

mln webcast

A MEDICARE LEARNING NETWORK® (MLN) EVENT

Medicare Part A Cost Report: Easier File Uploads in MCReF

Thursday, April 29, 2021

Presenters:

Owen Osaghae, CMS Jolene Nguyen, CGI Federal





Acronyms in this Presentation

- BSO Backup Security Official
- CCN CMS Certification Number
- CMHC Community Mental Health Center
- ECR Electronic Cost Report
- IDM Identity Management system
- ESRD End Stage Renal Disease
- FQHC Federally Qualified Health Center
- FTE Full Time Equivalent
- FYB Fiscal Year Begin
- FYE Fiscal Year End
- GME Graduate Medical Education
- HHA Home Health Agency
- Histolab Histocompatibility Laboratory
- HO Home Office
- IME Indirect Medical Education
- IPPS Inpatient Prospective Payment System

- IRIS Intern and Resident Information System
- LPIC Limited Purpose Insurance Company
- MAC Medicare Administrative Contractor
- MCR Medicare Cost Report
- MCReF Medicare Cost Report e-Filing system
- NPR- Notice of Program Reimbursement
- OPA Organ Procurement Agency
- PHI Protected Health Information
- PII Personally Identifiable Information
- PS&R Provider Statistical and Reimbursement System
- RHC Rural Health Clinic
- SNF Skilled Nursing Facility
- SO Security Official
- STAR System for Tracking Audit and Reimbursement





Meeting Overview

- Introduce updated Medicare Cost Report e-Filing system (MCReF): new user-friendly upload feature
- Communicate additional resources and information available





Agenda

- Introductions
- Background and Overview
- MCReF Walkthrough and Detailed Overview
- Ongoing Outreach and Education
- Q&A





Business Overview

- The Medicare Cost Report (MCR) is used to determine Part A providers' annual Medicare reimbursable cost.
- Providers use a variety of sources (including Provider Statistical and Reimbursement system (PS&R) claim reimbursement data) to create their MCR.
 - There are about 50,000 MCRs submitted each year that account for over \$200 Billion of Medicare reimbursement.
- Regulation specifies deadline for submitting an acceptable cost report
- Medicare Administrative Contractors (MACs) have requirements for receiving, accepting, reviewing, auditing, and finalizing cost reports.





History of Cost Report Submission and Receipt Process

Historically

 Most cost reports are mailed or hand-delivered; a few were transmitted via MAC portals

May 2018

 MCReF allows Part A providers to electronically transmit (e-File) their MCR package

2020

- April: MCReF allows Part A providers to track their MCRs through the settlement process
- October: MCReF allows for e-filing multiple cost report submissions simultaneously

May 2021

 Updated MCReF functionality, available starting May 2021, allows for new user-friendly upload feature





MCReF Usage

- Since 5/1/2018:
 - Over 48,000 successful submissions from over 5,500 distinct users
 - Median Submission Time: 3.2 seconds
 - Over 1,900 providers were able to correct errors with their MCR prior to submission and without the need for correspondence with their MAC, and potentially avoiding the rejection of their MCR
 - Tentative Settlement payments issued faster on average for MCReF submissions versus non-MCReF submissions
- CY2021 to date: 55% of all MCR submissions were e-Filed via MCReF
- A few quotes received from MCReF users:
 - "I am loving the cost report submission season! MCReF is awesome!"
 - "This is a great, centrally located tool for cost report filing statuses, especially when you have multiple facilities and multiple fiscal years."
 - "Finally started using it this year, and kicking myself for not doing it sooner!"
 - "...I have been involved in cost reporting since 1983. This is the best initiative that I have seen from CMS to help providers and be more efficient."





CMS Goal

- Expand the use of Medicare Cost Report e-Filing system (MCReF)
 - Improve e-filing functionality
 - Increase transparency to providers through cost report tracking





MCReF – High Level System Changes

- New updates coming to MCReF by mid-May will allow Part A providers to submit documents without turning them into ZIP files, tag documents, and get alerts about missing documents
 - Usage is still optional. Mail and hand-delivery remain filing options.
 - Remains accessible by your IDM PS&R Security Official (SO), Backup Security Official (BSO), and MCReF Approved Cost Report Filer.





Advantages of MCReF for Providers

- One process for all providers via one submission portal
 - Available to all Part A providers regardless of MAC
 - Beneficial to chain organizations which have providers at multiple MACs, and any time you change MACs
 - Reduces confusion, delays, and time you spend on administrative processes
- Direct feedback on the receivability of your MCR submission
- Tentative Settlement payments issued faster on average for MCReF submissions
- Live updates on cost report status from submission through desk review and final settlement





Updated MCReF System





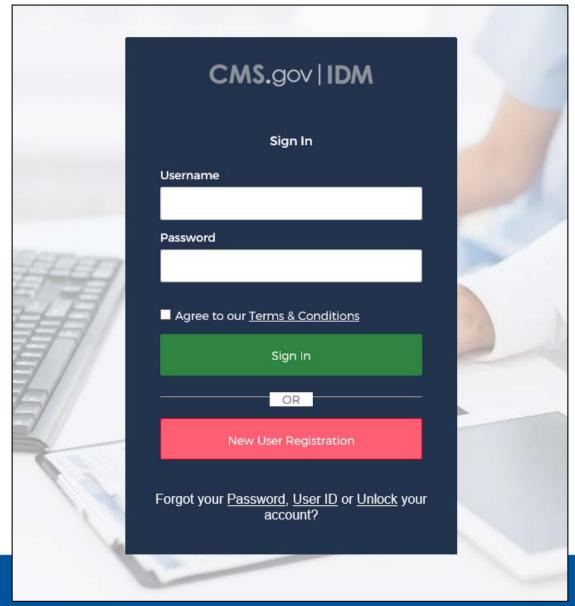
MCReF Detailed Overview

- System Login: https://mcref.cms.gov
- Access is now controlled by IDM
 - Effective January 18, 2021, the Enterprise Identity Management (EIDM) system was upgraded to the Identity Management (IDM) system
 - All existing accounts were brought over as-is
 - Restricted to IDM PS&R SO / BSO / MCReF Approved Cost Report Filer
 - Existing PS&R SOs / BSOs already have access
 - Any organization without access to PS&R must register a PS&R SO with IDM.
 - Note: If you want to use MCReF, keep your IDM accounts in good-standing.
 - Includes password updates and timely replacement of SOs.
 - IDM credential issues are not a valid reason for late MCR filing.





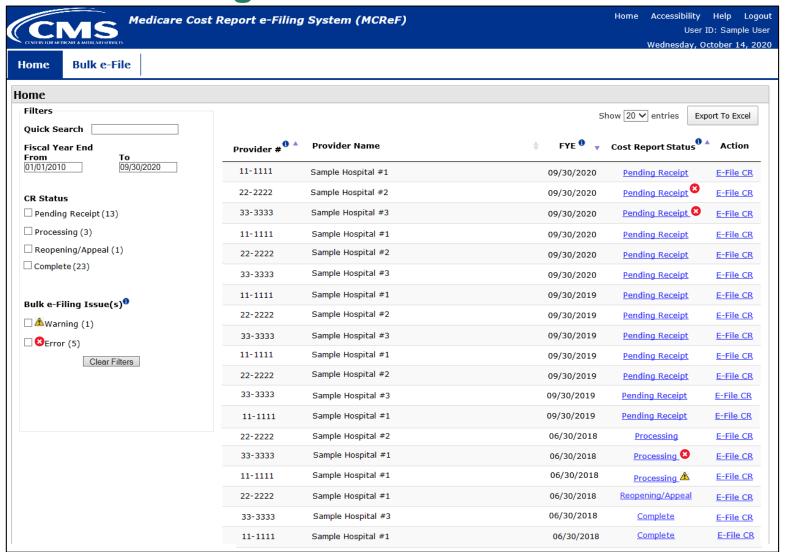
MCReF Login via IDM







Existing Individual e-Filing Process

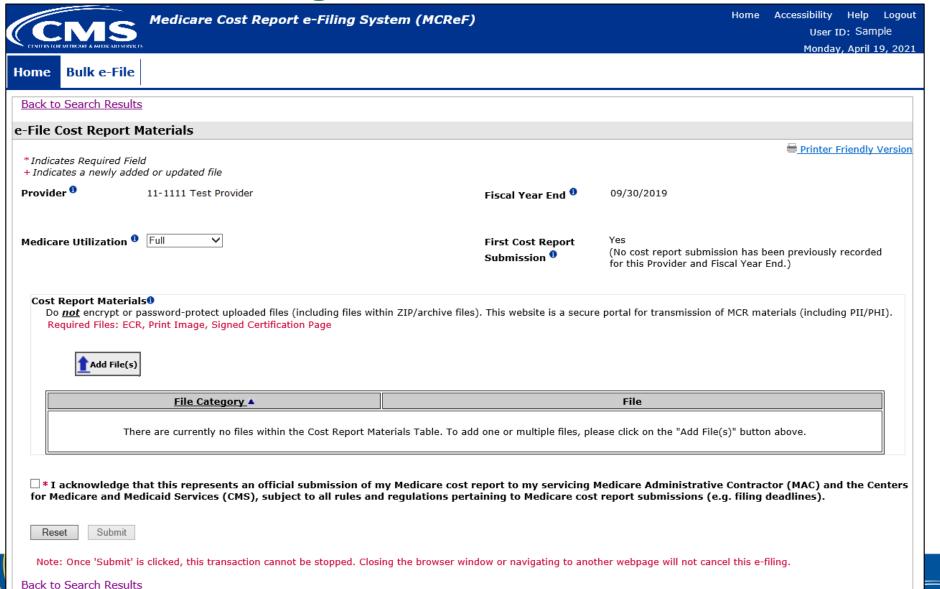






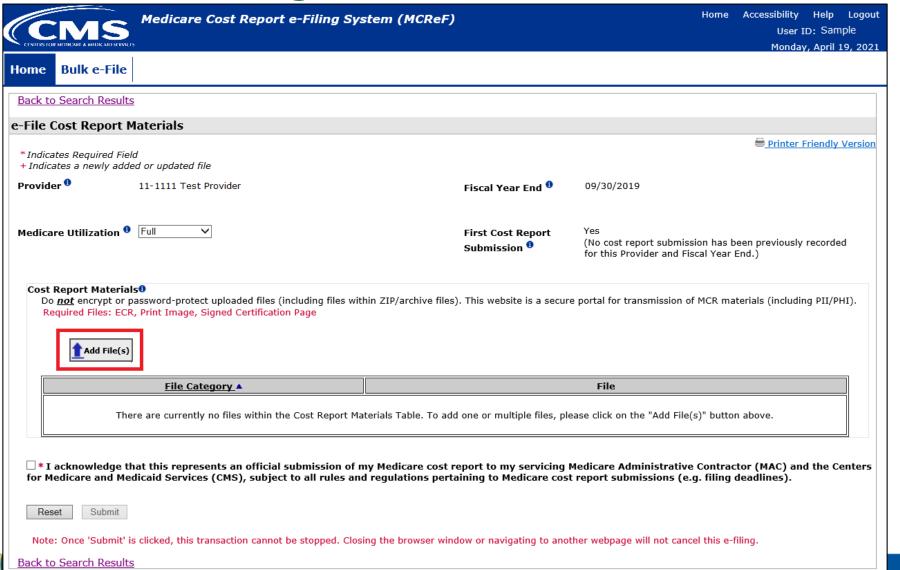
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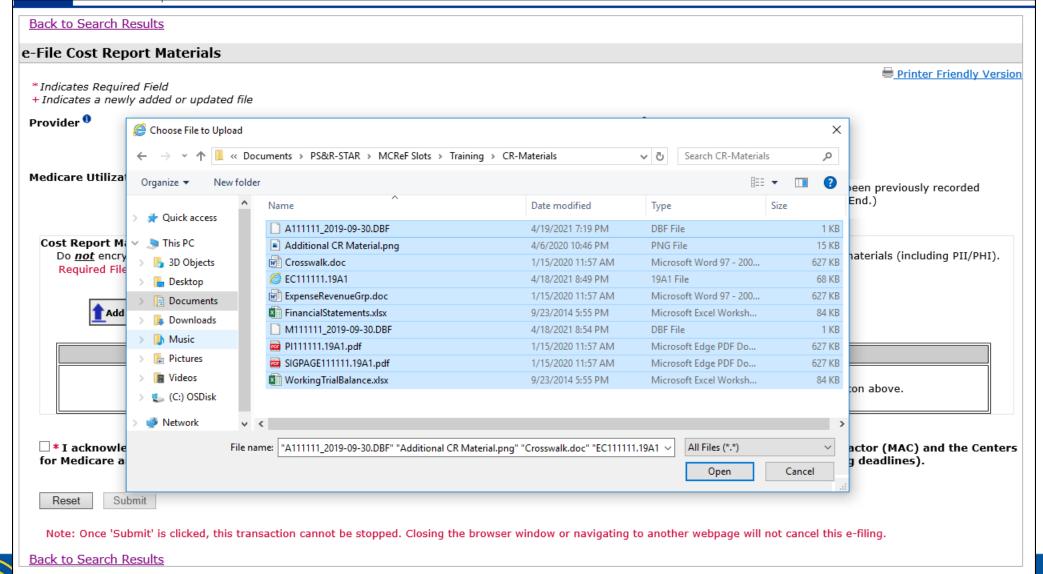


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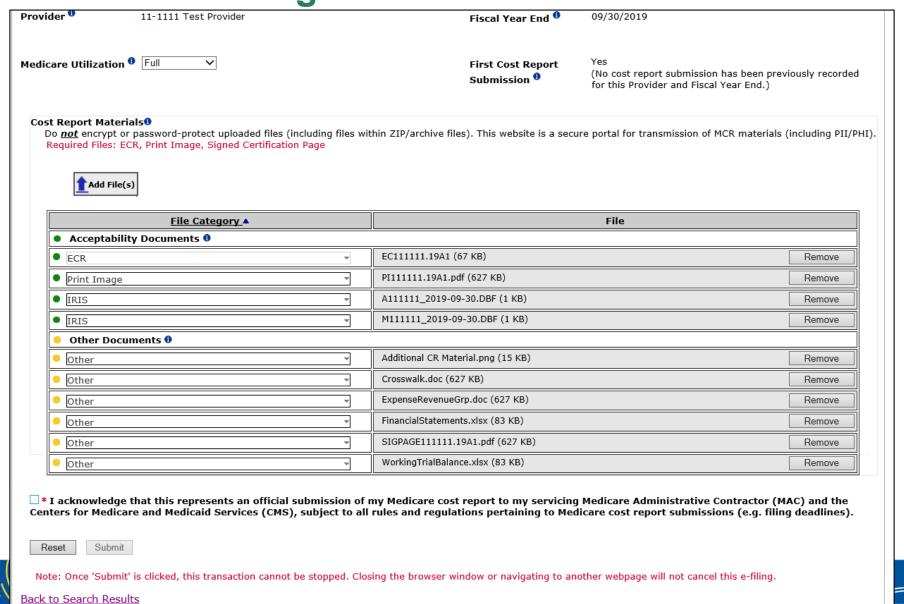
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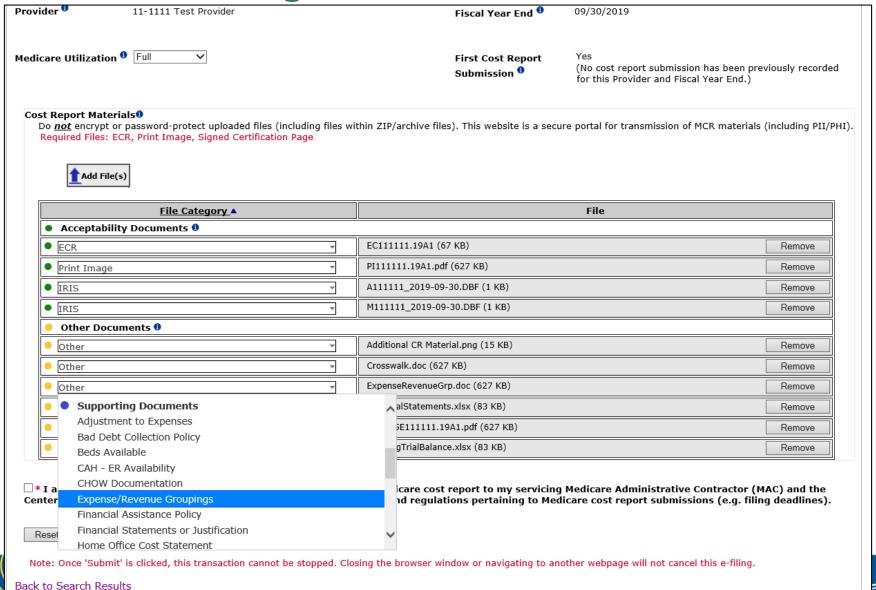


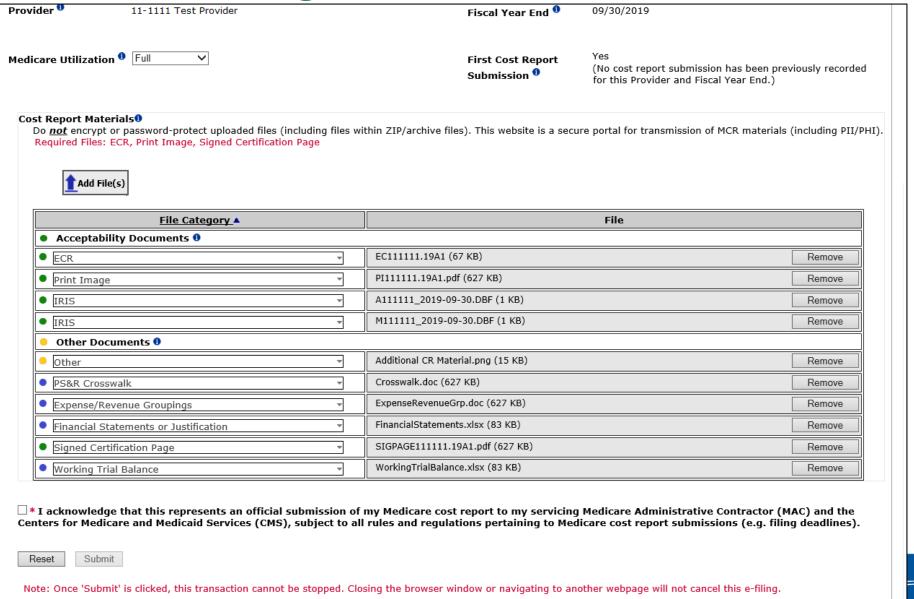






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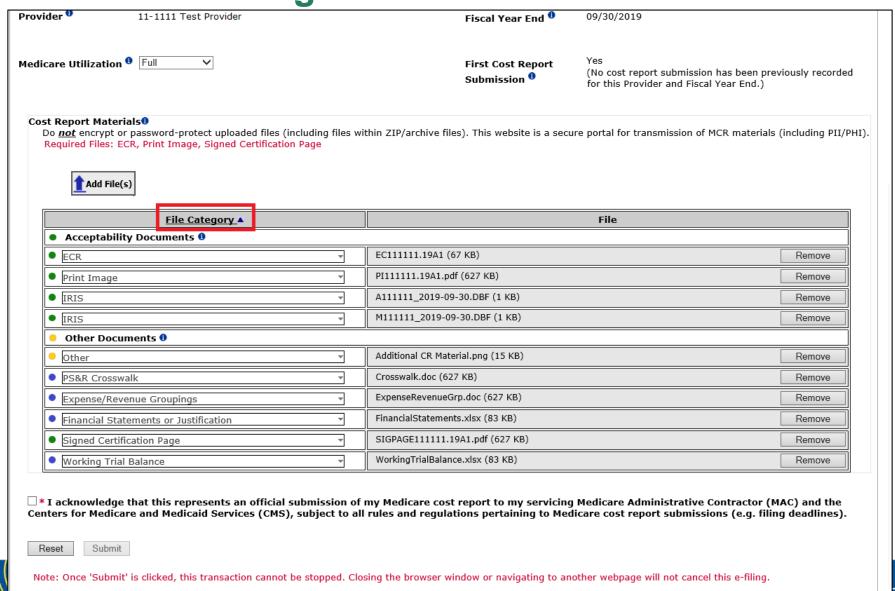




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Note: Once 'Submit' is clicked, this transaction cannot be stopped. Closing the browser window or navigating to another webpage will not cancel this e-filing.

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Reset

Submit



Success Message

Success S0000: The cost report submission has been received by the system. Your MAC will determine if it is acceptable and may contact you for additional information or corrections. Refer to the dashboard periodically for the updated status of the cost report.

e-File Cost Report Materials - Confirmation

Printer Friendly Version

Cost Report Submission Details

e-Filing ID: 3314059

e-Postmark Date: 04/19/2021 10:50 PM ET

Provider: 11-1111 Test Provider

Fiscal Year End: 09/30/2019

Medicare Utilization: Full

First Cost Report Submission: Yes

Acceptability Documents

ECR: EC111111.19A1

Print Image: PI111111.19A1

Signed Certification Page: SIGPAGE111111.19A1.pdf

IRIS: A111111_2019-09-30.DBF, M111111_2019-09-30.DBF

Supporting Documents

Expense/Revenue Groupings: ExpenseRevenueGrp.doc

Financial Statements or

Justification:

FinancialStatements.xlsx

PS&R Crosswalk: Crosswalk.doc

Working Trial Balance: Working Trial Balance.xlsx

Other Documents

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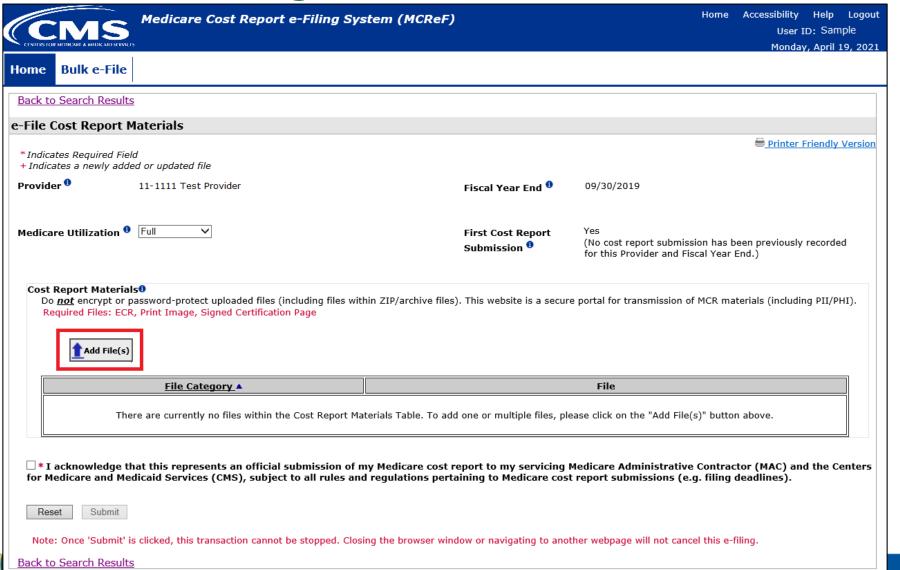
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Logout

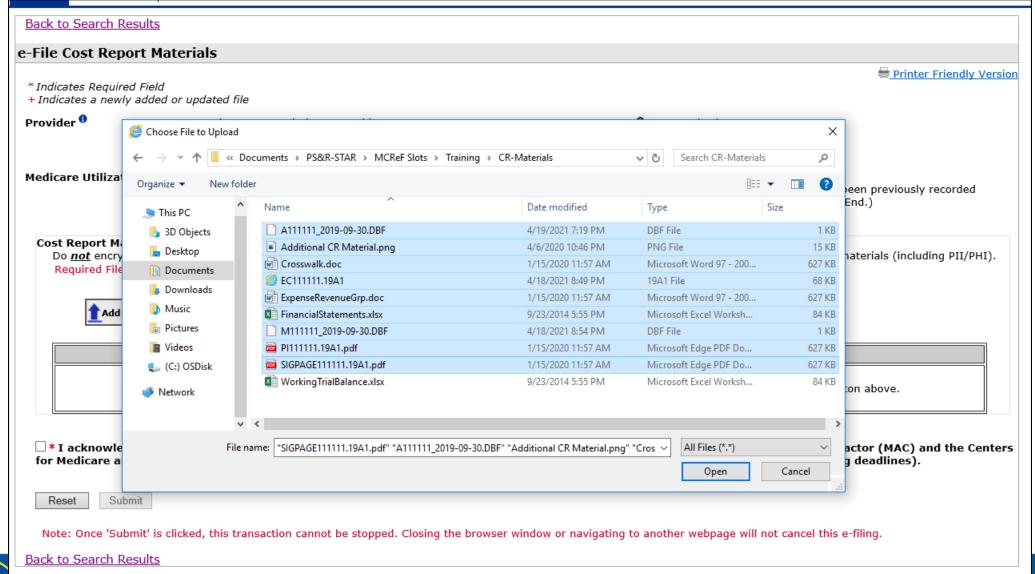
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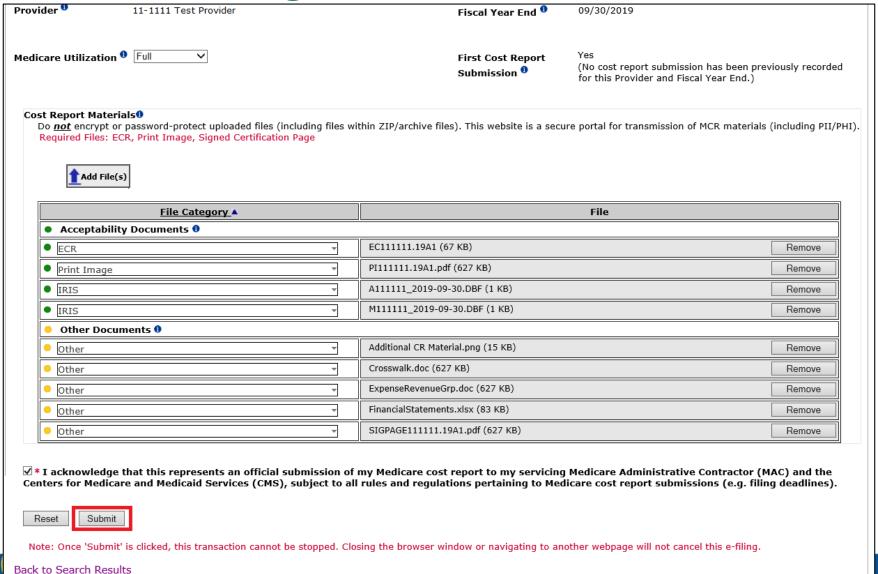




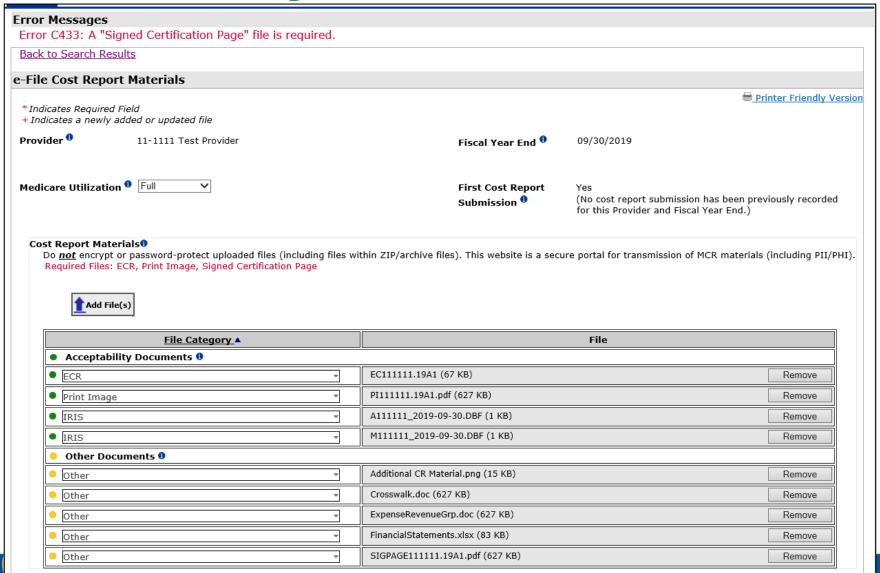




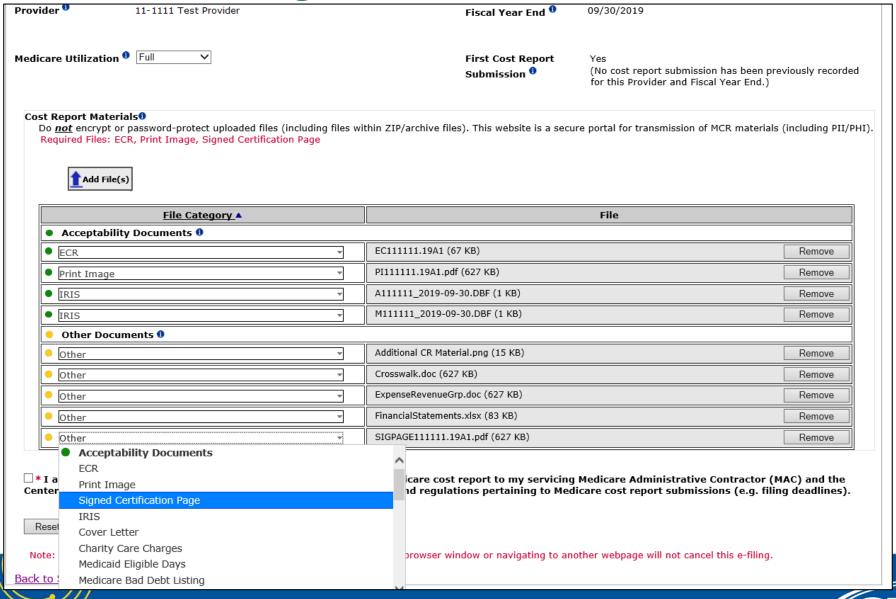


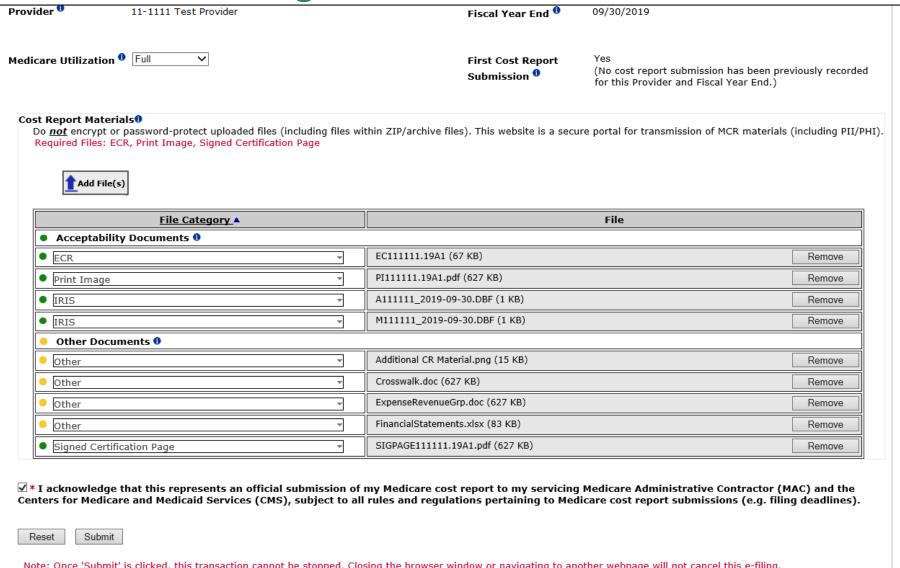










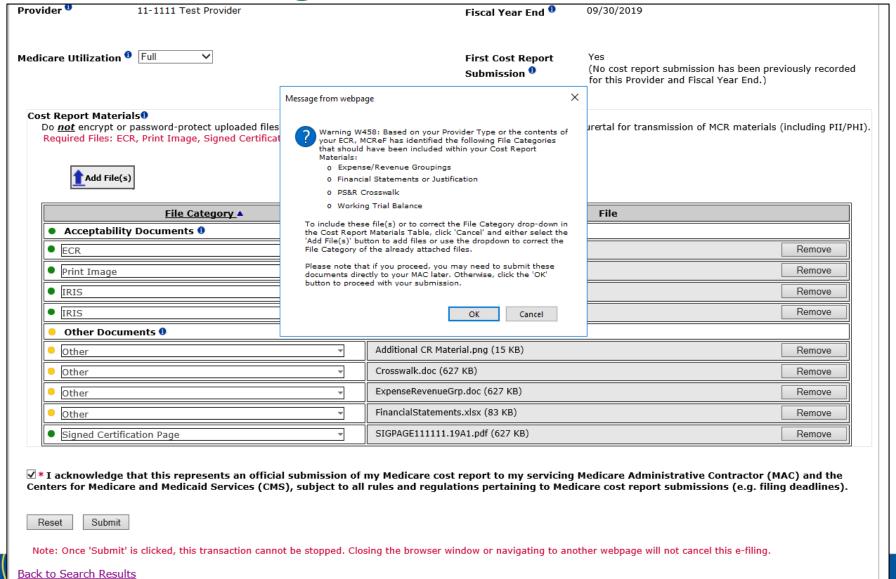


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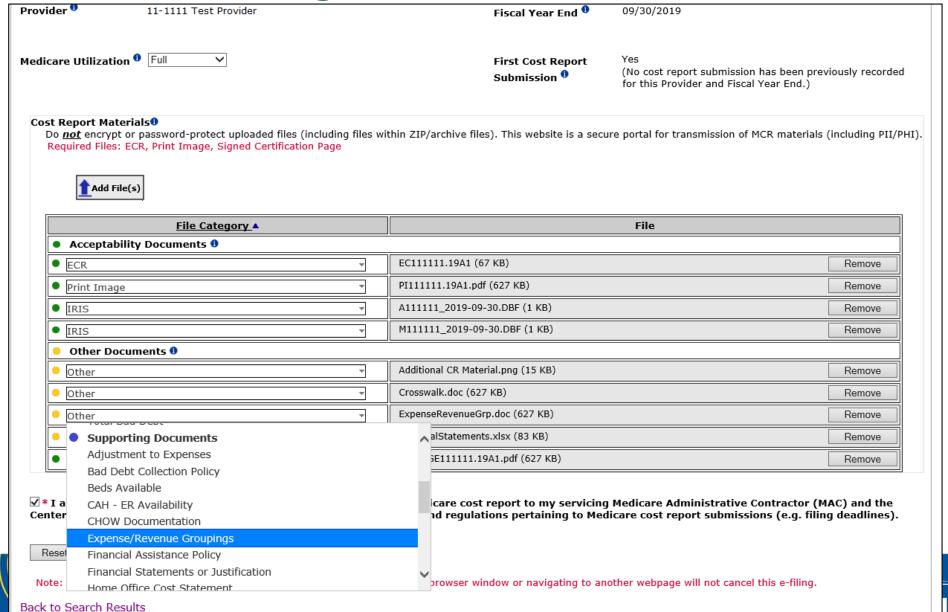
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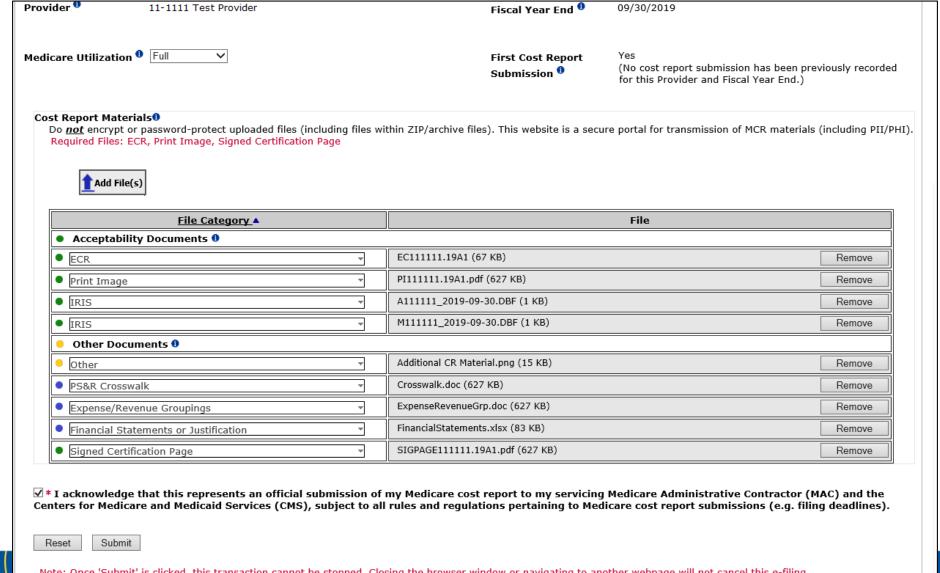


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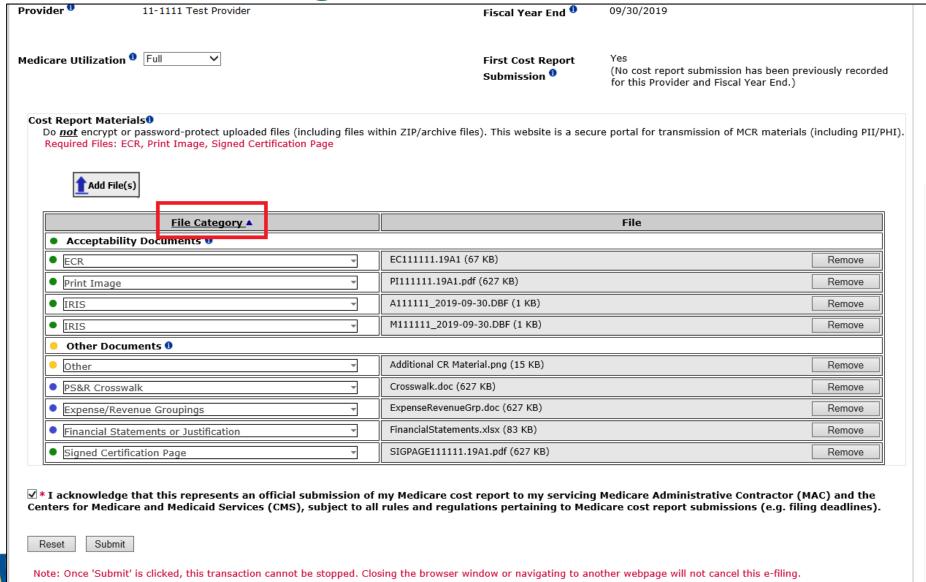








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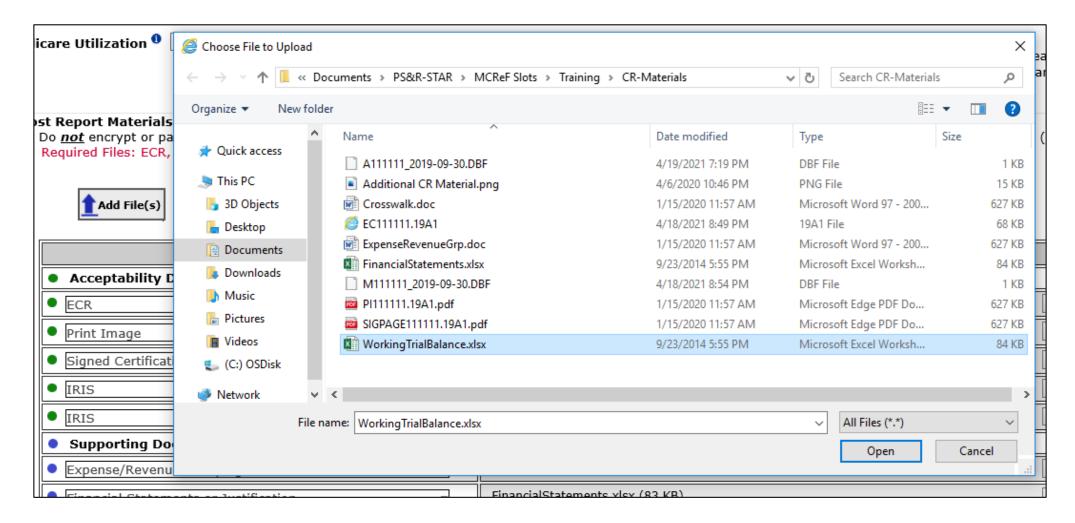


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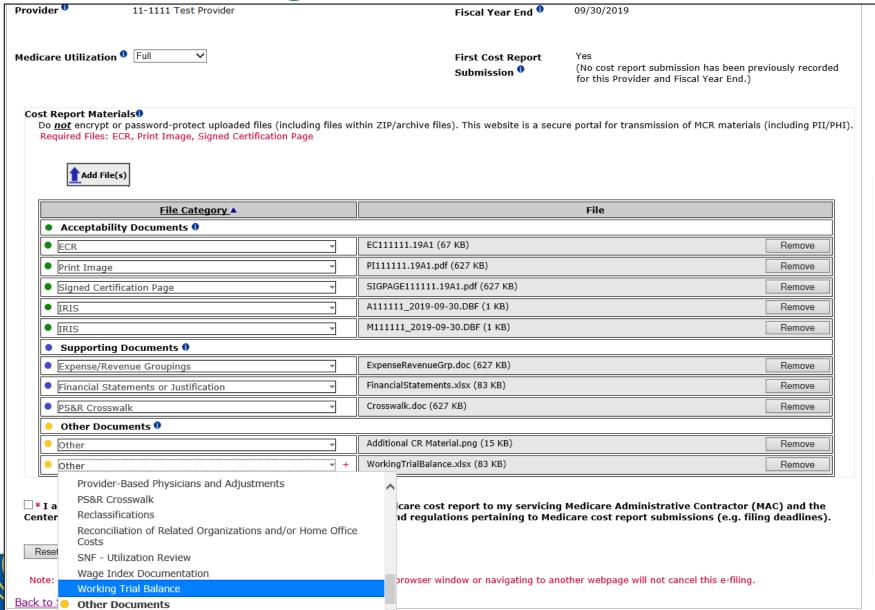


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Success Message

Success S0000: The cost report submission has been received by the system. Your MAC will determine if it is acceptable and may contact you for additional information or corrections. Refer to the dashboard periodically for the updated status of the cost report.

e-File Cost Report Materials - Confirmation

Printer Friendly Version

Cost Report Submission Details

e-Filing ID: 3314059

e-Postmark Date: 04/19/2021 10:50 PM ET

Provider: 11-1111 Test Provider

Fiscal Year End: 09/30/2019

Medicare Utilization: Full

First Cost Report Submission: Yes

Acceptability Documents

ECR: EC111111.19A1

Print Image: PI111111.19A1

Signed Certification Page: SIGPAGE111111.19A1.pdf

IRIS: A111111_2019-09-30.DBF, M111111_2019-09-30.DBF

Supporting Documents

Expense/Revenue Groupings: ExpenseRevenueGrp.doc

Financial Statements or

Justification:

FinancialStatements.xlsx

PS&R Crosswalk: Crosswalk.doc

Working Trial Balance: Working Trial Balance.xlsx

Other Documents

Other: Additional CR Material.png

Note: To access this information later, refer to the e-File History screen under the Bulk e-File tab.

Logout

Back to Search Results





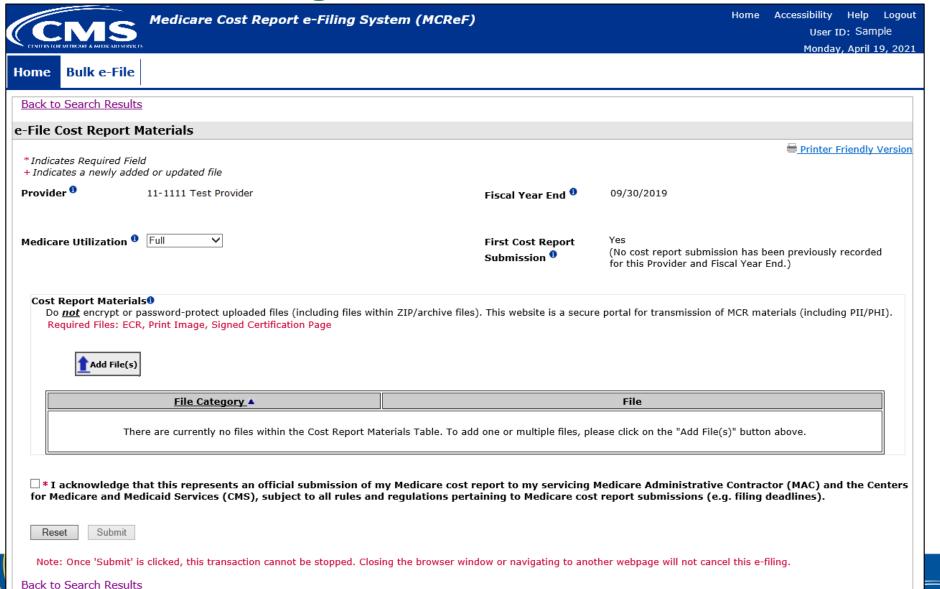
 In addition to allowing users to re-categorize after uploading, each supporting document will have a shared file naming convention that, if followed, will allow the system to automatically categorize all files.

• For example:

- Files that begin with "BDPolicy" (case insensitive), regardless of what comes after, the system will recognize as a Bad Debt Collection Policy.
 Some variations include:
 - "BDPolicy.pdf"
 - "BDPolicy_Policy per exec guidance.docx"
 - "BDPolicy 2020 Bad Debt guidelines.xlsx"

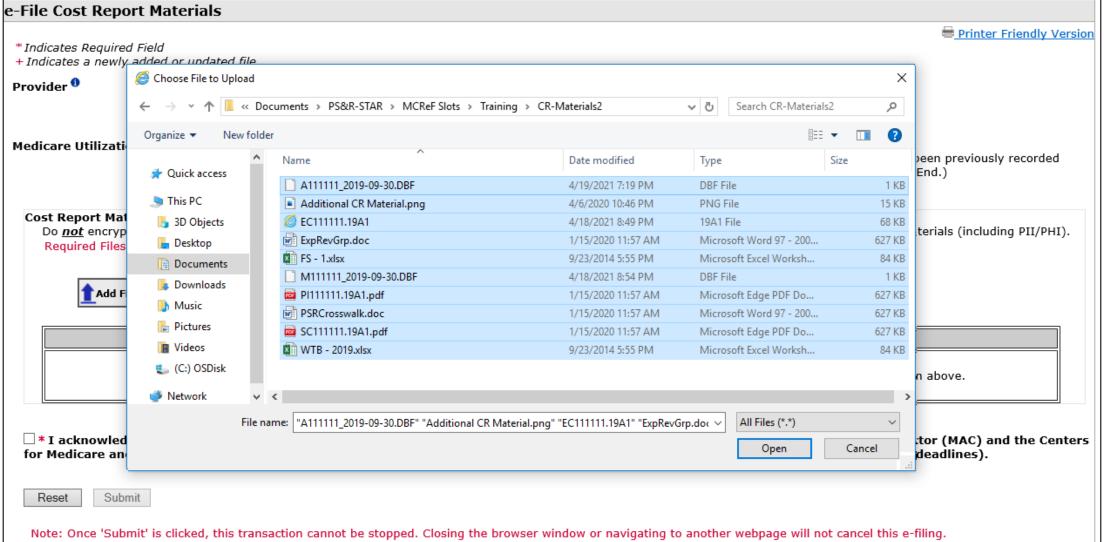








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Success Message

Success S0000: The cost report submission has been received by the system. Your MAC will determine if it is acceptable and may contact you for additional information or corrections. Refer to the dashboard periodically for the updated status of the cost report.

e-File Cost Report Materials - Confirmation

Printer Friendly Version

Cost Report Submission Details

e-Filing ID: 3314059

e-Postmark Date: 04/19/2021 10:50 PM ET

Provider: 11-1111 Test Provider

Fiscal Year End: 09/30/2019

Medicare Utilization: Full

First Cost Report Submission: Yes

Acceptability Documents

ECR: EC111111.19A1

Print Image: PI111111.19A1

Signed Certification Page: SC111111.19A1.pdf

IRIS: A111111_2019-09-30.DBF, M111111_2019-09-30.DBF

Supporting Documents

Expense/Revenue Groupings: ExpRevGrp.doc

Financial Statements or

Justification:

FS -1.xlsx

PS&R Crosswalk: PSRCrosswalk.doc

Working Trial Balance: WTB - 2019.xlsx

Other Documents

Other: Additional CR Material.png

Note: To access this information later, refer to the e-File History screen under the Bulk e-File tab.

Logout

Back to Search Results





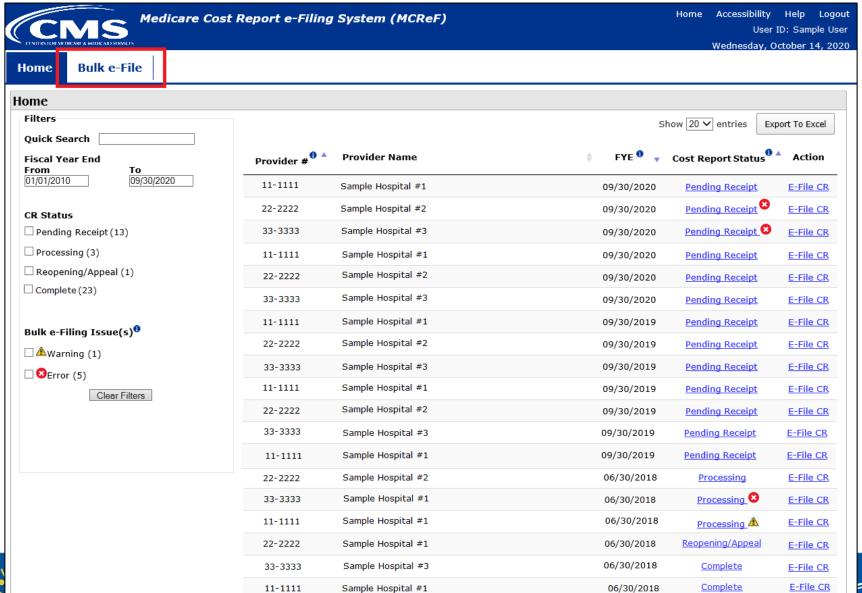
Excerpt List of Supporting Documents

File Category	File Definition	File Name Begins With
Adjustments to Expenses	Documentation related to Adjustments to Expenses Worksheet	"AdjExpen"
Bad Debt Collection Policy	Most current version of the Bad Debt Collection Policy in place	"BDPolicy"
Beds Available	Documentation related to Beds Available at the facility	"Beds"
CAH - ER Availability	Documentation related to Availability of Emergency Room Physicians	"CAH-ERAvail"
Charity Care Charges	Detailed Documentation showing Charity Care Charge amounts claimed on Cost Report	"Charity"
CHOW Documentation	Documentation related to Change of Ownership if one took place	"CHOW"
Expense/Revenue Groupings	Documentation detailing how Expenses and Revenues are grouped	"ExpRevGrp"
Financial Assistance Policy	A copy of the provider's Financial Assistance Policy in place during Cost Reporting period	"FinAssist"
Financial Statements or Justification	Copies of applicable Financial Statements or a Justification of why they are not available at time of Cost Report submission	"FS"

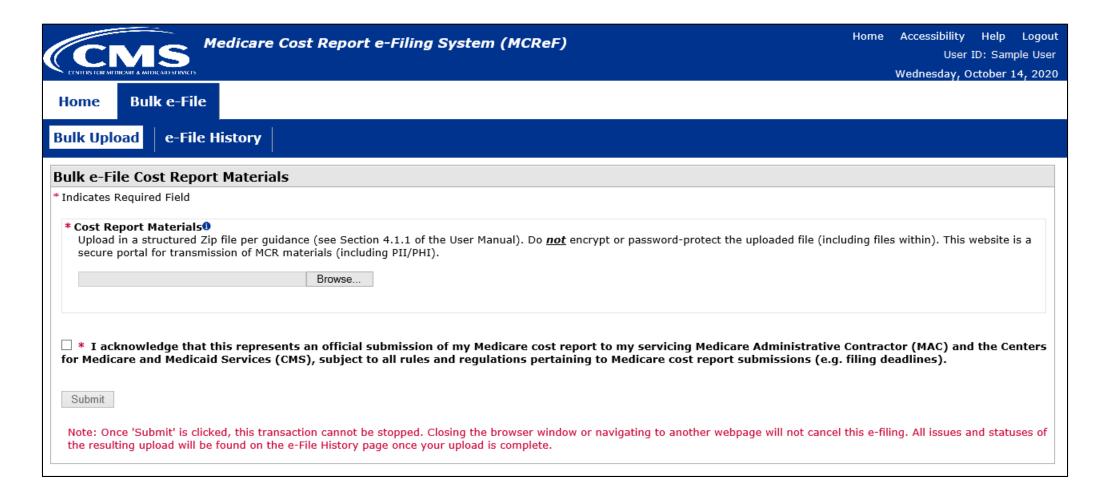
.....and many more additional documents! List of documents and their naming convention can be found in the MCReF User Manual (located within the system).





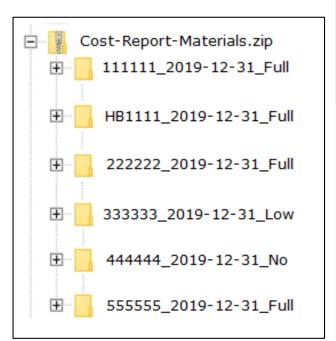


Medicare









File	Example File Name	Guidance
Main uploaded ZIP file	Cost-Report- Materials.ZIP	The single ZIP file containing a folder for each MCR submission. There is no restriction on how the uploaded ZIP file is named. Format: Asingle ZIP file File limit: 1 GB
Folder per submission	111111_2019-12-31_Full	A well-named folder containing the cost report materials for a specific Provider/FYE. 11111



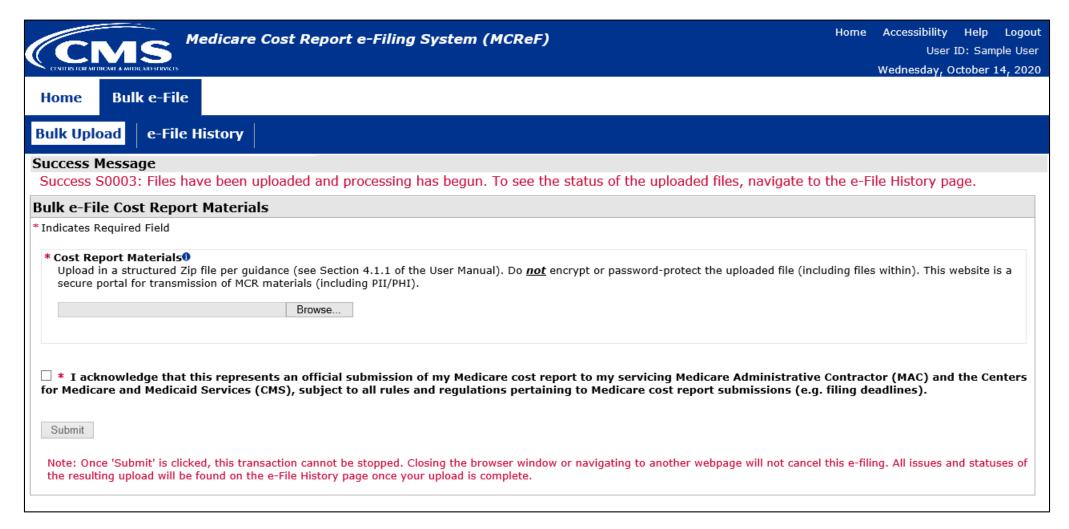


Cost-Report-Materials.zip
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PI111111.19A1.pdf
SC111111.19A1.pdf
A111111_2019-12-31.dbf
M111111_2019-12-31.dbf
Other-Materials.pdf
Additional-Materials.docx
CoverLetter_111111.doc
ExpRevGrp.doc
FS - 1.xlsx
PSRCrosswalk.doc
WTB - 2019.xlsx
HB1111_2019-12-31_Full
PIHB1111.19A1.pdf
SCHB1111.19A1.pdf
CoverLetter
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PI22222.19A1.pdf
SC222222.19A1.pdf
333333_2019-12-31_Low
PI333333.19A1.docx
SC333333.19A1.pdf
Additional-Materials.docx
444444_2019-12-31_No
SC444444.19A1.pdf
555555_2019-12-31_Full
Additional-Materials.docx
Additional-Materials.pdf

File Category	Example File Name	Guidance
ECR	EC111111.19A1	Follows the existing naming standards adhered to by all MCR Vendors. So long as the filename is not altered
Print Image	PI111111.19A1.pdf	after being generated by the MCR Vendor software, it should be successfully recognized.
Signed Certification Page	SC111111.19A1.pdf	Expected to have the same name as the Print Image, with 'SC' at the beginning of the filename in place of the 'PI'.
IRIS	A111111_2019-12-31.dbf M111111_2019-12-31.dbf	Follows the existing naming standards adhered to by all IRIS Vendors. So long as the filename conforms to the naming standards published for IRIS data, it should be successfully recognized.
Prefix Files	CoverLetter111111.doc ExpRevGrp.doc WTB-1.xlsx	Prefix (e.g. "CoverLetter"), optionally followed by any additional text desired as long as it does not conflict with the general file naming restrictions described in the following section.
Other	Other-Materials.pdf	Any file which does not adhere to any of the above guidance, or which is in a sub-folder within the submission folder, will be categorized as 'Other'.



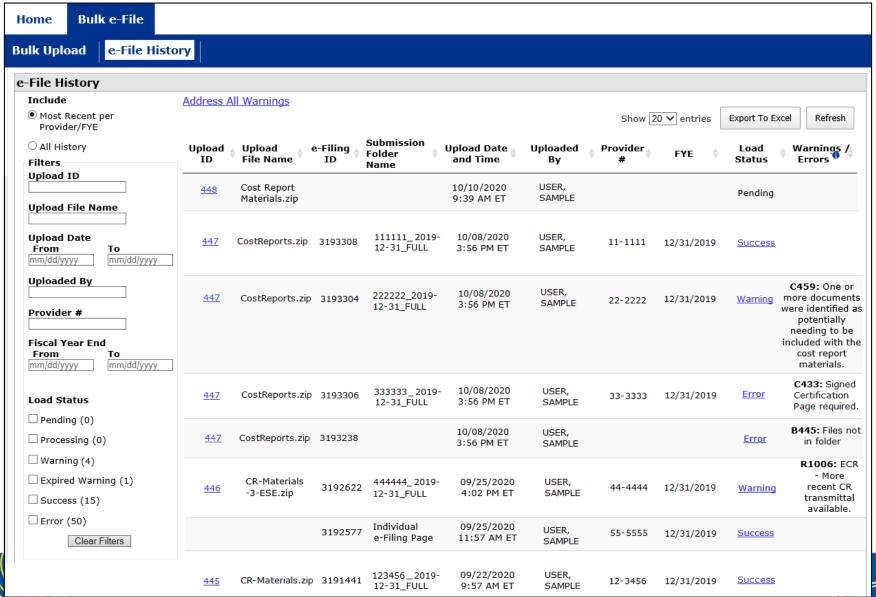
50







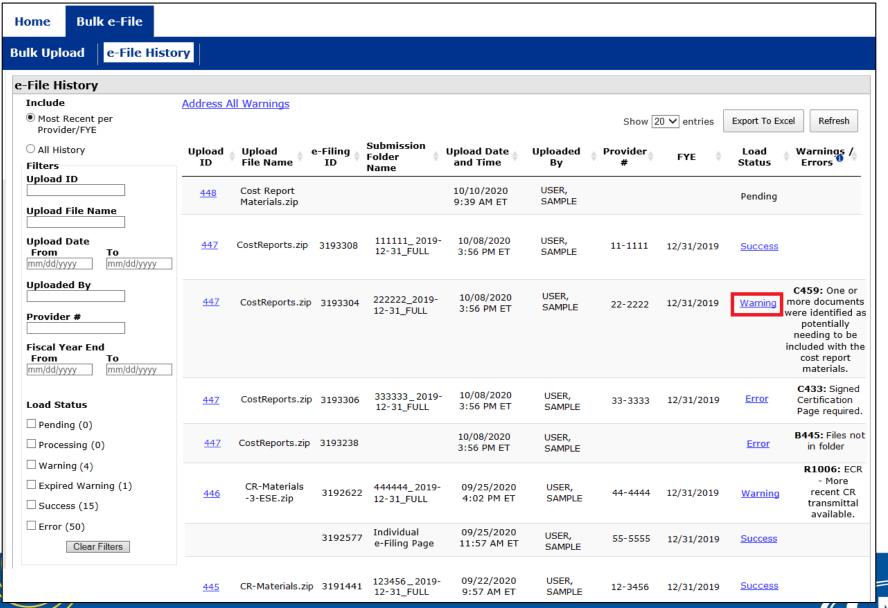
MCReF Walkthrough - Bulk e-File - e-File History





Medicare Learning Network

MCReF Walkthrough - Bulk e-File - e-File History



Medicare

Network

MCReF Walkthrough – Bulk e-File – Status Details

Home Bulk e-File

Bulk Upload

e-File History

Status Details

Back to e-File History

Upload ID: <u>447</u>

Upload File Name: CostReports.zip

e-Filing ID: 3193304

Submission Folder Name: 222222 _ 2019-12-31_Full

Upload Date and Time: 10/08/2020 3:56 PM ET

e-Postmark Date: (See warning messages below) Provider #:

222222

Fiscal Year End:

12/31/2019

Load Status:

Warning

Medicare Utilization: Full

First Cost Report:

File	File Name
Cover Letter	COVERLETTER_222222.19A1.DOC
ECR	EC222222.19A1
Full CR Image	PI222222.19A1.PDF
IRIS	A222222_2019-09-30.DBF
IRIS	M222222_2019 - 09 - 30.DBF
Other File	CROSSWALK.PDF
Signed Certification Page	SC222222.19A1.PDF

Messages

Note: the option to Acknowledge Warning(s) and Proceed will expire 21 days from the Upload Date.

Warning W459: Based on your Provider Type or the contents of your ECR, MCReF has identified the following File Categories that should have been included within your Cost Report Materials:

- Expense/Revenue Groupings
- · Financial Statements or Justification
- PS&R Crosswalk
- Working Trial Balance

If you acknowledge, then the submission will be sent to your MAC without the missing documents identified above.

Please note that if you proceed, you may need to submit these documents directly to your MAC. To include these documents, do not acknowledge the warning and please re-upload only the revised submission with the full set of materials.

Acknowledge Warnings(s) and Proceed

Back to e-File History



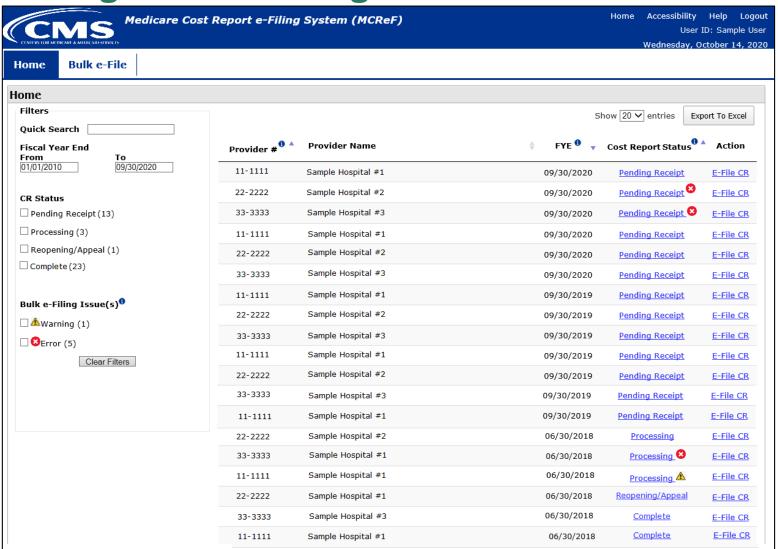


MCReF Home Page





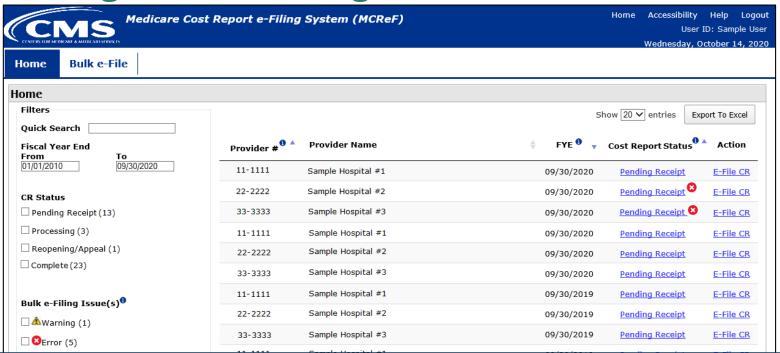
MCReF Walkthrough – Home Page







MCReF Walkthrough – Home Page

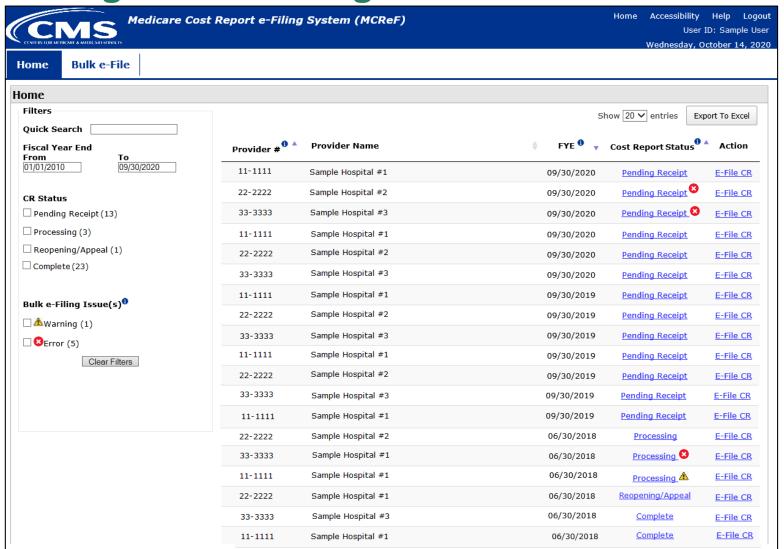


- *Note: If you are unable to locate your CCN or Fiscal Year End in the table:
 - Confirm that the SO of your organization has properly registered the CCN in question within IDM and that you are registered to the organization with an IDM role which grants e-Filing privileges.
 - If so, and you still don't see what you're looking for, contact your MAC.





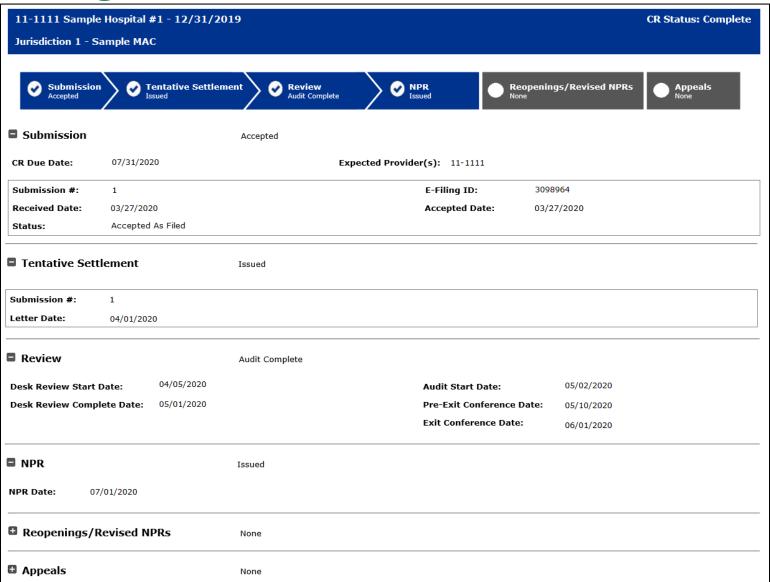
MCReF Walkthrough – Home Page







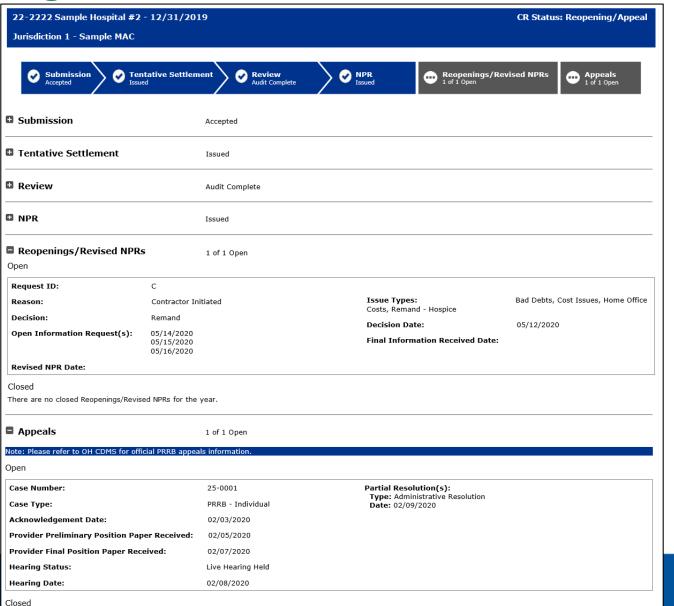
MCReF Walkthrough – View Details





MCReF Walkthrough – View Details

There are no Closed Appeals for the year.





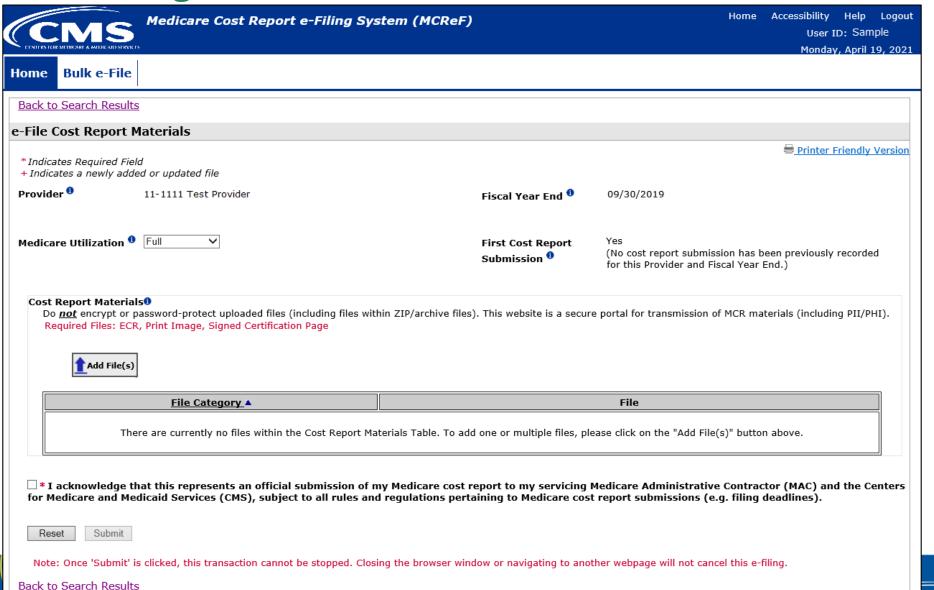


E-File Walkthrough





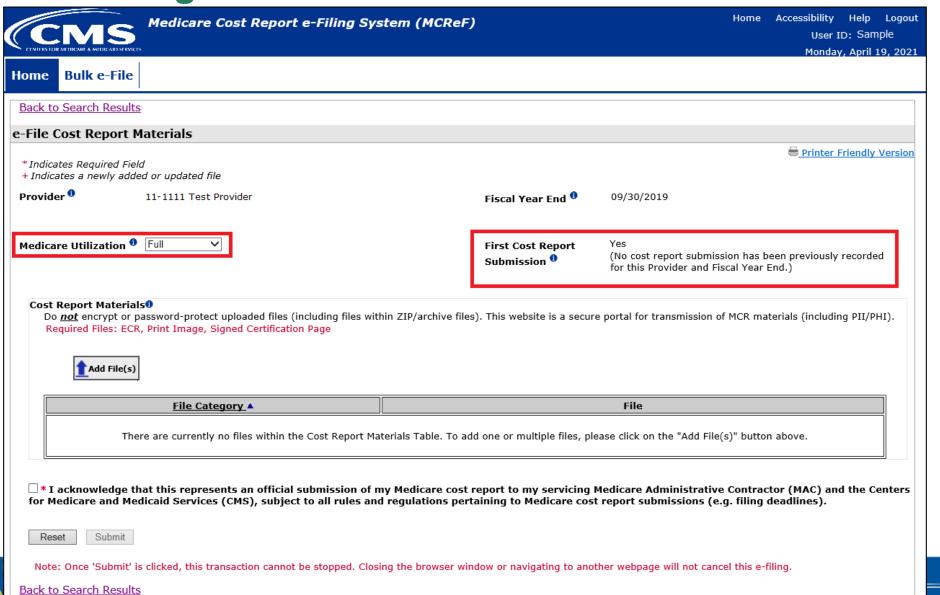
MCReF Walkthrough – e-File





Medicare Learning Network

MCReF Walkthrough – e-File





Medicare Learning Network

MCReF Walkthrough – e-File

ider ¹ 1	1-1111 Test Provider		Fiscal Year End ⁰	09/30/2019
care Utilization ⁰ [Full		First Cost Report Submission ⁰	Yes (No cost report submission has been previously records for this Provider and Fiscal Year End.)
			ithin ZIP/archive files). This website is a secu	re portal for transmission of MCR materials (including PII/
	<u>File Category</u> ▲			File
 Acceptability D 	ocuments 🛭			
• ECR		~	EC111111.19A1 (67 KB)	Remove
Print Image		~	PI11111.19A1.pdf (627 KB)	Remove
Signed Certificati	on Page	~	SC111111.19A1.pdf (627 KB)	Remove
• IRIS		~	A111111_2019-09-30.DBF (1 KB)	Remove
• IRIS		~	M111111_2019-09-30.DBF (1 KB)	Remove
Supporting Doc	cuments 0			
Expense/Revenue	e Groupings	~	ExpRevGrp.doc (627 KB)	Remove
		~	FS - 1.xlsx (83 KB)	Remove
 Financial Stateme 	ents or Justification			
Financial Stateme PS&R Crosswalk	ents or Justification	T	PSRCrosswalk.doc (627 KB)	Remove
		*	PSRCrosswalk.doc (627 KB) WTB - 2019.xlsx (83 KB)	Remove Remove
PS&R Crosswalk	ance	*		

■ * I acknowledge that this represents an official submission of my Medicare cost report to my servicing Medicare Administrative Contractor (MAC) and the Centers for Medicare and Medicaid Services (CMS), subject to all rules and regulations pertaining to Medicare cost report submissions (e.g. filing deadlines).

Reset

Submit

Note: Once 'Submit' is clicked, this transaction cannot be stopped. Closing the browser window or navigating to another webpage will not cancel this e-filing.

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E-Filing Fields

Field Name	Description
Provider	Indicates the provider currently selected for e-filing a cost report
Fiscal Year End	Indicates the fiscal year end currently selected for e-filing a cost report
Medicare Utilization	Allows the provider to select the Medicare Utilization level of the MCR being e-Filed. Options include: 'Full', 'Low', and 'No'.
First Cost Report Submission	Indicates whether or not an MCR has already been recorded as received by the provider's MAC for the selected Provider/FYE.
Cost Report Materials table	Used to upload all materials needed to submit a complete MCR package. This may include Acceptability Documents (such as an ECR or Print Image), Supporting Documents (such as PS&R Crosswalk or Working Trial Balance), and/or any other un-designated files collectively as "Other Documents".





Key Cost Report Materials

File Category	Description
ECR	The electronic cost report file (also known as the 'EC', 'SN', 'HH', 'OP', 'HS', 'RD', 'RF', 'FQ', or 'CM' file)
	System-required: For all providers filing a Full Medicare Utilization MCR <u>except</u> Home Offices (HOs) and Limited Purpose Insurance Companies (LPICs) Format: Asingle file generated using a current version of CMS-certified ECR vendor software that is not a PDF, ZIP file or other archive file type File limit: 1 MB
Print Image	The human-readable copy of the cost report, also known as the "PI file" (for Home Offices: the 287-05 cost statement) System-required: • For all providers filing a Full or Low Medicare Utilization MCR except LPICs. • If an ECR file is uploaded to the ECR row Format: Any human-readable format generated using a current version of CMS-certified ECR vendor software that is not a ZIP file or other archive file type File limit: 10 MB





Key Cost Report Materials

File Category	Description
Signed Certification Page	The electronically-signed Worksheet S certification page (for Home Offices: the 287-05 Schedule A) System-required: For all providers <u>except</u> LPICs Format: Any human-readable format, including encryption codes, generated using a current version of CMS-certified ECR vendor software that is not a ZIP file or other archive file type File limit: 10 MB
IRIS	The Interns and Residents Information System (IRIS) files required for teaching hospitals claiming GME/IME Full Time Equivalents (FTEs) on their cost report System-required: Not presently required by the system, but may do so in the future Format: Aset of "M" (Master) and "A" (Assignment) DBF files File limit: 1 MB
Cover Letter	A document describing the nature of the submission or any other information about the submission which the provider wishes to communicate to the MAC up front System-required: For all revised MCRs Format: Any human-readable format that is not a ZIP file or other archive file type File limit: 10 MB





MCReF Edits

e-Filing Submission:

- The system will perform "receivability" validations to confirm if your MCR is fundamentally sound (eg all required MCR Material files are included, in valid format, and within the size limits; attached files must be virus/malware free, have valid filenames, must not be blank/empty)
- If any error is displayed, your MCR will not be received.
 - Not considered rejections and do not follow CMS' formal MCR rejection processes.
- If the submission passes all "receivability" validations, you will be directed to a Confirmation screen. This screen will display the following:
 - A success message stating that your MCR is received
 - Your e-Postmark date in Eastern Time, unique e-Filing ID, and all selections for the submission just made
- Confirmation screen: save a copy of this screen's content for your records





MCReF Additional Details

- You will be warned if:
 - MCR submission is late
 - You try to upload an MCR generated with outdated software
 - There are any potentially missing documents in CR materials
- Timely receipt of the cost report will be measured based on 11:59 PM ET for the provider's cost report due date
- Files uploaded are <u>not</u> to be encrypted or password protected. MCReF is a secure portal for transmission of MCR materials (including PII/PHI)
- Duplicate submissions will be rejected by the MAC; only the first MCR received by the MAC will be processed.





MCReF Additional Details

- Effective 1/2/2019, only 2 CMS-approved methods of MCR submission:
 - Electronic submission via MCReF
 - Physical submission via mail or hand-delivery
- All MCRs for Fiscal Year Ends on or after 12/31/2017 can be e-Filed via MCReF, with the following exceptions that may need to be mailed or hand-delivered:
 - MCRs that would satisfy CMS' Acceptability Criteria but would not pass the "Receivability" checks must be
 filed via mail or hand-delivery (e.g., a single cost report with more than 350 MB of documentation).
- Providers will not receive an extension for system issues preventing e-Filing.





Electronic Signature

- 2018 IPPS final rule issued in August 2017, authorizes providers to file with an electronic signature effective for FYEs on/after 12/31/2017.
 - Note: IPPS final rule does not change the authorized signatories (CFR §413.24(f)(4)(iv)(C))
- CMS has released new MCR transmittals which support e-signature for every MCR form (except 287-05: Home Office)
 - An approved form of e-signature (per the 2018 IPPS final rule) is required for signing and subsequently uploading the "Signed Certification Page" in MCReF
- <u>If</u> you file via MCReF using MCR form 287-05 (current Home Office form), which <u>does not</u> support e-signature, you must
 - Upload a scanned copy of the certification page via the "Signed Certification Page" slot.
 - Mail/hand-deliver a hard copy with a signature signed in ink to your MAC which must be received by the MAC within 10-days of MCR submission.
 - Note: forthcoming Home Office form (287-21) will support e-signature. Effective date is still being determined.





Electronic Signature

- The next few slides provide examples of valid and invalid uses of esignature
- These examples are not the exhaustive list of all possible valid and invalid uses of e-signature
- Refer to the 2018 IPPS final rule for e-signature guidance





Valid use of e-signature

E-signature checkbox checked and typed First and Last Name

03-18		1	FORM CMS-2552-10			4090 (Cont.)	
This report is r	required by law (42 USC 1395g; 42 CFR 413.20(b)).	Failure to report can result in al	l interim			FORM APPROVED	
payments mad	e since the beginning of the cost reporting period being	g deemed overpayments (42 US	C 1395g).			OMB NO. 0938-0050	
						EXPIRES 05-31-2019	
HOSPITAL	AND HOSPITAL HEALTH CARE			PROVIDER CCN:	PERIOD	WORKSHEET S	
COMPLEX	COST REPORT CERTIFICATION			1	FROM	PARTS I, II & III	
AND SETT	AND SETTLEMENT SUMMARY TO						
PARTI CO	OST REPORT STATUS						
	only 1. [] Electronically filed cost report	Date:	Time:				
riovider disc	2. [] Manually submitted cost report						
	3. [] If this is an amended report ent		provider resubmitted this cost n	eport			
	4. [] Medicare Utilization. Enter "F		provider restronment and cost re	cport			
Contractor	5. [] Cost Report Status	6. Date Received:		10. NPR Date:			
use only	(1) As Submitted	7. Contractor No.:		11. Contractor's Vend	or Code:		
	(2) Settled without audit	8. [] Initial Report for t	his Provider CCN	12. [] If line 5, colum		ber of	
	(3) Settled with audit	9. [] Final Report for the		times reopened			
	(4) Reopened						
	(5) Amended						
	ERTIFICATION						
	SENTATION OR FALSIFICATION OF ANY						
ACTION, F	INE AND/OR IMPRISONMENT UNDER FE	EDERAL LAW. FURTHE	RMORE, IF SERVICES IDEN	TIFIED IN THIS REPO	ORT WERE PROVI	DED OR PROCURED THROUGH	
	ENT DIRECTLY OR INDIRECTLY OF A K	CICKBACK OR WERE OT	THERWISE ILLEGAL, CRIM	INAL, CIVIL AND AD	MINISTRATIVE A	CTION, FINES AND/OR	
IMPRISON	MENT MAY RESULT.						
			on or an or an or				
CER	TIFICATION BY CHIEF FINANCIAL OFFI	CER OR ADMINISTRAT	OR OF PROVIDER(S)				
	DEDITORDER AND						
	REBY CERTIFY that I have read the above or				ovider Name(s) and N		
	nitted cost report and the Balance Sheet and Streporting period beginning		_ and to the best of my knowled				
complete and prepared from the books and records of the provider in accordance with applicable instructions, except as noted. I further certify that I am familiar with the							
laws and regulations regulations regarding the provision of health care services, and that the services identified in this cost report were provided in compliance with such laws							
and regulations.							
I have read and agree with the above certification statement. I certify that I intend my electronic signature on this certification statement to be the legally binding							
equivalent of my original signature.							
- quarter va my vagama agamav.							
(Signed) Andrew Smith Michaelson III							
Chief Financial Officer or Administrator of Provider(s)							
Title CFO							
Date 4/1/2018							
			Date 4/1/20	018			



Valid use of e-signature Printed, e-signature checkbox Checked and Signed, Scanned

03-18	FORM CMS-2552-10				4090 (Cont.)	
payments mad	required by law (42 USC 1395g; 42 CFR 413.20(b) le since the beginning of the cost reporting period be	•			FORM APPROVED OMB NO. 0938-0050 EXPIRES 05-31-2019	
	AND HOSPITAL HEALTH CARE		PROVIDER CCN:	PERIOD	WORKSHEET S	
	MPLEX COST REPORT CERTIFICATION FROM				PARTS I, II & III	
AND SET	TLEMENT SUMMARY			TO		
PART I - C	OST REPORT STATUS					
Provider use	,					
	2. [] Manually submitted cost repo					
		enter the number of times the provider resubmitted this c	ost report			
Contractor	4. [] Medicare Utilization. Enter	6. Date Received:	10 NIPP Date:			
use only	5. [] Cost Report Status (1) As Submitted	7. Contractor No.:	10. NPR Date:			
use omy	(2) Settled without audit	8. [] Initial Report for this Provider CCN	12. [] If line 5, colum	on 1 is 4: Enter num	her of	
	(3) Settled with audit	9. [] Final Report for this Provider CCN	times reopene		ioei oi	
	(4) Reopened	5. [] This Report for this Frontier CCN	times reopene	u – 0-3.		
	(5) Amended		- 1			
	•	•	•			
PART II - C	ERTIFICATION					
THE PAYN		FEDERAL LAW. FURTHERMORE, IF SERVICES II KICKBACK OR WERE OTHERWISE ILLEGAL, C				
CER	CTIFICATION BY CHIEF FINANCIAL OF	FICER OR ADMINISTRATOR OF PROVIDER(S)				
subn cost com laws	nitted cost report and the Balance Sheet and S reporting period beginning plete and prepared from the books and record	certification statement and that I have examined the acc Statement of Revenue and Expenses prepared by and ending and to the best of my known is of the provider in accordance with applicable instructions ovision of health care services, and that the services iden	(Providedge and belief, this reportions, except as noted. I furth	ovider Name(s) and ! rt and statement are t er certify that I am fa	Number(s)} for the true, correct, miliar with the	
✓	I have read and agree with the above certifi equivalent of my original signature.	ication statement. I certify that I intend my electronic sig			gally binding	
		(Signed) Pondrew Louth Chief Financial Office	Muchaetzen T			
		Title C	FO	_		
		Date 41	2018	_		





Invalid use of e-signature E-signature checkbox not checked

03-18]	FORM CMS-255	2-10		4090 (Cont.)
	required by law (42 USC 1395g; 42 CFR 413.20(b)). e since the beginning of the cost reporting period being	_				FORM APPROVED OMB NO. 0938-0050 EXPIRES 05-31-2019
COMPLEX					PERIOD FROM TO	WORKSHEET S PARTS I, II & III
	DST REPORT STATUS only 1. [] Electronically filed cost report 2. [] Manually submitted cost report 3. [] If this is an amended report ent 4. [] Medicare Utilization. Enter "F 5. [] Cost Report Status (1) As Submitted (2) Settled without audit (3) Settled with audit	er the number of times the	this Provider CCN	10. NPR Date: 11. Contractor's Vend 12. [] If line 5, colur times reopene	nn 1, is 4: Enter num	lber of
MISREPRE ACTION, FI THE PAYM	(4) Reopened (5) Amended ERTIFICATION SENTATION OR FALSIFICATION OF ANY INE AND/OR IMPRISONMENT UNDER FE IENT DIRECTLY OR INDIRECTLY OF A K MENT MAY RESULT.	DERAL LAW. FURTHE	RMORE, IF SERVICES	IDENTIFIED IN THIS REPO	ORT WERE PROVI	DED OR PROCURED THROUGH
I HE subm cost : comp laws	TIFICATION BY CHIEF FINANCIAL OFFI REBY CERTIFY that I have read the above contitted cost report and the Balance Sheet and Streeporting period beginning a plete and prepared from the books and records and regulations regulations regarding the provegulations.	ertification statement and thatement of Revenue and Ex and ending of the provider in accordan	nat I have examined the ac penses prepared by _ and to the best of my kince with applicable instruc-	Prowledge and belief, this repo tions, except as noted. I furth	ovider Name(s) and I rt and statement are t er certify that I am fa	Number(s)) for the true, correct, miliar with the
I have read and agree with the above certification statement. I certify that I intend my electronic signature on this certification statement to be the legally binding equivalent of my original signature.						
		(Signed)		th Michaelson III er or Administrator of Provid	er(s)	
			Title	CFO		
			Date 4	/1/2018		





Invalid use of e-signature Signature must contain First and Last Name

03-18		1	FORM CMS-2552-10			4090 (Cont.)		
payments mad	required by law (42 USC 1395g; 42 CFR 413.20(b)). e since the beginning of the cost reporting period bein				_	FORM APPROVED OMB NO. 0938-0050 EXPIRES 05-31-2019		
HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX COST REPORT CERTIFICATION AND SETTLEMENT SUMMARY PROVIDER CCN: PERIOD FROM TO					FROM	WORKSHEET S PARTS I, II & III		
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MISREPRESENTATION OR FALSIFICATION OF ANY INFORMATION CONTAINED IN THIS COST REPORT MAY BE PUNISHABLE BY CRIMINAL, CIVIL AND ADMINISTRATIVE ACTION, FINE AND/OR IMPRISONMENT UNDER FEDERAL LAW. FURTHERMORE, IF SERVICES IDENTIFIED IN THIS REPORT WERE PROVIDED OR PROCURED THROUGH THE PAYMENT DIRECTLY OR INDIRECTLY OF A KICKBACK OR WERE OTHERWISE ILLEGAL, CRIMINAL, CIVIL AND ADMINISTRATIVE ACTION, FINES AND/OR IMPRISONMENT MAY RESULT. CERTIFICATION BY CHIEF FINANCIAL OFFICER OR ADMINISTRATOR OF PROVIDER(S) I HEREBY CERTIFY that I have read the above certification statement and that I have examined the accompanying electronically filed or manually submitted cost report and submitted cost report and the Balance Sheet and Statement of Revenue and Expenses prepared by								
			Chief Financial Officer or A		r(s) 			
			Date 4/1/20	18				



Ongoing Outreach and Education





Ongoing Outreach and Education

- Change Request 10611 issued 4/30/18
- MLN Matters Article: https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/MM10611.pdf
- CMS website posting (https://www.cms.gov/Medicare/Compliance-and-Audits/Part-A-Cost-Report-Audit-and-Reimbursement/MCReF.html), includes links to:
 - How to Request User Roles
 - MCReF User Manual
 - MLN article
 - FAQs
- Documentation Updates (e.g.: 100-06, PRM 15-1 and 15-2, MCR Transmittal Forms, etc...)





Future MCReF Enhancements





Continuing Improvements

- Increased tracking of Rates, Tentatives, and NPRs including: EFT #'s, Amounts, and Letters/Documentation
- Streamlining Cost Report Revisions
- Logging Reopening Requests
- One-click access to PS&R Summary Reports





Question & Answer Session





Resources

E-mail questions relating to MCReF to:

OFMDPAOQUESTIONS@CMS.HHS.GOV

- For any questions relating to your IDM account (role requests, passwords, annual certifications, login, etc...) contact EUS Support Helpdesk:
 - Website: https://eus.custhelp.com/app/home
 - e-mail: <u>EUSSupport@cgi.com</u>
 - Phone: 1-866-484-8049 (TTY/TDD: 866-523-4759)





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