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09/27/2013

REGULATION(S) RELEASED

CMS-6023-N3 entitled “Medicare Program; Approval of Accrediting Organization for Suppliers of Advanced Diagnostic Imaging Supplier Accreditation Program” was published. This regulation affects Suppliers.

CMS-6023-N3

CMS-4167-N entitled “Medicare Program; Medicare Appeals: Adjustment to the Amount in Controversy Threshold Amounts for Calendar Year 2014” was published. This regulation affects ALL Providers.

CMS-4167-N

CMS-3111-N entitled “Medicare, Medicaid, and CLIA Programs; Clinical Laboratory Improvement Amendments of 1988 Exemption of Laboratories by the State of Washington” was published. This regulation affects Clinical Diagnostic Laboratories and Medicaid.

CMS-3111-N

09/25/2013

REGULATION(S) RELEASED

CMS-2380-P entitled “Basic Health Program: State Administration of Basic Health Programs; Eligibility and Enrollment in Standard Health Plans; Essential Health Benefits in Standard Health Plans; Performance Standards for Basic Health Programs; Premium and Cost Sharing for Basic Health Programs; Federal Funding Process; Trust Fund and Financial Integrity” was published. This regulation affects Medicaid.

CMS-2380-P

09/23/2013

REGULATION(S) RELEASED

CMS-1443-P entitled “Medicare Program; Prospective Payment System for Federally Qualified Health Centers; Changes to Contracting Policies for Rural Health Clinics; and Changes to Clinical Laboratory Improvement Amendments of
1988 Enforcement Actions for Proficiency Testing Referral” was published. This regulation affects ALL Providers.

**CMS-1443-P**

09/20/2013

**INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE**

Transmittal 4 entitled “Updates Chapter 40, Hospital and Hospital Health Care Complex Cost Report, (Form CMS-2552-10)” was published. This regulation affects Hospitals.

[View the complete text of Transmittal 4](#)

Transmittal 2788 entitled “Ambulance Inflation Factor for CY 2014 and Productivity Adjustment” was published. This regulation affects Ambulances.

[View the complete text of Transmittal 2788](#)

Transmittal 2789 entitled “Home Health Agency Reporting Requirements for the Certifying Physician and the Physician Who Signs the Plan of Care” was published. This regulation affects Home Health Agencies.

[View the complete text of Transmittal 2789](#)

Transmittal 2792 entitled “Claims Status Category and Claim Status Codes Update” was published. This regulation affects Ambulances, Ambulatory Surgical Centers, Clinical Diagnostic Laboratories, Community Mental Health Centers, Durable Medical Equipment, Prosthetics, Orthotics and Supplies, Federally-Qualified Health Centers, Home Health Agencies, Hospices, Hospitals, Independent Diagnostic Testing Facilities, Medicare Advantage, Non-Physician Practitioners, Organ Procurements, Outpatient Physical Therapy, Physicians, Renal Dialysis Facilities, Rural Health Clinics, and Skilled Nursing Facilities.

[View the complete text of Transmittal 2792](#)

Transmittal 2793 entitled “Quarterly Update for the Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS) Competitive Bidding Program (CBP) – January 2014” was published. This regulation affects Durable Medical Equipment, Prosthetics, Orthotics and Supplies.

[View the complete text of Transmittal 2793](#)

**REGULATION(S) RELEASED**

CMS-3287-PN entitled “Medicare and Medicaid Programs; Application from the Compliance Team for Initial CMS-Approval of its Rural Health Clinic Accreditation Program” was published. This regulation affects Rural Health Clinics.

**CMS-3287-PN**

CMS-6054-IFC entitled “Medicare Program; Obtaining Final Medicare Secondary Payer Conditional Payment Amounts via Web Portal” was published. This regulation affects ALL Providers.

**CMS-6064-IFC**

09/18/2013

**REGULATION(S) RELEASED**

CMS-2367-PN entitled “Medicaid Program; State Disproportionate Share Hospital Allotment Reductions” was published. This regulation affects Medicaid.
REGULATION(S) RELEASED

CMS-9953-PN entitled “Health Insurance Exchanges; Application by the Accreditation Association for Ambulatory Health Care To Be a Recognized Accrediting Entity for the Accreditation of Qualified Health Plans” was published. This regulation affects ALL Providers.

09/06/2013

REGULATION(S) RELEASED

CMS-1601-CN entitled “Medicare and Medicaid Programs: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs; Hospital Value-Based Purchasing Program; Organ Procurement Organizations; Quality Improvement Organizations; Electronic Health Records (EHR) Incentive Program; Provider Reimbursement Determinations and Appeals; Correction and Limited Extension of Comment Period” was published. This regulation affects Hospitals and Ambulatory Surgical Centers.

08/30/2013

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 90 entitled “State Operations Manual chapter 2, section 2256A, CAH Distance Criteria” was published. This regulation affects Hospitals.

Transmittal 2776 entitled “Remittance Advice Remark and claims Adjustment Reason Code and Medicare Remit Easy Print and PC Print Update” was published. This regulation affects ALL Providers.

Transmittal 2778 entitled “Fiscal Year (FY) 2014 Inpatient Prospective Payment System (IPPS) and Long Term Care Hospitals (LTCH) PPS Changes” was published. This regulation affects Hospitals.

REGULATION(S) RELEASED

CMS-9957-F entitled “Patient Protection and Affordable Care Act; Program Integrity: Exchange, SHOP, and Eligibility Appeals” was published. This regulation affects ALL Providers.

CMS-7030-N entitled “Medicare, Medicaid, and Children’s Health Insurance Programs; Meeting of the Advisory Panel on Outreach and Education” was published. This regulation is a Meeting Notice.
08/28/2013

REGULATION(S) RELEASED

CMS-3281-FN entitled "Medicare and Medicaid Programs: Continued Approval of American Osteopathic Association/Healthcare Facilities Accreditation Program (AOA/HFAP’s) Hospital Accreditation Program" was published. This regulation affects Hospitals.

CMS-3281-FN

08/19/2013

REGULATION(S) RELEASED

CMS-1599-F; CMS-1455-F entitled "Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Fiscal Year 2014 Rates; Quality Reporting Requirements for Specific Providers; Hospital Conditions of Participation; Payment Policies Related to Patient Status" was published. This regulation affects Hospitals.

CMS-1599-F; CMS-1455-F

08/16/2013

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 483 entitled “Reassignment to Part A Critical Access Hospitals (CAHs), Federally Qualified Health Centers (FQHCs), and Rural Health Clinics (RHCs)” was published. This regulation affects Federally-Qualified Health Centers, Hospitals, and Rural Health Clinics.

View the complete text of Transmittal 483

Transmittal 1280 entitled “Ambulatory Surgical Center Quality Reporting (ASCQR) Program Payment Reduction (MIEA-TRCHA 2006) - Implementation” was published. This regulation affects ALL Providers.

View the complete text of Transmittal 1280

Transmittal 1281 entitled “Implement Operating Rules – Phase III ERA: CORE 360 Uniform Use of Claim Adjustment Reason Codes (CARC) and Remittance Advice Remark Codes (RARC) Rule - Update” was published. This regulation affects ALL Providers.

View the complete text of Transmittal 1281

Transmittal 2765 entitled “Diagnosis Code Reporting on Religious Nonmedical Health Care Institution Claims” was published. This regulation affects Religious Non-Medical Health Care Institutions.

View the complete text of Transmittal 2765

Transmittal 2766 entitled “Update to Hospice Payment Rates, Hospice Cap, Hospice Wage Index, Quality Reporting Program and the Hospice Pricer for FY 2014” was published. This regulation affects Hospices.

View the complete text of Transmittal 2766

Transmittal 2768 entitled “Update – Inpatient Psychiatric Facilities Prospective Payment System (IPF PPS) Fiscal Year (FY) 2014” was published. This regulation affects Hospitals.
View the complete text of Transmittal 2768

Transmittal 2769 entitled “Inpatient Rehabilitation (IRF) Annual Update: Prospective Payment (PPS) Pricer Changes for FY 2014” was published. This regulation affects Hospitals.

View the complete text of Transmittal 2769

Transmittal 2770 entitled “October 2013 Update of the Ambulatory Surgery Center (ASC) Payment System” was published. This regulation affects Ambulatory Surgical Centers.

View the complete text of Transmittal 2770

08/12/2013

REGULATION(S) RELEASED

CMS-1590-CN entitled “Medicare Program; Revisions to Payment Policies Under the Physician Fee Schedule, DME Face-to-Face Encounters, Elimination of the Requirement for Termination of Non-Random Prepayment Complex Medical Review and Other Revisions to Part B for CY 2013” was published. This regulation affects Physicians.

CMS-1590-CN

08/09/2013

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 2758 entitled “Mandatory Reporting of an 8-Digit Clinical Trial Number on Claims” was published. This regulation affects Ambulatory Surgical Centers, Comprehensive Outpatient Rehabilitation Facilities, Durable Medical Equipment, Prosthetics, Orthotics and Supplies, Hospitals, Medicare Advantage, Non-Physician Practitioners, Outpatient Physical Therapy, Physicians, Renal Dialysis Facilities and Rural Health Clinics.

View the complete text of Transmittal 2758

REGULATION(S) RELEASED

CMS-5506-N3 entitled “Medicare Program; Comprehensive ESRD Care Initiative; Extension of the Submission Deadlines for the Letters of Intent and Applications” was published. This regulation affects Renal Dialysis Facilities.

CMS-5506-N3

08/07/2013

REGULATION(S) RELEASED

CMS-1449-F entitled “Medicare Program; FY 2014 Hospice Wage Index and Payment Rate Update; Hospice Quality Reporting Requirements; and Updates on Payment Reform” was published. This regulation affects Hospices.

CMS-1449-F

CMS-3284-N entitled “Medicare Program; Revised Process for Making National Coverage Determinations” was published. This regulation affects ALL Providers.

CMS-3284-N

08/06/2013
REGULATION(S) RELEASED

CMS-1446-F entitled “Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities for FY 2014” was published. This regulation affects Skilled Nursing Facilities.

REGULATION(S) RELEASED

CMS-1448-F entitled “Medicare Program; Inpatient Rehabilitation Facility Prospective Payment System for Federal Fiscal Year 2014” was published. This regulation affects Hospitals.

08/02/2013

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 2750 entitled “Positron Emission Tomography” was published. This regulation affects Hospices.

View the complete text of Transmittal 2750

Transmittal 2754 entitled “October Update to the CY 2013 Medicare Physician Fee Schedule Database (MPFSDB)” was published. This regulation affects Non-Physician Practitioners and Physicians.

View the complete text of Transmittal 2754

08/01/2013

REGULATION(S) RELEASED

CMS-1447-N entitled “Medicare Program; Inpatient Psychiatric Facilities Prospective Payment System—Update for Fiscal Year Beginning October 1, 2013 (FY 2014)” was published. This regulation affects Hospitals.

REGULATION(S) RELEASED

CMS-6048-N entitled “Medicare, Medicaid and Children’s Health Insurance Programs; Announcement of Temporary Moratoria on Enrollment of Ambulances Suppliers and Providers and Home Health Agencies in Designated Geographic Areas” was published. This regulation affects Home Health Agencies and Suppliers.

07/31/2013

REGULATION(S) RELEASED

07/26/2013

INSTRUCTION(S) RELEASED

Transmittal 1262 entitled “Informational Unsolicited Response (IUR) or Reject for Add-On Codes billed without respective Primary Codes” was published. This regulation affects Hospitals.

View the complete text of Transmittal 1262
INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 1264 entitled “Addition of the End Stage Renal Disease (ESRD) Facilities Located in the Pacific Rim to the ESRD Prospective Payment System (PPS)” was published. This regulation affects Renal Dialysis Facilities.

View the complete text of Transmittal 1264

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 2739 entitled “New Claim Adjustment Reason Code (CARC) to Identify a Reduction in Federal Spending Due to Sequestration” was published. This regulation affects ALL Providers.

View the complete text of Transmittal 2739

Transmittal 2743 entitled “Coding Changes to Ultrasound Diagnostic Procedures for Transesophageal Doppler” was published. This regulation affects Hospitals.

View the complete text of Transmittal 2743

Transmittal 2747 entitled “Additional Data reporting Requirements for Hospice Claims” was published. This regulation affects Hospices.

View the complete text of Transmittal 2747

REGULATION(S) RELEASED

CMS-2388-N entitled “Children's Health Insurance Program (CHIP); Final Allotments to States, the District of Columbia, and U.S. Territories and Commonwealths for Fiscal Year 2013” was published. This regulation affects Medicaid.

CMS-2388-N

CMS-2342-N entitled “Medicaid Program; Disproportionate Share Hospital Allotments and Institutions for Mental Diseases Disproportionate Share Hospital Limits for FY 2012, and Preliminary FY 2013 Disproportionate Share Hospital Allotments and Limits” was published. This regulation affects Medicaid.

CMS-2342-N

CMS-2387-N entitled “Medicaid Program; State Allotments for Payment of Medicare Part B Premiums for Qualifying Individuals (QIs): Federal Fiscal Years 2012 and 2013” was published. This regulation affects Medicaid.

CMS-2387-N

CMS-3280-FN entitled “Medicare and Medicaid Programs; Initial Approval of Center for Improvement in Healthcare Quality's (CIHQ's) Hospital Accreditation Program” was published. This regulation affects Hospitals.

CMS-3280-FN

CMS-9080-N entitled “Medicare and Medicaid Programs; Quarterly Listing of Program Issuances--April Through June 2013” was published. This regulation affects Other CMS Business.

CMS-9080-N

07/22/2013

REGULATION(S) RELEASED
CMS-4173-CN entitled “Medicare Program; Medical Loss Ratio Requirements for the Medicare Advantage and the Medicare Prescription Drug Benefit Programs; Correction” was published. This regulation affects ALL Providers and Medicare Advantage.

**CMS-4173-CN**

07/19/2013

**REGULATION(S) RELEASED**

CMS-1600-P entitled “Medicare Program; Revisions to Payment Policies under the Physician Fee Schedule, Clinical Laboratory Fee Schedule & Other Revisions to Part B for CY 2014” was published. This regulation affects Physicians.

**CMS-1600-P**

CMS-1601-P entitled “Medicare and Medicaid Programs; Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs; Hospital Value-Based Purchasing Program; Organ Procurement Organizations; Quality Improvement Organizations; Electronic Health Records (EHR) Incentive Program; Provider Reimbursement Determinations and Appeals” was published. This regulation affects Ambulatory Surgical Centers and Hospitals.

**CMS-1601-P**

**INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE**

Transmittal 85 entitled “Federal Qualified Health Center (FQHC) Medicare Participation” was published. This regulation affects Hospitals.

[View the complete text of Transmittal 85](#)

Transmittal 86 entitled “Revisions to State Operations Manual (SOM) Chapter 5” was published. This regulation affects Hospitals.

[View the complete text of Transmittal 86](#)

Transmittal 87 entitled “Revised Appendix A, Interpretive Guidelines for Hospitals, Condition of Participation: Discharge Planning” was published. This regulation affects Hospitals.

[View the complete text of Transmittal 87](#)

07/17/2013

**REGULATION(S) RELEASED**

CMS-2334-F2; CMS-9955-F entitled “Patient Protection and Affordable Care Act; Exchange Functions; Standards for Navigators and Non-Navigator Assistance Personnel; Consumer Assistance Tools and Programs of an Exchange and Certified Application Counselors” was published. This regulation affects ALL Providers.

**CMS-2334-F2; CMS-9955-F**

CMS-5506-N2 entitled “Medicare Program; Comprehensive ESRD Care Initiative; Extension of the Submission Deadlines for the Letters of Intent and Applications” was published. This regulation affects Renal Dialysis Facilities.

**CMS-5506-F2**
07/15/2013

REGULATION(S) RELEASED

CMS-2334-F entitled “Medicaid and Children's Health Insurance Programs: Essential Health Benefits in Alternative Benefit Plans, Eligibility Notices, Fair Hearing and Appeal Processes, and Premiums and Cost Sharing; Exchanges: Eligibility and Enrollment” was published. This regulation affects Medicaid.

07/11/2013

INSTRUCTION(S) RELEASED – MID-QUARTER RELEASE

Transmittal 223 entitled “Notice of New Interest Rate for Medicare Overpayments and Underpayments – 4th qtr Notification for FY 2013” was published. This regulation affects Non-Physician Practitioners.

07/09/2013

REGULATION(S) RELEASED

CMS-1450-CN entitled “Medicare and Medicaid Programs; Home Health Prospective Payment System Rate Update for CY 2014, Home Health Quality Reporting Requirements, and Cost Allocation of Home Health Survey Expenses Correction” was published. This regulation affects Home Health Agencies.

07/08/2013

REGULATION(S) RELEASED

CMS-1526-P entitled “Medicare Program; End-Stage Renal Disease Prospective Payment System, Quality Incentive Program, and Durable Medical Equipment, Prosthetics, Orthotics, and Supplies; Proposed Rule” was published. This regulation affects Durable Medical Equipment, Prosthetics, Orthotics and Supplies.

07/03/2013

REGULATION(S) RELEASED

CMS-1450-P entitled “Medicare and Medicaid Programs; Home Health Prospective Payment System Rate Update for CY 2014, Home Health Quality Reporting Requirements, and Cost Allocation of Home Health Survey Expenses” was published. This regulation affects Home Health Agencies.

07/02/2013

REGULATION(S) RELEASED
CMS-1459-CN entitled “Medicare Program; Notification of Closure of Teaching Hospitals and Opportunity To Apply for Available Slots; Correction” was published. This regulation affects Hospitals. 

View CMS-1459-CN

CMS-9968-F entitled “Coverage of Certain Preventive Services Under the Affordable Care Act” was published. This regulation affects ALL Providers. 

View CMS-9968-F

07/01/2013

REGULATION(S) RELEASED

CMS-9958-F entitled “Patient Protection and Affordable Care Act; Exchange Functions: Eligibility for Exemptions; Miscellaneous Minimum Essential Coverage Provisions” was published. This regulation affects ALL Providers. 

View CMS-9958-F

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