

<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 2799</b>	<b>Date: October 25, 2013</b>
	<b>Change Request 8462</b>

**SUBJECT: Annual Medicare Physician Fee Schedule (MPFS) Files Delivery and Implementation**

**I. SUMMARY OF CHANGES:** The Medicare Physician Fee Schedule Files is released annually to the Medicare contractors. This instruction is to give direction of the notification and implementation of the annual Medicare Physician Fee Schedule Files. The attached Recurring Update Notification applies to chapter 1, section 30.3.12.1.2.

**EFFECTIVE DATE: January 1, 2014**

**IMPLEMENTATION DATE: January 6, 2014**

*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-Only One Per Row.

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
R	1/30.3.12.1.2/Annual Medicare Physician Fee Schedule File Information

**III. FUNDING:**

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

No additional funding will be provided by CMS; Contractors activities are to be carried out with 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 obliged 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:**

**Recurring Update Notification  
Manual Instruction**

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



Number	Requirement	Responsibility											
		A/B MAC			D M E M A C	F I	C A R R I E R	R H I	Shared- System Maintainers				Other
		A	B	H H H					F I S S	M C S	V M S	C W F	
	duplicate billing edits: 1) Purchase Diagnostic and 2) Duplicate Radiology Editing. CWF shall install these files into their systems. CWF will be notified via email when these files have been sent to them.												
8462.1.3	Upon successful receipt of the file, the carrier/MAC shall send notification of receipt via email to <a href="mailto:price_file_receipt@cms.hhs.gov">price_file_receipt@cms.hhs.gov</a> stating the name of the file received and the entity for which it was received (e.g., carrier/FI/MAC name and number).		X				X						
8462.2	Medicare contractors shall download, test and be ready to implement the 2014 MPFS files on January 6 unless otherwise notified by CMS.		X				X						
8462.3	Medicare contractors shall treat pricing data CONFIDENTIAL and shall not release/or publish fees on the web until notification is received from CMS regarding publication of the 2014 MPFS final rule.		X				X						
8462.4	CMS shall notify Medicare contractors when the 2014 MPFS final rule is put on display by email.		X				X						
8462.5	Medicare contractors shall be in compliance with the instruction in Publication 100-04, Chapter 1, section 30.3.12.1.2.		X				X						

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility							
		A/B MAC			D M E M A C	F I	C A R R I E R	R H I	Other
		A	B	H H H					
	None								

#### IV. SUPPORTING INFORMATION

##### Section A: Recommendations and supporting information associated with listed requirements:

*"Should" denotes a recommendation.*

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

**Section B: All other recommendations and supporting information:** N/A

#### V. CONTACTS

**Pre-Implementation Contact(s):** April Billingsley, 410-786-0140 or april.billingsley@cms.hhs.gov

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

#### VI. FUNDING

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

No additional funding will be provided by CMS; Contractors activities are to be carried out with 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 do 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.

# Medicare Claims Processing Manual

## Chapter 1 - General Billing Requirements

### ***30.3.12.1.2 - Annual Medicare Physician Fee Schedule File Information (Rev. 2799, Issued: 10-25-13, Effective: 01-01-14, Implementation: 01-06-14)***

*The CMS transmits the annual Medicare Physician Fee Schedule (MPFS) file electronically for carriers/MACs to download each year around late-October. The annual MPFS files (including anesthesia) are effective January 1<sup>st</sup>. Carriers/MACs must implement these files each January, unless otherwise directed by CMS.*

***NOTE:*** *There will be an annual recurring change request for the implementation of the yearly Medicare Physician Fee Schedule Files.*

*The CMS will advise all contractors, via email notification, when annual MPFS files are available for download from the mainframe. Carriers/MACs can retrieve the new files and begin the process of testing and loading the new fees into the system. Carriers/MACs must place the new fees, including the anesthesia conversion factor(s), on their Web site after the MPFS final rule is placed on display. (The CMS will send notification of when the MPFS final rule is put on display via email.)*

*In addition, there may be last minute corrections, therefore you may have to retrieve one or more MPFS corrected files. Notification of the availability of any correction files, including the file names, will be made via an email to Carriers and MACs.*