
CMS Manual System

Pub. 100-01 Medicare General Information, Eligibility, and Entitlement

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

Transmittal 4

Date: APRIL 30, 2004

CHANGE REQUEST 3278

I. SUMMARY OF CHANGES: This recurring update notification provides information to contractors about updates of the CMS Managed Modules for software programs and pricing/coding files.

NEW/REVISED MATERIAL - EFFECTIVE DATE: April 30, 2004

***IMPLEMENTATION DATE: June 1, 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: N/A

(R = REVISED, N = NEW, D = DELETED – (Only One Per Row.)

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
N/A	

***III. FUNDING:**

These instructions shall be implemented within your current operating budget.

IV. ATTACHMENTS:

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

***Medicare contractors only**

Attachment – Recurring Update Notification

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SUBJECT: Scheduled Release for July Updates to Software Programs and Pricing/Coding Files

I. GENERAL INFORMATION

A. Background: The managed module for software programs and pricing/coding files are updated quarterly. It is informational only and has no systems impact.

B. Policy: N/A

C. Provider Education: None.

II. BUSINESS REQUIREMENTS

“Shall” denotes a mandatory requirement

“Should” denotes an optional requirement

Requirement #	Requirements	Responsibility
3278.1	Medicare contractors shall download the July quarterly update when the software and file become available (See Attachment 1 for scheduled release dates).	SSMs, FIs, DMERC, and local carrier

III. 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. SCHEDULE, CONTACTS, AND FUNDING

<p>Effective Date: April 30, 2004</p> <p>Implementation Date: June 1, 2004</p> <p>Pre-Implementation Contact(s): Joe Bryson at jbryson2@cms.hhs.gov or 410-786-2986</p> <p>Post-Implementation Contact(s): Appropriate Regional Office</p>	<p>These instructions shall be implemented within your current operating budget.</p>
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Attachment 1: CR 3278

TITLE OF SOFTWARE/ FILES	SCHEDULED RELEASE DATE	DESCRIPTION OF UPDATE
Inpatient PRICER	*	Annual update.
IRF PRICER	*	Annual update.
LTCH PRICER	May 28	Semi-annual rate update.
OPPS PRICER	June 4	Quarterly updates to APC rates, wage indices and new logic.
HHA PRICER	*	Annual update.
ASC PRICER	*	Annual update.
SNF PRICER	*	Annual update.
Hospice PRICER	*	Annual update.
MMA Drug Pricing File PRICER	*	Update containing payment amounts for covered drugs.
OPPS OCE	June 4	Quarterly changes to CMS coding, edits, flags, APCs, status indicator descriptions and logic.
Non-OPPS OCE	May 28	Quarterly changes to codes, ASC payment groups edits and logic.
Inpatient GROUPER	*	Annual update of ICD-9-CM coding and DRGs.
MCE	*	Annual update of inpatient edits.
Zip Code File	May 15	Quarterly update of zip codes for ambulance reporting.
Clinical Diagnostic Laboratory Edit Table	*	Annual update to table.
MPFSDB	May 6	Quarterly rate increases to fee schedule.

TITLE OF SOFTWARE/ FILES	SCHEDULED RELEASE DATE	DESCRIPTION OF UPDATE
MPFSDB Abstract File (Therapy/ CORF/CAH)	May 6	Quarterly updates to fee schedule.
Hospice File for RHHIs	May 6	Annual rate increases to fee schedule.
Mammo- graphy Benefit Pricing File	May 6	Annual rate increases to fee schedule.
Clinical Diagnostic Lab Fee Schedule	*	Annual rate increases to fee schedule.
DMEPOS Fee Schedule	May 5: Carriers/DMERC May 12: FIs	Quarterly update to fee schedule.
Ambulance Fee Schedule File	May 28	Update per The Medicare Prescription, Drug and Modernization Act (MMA).
SNF Extract of the MPFSDB	May 6	Quarterly update.
HCPCS	*	Annual update of HCPCS codes.
Supplemental	May 6	Quarterly update.

* There are no updates for these pricing/coding files for July.

Note: All dates on the above table are for 2004.

The PRICER software will be made available for retrieval from CMS's Mainframe Telecommunications System. Shared System maintainers will be notified via e-mail when the software is available and will notify you via routine bulletins when they release the PRICER software to you.

The pricing/coding files will be available for retrieval from CMS's Mainframe Telecommunication System. You will be notified in future One-Time Notifications of when the pricing/coding files will be available.

Acronyms:

APC – Ambulatory Payment Classification
ASC – Ambulatory Surgical Center
BIPA – Benefits Improvement and Protection Act
CMHC – Community Mental Health Center
CORFs – Comprehensive Outpatient Rehabilitation Facilities
DMEPOS – Durable Medical Equipment Prosthetic Orthotic and Supply
DRGs – Diagnosis Related Groups
HHA – Home Health Agency
HCPCS – Healthcare Common Procedure Coding System
ICD-9-CM – International Classification of Disease, 9th Revision, Clinical Modification
IRF – Inpatient Rehabilitation Facility
LTCH – Long Term Care Hospital
MCE – Medicare Code Editor
MPFSDB – Medicare Physician Fee Schedule Database
NWI – New Wage Indexes
OCE – Outpatient Code Editor
OPPS – Outpatient Prospective Payment System
RHHIs – Regional Home Health Intermediaries
SNF – Skilled Nursing Facilities