Graduate Medical Education Payments for Fellows



New Group Appeal Initiative: Challenging DGME Post-IRP/Fellows FTE Weighting



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Agenda

- Overview of Hall Render Medicare Group Appeal Opportunities
- New DGME Initiative
- Questions





Group Appeal Opportunities

- Direct Graduate Medical Education for Fellows/Residents beyond Initial Residency Period/Post-IRP
- Capital DSH for Urban to Rural Reclassed Hospitals
- Medicare DSH Inclusion of 1115 Waiver Days in Medicaid Eligible Days Count
- Medicare DSH Inclusion of all SSI Eligible Days (SSI Dual Eligible Days) in Medicare Fraction Numerator
- Medicare DSH Data Match to Correct Errors in Matching Process
- Understated Standardized Amount to Correct Duplicate Counting of Transfers in 1983
 Base Rate
- Correction of 340B Payments



DGME Post-IRP/Fellows FTE Weighting

- Primarily affects fellowship programs
- Hershey Case
 - Former calculation "contrary to statute"
 - Required weighting: Residents 1.0, Fellows 0.5
 - Proportional reduction weighted Fellows < 0.5
- FY2023 Final Rule
 - Applies to "all payments, past and future"
 - Retroactive to October 1, 2001
 - Improper rule implemented in 1997
 - Applies to "open" cost reports
 - What is "open"? RNPRs? Pending appeals?
 - Proposed rule: open or reopenable

Jurisdictional Buckets

180-day Appeal Window

- All NPRs and RNPRs issued after August 10, 2022
- New rule should have been applied

3-year Reopening Window

- Hospitals should request reopening, but don't expect it to be granted.
- We will appeal on grounds that CMS should have mandated reopening CRs, like it did with MA-DGME payments.
- Includes RNPRs for MA-DGME issue

Open on Appeal

 Ambiguity with retroactive application of the rule: What is an "open" cost report?



Fully Closed

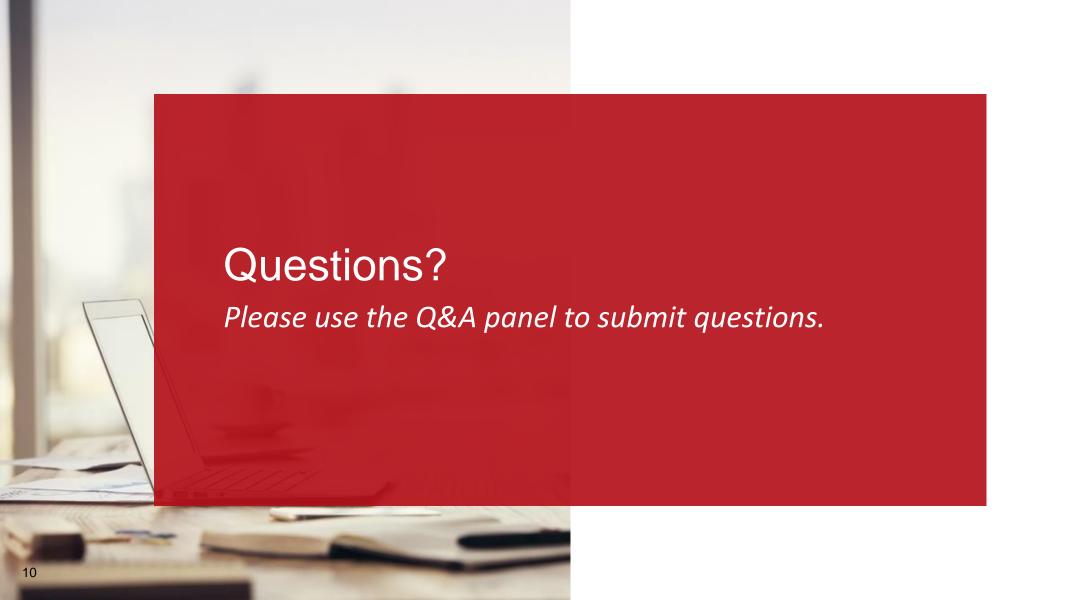
 Toughest argument: all affected CRs from 1997 forward should be corrected, as CMS has proposed in response to Allina (DSH payments)

Supporting Documentation

- Intern and Resident Information System (IRIS) Reports
 - Readable format
 - May request from MACs/CMS?
 - Info from Hosp's Med. Ed. Office re fellowship programs
- Public ACGME-Accredited Program Data
- Group Appeal will cover 1997-2023 for all participants
 - Viable claims will be identified for each participant

Fee Arrangement

- 80% Standard Rates + 10% Success Fee
- Divided proportionally among all participants based on potential impact



Contact Us

For more information on these topics visit <u>hallrender.com</u>.

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