
CMS Medicare Manual System

Pub. 100-8 Program Integrity

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

Transmittal 38

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CHANGE REQUEST 2120

CHAPTERS	REVISED SECTIONS	NEW SECTIONS	DELETED SECTIONS
3		3.2	
13			2

Red italicized font identifies new material.

NEW/REVISED MATERIAL - EFFECTIVE DATE: January 31, 2003

IMPLEMENTATION DATE: - February 14, 2003

Medicare contractors only: these instructions should be implemented within your current operating budget.

Chapter 3, Section 3.2, Articles – clarifies when contractors may publish coverage/coding articles in their bulletins and Web sites.

Chapter 13, Section 2, Articles - is deleted.

3.2 – Articles – (Rev. 38, 02-03-03)

Contractors have an obligation to assist providers in complying with Medicare's coverage, coding and medical review related billing and claim rules.

For the purposes of this manual, the term “article” will be used to describe any bulletin article, Web site article, educational handout or any other non-LMRP document intended for public release that contains coverage/coding statements or medical review related billing or claims considerations. For the purposes of this manual, the term “publish” will be used to describe any form of dissemination including posting on a Web site, distributing at a seminar, including an e-mailing, and printing in a hardcopy bulletin.

Contractors may publish articles communicating certain information to providers.

- *When National Coverage Determinations (NCD) or other coverage instructions issued by CMS include specific conditions or parameters for which services may be covered, contractors may develop and publish a list of covered codes related to the coverage provision. Contractors may automate denials for codes not included on the list without the development of an LMRP if the NCD indicates or states that no other condition or parameters will be covered.*
- *Contractors may publish definitions of procedure codes, lists of items that may be billed under a particular code, or minimum requirements that providers must meet in order to bill using a certain code.*
- *The contractor may publish a product classification list that instructs providers about which specific products meet the definitional requirements of a particular HCPCS code. Developing or revising an LMRP for this article is unnecessary.*
- *The contractor may explain which off-labeled uses of FDA approved drugs are considered reasonable and necessary with the ICD-9-CM codes that reflect such uses.*
- *The contractor may explain benefit category decisions and publish a list of drugs/ biologicals that are considered usually self administered.*
- *The contractor may explain which HCPCS code or group of codes properly describes a particular service.*
- *The contractor may publish State non-physician licensure information that governs services billed by the physician under the “incident to” provision.*

Articles may not conflict with NCDs or coverage provisions in interpretive manuals. Although a comment and notice process is not required, contractors are encouraged to consult with stakeholders in the provider community when developing articles.

Contractors must monitor comments about articles from clinician providers and respond to their concerns, as needed, by issuing revised or clarifying articles.

NOTE: *Nothing in this section precludes the contractors from making individual claim determinations, even in the absence of an article or LMRP.*

Beginning in 2003, contractors will be required to enter into the Medicare coverage database those articles that address local coverage, coding or medical review related billing and claims considerations. Instructions for this requirement are in PM AB-02-098. Articles may include any newly developed educational materials, coding instructions or clarification of existing medical review related billing or claims policy. Contractors are encouraged to send articles to specialty societies for inclusions in their publications and Web sites. All newly created articles must be posted on the contractor's Web site where duplicate copies may be obtained by physician/suppliers.