



Updates to the Medicare Claims Processing Manual, Chapter 24, ASCA Waiver Review Form of Letters, Exhibits A-H

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Related Change Request (CR) Number: CR 10858

Related CR Release Date: August 3, 2018

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Related CR Transmittal Number: R4102CP

Implementation Date: January 7, 2019

PROVIDER TYPE AFFECTED

This MLN Matters Article is intended for physicians, providers, and suppliers billing Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries.

PROVIDER ACTION NEEDED

Change Request (CR) 10858 provides an update to the language contained in the Form Letters the MACs use to inform certain providers of Administrative Simplification Compliance Act (ASCA) waiver reviews. The CR gives you clear directions for communicating with your MACs regarding ASCA waiver review-related questions when you receive a review Form Letter. Make sure your billing staffs are aware of these directions.

BACKGROUND

Section 3 of the ASCA, PL107-105, and the implementing regulation at 42 CFR 424.32, requires that you, on or after October 16, 2003, submit electronically (with limited exceptions); all of your initial claims for reimbursement under Medicare. You should be aware that Medicare cannot pay for claims: 1) That do not meet the limited exception criteria; and 2) Which you submit non-electronically. The issuance of waivers under this limited exception criteria to providers has been delegated to the MACs by the Centers for Medicare & Medicaid Services (CMS). Refer to <https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/downloads/mm3440.pdf> for additional information about this requirement, including a list of these exception criteria.

Based on discussions with MACs to streamline the communication process with your MACs, CMS has made minor modifications to the ASCA waiver review letters that will improve this communication. CR10858 provides these modifications; specifically, the addition of the statement: "If you have questions, please contact your MAC Customer Service."

You will find the updated Claims Processing Manual, Chapter 24 (General EDI and EDI Support Requirements, Electronic Claims, and Mandatory Electronic Filing of Medicare Claims), as an

attachment to CR10858. It documents the changes mentioned above for the waiver review Exhibits of Form Letters (A-H).

ADDITIONAL INFORMATION

The official instruction, CR10858, issued to your MAC regarding this change is available at <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2018Downloads/R4102cp.pdf>.

If you have questions, your MACs may have more information. Find their website at <http://go.cms.gov/MAC-website-list>.

DOCUMENT HISTORY

Date of Change	Description
August 3, 2018	Initial article released.

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