
CMS Manual System

Pub. 100-04 Medicare Claims Processing

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

Transmittal 111

Date: FEBRUARY 27, 2004

CHANGE REQUEST 3083

I. SUMMARY OF CHANGES: This instruction revises and deletes certain sections of the claims processing manual on reassignment.

NEW/REVISED MATERIAL - EFFECTIVE DATE: December 8, 2003

***IMPLEMENTATION DATE: March 12, 2004**

Disclaimer for manual changes only: The revision date and transmittal number apply only to the red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will only receive the new/revised information, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS:
(R = REVISED, N = NEW, D = DELETED)

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
R	1/Table of Contents/General Billing Requirements
R	1/30.2.7/Payment to Facility in Which Services Are Performed - Carrier Claims
D	1/30.2.8/Carrier Payment to Health Care Delivery System - Carrier Claims
D	1/30.2.8.1/Definition of Health Care Delivery System

***III. FUNDING:**

These instructions shall be implemented within your current operating budget.

IV. ATTACHMENTS:

X	Business Requirements
X	Manual Instruction
	Confidential Requirements
	One-Time Notification
	Recurring Update Notification

***Medicare contractors only**

Business Requirements

Pub. 100-04	Transmittal: 111	Date: February 27, 2004	Change Request 3083
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SUBJECT: Payment For Services Provided Under a Contractual Agreement

I. GENERAL INFORMATION

A. Background: This change request revises the instructions on reassignment.

B. Policy: A carrier may make payment to an entity (i.e., a person, group, or facility) enrolled in the Medicare program that submits a claim for services provided by a physician or other person under a contractual arrangement with that entity, regardless of where the service is furnished. Thus, the service may be furnished on or off the premises of the entity submitting the bill. The contractual arrangement between the entity and the physician or other person should include the following program integrity safeguards:

1. Joint and several liability is shared between the entity submitting the claim and the person actually furnishing the service, for any Medicare overpayment relating to such claim.
2. The person furnishing the service has unrestricted access to claims submitted by the entity for the services provided by that person.

C. Provider Education: Intermediaries and carriers shall inform affected providers by posting either a summary or relevant portions of this document on their Web site within two weeks. Also, intermediaries and carriers shall publish this same information in their next regularly scheduled bulletin. If they have a listserv that targets affected providers, they shall use it to notify subscribers that revised information about reassignment is available on their Web site.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement

"Should" denotes an optional requirement

Requirement #	Requirements	Responsibility
3083.1	The contractor shall do provider education as described in section I.C.	Contractors

II. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

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

E. Dependencies: N/A

F. Testing Considerations: N/A

IV. OTHER CHANGES

Citation	Change
N/A	

SCHEDULE, CONTACTS, AND FUNDING

Effective Date: December 8, 2003 Implementation Date: March 12, 2004 Pre-Implementation Contact(s): David Walczak ((410) 786-4475 Post-Implementation Contact(s): David Walczak (410) 786-4475	These instructions should be implemented within your current operating budget.
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Medicare Claims Processing Manual

Chapter 1 - General Billing Requirements

Table of Contents

(Rev. 111, 02-27-04)

*30.2.7 - Payment for Services Provided Under a Contractual Arrangement
- Carrier Claims Only*

30.2.7 - Payment for Services Provided Under a Contractual Arrangement - Carrier Claims Only

(Rev. 111, 02-27-04)

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