
PROGRAM MEMORANDUM

INTERMEDIARIES

Department of Health
and Human Services

Health Care Financing
Administration

Transmittal No. A-00-05

Date FEBRUARY 2000

This Program Memorandum re-issues Program Memorandum A-99-5, Change Request 789 dated February 1999. The only change is the discard date; all other material remains the same.

Change Request #789

SUBJECT: Claims Processing Instructions for the National Institutes of Health National Emphysema Treatment Trial (NETT)

This Program Memorandum (PM) revises the instructions for intermediary processing of NETT claims originally released in PM AB-98-14, Change Request #181 dated (April 1998).

Revision: Billable Codes under the NETT - Claims Processing Change Effective for Services Furnished Beginning September 1, 1997

PM AB 98-14 advised intermediaries to restrict the services billed under the trial and provided a list of acceptable NETT codes. There are, however, numerous other services provided to NETT patients which were not included in the list. Because of the difficulties involved in maintaining an updated list of billable codes, we are removing the requirement that only certain identified codes be allowed on a NETT bill. Remove any edits which require that only certain HCPCS codes be allowed on NETT claims.

Provider Billing

Standard Systems changes to allow services other than those specifically identified in PM AB-98-14 will not be effective until April 1999. If NETT services other than those identified in the previous PM are performed prior to that date, hospitals have two options:

- 1) Hold the bills until April 1999; or
- 2) Split the bills. (Bill the NETT services identified in PM AB-98-14 per instructions, using condition code "EY"; hold the bills for services not listed until April 1999.)

Reminder: Coverage of Additional Services for NETT Patients Only

Claims for services under the NETT will continue to be billed with a condition code of "EY". Coverage of certain services is allowed for NETT participants only:

- o Lung Volume Reduction Surgery (LVRS) is non-covered by Medicare, except for NETT patients. Continue to bypass the non-covered edit for claims submitted by participating clinical centers that indicate a participating beneficiary is in the surgery phase of the NETT.
- o Pulmonary rehabilitation services are covered under the NETT. Continue to bypass any medical necessity and utilization edits that would deny these services. Local medical review policies regarding pulmonary rehabilitation services must not be applied to NETT participants.

o Certain pulmonary rehabilitation services are specifically identified in their HCPCS description as NETT services. Continue to cover these services for NETT patients only: G0110, G0111, G0112, G0113, G0114, G0115, and G0116.

o HCFA has identified CPT codes 32491, 32663, and 32655 as the billable surgery codes for the NETT.

Reminder: Managed Care Beneficiaries

HCFA pays for LVRS, and services associated with the NETT, for beneficiaries enrolled in Medicare managed care plans through our fee-for-service contracts. Continue to bypass managed care eligibility edits in your system for fee-for-service LVRS claims of Medicare beneficiaries who are participating in the NETT.

NETT Claims Inappropriately Denied

You must reopen and process any inappropriately denied NETT claims that are brought to your attention.

Timely Filing Requirements

Intermediaries must not apply the penalty to certain NETT claims for failure to submit the claim timely. The providers participating in the NETT held the claims for services outside the list of billable codes appropriately and were awaiting release of this revised PM to submit the claims. Therefore, intermediaries should not apply the penalty to those claims that were for services outside the list of billable codes in the original PM.

These instructions should be implemented within your current operating budget.

This Program Memorandum may be discarded August 31, 2000.

All intermediaries should address questions or issues surrounding implementation of these instructions to their regional office contact. Regional office contacts should contact Sarah Shirey at (410) 786-0187 for questions pertaining to these intermediary processing instructions.