

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



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Post-Acute Transfer Processing Of CWF A/B Crossover Edit 7272 Update

Provider Types Affected

This MLN Matters® Special Edition Article is intended for home health agencies (HHA) and hospitals submitting Hospital to HHA transfer claims to Medicare contractors (Fiscal Intermediaries (FIs) and A/B Medicare Administrative Contractors (MACs)) for services to Medicare beneficiaries.

What You Need to Know

This article conveys updated editing requirements within the Common Working File (CWF) system, for which Medicare systems had edits that fired incorrectly in the past. Make sure billing staff are aware of these changes.

Background

CMS recently reexamined the post-acute transfer processing in the Common Working File (CWF) system of an Inpatient Prospective Payment System (IPPS) hospital claim when a home health claim is present in claims history, and discovered a change was necessary. CWF A/B Crossover Edit 7272 for transfers to home for home health services is using the home health *episode* start date instead of the first home health *line item date of service (LIDOS)* date following an IPPS hospital discharge to

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determine if a post-acute transfer exists. This edit has been modified to correct CWF A/B Crossover Edit 7272 to ensure that the system is following the transfer processing rules. Providers need to be aware of this change.

If you believe that your claim(s) was incorrectly processed, please contact your Medicare FI or MAC for resolution.

Additional Information

If you have any questions, please contact your 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.

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