

CMS Manual System

Pub 100-04 Medicare Claims Processing

Transmittal 878

Department of Health & Human Services (DHHS)

Centers for Medicare & Medicaid Services (CMS)

Date: FEBRUARY 24, 2006

Change Request 4288

SUBJECT: Healthcare Integrated General Ledger Accounting System (HIGLAS) and 835 Implementation Guide (IG) Provider Adjustment Code Mapping and Standard Paper Remittance (SPR) Advice Changes.

I. SUMMARY OF CHANGES: This Change Request (CR) instructs the Fiscal Intermediary Standard System (FISS), the fiscal intermediaries, and the regional home health intermediaries how to map the provider adjustment codes used by HIGLAS to provider adjustment codes included in ASC X12N 835 version 004010A1.

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 – *Only One Per Row.*

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

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:

One-Time Notification

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

Attachment – One Time Notification

Pub. 100-04	Transmittal: 878	Date: February 24, 2006	Change Request 4288
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SUBJECT: Healthcare Integrated General Ledger Accounting System (HIGLAS) and 835 Implementation Guide (IG) Provider Adjustment Code Mapping and Standard Paper Remittance (SPR) Advice Changes.

I. GENERAL INFORMATION

A. Background:

Section A - HIGLAS (Healthcare Integrated General Ledger Accounting System) is the main focus of a long-term project to modernize Medicare's accounting systems. A few contractors have already transitioned to this system, and other contractors will be phased in shortly. Some of the contractors who have already transitioned to HIGLAS, reported problems identifying specific adjustments at the provider level as shown on the SPR. The underlying problem is that HIGLAS has a very detailed break down of provider level adjustments that need to be properly mapped to Health insurance Portability and Accountability Act (HIPAA) compliant provider adjustment codes (PLB codes) included in the transaction 835 version 004010A1 Implementation Guide (IG). Additionally the contractors need to know how these codes are mapped in order to offer correct explanation to provider inquiries.

The attached spreadsheet maps the HIGLAS codes to the provider adjustment codes that are currently available in the ASC X12N 835 version 004010A1 IG. The first column in the spreadsheet shows the provider codes used by HIGLAS, and the last column shows the corresponding provider codes per 004010A1 IG. The codes that are in the 835 004010A1 IG must be inserted in the Electronic Remittance Advice (ERA). The hard copy remit fields (shown in the 4th column in the attachment) will be populated with amounts associated with the corresponding HIPAA compliant PLB codes.

B. Policy: Medicare contractors must follow the X12N 835 IG to generate the HIPAA compliant ERA, and the SPR must mirror the ERA barring a few exceptions. SPRs may not provide additional or more detailed information that provided by ERAs.

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 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	
4288.1	FISS shall make necessary programming changes to crosswalk the FISS HIGLAS PLB X 01 codes to the corresponding standard PLB codes included in the ASC X12 N 004010A1 835 IG as listed in the attachment.					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				Other
						F I S S	M C S	V M S	C W F	
4288.2	<p>For the Standard Paper Remittance (SPR), FISS, fiscal intermediaries and regional home health intermediaries shall show :</p> <p>a) any “Void/Reissue” amount in the “Void/Reissue” line; b) any “Third Party Payment” in the “ Third Party Payment” line; c) any “Affiliated Withholding” in the “Affiliated Withholding” line; and d) any PIP payment in the “PIP Payment” line unless instructed otherwise</p> <p>as shown in the attachment.</p> <p>FISS shall make necessary programming changes to add separate lines for “Void/Reissue”, “Third Party Payment” and “Affiliated Withholding” in the SPR.</p>	X	X			X				
4288.3	Fiscal intermediaries and regional home health intermediaries shall use only the standard PLB codes in the HIPAA compliant ERA, and populate the SPR fields with adjustment amounts that correspond to the ERA adjustment amounts under the HIPAA PLB codes listed in the attachment.	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	
4288.4	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	X	X							

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)								
		F I	R H 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	
	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 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 and incorporated into your outreach activities, as appropriate. 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

<p>Effective Date*: July 1, 2006</p> <p>Implementation Date: July 3, 2006</p> <p>Pre-Implementation Contact(s): Sumita Sen at 410-786-5755 or sumita.sen@cms.hhs.gov</p> <p>Post-Implementation Contact(s): Sumita Sen at 410-786-5755 or sumita.sen@cms.hhs.gov</p>	<p>No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.</p>
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Attachment

Crosswalk between HIGLAS Adjustment Codes and HIPAA Provider Adjustment Codes

<u>FISS HIGLAS PLB X-01 code</u>	<u>Code Meaning</u>	<u>FISS SFSRA field</u>	<u>Hardcopy remit field</u>	<u>Comments</u>	<u>HIPAA PLB Codes</u>
AA	PIP CAP PT	RA-SM-PYMT-CAP	Pass thru amounts: Capital		CV CP
AB	non-PIP CAP PT	RA-SM-PYMT-CAP	Pass thru amounts: Capital		CV CP
AC	PIP DME PT	RA-SM-PYMT-DME	Pass thru amounts: Direct Medical Education		DM DM
AD	non-PIP DME PT	RA-SM-PYMT-DME	Pass thru amounts: Direct Medical Education		DM DM
AE	PIP Kidney PT	RA-SM-PYMT-KID	Pass thru amounts: Kidney Acquisition		OA KA
AF	non-PIP Kidney PT	RA-SM-PYMT-KID	Pass thru amounts: Kidney Acquisition		OA KA
AG	PIP Bad Debt PT	RA-SM-PYMT-BD	Pass thru amounts: Bad Debt		BD BD
AH	non-PIP Bad Debt PT	RA-SM-PYMT-BD	Pass thru amounts: Bad Debt		BD BD
AL	PIP non-Pys Anest PT	RA-SM-PYMT-NON- PHY-ANEST	Pass thru amounts: Non Physician Anesthetists		LS NP
AM	non-PIP non-Phy Anest PT	RA-SM-PYMT-NON- PHY-ANEST	Pass thru amounts: Non Physician Anesthetists		LS NP
AN	PIP ROE PT	RA-SM-PYMT-ROE	Pass thru amounts: Return on Equity		RE RE
AO	non-PIP ROE PT	RA-SM-PYMT-ROE	Pass thru amounts: Return on Equity		RE RE
AP	PIP SNF PT	RA-SM-SETTL- TENTATIVE	PIP Payment		PI PP
AQ	non-PIP SNF PT	RA-SM-SETTL- TENTATIVE	Settlement Payments		C5 TS
AS	Affiliate Withholdings - Settlement	RA-SM-WITH-SETTL	Affiliated Withholdings		OB OA
AW	Affiliate Withholdings	RA-SM-WITH-CLAIM	Affiliated Withholdings		OB OA
CV	Converted Invoices	RA-SM-PYMT-PEN- RLSE	Penalty release		L3 RS
D1	Full Hold - Unfiled Cost Report	RA-SM-WITH- PENALTY	Withhold from payments: Penalty	See MAPB8085 for variables	50 LR
D2	Full Hold - Unfiled 838	RA-SM-WITH- PENALTY	Withhold from payments: Penalty		L3 PW
D3	Full Hold - Rejected Cost Report	RA-SM-WITH- PENALTY	Withhold from payments: Penalty		L3 PW
D4	Full Hold - Failure to comply Auditors	RA-SM-WITH- PENALTY	Withhold from payments: Penalty		L3 PW
D5	Full Hold - DNF	RA-SM-WITH- PENALTY	Withhold from payments: Penalty		L3 PW
D6	Full Hold - Fraud and Abuse	RA-SM-WITH- PENALTY	Withhold from payments: Penalty		L3 PW
D7	Full Hold - Other/Misc	RA-SM-WITH- PENALTY	Withhold from payments: Penalty		L3 PW

Crosswalk between HIGLAS Adjustment Codes and HIPAA Provider Adjustment Codes

<u>FISS HIGLAS</u> <u>PLB X-01 code</u>	<u>Code Meaning</u>	<u>FISS SFSRA field</u>	<u>Hardcopy remit field</u>	<u>Comments</u>	<u>HIPAA PLB</u> <u>Codes</u>
D8	Full Hold - AP System Hold	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		L3 PW
D9	Full Hold - Terminated	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		L3 PW
DM	Debit Memo	RA-SM-WITH-SETTL	Settlement		L3 SW
DR	DNF Hold Release	RA-SM-PYMT-PEN-RLSE	Penalty release		L3 RS
FA	Full Hold - Administrative Freeze	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		L3 PW
FB	Full Hold - Bankruptcy	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		L3 PW
FC	Full Hold - CMS Request	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		L3 PW
FR	Full Hold Release	RA-SM-PYMT-PEN-RLSE	Penalty release		L3 RS
G2	Partial Hold - CMS Request	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		L3 PW
G3	Partial Hold - Bankruptcy	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		L3 PW
G4	Partial Hold - Unfiled Cost Report	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		L3 PW
G5	Partial Hold - Unfiled 838	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		L3 PW
H1	Manual Invoices - Cost Settlement Report	RA-SM-SETTL-TENTATIVE	Settlement Payments		C5 TS
HB	HPSA	special process		process and put into HPSA leg.	
IR	TPP - IRS Levy	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		IR
L1	TPP - IRS Backup	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		IR
L2	TPP - Garnishments	RA-SM-WITH-PENALTY	Third Party Payment		WU OS
L3	Third Party Payment - including Attorneys		Third Party Payment		WU OS
L4	TPP - Child Support	RA-SM-WITH-PENALTY	Third Party Payment		WU OS
L5	TPP - Alimony	RA-SM-WITH-PENALTY	Third Party Payment		WU OS
L6	TPP - Secondary Corporation	RA-SM-WITH-PENALTY	Third Party Payment		WU OS
L7	TPP - Change of Ownership	RA-SM-WITH-PENALTY	Third Party Payment		WU OS
L8	Recoupments Applications	RA-SM-WITH-ACCEL	Withhold from payments: Accelerated payments		AP AW
M1	Manual Invoices - Refunds	RA-SM-PYMT-REFUND	Refunds		72 PR
M2	Manual Invoices - Penalty Release	RA-SM-PYMT-PEN-RLSE	Penalty release		L3 RS

Crosswalk between HIGLAS Adjustment Codes and HIPAA Provider Adjustment Codes

<u>FISS HIGLAS</u> <u>PLB X-01 code</u>	<u>Code Meaning</u>	<u>FISS SFSRA field</u>	<u>Hardcopy remit field</u>	<u>Comments</u>	<u>HIPAA PLB</u> <u>Codes</u>
M3	Manual Invoices - Insurance Companies	RA-SM-SETTL-TENTATIVE	Settlement Payments		C5 TS
M4	Manual Invoices - Other	RA-SM-SETTL-TENTATIVE	Settlement Payments		C5 TS
MA	Accelerated/Advance Payment	RA-SM-PYMT-ACCEL	Accelerated payments		AP AP
MC	Manual Invoices - PIP	RA-SM-PYMT-PIP	PIP Payment		PI PP
ML	Manual Invoices - Interim Rate Review	RA-SM-SETTL-TENTATIVE	Settlement Payments		C5 TS
NA	Invoices - HI Positive Distribution	info only		Used for IBPR info but not on the remit.	
NB	Invoices - HI Negative Distribution	info only		Used for IBPR info but not on the remit.	
NC	Invoices - SMI Positive Distribution	info only		Used for IBPR info but not on the remit.	
ND	Invoices - SMI Negative Distribution	info only		Used for IBPR info but not on the remit.	
NR	Manual Invoices - PT	RA-SM-SETTL-TENTATIVE	Settlement Payments	Recent change being coded.	C5 TS
PA	Partial Hold - Admin Freeze	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		L3 PW
PO	Partial Hold - Other/Misc	RA-SM-WITH-PENALTY	Withhold from payments: Penalty		L3 PW
PP	PIP	RA-SM-PYMT-PIP	PIP Payment		PI PP
PR	Partial Hold - Release	RA-SM-PYMT-PEN-RLSE	Penalty release		L3 RS
SL	TPP - Student Loan	RA-SM-WITH-PENALTY	Third Party Payment		SL
TD	Manual Invoices - Tentative Settlement	RA-SM-SETTL-TENTATIVE	Settlement Payments		C5 TS
TL	TOPS	RA-SM-SETTL-TOPS	Trans Outp Pymt		IS IR
VC	Void - Reissue Invoices	RA-SM-SETTL-TENTATIVE	Void/Reissue		CS RT
VD	Void - Reissue Debit Memo	RA-SM-WITH-SETTL	Void/Reissue		CS RT
VO	Void - Reissue Interest Information	RA-SM-SETTL-TENTATIVE	Void/Reissue		CS RT
WO	AR/AP Netting Offset	RA-SM-WITH-CLAIM	Claims Accounts Receivable		E3 CW
WR	Void - Reissue Split Pay	RA-SM-SETTL-TENTATIVE	Void/Reissue		CS RT
WS	Settlement Withholding	RA-SM-WITH-SETTL	Withhold from payments: Settlement		L3 SW