

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-20 One-Time Notification</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 546</b>	<b>Date: August 28, 2009</b>
	<b>Change Request 6630</b>

**Subject: Ambulatory Surgical Center Payment Indicator (ASCPI) File Error; and Reiteration of CMS Policy Regarding Beneficiary Liability for V2787 and V2788**

**I. SUMMARY OF CHANGES:** This CR corrects an incorrect ASCPI file payment indicator assignment which resulted in incorrect beneficiary liability assignment and messaging on Medicare Summary Notices (MSNs).

**New / Revised Material**

**Effective Date: January 1, 2009**

**Implementation Date: September 29, 2009**

*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	

**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:**

**One-Time Notification**

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

# Attachment – One-Time Notification

<b>Pub. 100-20</b>	<b>Transmittal: 546</b>	<b>Date: August 28, 2009</b>	<b>Change Request: 6630</b>
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**SUBJECT:** Ambulatory Surgical Center Payment Indicator (ASCPI) File Error; and Reiteration of CMS Policy Regarding Beneficiary Liability for V2787 and V2788

**Effective Date:** January 1, 2009

**Implementation Date:** September 29, 2009

## I. GENERAL INFORMATION

**A. Background:** The January 2009 Ambulatory Surgical Center Payment indicator (ASCPI) file was made available to Part B contractors in accordance with the business requirements contained in transmittal 1616, dated October 17, 2008. Subsequent quarterly ASCPI files were also made available to Part B contractors for April 2009 (transmittal 1698, dated March 13, 2009) and July 2009 (transmittal 1740, dated May 22, 2009). The payment indicator assigned to HCPCS V2787 and HCPCS V2788, in each of the three aforementioned transmittals was “Y5”. This payment indicator assignment was incorrect and results in incorrect beneficiary liability assignment and messaging on Medicare Summary Notices (MSNs).

Listed in the business requirements below are replacement ASCPI files for January, 2009, April 2009, and July 2009. These files have been corrected to reflect payment indicator of “E5” for both V2787 and V2788, to trigger the correct beneficiary liability assignment and messaging for the aforementioned codes.

**B. Policy:** Contractors shall download and install the corrected files and shall search and adjust affected claims to trigger the correct beneficiary liability message for codes V2787 and V2788 for dates of service on/after January 1, 2009. Contractor customer service staff should be alerted to the messaging problem so that they may accurately respond to any provider or beneficiary inquiries that may occur.

## II. BUSINESS REQUIREMENTS TABLE

*Use “Shall” to denote a mandatory requirement*

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				OTH ER
		M A C	M A C		I E R	F S S	M S S	V M S	C M F		
6630.1	Medicare contractors shall download and install a revised January 2009 ASCPI file.	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	
	<b>FILENAME:</b> <u>MU00.@BF12390.ASC.CY09.IND.V1101C</u>  This file is available for download										
6630.2	Medicare contractors shall download and install a revised April 2009 ASCPI file.  <b>FILENAME:</b> <u>MU00.@BF12390.ASC.CY09.IND.V0320C</u> This file is available for download	X			X						
6630.3	Medicare contractors shall download and install a revised July 2009 ASCPI file.  <b>FILENAME:</b> <u>MU00.@BF12390.ASC.CY09.IND.V0623C</u> This file is available for download	X			X						
6630.4	Contractors shall search previously processed claims for V2787 and V2788 that have dates of service on or after January 1, 2009 and manually apply the correct beneficiary liability message based on the correct payment indicator.	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 I	Shared-System Maintainers				OTH ER
							F I S S	M C S	V M S	C W F	
6630.5	A provider education article related to this instruction will be available at	X			X						

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B  M A C	D M B  M A C	F I  M A C	C A R I E R	R H I  I S S	Shared-System Maintainers				OTH ER
						F I S S	M C S	V M S	C W F		
	<p><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>										

**IV. SUPPORTING INFORMATION**

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

X-Ref Requirement Number	Recommendations or other supporting information:

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

**V. CONTACTS**

**Pre-Implementation Contact(s):** ASC Payment Policy: Chuck Braver at: [chuck.braver@cms.hhs.gov](mailto:chuck.braver@cms.hhs.gov) or 410-786-6719; Carrier/ AB MAC Claims Processing Issues: Yvette Cousar at: [yvette.cousar@cms.hhs.gov](mailto:yvette.cousar@cms.hhs.gov) or 410-786-2160.

**Post-Implementation Contact(s):** Regional Office

## **VI. FUNDING**

### **Section A: For 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), include the following statement:**

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.