



Skilled Nursing Facility (SNF) Claims Processing Updates

MLN Matters Number: MM12344 **Revised** Related Change Request (CR) Number: 12344
Related CR Release Date: **November 4, 2021** Effective Date: January 1, 2022
Related CR Transmittal Number: **R11109CP** Implementation Date: January 3, 2022

Note: We revised this Article to reflect a revised CR 12344. The CR added a note that is on page 1 in this Article (red font). We also changed the CR release date, transmittal number, and the web address of the CR. All other information is the same.

Provider Types Affected

This MLN Matters Article is for SNFs submitting Type of Bill (TOB) 21X and hospitals submitting TOB 18X to Medicare Administrative Contractors (MACs).

Provider Action Needed

This Article tells you about updates to SNF edits to bypass services related to an emergency room encounter when there is a revenue code of 250 on the same claim. CR 12344 also updates certain Fiscal Intermediary Shared System (FISS) and Common Working File (CWF) edits for overlapping claims when there is a no-pay hospital claim during an interrupted stay. Make sure your billing staff knows about these changes.

Background

[CR 12344](#) implements changes to correct claims processing edits applicable to the FISS and CWF. The changes also correct hospital overlap edits when billing during an interrupted stay where CMS denied the hospital claim or rejected and you submitted ancillary claim. With these changes, your MAC will allow:

- An emergency room claim (13X TOB with revenue code 45X) to fall within a covered SNF Part A or Swing Bed Stay when revenue code 250 is also present. This is regardless of the line-item date of service (LIDOS) when there is also a covered TOB 21X with Occurrence Span Code (OSC) 74 (**Note: The Outpatient dates of service is within the posted SNF claim in history and either within the Occurrence Span code '74' dates or plus one day**)
- Outpatient claims (TOB13X and 85X) with revenue code 51X and an Evaluation and Management (E&M) HCPCS code in the range of 99201-99245 and E&M code G0463,

regardless of LIDOS, when there is also a covered TOB 21X with OSC 74, effective January 1, 2014

- Payment for SNF and Swing Bed claims you submit on TOB 21X after a TOB 110 during an interrupted stay
- An ancillary claim (TOB 12x) or outpatient claim (TOB 13X) during an interrupted stay where you bill the outpatient claim following a noncovered inpatient claim

More Information

We issued [CR 12344](#) to your MAC as the official instruction for this change. The CR makes no policy changes.

For more information, [find your MAC's website](#).

Document History

Date of Change	Description
November 5, 2021	We revised this Article to reflect a revised CR 12344. The CR added a note that is on page 1 in this Article (red font). We also changed the CR release date, transmittal number, and the web address of the CR. All other information is the same.
August 11, 2021	Initial article released.

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