News Flash - As of January 1, 2009, eligible professionals can participate in the E-Prescribing Incentive Program by reporting on their adoption and use of an e-prescribing system by submitting information on one e-prescribing measure on their Medicare Part B claims. For the 2009 e-prescribing reporting year, to be a successful e-prescriber and to qualify to receive an incentive payment, an eligible professional must report one e-prescribing measure in at least 50% of the cases in which the measure is reportable by the eligible professional during 2009. There is no sign-up or pre-registration to participate in the E-Prescribing Incentive Program. For more information, visit [http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ERxIncentive/index.html](http://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/ERxIncentive/index.html) on the CMS website.

MLN Matters® Number: MM6311 Related Change Request (CR) #: 6311
Related CR Release Date: April 24, 2009 Effective Date: October 1, 2009
Related CR Transmittal #: R1715CP Implementation Date: October 5, 2009

Note: This article was updated on December 17, 2012, to reflect current Web addresses. All other information remains unchanged.

Adding a New Specialty Code for Hospice and Palliative Care

Provider Types Affected

Physicians and other providers who bill Medicare carriers, fiscal intermediaries (FI), or Medicare Administrative Contractors (MAC) for hospice and palliative care services provided to Medicare beneficiaries.

What You Need to Know

The Centers for Medicare & Medicaid Services (CMS) will add a new physician specialty code to categorize Hospice and Palliative Care. This new physician specialty code is 17. Medicare physicians self-designate their Medicare physician specialty on the Medicare enrollment application (CMS-855I) when they enroll in the Medicare program. Medicare specialty codes describe the specific/unique types of medicine that physicians practice. Specialty codes are used by CMS for programmatic and claims processing purposes.

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.
Additional Information

You can find the official instruction, CR 6311, issued to your FI or MAC by visiting http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1715CP.pdf on the Centers for Medicare & Medicaid Services (CMS) website. If you have any questions, please contact your carrier, FI, or 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.