
Medicare

Carriers Manual

Part 3 – Claims Process

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

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<u>HEADER SECTION NUMBERS</u>	<u>PAGES TO INSERT</u>	<u>PAGES TO DELETE</u>
Table of Contents – Chapter XIII 13000 – 13830.2	1 - 10 (10 pp.) None	13 -1 – 13-7 (8 pp.) 13-9 – 13-516 (372 pp.)

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

Chapter XIII, Reports and Statistics. This chapter is being deleted and the related remaining instructions are issued in the Medicare Financial Management Manual. The table of contents is replaced with a crosswalk from the old Part 3 to the related instruction in the Internet-only manual (IOM). If the material from MCM, Part 3, is no longer applicable, we indicate that it was not moved to the IOM by entering “Deleted” in the crosswalk. For each included cross-reference, we provide the old manual number and the IOM number (e.g., 100-6 for Medicare Financial Management Manual), and the IOM chapter and section (§) numbers.

The IOM can be found at <http://www.cms.hhs.gov/manuals>

These instructions should be implemented within your current operating budget.

CHAPTER XIII - REPORTS AND STATISTICS

NOTE: Chapter XIII has been moved to the new CMS Manual System, in the Medicare Financial Management Manual (Pub 100-6). 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, Chapter, & §
Statistical Program		
Objectives of Statistical Program	13000	Deleted - Obsolete
How Statistics are Collected	13001	Deleted - Obsolete
Current Medicare Survey--Part B	13003	Deleted - Obsolete

Reports of Payment of Individual Claims (Payment Records)

Purpose of Payment Records	13010	Deleted - Obsolete
When to Prepare a Payment Record	13011	Deleted - Obsolete
Preparation of Payment Records for Bills for Hospital-Based Radiologists and Pathologists	13012	Deleted - Obsolete
Preparation of Payment Records for Assignment and Non-Assignment Cases (Forms HCFA-1490 or HCFA-1491)	13013	Deleted - Obsolete
Preparation of Payment Records for Chronic Kidney Disease Treatment	13014	Deleted - Obsolete
Preparation of Payment Records for Bills Prepared for Diagnostic Laboratory Tests	13015	Deleted - Obsolete
Preparation of Payment Records for Bills Prepared by Independent Physical Therapists	13016	Deleted - Obsolete
Preparation of Payment Records for Bills for Used Durable Medical Equipment (DME)	13017	Deleted - Obsolete
Preparation of Payment Records for Bills Which Identify Second and Third Opinions on Elective Surgery	13018	Deleted - Obsolete
Preparation of Payment Records for Bills on Which an Alternative Method of Payment is Used for Physician Services Rendered to Maintenance Dialysis Beneficiaries	13019	Deleted - Obsolete
Preparation of Payment Records for Bills Prepared for Certain Services, Ambulatory Surgical Centers, or Hospital Outpatient Departments	13020	Deleted - Obsolete
Preparation of Payment Records for Bills With Pneumococcal Vaccine	13021	Deleted - Obsolete
Preparation of Payment Records for Bills Which	13022	Deleted - Obsolete

	Old §	Pub, Chapter, & §
Indicate Medicare as the Secondary Payor		
Preparation of Payment Records for Bills Which Indicate Hospice Services	13023	Deleted - Obsolete
Preparation of Payment Records for Bills Covering Optometry Services	13024	Deleted - Obsolete
Preparation of Payment Records for Bills Submitted by Occupational Therapists	13025	Deleted - Obsolete
Preparation of Payment Records for Bills Covering Outpatient Psychiatric Services	13026	Deleted - Obsolete
Preparation of Payment Records for Bills Covering Mammography Screening	13027	Deleted - Obsolete
Content of the Payment Record	13030	Deleted - Obsolete
Positions 1-29	13030.1	Deleted - Obsolete
Positions 30-50	13030.2	Deleted - Obsolete
Positions 51-68	13030.3	Deleted - Obsolete
Positions 69-80	13030.4	Deleted - Obsolete
Coding Physician Specialty	13030.5	Deleted - Obsolete
Coding Type of Supplier	13030.6	Deleted - Obsolete
Coding Types of Service for Group Practice Prepayment Plans	13030.7	Deleted - Obsolete
Description of Entry Code	13031	Deleted - Obsolete
Entry Code 1 - Original Debit Submittal	13031.1	Deleted - Obsolete
Entry Code 2 - Supplemental Debit Submittal	13031.2	Deleted - Obsolete
Entry Code 3 - Full Credit Submittal	13031.3	Deleted - Obsolete
Entry Code 4 - Partial Credit Submittal	13031.4	Deleted - Obsolete
Entry Code 5 - Replacement Debit Submittal	13031.5	Deleted - Obsolete
Entry Code 6 - Partial Debit Submittal	13031.6	Deleted - Obsolete
Entry Code 7 - Full Overpayment Recovery Submittal	13031.7	Deleted - Obsolete
Entry Code 8 - Partial Overpayment Recovery Submittal	13031.8	Deleted - Obsolete
Entry Code 9 - Overpayment Transfer or Overpayment Cancel Transaction Submittal	13031.9	Deleted - Obsolete
Erroneously Submitted Entry Codes 3 and 4	13031.10	Deleted - Obsolete
Overpayment Indicators	13032	Deleted - Obsolete
Content of Payment Records for Partially Paid Bills	13033	Deleted - Obsolete
Content of Payment Records for Bills for Hospital-Based Physicians (Form HCFA-1554)	13034	Deleted - Obsolete
Content of Payment Records for Hospital-Based Physicians Where Bills are Paid on a Per Diem Basis	13035	Deleted - Obsolete
Revision of Payment Records	13036	Deleted - Obsolete

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Completion of Form HCFA-1606	13055	Deleted - Obsolete
Frequency of Payment Record Shipments	13056	Deleted - Obsolete

HCFA Payment Records Edits

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Part B Payment Record Edit-Primary Exceptions	13070.1	Deleted - Obsolete
Return of Individual Payment Records for Correction and Monthly Report of Payment Record Edit Exceptions	13071	Deleted - Obsolete
Code A - HI Claim Number/Surname Discrepancy	13071.1	Deleted - Obsolete
Code B - Not Entitled to Part B Coverage or Expenses Prior to Entitlement	13071.2	Deleted - Obsolete
Code C - Amounts Do Not Crossfoot	13071.3	Deleted - Obsolete
Code D - Invalid Month of Expense	13071.4	Deleted - Obsolete
Code E - Expenses Incurred Between Periods of Entitlement or After Termination	13071.5	Deleted - Obsolete
Code F - Last Expense Month is Later Than Beneficiary's Month of Death	13071.6	Deleted - Obsolete
Code G - Deductible Not Satisfied	13071.7	Deleted - Obsolete
Code H - Amount of Deductible in the Payment Record Exceeds Deductible Amount	13071.8	Deleted - Obsolete
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	Old §	Pub, Chapter, & §
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Code N - Physical Therapy Maximum	13071.14	Deleted - Obsolete
Code P - HMO	13071.15	Deleted - Obsolete
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Code S - Occupational Therapy Maximum	13071.17	Deleted - Obsolete
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Part B Payment Record Catastrophic Coverage	13084	Deleted - Obsolete

Exhibits

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Procedure for Identifying Physician/Supplier Identification Number Coded In Payment Records	13150	Deleted - Obsolete

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	Old §	Pub, Chapter, & §
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	Old §	Pub, Chapter, & §
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Old § Pub, Chapter, & §

Carrier Beneficiary Overpayment Activity Report

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Section C - How Overpayments Were Discovered	13360.4	100-6, 6-§330.4
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Purpose and Scope	13400.1	100-6, 6-§350.1
Due Date	13400.2	100-6, 6-§350.2
Completion of Items on Form HCFA-2590	13410	100-6, 6-§360
Heading	13410.1	100-6, 6-§360.1
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Report on Number of Participating Physicians and Suppliers

Participating Physician/Supplier Report	13421	100-6, 6-§390
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	Old §	Pub, Chapter, & §
Carrier Beneficiary Overpayment Activity Report		
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Due Date	13421.2	100-6, 6-§390.2
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Completing Quarterly Report on Provider Enrollment	13430	100-6, 6-§430
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Completing Lines Twelve Through Seventeen - Reason for Denial	13430.5	100-6, 6-§430.5
Completing Lines Eighteen Through Twenty-Two - Reason for Return	13430.6	100-6, 6-§430.6
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	Old §	Pub, Chapter, & §
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Exhibit	13450.10	100-6, 6-§440.10

Physician and Supplier Overpayment Reporting System (PSOR)

General Information	13550	Deleted from manual. PSOR instructions will be released separately
Data Entry	13551	See immediately above
Physician/Supplier Overpayment Reporting System (PSOR) User Instructions	13552	See immediately above

Part B Medicare Data

Purpose of Part B Medicare Annual Data Files	13700	Deleted- Obsolete
Data Selection and Reporting	13705	Deleted- Obsolete
BMAD Special Reporting Instructions	13706	Deleted- Obsolete
Nationally Processed Claims	13706.1	Deleted- Obsolete

Old § Pub, Chapter, & §

Carrier Beneficiary Overpayment Activity Report

Certified Nurse Midwife	13706.2	Deleted- Obsolete
Ambulatory Surgical Center (ASC)	13706.3	Deleted- Obsolete
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Psychiatric	13706.5	Deleted- Obsolete
Content of the Part B Medicare Annual Data Files	13710	Deleted- Obsolete
Preparing BMAD Records	13715	Deleted- Obsolete
IBM Standard Label Information	13715.1	Deleted- Obsolete
Tape Reel Record First Record on File	13715.2	Deleted- Obsolete
Tape Reel Trailer Control Total Record	13715.3	Deleted- Obsolete
Shipment of BMAD Data to HCFA	13715.4	Deleted- Obsolete
Preparation of the Transmittal	13720	Deleted- Obsolete
Completion of the Record Transmittal	13725	Deleted- Obsolete
Preparing the Prevailing Charge/Pricing File	13800	Deleted- Obsolete
Content of the Part B Medicare Prevailing Charge/Pricing File	13810	Deleted- Obsolete
Submitting the Prevailing Charge/Pricing File Tape	13815	Deleted- Obsolete
Tape Reel Record First Record on File	13815.1	Deleted- Obsolete
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Verification of the Prevailing Charge/Pricing File	13830	Deleted- Obsolete
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Fee Schedule Edits	13830.2	Deleted- Obsolete