

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1337	Date: SEPTEMBER 21, 2007
	Change Request 5730

Subject: Revisions to 9-Digit ZIP Code List Provided in Change Request 5208

I. SUMMARY OF CHANGES: This CR instructs contractors to educate providers, physicians, and non-physician practitioners on revisions to the list of ZIP codes provided in CR 5208 that will require 9-digit ZIP code information in order to be processed.

New / Revised Material

Effective Date: October 22, 2007

Implementation Date: October 22, 2007

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	

III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2007 operating budgets.

IV. ATTACHMENTS:

One-Time Notification

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

Attachment – One-Time Notification

Pub. 100-04	Transmittal: 1337	Date: September 21, 2007	Change Request: 5730
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SUBJECT: Revisions to 9-Digit ZIP Code List Provided in Change Request (CR) 5208

Effective Date: October 22, 2007

Implementation Date: October 22, 2007

I. GENERAL INFORMATION

A. Background: Medicare contractors have been directed to determine payment locality for services paid under the MPFS and anesthesia services by using the ZIP code on the claim of where the service was performed. It has come to the attention of CMS that some ZIP codes fall into more than one payment locality. The CMS ZIP code file uses the convention of the United States Postal Service which assigns these ZIP codes into dominant counties. In some cases, though the service may actually be rendered in one county, per the ZIP code it is assigned into a different county. This causes a payment issue when each of the counties has a different payment locality and therefore a different payment amount.

In order to correct this, CMS will require the submission of 9-digit ZIP codes to carriers/A/B MACs for services paid under the MPFS and anesthesia services only when the services are provided in those ZIP code areas with which there is a problem except for services provided in Place of Service (POS) “Home,” and for any other places of service that contractors currently consider to be the same as “Home.” (Currently, there is no requirement for the submission of a ZIP code when the POS is “Home.”)

Fiscal intermediaries/A/B MACs determine locality based upon the ZIP code of the provider’s physical address. This address, including the ZIP code, is stored on the provider file as the master address.

CR 5208, issued March 09, 2007, had attached to it the list of ZIP codes that would require the 9-digit ZIP codes effective for claims with dates of service on or after October 1, 2007. This CR provides a small number of updates to the list found in CR 5208. Contractors will need to notify physicians, practitioners, non-physician practitioners, and providers of these changes so that they may take appropriate action. When the 9-digit ZIP code file is available for download by the contractors, it will take into account these revisions.

B. Policy: The CR represents no change to CMS payment policy.

II. BUSINESS REQUIREMENTS TABLE

Use “Shall” to denote a mandatory requirement

Number	Requirement	Responsibility (place an “X” in each applicable column)									
		A / B M A C	D M E M A C	F I I E R	C A R R I E R	D M E R C	R E H I	Shared-System Maintainers			
						F I S S	M C S	V M S	C W F		

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A / B M A C	D M E M A C	F I	C A R R I E R	D M E R C	R H H I	Shared-System Maintainers				OTHER
								F I S S	M C S	V M S	C W F	
5730.1	Through provider education as outlined below, contractors shall educate providers of the revision to the ZIP code list on the attached list so that they may update the practice location ZIP code on the provider file master address file through the submission of a CMS-855A.	X		X								
5730.2	Through provider education as outlined below, contractors shall educate providers of the revision to the ZIP code list on the attached list so that they may code their claims correctly with 9-digit ZIP codes when necessary.	X			X							

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A / B M A C	D M E M A C	F I	C A R R I E R	D M E R C	R H H I	Shared-System Maintainers				OTHER
								F I S S	M C S	V M S	C W F	
5730.3	A provider education article related to this instruction will be available at http://www.cms.hhs.gov/MLNMattersArticles/ shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within 1 week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.	X		X	X							

IV. SUPPORTING INFORMATION

A. For any recommendations and supporting information associated with listed requirements, use the box below:

Use "Should" to denote a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
CR 5208	Contractors should refer to CR 5208 for additional information on claims processing with 9-digit ZIP codes.

B. For all other recommendations and supporting information, use this space: N/A

V. CONTACTS

Pre-Implementation Contact(s): Carrier/A/B MAC claims processing – Leslie Trazzi at Leslie.Trazzi@cms.hhs.gov. FI/A/B/MAC claims processing – Susan Guerin at Susan.Guerin@cms.hhs.gov.

Post-Implementation Contact(s): Appropriate Regional Office.

VI. FUNDING

A. For Fiscal Intermediaries, Carriers, and the Durable Medical Equipment Regional Carrier (DMERC), use only one of the following statements:

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2007 operating budgets.

B. For Medicare Administrative Contractors (MAC), use the following statement:

The contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the Statement of Work (SOW). 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

Attachment

Addition to ZIP Code List in CR 5208 Requiring 9-Digit ZIP Codes

30132
51001
51023
57533
58639
58649
60502
60503
60585
60586
67762
69128
69145
69343
77578
78653
78660
82701
98068

Deletions to ZIP Code List in CR 5208 Requiring 9-Digit ZIP Codes

01432
19525
62231
68755
77550
78657