CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-06 Medicare Financial Management	Centers for Medicare & Medicaid Services (CMS)
Transmittal 163	**Date: December 4, 2009**
	Change Request 6613

Transmittal 159, dated October 9, 2009, is being rescinded and replaced by Transmittal 163, dated December 4, 2009. On Exhibit 1, specialty codes 74 and 75 were erroneously deleted. Text for codes 74 and 75 have been added and 73 has been changed from PHY/SUP to SUP. All other information remains the same.

SUBJECT: Add Physician Specialty Code 27 (Geriatric Psychiatry) to CROWD Form F (Participating Physicians/Supplier Report)

I. SUMMARY OF CHANGES: This Change Request updates the Physician Specialty Code Table to include Specialty Code 27 (Geriatric Psychiatry)

NEW / REVISED MATERIAL
EFFECTIVE DATE: *April 1, 2010
IMPLEMENTATION DATE: April 5, 2010

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)
R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

R/N/D	Chapter / Section / Subsection / Title
R	6/390.1/Purpose and Scope
R	6/400.3/Specialty Codes
R	6/420/Exhibits

III. FUNDING:
SECTION A: For Fiscal Intermediaries and Carriers:
No additional funding will be provided by CMS; Contractor activities are to be carried out within their operating budgets.

SECTION B: For Medicare Administrative Contractors (MACs):
The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically

authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

Business Requirements
Manual Instruction

**Unless otherwise specified, the effective date is the date of service.*

Attachment - Business Requirements

Pub. 100-06	Transmittal: 163	Date: December 4, 2009	Change Request: 6613

Transmittal 159, dated October 9, 2009, is being rescinded and replaced by Transmittal 163, dated December 4, 2009. On Exhibit 1, specialty codes 74 and 75 were erroneously deleted. Text for codes 74 and 75 have been added and 73 has been changed from PHY/SUP to SUP. All other information remains the same.

SUBJECT: Add Physician Specialty Code 27 (Geriatric Psychiatry) to CROWD Form F (Participating Physician/Supplier Report)

EFFECTIVE DATE: April 1, 2010

IMPLEMENTATION DATE: April 5, 2010

I. GENERAL INFORMATION

A. Background:

Contractors (Carriers and Part B A/B MACs), annually report by Specialty Code, via CROWD Form F, the number of participating and non-participating physicians, non-physician practitioners, and suppliers. Specialty Code 27 (Geriatric Psychiatry) is being added to Chapter 6, Section 400.3 - Specialty Codes and Section 420 - Exhibits.

B. Policy:

This Change Request is a response to Provider Enrollment's CR 6533 which adds this Specialty Code to CMS 855I, under which physicians self-designate their Medicare physician specialty. As noted in Background, CROWD has to be updated to include this additional Specialty Code.

II. BUSINESS REQUIREMENTS TABLE

Use"Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A/B MAC	DME MAC	FI	CARRIER	RHHI	Shared-System Maintainers				OTHER
							FISS	MCS	VMS	CWF	
6613.1	Contractors shall add Specialty Code 27 (Geriatric Psychiatry) to their annual CROWD Form F submission in accordance with Chapter 6, Sections 400.3 and 420.	X			X						CROWD

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A/B MAC	DME MAC	FI	CARRIER	RHHI	Shared-System Maintainers				OTHER
							FISS	MCS	VMS	CWF	
	None										

IV. SUPPORTING INFORMATION

Section A: For any recommendations and supporting information associated with listed requirements, use the box below:

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X-Ref Requirement Number	Recommendations or other supporting information:

Section B: For all other recommendations and supporting information, use this space:

V. CONTACTS

Pre-Implementation Contact(s): Ken Frank @ 410.786.5659 (kenneth.frank@cms.hhs.gov)

Post-Implementation Contact(s): Ken Frank @ 410.786.5659 (kenneth.frank@cms.hhs.gov)

VI. FUNDING

Section A: For *Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs),* and/or *Carriers*:

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

Section B: *For Medicare Administrative Contractors (MACs)*:

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically

authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

390.1 - Purpose and Scope

(Rev. 163, Issued: 12-04-09; Effective: 04-01-10, Implementation: 04-05-10)

This report enables CMS to gather data for administrative purposes on the number of Physicians, Non-Physician Practitioners and Suppliers, by Specialty Code, electing to participate in CMS' Participating Physician/Supplier Program.

400.3 – Specialty Codes

(Rev. 163, Issued: 12-04-09; Effective: 04-01-10, Implementation: 04-05-10)

For the list of Physician, Non-Physician Practitioner and Supplier Specialty Codes, see Pub. 100-04, Medicare Claims Processing Manual, Chapter 26, Sections 10.8.2 and 10.8.3.

The contractor counts individual participants by specialty. It does not count an individual more than once, even if the individual practices in more than one setting.

Note: Refer to the pre-April 2010 version for DMERC activity (Calendar Years 1993-2007)

420 – Exhibits

(Rev. 163, Issued: 12-04-09; Effective: 04-01-10, Implementation: 04-05-10)

Exhibit 1 - Participating Physician/Supplier Report - Screen 1

PARTICIPATING PHYSICIAN/SUPPLIER REPORT
SPECIALTY CODES

01 General Practice
02 General Surgery
03 Allergy/Immunology
04 Otolaryngology
05 Anesthesiology
06 Cardiology
07 Dermatology
08 Family Practice
09 Interventional Pain Management
10 Gastroenterology
11 Internal Medicine

	Participants			Non-Participants		Par Drop-Out Current (6)	Non-Par Sign-Up Current (7)	Par Disenrolls (8)
SPECIALTY CODE/GROUP	Prior (1)	Current (2)	*Contin.* (3)	Prior (4)	Current (5)			
01-PHY								
02-PHY								
03-PHY								
04-PHY								
05-PHY								
06-PHY								
07-PHY								
08-PHY								
09-PHY								
10-PHY								
11-PHY								

Exhibit 1 - Participating Physician/Supplier Report - Screen 2

PARTICIPATING PHYSICIAN/SUPPLIER REPORT SPECIALTY CODES

12 Osteopathic Therapy
13 Neurology
14 Neurosurgery
15 Speech Language Pathologist
16 Obstetrics/Gynecology
17 Hospice and Palliative Care
18 Ophthalmology
19 Oral Surgery
20 Orthopedic Surgery
21 Reserved
22 Pathology
23 Reserved
24 Plastic *and Reconstructive* Surgery

SPECIALTY CODE/GROUP	Participants			Non-Participants		Par Drop-Out Current (6)	Non-Par Sign-Up Current (7)	Par Disenrolls (8)
	Prior (1)	Current (2)	*Contin.* (3)	Prior (4)	Current (5)			
12-PHY								
13-PHY								
14-PHY								
15-NPP								
16-PHY								
17-PHY								
18-PHY								
19-PHY								
20-PHY								
21-RES								
22-PHY								
23-RES								
24-PHY								

Exhibit 1 - Participating Physician/Supplier Report - Screen 3

PARTICIPATING PHYSICIAN/SUPPLIER REPORT SPECIALTY CODES

25 *Physical Medicine and Rehabilitation*
26 Psychiatry
27 *Geriatric Psychiatry*
28 Colorectal Surgery (formerly Proctology)
29 Pulmonary Disease
30 Diagnostic Radiology
31 Reserved
32 Anesthesiologist Assistant
33 Thoracic Surgery
34 Urology
35 Chiropractic
36 Nuclear Medicine
37 Pediatric Medicine

SPECIALTY CODE/GROUP	Participants			Non-Participants		Par Drop-Out Current (6)	Non-Par Sign-Up Current (7)	Par Disenrolls (8)
	Prior (1)	Current (2)	*Contin.* (3)	Prior (4)	Current (5)			
25-PHY								
26-PHY								
27-*PHY*								
28-PHY								
29-PHY								
30-PHY								
31-RES								
32-NPP								
33-PHY								
34-PHY								
35-PHY								
36-PHY								
37-PHY								

Exhibit 1 - Participating Physician/Supplier Report - Screen 4

PARTICIPATING PHYSICIAN/SUPPLIER REPORT
SPECIALTY CODES

38 Geriatric Medicine
39 Nephrology
40 Hand Surgery
41 Optometry
42 Certified Nurse Midwife
43 Certified Registered Nurse Anesthetist (CRNA)
44 Infectious Disease
45 Mammography Screening Center
46 Endocrinology
47 Independent Diagnostic Testing Facility (DTL)
48 Podiatry
49 Ambulatory Surgical Center
50 Nurse Practitioner

SPECIALTY CODE/GROUP	Participants			Non-Participants		Par Drop-Out Current (6)	Non-Par Sign-Up Current (7)	Par Disenrolls (8)
	Prior (1)	Current (2)	*Contin.* (3)	Prior (4)	Current (5)			
38-PHY								
39-PHY								
40-PHY								
41-PHY								
42-NPP								
43-NPP								
44-PHY								
45-SUP								
46-PHY								
47-SUP								
48-PHY								
49-SUP								
50-NPP								

Exhibit 1 - Participating Physician/Supplier Report - Screen 5

PARTICIPATING PHYSICIAN/SUPPLIER REPORT
SPECIALTY CODES

59 Ambulance Service Supplier
60 Public Health/Welfare Agency
61 Volunteer Health/Charitable Agency
62 Clinical Psychologist (Ind.)
63 Portable X-Ray Supplier
64 Audiologist (Ind.)
65 Physical Therapist (Ind.)
66 Rheumatology
67 Occupational Therapist (Ind.)
68 Clinical Psychologist
69 Clinical Laboratory (Ind.)
70 *Single or Multi-Specialty Clinic or Group Practice*
71 Registered Dietitian/Nutrition Professional

SPECIALTY CODE/GROUP	Participants			Non-Participants		Par Drop-Out Current (6)	Non-Par Sign-Up Current (7)	Par Disenrolls (8)
	Prior (1)	Current (2)	*Contin.* (3)	Prior (4)	Current (5)			
59-SUP								
60-SUP								
61-SUP								
62-NPP								
63-SUP								
64-NPP								
65-NPP								
66-PHY								
67-NPP								
68-NPP								
69-SUP								
70-PHY								
71-NPP								

Exhibit 1 - Participating Physician/Supplier Report - Screen 6

PARTICIPATING PHYSICIAN/SUPPLIER REPORT
SPECIALTY CODES

72 Pain Management
73 Mass Immunization Roster Biller
74 Radiation Therapy Centers
75 Slide Preparation Facilities
76 Peripheral Vascular Disease
77 Vascular Surgery
78 Cardiac Surgery
79 Addiction Medicine
80 Licensed Clinical Social Worker
81 Critical Care (Intensivist)
82 Hematology
83 Hematology/Oncology
84 Preventative Medicine

SPECIALTY CODE/GROUP	Participants			Non-Participants		Par Drop-Out Current (6)	Non-Par Sign-Up Current (7)	Par Disenrolls (8)
	Prior (1)	Current (2)	*Contin.* (3)	Prior (4)	Current (5)			
72-PHY								
73-*SUP*								
74-*SUP*								
75-*SUP*								
76-PHY								
77-PHY								
78-PHY								
79-PHY								
80-NPP								
81-PHY								
82-PHY								
83-PHY								
84-PHY								

Exhibit 1 - Participating Physician/Supplier Report - Screen 7

PARTICIPATING PHYSICIAN/SUPPLIER REPORT
SPECIALTY CODES

85 Maxillofacial Surgery
86 Neuropsychiatry
88 Unknown Supplier/Provider
89 Certified Clinical Nurse Specialist
90 Medical Oncology
91 Surgical Oncology
92 Radiation Oncology
93 Emergency Medicine
94 Interventional Radiology
95 Reserved
97 Physician Assistant
98 Gynecological Oncology
99 Unknown Physician Specialty

SPECIALTY CODE/GROUP	Participants			Non-Participants		Par Drop-Out Current (6)	Non-Par Sign-Up Current (7)	Par Disenrolls (8)
	Prior (1)	Current (2)	*Contin.* (3)	Prior (4)	Current (5)			
85-PHY								
86-PHY								
88-SUP								
89-NPP								
90-PHY								
91-PHY								
92-PHY								
93-PHY								
94-PHY								
95-*RES*								
97-NPP								
98-PHY								
99-PHY								

Exhibit 1 - Participating Physician/Supplier Report - Screen 8

PARTICIPATING PHYSICIAN/SUPPLIER REPORT
SPECIALTY CODES

Total Physicians *- The contractor enters in the appropriate column the total of all specialty codes applicable to physicians.*

Total NPPs *- The contractor enters in the appropriate column the total of all specialty codes applicable to NPPs.*

Total Physicians/NPPs *- The contractor enters in the appropriate column the sum of all physicians and NPPs.*

Total Suppliers *- The contractor enters in the appropriate column the total of all specialty codes applicable to suppliers.*

SPECIALTY CODE/GROUP	Participants			Non-Participants		Par Drop-Out Current (6)	Non-Par Sign-Up Current (7)	Par Disenrolls (8)
	Prior (1)	Current (2)	*Contin.* (3)	Prior (4)	Current (5)			
TOTALs								
PHYs*								
NPPs*								
PHYs/NPPs*								
SUPs*								

* These lines do not represent specific specialty codes. They are the totals of the specialty sub-groups.