



The revised *Medicare Physician Fee Schedule Fact Sheet* (January 2008), which provides general information about the Medicare Physician Fee Schedule, can be accessed at <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/MedcrePhysFeeSchedfctsht.pdf> on the Centers for Medicare & Medicaid Services website.

MLN Matters Number: MM5985

Related Change Request (CR) #: 5985

Related CR Release Date: April 4, 2008

Effective Date: January 1, 2008

Related CR Transmittal #: R1486CP

Implementation Date: May 5, 2008

Exception to 60-Day Limit on Substitute Physician Billing Arrangements for Physicians Called to Active Duty in the Armed Forces Reserves

Note: This article was updated on July 12, 2013, to reflect current Web addresses. All other information remains unchanged.

Provider Types Affected

Physician members of a reserve component of the Armed Forces who bill Medicare Carriers or Medicare Administrative Contractors (A/B MAC) for services provided to Medicare beneficiaries.

Physicians called to active duty in the Armed Forces who wish to bill for substitute physician services during the physician's absence.

What You Need to Know

CR 5985, from which this article is taken, announces a 6-month extension of the exception to the 60-day limit on substitute physician billing for physicians called to active duty in the Armed Forces. This means that a physician who is called to active duty may continue to bill for substitute physician services furnished from January 1, 2008 through June 30 2008, which may be beyond the 60-day limit.

Make sure that your billing staffs are aware of this change.

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 2007 American Medical Association.

Background

Section 1842(b)(6)(D)(iii) of the Social Security Act (the Act) and *Medicare Claims Processing Manual* Chapter 1 (General Billing Requirements), Sections 30.2.10 (Payment Under Reciprocal Billing Arrangements - Claims Submitted to Carriers) and 30.2.11 (Physician Payment Under Locum Tenens Arrangements - Claims Submitted to Carriers) state that when a physician is unavailable to provide services, a substitute physician's services (either on a reciprocal or locum tenens basis) are not to be provided for a period longer than 60 continuous days.

On August 3, 2007, Public Law 110-54 amended the Act to provide an exception to this 60-day limit for physicians who are ordered to active duty in the Armed Forces.

By striking "January 1, 2008" and inserting "July 1, 2008," Section 116 of the "Medicare, Medicaid, and State Children's Health Insurance Program (SCHIP) Extension Act of 2007" (signed on December 29, 2007) extended this exception for another 6 months.

CR 5985, from which this article is taken updates these sections in *Medicare Claims Processing Manual* to reflect this change in the law.

Effective January 1, 2008, physicians called to active duty will be able to bill for substitute physician services furnished from January 1, 2008, through June 30 2008.

Additional Information

You can find more information about the exception to the 60-Day limit on substitute physician billing arrangements for physicians called to active duty in the Armed Forces reserves by going to CR 5985, located at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1486CP.pdf> on the Centers for Medicare & Medicaid Services (CMS) website. You will find the updated *Medicare Claims Processing Manual* Chapter 1 (General Billing Requirements), Sections 30.2.10 and 30.2.11 as an attachment to that CR.

If you have any questions, please contact your carrier or A/B MAC 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.

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 2007 American Medical Association.