



Related MLN Matters Article #: MM5647

Date Posted: August 1, 2007

Related CR #: 5647

Capturing Days on Which Medicare Beneficiaries are Entitled to Medicare Advantage (MA) in the Medicare/Supplemental Security Income (SSI) Fraction

Key Words

MM5647, CR5647, R1311CP, MA, SSI

Provider Types Affected

Hospitals billing either a Part A/B Medicare Administrative Contractor (A/B MAC) or Fiscal Intermediary (FI) for services provided to Medicare beneficiaries enrolled in a Medicare Advantage plan

Key Points

- The effective date of the instruction is October 1, 2006.
- The implementation date is January 7, 2008.
- Change Request (CR) 5647 states that part of the calculation used to determine if a hospital is eligible for Medicare Disproportionate Share (DSH) payments is based on the percentage of Medicare days that the beneficiary was entitled to Medicare Part A and received SSI payments from the Social Security Administration (SSA).
- The SSA provides the SSI information to the Centers for Medicare & Medicaid Services (CMS). CMS then pulls all of the Medicare days for each eligible hospital and determines the percentage of days that the Medicare beneficiaries were simultaneously eligible for SSI and Medicare.
- **The Medicare beneficiary days should include MA days in addition to Medicare fee-for-service Part A days.**
- In the past, hospitals were required to submit this information for MA beneficiaries (through 1998) by submitting a no-pay bill.
- Later, managed care organizations (MCOs) (now MA companies) were responsible for submitting this information (through 2001) as part of encounter data submissions to CMS.
- Since MCOs are no longer required to submit encounter data, hospitals must submit data on their MA days, so that these days may be considered in the Medicare fraction of the DSH calculation.

- The inpatient prospective payment system (IPPS) regulations on DSH are located in 42 Code of Federal Regulations 412.106.
- The inpatient rehabilitation facility (IRF) PPS regulations on the low-income patient are located in 42 CFR 412.624(e)(2).

Key Points of CR5647

- Hospitals may go back and submit claims with discharge dates on or after October 1, 2006 (FY 2007), so that SSI data for FY 2007 and beyond will include MA patient days.
- Hospitals should bill claims on a no-pay type of bill (TOB) 11X with Condition Code 04 and all other applicable claim information because patients who are enrolled in MA (administered through Medicare Part C) should also be included in the Medicare fraction.
- These days will be included in the Medicare/SSI fraction. This will ensure that these days are included in the IRF's SSI ratio for FY 2007 and beyond.
- Teaching hospitals are already submitting their claims with Condition Codes 04 and 69 in order to be reimbursed for their Indirect Medical Education payment. They will continue to submit their bills with Condition Codes 04 and 69.
- To ensure that hospitals' MA days are included in the FY 2007 Medicare/SSI file (due in the summer of 2008), hospitals should try to submit their FY 2007 claims to their Medicare contractor between the implementation date (January 7, 2008) of CR5647 through March 2008.
- The SSI/Medicare Beneficiary Data for IPPS hospitals is located at http://www.cms.hhs.gov/AcuteInpatientPPS/05_dsh.asp#TopOfPage on the CMS website.

Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5647.pdf> on the CMS website.

The official instruction (CR5647) regarding this change may be viewed at

<http://www.cms.hhs.gov/Transmittals/downloads/R1311CP.pdf> on the CMS website.

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

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