

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 3438	Date: January 8, 2016
	Change Request 9495

SUBJECT: Emergency Update to the CY 2016 Medicare Physician Fee Schedule Database (MPFSDB)

I. SUMMARY OF CHANGES: Payment files were issued to contractors based on the CY 2016 Medicare Physician Fee Schedule Final Rule. This change request amends those payment files in order to correct technical errors to the MPFS update files, and to include corrections described in the CY 2016 MPFS Final Rule Correction Notice.

Please note that the work related to this Change Request has already been done by the Medicare contractors via a previous direction, which was implemented on January 4, 2016. Therefore, the implementation date is prior to the release date of this Change Request.

EFFECTIVE DATE: January 1, 2016

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

IMPLEMENTATION DATE: January 4, 2016

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 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:

Recurring Update Notification

Attachment - Recurring Update Notification

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SUBJECT: Emergency Update to the CY 2016 Medicare Physician Fee Schedule Database (MPFSDB)

EFFECTIVE DATE: January 1, 2016

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

IMPLEMENTATION DATE: January 4, 2016

I. GENERAL INFORMATION

A. Background: Payment files were issued to contractors based upon the Calendar Year (CY) 2016 Medicare Physician Fee Schedule (MPFS) Final Rule, displayed on October 30, 2015, and published in the Federal Register on November 16, 2015. This change request amends those payment files in order to include corrections described in the CY 2016 MPFS Correction Notice, and correct technical errors to the MPFS update files.

B. Policy: Some Relative Value Units published in the CY 2016 MPFS Final Rule have been revised to align their values with the CY 2016 MPFS Final Rule policies. These changes are discussed in the CY 2016 MPFS Final Rule Correction Notice. In addition, there were corrections made to invalid or missing payment indicators for several procedure codes. The amended 2016 MPFS payment files reflect all these changes for services furnished on or after January 1, 2016.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility									
		A/B MAC			D M E	Shared- System Maintainers				Other	
		A	B	H		F	M	V	C		
					M	I	C	M	W		
					A	S	S	S	F		
					C	S					
9495.1	Contractors shall retrieve the revised payment files, as identified in this CR, from the CMS Mainframe Telecommunications System. Contractors will be notified via email when these files are available for retrieval.	X	X	X							
9495.2	Notification of successful receipt shall be sent 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., Medicare contractor name and number).	X	X	X							
9495.3	Contractors shall begin to pay claims using these new files no later than January 4, 2016, unless otherwise directed by CMS.	X	X	X							
9495.4	The revised MPFS fees are effective January 1, 2016.	X	X	X							

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	C W F	
	Contractors shall disclose the revised MPFS fees on their Web sites as soon as possible, but no later than 10 business days after installing the new files into production.									
9495.5	CMS will send CWF files to facilitate duplicate billing edits: 1) Duplicate Radiology editing; 2) Duplicate Diagnostic editing; 3) Duplicate Pathology editing, and; 4) RVU and payment indicator files. CWF will be notified via email when these files have been sent to them. CWF shall compare the existing file to the new file and install any necessary changes.							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		
9495.6	MLN Article: A provider education article related to this instruction will be available at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/ shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web sites and include information about it in a listserv message within 5 business days after receipt of the notification from CMS announcing the availability of the article. In addition, the provider education article shall be included in the contractor's 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.	X	X	X		

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:

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

Section B: All other recommendations and supporting information: The following 2016 MPFSDB correction notice files for changes effective January 1, 2016, are available on the CMS mainframe:

FI Abstract Files

MU00.@BF12390.MPFS.CY16.ABSTR.V0108.FI

MU00.@BF12390.MPFS.CY16.HHH.V0108.FI

MU00.@BF12390.MPFS.CY16.MAMMO.V0108.FI

MU00.@BF12390.MPFS.CY16.PAYIND.V0108

MU00.@BF12390.MPFS.CY16.SNF.V0108.FI

Anesthesia Conversion Factors

MU00.@BF12390.MPFS.CY16.ANES.V0108

Physician Fee Schedule

MU00.@BF12390.MPFS.CY16.RV1.C00000.V0108

As a courtesy, the following change files will be available as a reference for the MACs on the CMS mainframe as soon as 1/7/16, and the FWG will be notified as soon as they are posted:

MU00.@BF12390.MFS2016.PRINT1.V0106

MU00.@BF12390.MFS2016.PRINT1A.V0106

V. CONTACTS

Pre-Implementation Contact(s): Kathleen Kersell, 410-786-2033 or kathleen.kersell@cms.hhs.gov (Contact for payment policy questions.) , Charles Campbell, 410-786-7209 or charles.campbell@cms.hhs.gov (Contact for MPFSDB file issues.)

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 0