

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-04 Medicare Claims Processing</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS0)</b>
<b>Transmittal 2003</b>	<b>Date: July 19, 2009</b>
	<b>Change Request 6533</b>

**Transmittal 1836, dated October 27, 2009, is being rescinded and replaced by Transmittal 2003, dated July 19, 2010 to restore physician specialty code 01-General Practice that was erroneously deleted from the manual. All other information remains the same.**

**Subject: New Physician Specialty Code for Geriatric Psychiatry**

**I. SUMMARY OF CHANGES:** New physician specialty code for Geriatric Psychiatry. The new physician specialty code for Geriatric Psychiatry is 27. The codes 32, 74 and 75 are being removed from the physician specialty section of the manual because they are non-physician specialty codes.

**New / Revised Material**

**Effective Date: April 1, 2010**

**Implementation Date: April 5, 2010**

*Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.*

**II. CHANGES IN MANUAL INSTRUCTIONS:** (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED

<b>R/N/D</b>	<b>Chapter/Section/Subsection/Title</b>
<b>R</b>	26/10/8.2/Physician Specialty Codes

**III. FUNDING:**

**SECTION A:** For Fiscal Intermediaries and Carriers:

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

**SECTION B:** For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically

authorized by the contracting officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the contracting officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

#### **IV. ATTACHMENTS:**

**Business Requirements**

**Manual Instruction**

*\*Unless otherwise specified, the effective date is the date of service.*

# Attachment - Business Requirements

Pub. 100-04	Transmittal: 2003	Date: July 19, 2010	Change Request: 6533
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**SUBJECT: New Physician Specialty Code for Geriatric Psychiatry**

**Effective Date: April 1, 2010**

**Implementation Date: April 5, 2010**

## I. GENERAL INFORMATION

**A. Background:** Physicians self-designate their Medicare physician specialty on the Medicare enrollment application (CMS-855I) or Internet-based Provider Enrollment, Chain and Ownership System when they enroll in the Medicare program. Non-physician practitioners are assigned a Medicare specialty code when they enroll. The specialty code becomes associated with the claims submitted by that physician or non-physician practitioner. Medicare physician/non-physician practitioner specialty codes describe the specific/unique types of medicine that physicians and non-physician practitioners (and certain other suppliers) practice. Specialty codes are used by CMS for programmatic and claims processing purposes.

**B. Policy:** The Centers for Medicare & Medicaid Services will establish a new physician specialty code for Geriatric Psychiatry. The new physician specialty code for Geriatric Psychiatry will be 27. The codes 32, 74 and 75 are being removed from the physician specialty section of the manual because they are non-physician specialty codes.

## II. BUSINESS REQUIREMENTS TABLE

*Use "Shall" to denote a mandatory requirement*

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B  M A C	D M E  M A C	F I	C A R R I E R	R H I	Shared-System Maintainers				OTHER
							F I S S	M C S	V M S	C W F	
6533.1	Contractors shall make all necessary changes to recognize and use the new physician specialty code 27 as valid primary and/or secondary specialty code for Geriatric Psychiatry.	X			X						PSUP
6533.2	The Provider Enrollment, Chain and Ownership System shall make the necessary changes to recognize and use the new physician specialty code 27 as a valid specialty code for Geriatric Psychiatry for individuals and organizations.										PECOS
6533.3	The Multi-Carrier System shall add and recognize the new physician specialty code 27 for Geriatric Psychiatry.							X			

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B	D M E	F I	C A R R I E R	R H H I	Shared-System Maintainers				OTHER
							F I S S	M C S	V M S	C W F	
6533.4	Contractors shall modify the existing table to include the new physician specialty code 27 for Geriatric Psychiatry as eligible to order and refer services.	X			X						

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B	D M E	F I	C A R R I E R	R H H I	Shared-System Maintainers				OTHER
							F I S S	M C S	V M S	C W F	
6533.5	<p>A provider education article related to this instruction will be available at <a href="http://www.cms.hhs.gov/MLNMattersArticles/">http://www.cms.hhs.gov/MLNMattersArticles/</a> shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv.</p> <p>Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.</p>	X			X						

### IV. SUPPORTING INFORMATION

#### Section A: For any recommendations and supporting information associated with listed requirements:

Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
	None

#### Section B: For all other recommendations and supporting information: N/A

### V. CONTACTS

**Pre-Implementation Contact:** Ann Marie Reimer (Vale) (410) 786-4898

**Post-Implementation Contact:** Ann Marie Reimer (Vale) (410) 786-4898

## **VI. FUNDING**

### **Section A: For *Fiscal Intermediaries (FIs)*, *Regional Home Health Intermediaries (RHHIs)*, and/or *Carriers*:**

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

### **Section B: For *Medicare Administrative Contractors (MACs)*:**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the contracting officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the contracting officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

## **10.8.2 - Physician Specialty Codes**

*(Rev.2003, Issued: 7-19-10, Effective: 04-01-10, Implementation: 04- 05- 10)*

<b>Code</b>	<b>Physician Specialty</b>
01	General Practice
02	General Surgery
03	Allergy/Immunology
04	Otolaryngology
05	Anesthesiology
06	Cardiology
07	Dermatology
08	Family Practice
09	Interventional Pain Management
10	Gastroenterology
11	Internal Medicine
12	Osteopathic Manipulative Therapy
13	Neurology
14	Neurosurgery
16	Obstetrics/Gynecology
17	Hospice and Palliative Care
18	Ophthalmology
19	Oral Surgery (dentists only)
20	Orthopedic Surgery
21	Available
22	Pathology
23	Available

<b>Code</b>	<b>Physician Specialty</b>
24	Plastic and Reconstructive Surgery
25	Physical Medicine and Rehabilitation
26	Psychiatry
27	<i>Geriatric Psychiatry</i>
28	Colorectal Surgery (formerly proctology)
29	Pulmonary Disease
30	Diagnostic Radiology
31	Available
33	Thoracic Surgery
34	Urology
35	Chiropractic
36	Nuclear Medicine
37	Pediatric Medicine
38	Geriatric Medicine
39	Nephrology
40	Hand Surgery
41	Optometry
44	Infectious Disease
46	Endocrinology
48	Podiatry
66	Rheumatology
70	Single or Multispecialty Clinic or Group Practice
72	Pain Management
73	Mass Immunization Roster Biller

<b>Code</b>	<b>Physician Specialty</b>
76	Peripheral Vascular Disease
77	Vascular Surgery
78	Cardiac Surgery
79	Addiction Medicine
81	Critical Care (Intensivists)
82	Hematology
83	Hematology/Oncology
84	Preventive Medicine
85	Maxillofacial Surgery
86	Neuropsychiatry
90	Medical Oncology
91	Surgical Oncology
92	Radiation Oncology
93	Emergency Medicine
94	Interventional Radiology
98	Gynecological/Oncology
99	Unknown Physician Specialty