



Related MLN Matters Article #: MM5489

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Revisions to Form CMS-1500 Submission Requirements

Key Words

MM5489, CR5489, R1215CP, CMS-1500

Provider Types Affected

Physicians, non-physician practitioners, and suppliers who bill Medicare Part A/B Medicare Administrative Contractors (A/B MACs), carriers, Durable Medical Equipment Regional Contractors (DMERCs) and DME Medicare Administrative Contractors (DME MACs) for their services using the Form CMS-1500

Key Points

- The effective date of the instruction is April 1, 2007.
- The implementation date is April 30, 2007.
- The CMS-1500 is the basic form prescribed by the Centers for Medicare & Medicaid Services (CMS) for the Medicare and Medicaid programs for claims from physicians and suppliers.
- The language contained in the *Medicare Claims Processing Manual*, Chapter 26, regarding the CMS-1500 is being updated to reflect current processing guidelines and incorporate recent data collection decisions made by CMS.
- Change Request (CR) 5489 makes the following updates to the CMS-1500 requirements:
 - The requirement to submit the provider's Social Security Number in Box 25 has been removed;
 - The requirement to report the Provider Identification Number of the Skilled Nursing Facility in Box 23 has been removed; and
 - Clarification language was added to Box 17a, indicating the qualifier 1G precedes the Unique Physician Identification Number.
- In addition, language has been added regarding the completion of Item 25 (the provider of service or supplier federal tax identification number).
- Medicare providers are not required to complete this item for crossover claim purposes, since the Medicare contractor will retrieve the tax identification information from their internal provider file for inclusion on the Coordination of Benefits outbound claim.

- However, tax identification information is used in the determination of accurate National Provider Identification (NPI) reimbursement. **Therefore, reimbursement of claims submitted without tax identification information may be delayed.**

Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5489.pdf> on the CMS website.

The official instruction (CR5489) regarding this change may be viewed at

<http://www.cms.gov/Transmittals/downloads/R1215CP.pdf> on the CMS website. The revised Chapter 26, Section 10.4, of the *Medicare Claims Processing Manual* is attached to CR5489.

If providers have questions regarding this issue, they may contact their contractor at their toll-free number, which may be found at

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