

# C Medicare A CONNECTION

medicare.fcso.com



*A Newsletter for MAC Jurisdiction N Providers*

February 2020



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## Unsolicited/voluntary refunds

Medicare contractors receive unsolicited/voluntary refunds (i.e., monies received not related to an open account receivable).

Part A contractors generally receive unsolicited/voluntary refunds in the form of an adjustment bill, but may receive some unsolicited/voluntary refunds as checks.

Part B contractors generally receive checks. Substantial funds are returned to the trust fund each year through such unsolicited/voluntary refunds.



The Centers for Medicare & Medicaid Services reminds providers that:

The acceptance of a voluntary refund as repayment for the claims specified in no way affects or limits the rights of the federal government, or any of its agencies or agents, to pursue any appropriate criminal, civil, or administrative remedies arising from or relating to these or any other claims.

Source: *CMS Pub. 100-06, Chapter 5, Section 410.10*



**WHEN EXPERIENCE COUNTS & QUALITY MATTERS**

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The *Medicare A Connection* is published monthly by First Coast Service Options Inc.'s Provider Outreach & Education division to provide timely and useful information to Medicare Part A providers.

Articles included in the *Medicare A Connection* represent formal notice of coverage policies. Policies have or will take effect on the date given. Providers are expected to read, understand, and abide by the policies outlined within to ensure compliance with Medicare coverage and payment guidelines.

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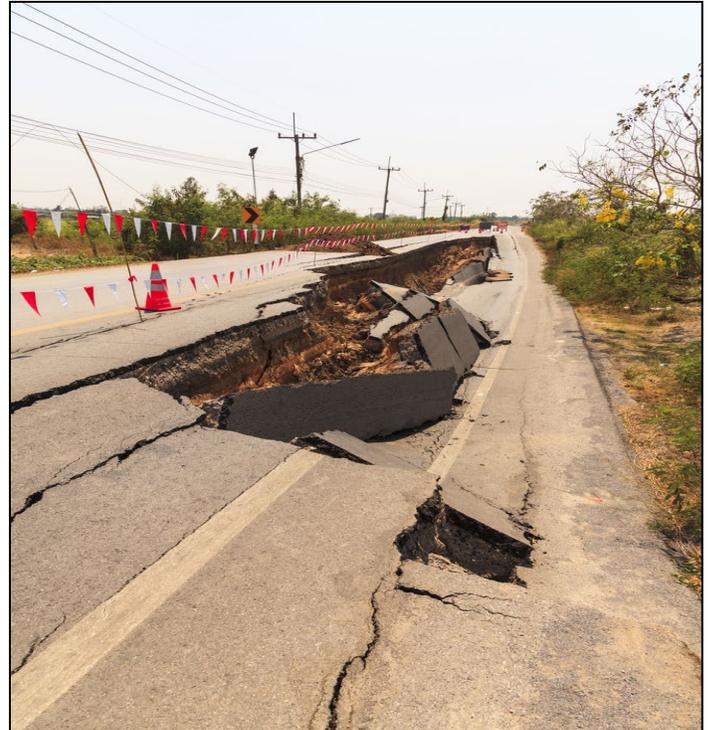
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## Disaster Information

# Provider enrollment relief for Commonwealth of Puerto Rico due to the effects of earthquakes

Effective December 28, 2019, and remaining in effect for a period of 180 days, First Coast implemented provider enrollment relief for providers in Puerto Rico. During this period, we will:

- Refrain from mailing any revalidation letters, including subsequent revalidation letters (i.e., payment hold and deactivation letters due to non-response to revalidation or revalidation development).
- Refrain from placing providers/suppliers on payment hold and deactivating providers/suppliers who fail to respond to a revalidation request.
- Refrain from mailing any new fingerprint-based background check letters. Denial or revocation of providers/suppliers due to non-response to fingerprints shall also be held.
- Extend the 30-day development response requirement up to 90 days, if development is needed.
- Continue to order site visits. However, the national site visit contractor will not perform site visits in the impacted area until the major disaster declaration is lifted.
- Continue to require that all changes, temporary or otherwise, be submitted via the appropriate CMS-855 application.



For additional assistance, visit our dedicated [disaster information](#) page.



### Find out first: Subscribe to First Coast eNews

Subscribe to First Coast Service Options eNews, to learn the latest Medicare news and critical program changes affecting the provider community. Join as many lists as you wish, in English or Spanish, and customize your subscription to fit your specific needs, line of business, specialty, or topics of interest. So, *subscribe to eNews, and stay informed.*

This section of *Medicare A Connection* features summaries of new and revised local coverage determinations (LCDs) developed as a result of either local medical review or comprehensive data analysis initiatives. These initiatives are designed to ensure the appropriateness of medical care and to make sure that the Medicare administrative contractor (MAC) jurisdiction N (JN) Part A LCDs and review guidelines are consistent with accepted standards of medical practice.

Refer to our [LCDs/Medical Coverage webpage](#) for full-text LCDs, including final LCDs, draft LCDs available for comment, LCD statuses, and LCD comment/response summaries.

## Effective and notice dates

Effective dates are provided in each LCD, and are based on the date services are furnished unless otherwise noted in the LCD. Medicare contractors are required to offer a 45-day notice period for LCDs; the date the LCD is posted to the website is considered the notice date.

## Electronic notification

To receive quick, automatic notification when new and revised LCDs are posted to the website, subscribe to the [First Coast eNews mailing list](#). Simply enter your email address and select the subscription option that best meets your needs.

## More information

For more information, or, if you do not have internet access, to obtain a hardcopy of a specific LCD, contact Medical Policy at:

Medical Policy and Procedures  
 PO Box 2078  
 Jacksonville, FL 32231-0048



## Looking for LCDs?

Would you like to find local coverage determinations (LCD) in 10 seconds or less? [First Coast's LCD lookup](#) helps you find the coverage information you need quickly and easily. Just enter a procedure code, keyword, or the LCD's "L number," click the corresponding button, and the application will automatically display links to any LCDs applicable to the parameters you specified. Best of all, depending upon the speed of your internet connection, the LCD search process can be completed in less than 10 seconds.

## Advance beneficiary notice

Modifier GZ must be used when physicians, practitioners, or suppliers want to indicate that they expect that Medicare will deny an item or service as not reasonable and necessary and they **have not had** an advance beneficiary notification (ABN) signed by the beneficiary.

**Note:** Line items submitted with the modifier GZ will be automatically denied and will not be subject to complex medical review.

Modifier GA must be used when physicians, practitioners, or suppliers want to indicate that they expect that Medicare will deny a service as not reasonable and necessary and they **do have** on file an ABN signed by the beneficiary.

All claims not meeting medical necessity of a local coverage determination must append the billed service with modifier GA or GZ.

### Find fees faster: Try First Coast's fee schedule lookup

Find the fee schedule information you need fast - with [First Coast's fee schedule lookup](#). This exclusive online resource features an intuitive interface that allows you to search for fee information by procedure code. Plus, you can find any associated local coverage determinations (LCDs) with just the click of a button.



New LCDs / Articles

# Cardiology non-emergent outpatient stress testing – new Part A and Part B LCD

## LCD/Article ID number: L38396/A56952 (Florida, Puerto Rico/U.S. Virgin Islands)

This new local coverage determination (LCD) addresses “Coverage Indications, Limitations, and/or Medical Necessity”, and “Provider Qualifications” requirements for cardiac non emergent outpatient stress testing: exercise stress testing, stress echocardiography, single photon emission computed tomography (SPECT) myocardial perfusion imaging (MPI), positron emission tomography (PET) MPI, and stress cardiac magnetic resonance imaging (MRI).

Also, the related billing and coding article (A56952) addresses coding guidelines in support of the reasonable and necessary services as outlined in the LCD.

The current LCD (L36209) and related billing and coding

article (A57076) will be retired when this new LCD and related billing and coding article become effective.

### Effective date

This new LCD and related billing and coding article are effective for services rendered **on or after March 15, 2020**.

LCDs are available through the CMS Medicare coverage database at <https://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx>.

A coding article for an LCD may be found by selecting “Related Local Coverage Documents” in the “Section Navigation” drop-down menu at the top of the LCD page.

**Note:** To review active, future and retired LCDs, please [click here](#).

# Hypoglossal nerve stimulation for the treatment of obstructive sleep apnea – new Part A and Part B LCD

## LCD/Article ID number: L38398/A56953 (Florida, Puerto Rico/U.S. Virgin Islands)

This new local coverage determination (LCD) provides limited coverage for hypoglossal nerve stimulation for the treatment of obstructive sleep apnea when a Food and Drug Administration (FDA) approved hypoglossal nerve stimulator is utilized.

This new LCD addresses “Coverage Indications, Limitations, and/or Medical Necessity” and “Provider Qualifications”.

Also, the related billing and coding article (A56953) addresses coding guidelines in support of the reasonable and necessary services as outlined in the LCD.

### Effective date

This new LCD and related billing and coding article are effective for services rendered **on or after March 15, 2020**.

LCDs are available through the CMS Medicare coverage database at <https://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx>.

A coding article for an LCD may be found by selecting “Related Local Coverage Documents” in the “Section Navigation” drop-down menu at the top of the LCD page.

**Note:** To review active, future and retired LCDs, please [click here](#).

### First Coast provider enrollment videos

First Coast Service Options has educational videos dedicated to common questions about the provider enrollment process. These videos are only three-to-five minutes long and they offer you an interactive way to learn.



## Revised LCDs / Articles

## Trastuzumab – trastuzumab biologics -- revision to the Part A and Part B Billing and Coding Article

**Article ID number: A56660 (Florida, Puerto Rico/U.S. Virgin Islands)**

Based on change request (CR) 11605, the status indicator for Healthcare Common Procedure Coding System (HCPCS) code Q5114 changed from “E2” to “K”. Therefore, it was added to the “CPT®/HCPCS Codes/Group 1 Codes” section of the Billing and Coding article.

**Effective date**

This billing and coding article revision is effective for claims processed **on or after January 6, 2020**, for services

rendered **on or after November 29, 2019**.

LCDs are available through the CMS Medicare coverage database at <https://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx>.

A billing and coding article for an LCD may be found by selecting “Related Local Coverage Documents” in the “Section Navigation” drop-down menu at the top of the LCD page.

**Note:** To review active, future and retired LCDs, please [click here](#).

## BRCA1 and BRCA2 genetic testing -- revision to the Part A and Part B Billing and Coding Article

**Article ID number: A57449 (Florida, Puerto Rico/U.S. Virgin Islands)**

Based on further review of the BRCA1 and BRCA2 genetic testing billing and coding article, the “CPT®/HCPCS Codes/Group 1 Codes:” section of the billing and coding article was revised to add Current Procedural Terminology (CPT®) code 81433 and to remove Proprietary Laboratory Analyses (PLA) codes 0129U, 0131U, 0132U, 0135U, 0137U and 0138U.

**Effective date**

This billing and coding article revision is effective for

services rendered **on or after February 8, 2020**.

LCDs are available through the CMS Medicare coverage database at <https://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx>.

A billing and coding article for an LCD may be found by selecting “Related Local Coverage Documents” in the “Section Navigation” drop-down menu at the top of the LCD page.

**Note:** To review active, future and retired LCDs, please [click here](#).

## Therapy and rehabilitation services -- revision to the Part A and Part B Billing and Coding Article

**Article ID number: A57156 (Florida, Puerto Rico/U.S. Virgin Islands)**

Based on review of the billing and coding article, the “CPT®/HCPCS Codes” section was revised.

The “Group 2 Codes:” section was revised to add Current Procedural Terminology (CPT®)/Healthcare Common Procedure Coding System (HCPCS) codes 97116, 97032, G0283, 97024, and 97035.

**Effective date**

This billing and coding article revision is effective for claims

processed **on or after February 20, 2020**.

LCDs are available through the CMS Medicare coverage database at <https://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx>.

A billing and coding article for an LCD may be found by selecting “Related Local Coverage Documents” in the “Section Navigation” drop-down menu at the top of the LCD page.

**Note:** To review active, future and retired LCDs, please [click here](#).

## Noncovered services -- revision to the Part A and Part B Billing and Coding Article

### Article ID number: A57743 (Florida, Puerto Rico/U.S. Virgin Islands)

Based on further review of the noncovered services billing and coding article, vaccine Current Procedural Terminology (CPT®) codes 90620, 90621, 90644, 90650 and 90681 were removed from the “CPT®/HCPCS Codes/Group 1 Codes:” section of the billing and coding article and vaccine CPT® codes 90476, 90477, 90581, 90585, 90632, 90633, 90634, 90647, 90648, 90649, 90680, 90690 and 90691 were removed from the “CPT®/HCPCS Codes/Group 2 Codes:” section of the billing and coding article as they have no preventive benefit.

The Centers for Medicare & Medicaid Services (CMS) may add coverage of preventive vaccine services through the Medicare Benefit Policy Manual under Section 1861(s)(10)

of the Social Security Act.

#### Effective date

This billing and coding article revision is effective for services rendered **on or after February 20, 2020**. LCDs are available through the CMS Medicare coverage database at <https://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx>.

A billing and coding article for an LCD may be found by selecting “Related Local Coverage Documents” in the “Section Navigation” drop-down menu at the top of the LCD page.

**Note:** To review active, future and retired LCDs, please [click here](#).

## Retired LCDs / Articles

## Hepatitis B surface antibody and surface antigen -- retirement to the Part A and Part B LCD and Billing and Coding Article

### LCD and Article ID number: L34003/A57057 (Florida, Puerto Rico/U.S. Virgin Islands)

Based on review of the local coverage determination (LCD) and Billing and Coding Article, it was determined that the LCD and Billing and Coding Article were no longer required and, therefore, are being retired.

#### Effective date

This LCD and billing and coding article retirement is effective for services rendered **on or after February 12, 2020**.

LCDs are available through the CMS Medicare coverage database at <https://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx>.

A billing and coding article for an LCD may be found by selecting “Related Local Coverage Documents” in the “Section Navigation” drop-down menu at the top of the LCD page.

**Note:** To review active, future and retired LCDs, please [click here](#).

## Multiple Part A and Part B LCDs being retired

### LCD and Article ID numbers: L33296/A57769/A54815, L33283/A57652

#### (Florida, Puerto Rico/U.S. Virgin Islands)

Based on review of the following local coverage determinations (LCDs) and billing and coding articles, it was determined that they are no longer required and therefore, are being retired.

L33296/A57769/A54815 - Noncovered Procedures-Endoscopic Treatment of Gastroesophageal Reflux Disease (GERD)

L33283/A57652 - Computed Tomographic Colonography.

#### Effective date

The retirement of these LCDs and billing and coding articles is effective for services rendered **on or after February 14, 2020**. LCDs are available through the CMS Medicare coverage database at <https://www.cms.gov/medicare-coverage-database/overview-and-quick-search.aspx>.

A billing and coding article for an LCD may be found by selecting “Related Local Coverage Documents” in the “Section Navigation” drop-down menu at the top of the LCD page.

**Note:** To review active, future and retired LCDs, please [click here](#).

## Upcoming provider outreach and educational events

### *Medicare Quarterly Updates (A)*

Date: March 17, 2020

Time: 10 a.m. - 11:30 a.m. ET

Type of Event: Webcast

### *View our complete calendar of events*

**Note:** Unless otherwise indicated, designated times for educational events are stated as ET, and the focus is to Florida, Puerto Rico, and the U.S. Virgin Islands.

### Two easy ways to register

**Online** – Visit our provider training website at [First Coast University](#), log on to your account and select the course you wish to register. Class materials are available under “My Courses” no later than one day before the event.

**First-time User?** Set up an account by completing [Create User Account Form](#) online. Providers who do not have yet a national provider identifier may enter “99999” in the NPI field. You will receive logon information within 72 hours of your request.

**Fax** – Providers without internet access may request a fax registration form through our Registration Hotline at 1-904-791-8103. Class materials will be faxed to you the day of the event.

#### **Please Note:**

- Pre-registration is required for all teleconferences, webcasts and in-person educational seminars.
- Dates and times are subject to change prior to opening of event registration.

Registrant's Name: \_\_\_\_\_

Registrant's Title: \_\_\_\_\_

Provider's Name: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Provider Address: \_\_\_\_\_

City, State, ZIP Code: \_\_\_\_\_

Keep checking our [website](#) for details and newly scheduled educational events (teleconferences, webcasts, etc.).

### Never miss a training opportunity

If you or your colleagues were unable to attend one of our past Medicare educational webcasts, you still have the opportunity to learn about the topics covered during the training session. Visit the First Coast Medicare training website, download the recording of the event, and listen to the webcast when you have the time.

### Take advantage of 24-hour access to free online training

In addition to live training events, we also offer you the advantage of self-paced, free online courses that will allow you and your staff to train when and where it is most convenient for you. In addition, our comprehensive course catalog allows you to find the Medicare training that fits your specific needs, and several of our online courses offer CEUs. Learn more on the First Coast Medicare training website and explore our catalog of online courses.



## CMS MLN Connects®



The Centers for Medicare & Medicaid Services (CMS) *MLN Connects*® is an official *Medicare Learning Network*® (MLN) – branded product that contains a week’s worth of news for Medicare fee-for-service (FFS) providers. CMS sends these messages weekly to national health industry provider associations, who then disseminates the *MLN Connects*® to its membership as appropriate.

## MLN Connects® for January 23, 2020

*MLN Connects*® for January 23, 2020

[View this edition as a PDF](#)

### News

- Medicare Learning Network Celebrates 20 Years
- CMS Updates Open Payments Data
- Open Payments Search Tool: New Features
- Shoulder Arthroscopy: Comparative Billing Report in January
- Medicare Diabetes Prevention Program: Become a Medicare Enrolled Supplier
- Issues Viewing the CMS Website?
- Continue Seasonal Influenza Vaccination through January and Beyond

### Compliance

- DMEPOS: Bill Correctly for Items Provided During Inpatient Stays

### Claims, Pricers & Codes

- Medicare Diabetes Prevention Program: Valid Claims

### Events

- Listening Sessions on MAC Opportunities to Enhance Provider Experience — January 29
- Shoulder Arthroscopy: Comparative Billing Report Webinar — February 4
- CMS Quality Conference — February 25-27
- Highly Pathogenic Infectious Disease Training and Exercise Resources Webinar — March 5

### MLN Matters® Articles

- Quarterly Update to the National Correct Coding

Initiative (NCCI) Procedure-to-Procedure (PTP) Edits, Version 26.1, Effective April 1, 2020

- 2020 Durable Medical Equipment Prosthetics, Orthotics, and Supplies Healthcare Common Procedure Coding System (HCPCS) Code Jurisdiction List
- Clinical Laboratory Fee Schedule – Medicare Travel Allowance Fees for Collection of Specimens
- Home Health (HH) Patient-Driven Groupings Model (PDGM) - Split Implementation — Revised
- Implementation to Exchange the List of Electronic Medical Documentation Requests (eMDR) for Registered Providers via the Electronic Submission of Medical Documentation (esMD) System — Revised

### Publications

- Quality Payment Program: 2020 Resources

### Multimedia

- Quality Payment Program: 2019 Data Submission Videos
- Health Care Challenges in Chemical Incidents Webinar Recording
- Infection Prevention and Control: Environmental Safety Web-Based Training Course — Revised
- Infection Prevention and Control: Hand Hygiene Web-Based Training Course — Revised
- Infection Prevention and Control: Injection Safety Web-Based Training Course — Revised

The Medicare Learning Network®, MLN Connects®, and MLN Matters® are registered trademarks of the U.S. Department of Health and Human Services (HHS).

## MLN Connects® for January 30, 2020

MLN Connects® for January 30, 2020

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### News

- CMS Expands Coverage of NGS as Diagnostic Tool for Patients with Breast and Ovarian Cancer
- Nursing Home Quality Initiative: Draft MDS 3.0 Item Set Change History
- Nursing Homes: Use Updated Infection Control Worksheet
- Glaucoma Awareness Month: Make a Resolution for Healthy Vision

### Compliance

- Hospice Care: Safeguards for Medicare Patients

### Claims, Pricers & Codes

- OPPS Pricer File: January 2020

### Events

- Ground Ambulance Organizations: Reporting Staff and Labor Costs Open Door Forum — February 6
- Ground Ambulance Organizations: Reporting Volunteer Labor Call — February 20

### MLN Matters® Articles

- Increasing Access to Innovative Antibiotics for Hospital Inpatients Using New Technology Add-On Payments: Frequently Asked Questions
- January 2020 Update of the Hospital Outpatient Prospective Payment System (OPPS)

- Update to the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) for Vaping Related Disorder
- Add Dates of Service (DOS) for Pneumococcal Pneumonia Vaccination (PPV) Health Care Procedure Code System (HCPCS) Codes (90670, 90732), and Remove Next Eligible Dates for PPV HCPCS — Revised
- Calendar Year (CY) 2020 Annual Update for Clinical Laboratory Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment — Revised

### Publications

- Safeguards for Medicare Patients in Hospice Care
- Medicare Part B Immunization Billing: Seasonal Influenza Virus, Pneumococcal, and Hepatitis B — Revised
- Skilled Nursing Facility Prospective Payment System — Revised

### Multimedia

- ESRD Quality Incentive Program: Audio Recording and Transcript
- MAC Listening Session: Audio Recording and Transcript

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### Medicare Learning Network®

The Medicare Learning Network® (MLN) is the home for education, information, and resources for the health care professional community. The MLN provides access to CMS Program information you need, when you need it, so you can focus more on providing care to your patients. Find out what the MLN has to offer you and your staff at <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNGenInfo/index.html>.

## MLN Connects® for February 6, 2020

*MLN Connects® for February 6, 2020*

[View this edition as a PDF](#) 

### News

- Open Payments Registration
- Promoting Interoperability Programs: Deadline to Submit 2019 Data is March 2
- Quality Payment Program: Updated Explore Measures Tool
- Quality Payment Program: MIPS 2020 Call for Measures and Activities
- Medicare Promoting Interoperability Program: Requirements for 2020
- SNF Quality Reporting Program: FY 2022 APU Table
- Reassignment of Medicare Benefits: Revised CMS-855R Required May 1
- February is American Heart Month

### Compliance

- Outpatient Rehabilitation Therapy Services: Comply with Medicare Billing Requirements

### Claims, Pricers & Codes

- ICD-10-CM: New Diagnosis Code for Vaping-related Disorders Effective April 1

### Events

- Substance Use Disorders: Availability of Benefits

## MLN Connects® for February 13, 2020

*MLN Connects® for February 13, 2020*

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### News

- DMEPOS Items Subject to Prior Authorization
- Influenza Activity Continues: Are Your Patients Protected?

### Compliance

- Proper Coding for Specimen Validity Testing Billed in Combination with Urine Drug Testing

### Events

- Substance Use Disorders: Availability of Benefits Listening Session — February 18
- Ground Ambulance Organizations: Reporting Volunteer Labor Call — February 20
- Dementia Care: CMS Toolkits Call — March 3
- Hospice Item Set Data Submission Requirements Webinar — March 3
- Part A Providers: QIC Appeals Demonstration Call — March 5

Listening Session — February 18

- Ground Ambulance Organizations: Reporting Volunteer Labor Call — February 20
- Dementia Care: CMS Toolkits Call — March 3
- Part A Providers: QIC Appeals Demonstration Call — March 5

### MLN Matters® Articles

- Provider Enrollment Appeals Procedure
- Quarterly Influenza Virus Vaccine Code Update — July 2020
- 2020 Annual Update to the Therapy Code List — Revised
- 2020 Durable Medical Equipment Prosthetics, Orthotics, and Supplies Healthcare Common Procedure Coding System (HCPCS) Code Jurisdiction List — Revised

### Publications

- Medicare Mental Health
- Medicare Provider Enrollment

### Multimedia

- MAC Listening Session: Audio Recording and Transcript

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- Ground Ambulance Organizations: Data Collection for Public Safety-Based Organizations Call — March 12

### MLN Matters® Articles

- Update to the Home Health Grouper for New Diagnosis Code for Vaping Related Disorder
- Updates to Ensure the Original 1-Day and 3-Day Payment Window Edits are Consistent with Current Policy
- Update to the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) for Vaping Related Disorder — Revised
- January 2020 Update of the Hospital Outpatient Prospective Payment System (OPPS) — Revised

### Publications

- Diabetes Management Resources
- Caring for Medicare Patients is a Partnership — Revised

### Multimedia

- MAC Listening Session: Audio Recording and Transcript

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## First Coast Service Options Phone Numbers

*(Note: Specific geographic contact information is noted when phone numbers and addresses are different for providers in Florida, U.S. Virgin Islands or Puerto Rico.*

### Customer service

Monday to Friday  
8:00 a.m. to 4:00 p.m.  
**888-664-4112** (FL/USVI)  
**877-908-8433** (Puerto Rico)  
**877-660-1759** (TDD-FL/USVI)  
**888-216-8261** (TDD-Puerto Rico)

### Electronic data interchange

**888-670-0940** (FL/USVI)  
**888-875-9779** (Puerto Rico)

### Interactive Voice Response

**877-602-8816**

### Overpayments

904-791-6029

### SPOT Help Desk

[FCOSPOTHelp@fcso.com](mailto:FCOSPOTHelp@fcso.com)  
855-416-4199

### Provider websites

[English](#)  
[Spanish](#)

## First Coast Service Options Addresses

### Claims/correspondence

#### Florida/ U.S. Virgin Islands

Medicare Part A Customer Service  
P. O. Box 2711  
Jacksonville, FL 32231-0021

#### Puerto Rico

First Coast Service Options Inc.  
P.O. Box 45003  
Jacksonville, FL 32232-5003

### Medicare EDI

#### Electronic claim filing

Direct Data Entry  
P. O. Box 44071  
Jacksonville, FL 32231-4071

### Fraud and abuse

Complaint Processing Unit  
P. O. Box 45087

### FOIA requests

#### Provider audit/reimbursement

(relative to cost reports and audits)  
Attn: FOIA PARD – 16T  
P. O. Box 45268  
Jacksonville, FL 32232-5268

#### General Inquiries

[Online Form \(Click here\)](#)  
[EDOC-CS-FLINQA@fcso.com](mailto:EDOC-CS-FLINQA@fcso.com) (FL/USVI)  
[EDOC-CS-PRINQA@fcso.com](mailto:EDOC-CS-PRINQA@fcso.com) (PR)

### Local coverage determinations

Medical Policy and Procedures – 19T  
P.O. Box 2078  
Jacksonville, FL 32231-0048

### Medicare secondary payer (MSP)

Medicare Secondary Payer  
P. O. Box 44179  
Jacksonville, FL 32231-4179

### Hospital audits

MSP – Hospital Review  
P. O. Box 45267  
Jacksonville, FL 32232-5267

### MSPRC DPP debt recovery, auto accident settlements/lawsuits, liabilities

Auto/Liability – 17T  
P. O. Box 44179  
Jacksonville, FL 32231-4179

### Overpayment collections and debt recovery

Repayment, cost reports, receipts  
and acceptances, tentative settlement  
determinations, provider statistical and  
reimbursement reports, cost report  
settlement, TEFRA target limit and SNF  
routine cost limit exceptions

Provider Audit and Reimbursement  
P. O. Box 45268  
Jacksonville, FL 32232-5268

### Credit balance reports

First Coast Service Options Inc.  
P.O. Box 45011  
Jacksonville, FL 32232-5011

### Post-pay medical review

First Coast Service Options Inc.  
P. O. Box 44159  
Jacksonville, FL 32231-4159

### Provider enrollment

**CMS-855 Applications**  
P. O. Box 3409  
Mechanicsburg, PA 17055-1849

### Special or overnight deliveries

Provider Enrollment  
2020 Technology Parkway Suite 100  
Mechanicsburg, PA 17055-1849

### Redetermination

#### Florida:

Medicare Part A Redetermination/Appeals  
P. O. Box 3409  
Jacksonville, FL 32232-5053

#### U.S. Virgin Islands:

First Coast Service Options Inc  
P. O. Box 45097  
Jacksonville, FL 32232-5097

#### Puerto Rico

First Coast Service Options Inc.  
P.O. Box 45028  
Jacksonville, FL 32232-5028

### Special delivery/courier services

First Coast Service Options Inc.  
532 Riverside Avenue  
Jacksonville, FL 32202-4914

### Other Medicare carriers and intermediaries

#### DME regional carrier (DMERC)

DME, orthotic, prosthetic device, take-  
home supply, oral anti-cancer drug claims  
CGS Administrators, LLC  
P. O. Box 20010  
Nashville, Tennessee 37202

#### Railroad Medicare

Palmetto GBA  
P. O. Box 10066  
Augusta, GA 30999-0001

#### Regional home health/hospice intermediary

Palmetto GBA  
Medicare Part A  
34650 US HWY 19N  
Palm Harbor, FL 34684

## Contact CMS

### Centers for Medicare & Medicaid Services (CMS)

Centers for Medicare & Medicaid Services,  
Division of Financial Management and Fee  
for Service Operations

[ROATLFM@CMS.HHS.GOV](mailto:ROATLFM@CMS.HHS.GOV)

#### Office of Inspector General (OIG)

Medicare fraud hotline  
800-HHS-TIPS (800-447-8477)

#### Beneficiary customer service

1-800-MEDICARE (1-800-633-4227)

#### Hearing and speech impaired (TDD)

1-800-754-7820