CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 3283	Date: June 12, 2015
	Change Request 9104

Transmittal 3205, dated February 27, 2015, is being rescinded and replaced by Transmittal 3283 to revise the language in Section I due to the enactment of the Medicare Access and CHIP Reauthorization Act of 2015, and update the file names in Section IV. All other information remains the same.

SUBJECT: Quarterly Update to the Medicare Physician Fee Schedule Database (MPFSDB) - April CY 2015 Update

I. SUMMARY OF CHANGES: Payment files were issued to contractors based upon the CY 2015 Medicare Physician Fee Schedule (MPFS) Final Rule. This change request amends those payment files. This Recurring Update Notification applies to Pub. 100-04, Medicare Claims Processing Manual, Chapter 23, Section 30.1.

EFFECTIVE DATE: January 1, 2015 - Effective for dates of services on or after January 1, 2015, unless otherwise stated.
Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: April 6, 2015

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 obliged 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:

Recurring Update Notification

Attachment - Recurring Update Notification

Pub. 100-04	Transmittal: 3283	June 12, 2015	Change Request: 9104

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SUBJECT: Quarterly Update to the Medicare Physician Fee Schedule Database (MPFSDB) - April CY 2015 Update

EFFECTIVE DATE: January 1, 2015 - Effective for dates of services on or after January 1, 2015, unless otherwise stated.
Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: April 6, 2015

I.   GENERAL INFORMATION

A.   Background: Payment files were issued to contractors based upon the CY 2015 Medicare Physician Fee Schedule (MPFS) Final Rule, published in the Federal Register on December 19, 2014, to be effective for services furnished between January 1, 2015, and December 31, 2015.

The Medicare Access and CHIP Reauthorization Act of 2015 allowed the zero percent update that would have ended on March 31, 2015, to continue through to June 30, 2015, and allows for a 0.5 percent update from July 1, 2015, to December 31, 2015. It also extends the physician work geographic practice cost index (GPCI) floor of 1.0, and the therapy cap exceptions process, through December 2017.

B.   Policy: Section 1848(c)(4) of the Social Security Act authorizes the Secretary to establish ancillary policies necessary to implement relative values for physicians' services.

In the CY 2015 Medicare Physician Fee Schedule Final Rule, CMS announced a conversion factor (CF) of $28.2239 for services furnished on or after April 1, 2015, resulting in an average reduction of 21.2 percent from the CY 2014 rates (this CF was later corrected to $28.1872 in a correction notice). However, the enactment of the Medicare Access and CHIP Reauthorization Act of 2015 allowed the zero percent update that would have ended on March 31, 2015, to continue through to June 30, 2015. Therefore, the CF of 35.7547 in effect from January 1, 2015, through March 31, 2015, was extended to June 30, 2015.

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	
9104.1	Medicare contractors shall retrieve the revised payment files and update their systems (manually or via provided files), as identified in this CR, from the	X	X	X		X				

Number	Requirement	Responsibility								
		A/B MAC			D M E MAC	Shared-System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
	CMS Mainframe Telecommunications System. Contractors will be notified via email when these files are available for retrieval. (See attachment for summary of changes and effective dates.)									
9104.2	Medicare contractors shall send notification of successful receipt via email to price_file_receipt@cms.hhs.gov stating the name of the file received and the entity for which it was received (e.g., A/B MAC name and number).	X	X	X						
9104.3	Medicare contractors need not search their files to either retract payment for claims already paid or to retroactively pay claims. However, contractors shall adjust claims brought to their attention.	X	X	X						
9104.4	Contractors shall, in accordance with Pub 100-04, Medicare Claims Processing Manual, chapter 23, section 30.1, give providers 30 days notices before implementing the changes identified in this CR.	X	X	X						
9104.5	CMS will send CWF files to facilitate duplicate billing edits: 1) Duplicate Radiology editing; 2) Duplicate Diagnostic editing; 3) Duplicate Pathology editing, and; 4) RVU and payment indicator files. CWF shall install these files into their systems. CWF will be notified via email when these files have been sent to them.								X	
9104.6	Contractors shall add new code Q9975 to their systems effective for dates of service April 1, 2015 and after (see attachment for code descriptors and indicators).	X	X	X					X	
9104.7	Contractors shall manually remove code S0832 from their 2015 MPFSDB records.\n\n**NOTE**: S8032 was transposed as S0832 in the January 2015 MPFS; S0832 has been replaced with S8032.	X	X	X						

III.   PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility

		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
9104.8	MLN Article: A provider education article related to this instruction will be available at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/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 sites and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in the contractor's 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

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: N/A

Section B: All other recommendations and supporting information:

Current Files effective for dates of service 1-1-2015 and after:

MPFS Payment File

MU00.@BF12390.MPFS.CY15.RV2.C00000.V0217 (Update Only File)

FI Abstract Files

MU00.@BF12390.MPFS.CY15.ABSTR.V0416.FI

MU00.@BF12390.MPFS.CY15.HHH.V0416.FI

MU00.@BF12390.MPFS.CY15.MAMMO.V0416.FI

MU00.@BF12390.MPFS.CY15.SNF.V0416.FI

MU00.@BF12390.MPFS.CY15.PAYIND.V0416

V. CONTACTS

Pre-Implementation Contact(s): Kathleen Kersell, 410-786-2033 or kathleen.kersell@cms.hhs.gov, Ryan Howe, 410-786-3355 or ryan.howe@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: 1

Attachment for CR 9104:   Quarterly Update to the Medicare Physician Fee Schedule Database (MPFSDB) April CY 2015 Update

Changes included in the April update to the 2015 MPFSDB effective for dates of service on and after January 1 (unless otherwise stated) are as follows:

CPT/HCPCS	ACTION
J1826	Procedure Status = E
J9010	Procedure Status = N
77063	Type of Service = 1
80300	Procedure Status = I
80301	Procedure Status = I
80302	Procedure Status = I
80303	Procedure Status = I
80304	Procedure Status = I
80320	Procedure Status = I
80321	Procedure Status = I
80322	Procedure Status = I
80323	Procedure Status = I
80324	Procedure Status = I
80325	Procedure Status = I
80326	Procedure Status = I
80327	Procedure Status = I
80328	Procedure Status = I
80329	Procedure Status = I
80330	Procedure Status = I
80331	Procedure Status = I
80332	Procedure Status = I
80333	Procedure Status = I
80334	Procedure Status = I
80335	Procedure Status = I
80336	Procedure Status = I
80337	Procedure Status = I
80338	Procedure Status = I
80339	Procedure Status = I
80340	Procedure Status = I
80341	Procedure Status = I
80342	Procedure Status = I
80343	Procedure Status = I
80344	Procedure Status = I
80345	Procedure Status = I
80346	Procedure Status = I
80347	Procedure Status = I
80348	Procedure Status = I
80349	Procedure Status = I
80350	Procedure Status = I
80351	Procedure Status = I
80352	Procedure Status = I
80353	Procedure Status = I
80354	Procedure Status = I
80355	Procedure Status = I

80356	Procedure Status = I
80357	Procedure Status = I
80358	Procedure Status = I
80359	Procedure Status = I
80360	Procedure Status = I
80361	Procedure Status = I
80362	Procedure Status = I
80363	Procedure Status = I
80364	Procedure Status = I
80365	Procedure Status = I
80366	Procedure Status = I
80367	Procedure Status = I
80368	Procedure Status = I
80369	Procedure Status = I
80370	Procedure Status = I
80371	Procedure Status = I
80372	Procedure Status = I
80373	Procedure Status = I
80374	Procedure Status = I
80375	Procedure Status = I
80376	Procedure Status = I
80377	Procedure Status = I

81500	Procedure Status = X	Effective for services on or after 4-1-2015
81503	Procedure Status = X	Effective for services on or after 4-1-2015
81506	Procedure Status = X	Effective for services on or after 4-1-2015
81508	Procedure Status = X	Effective for services on or after 4-1-2015
81509	Procedure Status = X	Effective for services on or after 4-1-2015
81510	Procedure Status = X	Effective for services on or after 4-1-2015
81511	Procedure Status = X	Effective for services on or after 4-1-2015
81512	Procedure Status = X	Effective for services on or after 4-1-2015
81599	Procedure Status = X	Effective for services on or after 4-1-2015

93355   Multiple Surgery Indicator = 2; and,
Type of Service = 4

93644   Type of Service = 2

HCPCS Code	Q9975	S8032 (see note)
HCPCS file Effective Date	4-1-2015	
Type(s) of Service	1, P	
HCPCS Coverage Code	D (special coverage instructions apply)	
Long Descriptor	Injection, Factor VIII, FC Fusion Protein (Recombinant), per iu	
Short Descriptor	Factor VIII FC Fusion Recomb	
MPFS Procedure Status	E	I
Work RVU	0.00	0.00
Full Non-Facility PE RVU	0.00	0.00
Full Facility PE RVU	0.00	0.00
Malpractice RVU	0.00	0.00
Site of Service	0	0

PC/TC	9	9
Global Surgery	XXX	XXX
Pre	0.00	0.00
Intra	0.00	0.00
Post	0.00	0.00
Multiple Procedure Indicator	9	9
Bilateral Surgery Indicator	9	9
Assistant Surgery Indicator	9	9
Co-Surgery Indicator	9	9
Team Surgery Indicator	9	9
Physician Supervision Diagnostic Indicator	09	09
Diagnostic Family Imaging Indicator	99	99
Non-Facility PE used for OPPS Payment Amount	0.00	0.00
Facility PE used for OPPS Payment Amount	0.00	0.00
MP Used for OPPS Payment Amount	0.00	0.00

NOTE: S8032 was transposed as S0832 in the January 2015 MPFS; S0832 has been replaced with S8032.

Descriptor Changes
The descriptor has been revised for the following code(s):

CPT/HCPCS	Revised Long Descriptor	Revised Short Descriptor
G0279	N/A	Tomosynthesis, mammo