

The CMS Quarterly Provider Update OCTOBER 2016

What's New

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12/29/2016

REGULATION(S) RELEASED

CMS-1654-CN3 entitled “Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule and Other Revisions to Part B for CY 2017; Medicare Advantage Bid Pricing Data Release; Medicare Advantage and Part D Medical Loss Ratio Data Release; Medicare Advantage Provider Network Requirements; Expansion of Medicare Diabetes Prevention Program Model; Medicare Shared Savings Program Requirements; Correction” was published. This regulation affects Physicians.

CMS-1654-CN3

12/23/2016

REGULATION(S) RELEASED

CMS-1651-CN entitled “Medicare Program; End-Stage Renal Disease Quality Incentive Program; Durable Medical Equipment, Prosthetics, Orthotics, and Supplies Competitive Bidding Program Bid Surety Bonds, State Licensure, and Appeals Process for Breach of Contract Actions; Correction” was published. This regulation affects Renal Dialysis Facilities.

CMS-1651-CN

12/22/2016

REGULATION(S) RELEASED

CMS-9934-F; CMS-9933-F entitled “Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2018; Amendments to Special Enrollment Periods and the Consumer Operated and Oriented Plan Program” was published. This regulation affects ALL Providers.

CMS-9934-F; CMS-9933-F

12/21/2016

REGULATION(S) RELEASED

CMS-6072-N entitled “Medicare Program; Implementation of Prior Authorization Process for Certain Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Items and Publication of the Initial Required Prior Authorization List of DMEPOS Items That Require Prior Authorization as a Condition of Payment” was published. This regulation affects Durable Medical Equipment, Prosthetics, Orthotics and Supplies.

CMS-6072-N

12/20/2016

REGULATION(S) RELEASED

CMS-2343-F entitled “Flexibility, Efficiency, and Modernization in Child Support Enforcement Programs” was published. This regulation affects Medicaid.

CMS-2343-F

12/16/2016

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 473 entitled “Medicare Provider Reimbursement Manual - Part 1” was published. This regulation affects Hospitals.

View the complete text of Transmittal 473

Transmittal 279 entitled “Instructions to Hospitals on the Election of a Medicare-Supplemental Security Income (SSI) Component of the Disproportionate Share (DSH) Payment Adjustment for Cost Reports that Involve SSI Ratios for Fiscal Year (FY) 2004 and earlier, or SSI Ratios for Hospital Cost-reporting Periods for Patient Discharges Occurring before October 1, 2004” was published. This regulation affects Hospitals.

View the complete text of Transmittal 279

REGULATION(S) RELEASED

CMS-5521-N entitled “Medicare Program; Start-Up Funding in Support of the Vermont All-Payer Accountable Care Organization (ACO) Model--Cooperative Agreement” was published. This regulation affects ALL Providers.

CMS-5521-N

12/14/2016

REGULATION(S) RELEASED

CMS-3337-IFC entitled “Medicare Program; Conditions for Coverage for End-Stage Renal Disease Facilities--Third Party Payment” was published. This regulation affects Renal Disease Facilities and End Stage Renal Disease.

CMS-3337-IFC

12/09/2016

REGULATION(S) RELEASED

CMS-2431-N entitled “Zika Health Care Services Program” was published. This regulation affects Medicaid.

CMS-2431-N

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 3669 entitled “HCPCS Code Update for Preventive Services” was published. This regulation affects Non Physician Practitioners and Physicians.

View the complete text of Transmittal 3669

Transmittal 689 entitled “Clarification of Certification Statement Signature and Contact Person Requirements” was published. This regulation affects Non Physician Practitioners, Physicians, Organ Procurement, Clinical Laboratory Improvement Amendments, Hospital, Hospice, Ambulance, Skilled Nursing Facilities, Religious Non-Medical Health Care Institutions, Rural Health Clinics, Renal Disease Facilities, Medicare Advantage, Outpatient Physical Therapy, Independent Diagnostic Testing Facilities, Home Health Agencies, Federally-Qualified Health Centers, Durable Medical Equipment, Prosthetics, Orthotics and Supplies, Comprehensive Outpatient Rehabilitation Facilities, Community Mental Health Centers, and Ambulatory Surgical Centers.

View the complete text of Transmittal 689

11/30/2016

REGULATION(S) RELEASED

CMS-2334-F2 entitled “Medicaid and Children's Health Insurance Programs: Eligibility Notices, Fair Hearing and Appeal Processes for Medicaid and Other Provisions Related to Eligibility and Enrollment for Medicaid and CHIP” was published. This regulation affects Medicaid.

CMS-2334-F2

CMS-2334-P2 entitled “Medicaid and Children's Health Insurance Programs: Eligibility Notices, Fair Hearing and Appeal Processes for Medicaid and Other Provisions Related to Eligibility and Enrollment for Medicaid and CHIP” was published. This regulation affects Medicaid.

CMS-2334-P2

11/23/2016

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 3666 entitled “New Waived Tests” was published. This regulation affects Clinical Diagnostic Laboratories.

View the complete text of Transmittal 3666

11/22/2016

REGULATION(S) RELEASED

CMS-2402-P entitled “Medicaid Program; The Use of New or Increased Pass-Through Payments in Medicaid Managed Care Delivery Systems” was published. This regulation affects Medicaid.

CMS-2402-P

11/18/2016

REGULATION(S) RELEASED

CMS-1654-CN2 entitled “Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule and Other Revisions to Part B for CY 2017; Medicare Advantage Bid Pricing Data Release; Medicare Advantage and Part D Medical Loss Ratio Data Release; Medicare Advantage Provider Network Requirements; Expansion of Medicare Diabetes Prevention Program Model; Medicare Shared Savings Program Requirements” was published. This regulation affects Physicians.

CMS-1654-CN2

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 1755 entitled “Brocato-Simons, Patricia 60261” was published. This regulation affects Physicians, Skilled Nursing Facilities, Rural Health Clinic, Outpatient Physical Therapy, Independent Diagnostic Testing Facilities, Home Health Agencies, Federally-Qualified Health Centers, and Ambulatory Surgical Centers.

View the complete text of Transmittal 1755

Transmittal 275 entitled “Internet Only Manual, Pub. 100-06, Chapter 3, Section 90 (Provider Liability) Revision” was published. This regulation affects ALL Providers.

View the complete text of Transmittal 275

Transmittal 3660 entitled “Remittance Advice Remark Code (RARC), Claims Adjustment Reason Code (CARC), Medicare Remit Easy Print (MREP) and PC Print Update” was published. This regulation affects Non Physician Practitioners, Physicians, Organ Procurement, Clinical Laboratory Improvement Amendments, Hospital, Hospice, Ambulance, Skilled Nursing Facilities, Religious Non-Medical Health Care Institutions, Rural Health Clinics, Renal Disease Facilities, Medicare Advantage, Outpatient Physical Therapy, Independent Diagnostic Testing Facilities, Home Health Agencies, Federally-Qualified Health Centers, Durable Medical Equipment, Prosthetics, Orthotics and Supplies, Comprehensive Outpatient Rehabilitation Facilities, Community Mental Health Centers, and Ambulatory Surgical Centers.

View the complete text of Transmittal 3660

Transmittal 3661 entitled “Remittance Advice Remark Code (RARC), Claims Adjustment Reason Code (CARC), Medicare Remit Easy Print (MREP) and PC Print Update” was published. This regulation affects Non Physician Practitioners, Physicians, Organ Procurement, Clinical Laboratory Improvement Amendments, Hospital, Hospice, Ambulance, Skilled Nursing Facilities, Religious Non-Medical Health Care Institutions, Rural Health Clinics, Renal Disease Facilities, Medicare Advantage, Outpatient Physical Therapy, Independent Diagnostic Testing Facilities, Home Health Agencies, Federally-Qualified Health Centers, Durable Medical Equipment, Prosthetics, Orthotics and Supplies, Comprehensive Outpatient Rehabilitation Facilities, Community Mental Health Centers, and Ambulatory Surgical Centers.

View the complete text of Transmittal 3661

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 3650 entitled “Updates to Pub. 100-04, Chapters 8, 13 and 14 to Correct Remittance Advice Messages” was published. This regulation affects Physicians, Non-Physician Practitioners, Hospice, Ambulatory Surgical Centers and Renal Dialysis Facilities.

[View the complete text of Transmittal 3650](#)

Transmittal 3653 entitled “FISS Implementation of the Restructured Clinical Lab Fee Schedule” was published. This regulation affects Physicians Clinical Laboratory Improvement Amendments.

[View the complete text of Transmittal 3653](#)

Transmittal 3649 entitled “Payment for Oxygen Volume Adjustments and Portable Oxygen Equipment” was published. This regulation affects Durable Medical Equipment, Prosthetics, Orthotics and Supplies.

[View the complete text of Transmittal 3649](#)

11/16/2016

REGULATION(S) RELEASED

CMS-3178-CN entitled “Medicare and Medicaid Programs; Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers; Correction” was published. This regulation affects ALL Providers.

[CMS-3178-CN](#)

11/15/2016

REGULATION(S) RELEASED

CMS-2345-IFC entitled “Medicaid Program; Covered Outpatient Drug; Delay in Change in Definitions of States and United States” was published. This regulation affects Medicaid.

[CMS-2345-IFC](#)

CMS-1654-F entitled “Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule and Other Revisions to Part B for CY 2017; Medicare Advantage Bid Pricing Data Release; Medicare Advantage and Part D Medical Loss Ratio Data Release; Medicare Advantage Provider Network Requirements; Expansion of Medicare Diabetes Prevention Program Model; Medicare Shared Savings Program Requirements” was published. This regulation affects Physicians.

[CMS-1654-F](#)

CMS-8062-N entitled “Medicare Program; CY 2017 Inpatient Hospital Deductible and Hospital and Extended Care Services Coinsurance Amounts” was published. This regulation affects Hospitals.

[CMS-8062-N](#)

CMS-8063-N entitled “Medicare Program; CY 2017 Part A Premiums for the Uninsured Aged and for Certain Disabled Individuals Who Have Exhausted Other Entitlement” was published. This regulation affects ALL Providers.

[CMS-8063-N](#)

CMS-8064-N entitled "Medicare Program; Medicare Part B Monthly Actuarial Rates, Premium Rate, and Annual Deductible Beginning January 1, 2017" was published. This regulation affects ALL Providers.

CMS-8064-N

11/14/2016

REGULATION(S) RELEASED

CMS-1656-FC & IFC entitled "Medicare Program: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs; Organ Procurement Organization Reporting and Communication; Transplant Outcome Measures and Documentation Requirements; Electronic Health Record (EHR) Incentive Programs; Payment to Nonexcepted Off-Campus Provider-Based Department of a Hospital; Hospital Value-Based Purchasing (VBP) Program; Establishment of Payment Rates Under the Medicare Physician Fee Schedule for Nonexcepted Items and Services Furnished by an Off-Campus Provider-Based Department of a Hospital" was published. This regulation affects Hospitals and Ambulatory Surgical Centers

CMS-1656-FC & IFC

CMS-9099-N entitled "Medicare and Medicaid Programs; Quarterly Listing of Program Issuances--July Through September 2016" was published. This regulation affects ALL Providers.

CMS-9099-N

11/09/2016

REGULATION(S) RELEASED

CMS-1662-N entitled "Medicare Program; Town Hall Meeting on the FY 2018 Applications for New Medical Services and Technologies Add-On Payments" was published. This regulation is a Meeting Notice.

CMS-1662-N

CMS-2397-PN entitled "Medicaid Program; Announcement of Medicaid Drug Rebate Program National Rebate Agreement" was published. This regulation affects Medicaid.

CMS-2397-PN

CMS-2404-NC entitled "Medicaid Program; Final FY 2014 and Preliminary FY 2016 Disproportionate Share Hospital Allotments, and Final FY 2014 and Preliminary FY 2016 Institutions for Mental Diseases Disproportionate Share Hospital Limits" was published. This regulation affects Medicaid.

CMS-2404-NC

11/07/2016

REGULATION(S) RELEASED

CMS-6071-N entitled "Medicare, Medicaid, and Children's Health Insurance Programs; Provider Enrollment Application Fee Amount for Calendar Year 2017" was published. This regulation affects ALL Providers.

CMS-6071-N

11/04/2016

REGULATION(S) RELEASED

CMS-1651-F entitled "Medicare Program; End-Stage Renal Disease Prospective Payment System, Coverage and Payment for Renal Dialysis Services Furnished to Individuals With Acute Kidney Injury, End-Stage Renal Disease Quality Incentive Program, Durable Medical Equipment, Prosthetics, Orthotics and Supplies Competitive Bidding Program Bid Surety Bonds, State Licensure and Appeals Process for Breach of Contract Actions, Durable Medical Equipment, Prosthetics, Orthotics and Supplies Competitive Bidding Program and Fee Schedule Adjustments, Access to Care Issues for Durable Medical Equipment; and the Comprehensive End-Stage Renal Disease Care Model" was published. This regulation affects Home Health Agencies.

CMS-1651-F

CMS-5517-FC entitled "Medicare Program; Merit-Based Incentive Payment System (MIPS) and Alternative Payment Model (APM) Incentive Under the Physician Fee Schedule, and Criteria for Physician-Focused Payment Models" was published. This regulation affects Physicians.

CMS-5517-FC

CMS-3334-P entitled "Medicare and Medicaid Programs; Fire Safety Requirements for Certain Dialysis Facilities" was published. This regulation affects Renal Dialysis Facilities and End Stage Renal Disease.

CMS-3334-P

11/01/2016

REGULATION(S) RELEASED

CMS-1648-F entitled "Medicare and Medicaid Programs; CY 2017 Home Health Prospective Payment System Rate Update; Home Health Value-Based Purchasing Model; and Home Health Quality Reporting Requirements" was published. This regulation affects Home Health Agencies.

CMS-1648-F

10/31/2016

REGULATION(S) RELEASED

CMS-9932-F entitled "Excepted Benefits; Lifetime and Annual Limits; and Short-Term, Limited-Duration Insurance" was published. This regulation affects ALL Providers.

CMS-9932-F

CMS-1655-CN3 entitled "Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2017 Rates; Quality Reporting Requirements for Specific Providers; Graduate Medical

Education; Hospital Notification Procedures Applicable to Beneficiaries Receiving Observation Services; Technical Changes Relating to Costs to Organizations and Medicare Cost Reports; Finalization of Interim Final Rules With Comment Period on LTCH PPS Payments for Severe Wounds, Modifications of Limitations on Redesignation by the Medicare Geographic Classification Review Board, and Extensions of Payments to MDHs and Low-Volume Hospitals; Correction” was published. This regulation affects Hospitals.

CMS-1655-CN3

10/28/2016

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 274 entitled “New Physician Specialty Code for Hospitalist” was published. This regulation affects Physicians.

View the complete text of Transmittal 3629

REGULATION(S) RELEASED

CMS-1661-FN entitled “Medicare Program; Approval of Request for an Exception to the Prohibition on Expansion of Facility Capacity Under the Hospital Ownership and Rural Provider Exceptions to the Physician Self-Referral Prohibition for Rockwall Regional Hospital, Limited Liability Company Doing Business as (d/b/a) Texas Health Presbyterian Hospital Rockwall” was published. This regulation affects Physician.

CMS-1661-FN

CMS-1667-FN entitled “Medicare Program; Approval of Request for an Exception to the Prohibition on Expansion of Facility Capacity Under the Hospital Ownership and Rural Provider Exceptions to the Physician Self-Referral Prohibition” was published. This regulation affects Physician.

CMS-1667-FN

10/27/2016

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 3629 entitled “Denial of Home Health Payments When Required Patient Assessment Is Not Received” was published. This regulation affects Home Health Agencies.

View the complete text of Transmittal 3629

Transmittal 3630 entitled “Correcting Editing for Condition Code 54 and Updating Remittance Advice Messages on Home Health Claims” was published. This regulation affects Home Health Agencies.

View the complete text of Transmittal 3630

Transmittal 681 entitled “Revision to Surety Bond Collection Procedures” was published. This regulation affects Durable Medical Equipment, Prosthetics, Orthotics and Supplies.

View the complete text of Transmittal 681

10/26/2016

REGULATION(S) RELEASED

CMS-4183-N entitled "Medicare Program; Listening Session Regarding the Implementation of Certain Medicare Part D Provisions in the Comprehensive Addiction and Recovery Act of 2016 (CARA)" was published. This regulation affects Meeting Notice.

CMS-4183-N

CMS-2401-N entitled "Medicaid Program; Final FY 2014 and Preliminary FY 2016 Disproportionate Share Hospital Allotments, and Final FY 2014 and Preliminary FY 2016 Institutions for Mental Diseases Disproportionate Share Hospital Limits" was published. This regulation affects Medicaid.

CMS-2401-N

10/24/2016

REGULATION(S) RELEASED

CMS-3180-N4 entitled "Program for Parallel Review of Medical Devices" was published. This regulation affects Suppliers.

CMS-3180-N4

10/14/2016

REGULATION(S) RELEASED

CMS-1659-CN entitled "Medicare Program; Explanation of FY 2004 Outlier Fixed-Loss Threshold as Required by Court Rulings; Correction" was published. This regulation affects Hospitals.

CMS-1659-CN

10/04/2016

REGULATION(S) RELEASED

CMS-3260-F entitled "Medicare and Medicaid Programs; Reform of Requirements for Long-Term Care Facilities" was published. This regulation affects Hospitals.

CMS-3260-F

10/05/2016

REGULATION(S) RELEASED

CMS-1655-F, CMS-1664-F & CMS-1632-F2 entitled "Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Policy Changes and Fiscal Year 2017 Rates; Quality Reporting Requirements for Specific Providers; Graduate Medical Education; Hospital Notification Procedures Applicable to Beneficiaries Receiving Observation Services; Technical Changes Relating to Costs to Organizations and Medicare Cost Reports; Finalization of Interim Final Rules With Comment Period on LTCH PPS Payments for Severe Wounds, Modifications of Limitations on Redesignation by the Medicare Geographic Classification Review Board, and Extensions of Payments to MDHs and Low-Volume Hospitals; Correction" was published. This regulation affects Hospitals.

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