



Related MLN Matters Article #: MM5391

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Revisions to Incomplete or Invalid Claims Instructions Necessary to Implement the Revised Health Insurance Claim Form CMS-1500 (Version 08-05)

Key Words

MM5391, CR5391, R1187CP, CMS-1500

Provider Types Affected

Physicians and suppliers submitting claims to Medicare carriers, Durable Medical Equipment Regional Carriers (DMERCs), DME Medicare Administrative Contractors (DME MACs), and Part A/B Medicare Administrative Contractors (A/B MACs) for services provided to Medicare beneficiaries

Key Points

Important Note: Medicare fee-for-service has instituted a contingency plan for National Provider Identifier (NPI) implementation that delays the requirement for the NPI beyond May 23, 2007. For details regarding this delay, please see MLN Matters article MM5595 at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5595.pdf> on the CMS website.

- The effective date of the instruction is May 23, 2007.
- The implementation date is May 23, 2007.
- The Centers for Medicare & Medicaid Services Form 1500 (CMS-1500; Health Insurance Claim Form) has been revised to accommodate additional items for the reporting of the NPI.
- The revised form is designated as Form CMS-1500 (08-05).
- As a result of the revisions included to Form CMS-1500 (08-05), the incomplete and invalid claims instructions are being updated to reflect the appropriate items in which the NPI will be reported.
- Change Request (CR) 5391 instructs Medicare contractors:
 - To make all necessary changes to their internal business processes to enable the return of claims as unprocessable that do not report an NPI when required in a provider name segment or another provider identification segment in an electronic claim or a CMS-1500 (08-05) paper claim. (See the *Medicare Claims Processing Manual* (Pub. 100-04), Chapter 1, Sections 80.3.2.1.1 through 80.3.2.1.3, included as an attachment to CR5391, and the *Health Care Claim Professional 837 Implementation Guide* (<http://www.wpc-edi.com>) for further information) and

- To use the appropriate remittance advice remark codes provided in the *Medicare Claims Processing Manual* (Pub. 100-04), Chapter 1, Sections 80.3.2.1.1 through 80.3.2.1.3, when returning claims as unprocessable.
- CR5391 also instructs Medicare contractors not to search their internal files:
 - To correct a missing or inaccurate NPI on a Form CMS-1500(08-05) or on an electronic claim and
 - To correct missing or inaccurate information required for Health Insurance Portability and Accountability Act (HIPAA) compliance for claims governed by HIPAA.
- The manual revisions also include items that have already been implemented through the Competitive Acquisition Program (CAP) for Part B Drugs and Biologicals through the following CRs:
 - CR4064 at <http://www.cms.hhs.gov/Transmittals/Downloads/R777CP.pdf>, and MLN Matters article MM4064 at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM4064.pdf>,
 - CR4306 at <http://www.cms.hhs.gov/transmittals/downloads/R841CP.pdf>,
 - CR4309 at <http://www.cms.hhs.gov/transmittals/downloads/R866CP.pdf>, and MLN Matters article MM4309 at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM4309.pdf>,
 - CR5079 at <http://www.cms.hhs.gov/transmittals/downloads/R1055CP.pdf>, and
 - CR5259 at <http://www.cms.hhs.gov/transmittals/downloads/R1034CP.pdf> on the CMS website.

Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5391.pdf> on the CMS website.

The official instruction (CR5391) regarding this change may be viewed at

<http://www.cms.hhs.gov/Transmittals/downloads/R1187CP.pdf> on the CMS website.

If providers have questions regarding this issue, they may contact their Medicare carrier, A/B MAC, DMERC, or DME MAC at their toll-free number, which may be found at

<http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.