



FLU SHOT REMINDER

Flu Season is upon us! Begin now to take advantage of each office visit as an opportunity to talk with your patients about the flu virus and their risks for complications associated with the flu, and encourage them to get their flu shot. It's their best defense against combating the flu this season. *(Medicare provides coverage of the flu vaccine without any out-of-pocket costs to the Medicare patient. No deductible or copayment/coinsurance applies.)* And don't forget, health care professionals need to protect themselves also. Get Your Flu Shot. – Protect yourself, your patients, and your family and friends. Remember - Influenza vaccination is a covered Part B benefit. Note that influenza vaccine is NOT a Part D covered drug. For information about Medicare's coverage of adult immunizations and educational resources, go to <http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/SE0667.pdf> on the CMS website.

MLN Matters Number: MM5283

Related Change Request (CR) #: 5283

Related CR Release Date: September 29, 2006

Effective Date: January 1, 2007

Related CR Transmittal #: R1068CP

Implementation Date: January 2, 2007

Note: This article was updated on November 6, 2012, to reflect current Web addresses. All other information remains unchanged.

2007 Annual Update of HCPCS Codes for Skilled Nursing Facility (SNF) Consolidated Billing (CB)

Provider Types Affected

Physicians, providers, and suppliers submitting claims to Medicare carriers, durable medical equipment regional carriers (DMERCs) or DME Medicare Administrative Contractors (DME MACs), and fiscal intermediaries (FIs) for services provided to Medicare beneficiaries in SNFs

Provider Action Needed

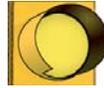


STOP – Impact to You

This article is based on Change Request (CR) 5283, which provides the 2007 annual update of HCPCS Codes for SNF CB and how the updates affect edits in Medicare claims processing systems.

Disclaimer

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**CAUTION – What You Need to Know**

CR5283 provides updated HCPCS codes that will be used to revise CWF edits to allow carriers and FIs to make appropriate payments in accordance with policy for SNF CB in the *Medicare Claims Processing Manual* (Publication 100-04), Chapter 6, Section 110.4.1 for carriers and Chapter 6, Section 20.6 for FIs.

**GO – What You Need to Do**

See the *Background* and *Additional Information* sections of this article for further details regarding this update.

Background

Medicare's claims processing systems currently have edits in place for claims received for beneficiaries in a Part A covered SNF stay as well as for beneficiaries in a non-covered stay. Changes to Healthcare Common Procedure Coding System (HCPCS) codes and Medicare Physician Fee Schedule designations are used to revise these edits to allow carriers, DMERCs/DME MACs, and FIs to make appropriate payments in accordance with policy for SNF CB contained in the *Medicare Claims Processing Manual*. These edits only allow services that are excluded from CB to be separately paid by carriers and/or FIs.

- **For physicians and providers billing carriers:** By the first week in December 2006, new code files will be posted at <http://www.cms.gov/Medicare/Billing/SNFConsolidatedBilling/index.html> / on the CMS website.
- **For those providers billing FIs:** By the first week in December 2006, new Excel® and PDF files will be posted at <http://www.cms.gov/Medicare/Billing/SNFConsolidatedBilling/index.html> / on the CMS website.

Note: It is **important and necessary** for the provider community to view the "General Explanation of the Major Categories" PDF file located at the bottom of each year's FI update listed at <http://www.cms.gov/Medicare/Billing/SNFConsolidatedBilling/index.html> on the CMS website in order to understand the Major Categories including additional exclusions not driven by HCPCS codes.

Additional Information

For complete details, please see the official instruction issued to your carrier, DMERC, DME MAC or intermediary regarding this change. That instruction may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1068CP.pdf> on the CMS website.

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If you have any questions, please contact your carrier, DMERC, DME MAC, or intermediary at their toll-free number, which may be 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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