

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2380	Date: November 1, 2019
	Change Request 11492

SUBJECT: Editing Update for Vaccine Services

I. SUMMARY OF CHANGES: This Change Request (CR) requires Common Working File (CWF) to bypass line item dates of service for vaccines reported on inpatient Part B claims with TOB 12X and 22X when the dates of service equals a posted outpatient 73X or 77X service dates, or if present occurrence span code visit date.

EFFECTIVE DATE: April 1, 2020

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

IMPLEMENTATION DATE: April 6, 2020

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

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I. GENERAL INFORMATION

A. Background: Per Internet-Only-Manual Publication 100-04, chapter 18, section 10, when vaccines are provided to inpatients of a hospital or Skilled Nursing Facilities (SNF), they are covered under the vaccine benefit. It has been brought to our attention that hospital inpatient Part B claims with Type of Bill (TOB) 12X for vaccine services are being denied when the date of discharge equals a posted outpatient claim TOB 73X or 77X service dates.

This Change Request (CR) requires the Common Working File (CWF) to bypass line item dates of service for vaccines reported on inpatient Part B claims with TOB 12X and 22X when the dates of service equals a posted outpatient 73X or 77X service dates, or if present occurrence span code visit date.

B. Policy: No changes to current policy. This CR is modifying existing editing to ensure correct payment for claims related to vaccine services.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility									
		A/B MAC			D M E	Shared- System Maintainers				Other	
		A	B	H H H		M A C	F I S S	M C S	V M S		C W F
11492.1	Contractors shall allow vaccine related service line items on outpatient claims TOB 12X and 22X when the from and through dates equal a posted outpatient 73X or 77X service date or if present occurrence span code visit date.					X				X	
11492.2	Medicare contractors should not search their files to retroactively pay claims. However, contractors shall adjust claims brought to their attention.	X									

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E D I	C M E D I
		A	B	H H H		
	None					

IV. SUPPORTING INFORMATION

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

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
XXXX.1	CWF shall bypass edit C7020 for line items dates of service reported on 12x and 22x bill types when the dates of service equals a posted outpatient 73X or 77X service dates, or if present occurrence span code visit date.

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Bill Ruiz, 410-786-9283 or william.ruiz@cms.hhs.gov

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

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):

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ATTACHMENTS: 0