Dear Administrator:

Beginning August 1, 2014, Livanta LLC (Livanta) will conduct all beneficiary quality review cases, appeals, and complaints for your state or territory. These changes are part of the Centers for Medicare & Medicaid (CMS) Quality Improvement Organization (QIO) program transformation effort.

CMS awarded the Beneficiary and Family Centered Care Quality Improvement Organization (BFCC-QIO) work to two organizations to cover five Service Areas. Livanta was awarded BFCC-QIO contracts for Service Areas 1 and 5. Area 1 includes Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Puerto Rico, Vermont, and the Virgin Islands. Area 5 includes Alaska, Arizona, California, Hawaii, Idaho, Nevada, Oregon, Washington, and the Pacific Territories.

As you may already know, QIOs review medical records to determine whether services delivered to these Medicare beneficiaries meet medically acceptable standards of care, are medically necessary, and are delivered in the most appropriate setting. Additionally, QIOs review written complaints from beneficiaries about the quality of Medicare services they have received in an effort to promote measurable improvement in beneficiary health status or satisfaction.

What has changed in the QIO Program?

CMS has separated medical case review from quality improvement work to address the needs of Medicare beneficiaries, gain efficiencies, and to eliminate any perceived conflicts of interest. The same organization/contractor cannot hold both types of medical case review and quality improvement contracts.

The restructuring infrastructure includes:

- Medical case review – BFCC-QIOs will conduct quality of care reviews, including utilization reviews, discharge and termination of service appeals and beneficiary complaints.
- Quality improvement and technical support – Quality Innovation Network QIOs (QIN-QIOs) will work with providers on quality initiatives to improve patient safety, reduce harm, and improve clinical care and transparency.

Which QIO will handle Medicare case reviews?

Livanta BFCC-QIO will begin case review work on August 1, 2014. Livanta and the incumbent QIOs are working together to ensure a smooth transition of case review work for Medicare beneficiaries.
Which QIO will handle quality improvement and technical assistance work?

CMS has not yet announced the QIN-QIO contractor awards.

The QIN-QIOs will be responsible for working with providers and the community on multiple data driven quality initiatives to improve patient safety, reduce harm, and improve clinical care at their local and regional levels. Quality improvement initiatives will also be developed from BFCC-QIO tracking and trending of beneficiary quality of care reviews.

How will this change affect your facility?

Your QIO contact information for Medicare coverage and discharge appeals, as well as quality of care concerns, will be the Livanta BFCC-QIO.

What is the new contact information for the Livanta BFCC-QIO?

- Toll-free telephone number is 1-877-588-1123.
- TTY number is 1-855-887-6668.
- Fax number for Appeals is 1-855-694-2929.
- Fax number for all Other Reviews is 1-844-420-6672.
- The address for mailing hard-copy medical records effective August 1, 2014, or later is: BFCC-QIO Program
  9090 Junction Drive, Suite 10
  Annapolis Junction, MD 20701
- Please visit the Livanta Area 5 website at www.BFCCQIOAREA5.com.

Please note that the website, telephone, and fax numbers will not be operational until August 1, 2014.

Please update all contact references, address books, and beneficiary forms to reflect contact information for the Livanta BFCC-QIO, including:

- “An Important Message from Medicare about your Rights” forms, which inform beneficiaries of their rights to appeal a discharge decision.
- “Notice of Medicare Non-Coverage” forms for hospitals with swing beds.
- Print and electronic copies of beneficiary resources that include the QIO’s contact information.
- Policies and procedures containing QIO contact information.
What will not change?

As the BFCC-QIO, Livanta will continue to protect beneficiaries by promoting health improvement strategies through quality of care reviews, beneficiary complaints reviews, discharge and termination of service appeals in various provider settings, medical necessity, and Emergency Medical Treatment and Active Labor Act (EMTALA) reviews.

May I send medical records to Livanta electronically?

CMS plans to have a secure file platform for providers to submit QIO-requested medical records via the internet. More details about this no cost option should be forthcoming within the near future.

We look forward to working with you, Medicare beneficiaries, their families, and advocates. Should you have questions, please email Kym Roundtree, Livanta’s Service Area 5 Communications Lead, at providerresourcesarea5@livanta.com. Please include a telephone and fax number as well as an email address for the individual within your organization to whom future communications should be directed.

Sincerely,

Joy Bahnemann

Joy Bahnemann
Livanta BFCC-QIO Communications Director
jbahnemann@livanta.com