
Medicare

Carriers Manual

Part 3 – Claims Process

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

Transmittal 1834

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<u>HEADER SECTION NUMBERS</u>	<u>PAGES TO INSERT</u>	<u>PAGES TO DELETE</u>
Table of Contents – Chapter XVII 17000 – 17002	1 (1 p.) None	17-1 (1 p.) 17-3 – 17-13 (11 pp.)

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

Chapter XVII, Participation Program and Billing Limitations. This chapter is being deleted and the related instructions are issued in the Medicare Claims Processing 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). For each cross-reference, we provide the old manual number and the IOM number (e.g., 100-4 for Medicare Claims Processing 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 XVII - PARTICIPATION PROGRAM AND BILLING LIMITATIONS

NOTE: Chapter XVII has been moved to the new CMS Manual System, 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.

	Old §	Pub, Chapter, & §
Mandatory Assignment and Participation Program	17000	100-4, 12-§110.3C, 150
Participation Program	17001	100-4, 1-§§30.3
Participation Program	17001.1	100-4, 1-§30.3.12
Participation Program and Billing Limitations	17002	100-4, 1-§30.3.12.1