

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Medicare & Medicaid Services



**News Flash** – The Centers for Medicare & Medicaid Services (CMS) has posted the 2011 versions of the ICD-10-CM and ICD-10-PCS crosswalks, formally referred to as the General Equivalence Mappings (GEMs) at <http://www.cms.gov/ICD10> on the ICD-10 website. See the links on that page for 2011 ICD-10-CM and GEMs, and 2011 ICD-10-PCS and GEMs. In addition, CMS has also posted a document, “ICD-10 GEMs 2011 Version Update, Update Summary.” This document describes the number of comments CMS received, the type of changes recommended, the types of changes made based on the comments, the types of comments not accepted, and the reasons why some comments were not accepted.

MLN Matters® Number: MM7345

Related Change Request (CR) #: 7345

Related CR Release Date: March 25, 2011

Effective Date: January 1, 2011

Related CR Transmittal #: R2184CP

Implementation Date: July 5, 2011

## **July Quarterly Update to 2011 Annual Update of HCPCS Codes Used for Skilled Nursing Facility (SNF) Consolidated Billing (CB) Enforcement**

### **Provider Types Affected**

This article is for providers and suppliers submitting claims to Medicare contractors (Fiscal Intermediaries (FIs), and/or A/B Medicare Administrative Contractors (A/B MACs)) for services provided to Medicare beneficiaries.

### **Provider Action Needed**



#### **STOP – Impact to You**

This article is based on Change Request (CR) 7345 which provides the July quarterly update to the 2011 annual update of Healthcare Common Procedure Coding System (HCPCS) Codes Used for SNF CB enforcement.

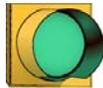
#### **Disclaimer**

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### CAUTION – What You Need to Know

Changes to Current Procedural Terminology (CPT)/HCPCS codes and Medicare Physician Fee Schedule designations will be used to revise Medicare systems to allow your Medicare contractor(s) to make appropriate payments in accordance with policy for SNF consolidated billing in the "Medicare Claims Processing Manual" (Chapter 6, Section 20.6).



### GO – What You Need to Do

See the Background and Additional Information Sections of this article for further details regarding these changes.

## Background

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The Social Security Act (Section 1888; see [http://www.ssa.gov/OP\\_Home/ssact/title18/1888.htm](http://www.ssa.gov/OP_Home/ssact/title18/1888.htm) on the Internet) codifies Skilled Nursing Facility (SNF) Prospective Payment System (PPS) and Consolidated Billing (CB), and the Centers for Medicare & Medicaid Services (CMS) periodically updates the lists of Healthcare Common Procedure Coding System (HCPCS) codes that are **excluded** from the Consolidated Billing (CB) provision of the SNF PPS.

The new coding identified in each update describes the same services that are subject to SNF PPS payment by law, and no additional services are added by these routine updates. The new updates are required because of changes to the coding system, not because the services subject to SNF CB are being redefined.

Services excluded from SNF PPS and CB may be paid to providers (other than SNFs) for beneficiaries, even when the beneficiary is in a SNF stay.

Services not appearing on the exclusion lists submitted on claims to Medicare contractors (Fiscal Intermediaries (FIs), carriers, A/B Medicare Administrative Contractors (MACs) including Durable Medical Equipment (DME) MACS) will not be paid by Medicare to any providers other than a SNF.

For non-therapy services:

- SNF CB applies only when the services are furnished to a SNF resident during a covered Part A stay;
- However, SNF CB applies to physical and occupational therapies and speech-language pathology services whenever they are furnished to a SNF resident, regardless of whether Part A covers the stay.

In order to assure proper payment in all settings, Medicare systems must edit for services provided to SNF beneficiaries both included and excluded from SNF CB.

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**Note:** Codes added or terminated with this update are available at [http://www.cms.gov/SNFConsolidatedBilling/71\\_2011Update.asp#TopOfPage](http://www.cms.gov/SNFConsolidatedBilling/71_2011Update.asp#TopOfPage) on the CMS website. A general explanation of the major categories for SNF CB can be found at <http://www.cms.gov/SNFConsolidatedBilling/Downloads/2011MajorCatExpl.pdf> on the CMS website.

**CR7345 instructs Medicare systems to ADD:**

- Current Procedural Terminology (CPT) codes 74176, 74177 and 74178 to Major Category I.A. (Exclusion of Services Beyond the Scope of an SNF (Computerized Axial Tomography (CT) Scans)) **effective January 1, 2011;**
- HCPCS codes Q2035, Q2036, Q2037, Q2038 and Q2039 to Major Category IV.B. (Additional Excluded Preventive and Screening Services (Vaccines (Pneumococcal, Flu or Hepatitis B)) **effective January 1, 2011;**
- HCPCS code G0105 to Major Category IV.E. (Additional Excluded Preventive and Screening Services (Colorectal Screening Services)) **effective January 1, 2011;**
- CPT codes 93451, 93452, 93453, 93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461, 93462, 93463, 93464, 93563, 93564, 93565, 93566, 93567 and 93568 to Major Category I.B. (Exclusion of Services Beyond the Scope of an SNF (Cardiac Catheterization)) **effective January 1, 2011; and**
- CPT code 96466 to Major Category III.B (Additional Exclusion of Services Rendered by Certified Providers (Chemotherapy Administration)) **effective January 1, 2011.**

**CR7345 instructs Medicare systems to TERMINATE:**

- CPT code 90658 from Major Category IV.B. (Additional Excluded Preventive and Screening Services (Vaccines (Pneumococcal, Flu or Hepatitis B))) **effective December 31, 2010; and**
- CPT codes 93501, 93508, 93510, 93511, 93514, 93524, 93526, 93527, 93528, 93529, 93539, 93540, 93541, 93542, 93543, 93544 and 93545 from Major Category I.B. (Exclusion of Services Beyond the Scope of an SNF (Cardiac Catheterization)) **effective December 31, 2010;**

**Note:** Your Medicare contractor(s) will reprocess claims affected by this instruction when you bring those claims to their attention.

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## Additional Information

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The official instruction, CR7345, issued to your FIs and A/B MACs regarding this change may be viewed at <http://www.cms.gov/transmittals/downloads/R2184CP.pdf> on the CMS website.

If you have any questions, please contact your FIs or A/B MACs at their toll-free number, which may be found at <http://www.cms.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

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