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# Program Memorandum Intermediaries

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

Transmittal A-03-082

Date: SEPTEMBER 26, 2003

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CHANGE REQUEST 2877

**SUBJECT: Clarification for billing under the 2300 Provider Number by Hospital-Based Renal Dialysis Facilities (RDF)**

## I. GENERAL INFORMATION

This Program Memorandum (PM) contains clarifying information for hospital-based renal dialysis facility (RDF) billing requirements related to provider number usage. In several instances, hospital-based chronic RDFs are using the hospital provider number rather than the assigned RDF provider number.

The hospital-based renal facility has an assigned RDF provider number in the 2300 - 2499 series. It is required that the assigned RDF provider number be used on the CMS-1450 billing form (or electronic equivalent) when billing for Part B outpatient renal services. These facilities are not to use the hospital provider number on these bills. The hospital provider numbers shall only be used, by the hospital, when billing for transplant services and related transplant services for past inpatient hospitalizations, in addition to other non-renal inpatient and outpatient hospital services. End Stage RDFs based in Children's Hospitals will bill for Part B outpatient maintenance dialysis services using the hospital provider number in the 3300-3399 series.

When a hospital-based chronic RDF does not have an assigned RDF provider number, that facility should contact the CMS Regional Office for that area, and request a number.

The Provider Number series for Dialysis Providers are as follows:

<b>2300-2499</b>	Chronic Renal Dialysis Facilities ( <b>Hospital-Based</b> )
<b>2500-2899</b>	Non- Hospital Renal Facilities
<b>2900-2999</b>	Independent <i>Special Purpose</i> Renal Dialysis Facility
<b>3300-3399</b>	Children's Hospitals (Excluded from PPS)
<b>3500-3699</b>	Renal Disease Treatment Centers ( <b>Hospital Satellites</b> )
<b>3700-3799</b>	Hospital Based <i>Special Purpose</i> Renal Dialysis Facility

*All facilities shall use their appropriately assigned provider numbers on the 72x bill.*

*In the event that a facility changes from one type to another the provider number must reflect the facility's present type.*

**EXAMPLE:** Baptist Hospital provider number is 100093 and the Hospital-Based Chronic Renal Dialysis 2300 - 2499 series Provider number is 102327. The correct provider number for billing ESRD services on the **72x bill type** is 102327.

## II. BUSINESS REQUIREMENTS

*“Shall” denotes a mandatory requirement*  
*“Should” denotes an optional requirement*

Req. #	Requirements	Resp.
2877.1	The Fiscal Intermediary (FI) shall ensure that claims for dates of service (DOS) on or after January 1, 2004, for Type of Bill (TOB) 72x from a hospital-based chronic RDF have the correct 2300 -2499 provider number.	FI
2877.1.1	The FI shall ensure that claims for DOS on or after January 1, 2004, for TOB 72x from a non-hospital renal facility have the correct 2500 -2899 provider number.	FI
2877.1.2	The FI shall ensure that claims for DOS on or after January 1, 2004, for TOB 72x from an independent special purpose renal dialysis facility have the correct 2900 –2999 provider number.	FI
2877.1.3	The FI shall ensure that claims for DOS on or after January 1, 2004, for TOB 72x from a children’s hospital (excluded from PPS) have the correct 3300 -3399 provider number.	FI
2877.1.4	The FI shall ensure that claims for DOS on or after January 1, 2004, for TOB 72x from a renal disease treatment center (Hospital Satellites) have the correct 3500-3699 provider number.	FI
2877.1.5	The FI shall ensure that claims for DOS on or after January 1, 2004, for TOB 72x from a hospital based special purpose renal dialysis facility have the correct 3700 -3799 provider number.	FI
2877.2	The FI shall post these requirements in the next scheduled bulletin and on their Web site.	FI
2877.2.1	The FI shall inform affected provider communities by posting relevant portions of this instruction on their Web sites within two weeks of the issuance date of this instruction.	FI
2877.2.2	The FI shall inform affected provider communities by posting relevant portions of this instruction in the next regularly scheduled bulletin.	FI
2877.3	The FI shall use their listserve to notify the affected provider communities that information about <b>Clarification for billing under the 2300 Provider Number by Hospital-Based Renal Dialysis Facilities (RDF) CR 2877</b> is available on your Web site.	FI
2877.3.1	The FI shall use their listserve to notify the affected provider community that listings from the “ <i>National Listing of Medicare Providers Furnishing Kidney Dialysis and Transplant Services</i> ” are available.	FI
2877.3.2	The FI shall use their listserve to notify the affected provider community that listings are provided at <a href="http://cms.hhs.gov/esrd/8.asp">http://cms.hhs.gov/esrd/8.asp</a> or <a href="http://cms.hhs.gov/esrd/8e.pdf">http://cms.hhs.gov/esrd/8e.pdf</a> .	FI

### III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

#### A – Other Instructions: N/A

X-Ref Req. #	Instructions

#### B – Design Considerations: N/A

X-Ref Req. #	Recommendation for Medicare System Requirements Implementation

#### C - Interfaces: N/A

X-Ref Req. #	Recommendation for Medicare System Requirements

**D - Contractor Financial Reporting /Workload Impact: N/A**

**E - Dependencies: N/A**

**F - Testing Considerations: N/A**

**IV. Attachment(s) None**

<b>Effective Date: January 1, 2004</b>	<b>Pre-Implementation Contact: Pat Barrett, 410-786-0508 &amp; Doris Barham 410-786-6146</b>
<b>Implementation Date: January 1, 2004</b>	<b>Post-Implementation Contact: Regional Office</b>
<b>Discard Date: January 1, 2005</b>	<b>Funding: These instructions should be implemented within your current operating budget</b>