



Related MLN Matters Article #: MM5568 **Revised**

Date Posted: March 21, 2007

Related CR #: 5568

Extension for Acceptance of Form CMS-1500 (12-90)

Key Words

MM5568, CR5568, MM5616, CR5616, R1208CP, Extension, CMS-1500

Provider Types Affected

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

Key Points

Note: MLN Matters article MM5568 was revised on June 12, 2008, to add a reference to MLN Matters article MM5616 (<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5616.pdf>). MM5616 changed the date for the implementation of the Form CMS-1500, version (08-05). MM5616 announced that beginning July 2, 2007, providers must use the Form CMS-1500 (08-05) for paper claims submission to Medicare. Claims received on or after July 2, 2007, using Form CMS-1500 (12-90), will be rejected.

- The effective date of the instruction is April 1, 2007.
- The implementation date is April 2, 2007.
- Form CMS-1500 is one of the basic forms prescribed by the Centers for Medicare & Medicaid Services (CMS) for the Medicare program. It is only accepted from physicians and suppliers that are excluded from the mandatory electronic claims submission requirements set forth in the Administrative Simplification Compliance Act, Public Law 107-105, and the implementing regulation at 42 Code of Federal Regulations § 424.32.
- Form CMS-1500 (12-90) was revised in July of 2006 to accommodate the reporting of the National Provider Identifier (NPI). **Recently it came to the attention of CMS that there are incorrectly formatted versions of the revised form being sold by print vendors.**
- CMS determined that the source files received from the authorized forms designer were improperly formatted. This resulted in the sale of printed forms and negatives, which do not comply with the form specifications.

- CMS has decided to extend the acceptance period of the CMS-1500 (12-90) version beyond the original April 1, 2007, deadline while this situation is resolved.
- The specific formatting issue involves top and bottom margins only, but may not be isolated to only top and/or bottom.
- Change Request (CR) 5568 states that the Form CMS-1500 (12-90) will continue to be accepted until CMS instructs otherwise.
- All CMS-1500 (08-05) forms received by Medicare contractors that are incorrectly formatted will be returned to the provider or supplier if the Medicare contractor is unable to scan the form with its Optical Character Reader scanning equipment. An incorrectly formatted form is one that is ¼" or more off in the top, bottom, right, and/or left margins.
- The best way to identify the incorrect forms is by looking at the upper right hand corner of the form. If the tip of the red arrow above the vertically stacked word "CARRIER" is touching or close to touching the top edge of the form, then the form is not printed to specifications. There should be approximately ¼" between the tip of the arrow and the top edge of the paper on properly formatted forms.
- Since the CMS-1500 (12-90) cannot accommodate the NPI, providers submitting the CMS-1500 (12-90) are only required to submit their legacy provider number on that form.

Note: This issue involves the paper claim form only, not the electronic claim format, which can accommodate the NPI. In addition, this situation does not affect the current NPI implementation date of May 23, 2007. (See Important Note below.)

Important Links

Important Note: Medicare fee-for-service has instituted a contingency plan for the 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 related MLN Matters article can be found at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5568.pdf> on the CMS website.

The official instruction (CR5568) may be viewed at <http://www.cms.hhs.gov/Transmittals/downloads/R1208CP.pdf> on the CMS website.