



**News Flash - Physician Quality Reporting Initiative (PQRI)** - The Centers for Medicare & Medicaid Services (CMS) is pleased to announce that a new educational resource has been posted to the PQRI webpage on the CMS website and is available for ordering through the Medicare Learning Network product ordering system. The *2008 PQRI Reporting Options Quick Reference Chart* is a two-sided laminated reference chart, which gives eligible professionals and practice staff a quick reference to the new reporting options available for 2008 PQRI with their corresponding alternative reporting periods. To access this new educational resource, visit <http://www.cms.hhs.gov/PQRI> on the CMS website and click on the Educational Resources tab. Once on the *Educational Resources* page, scroll down to the "Downloads" section and click on the "2008 PQRI Quick Reference Chart" link. To order the laminated product, visit [http://cms.meridianksi.com/kc/main/kc\\_frame.asp?kc\\_ident=kc0001&loc=5](http://cms.meridianksi.com/kc/main/kc_frame.asp?kc_ident=kc0001&loc=5) on the CMS website and click on the 2008 Physician Quality Reporting Initiative (PQRI) Reporting Quick Option Reference Chart (ICN# 900843)(May 2008) link.

MLN Matters Number: MM6128

Related Change Request (CR) #: 6128

Related CR Release Date: July 18, 2008

Effective Date: Claims processed on or after January 5, 2009

Related CR Transmittal #: R1554CP

Implementation Date: January 5, 2009

## Revision to Skilled Nursing Facility (SNF) Common Working File (CWF) Editing

### Provider Types Affected

Therapy professionals and providers submitting claims to Medicare contractors (carriers and/or Part A/B Medicare Administrative Contractors (A/B MACs)) for services provided to Medicare beneficiaries.

### Provider Action Needed

This article is based on Change Request (CR) 6128 which revises the action taken by CR 5757 to eliminate the negative impact on therapy professionals. CR 6128 applies to claims processed on or after January 5, 2009. Be sure your billing staff is aware of this issue.

### Background

Change Request (CR) 5757 (Transmittal 1365) implemented revised Medicare

#### 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.

Common Working File (CWF) editing for Skilled Nursing Facility (SNF) consolidated billing. It has come to the attention of the Centers for Medicare & Medicaid Services (CMS) that the editing changes implemented by CR 5757 negatively impacted therapy professionals. (You can review the MLN Matters article related to CR 5757 at <http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM5757.pdf> on the CMS website.)

The editing from CR5757 will no longer be applied. Medicare contractors will reopen and re-process claims incorrectly denied when you bring such claims to their attention.

### Additional Information

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The official instruction, CR 6128, issued to your carrier and A/B MAC regarding this change may be viewed at <http://www.cms.hhs.gov/Transmittals/downloads/R1554CP.pdf> on the CMS website.

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.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

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