



Requirements for Hospital Attestation and Billing of Fiscal Years (FY) 2007 and 2008 Informational Only Inpatient Claims for Medicare Advantage (MA) Beneficiaries – JA6821

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Implementation Date: June 7, 2010

Key Words	MM6821, CR6821, R696OTN, Hospital, Attestation, Billing, Inpatient
Contractors Affected	<ul style="list-style-type: none"> • Fiscal Intermediaries (FIs) • Part A/B Medicare Administrative Contractors (A/B MACs)
Provider Types Affected	Provider types affected are hospitals submitting claims to FIs and/or A/B MACs for services provided to MA beneficiaries.



- The Centers for Medicare & Medicaid Services (CMS) is requiring certain non-teaching hospitals subject to the Inpatient Prospective Payment System (IPPS), as well as facilities subject to the Inpatient Rehabilitation Facility PPS (IRF PPS) and the Long Term Care Hospital PPS (LTCH PPS) to submit informational only bills for the MA beneficiaries they treat by August 31, 2010.
- Hospitals will also be required to submit an attestation to their Medicare contractor that they have either submitted all of their MA claims for FY 2007 and/or FY 2008, or they have no MA claims for FY 2007 and/or FY 2008.
- Failure to furnish this information could result in CMS issuance of a zero-percent Supplemental Security Income (SSI) ratio to calculate disproportionate share (DSH) payments or other action that may affect payments.

Provider Needs to Know...	<ul style="list-style-type: none"> • In reviewing the data used to compute the FY 2007 SSI ratios, CMS determined that many hospitals have not reported any MA days. • Therefore, effective with CR6821, all applicable IPPS, IRF PPS and LTC hospitals will be given one final opportunity to submit FY 2007 informational only claims.
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- In addition, each applicable hospital must attest to their Medicare contractor that:
 - It has submitted all of its MA claims for FY 2007; or
 - It has no MA claims for FY 2007.
- CMS will recalculate and repost the FY 2007 SSI ratios once the informational-only claims have been processed.
- Although the FY 2008 SSI ratios have not yet been published, CMS believes that a significant number of hospitals have not submitted informational only MA claims to be included in their FY 2008 SSI ratios. Therefore, effective with CR6821, applicable IPPS, IRF PPS and LTC PPS hospitals will be given a final opportunity to submit FY 2008 MA informational only claims. In addition, each applicable hospital will attest to its Medicare contractors that:
 - It has submitted all of its MA claims for FY 2008 or
 - It has no MA claims for FY 2008.
- CMS will calculate and post the FY 2008 SSI ratios once the informational-only claims are processed.

Medicare Providers

- If a Medicare provider believes that it has already submitted all of its MA claims, or it does not have any MA claims for FY 2007 based on the currently posted FY 2007 SSI ratios, the provider must submit an attestation that states:
 - That it has submitted all of its MA claims for FY 2007; or
 - That it does not have any MA claims for FY 2007.
- A Medicare provider will be in non-compliance with the instructions in CR6821, if it does not submit all of its:
 - Informational only MA claims for FY 2007 and FY 2008; and
 - Attestations that all of its MA claims for FY 2007 and FY 2008 have been submitted or that it does not have any MA claims for these years.
- The MA claims must be submitted on or before August 31, 2010, and the attestations must be received by the Medicare contractor on or before September 15, 2010.

Applicable IPPS Hospitals

- CR6821 applies to “non-teaching” IPPS hospitals that include an operating and/or capital DSH payment amount on their 2007 or 2008 Medicare hospital cost report.
 - **For purposes of CR6821 only**, “non-teaching IPPS hospitals” are defined as hospitals that do not train residents in approved medical residency training programs or that do not operate nursing and allied health (N&AH) education programs. Therefore, they do not qualify to receive Indirect Medical Education (IME) payments, Direct Graduate Medical Education (DGME) payments, or N&AH payments.
 - Non-teaching hospitals that do not include an operating and/or capital DSH payment amount on their Medicare hospital cost report are exempt from the instructions in
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CR6821 unless such hospital believes it would qualify for such a payment by submitting MA claims.

- A non-teaching hospital that has not previously included an operating and/or capital DSH payment amount on its cost report should notify its Medicare contractor if it believes it would qualify for such payment amount for FY 2007 and/or FY 2008 and should submit all of its MA claims and an attestation that it has submitted all of its MA claims.

Applicable IRFs

- CR6821 applies to IRFs that have not submitted any MA claims in accordance with CR2476 for the purpose of receiving DGME or N&AH payments.
- IRFs that do not claim low income patients (LIPs) on their Medicare cost report are exempt from the instructions in CR6821 unless the provider believes it would qualify for such a payment by submitting MA claims.
- An IRF that has not previously included a LIP payment amount on its cost report should notify its Medicare contractor if it believes it would qualify for such a payment amount for FY 2007 and/or FY 2008 and should submit all of its MA claims and an attestation that it has submitted all of its MA claims.

Applicable LTC Hospitals

- CR6821 applies to LTC hospitals that have not submitted any MA claims in accordance with CR2476 for the purpose of receiving DGME or N&AH payments.

FY 2007 SSI Ratios

- The FY 2007 SSI ratios are currently posted on the CMS website.
- The IPPS SSI ratios are located at http://www.cms.gov/AcutelnpatientPPS/05_dsh.asp#TopOfPage on the CMS website.
- The IRF SSI ratios are located at http://www.cms.gov/InpatientRehabFacPPS/05_SSIData.asp#TopOfPage on the CMS website.
- The LTCH SSI ratios are located at http://www.cms.gov/LongTermCareHospitalPPS/08_download.asp#TopOfPage on the CMS website.

Billing

- Applicable non-teaching IPPS hospitals, IRFs and LTC hospitals have until August 31, 2010, to submit FY 2007 and FY 2008 MA informational only claims (111 Bill Type with Condition Code 04). Medicare contractors have been instructed to override timely filing for claims submitted in accordance with CR6821.
 - Hospitals are reminded that this requirement applies to claims for discharges during FY 2007 and FY 2008, and that Condition Code 04 should be used on claims for beneficiaries they treat who are in Risk MA plans. (The Health Maintenance
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Organization option code indicator can be seen on the HIQA or ELGA screen as A, B, or C.)

Attestation

- Applicable non-teaching IPPS hospitals, IRFs and LTC hospitals should submit an attestation to their Medicare contractor attesting that they have submitted all of their MA claims for FYs 2007 and 2008. The attestation is included as an attachment to CR6821 and should be:
 - Printed on hospital letterhead and signed by a Senior Hospital Officer or Administrator; and
 - Received by the Medicare contractor no later than September 15, 2010.

Background

- For all hospitals subject to the IPPS, IRF PPS, and LTCH PPS, CR5647 (Transmittal 1311 dated July 20, 2007; see the related MLN Matters® article at <http://www.cms.gov/MLN MattersArticles/Downloads/MM5647.pdf> on the CMS website) required the submission of informational only MA claims.
- The inpatient days are needed for the SSI ratio for FYs 2007 and beyond to accurately determine Medicare DSH payments for IPPS hospitals and LIP payments for IRF PPS hospitals.
- CMS published the FY 2007 SSI ratios on the CMS website on June 24, 2009. These ratios are currently being used in the claims processing system for interim IPPS DSH payments, interim IRF PPS LIP payments, and LTCH PPS short-stay outlier payments. In addition, this data is used for other purposes such as evaluating the greater than 25-day average length-of-stay requirement of Medicare patients for LTC hospitals.

Operational Impact N/A

Reference Materials

The related MLN Matters® article can be found at <http://www.cms.gov/MLN MattersArticles/downloads/MM6821.pdf> on the CMS website.

The official instruction (CR6821) issued regarding this change may be found at <http://www.cms.gov/Transmittals/downloads/R696OTN.pdf> on the CMS website