

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



MLN Matters® Number: MM9692

Related Change Request (CR) #: CR 9692

Related CR Release Date: June 23, 2016

Effective Date: January 1, 2016

Related CR Transmittal #: R1677OTN

Implementation July 5, 2016

Revised Fee Schedules for Healthcare Common Procedure Coding System (HCPCS) Code E1012 in Association with Change Request 9642

Provider Types Affected

This MLN Matters® Article is intended for providers and suppliers submitting claims to Medicare Administrative Contractors (MACs) for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) items, specifically HCPCS Code E1012, paid under the DMEPOS fee schedule.

Provider Action Needed

An error was made in the calculation of the fee schedule for code E1012. Change Request (CR) 9692 corrects that error and provides instructions regarding the revision of the Calendar Year (CY) 2016 fee schedule amounts for HCPCS Code E1012 (wheelchair accessory, addition to power seating system, center mount power elevating leg rest/platform, complete system, any type, each). Make sure your billing staffs are aware of these changes.

Key Points

The fee schedule amounts for this code have been revised in order to correct errors made in the calculation of the fee schedule for code E1012.

1. Your MAC will process claims for E1012 with dates of service on or after January 1, 2016, using the revised E1012 fee schedule amounts included in the DMEPOS fee schedule files communicated under the July Quarterly DMEPOS Fee Schedule Update CR9642.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2015 American Medical Association. All rights reserved.

2. Claims for code E1012 with dates of service or after January 1, 2016 that have already been processed will be adjusted if you bring such claims to the attention of your MAC.

Additional Information

The official instruction, CR9692, issued to your MAC regarding this change is available at <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R1677OTN.pdf> on the CMS website.

If you have any questions, please contact your MAC at their toll-free number. That number is available at <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/index.html> under - How Does It Work.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2015 American Medical Association. All rights reserved.