

CMS Manual System

Pub 100-04 Medicare Claims Processing

Transmittal 972

Department of Health &
Human Services (DHHS)

Center for Medicare &
Medicaid Services (CMS)

Date: JUNE 2, 2006

Change Request 5126

SUBJECT: October 2006 Maintenance and Update of the Temporary Hook Created to Hold OPPS Claims that Include Certain Drug HCPCS Codes

I. SUMMARY OF CHANGES: Transmittal 756, Change Request (CR) 4142 issued on November 10, 2005, instructed Standard System Maintainers (SSMs) to hook and hold claims with bill types 12x and 13x, with dates of service on or after January 1, 2006, where one or more of the drug HCPCS codes on the list attached to CR 4142 was included. The hook program should be maintained and updated each quarter based on the list of drug HCPCS found at the address provided in the attached Business Requirements. This process should continue until further notice.

NEW/REVISED MATERIAL

EFFECTIVE DATE: October 1, 2006

IMPLEMENTATION DATE: October 2, 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 – *Only One Per Row.*

R/N/D	Chapter / Section / SubSection / Title
-------	--

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:

Recurring Update Notification

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

Attachment – Recurring Update Notification

Pub. 100-04	Transmittal: 972	Date: June 2, 2006	Change Request 5126
-------------	------------------	--------------------	---------------------

SUBJECT: October 2006 Maintenance and Update of the Temporary Hook Created to Hold OPSS Claims that Include Certain Drug HCPCS Codes

I. GENERAL INFORMATION

A. Background: CMS has proposed to pay for all outpatient drugs using the Average Sales Price (ASP) methodology. The schedule for submission of all ASP pricing is statutory per Section 621(a) of the MMA. Drug manufacturers are required to submit drug ASPs within 30 days of the close of their fiscal quarter. Given the complexity, volume of data, and the number of drugs affected, approximately 6 weeks are required to process, validate, and issue final ASPs for a given quarter. The ASP rates for drugs furnished on or after October 1, 2006, will not be available until mid-September 2006 respectively.

The OPSS PRICER is ready for implementation on the first day of each quarter. However, certain drug HCPCS that will be updated quarterly, will not have the new drug prices included for the reasons explained above. Claims for dates of service falling under the new OPSS PRICER that include one or more drug HCPCS codes from the file found at the address specified in the attached Business Requirements are to be held by the Fiscal Intermediary (FI) until a revised OPSS PRICER is installed in their production region. Refer to the October 2006 OPSS PRICER Schedule below for the OPSS PRICER installation deadline.

October 2006 OPSS PRICER Schedule

Update	Drug HCPCS codes available to FISS/FIs	OPSS Pricer Updated/Start to FISS	FISS Release Revised OPSS Pricer to Data Centers	Latest Test Installation Date	Latest Production Installation Date	FI's Begin to Release Claims
October 1, 2006	8/11/2006	9/22/06	9/28/06	10/2/06	10/12/06	10/13/06

B. Policy: Transmittal 756, Change Request (CR) 4142 issued on November 10, 2005, instructed Standard System Maintainers (SSMs) to “hook” and hold claims with bill types 12x and 13x, with dates of service on or after January 1, 2006, where one or more of the drug HCPCS codes on the list attached to CR 4142 was included. The “hook” program should be maintained and updated each quarter based on the list of drug HCPCS found at the address provided in the attached Business Requirements. This process should continue until further notice.

II. BUSINESS REQUIREMENTS

“Shall” denotes a mandatory requirement
“Should” denotes an optional requirement

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)								
		FI	RH 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	
5126.1	FISS shall install the revised OPPTS PRICER each quarter on the dates specified in the OPPTS PRICER Schedule in Section I.A					X				
5126.1.1	FISS shall test the revised OPPTS PRICER each quarter on the dates specified in the OPPTS PRICER Schedule in Section I.A					X				
5126.1.2	FISS shall release the revised OPPTS PRICER each quarter on the dates specified in the OPPTS PRICER Schedule in Section I.A					X				
5126.2	The standard system maintainer (SSM) shall continue maintaining the hook logic created in CR 4142, which holds claims with bill types 12x and 13x, with dates of services on or after the first day of each quarter that include one or more drug HCPCS codes from the list that will be provided quarterly.					X				
5126.2.1	The SSM shall continue this process until further notice.					X				
5126.2.2	The SSM shall release this logic as a part of the quarterly releases so that this logic is available to FIs prior to the 1 st business day of each quarter.					X				
5126.3	The SSM shall use the following file name to download from the CMS data center the list of drug HCPCS codes that are to be incorporated into their hook logic: MU00.@AAA2360.ASP.HCPC.MMMYY with the MMMYY indicating the month and year of the update.					X				

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)							
		FI	RH HI	C 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		
5126. 4	The FI shall use the same file name listed in the Business Requirement 5126.3 to download the list of drug HCPCS codes from CMS that should appear on the claims that are to be “hooked”.	X							
5126.5	SSM and FI shall refer to the OPSS PRICER Schedule in Section I.A. for the file availability dates.	X				X			
5126. 6	The FI shall “hook” claims which contain one or more drug HCPCS codes from the list provided quarterly by CMS with the dates of service from the first day in each quarter until the installation of the OPSS PRICER containing the updated ASP drug pricing information.	X							
5126. 6.1	The FI shall refer to Section I.A for the PRICER Installation deadlines.	X							
5126.7	Quarterly, the FI shall process “hooked” claims to payment after the revised OPSS PRICER software containing the updated ASP drug pricing has become effective in production.	X							

III. PROVIDER EDUCATION

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)							
		FI	RH HI	C 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		

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	
	None	X								

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: NA

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

<p>Effective Date*: October 1, 2006</p> <p>Implementation Date: October 2, 2006</p> <p>Pre-Implementation Contact(s): Marina Kushnirova Marina.Kushnirova@cms.hhs.gov</p> <p>Post-Implementation Contact(s): Regional Office</p>	<p>No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.</p>
---	--

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