

Quarterly Provider Update-Regulations
October 1- December 30, 2012

Key:

ASCs-Ambulatory Surgical Centers
 CMHCs-Community Mental Health Centers
 OPO-Organ Procurement Organization
 CORF-Comprehensive Outpatient Rehabilitation Facility
 DME-Durable Medical Equipment
 FQHC-Federally Qualified Health Center

HHA-Home Health Agency
 MA-Medicare Advantage
 OPT-Outpatient Physical Therapy
 RHCs-Rural Health Clinics
 SNF-Skilled Nursing Facility

File Code	Subject	Issue or Publication Date	Provider Type
CMS-0040-CN	Administrative Simplification: Adoption of a Standard for a Unique Health Plan Identifier; Addition to the National Provider Identifier Requirements; and a Change to the Compliance Date for the International Classification of Diseases, 10th Edition (ICD-10-CM and ICD-10-PCS) Medical Data Code Sets; Corrections	10/04/2012	ALL Providers
CMS-0044-CN2	Medicare and Medicaid Programs; Electronic Health Record Incentive Program-- Stage 2; Corrections	10/23/2012	ALL Providers
CMS-9075-N	Medicare and Medicaid Programs; Quarterly Listing of Program Issuances--July through September 2012	11/09/2012	ALL Providers
CMS-8046-N	Medicare Program; Inpatient Hospital Deductible and Hospital and Extended Care Services Coinsurance Amounts for CY 2013	11/21/2012	ALL Providers
CMS-8048-N	Medicare Program; Medicare Part B Monthly Actuarial Rates, Premium Rate, and Annual Deductible Beginning January 1, 2013	11/21/2012	ALL Providers
CMS-8047-N	Medicare Program; Part A Premiums for CY 2013 for the Uninsured Aged and for Certain Disabled Individuals Who Have Exhausted Other Entitlement	11/21/2012	ALL Providers
CMS-9961-N	Recognition of Entities for the Accreditation of Qualified Health Plans	11/23/2012	ALL Providers
CMS-9979-P	Incentives for Nondiscriminatory Wellness Programs in Group Health Plans	11/26/2012	ALL Providers
CMS-9972-P	Patient Protection and Affordable Care Act; Health Insurance Market Rules; Rate Review	11/26/2012	ALL Providers
CMS-9980-P	Patient Protection and Affordable Care Act; Standards Related to Essential Health Benefits, Actuarial Value, and Accreditation	11/26/2012	ALL Providers
CMS-9962-NC	Request for Information Regarding Health Care Quality for Exchanges	11/27/2012	ALL Providers
CMS-6044-N	Medicare, Medicaid, and Children's Health Insurance Programs; Provider Enrollment Application Fee Amount for Calendar Year 2013	11/30/2012	ALL Providers
CMS-9964-P	Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2014	12/07/2012	ALL Providers
CMS-0046-IFC	Health Information Technology: Revisions to the 2014 Edition Electronic Health	12/07/2012	ALL Providers

Last Updated 12/14/2012

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File Code	Subject	Issue or Publication Date	Provider Type
	Record Certification Criteria; and Medicare and Medicaid Programs; Revisions to the Electronic Health Record Incentive Program		
CMS-3262-FN	Medicare and Medicaid Programs; Approval of the American Association for Accreditation of Ambulatory Surgery Facilities (AAAASF) for Continuing CMS Approval of Its Ambulatory Surgical Center Accreditation Program	11/26/2012	ASC
CMS-3265-FN	Medicare and Medicaid Programs; Approval of the Accreditation Association for Ambulatory Health Care (AAAHC) Application for Continuing CMS Approval of Its Ambulatory Surgical Center Accreditation Program	11/27/2012	ASC
CMS-1352-F	Medicare Program; End-Stage Renal Disease Prospective Payment System, Quality Incentive Program, and Bad Debt Reductions for All Medicare Providers	11/09/2012	ESRD
CMS-1358-F	Medicare Program; Home Health Prospective Payment System Rate Update for Calendar Year 2013, Hospice Quality Reporting Requirements, and Survey and Enforcement Requirements for Home Health Agencies	11/08/2012	HHA
CMS-3266-FN	Medicare and Medicaid Programs; Approval of the Community Health Accreditation Program for Continued Deeming Authority for Hospices	10/19/2012	Hospice
CMS-1453-NC	Medicare and Medicaid Programs; Announcement of Application From Hospital Requesting Waiver for Organ Procurement Service Area	10/04/2012	Hospital
CMS-1588-CN2	Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Fiscal Year 2013 Rates; Hospitals' Resident Caps for Graduate Medical Education Payment Purposes; Quality Reporting Requirements for Specific Providers and for Ambulatory Surgical Centers; Correction	10/03/2012	Hospital
CMS-1588-F2	Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Fiscal Year 2013 Rates; Hospitals' Resident Caps for Graduate Medical Education Payment Purposes; Quality Reporting Requirements for Specific Providers and for Ambulatory Surgical	10/17/2012	Hospital

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File Code	Subject	Issue or Publication Date	Provider Type
	Centers; Correcting Amendment		
CMS-1589-FC	Medicare and Medicaid Programs: Hospital Outpatient Prospective Payment and Ambulatory Surgical Center Payment Systems and Quality Reporting Programs; Electronic Reporting Pilot; Inpatient Rehabilitation Facilities Quality Reporting Program; Revision to Quality Improvement Organization Regulations	11/15/2012	Hospital
CMS-1588-CN3	Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long Term Care Hospital Prospective Payment System and Fiscal Year 2013 Rates; Hospitals' Resident Caps for Graduate Medical Education Payment Purposes; Quality Reporting Requirements for Specific Providers and for Ambulatory Surgical Centers; Corrections	10/29/2012	Hospital
CMS-1597-N	Medicare Program; Semi-Annual Meeting of the Advisory Panel on Hospital Outpatient Payment (HOP Panel)--March 11 and 12, 2013	11/26/2012	Hospital
CMS-4169-NC	Medicare Program; Request for Information To Aid in the Design and Development of a Survey Regarding Patient Experiences With Emergency Department Care	12/03/2012	Hospital
CMS-2370-CN	Medicaid Program; Payments for Services Furnished by Certain Primary Care Physicians and Charges for Vaccine Administration Under the Vaccines for Children Program; Correction	12/14/2012	Medicaid
CMS-3275-N	Medicare Program; Meeting of the Medicare Evidence Development and Coverage Advisory Committee--January 30, 2013	10/24/2012	Meeting Notice
CMS-1437-N	Medicare Program; Town Hall Meeting on FY 2014 Applications for New Medical Services and Technology Add-On Payments	11/23/2012	Meeting Notice
CMS-7026-N	Medicare, Medicaid, and Children's Health Insurance Programs; Meeting of the Advisory Panel on Outreach and Education (APOE), December 18, 2012	11/27/2012	Meeting Notice
CMS-2370-F	Medicaid Program; Payments for Services Furnished by Certain Primary Care Physicians and Charges for Vaccine Administration Under the Vaccines for Children Program	11/06/2012	Non-Physician Practitioner

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CMS-1590-FC	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	11/16/2012	Non-Physician Practitioner
CMS-2370-F	Medicaid Program; Payments for Services Furnished by Certain Primary Care Physicians and Charges for Vaccine Administration Under the Vaccines for Children Program	11/06/2012	Physician
CMS-1590-FC	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	11/16/2012	Physician
CMS-1590-FC	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	11/16/2012	Suppliers