

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1435	Date: FEBRUARY 5, 2008
	Change Request 5902

Subject: Emergency Update to the 2008 Medicare Physician Fee Schedule Database

I. SUMMARY OF CHANGES: Payment files were issued to contractors based upon the November 1, 2007 Medicare Physician Fee Schedule Final Rule. This change request amends those payment files.

New / Revised Material

Effective Date: January 1, 2008

Implementation Date: January 7, 2008

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

Pub. 100-04	Transmittal: 1435	Date: February 5, 2008	Change Request: 5902
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SUBJECT: Emergency Update to the 2008 Medicare Physician Fee Schedule Database

Effective Date: January 1, 2008

Implementation Date: January 7, 2008

I. GENERAL INFORMATION

A. Background: Payment files were issued to contractors based upon the November 1, 2007 Medicare Physician Fee Schedule Final Rule. This change request amends those payment files.

B. Policy: Section 1848(c)(4) of the Social Security Act authorizes the Secretary to establish ancillary policies necessary to implement relative values for physicians’ services.

II. BUSINESS REQUIREMENTS TABLE

Use “Shall” to denote a mandatory requirement

Number	Requirement	Responsibility (place an “X” in each applicable column)								
		A/ B M A C	D M M A C	F I	C A R I E R	R H H I	Shared-System Maintainers			
						F I S S	M S	V M S	C W F	
5902.1	Effective for dates of service on or after January 1, 2008, contractors shall manually update their systems to reflect 5 base units for CPT code 01916.	X		X	X					
5902.2	Medicare contractors shall manually update their HCPCS file to include the laboratory certification code (LC) 400 for 89060 on or after January 1, 2008. Contractors shall not use LC code information as a reason for rejecting a claim.	X			X				X	
5902.3	Contractors shall retrieve the corrected payment files, as identified in Attachment 2, from the CMS Mainframe Telecommunications System. Files will be available for retrieval on December 19, 2007. NOTE: Contractors were informed of the	X		X	X					

Number	Requirement	Responsibility (place an "X" in each applicable column)								
		A/B M A C	D M E M A C	F I	C A R I E R	R H I	Shared-System Maintainers			
						F I S S	M C S	V M S	C W F	
	availability of these files for downloading, and the filenames, via e-mail notification on December 21, 2007.									
5902.4	Notification of successful receipt shall be sent via e-mail to price_file_receipt@cms.hhs.gov stating the name of the file received and the entity for which it was received (e.g., carrier/fiscal intermediary name and number).	X		X	X					
5902.5	CMS will send CWF two files to facilitate duplicate billing edits: 1) Purchased Diagnostic and 2) Duplicate Radiology Editing. CWF shall install these files into their systems. CWF will be notified via email when these files have been sent to them.								X	

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)								
		A/B M A C	D M E M A C	F I	C A R I E R	R H I	Shared-System Maintainers			
						F I S S	M C S	V M S	C W F	
5902.6	A provider education article related to this instruction will be available at http://www.cms.hhs.gov/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 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	X		X	X					

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A/B	D/E	F/I	C/R	A/H	Shared-System Maintainers				OTHER
		M	M		R	R	F	M	V	C	
		A	A		I	I	I	S	S	S	W
		C	C		E	E	S	S	S	F	
	Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.										

IV. SUPPORTING INFORMATION

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

Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

Section B: For all other recommendations and supporting information, use this space:

V. CONTACTS

Pre-Implementation Contact(s): Gaysha Brooks, Gaysha.Brooks@cms.hhs.gov, 410-786-9649

Post-Implementation Contact(s): Appropriate Regional Office

VI. FUNDING

Section A:

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

Section B:

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.

Attachment 1

Changes included in the Emergency Update to the 2008 Medicare Physician Fee Schedule Database (MPFSDB) are as follows:

<u>CPT/HCPCS</u>	<u>ACTION</u>
01916	Base Unit = 5.00
20931	Multiple Procedure Indicator = 0
20937	Multiple Procedure Indicator = 0
20938	Multiple Procedure Indicator = 0
22840	Multiple Procedure Indicator = 0
22842	Multiple Procedure Indicator = 0
22843	Multiple Procedure Indicator = 0
22844	Multiple Procedure Indicator = 0
22845	Multiple Procedure Indicator = 0
22846	Multiple Procedure Indicator = 0
22847	Multiple Procedure Indicator = 0
22848	Multiple Procedure Indicator = 0
22851	Multiple Procedure Indicator = 0
22862	Transitional Non-Facility PE RVU = 16.09 Fully Implemented Non-Facility PE RVU = 16.09 (Informational Only) Transitional Facility PE RVU = 16.09 Fully Implemented Facility PE RVU = 16.09 (Informational Only)
22865	Transitional Non-Facility PE RVU = 15.74 Fully Implemented Non-Facility PE RVU = 15.74 (Informational Only) Transitional Facility PE RVU = 15.74 Fully Implemented Facility PE RVU = 15.74 (Informational Only)
33517	Multiple Procedure Indicator = 0
33518	Multiple Procedure Indicator = 0

33519 Multiple Procedure Indicator = 0

33521 Multiple Procedure Indicator = 0

33522 Multiple Procedure Indicator = 0

33523 Multiple Procedure Indicator = 0

35600 Multiple Procedure Indicator = 0

67113 Work RVUs = 25.00
Transitional Non-Facility PE RVU = 13.75
Fully Implemented Non-Facility PE RVU = 13.75 (Informational Only)
Transitional Facility PE RVU = 13.75
Fully Implemented Facility PE RVU = 13.75 (Informational Only)

93503 Status Indicator = A
Work RVU = 2.91
Malpractice RVU = 0.20

99148 Multiple Procedure Indicator = 0

99149 Multiple Procedure Indicator = 0

G0392 Transitional Non-Facility PE RVU = 52.41
Fully Implemented Non-Facility PE RVU = 48.69 (Informational Only)
Transitional Facility PE RVU = 3.47
Fully Implemented Facility PE RVU = 3.39 (Informational Only)

G0393 Transitional Non-Facility PE RVU = 40.96
Fully Implemented Non-Facility PE RVU = 37.15 (Informational Only)
Transitional Facility PE RVU = 2.29
Fully Implemented Facility PE RVU = 2.23 (Informational Only)

Attachment 2
Filenames for Revised Payment Files

The revised filenames for the Emergency Update to the 2008 Medicare Physician Fee Schedule Database for carriers are:

[MU00.@BF12390.MPFS.CY08.RV1.C00000.V1214](#)

Purchased Diagnostic File

[MU00.@BF12390.MPFS.CY08.RV1.PURDIAG.V1214](#)

Alabama Blue Cross and Blue Shield

[MU00.@BF12390.MPFS.CY08.RV1.CALABS.V1214](#)

Anesthesia File

[MU00.@BF12390.MPFS.CY08.RV1.ANES.V1214](#)

ASC/FS File

[MU00.@BF12390.ASC.CY08.RV1.FS.V1214](#)

The revised filenames for the Emergency Update to the 2008 Medicare Physician Fee Schedule Database for intermediaries are:

Anesthesia File

[MU00.@BF12390.MPFS.CY08.RV1.ANES.V1214](#)

SNF Abstract File

[MU00.@BF12390.MPFS.CY08.RV1.SNF.V1214.FI](#)

Therapy/CORF Abstract File

[MU00.@BF12390.MPFS.CY08.RV1.ABSTR.V1214.FI](#)

Mammography Abstract File

[MU00.@BF12390.MPFS.CY08.RV1.MAMMO.V1214.FI](#)

Therapy/CORF Supplemental File:

[MU00.@BF12390.MPFS.CY08.RV1.SUPL.V1214.FI](#)

Hospice File

[MU00.@BF12390.MPFS.CY08.RV1.ALL.V1214.RHHI](#)