

Related Change Request (CR) #: 3095

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Effective Date: July 1, 2004

Implementation Date: July 6, 2004

Additional Guidelines for Implementing the National Council for Prescription Drug Program (NCPDP) Standards under HIPAA

Note: This article was updated on April 22, 2013, to reflect current Web addresses. All other information remains unchanged.

Providers Affected

Durable Medical Equipment (DME) Suppliers.

Provider Action Needed



STOP – Impact to You

According to the HIPAA implementation guide (IG), Medicare systems must be able to receive the NCPDP HIPAA claim transaction with segments in any order.



CAUTION – What You Need to Know

According to the NCPDP standards, “The receiver cannot force an order of the segments.” DME regional carriers (DMERCs) systems then must allow segments to be transmitted in any order as long as the group separator precedes any of the segments.



GO – What You Need to Do

Effective July 1, 2004, the Medicare DMERCs will change their systems to allow segments to be transmitted in any order. In addition, the Medicare systems will be changed effective July 1, 2004, to allow the “MOD” value on certain segments. Be aware of these changes as HIPAA compliancy moves forward.

Background

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.

Effective July 1, 2004, Medicare claims systems, used by DMERCs will allow segments to be submitted in any order including the AM07, AM03, and AM11, in accordance with the NCPDP standard. In addition, the DMERCs must allow the value of "MOD" to be entered in positions 001-003 of the narrative portion of the prior authorization segment indicating the supporting documentation that follows is Medicare modifier information.

Additional Information

Should you have any questions regarding these changes or encounter any problems with claims that follow the NCPDP rules as described above after July 1, 2004, please contact your DMERC at their toll-free number.

If you do not know that number, you may find it 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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