

**Quarterly Provider Update-Regulations
July 1 – September 30, 2011**

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
 ESRD – End Stage Renal Disease

File Code	Subject	Issue or Publication Date	Provider Type
CMS-0032-IFC	Administrative Simplification: Adoption of Operating Rules for Eligibility for a Health Plan and Health Care Claim Status Transactions	07/08/2011	ALL Providers
CMS-5058-N	Medicare Program; Section 3113: The Treatment of Certain Complex Diagnostic Laboratory Tests Demonstration	07/05/2011	ALL Providers
CMS-9975-P	Patient Protection and Affordable Care Act; Standards Related to Reinsurance, Risk Corridors and Risk Adjustment	07/15/2011	ALL Providers
CMS-9983-P	Patient Protection and Affordable Care Act; Establishment of Consumer Operated and Oriented Plan (CO-OP) Program	07/20/011	ALL Providers
CMS-9989-P	Patient Protection and Affordable Care Act; Establishment of Exchanges and Qualified Health Plans	07/15/2011	ALL Providers
CMS-9993-CN	Group Health Plans and Health Insurance Issuers: Rules Relating to Internal Claims and Appeals and External Review Processes; Correction	07/26/2011	ALL Providers
CMS-9992-IFC2	Group Health Plans and Health Insurance Issuers Relating to Coverage of Preventive Services Under the Patient Protection and Affordable Care Act	08/03/2011	ALL Providers
CMS-9066-NC	Medicare and Medicaid Programs; Quarterly Listing of Program Issuances--January Through March 2011 and Proposal for Future Notices	08/08/2011	ALL Providers
CMS-5058-N2	Medicare Program; Section 3113: The Treatment of Certain Complex Diagnostic Laboratory Tests Demonstration; Extension of the Deadline for Submission of Supporting Information	08/10/2011	ALL Providers
CMS-9974-P	Patient Protection and Affordable Care Act; Exchange Functions in the Individual Market: Eligibility Determinations; Exchange Standards for Employers	08/17/2011	ALL Providers
CMS-9982-NC	Summary of Benefits and Coverage and Uniform Glossary--Templates, Instructions, and Related Materials Under the Public Health Service Act	08/22/2011	ALL Providers

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CMS-9982-P	Summary of Benefits and Coverage and the Uniform Glossary	08/22/2011	ALL Providers
CMS-5504-N	Bundled Payments for Care Improvement Initiative: Request for Applications	08/25/2011	ALL Providers
CMS- 4138-F	Medicare Program; Medicare Advantage and Prescription Drug Benefit Programs	09/01/2011	ALL Providers
CMS-9999-F	Rate Increase Disclosure and Review: Definitions of “Individual Market” and “Small Group Market”	09/06/2011	ALL Providers
CMS-3248-F	Medicare Program; Changes to the Electronic Prescribing (eRx) Incentive Program	09/06/2011	ALL Providers
CMS-9980-NC	Request for Information Regarding State Flexibility To Establish a Basic Health Program Under the Affordable Care Act	09/14/2011	ALL Providers
CMS-4152-N	Medicare Program; Medicare Appeals; Adjustment to the Amount in Controversy Threshold Amounts for Calendar Year 2012	09/23/2011	ALL Providers
CMS-9989-N2	Patient Protection and Affordable Care Act; Establishment of Exchanges and Qualified Health Plans, and Standards Related to Reinsurance, Risk Corridors and Risk Adjustment; Extension of Comment Period	09/30/2011	ALL Providers
CMS-1577-P	Medicare Program; Changes to the End-Stage Renal Disease Prospective Payment System for CY 2012, End-Stage Renal Disease Quality Incentive Program for PY 2013 and PY 2014; Ambulance Fee Schedule; and Durable Medical Equipment	07/08/2011	Ambulance
CMS-1525-P	Medicare and Medicaid Programs: Hospital Outpatient Prospective Payment; Ambulatory Surgical Center Payment; Hospital Value-Based Purchasing Program; Physician Self-Referral; and Provider Agreement Regulations on Patient Notification Requirements	07/18/2011	ASC
CMS-2319-P	CLIA Program and HIPAA Privacy Rule; Patients' Access to Test Reports	09/14/2011	CLIA

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CMS-1577-P	Medicare Program; Changes to the End-Stage Renal Disease Prospective Payment System for CY 2012, End-Stage Renal Disease Quality Incentive Program for PY 2013 and PY 2014; Ambulance Fee Schedule; and Durable Medical Equipment	07/08/2011	DME
CMS-1577-P	Medicare Program; Changes to the End-Stage Renal Disease Prospective Payment System for CY 2012, End-Stage Renal Disease Quality Incentive Program for PY 2013 and PY 2014; Ambulance Fee Schedule; and Durable Medical Equipment	07/08/2011	ESRD
CMS 2348-P	Medicaid Program; Face-to-Face Requirements for Home Health Services; Policy Changes and Clarifications Related to Home Health	07/12/2011	HHA
CMS-1353-P	Medicare Program; Home Health Prospective Payment System Rate Update for Calendar Year 2012	07/12/2011	HHA
CMS-2377-PN	Medicare and Medicaid Programs; Application by Community Health Accreditation Program for Continued Deeming Authority for Home Health Agencies	09/23/2011	HHA
CMS-1355-CN	Medicare Program; Hospice Wage Index for Fiscal Year 2012; Correction	07/22/2011	Hospice
CMS-1355-F	Medicare Program; Hospice Wage Index for Fiscal Year 2012	08/04/2011	Hospice
CMS-1518-CN2	Medicare Program; Proposed Changes to the Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Fiscal Year 2012 Rates; Corrections	07/13/2011	Hospital
CMS-1525-P	Medicare and Medicaid Programs: Hospital Outpatient Prospective Payment; Ambulatory Surgical Center Payment; Hospital Value-Based Purchasing Program; Physician Self-Referral; and Provider Agreement Regulations on Patient Notification Requirements	07/18/2011	Hospital
CMS-3239-CN	Medicare Program; Hospital Inpatient Value-Based Purchasing Program; Correction	07/05/2011	Hospital

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CMS-1349-F	Medicare Program; Inpatient Rehabilitation Facility Prospective Payment System for Federal Fiscal Year 2012; Changes in Size and Square Footage of Inpatient Rehabilitation Units and Inpatient Psychiatric Units	08/05/2011	Hospital
CMS-1518-F; CMS-1430-F	Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and FY 2012 Rates; Hospitals' FTE Resident Caps for Graduate Medical Education Payment	08/18/2011	Hospital
CMS-1587-N2	Medicare Program; Notification of Closure of St. Vincent's Medical Center; Extension of the Deadline for Submission of Applications	09/09/2011	Hospital
CMS-2375-FN	Medicare and Medicaid Programs; Approval of the Joint Commission's Continued Deeming Authority for Critical Access Hospitals	09/23/2011	Hospital
CMS-1349-CN	Medicare Program; Inpatient Rehabilitation Facility Prospective Payment System for Federal Fiscal Year 2012; Changes in Size and Square Footage of Inpatient Rehabilitation Units and Inpatient Psychiatric Units; Correction	09/26/2011	Hospital
CMS-1518-CN3	Medicare Program; Hospital Inpatient Prospective Payment Systems for Acute Care Hospitals and the Long-Term Care Hospital Prospective Payment System and Fiscal Year 2012 Rates; Hospitals' FTE Resident Caps for Graduate Medical Education Payment; Corrections	09/26/2011	Hospital
CMS- 4138-F	Medicare Program; Medicare Advantage and Prescription Drug Benefit Programs	09/01/2011	MA
CMS 2348-P	Medicaid Program; Face-to-Face Requirements for Home Health Services; Policy Changes and Clarifications Related to Home Health	07/12/2011	Medicaid
CMS-2292-P	Medicaid and Children's Health Insurance Programs; Disallowance of Claims for FFP and Technical Corrections	08/03/2011	Medicaid
CMS-2349-P	Medicaid Program; Eligibility Changes Under the Affordable Care Act of 2010	08/17/2011	Medicaid
CMS-6034-F	Medicaid Program; Recovery Audit Contractors	09/16/2011	Medicaid

Last Updated 09/30/2011

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CMS-3251-N	Medicare Program; Meeting of the Medicare Evidence Development and Coverage Advisory Committee--September 21, 2011	07/22/2011	Meeting Notice
CMS-3251-N2	Medicare Program; Meeting of the Medicare Evidence Development and Coverage Advisory Committee; Cancellation of the September 21, 2011 Meeting	08/26/2011	Meeting Notice
CMS-3252-N	Medicare Program; Meeting of the Medicare Evidence Development and Coverage Advisory Committee--November 9, 2011	08/26/2011	Meeting Notice
CMS-3143-NC	Medicare Program; Evaluation Criteria and Standards for Quality Improvement Program Contracts (10th Statement of Work)	08/03/2011	Other
CMS-1524-P	Medicare Program; Payment Policies Under the Physician Fee Schedule and Other Revisions to Part B for CY 2012	07/19/2011	Physician
CMS-1525-P	Medicare and Medicaid Programs: Hospital Outpatient Prospective Payment; Ambulatory Surgical Center Payment; Hospital Value-Based Purchasing Program; Physician Self-Referral; and Provider Agreement Regulations on Patient Notification Requirements	07/18/2011	Physician
CMS-5502-N2	Medicare Program; Accountable Care Organization Accelerated Development Learning Sessions; Center for Medicare and Medicaid Innovation, September 15th and 16th, 2011	08/12/2011	Physician
CMS-1351-F	Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities for FY 2012	08/08/2011	SNF
CMS-1351-CN	Medicare Program; Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities for FY 2012; Correction	09/26/2011	SNF