

# National Supplier Clearinghouse Advisory Committee (NSCAC)

*Improving communication between the National Supplier Clearinghouse (NSC) and the supplier community*

## NSCAC MEETING MINUTES WITH THE NSC

**Date:** Thursday, October 29, 2015

**Time:** 10:30am – 12:00pm eastern time

**Location:** C113 at the Georgia World Congress Center

Present: Joan Cross, Paula Koenig, Miriam Lieber, Gwen Turner, Judy Bunn, Jolene Ward, Lisa Wells, Ronda Buhrmester, Kimberlie Rogers-Bowers, Sheila Roberson, and Rose Schafhauser. Guests: Barb Stockert, Kim Brummett, Wayne vanHale, Troy Lakemand, Chuck Wood, Cadie McGonagill, and Jenna Pedersen. NSC: Nancy Parker, Marlene Frierson. CBIC: Elaine Hensley. Meeting opened at 9:04am eastern time. Minutes taken by Rose Schafhauser.

1. Roll Call: NSC staff, CBIC, CMS, NSCAC Members roll call: Joan Cross opened the meeting with roll call.
2. Statement of protocol for meeting: Joan Cross - Only NSCAC Members are able to vote on NSCAC business; do not discuss individual company issues before or after the NSCAC/NSC meeting.
3. Approval of the meeting minutes from March 2015: Miriam Lieber made a motion to accept the meeting minutes as presented. Kimberlie Rogers-Bowers second. Motion carried.
4. CMS/NSC updates: Zabeen Chong, Barry Bromberg, Nancy Parker, Marlene Frierson
  - a. Nancy introduced Marlene Frierson, our new representative.
  - b. No other updates from the NSC. They still have the contract. The GAO agreed with the protest but the NSC hasn't seen the GAO report. The GAO gives a recommendation, but CMS doesn't have to listen. So it is in a procurement status. They could keep contract for 3 more years (would be a total of 10 years) and do nothing. There's no time frame per the NSC.
  - c. CMS updates: no one from CMS at the meeting.
  - d. PECOS:
    - i. Physician problems: Paula says physician enrollment in PECOS – there is confusion in transition patients when physician isn't enrolled in PECOS.
    - ii. For rental items, they were supposed to allow 13 months rental even if physician retires or is no longer enrolled in PECOS. Rental claims are being denied. The MACS decided that this only applied to the beginning of the rule for purposes of grandfathering for 13 months.
      1. Per Kim B. at AAHomecare, this is being taken up with CMS.
    - iii. Other problem is that physician looks active on list and then claim is denied saying physician is not enrolled. After checking, physician still appears to be on list. There is no real answer because there is no explanation.
      1. According to the NSC, this should be a claim processing error and it should be taken up with the MACs.
        - a. We have done that already. The NSC says it is not in the group of people they can influence. According to Paula, we will take it up with CMS.
    - iv. Sheila says that they are taking a picture of the various examples of when physician is on list but claim is denied. According to Elaine Hensley, there is a dis-connect in the CMS file when it gets uploaded.
      1. The NSC will try to move the issue and will take it up with the people they know to see what can be done.
    - v. PECOS is not holding information in provider file – example provided were the Lincare had a Delegated Official leave in May and they submitted it in writing and the individual is still in PECOS as of last week. Per the NSC, there is no such thing as a global update. She assumes they have been done after she submits a change form for a change, but she can't guarantee it.

### NSCAC Operations

10480 Perkins Avenue North

Stillwater, MN 55082

Ph: 651-351-5395 Website: [www.nscac.org](http://www.nscac.org) Email: [schafhause@aol.com](mailto:schafhause@aol.com)

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1. Nancy says they should call customer service if you see something wrong. If the not sticking issue is still happening after 2<sup>nd</sup> week in October, Nancy needs to hear about it. This was to have been fixed by CGI.
  - vi. According to Paula, she asks for 3 changes at the same time, but only one gets done.
  - vii. Status problems – Paula said she did a change of address – if they go on NSC status tool, it says there's no change. PECOS status may show it. There is a disconnect between the two places and there's worry about this. Not sure what the lag time is, but even so, it is concerning.
    1. According to Nancy, the two places should have the same information in a relatively short period of time. Nancy needs some examples.
  - e. Deceased/retired physicians drop off. CMS was working on fix: There was no update.
5. Old Business:
- a. Site Inspections: no update or issues reported.
  - b. Licensure: crosswalk of the HCPCS codes tied to the product category codes in licensure database:
    - i. PDAC updated crosswalk, CMS has not. Licenses for things like diabetic shoes are still an issue. CMS has not yet published the list per Nancy. She does not have it yet.
    - ii. There are people getting revocation letters for states where they were not licensed. They produced a "billing report" and it lists the claims where patient's perm place of residence is in a different state than where the item was delivered. Gwen from Roberts got a "compliance letter" but Sheila got a "revocation" letter.
      1. Nancy says just to let them know by way of documentation and it should be fine.
      2. For Wayne, there were a lot of patients in the North East and they got a revocation letter for 70 patients.
        - a. When there's a 21-day letter (if license is the only reason), the NSC typically doesn't hear from the provider. When they send the revocation letter, they get a response, per Nancy. Most analysts will put a contact name. Nancy is not sure they can get the KT modifier (traveling patients). Nancy says they do send a certified letter before revoking.
        - b. Wayne asks what should we do in the instance when the revocation is received.
          - i. Submit a CAP but if it's not going to be processed in time, also submit a reconsideration. If you put it in one request, per Marlene, they will process CAP first and if it is not accepted they will go on to the reconsideration. You can do it in one request and it will go on to reconsideration and it won't hurt you per Marlene.
6. New Business:
- a. Other:
    - i. Paula asked for verification from Marlene – in her presentation that you need to inform the NSC of a warehouse. We thought warehouse did not need a PTAN or NPI.
      1. Marlene will look at the section to determine what is to be done. You shouldn't have to send this information to the NSC since they don't have PTANs or NPIs. It is just where a service tech comes and gets inventory – they don't look for accreditation but the NSC has the right to go there, per Nancy. No need to send this information in. Miriam asks that they do a Q and A on when a warehouse needs to be reported.
      2. Per Nancy if it's just service, but no patients go there, no reason to report it.
    - ii. With regard to fingerprinting, is there something about "partner" that we should know.
      1. Nancy says it is in the 855S. If you say you are a partner or a 5% owner you will get a fingerprint. Ownership is what determines fingerprinting. Board of directors does not get finger printed.
  - b. Review of Q & A: The question and answer document was reviewed.

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7. CBIC updates: Elaine Hensley
  - a. Round 1:
    - i. They are currently in bidding of Round 1 2017 – must get financial documents in by the deadline. But it is just to make sure they get it in and it is not missing. Question asked if calculations are wrong, can we make a correction. You can still submit a different financial document, the latest document overrides first document submitted.
  - b. Registration EIBM was implemented in Round 2 recompetes – you have to register. Only issue is with those who migrated but didn't go on in and check for mismatches or changes. Sometimes PECOS and EIBM files don't match. They go internally through CBIC to IT group to get fixed.
  - c. Round 2 – Recompetes – bonafide bid letters are going out in 30-60 days to notify the supplier if they were outside the amount expected and you can't support the bid amount. If you entered the wrong amount you won't be able to correct the amount. You have to be able to substantiate it.
  - d. Contracting for SPA will go out in winter 2016 – it is Jan-March – once they accept or decline, there will be an announcement of winners and then you have to check supplier locator tool on cms.gov.
  - e. If you don't win a competition but you get the letter saying you didn't win, you can appeal. You probably won't win on appeal for loss due to price.
  - f. Per Elaine, new to round 2 recompetes – there's a new portal --online Connexion and they can fill out contracts using this vehicle. Many forms will be added to this portal. Form Cs will also be on this portal. Per Elaine, there's no other way to submit information once this is up. It will all be on line. They have opened up the opportunity to communicate with the DO and AO so that providers are not held hostage due to their status.
  - g. Rollout of CB national pricing – non rural areas may be confused with national pricing.
    - i. 9 zip codes in 2016 are published as rural in 2016 but for round 1, 2017 they are designated as in CBA. Some may not realize they need to be bidding if they've used the 2016 zip codes which states the zip codes are rural. They should be taken off the rural list for 2017.
8. Future NSCAC/NSC Meetings:
  - a. January 27, 2016 (4th Wed of the Month) – Cancelling this meeting in favor of meeting at Medtrade Spring.
  - b. Medtrade Spring Feb 29 - March 2, 2016 – will shoot for March 2
  - c. July 27, 2016 (4th Wed of the Month)
  - d. Medtrade Fall October 31 – November 3, 2016.
9. Adjournment: Joan Cross adjourned the meeting at 11:38am eastern time.

### **Addendum to notes from the CBIC:**

During the NSCAC meeting at Medtrade, one of the members indicated we processed contract supplier forms submitted by a Delegated Official (DO). With the example provided, we researched our records and found all forms were processed while the member was an Authorized Official (AO). Additionally, we reviewed CMS' guidance to us and it only authorizes us to \*speak\* to DOs. At this time, we are not authorized to process forms submitted by a DO. All forms must be submitted by an AO. Can you add this to the NSCAC minutes or as an addendum, please? I noticed a few of the attendees perked up during this conversation and it is possible they will submit forms signed by DOs. We will deny/reject the requests if not submitted by an AO. If this direction from CMS should change, I will advise you.

Elaine Hensley, Chief Liaison  
Palmetto GBA  
DMEPOS Competitive Bidding Implementation Contractor  
<http://www.PalmettoGBA.com/disclaimer>

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