



**News Flash** – The Centers for Medicare & Medicaid Services (CMS) has recently updated the Educational Resources section (<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HospitalAcqCond/index.html>) of the Hospital-Acquired Conditions (HAC) & Present on Admission (POA) Indicator Reporting web site to include the audio file and transcript from the Hospital-Acquired Conditions and Hospital Outpatient Healthcare-Associated Conditions Listening Session held on Thursday, December 18, 2008.

MLN Matters Number: MM6363

Related Change Request (CR) #: 6363

Related CR Release Date: February 13, 2009

Effective Date: October 1, 2008

Related CR Transmittal #: R4470TN

Implementation Date: May 18, 2009

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

## Corrections to the Inpatient Prospective Payment System Wage Index for Fiscal Year (FY) 2009

### Provider Types Affected

Inpatient Acute Care hospitals who bill Medicare fiscal intermediaries (FIs) or Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries. See below for the list of affected hospitals.

### Provider Action Needed

This change only impacts hospitals which chose to notify CMS that they wished to revise the decision that CMS made on their behalf regarding their FY 2009 wage index. (See the Background section of this article for more details and a list of specific hospitals affected.) Please note that FIs and MACs will reprocess any claims with discharge dates on or after October 1, 2008, that were previously processed using an incorrect wage index. **You need take no action to initiate the reprocessing of the claims.** You should notify your billing office staff that adjustments to payments will be made within the next 90 days.

#### 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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Due to the extension of section 508 in the Medicare Improvements for Patients and Providers Act of 2008 (MIPPA), Centers for Medicare & Medicaid Services (CMS) stated in its final rule, published August 19, 2008, that due to the timing of the extension, CMS would be unable to recompute the FY 2009 wage index for any hospital reclassified under section 508 and special exception hospitals in time for inclusion in the FY 2009 wage index. Instead, CMS stated that we would publish the final wage FY 2009 wage index in a separate notice and that it would analyze the data for hospitals in areas affected by the MIPPA extension and make decisions on behalf of hospitals that we believe would result in the highest FY 2009 wage index for which they are eligible. Hospitals were allowed 15 days from the date of the separate notice, published October 3, 2008, to notify CMS if they wished to revise the decision that CMS made on their behalf.

The following list shows the provider numbers of hospitals who requested a reversal of the decision that CMS made on its behalf and their new wage index and Geographic Adjustment Factor (GAF):

050069, 050168, 050173, 050193, 050224, 050226, 050230, 050348, 050426, 050526, 050543, 050548, 050551, 050567, 050570, 050580, 050589, 050603, 050609, 050678, 050693, 050720, 050744, 050745, 050746 and 050747 have a new wage index of 1.2032 and a GAF of 1.1351. Hospital 250078 has a new wage index of 0.8418 and a GAF of 0.8888 and hospital 260110 has a corrected wage index of 0.8992 and a corrected GAF of 0.9298.

## Additional Information

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If you have questions, please contact your Medicare MAC or FI 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.

The official instruction (CR6363) issued to your Medicare MAC and/or FI is available at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R4470TN.pdf> on the CMS website.

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