

Program Memorandum Intermediaries/Carriers

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

Transmittal AB-03-094

Date: JULY 3, 2003

CHANGE REQUEST 2781

SUBJECT: October 2003 Quarterly Update for Skilled Nursing Facility (SNF) Consolidated Billing

I. GENERAL INFORMATION

A. Background: Section 4432(b) of the Balanced Budget Act (BBA) requires consolidated billing for SNFs. Under the consolidated billing requirement, the SNF must submit Medicare claims to the fiscal intermediary (FI) for all the Part A and Part B services that its residents receive during the course of a covered Part A stay except for a small number of excluded services. For beneficiaries in a Part B stay, only physical, occupational and speech therapy services must be consolidated.

B Policy: Effective March 1, 2003, the payment status on the Medicare Physician Fee Schedule for procedure code 92597, *Evaluation for use and/or fitting of voice prosthetic device to supplement oral speech*, changed from "Not valid for Medicare purposes" to "Active." This procedure code is to be considered part of the speech therapy services that must be consolidated in either a Part A or Part B stay.

II. BUSINESS REQUIREMENTS

Requirement #	Requirements	Responsibility
1	CWF shall add code 92597 as a consolidated service code (i.e., not separately payable) for beneficiaries in a Part B stay for claims with dates of service on or after October 1, 2003.	CWF
2	FIs shall not allow payment for 92597 to any institution other than the SNF when the beneficiary is in a Part A or Part B stay.	FISS APASS
3	Carriers shall not allow payment for 92597 as they do not allow payment for all other codes included in consolidated billing.	Carriers
4	Carriers shall share the information concerning the consolidation of 92597 as a therapy service with physicians, non-physicians practitioners, and suppliers and direct them to the CMS website named below through a posting on their Web site within two weeks of receiving this instruction.	Carriers
5	FIs shall share the information concerning the consolidation of 92597 as a therapy service with providers by a posting on their Web site within two weeks of issuance of this instruction.	FIs
6	Carriers and FIs shall publish the same information in their next regularly scheduled bulletin.	Carriers & FIs
7	Carriers and FIs shall use any available list-serv(s) that target the affected provider, physician, non-physicians practitioner, and supplier community to notify subscribers that updated information about skilled nursing facility consolidated billing is available on their Web site.	Carriers & FIs
8	CMS will update the Web site for claims billed to carriers at cms.hhs.gov/medlearn/snfcodes.asp .	CMS

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

B. Design Considerations:

X-Ref Requirement #	Recommendation for Medicare System Requirements
1	Code 92597 was not included as a separately payable code in the 2003 annual update. Therefore, no change is necessary for carrier editing to category 75 at this time.
1	In order to provide appropriate provider notification of the consolidation of 92597, CWF will consolidate 92597 only as of October 1, 2003, rather than the March 1, 2003 date the code became active.
1	CWF will add 92597 to the SNF therapy edit for FI processed claims.

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

IV. ATTACHMENT(S) N/A

<p>Effective Date: October 1, 2003</p> <p>Implementation Date: October 1, 2003</p> <p>Discard Date: October 1, 2004</p>	<p>Funding: These instructions should be implemented within your current operating budget.</p> <p>Contact: Appropriate Regional Office</p>
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