care and that the patient was under the care of a physician at the time of the treatment. Such documentation **may be requested by the contractor** for delayed certifications if it is required for review.

References: §1835(a) of the Act
42CFR424.11(d)(3)





Delayed Certification

References: §1835(a) of the Act - 42CFR424.11(d)(3)

EXAMPLE: Payment should be denied if there is a certification signed 2 years after treatment by a physician/NPP who has/had no knowledge of the patient when the medical record also shows e.g., no order, note, physician/NPP attended meeting, correspondence with a physician/NPP, documentation of discussion of the plan with a physician/NPP, documentation of sending the plan to any physician/NPP, or other indication that there was a physician/NPP involved in the case.

EXAMPLE: Payment **should not** be denied, even when certified 2 years after treatment, when there is evidence that a physician approved needed treatment, such as an order, documentation of therapist/physician/NPP discussion of the plan, chart notes, meeting notes, requests for certification, certifications for intervals before or after the service in question, or physician/NPP services during which the medical record or the patient's history would, in good practice, be reviewed and would indicate therapy treatment is in progress.





Delayed Certification

References: §1835(a) of the Act - 42CFR424.11(d)(3)

EXAMPLE: Subsequent certifications of plans for continued treatment for the same condition in the same patient may indicate physician certification of treatment that occurred between certification dates, even if the signature for one of the plans in the episode is delayed.

If a certified plan of care ends March 30th and a new plan of care for continued treatment after March 30th is developed or signed by a therapist on April 15th and that plan is subsequently certified, that certification may be considered delayed and acceptable effective from the first treatment date after March 30th for the frequency and duration as described in the plan.

Of course, documentation should continue to indicate that therapy during the delay is medically necessary, as it would for any treatment. The certification of the physician/NPP is interpreted as involvement and approval of the ongoing episode of treatment, including the treatment that preceded the date of the certification unless the physician/NPP indicates otherwise.





Reconsideration Results

Must Include:

- Daily encounter note for each day.
- Actual minutes of therapy provision for each encounter date/day.
- Certification of therapy.
If missing/signed late. Delayed certification of therapy must be submitted and meet the criteria.





General Layout

The Recon process is standardized.

- Results are sent to the requestor electronically by secure email.
- Goal is to respond to provider within 45 business days from the exit date.





Questions & Answers

- Does the OIG complete a Records Affidavit for facility records during the onsite OIG utilization review?

Two Affidavits may be requested.





Reconsideration Affidavit

A signed and notarized OIG approved affidavit **is required** for each record submitted for reconsideration in support of each objection to the identified MDS assessment error for which the reconsideration is being requested.





MDS Upcoming Changes

The OIG awaits more information on the future MDS changes and process.

OIG SUR will continue to provide as much information as possible to our stakeholders.






Thank you!


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