



Emergency Update to the 2010 Medicare Physician Fee Schedule Database (MPFSDB) – JA6796

MLN Matters® article MM6796 was revised to reflect a new Change Request (CR) 6796 that was released on January 6, 2010. The transmittal number, CR Release Date and Web address for accessing CR 6796 have been changed.

Note: The files associated with CR6796 include a legislative change to the calendar year (CY) 2010 conversion factor update and changes as a result of technical corrections to the malpractice relative value units. The conversion factor for CY 2010 is \$36.0846.

Related CR Release Date: January 6, 2010 **Revised**

Date Job Aid Revised: January 12, 2010

Effective Date: January 1, 2010

Implementation Date: January 4, 2010

Key Words MM6796, CR6796, R1887CP, MPFSDB

Contractors Affected

- Medicare Carriers
- Fiscal Intermediaries (FIs)
- Part A/B Medicare Administrative Contractors (A/B MACs)

Provider Types Affected

Physicians and providers submitting claims to Medicare Carriers, FIs, and/or A/B MACs for professional services provided to Medicare beneficiaries that are paid under the MPFS



CR6796 amends the payment files that were previously issued to Medicare contractors.

- Corrections, effective for dates of service on or after January 1, 2010, to the payment files are in the table that follows.

CPT /HCPCS	Action
0575F	Procedure Status: M
20550	Bilateral Indicator: 1
4270F	Procedure Status: M
4280F	Procedure Status: M
50543	Bilateral Indicator: 1
50548	Bilateral Indicator: 1
80100	Procedure Status: X
A4641	Procedure Status: C
A4642	Procedure Status: C
A9698	Procedure Status: X
S2118	Procedure Status: I
S2270	Procedure Status: I
S3628	Procedure Status: I
S3711	Procedure Status: I
S3860	Procedure Status: I
S3861	Procedure Status: I
S3862	Procedure Status: I
S9433	Procedure Status: I

Provider Needs to Know...

- In addition, the relative value units (RVUs) of a number of Current Procedural Terminology (CPT)/ Healthcare Common Procedure Coding System (HCPCS) (19340, 42145, 64490, 64491, 64492, 64493, 64494, 64495, 77785, 77785-TC, 77786, 77786-TC, 77787, 77787-TC, 93740, and 93770) were changed.
- To view the specific RVU changes for these codes, see Attachment 1 of CR6796 at <http://www.cms.hhs.gov/Transmittals/downloads/R1887CP.pdf> on the CMS website.

Background

- The Social Security Act authorizes the Centers for Medicare & Medicaid Services (CMS) to establish ancillary policies necessary to implement relative values for physicians' services.
- Previously, payment files were issued to Medicare contractors based on the 2010 MPFS Final Rule.

Operational Impact

N/A

Reference
Materials

The related MLN Matters® article can be found at
<http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6796.pdf> on the CMS
website.

The official instruction (CR6796) regarding this change may be viewed at
<http://www.cms.hhs.gov/Transmittals/downloads/R1887CP.pdf> on the CMS website.
