

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11975	Date: April 20, 2023
	Change Request 11621

SUBJECT: User Enhancement Change Request (UECR): Fiscal Intermediary Shared System (FISS) and Healthcare Integrated General Ledger Accounting System (HIGLAS) - Identification of Hospice Cap Settlement Activities

I. SUMMARY OF CHANGES: The purpose of this UECR is to automate the process that sends hospice cap information from HIGLAS to the Provider Statistics & Reimbursement Report (PS&R). The current process to update PS&R requires the Medicare Administrative Contractors to manually enter the hospice cap amounts, generated by HIGLAS, into the PS&R. Automating the process will reduce program costs by eliminating manual work and improve the accuracy of the information in PS&R.

EFFECTIVE DATE: October 1, 2023

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: October 2, 2023

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	N/A

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

IV. ATTACHMENTS:

One Time Notification

Attachment - One-Time Notification

Pub. 100-20	Transmittal: 11975	Date: April 20, 2023	Change Request: 11621
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SUBJECT: User Enhancement Change Request (UECR): Fiscal Intermediary Shared System (FISS) and Healthcare Integrated General Ledger Accounting System (HIGLAS) - Identification of Hospice Cap Settlement Activities

EFFECTIVE DATE: October 1, 2023

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: October 2, 2023

I. GENERAL INFORMATION

A. Background: The Part A PS&R Workgroup requested the ability to identify the Hospice CAP settlement payments and overpayments uniquely, so that they can systematically be removed from the reporting in the Provider Statistical & Reimbursement Report (PS&R) and System for Tracking Audit & Reimbursement (STAR) systems. They also requested a new Supplier Level Hold specifically for the Hospice CAP settlements to identify the payment suspensions derived from failure to submit Hospice CAP information timely.

CMS has charged the maintainers of the PS&R system to be updated to include payments that are made to providers that are outside of submitted claims such as PIP and pass-thru payments. Medicare Administrative Contractors (MACs) have to manually remove the Hospice CAP settlements from the PS&R and STAR systems. Currently, Hospice CAP payments/overpayments are manually created in HIGLAS using existing codes that are pulled to the PS&R and STAR. There is currently no way to identify these records to pull them from PS&R and STAR.

MACs use the Unfiled Cost Report supplier hold reasons when providers don't meet the requirement to submit their Hospice CAP timely. There is no specific hold reason for late submission of the Hospice CAP data. This causes confusion between actual late cost reports and the remit does not reflect the proper hold reason. Creation of a new hold reason will improve MAC customer service through inclusion of appropriate remit messaging and improving information available through the desktop for customer service representatives.

B. Policy: N/A

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
11621.1	HIGLAS shall create Supplier Level Holds, similar to Unfiled Cost Report hold, for the Hospice CAP Settlement type holds. The new supplier holds shall be:									HIGLAS

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	F_HOSPICE_CAP_1 F_HOSPICE_CAP_2 F_HOSPICE_CAP_3 F_HOSPICE_CAP_4 F_HOSPICE_CAP_5 F_HOSPICE_CAP_6 F_HOSPICE_CAP_7 F_HOSPICE_CAP_8									
11621.2	HIGLAS shall define a new Payment Sub-invoice type "MB_HCAP" for Hospice CAP Settlement activities under SETTLEMENT invoice type.								HIGLAS	
11621.3	MACs shall use the new Payment Sub-invoice type "MB_HCAP" when manually creating payments in HIGLAS for the Hospice CAP Settlements.			X						
11621.4	Contractors shall use PLB Code "MB" to report manual invoice payments on the HIGLAS FISS 835 Interface. PLB03-2 Positions 1 – 25: AP Invoice Number PLB03-2 Positions 26 – 50: Fiscal Year End Date if exists PLB 04: AP invoice amount (Negative sign)					X			HIGLAS	
11621.5	Contractor shall use PLB Code "CH" to report the Hospice CAP Settlement					X			HIGLAS	

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	<p>Hold on the HIGLAS FISS 835 Interface.</p> <p>PLB03-2 Positions 1 – 25: AP Invoice Number</p> <p>PLB03-2 Positions 26 – 50: Fiscal Year End Date if exists</p> <p>PLB 04: AP invoice amount held</p>									
11621.6	Contractors shall use PLB Code "FR" to report the Hospice CAP Settlement type holds Release on the HIGLAS 835 interface.					X				HIGLAS
11621.7	<p>HIGLAS shall create a new AR Transaction Type.</p> <p>Transaction Type Name: APROV-HOSPICE-CAP</p>									HIGLAS
11621.8	FISS shall follow the mapping document attached to the CR to crosswalk HIGLAS PLB codes to the HIPAA PLB codes reported on the remittance advice.					X				
11621.9	FISS shall map the new HIGLAS Hospice Cap Full hold PLB code to the standard PLB code 50.					X				
11621.9.1	<p>FISS shall add the literal Hospice Cap in positions 35 – 50 following the FYE sent by HIGLAS.</p> <p>Note: each PLB will report separately with Invoice #, FYE and Hospice Cap.</p>					X				
11621.9.2	FISS shall combine the Hospice Cap withholds in					X				

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	the withholds – Penalty on the Standard Paper Remittance (SPR) and PC Print.									
11621.10	FISS shall map the new HIGLAS Hospice Cap Settlement Manual invoice PLB code to the standard PLB code C5.					X				
11621.10.1	FISS shall add the literal Hospice Cap in positions 35 – 50 following the FYE sent by HIGLAS. Note: each PLB will report separately with Invoice #, FYE and Hospice Cap.					X				
11621.10.2	FISS shall combine the Hospice Cap withholds in the settlement payment(s) on the Standard Paper Remittance (SPR) and PC Print.					X				
11621.11	MACs shall fully test the changes to FISS and HIGLAS.			X						

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	None					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
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Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Rita Hazlip, Rita.Hazlip@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

ATTACHMENTS: 1

UPDATED PLB CODES TO REPORT ON THE 835 and HIGLAS HIPAA PLB CODE CROSSWALK

	<u>HIGLAS PLB X-01 code</u>	<u>Code Meaning - HIGLAS</u>	<u>Previous FISS 835 PLB Code Usage</u>	<u>Previous MCS 835 PLB Code Usage</u>	<u>Previous VMS 835 PLB Code Usage</u>	<u>HIPAA PLB Codes for 835 v40101 and v5010 A1- PLB03-1</u>	<u>ASC X12 835 PLB Code Description</u>	<u>Comments</u>
1	93	935 Cross Reference Netting	WO			FB/WO	Forward Balancing/Overpayment Recovery	Follow CR 6870 - for using FB and WO at step I and Step II
2	94	935 Relationship Netting	WO			FB/WO	Forward Balancing/Overpayment Recovery	Follow CR 6870 - for using FB and WO at step I and Step II
3	95	935 Settlement Cross Reference Netting	WO			FB/WO	Forward Balancing/Overpayment Recovery	Follow CR 6870 - for using FB and WO at step I and Step II
4	96	935 Settlement Relationship Netting	WO			FB/WO	Forward Balancing/Overpayment Recovery	Follow CR 6870 - for using FB and WO at step I and Step II
5	A1	Provider Awardee Convener Model 1 BPCI Transaction (does NOT own Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
6	A2	Provider Awardee Convener Model 2 BPCI Transaction (does NOT own Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
7	A3	Provider Awardee Convener Model 3 BPCI Transaction (does NOT own Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
8	A4	Provider Awardee Convener Model 4 BPCI Transaction (does NOT own Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
9	AA	PIP CAP PT	CV			CV	Capital Passthrough	PIP Capital Passthrough
10	AB	non-PIP CAP PT	CV			CV	Capital Passthrough	non-PIP Capital Passthrough
11	AC	PIP DME PT	DM			DM	Direct Medical Education Passthrough	PIP Direct Medical Education
12	AD	non-PIP DME PT	DM			DM	Direct Medical Education Passthrough	non-PIP Direct Medical Education
13	AE	PIP Kidney PT	OA			OA	Organ Acquisition Passthrough	PIP Kidney
14	AF	non-PIP Kidney PT	OA			OA	Organ Acquisition Passthrough	non-PIP Kidney
15	AG	PIP Bad Debt PT	BD			BD	Bad Debt Adjustment	PIP Bad Debt Adjustment
16	AH	non-PIP Bad Debt PT	BD			BD	Bad Debt Adjustment	Non-PIP Bad Debt Adjustment
17	AL	PIP non-Phy Anest PT	LS			LS	Lump Sum	PIP Non-Physician Anesthetists
18	AM	non-PIP non-Phy Anest PT	LS			LS	Lump Sum	non-PIP Non-Physician Anesthetists
19	AN	PIP ROE PT	RE			RE	Return on Equity	PIP ROI
20	AO	non-PIP ROE PT	RE			RE	Return on Equity	non-PIP ROI
21	AP	PIP Allogeneic Stem Cell PT				OA	Organ Acquisition Passthrough	Stem Cell Acquisition costs (CR11729)
22	AQ	NON PIP Allogeneic Stem Cell PT				OA	Organ Acquisition Passthrough	Stem Cell Acquisition costs (CR11729)
23	AS	Affiliate Withholdings - Settlement	OB			OB	Offset for Affiliated Providers	
24	AW	Affiliate Withholdings	E3			E3	Withholding	Affiliate Withholding
25	BN	EHR Demo		BN		BN	Bonus	Demonstration Project (CR 6603)
26	C1	Provider Convener Participant - BPCI Advanced				LE/WU	Levy/Unspecified Recovery	CR11110

Codes assigned to report
Federally mandated recoupment/bonus payment:

LE

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	HIGLAS PLB X-01 code	UPDATED PLB CODES TO REPORT ON THE 835 and HIGLAS HIPAA PLB CODE CROSSWALK Code Meaning - HIGLAS	Previous	Previous	Previous	HIGLAS PLB Codes for 835 v40101 and v5010 A1- PLB03-1	ASC X12 835 PLB Code Description	Comments
			FISS 835 PLB Code Usage	MCS 835 PLB Code Usage	VMS 835 PLB Code Usage			
27	C2	Non-Provider Awardee Convener Model 2 BPCI Transaction (does NOT own Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
28	C3	Non-Provider Awardee Convener Model 3 BPCI Transaction (does NOT own Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
29	C4	Non-Provider Awardee Convener Model 4 BPCI Transaction (does NOT own Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
30	CH	Full Hold - Hospice Cap Settlement				50	Late Charge	CR11621
31	CV	Converted Invoices	L3	Internal Use Only		L3	Penalty	PR Conversion
32	D1	Full Hold - Unfiled Cost Report	50			50	Late Charge	Late Filing of Cost Report
33	D2	Full Hold - Unfiled 838	L3			L3	Penalty	PW Unfiled 838
34	D3	Full Hold - Rejected Cost Report	L3			L3	Penalty	PW Rejected Cost Report
35	D4	Full Hold - Failure to comply Auditors	L3			L3	Penalty	PW Failure to comply Auditors
36	D5	Full Hold - DNF	L3	WO		-		RA not created
37	D6	Full Hold - Fraud and Abuse	L3	WO		L3	Penalty	PW Fraud and Abuse
38	D7	Full Hold - Other/Misc	L3	WO		L3	Penalty	PW Other/Misc
39	D8	Full Hold - AP System Hold	L3	WO		L3	Penalty	PWAP Hold
40	D9	Full Hold - Terminated	L3			L3	Penalty	PW Terminated
41	DG	Converted DNF - Pseudo Check		Internal Use Only		-		No RA
42	DM	Debit Memo	L3	WO		E3	Withholding	Withholding per Debit Memo
43	DP	Converted Negotiable Checks		Internal Use Only		-		No RA
44	DR	DNF Hold Release	L3	Internal Use Only		L3	Penalty	PR DNF
45	E1	Episode Initiator - BPCI Advanced				LE/WU	Levy/Unspecified Recovery	CR11110
46	E2	Episode Initiator Model 2 BPCI Transaction				LE/WU	Levy/Unspecified Recovery	CR8440
47	E3	Episode Initiator Model 3 BPCI Transaction				LE/WU	Levy/Unspecified Recovery	CR8440
48	E4	Episode Initiator Model 4 BPCI Transaction				LE/WU	Levy/Unspecified Recovery	CR8440
49	FB	Full Hold - Bankruptcy	L3	WO		L3	Penalty	PW Bankruptcy
50	FC	Full Hold - CMS Request	L3	WO		L3	Penalty	PW CMS Request
51	FS	BPCI Funds Switch Invoice						No RA
52	FR	Full Hold Release	L3	B2		L3	Penalty	PR
53	G2	Partial Hold - CMS Request	L3	WO		L3	Penalty	PW CMS Request
54	G3	Partial Hold - Bankruptcy	L3	WO		L3	Penalty	PW Bankruptcy
55	G4	Partial Hold - Unfiled Cost Report	L3			L3	Penalty	PW Unfiled Cost Report
56	G5	Partial Hold - Unfiled 838	L3			L3	Penalty	Unfiled 838 (Credit Balance Report)
57	H1	Manual Invoices - Cost Settlement Report	C5			C5	Temporary Allowance	Cost Report Settlement
58	HB	HPSA	E3	B2		BN	Bonus	HPSA Bonus
59	IM	Innovation Model				IP/WO	/Overpayment Recovery	CR9744
60	IR	TPP - IRS Levy	IR	WO		IR	Internal Revenue Service Withholding	
61	L1	TPP - IRS Backup	IR	WO		IR	Internal Revenue Service Withholding	
62	L2	TPP - Garnishments	WU	WO		CS	Adjustment	PW Garnishments

Codes assigned to report
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	HIGLAS PLB X-01 code	UPDATED PLB CODES TO REPORT ON THE 835 and HIGLAS HIPAA PLB CODE CROSSWALK Code Meaning - HIGLAS	Previous	Previous	Previous	HIPAA PLB	ASC X12 835 PLB Code Description	Comments
			FISS 835 PLB Code Usage	MCS 835 PLB Code Usage	VMS 835 PLB Code Usage	Codes for 835 v40101 and v5010 A1- PLB03-1		
63	L3	Third Party Payment - including Attorneys	Internal Use Only	Internal Use Only		—		No RA
64	L4	TPP - Child Support	WU	WO		CS	Adjustment	PW Child Support
65	L5	TPP - Alimony	WU	WO		CS	Adjustment	PW Alimony
66	L6	TPP - Secondary Corporation	WU	WO		CS	Adjustment	PW Secondary Corporation
67	L7	TPP - Change of Ownership	WU	WO		CS	Adjustment	Change of Ownership
68	L8	Accelerated/Advance Recoupments Applications	AP	WO		WO	Overpayment Recovery	Advance Recoupment Application
69	LE	Lump Sum Bonus Payment for the Physician Pay for Reporting (P4R) Program and ERx Initiative Payment		LE		LE	Levy	PQRI and ERx (CR6624) Bonus Payment
70	LS	Lump Sum Bonus Payment for the Physician Pay for Reporting (P4R) Program (valid for transactions built before January 4, 2010 only)		LE		LE	Levy	PQRI Bonus Payment
71	M1	Manual Invoices - Refunds	72	B2		72	Authorized return	Refunds - Manual Invoices
72	M4	Manual Invoices - Other	C5	B2		C5	Temporary Allowance	Manual Invoices
73	MA	Manual Invoices - Accelerated/Advance Payment	AP	B2		AP	Acceleration of Benefits	Manual Invoices - Accelerated/Advance Payment
74	MB	Manual Invoices – Hospice CAP Settlement				C5	Temporary Allowance	CR11621
75	MC	Manual Invoices - PIP	PI			PI	Periodic Interim Payment	
76	ML	Manual Invoices - Interim Rate Review	C5			C5	Temporary Allowance	Interim Rate Review
77	N1	Non-Provider Convener Participant - BPCI Advanced				LE/WU	Levy/Unspecified Recovery	CR11110
78	N2	Non-Provider Awardee Convener Model 2 BPCI Transaction (owns SOME or ALL Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
79	N3	Non-Provider Awardee Convener Model 3 BPCI Transaction (owns SOME or ALL Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
80	N4	Non-Provider Awardee Convener Model 4 BPCI Transaction (owns SOME or ALL Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
81	NA	Manual Non Claim Invoices - HI Positive Distribution	Internal Use Only			—		No RA
82	NB	Manual Non Claim Invoices - HI Negative Distribution	Internal Use Only			—		No RA
83	NC	Manual Non Claim Invoices - SMI Positive Distribution	Internal Use Only			—		No RA
84	ND	Manual Non Claim Invoices - SMI Negative Distribution	Internal Use Only			—		No RA
85	NR	Manual Invoices - PT	C5			C5	Temporary Allowance	
86	P1	Single Participant – BPCI Advanced				LE/WU	Levy/Unspecified Recovery	CR11110
87	P2	Provider Awardee Convener Model 2 BPCI Transaction (owns SOME or ALL Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
88	P3	Provider Awardee Convener Model 3 BPCI Transaction (owns SOME or ALL Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440
89	P4	Provider Awardee Convener Model 4 BPCI Transaction (owns SOME or ALL Episode Initiators)				LE/WU	Levy/Unspecified Recovery	CR8440

Codes assigned to report
Federally mandated recoupment/bonus payment:

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UPDATED PLB CODES TO REPORT ON THE 835 and HIGLAS HIPAA PLB CODE CROSSWALK

	HIGLAS PLB X-01 code	Code Meaning - HIGLAS	Previous FISS 835 PLB Code Usage	Previous MCS 835 PLB Code Usage	Previous VMS 835 PLB Code Usage	HIPAA PLB Codes for 835 v40101 and v5010 A1- PLB03-1	ASC X12 835 PLB Code Description	Comments
90	PA	Partial Hold – Admin Freeze				L3		PW Admin Freeze
91	PI	Pennsylvania Rural Health Model				PI	Periodic Interim Payment	CR10018
92	PL	Manual 935 ALJ Interest Refund invoice	PL	PL		L6	Interest Owed	'Code meaning – HIGLAS' and 'Previous MCS 835 PLB Code Usage' changed from previous version
93	PO	Partial Hold - Other/Misc/ PSC Request	L3	WO		L3	Penalty	PW Other/Misc/PSC Request
94	PP	PIP	PI			PI	Periodic Interim Payment	
95	PR	Partial Hold - Release	L3	B2		L3	Penalty	PR Penalty Release
96	RH	Full Hold - Revalidation Hold						No RA
97	RD	Rural Emergency Hospital (REH) Payment				CS	Adjustment	CR12820
98	RU	Interest Refund				L6	Interest Owed	
99	S1	Single Awardee Model 1 BPCI Transaction				LE/WU	Levy/Unspecified Recovery	CR8440
100	S2	Single Awardee Model 2 BPCI Transaction				LE/WU	Levy/Unspecified Recovery	CR8440
101	S3	Single Awardee Model 3 BPCI Transaction				LE/WU	Levy/Unspecified Recovery	CR8440
102	S4	Single Awardee Model 4 BPCI Transaction				LE/WU	Levy/Unspecified Recovery	CR8440
103	TD	Manual Invoices - Tentative Settlement	C5			C5	Temporary Allowance	Tentative Settlement
104	TL	TOPS	IS			IS	Interim Settlement	
105	UH	Beneficiary Undeliverable Full Hold						No RA
106	VC	VOIDS - Reissue Invoices	CS	Internal Use Only		CS	Adjustment	Reissued Invoice
107	VD	VOIDS - Reissue Debit Memo	CS	WO?		CS	Adjustment	Reissued Debit Memo
108	VO	VOID - Reissue Interest Information	CS			CS	Adjustment	Reissued Interest
109	WO	AR/AP Netting Offset	E3	WO		WO	Overpayment Recovery	AR/AP Netting
110	WR	VOID - Reissue Split Pay	C5			C5	Temporary Allowance	Reissue Split Pay
111	WS	Settlement Withholding	L3			E3	Withholding	Settlement Withholding
112	WU	FPLP Tax Withholding	WU	WU		LE/WU	Levy	1) TREASURY TAX WITHHOLD Treasury telephone xxx-xxx-xxxx 2) Any other Federally mandated payment/recoupment
113	WW	Principal Refund				WO	Overpayment Recovery	The amount in PLB 04 should be negative. And include identifying nos. in PLB03-2
114	ZZ	FPLP Non-tax Withholding	ZZ	ZZ		WU/LE		1) TREASURY NON-TAX WITHHOLD Treasury telephone xxx-xxx-xxxx 2) Any other Federally mandated payment/recoupment

Codes assigned to report
 Federally mandated recoupment/bonus payment:
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UPDATED PLB CODES TO REPORT ON THE 835 and HIGLAS HIPAA PLB CODE CROSSWALK

	<u>HIGLAS PLB X-01 code</u>	<u>Code Meaning - HIGLAS</u>	<u>Previous FISS 835 PLB Code Usage</u>	<u>Previous MCS 835 PLB Code Usage</u>	<u>Previous VMS 835 PLB Code Usage</u>	<u>HIPAA PLB Codes for 835 v40101 and v5010 A1- PLB03-1</u>	<u>ASC X12 835 PLB Code Description</u>	<u>Comments</u>
NON-HIGLAS USERS								
115				AP		AP	Acceleration of Benefits	Advance Payment
116					CS	-		Correction and Reversal at the claim/line level
117				FB		FB	Forward Balance	Over Payment
118					CS	FB/WO	Withholding	Follow CR 6870 - for using FB and WO at step I and Step II for 935 Recoupment
119					IR	IR	Internal Revenue Service Withholding	
120				J1		J1	Non-reimbursable	Adjustment per Demonstration Project
121					AP	AP	Acceleration of Benefits	Payment to withheld because it has been determined that the provider/supplier is on Do Not Forward (DNF) or investigated for
122				L6	L6	L6	Interest Owed	Interest paid on claims in this 835
123					WO	WO	Overpayment Recovery	AR/AP Netting
ADD-ON-PAYMENTS								
124			CS			CS		Outlier
125			CS			CS/HM		Hemo. HM is a new code available in 5010
126			CS			CS		New Technology
127			LS			LS		Indirect Medical Education

Codes assigned to report
 Federally mandated recoupment/bonus payment:
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UPDATED PLB CODES TO REPORT ON THE 835 and HIGLAS HIPAA PLB CODE CROSSWALK

CHANGE LOG	
<u>Version</u>	<u>Comments</u>
1.0	Changes for HIGLAS PLB Codes AP & AQ for CR 11729.
2.0	Changes for HIGLAS PLB Codes PA & PO for CR 11930.
3.0	Corrections as follows: Updated Code Meaning for PLB Codes C1, E1, N1, P1 for CR 11110. Removed HIGLAS PLB Code IP for CR 11760. Removed HIGLAS PLB Codes H2, M2 and M3. Added HIGLAS PLB Code IM for CR 9744. Added HIGLAS PLB Code PI for CR 10018. Added HIGLAS PLB Code UH for CR 10439.
	Added new HIGLAS PLB Code 'RD' for CR 12820.
4.0	Added new HIGLAS PLB Codes CH & MB for CR 11621.

Codes assigned to report
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