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## Comprehensive Outpatient Rehabilitation Facilities/Outpatient Physical Therapy (CORF/OPT) Edit for Billing Inappropriate Supplies

**Note:** This article was updated on April 6, 2013, to reflect current Web addresses. All other information remains unchanged.

### Provider Types Affected

Comprehensive outpatient rehabilitation facilities and outpatient physical therapy facilities

### Provider Action Needed



#### **STOP – Impact to You**

A system edit is being established to return claims to CORFs/OPTs when billing for supplies with revenue code 270 without an appropriate Healthcare Common Procedure Code System (HCPCS) code.



#### **CAUTION – What You Need to Know**

Supplies furnished by CORFs/OPTs are considered part of the practice expense. CORFs/OPTs should not bill for the supplies they furnish except for the splint and cast, level II HCPCS Q codes associated with the level I HCPCS in the 29000 series.



#### **GO – What You Need to Do**

Make sure the appropriate HCPCS code is used to avoid returned claims and delayed payment when billing for certain supplies furnished by CORFs/OPTs.

#### 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.

## Background

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This instruction requires Medicare fiscal intermediaries (FIs) to return claims to CORFs/OPTs when billing for supplies without an appropriate HCPCS. Supplies are considered part of the practice expense and are not separately payable under the Medicare Physician Fee Schedule (MPFS) except for the splint and cast, level II HCPCS Q codes associated with the level I HCPCS in the 29000 series.

Thus, CORFs/OPTs should not bill for the supplies they furnish except for the splint and cast, level II HCPCS Q codes associated with the level I HCPCS in the 29000 series. The appropriate Level II HCPCS "Q" codes to be used are Q4001 thru Q4049. The appropriate Level I HCPCS codes associated with the Level II HCPCS "Q" codes are 29000 thru 29085; 29105 thru 29131; and 29305 thru 29515.

The splint and cast supplies are to be billed on a bill type of 74X or 75X with a supplies revenue code of 270 and the appropriate HCPCS codes.

Note that your intermediary will not search their files for claims already processed to make adjustments. However, the intermediary will adjust any claims brought to their attention.

## Additional Information

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The official instruction issued to your intermediary may be found at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R319CP.pdf> on the CMS website.

If you have any questions, please contact your intermediary 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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