



Related MLN Matters Article #: MM5815

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New Chapter in Medicare Claims Processing Manual for Independent Diagnostic Testing Facilities (IDTF)

Key Words

MM5815, CR5815, R1504CP, Diagnostic, Testing, IDTF, Transtelephonic

Provider Types Affected

IDTFs submitting claims to Part A/B Medicare Administrative Contractors, Fiscal Intermediaries, or carriers for services provided to Medicare beneficiaries

Key Points

- The effective date of the instruction is June 16, 2008.
- The implementation date is June 16, 2008.
- Information from the *Medicare Program Integrity Manual*, Chapter 10, regarding claims processing instructions for IDTFs, has been excerpted and added to the *Medicare Claims Processing Manual* as a new chapter, Chapter 35.
- The new Chapter 35 is available as an attachment to the official instruction of Change Request (CR) 5815 and contains information on the following:
 - General coverage and payment policies applicable to IDTFs;
 - Medicare's definition of an IDTF;
 - Claims processing instructions with emphasis on:
 - Billing issues;
 - Transtelephonic and electronic monitoring services; and
 - Slide preparation facilities and radiation therapy centers.
 - Ordering of tests;
 - Purchased diagnostic tests;
 - Interpretations of tests performed off the premises of the IDTF; and
 - Restrictions that do not allow billing for strictly therapeutic procedures.

- No changes in policy are conveyed in CR5815.

Note: IDTFs are reminded that the National Provider Identifier of the ordering physician must be supplied in box 17B of the CMS-1500 form and in the appropriate loop of the ANSI X12 837P electronic claim format, effective for services on or after May 23, 2008.

Important Links

The related MLN Matters article can be found at

<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5815.pdf> on the CMS website.

The official instruction (CR5815) regarding this change may be viewed at

<http://www.cms.hhs.gov/Transmittals/downloads/R1504CP.pdf> on the CMS website.