

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Medicare & Medicaid Services



News Flash – CMS Distributes Free Hand in Hand Toolkit to Every Nursing Home in the Nation - Nursing Homes, CMS Regional Offices, and State Survey Agencies will receive a *free* toolkit from CMS by January 31, 2013. Hand in Hand is a high quality training series for nursing homes that emphasizes person-centered care for persons with dementia, as well as the prevention of abuse. These toolkits are being mailed *free* to every nursing home in the country by IPC Systems, a CMS contractor. While annual training for nurse aides on dementia care and abuse prevention is required in current nursing home regulations, CMS does not require nursing homes to use the Hand in Hand training specifically. Other tools and resources are also available. More information is available on the [Hand in Hand](#) website. If you have questions or comments regarding these materials, please contact cms_training_support@icpsystems.com via email.

MLN Matters® Number: MM8089

Related Change Request (CR) #: CR 8089

Related CR Release Date: February 15, 2013

Effective Date: July 1, 2013

Related CR Transmittal #: R11920TN

Implementation Date: July 1, 2013

The Inclusion of Veterans Administration (VA) Skilled Nursing Facility (SNF) claims to the VA Medicare Remittance Advice (eMRA) Process- Implementation

Provider Types Affected

This MLN Matters® Article is intended for providers submitting Veterans Administration (VA) Skilled Nursing Facility (SNF) claims to Medicare contractors (Fiscal Intermediaries (FIs) and/or A/B Medicare Administrative Contractors (A/B MACs)) for SNF services to Medicare beneficiaries.

What You Need to Know

This article is based on Change Request (CR) 8089 which informs Medicare contractors about changes to the VA Medicare Remittance Advice (VA eMRA) process. Note that you must ensure a valid qualifying stay is present on any VA SNF claims.

Disclaimer

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Background

SNF claims were initially excluded from the VA eMRA project in 2003. VA bills professional services of physicians providing care to patients in Skilled Nursing Facilities/nursing home settings via the eMRA process; however institutional charges for Medicare-eligible patients are submitted directly to the secondary payer with a request to estimate the amount due. VA currently bills third-party payers for institutional SNF claims using a 211 bill type and submits a SNF bill with revenue code 0100 covering room and board plus ancillary charges.

Medicare requires providers to submit SNF bills with occurrence code 70, revenue code 0022 and a Health Insurance Prospective Payment System (HIPPS) code. The HIPPS rate code consists of the three-character Resource Utilization Group (RUG) code that is obtained from the "Grouper" software program followed by a 2-digit Assessment indicator that specifies the type of assessment associated with the RUG code obtained from the Grouper. CR8089 implements the technical requirements needed to include SNF claims into the VA eMRA process. The VA SNF Bill types to be included are as follows: 21X, 22X, and 23X. The default HIPPS code to be used should be AAA00. (TOB 18x is not used)

Additional Information

The official instruction, CR8089 issued to your FI and A/B MAC regarding this change may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R1192OTN.pdf> on the CMS website.

If you have any questions, please contact your FI or A/B MAC at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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