Medicare Carriers Manual Part 3 – Claims Process

Department of Health & Human Services (DHHS) Centers for Medicare & Medicaid Services (CMS)

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HEADER SECTION NUMBERS PAGES TO INSERT PAGES TO DELETE

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NEW/REVISED MATERIAL--EFFECTIVE DATE: Not Applicable IMPLEMENTATION DATE: Not Applicable

Chapter VIII, Reimbursement of Provider-Based Physicians and Teaching Physicians, This chapter is being deleted because it is obsolete. Physicians payment is now determined under the physician fee schedule. General instructions for paying physicians are now in the CMS Internet-only manual (IOM), Pub. 100-4, Medicare Claims Processing Manual, Chapter 12, and instructions for application of the fee schedule are in IOM Pub 100-4, Chapter 23.

The Internet-only manual can be found at http://www.cms.hhs.gov/manuals

These instructions should be implemented within your current operating budget.

CHAPTER VIII - REIMBURSEMENT OF PROVIDER-BASED PHYSICIANS AND TEACHING PHYSICIANS

NOTE: Chapter VIII is obsolete. Current instructions for provider-based physicians and teaching physicians are in the new CMS Manual System, in the Medicare Claims Processing Manual (Pub. 100-4) in Chapters 12 and 23. The new manual can be found at http://www.cms.hhs.gov/manuals. A crosswalk from the deleted manual sections to the new manual sections follows.

	Old §	Pub, Chapters	
Reimbursement for Services by Provider-Based Physicians			
Provider-Based Physicians' Services - General.	8000	100-4, 12 and 23	
Noninterference by Federal Government	8000.1	100-4, 12 and 23	
Professional and Provider Components	8010	100-4, 12 and 23	
Identification of Types of Services for Program Payments	8010.1	100-4, 12 and 23	
Distinguishing Between Professional and Provider Components	8010.2	100-4, 12 and 23	
Compensation Allocation	8010.3	100-4, 12 and 23	
The Provider-Physician Agreement as to Compensation Allocation	8010.4	100-4, 12 and 23	
A Statement of Understanding Between the Provider and Physician	8010.5	100-4, 12 and 23	
Compensation Arrangements	8015	100-4, 12 and 23	
The Fixed Compensation Arrangement	8015.1	100-4, 12 and 23	
The Variable Compensation Arrangement	8015.2	100-4, 12 and 23	
Where the Arrangements Are Modified to Permit the Physician to Bill Separately for His Professional Services	8015.3	100-4, 12 and 23	
Additional Elements of a Provider-Based Physician's Compensation	8015.4	100-4, 12 and 23	
Determination of Reimbursement for Services of Provider-Based Physicians	8017	100-4, 12 and 23	
Determination of Reasonable Charges	8017.1	100-4, 12 and 23	
Where Providers Separately Identify Physicians' Charges	8017.2	100-4, 12 and 23	
Where Providers Do Not Separately Identify Physicians' Charges	8017.3	100-4, 12 and 23	
The Schedule of Charges	8017.4	100-4, 12 and 23	
The Optional Method	8017.5	100-4, 12 and 23	
The Item-by-Item Method	8017.6	100-4, 12 and 23	
The Alternate Item-by-Item Method	8017.7	100-4, 12 and 23	

	Old §	Pub, Chapters
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Where Physicians are Compensated Through a Provider Which Bills the Program Under Combined Billing	8017.9	100-4, 12 and 23
Reimbursement of Provider Emergency Room Services When Physicians Receive Guaranteed Standby Fees	8020	100-4, 12 and 23
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Determining Whether Provider Costs Should Be Recognized	8020.2	100-4, 12 and 23
Emergency Room Only Agreements	8020.3	100-4, 12 and 23
Emergency Room and Inpatient Service Agreements - Standby Time	8020.4	100-4, 12 and 23
Contract Provisions for Administrative or Supervisory Duties	8020.5	100-4, 12 and 23
Documentation	8020.6	100-4, 12 and 23
Effect of Physician's Assumption of Operating Costs (Lease or Concession Arrangement)	8025	100-4, 12 and 23
Where the Physician Bills Patients Directly	8025.1	100-4, 12 and 23
Where Billing is By or Through the Provider	8025.2	100-4, 12 and 23
Services of an Attending Physician Supervising Interns and Residents	8030	100-4, 12 and 23
Intermediary and Carrier Responsibility for Implementing Reimbursement Policies Concerning Provider-Based Physicians	8035	100-4, 12 and 23
Resolution of Issues Regarding Time Allocation or Acceptability of Provider Information Supplied	8035.1	100-4, 12 and 23
File Documentation Requirements	8035.2	100-4, 12 and 23
Retroactive Adjustment of Certain Provider-Based Physician Payments	8040	100-4, 12 and 23
Applicability	8040.1	100-4, 12 and 23
Procedure	8040.2	100-4, 12 and 23
Reimbursement for Provider-Based Physicians' Administrative, Teaching and Direct Medical Care Services When the Physicians Have Changed Their Compensation Arrangements With the Provider	8042	100-4, 12 and 23
Listing of Exhibits	8099	100-4, 12 and 23
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	Old §	Pub, Chapters	
Reimbursement for Services by Teaching Physicians			
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Billing for Patient Services by Physicians in the Teaching Setting	8204	100-4, 12 and 23	
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Determining Reasonable Charges for Physicians' Services in Providers	8306.1	100-4, 12 and 23	
Conditions of Payment for Costs of Physicians' Services to Providers	8308.1	100-4, 12 and 23	
Conditions for Payment of Charges-Anesthesiology Services	8310	100-4, 12 and 23	
Payment for Physician Anesthesia Services	8312	100-4, 12 and 23	
Determining Reasonable Charges for Medically Directed Anesthesia Services	8313	100-4, 12 and 23	
Conditions for Payment of Reasonable Charges- Radiology Services	8314	100-4, 12 and 23	
Determining Reasonable Charges for Radiology Services	8316.1	100-4, 12 and 23	
Conditions for Payment of Charges-Physicians' Laboratory Services	8318.1	100-4, 12 and 23	
Payment for Physician Pathology Services Furnished After December 31, 1990	8318.2	100-4, 12 and 23	
Blood Gas Studies	8319.1	100-4, 12 and 23	
Exhibits	8320.1	100-4, 12 and 23	
Completion of Exhibit I-Allocation of Physician Compensation		100-4, 12 and 23	
Exhibit II-Schedule 3 of Form HCFA-339	8321.1	100-4, 12 and 23	