



News Flash – The Acute Care Hospital Inpatient Prospective Payment System Fact Sheet (September 2009) is available. This Fact Sheet provides general information about the Acute Care Hospital Inpatient Prospective Payment System (IPPS) including information about the basis for IPPS payment, IPPS payment rates, and how IPPS payment rates are set. To place your order for this publication, visit <http://www.cms.hhs.gov/MLNGenInfo>, scroll down to “Related Links Inside CMS” and select “MLN Product Ordering Page.”

MLN Matters® Number: MM6709 **Revised**

Related Change Request (CR) #: 6709

Related CR Release Date: January 29, 2010

Effective Date: July 1, 2010

Related CR Transmittal #: R628OTN

Implementation Date: July 6, 2010

Integrated Outpatient Code Editor (IOCE) PC (interactive and batch) Re-Write

Note: This article was revised on February 1, 2010, to reflect a revised CR 6709. The effective date (see above), implementation date, CR release date, transmittal number, and the Web address for accessing CR 6709 were revised. All other information remains the same.

Provider Types Affected

This article is for all providers who submit institutional outpatient claims (including non-outpatient prospective payment system (non-OPPS) hospitals) to Medicare Administrative Contractors (MACs), fiscal intermediaries (FIs), or Regional Home Health Intermediaries (RHHIs) for outpatient services provided to Medicare beneficiaries.

Provider Action Needed

This article is based on Change Request (CR) 6709, which notifies providers of the intended re-write of the IOCE Personal Computer (PC) software (interactive and batch) to the Java programming language with InstallAnywhere for installation software. Be sure billing staffs using the PC-based IOCE are aware of these changes. Once the rewrite is complete, such staff will need to obtain the new version.

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Background

Section 508 of the Rehabilitation Act of 1973 (29 U.S.C. 794d) as amended by the workforce Investment Act of 1998 (P.L. 105-220), specifically, subsection 508(a)(1), requires that when the Federal Government procures Electronic and Information Technology (EIT), the EIT must allow Federal employees and individuals of the public with disabilities comparable access to and use of information and data that is provided to Federal employees and individuals of the public without disabilities.

Therefore, per 36 CFR 1194 (508 Standards), regardless of format, all Web content or communications materials produced, including text, audio or video - must conform to applicable Section 508 standards. All contractors (including subcontractors) or consultants responsible for preparing or posting content must comply with applicable Section 508 accessibility standards, and where applicable, those set forth in the referenced policy or standards documents.

The new PC-based IOCE software will:

- Make the interactive product fully comply to current Section 508 accessibility standards for electronic and information technology; and
- Standardize current Java-based development platform technology to streamline future development and increase re-usability.

Note that this re-write does not affect the mainframe version of the IOCE installed and run by Medicare's Fiscal Intermediary Shared System (FISS) on a quarterly basis. The inputs/outputs to the IOCE batch PC program will not change. It also does not affect the content of the IOCE.

Additional Information

If you have questions, please contact your Medicare MAC or FI at their toll-free number which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the Centers for Medicare & Medicaid Services (CMS) website. The official instruction (CR6709) issued to your Medicare MAC and/or FI is available at <http://www.cms.hhs.gov/Transmittals/downloads/R628OTN.pdf> on the CMS website. CMS also has a web-based training module on the OCE. The module is available at http://cms.meridianksi.com/kc/main/kc_frame.asp?kc_ident=kc0001&loc=1 on the Internet.

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