
Program Memorandum

Intermediaries/Carriers

Department of Health and
Human Services (DHHS)
HEALTH CARE FINANCING
ADMINISTRATION (HCFA)

Transmittal AB-00-40

Date: MAY 2000

CHANGE REQUEST 1165

SUBJECT: Written Statements of Intent (SOI) to Claim Medicare Benefits; 60-Day Grace Period

This Program Memorandum (PM) applies to the claims filing period that ended on December 31, 1999 (i.e., for services furnished from October 1, 1997 through September 30, 1998, and which is extended through January 3, 2000 because December 31, 1999 was a Federal non-workday). It pertains to all parties who submitted timely SOIs for this filing period, and provides clarification on necessary elements in written statements of intent to claim Medicare Part A or Part B benefits (statement of intent). In addition, it announces a 60-day grace period for resubmission of SOIs to allow submitters sufficient time to provide the information described below. The information contained in this document should be used in conjunction with PMs AB-99-88 and AB-99-100. Information contained herein supercedes other previous instructions or RO bulletins.

Q. What elements constitute a valid Statement of Intent (SOI)?

A. A valid statement of intent must contain the following information:

- Beneficiary's name
- Beneficiary's health insurance claim (HIC) number
- Date(s) of service
- Specified service

In accordance with the Medicare regulations (42 CFR §424.45), the SOI must be for the filing of a claim for Medicare payment for specified services furnished to an identified Medicare beneficiary.

Specified Service means the SOI must include a detailed description of the service provided or the applicable revenue, DRG, CPT, or HCPCS code (with appropriate modifiers) for each service reported, in a manner consistent with the reporting of codes on the Medicare claims form. General headings or categories such as "outpatient hospital benefits" or "lab services", or computer disks/CD ROMs labeled in a similar manner which do not contain the aforementioned specified service data within, are not acceptable.

Date(s) of Service means date(s) of service for which the claim will be filed (dates must be reported in a manner that comports with the Medicare claims filing instructions; a range of dates are acceptable only if a range of dates is properly reportable on the Medicare claim form).

The SOI must associate each specified service(s) with each date(s) of service or range of dates, in a manner consistent with the reporting of codes and dates on the Medicare claims form.

HCFA will allow a 60-day grace period to allow submitters of eligible SOIs to conform to the above requirements. Eligible SOIs are those which were timely filed for the claims filing period that ended on December 31, 1999 (which is extended through January 3, 2000 because December 31, 1999 is a Federal non-workday), and which have not yet been acknowledged by the contractor or were acknowledged as invalid due to limited or missing information. The grace period permits the submitter of the SOI to resubmit the SOI with information which was not initially submitted. The 60-day grace period commences on the date of the contractor's notification letter to the submitter

of the SOI, unless the recipient of the notice can establish by a preponderance of the evidence that the notice was sent on a materially different date. Upon receipt of the resubmitted SOI, the contractor is to follow acknowledgement procedures outlined in PMs AB-99-88 and AB-99-100. Please notify submitters of eligible SOIs of this grace period as soon as possible, but in no case later than June 1, 2000.

The *effective date* for this Program Memorandum (PM) is for the claims filing period that ended on December 31, 1999 (which is extended through January 3, 2000 because December 31, 1999 is a Federal non-workday).

The *implementation date* for this PM is upon issuance.

These instructions should be implemented within your current operating budget.

This PM may be discarded after January 2, 2001.

If you have any questions, contact David Walczak, at (410) 786-4475.