
Medicare

Intermediary Manual

Part 3 – Claims Process

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

Transmittal 1905

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| <u>HEADER SECTION NUMBERS</u> | <u>PAGES TO INSERT</u> | <u>PAGES TO DELETE</u> |
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| Table of Contents – Chapter VIII 3-3700 – 3-3799.18 | 1 - 9 (9 pp.) None | 2-1 – 2-3 (9 pp.) 2-5 – 2-89 (73 pp.) |

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

Chapter VIII, Payment Procedures. This chapter is being deleted and the related instructions are issued in the CMS Internet-only manual (IOM). The table of contents is replaced with a crosswalk from the old Part 3 to the related instruction in the IOM. If the material from MIM, Part 3, is no longer applicable, we indicate that it was not moved to the IOM by entering “deleted” in the crosswalk.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 (e.g., a3), the IOM number (e.g., 100-4 for Claims Processing), and the IOM chapter and section (§) numbers.

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 – PAYMENT PROCEDURES

NOTE: Chapter VIII has been moved to the new CMS Manual System, mainly in the Medicare Claims Processing Manual (Pub. 100-4). 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.

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