

<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 (CMS)</b>
<b>Transmittal 2184</b>	<b>Date: March 25, 2011</b>
	<b>Change Request 7345</b>

**SUBJECT: July Quarterly Update to 2011 Annual Update of Healthcare Common Procedure Coding System (HCPCS) Codes Used for Skilled Nursing Facility (SNF) Consolidated Billing (CB) Enforcement**

**I. SUMMARY OF CHANGES:** Changes to CPT/HCPCS codes and Medicare Physician Fee Schedule designations will be used to revise CWF edits to allow FIs/A/B MACs to make appropriate payments in accordance with policy for SNF consolidated billing in chapter 6, section 20.6, for FIs/A/B MACs.

**EFFECTIVE DATE: January 1, 2011**

**IMPLEMENTATION DATE: July 5, 2011**

*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>
N/A	

**III. FUNDING:**

**For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs):**

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

**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. ATTACHMENT:**

**Recurring Update Notification**

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



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	
	93508, 93510, 93511, 93514, 93524, 93526, 93527, 93528, 93529, 93539, 93540, 93541, 93542, 93543, 93544 and 93545 from Major Category I.B. in the FI/A/B MAC file effective December 31, 2010.										
7345.2	Medicare systems shall <b>add</b> CPT codes 74176, 74177 and 74178 to Major Category I.A. in the FI/A/B MAC file effective January 1, 2011.									X	
7345.3	Medicare systems shall <b>add</b> 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 I.B. in the FI/A/B MAC file effective January 1, 2011.									X	
7345.4	Medicare systems shall add CPT code 96446 to Major Category III.B in the FI/A/B MAC file effective January 1, 2011.									X	
7345.5	Medicare systems shall <b>add</b> HCPCS codes Q2035, Q2036, Q2037, Q2038 and Q2039 to Major Category IV.B. in the FI/A/B MAC file effective January 1, 2011.									X	
7345.6	Medicare systems shall <b>terminate</b> CPT code 90658 from Major Category IV.B in the FI/A/B MAC file effective December 31, 2010.									X	
7345.7	Medicare systems shall <b>add</b> HCPCS code G0105 to Major Category IV.E. in the FI/A/B MAC file effective January 1, 2011.									X	
7345.8	When brought to their attention, Medicare contractors shall reprocess claims affected by this instruction.	X		X							

### III. PROVIDER EDUCATION TABLE

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	
7345.9	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.	X		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 I	Shared-System Maintainers				OTH ER
							F I S S	M C S	V M S	C W F	
	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.										

**IV. SUPPORTING INFORMATION**

**Section A: For any recommendations and supporting information associated with listed requirements, use the box below:**

*Use "Should" to denote a recommendation.*

X-Ref Requirement Number	Recommendations or other supporting information:
N/A	

**Section B: For all other recommendations and supporting information, use this space:**

**V. CONTACTS**

**Pre-Implementation Contact(s):** Jason Kerr, [Jason.Kerr@cms.hhs.gov](mailto:Jason.Kerr@cms.hhs.gov)

**Post-Implementation Contact(s):** Contact your Contracting Officer’s Technical Representative (COTR) or Contractor Manager, as applicable.

**VI. FUNDING**

**Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs):**

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

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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.