

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 3092	Date: October 10, 2014
	Change Request 8939

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

I. SUMMARY OF CHANGES: The Medicare Physician Fee Schedule Files are 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, 2015

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

IMPLEMENTATION DATE: January 5, 2015

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.*

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	N/A

III. FUNDING:

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

Number	Requirement	Responsibility							
		A/B MAC		D M E M A C	Shared-System Maintainers				Other
		A	B		H H H	F I S S	M C S	V M S	
	billing edits: 1) Duplicate Diagnostic Editing, 2) Duplicate Radiology Editing, 3) Duplicate Pathology Editing and 4) RVU and Payment Indicator Files. CWF shall install these files into their systems. CWF will be notified via email when these files have been sent to them.								
8939.1.3	Upon successful receipt of the file, the A/B MAC (B) shall send notification of receipt via email to price_file_receipt@cms.hhs.gov stating the name of the file received and the entity for which it was received (e.g., A/B MAC (A)/ A/B MAC (B) name and number).		X						
8939.2	Medicare contractors shall download, test and be ready to implement the 2015 MPFS files on January 5 unless otherwise notified by CMS.		X						
8939.3	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 2015 MPFS final rule.		X						
8939.4	CMS shall notify Medicare contractors when the 2015 MPFS final rule is put on display by email.								CMS
8939.5	Medicare contractors shall be in compliance with the instruction in Publication 100-04, Chapter 1, section 30.3.12.1.2.		X						

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		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): Ian Kramer, 410-786-5777 or ian.kramer@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Office Representative (COR)

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 0