

WASTEFUL AND INAPPROPRIATE SERVICE REDUCTION (WISeR) MODEL

Part A & B

December 2025

Presented by Noridian Outreach and Education



Elevating Operations, Enabling Care.



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- [Noridian Medicare website](#)
- [CMS website](#)

WEBINAR PROTOCOL

- Lines muted upon entry
- Must log into GoToWebinar to receive Continuing Education Unit (CEU)
 - Attend entire webinar
- Webinar questions
 - Keep questions to current content material; scenarios not addressed
 - Unrelated questions or not a Noridian provider?
 - Call Customer Service in your jurisdiction
- Verify correct email to ensure receiving webinar content
- Webinar may be recorded and posted under “Webinars on Demand”
 - Recordings meeting quality measures

AUDIO TIPS

- Presenter speaking and unable to hear?
 1. Change audio setting
 - File → Audio → click no audio then back to computer audio
 2. Close and restart
 3. Use call-in number



AGENDA

- WISeR Model Overview
- Select Services
- Resources



WISeR MODEL OVERVIEW

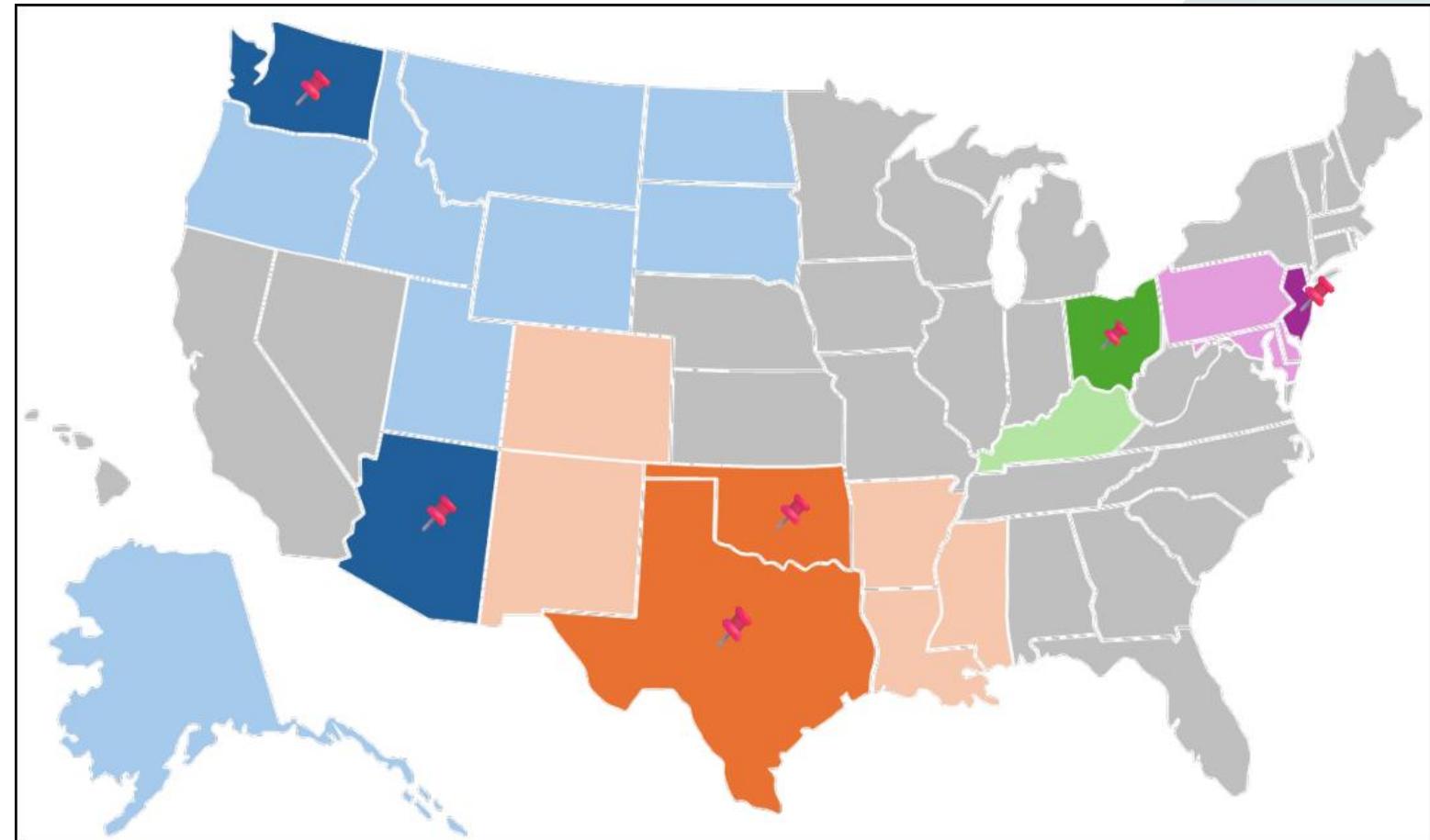


WISER PURPOSE

- Wasteful medical care spending
 - Estimated 25 percent of total healthcare spending
 - Attributable to fraud, waste (including low-value services), and abuse
 - Original Medicare spent billions on low-value services in 2022
- Effective for services on or after January 15, 2026
 - Prior authorizations accepted starting January 5, 2026
- Six-year model applies to original Medicare only
 - Scheduled for years 2026-2031
 - Does not include Medicare Advantage

SIX STATES SELECTED

- JF (Noridian)
 - Arizona
 - Washington
- JH (Novitas)
 - Oklahoma
 - Texas
- JL (Novitas)
 - New Jersey
- J15 (CGS)
 - Ohio



WISER SOLUTION PARTICIPANTS

- Emerging technology companies providing prior authorization
 - Leverage enhanced technology enabled prior authorization tools and processes
 - Improved and expedited process
 - Artificial Intelligence (AI)
 - Machine Learning (ML)
 - Clinical expertise
 - Patient avoids unnecessary or inappropriate care
- Providers performing service are **not** participants

PARTICIPANT INFORMATION

Participant Name	MAC Jurisdiction	State
<u>Zyter, Inc</u>	JF Noridian	Arizona
<u>Virtix Health, LLC</u>	JF Noridian	Washington
<u>Cohere Health, Inc</u>	JH Novitas	Texas
<u>Genzeon Corporation</u>	JH Novitas	New Jersey
<u>Humata Health, Inc</u>	JH Novitas	Oklahoma
<u>Innovaccer, Inc</u>	J15 CGS	Ohio

VIRTIX HEALTH – WASHINGTON

- Educational materials
- Frequently Asked Questions (FAQ)



[Virtixhealth Website](https://www.virtixhealth.com)

ZYTER, INC - ARIZONA

- Website - [Zyter, Inc Website](https://www.zyter.com)



IMPACTED PROVIDERS AND SUPPLIERS

- All providers and suppliers in select states billing identified services
 - Providers and suppliers defined as enrolled individuals and entities providing services to Medicare beneficiaries
 - Does not include skin substitute companies
 - Applies to both Part A and B
- Optional Prior Authorization (PA)
 - If no PA, additional documentation request (ADR) when claim received
- Payment and appeal rights remain
- Exemption status – CMS providing details later

SUBMITTING PRIOR AUTHORIZATION – AZ OR WA

- Two options for Prior Authorization Request (PAR)
 - Submit directly to WISeR participant
 - Submit to designated Medicare Administrative Contractor (MAC) or Noridian, who forwards to participant
 - Noridian forwards within one calendar day or when practicable
- Submit through participant or Noridian Medicare portal (NMP)
 - Other options – Fax, esMD or mail
 - Send to Noridian
 - Fax – 701-433-3366

Noridian JF Part A

Attn: Medical Review – WISeR
PO Box 6720
Fargo, ND 58108-6720

Noridian JF Part B

Attn: Medical Review – WISeR
PO Box 6700
Fargo, ND 58108-6700

PRIOR AUTHORIZATION REVIEW TIME

- Review decision time
 - Standard review – within three days
 - Expedited review – within two days if health at risk
 - Resubmissions – unlimited with peer-to-peer option
 - When prior auth resubmitted (if non-affirmed previously), provider may request peer-to-peer discussion
 - Per Operational Guide, page 9: WISeR provider will connect with clinician(s) with specialty expertise on condition under review
- Unique Tracking Number (UTN)
 - Valid for 120 calendar days
 - Starting from decision approval date
 - UTN for repeat instances use same number up to 120 days (e.g., injections or skin substitutes)



SELECT SERVICES

WISER Model Provider and Supplier
Operational Guide

Appendices A and B

Appendix C – ICD-10 diagnoses



INITIAL SERVICE SELECTION CRITERIA

Leveraging existing evidence and experience

- Services with publicly available coverage requirements in statute, regulation, or policy
- Already subject to prior authorization by other payers

Patient Safety

- Non-emergent services
- Excludes inpatient only services
- Excludes first line diagnostic treatments for medical condition
- Prioritize standalone or non-repetitive services

Opportunity

- Known source of fraud, waste or abuse, or potentially vulnerable
- Excludes services currently subject to other prior authorization programs
- Sufficient volume of services for evaluability

SERVICE CATEGORY

Service Category	NCD/LCD
Arthroscopic Lavage and Debridement for Osteoarthritic Knee	NCD 150.9
Cervical Fusion (excluding codes already included in prior auth)	LCD L39758
Diagnostic and Treatment of Impotence	NCD 230.4
Epidural Steroid Injections for Pain Management	LCD L39240
Incontinence Control Devices	NCD 230.10
Induced Lesions of Nerve Tracts	NCD 160.1
Percutaneous Image-Guided Lumbar Decompression for Lumbar Spinal Stenosis	NCD 150.13
Percutaneous Vertebral Augmentation for Vertebral Compression Fracture	LCD L34228
Skin Substitute Grafts, Cellular and Tissue-Based Products for Treatment of Diabetic Foot Ulcers and Venous Leg Ulcers	LCD DL39760

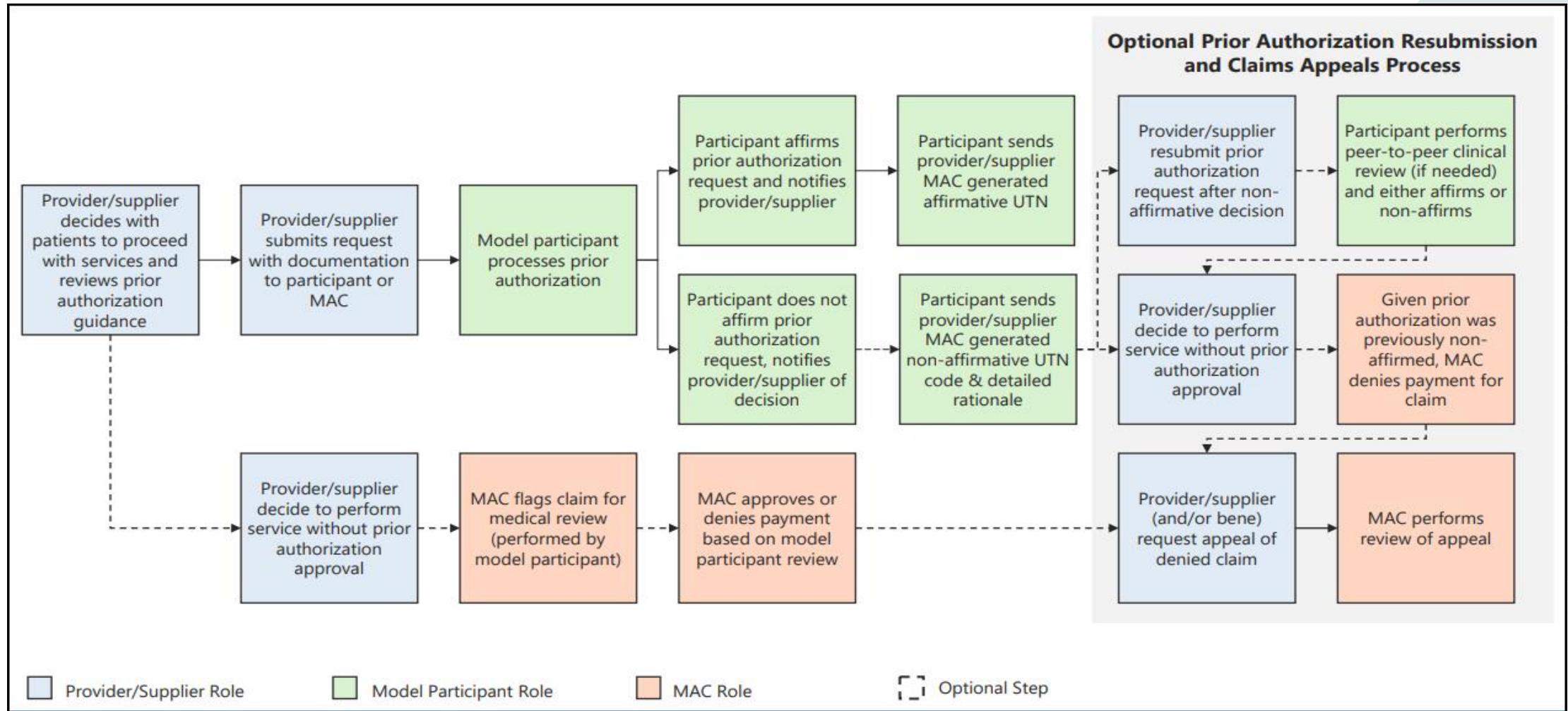
SERVICE CATEGORY 2

Service Category – Nerve Stimulators	NCD/LCD
Electrical Nerve Stimulators	NCD 160.7
Hypoglossal Nerve Stimulation for Treatment of Obstructive Sleep Apnea	LCD L38310
Phrenic Nerve Stimulator	NCD 160.19
Sacral Nerve Stimulation for Urinary Incontinence	NCD 230.18
Vagus Nerve Stimulation (VNS)	NCD 160.18

SELECT SITES OF SERVICE

- Items and services rendered at select sites
 - Defined by type of bill (TOB) or place of service (POS)
- Hospital Outpatient Department (HOPD) (TOB 13x)
- Ambulatory Surgery Center (ASC) (POS 24)
- Home (POS 12)
- Office (POS 11)
- **Not included:** Critical Access Hospital (CAH) (TOB 85x)

PROCESS FLOW CHART



PRIOR AUTHORIZATION MISCELLANEOUS NOTES

- Appendix A codes subject to prepay review and prior auth
- Appendix B not independently flagged
- Concerns reviews conducted fairly?
 - Virtix and Zyter incentivized to correctly determine first time with accurate and timely decision
- CMS updating WISER Operational Guide end of December
- Only prior authorization needed for ASC or HOPD facility
 - Professional claim denied if facility claim denies

IN SUMMARY

- Six-year voluntary prior authorization model (2026-2031)
- Select set of services identified as potentially vulnerable
- Applies to all providers in select geographic areas serving original Medicare beneficiaries
- Participant companies specializing in enhanced technology to improve and expedite prior authorizations
 - Receive portion of averted costs attributed to reduction of wasteful or inappropriate care
- Beneficiary experience and quality outcomes monitored

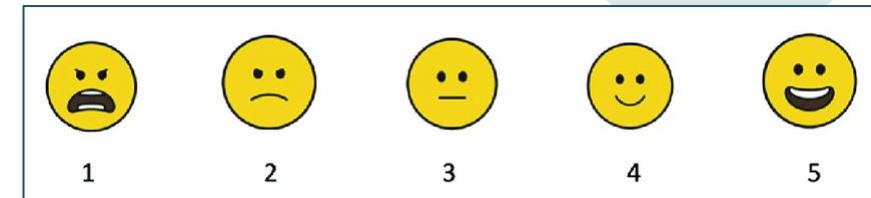
RESOURCES

CMS AND NORIDIAN RESOURCES

- [CMS WISER Model](#)
- [CMS WISER Operational Guide](#)
- Email CMS WISER team WISER@cms.hhs.gov
- Subscribe CMS WISER model listserv
 - [CMS Email Updates](#)
- Noridian Medical Review and Prior Authorization
 - [JF Part A](#)
 - [JF Part B](#)

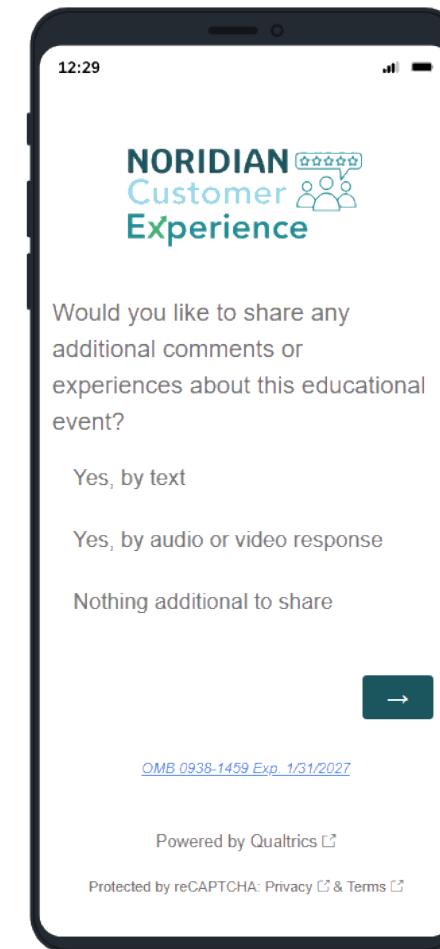
ALL MAC CUSTOMER EXPERIENCE (MCE) SURVEY

- POE Survey
 - Webinars (three chances!)
 - Via QR code below and last slide after Resources
 - Via automated email one hour after event
 - Via email with CEU within one business day of event
 - POE Webpages (Schedule of Events, ACM)
 - YouTube Tutorials
- Feedback Appreciated
 - Drive Change
 - Identify Best Practices
 - Every Result Reviewed



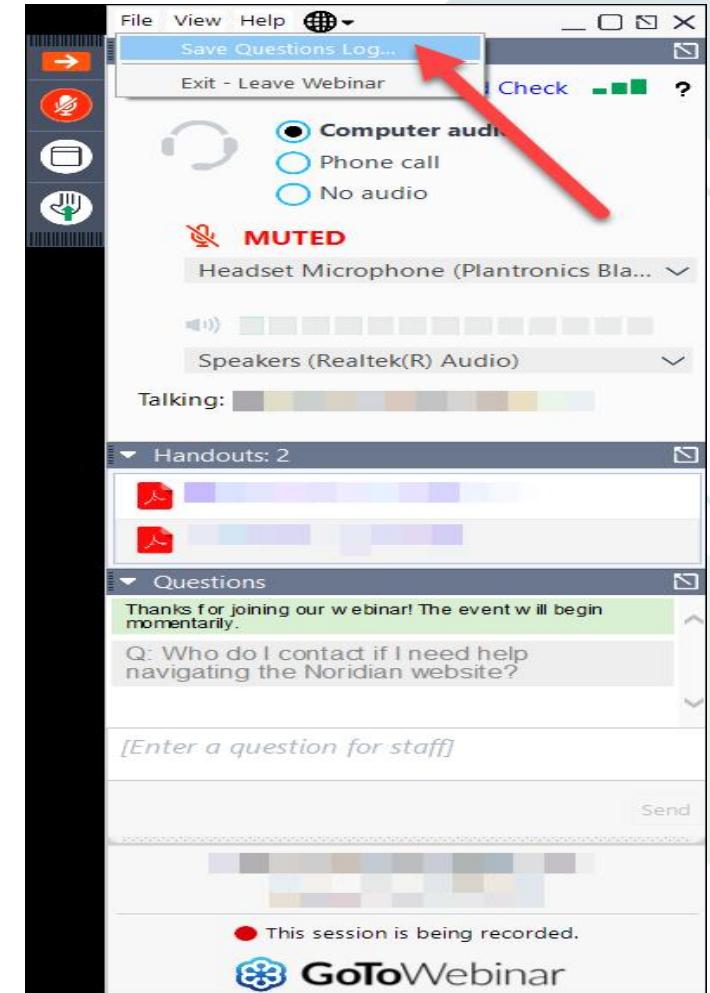
NEW WAY TO SHARE YOUR FEEDBACK!

- Now offering audio and video response options
- Choose what works best: talk, record, or type
- Share feedback in a natural, conversational format
- Great for mobile users
 - Quick and easy



ASKING QUESTIONS

- Written questions
 - Questions field and click “Send”
- Download Q&A
 - File > Save Questions Log
 - Must download before webinar closes
 - Must be using desktop GoToWebinar



THANK YOU!



CLOSING REMINDERS

QUESTIONS

- Keep to slides provided
- Ask written
- No scenarios
- Unrelated questions? Call Customer Service in your jurisdiction
- Not a Noridian provider? Send questions to your respective MAC

CEUS

- Emailed within one day after the event
- Must attend entire webinar
- Telephone-only ineligible
- No index number for AAPC members
 - CMS/MAC Sponsored
- Not reissued for past events

SATISFACTION SURVEY

- Feedback is Appreciated
 - Emoji rating
 - Drive Change and Best Practices
 - Every Result Reviewed
- Scan the QR code below:

