

CMS Manual System

Pub 100-04 Medicare Claims Processing

Transmittal 828

Department of Health & Human Services (DHHS)

Centers for Medicare & Medicaid Services (CMS)

Date: FEBRUARY 2, 2006

Change Request 4303

SUBJECT: Mammography Facility Certification File - Updated Procedures and Content

I. SUMMARY OF CHANGES: This instruction provides guidelines for contractors to upload on a weekly basis the most recent Mammography Quality Standards Act file in order to ensure proper and timely payment of claims submitted by facilities certified by the FDA to perform screening and diagnostic mammography services.

NEW/REVISED MATERIAL

EFFECTIVE DATE: July 1, 2006

IMPLEMENTATION DATE: July 3, 2006

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

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
R	18/20/20.1/Mammography Quality Standards Act (MQSA)
R	18/20/20.1.2/MQSA File

III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2006 operating budgets.

IV. ATTACHMENTS:

Business Requirements

Manual Instruction

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

Attachment - Business Requirements

Pub. 100-04	Transmittal: 828	Date: February 2, 2006	Change Request 4303
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SUBJECT: Mammography Facility Certification File – Updated Procedures and Content

I. GENERAL INFORMATION

A. Background: The Mammography Quality Standards Act (MQSA) ensures that all facilities that provide mammography services meet national quality standards. The Food and Drug Administration (FDA) provides the Centers for Medicare and Medicaid Services (CMS) with a listing of all facilities that have been issued certificates to perform mammography services. CMS then notifies contractors of this information. Contractors are also notified of situations where a facility's certificate has expired or has been suspended or revoked. The information provided by CMS includes the facility's name, address, 6-position certification number, and effective/expiration dates and termination date.

It has been brought to CMS' attention that some facilities are not being paid for some screening or diagnostic mammography services performed at FDA-certified facilities because the facility is not listed on the FDA file. Currently, the FDA file does not contain terminated facilities. However, CMS will be populating a new file with terminated facilities to enable contractors to properly pay for services prior to the date of termination and deny services furnished after the date of termination. This action is needed because claims may still come into Medicare from a terminated facility if the date of service occurred before the facility was terminated.

The MQSA file is transmitted weekly and contractors are to update their respective files with the most recent MQSA file on a weekly basis via the CMS Mainframe Telecommunications System (CMSTS). Terminated facilities will be listed on the new MQSA file designated with a "T" value. The new file will be named the MQSA Master Backup, P#MSS.#2675.MS201401 which replaces the old transmission file, P#MSS.#2675.MS200601. This new file is a combined CMS/FDA file.

B. Policy: Medicare pays for film and digital mammography services only if the provider is certified by the FDA to perform the type of mammogram for which payment is sought and then only for the period for which the certification is effective.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement

"Should" denotes an optional requirement

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		F I	R H I	C a r r i e r	D M E R C	Shared System Maintainers				Other
F I S S	M C S					V M S	C W F			
4303.1	System Maintainers shall download, on a weekly basis, the most recent MQSA file and shall use such file to adjudicate claims.	X		X			X			
4303.1.1	System Maintainers shall download the new file named MSQA Master Backup, P#MSS.#2675.MS201401 which replaces the old file named Transmission file, P#MSS.#2675.MS200601.	X		X			X			
4303.2	System Maintainers shall ensure that its file used to adjudicate claims for mammography services conforms to the file format listed in Attachment A.	X		X			X			
4303.3	Contractors shall ensure that the date of service on the claim is within the "EFFECT- DATE" and the "ENDING-DATE."	X		X			X			

III. PROVIDER EDUCATION

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		F I	R H I	C a r r i e r	D M E R C	Shared System Maintainers				Other
F I S S	M C S					V M S	C W F			
4303.4	A provider education article related to this instruction will be available at www.cms.hhs.gov/medlearn/matters shortly after the CR is released. You will receive notification of the article release via the established "medlearn matters" listserv. 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	X		X						

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)							
		F I	R H I	C a r r i e r	D M E R C	Shared System Maintainers			
F I S S	M C S					V M S	C W F		
	1 week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin and incorporated into any educational events on this topic. Contractors are free to supplement Medlearn Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.								

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: July 1, 2006 Implementation Date: July 3, 2006 Pre-Implementation Contact(s): Bill Ruiz 410-786-9283 and Tracey Hemphill 410-786-7169 Post-Implementation Contact(s): Regional Office	No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.
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Attachment

Update of the MQSA File Record Layout

Below provides the record description for the Mammography Quality Standards Act (MQSA) file. Contractors must retrieve the following file by July 1, 2006:

CARRIER/INTERMEDIARY: P#MSS.#2675.MS201401

The file contains three record types, a HEADER-RECORD, a FACILITY-RECORD, and a TRAILER-RECORD. The difference is the presence of the Terminated (T) records was added.

Record Description:

01 HEADER-RECORD.

05 RECORD-TYPE PIC 9 VALUE 0.
05 FDA-FILE-DATE PIC 9(8).

01 FACILITY-RECORD.

05 RECORD-TYPE PIC 9 VALUE. 0,1,2,9
88 HEADER-RECORD VALUE '0'
88 FILM-RECORD VALUE '1'
88 DIGITAL-RECORD VALUE '2'
88 TRAILER-RECORD VALUE '9'

05 FACILITY-ID PIC X(6).
05 EIN-SSN PIC X(9).
05 NPI-NUMBER PIC X(10).
05 FACILITY-NAME PIC X(50).
05 STREET-ADDR-1 PIC X(30).
05 STREET-ADDR-2 PIC X(30).
05 STREET-ADDR-3 PIC X(30).
05 CITY PIC X(28).
05 STATE-ABBREV PIC XX.
05 ZIP-CODE PIC X(9).
05 CONDENSED-STREET PIC X(30).
05 CERTIFICATE-COUNT PIC 9.
05 UPDATE-CODE PIC X.
88 TERMINATED-FACILITY VALUE 'T'
88 ACTIVE-FACILITY VALUE SPACE.

05 FDA-UPDATE-DATE PIC 9(8).

05 CERTIFICATE-DATES.

10 DATES-OF-CERTIFICATES OCCURS 1 TO 4 TIMES
DEPENDING ON CERTIFICATE-COUNT.

15 EFFECTIVE-DATE PIC 9(8).
15 ENDING-DATE PIC 9(8).

20.1 - Mammography Quality Standards Act (MQSA)

(Rev.828, Issued: 02-02-06, Effective: 07-01-06, Implementation: 07-03-06)

The law provides specific standards regarding those qualified to perform screening and diagnostic mammograms and how they should be certified. The Mammography Quality Standards Act (MQSA) requires the Secretary to ensure that all facilities that provide mammography services meet national quality standards. Effective October 1, 1994, all facilities providing screening and diagnostic mammography services (except VA facilities) must have a certificate issued by the Food and Drug Administration (FDA) to continue to operate. The FDA, Center for Devices and Radiological Health, is responsible for collecting certificate fees and surveying mammography facilities (screening and diagnostic).

The FDA provides CMS with a listing of all providers that have been issued certificates to perform mammography services and CMS notifies contractors accordingly. Contractors are also notified of situations where a provider's certificate has expired, or has been suspended or revoked. The information provided includes the provider's name, address, 6-position certification number, effective/*expiration* dates *and the letter "T" to designate the facility as terminated.*

Medicare will only reimburse FDA-certified mammography centers. Carriers must inform physicians and suppliers at least annually, through their provider/supplier publications, of those facilities centers, which are certified. Carriers encourage physicians to inform their patients about centers that are certified.

Mammography facilities that perform screening mammographies are **not** to release screening mammography x-rays for interpretation to physicians who are not approved under the facility's certification number unless the patient has requested a transfer of the films from one facility to another for a second opinion, or unless the patient has moved to another part of the country where the next screening mammography will be performed. Interpretations are to be performed **only** by physicians who are associated with the certified mammography facility. Carriers are not required to maintain a list of these associations unless there is a specific reason for doing so and only on a case-by-case basis.

When adjudicating a screening mammography claim, contractors refer to the table of certified facilities provided by the FDA and confirm that the facility listed on the claim is in fact certified to perform the service. When the contractor determines that the facility that performed the mammography service has not been issued a certificate by the FDA or the certificate is suspended or revoked, the claim will be denied utilizing the denial language in [§20.8.1](#) of this chapter, related to certified facilities.

20.1.2 – MQSA File

(Rev.828, Issued: 02-02-06, Effective: 07-01-06, Implementation: 07-03-06)

Prior to April 1, 2003, the MQSA file showed all facilities that are certified to perform film screening and diagnostic mammograms. After April 1, 2003, the file shows a new Record Type with two indicators, "1" for film and "2" for digital to determine which mammograms the facility is certified to perform.

Section 104 of the Benefits Improvement and Protection Act (BIPA) of 2000, entitled “Modernization of Screening Mammography Benefit,” provided new payment methodologies for both diagnostic and screening mammograms that utilize digital technology. The new digital mammography codes have a higher payment rate. In order for Medicare to know whether the mammography facility is certified to perform digital mammography and, therefore, due a higher payment rate, the FDA will send an updated file via CMS Mainframe Telecommunications System (CMSTS), formerly Network Data Mover, on a weekly basis.

Effective *July 1, 2006*, the file shows:

- Name of Facility,
- Certification number of the facility,
- Film certification obtained (Record-type =1) or digital certification obtained (Record-type = 2),
- Effective and Expiration dates of each certification,
- *Letter “T” to designate the facility as terminated,*

Some mammography facilities are certified to perform both film and digital mammography. In this case, the facility’s name and FDA certification number shows up on this file twice. One line will indicate film certification with effective date/expiration date while the other line will indicate digital certification with effective date/expiration date. The facilities may not have the same effective date and expiration date for both film and digital certification.

NOTE: The FDA does not issue printed certification which indicates film or/and digital. Refer to the MQSA file for proof of types of mammography the facility is certified to perform.

Medicare pays for film mammography and digital mammography at different rates and pays for a service only if the provider or supplier is certified by the FDA to perform those types of mammogram for which payment is sought. If the FDA mammography file has an error, contact your regional office mammography coordinator. The coordinators will contact the FDA to research the error. The FDA file is transmitted weekly.

In order to implement these procedures take the following steps:

- 1) The contractors must use the updated file to match the mammography certification number to a provider for validity to adjudicate claims.
- 2) When a film mammography HCPCS code comes in on a claim, check for a “1” film indicator.
 - If a film mammography HCPCS code comes in on a claim and the facility is certified for film mammography, pay the claim.
 - If a film mammography HCPCS code comes in on a claim and the facility is certified for digital mammography only, return to provider (RTP).

- If a film mammography HCPCS code comes in on a claim and there is no certification number on the claim, return to provider (RTP) (carriers only).
- 3) When a digital mammography HCPCS code comes in on a claim, check for “2” digital indicator.
- If a digital mammography HCPCS code comes in on a claim and the facility is certified for digital mammography, pay the claim.
 - If a digital mammography HCPCS code comes in on a claim and the facility is certified for film mammography only, return to provider (RTP).
 - If a digital mammography HCPCS code comes in on a claim and there is no certification number on the claim, return to provider (RTP) (carriers only).

NOTE: Refer to §20.2 for a complete listing of mammography HCPCS codes.

- 4) Common Working File (CWF) no longer receives the mammography file for editing purposes.

***NOTE:** To ensure proper and timely payment for mammography services at facilities certified by the FDA to perform screening and diagnostic mammography services, contractors shall upload on weekly basis the most recent MQSA file.*