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| CMS Manual System | Department of Health & Human Services (DHHS) |
| Pub 100-20 One-Time Notification | Centers for Medicare & Medicaid Services (CMS) |
| Transmittal 2338 | Date: August 9, 2019 |
| | Change Request 11312 |

SUBJECT: Bypassing Payment Window Edits for Donor Post-Kidney Transplant Complication Services

I. SUMMARY OF CHANGES: This CR is implementing logic to ensure that payment window edits (3-days and 1-day) are bypassed when processing claims for donor post-kidney transplant complications services.

EFFECTIVE DATE: April 1, 2012

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

IMPLEMENTATION DATE: January 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

| Number | Requirement | Responsibility | | | | | | | | | |
|---------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---|-------------|----------------------------|----------------------------------|-------------|-------------|-------------|-------|--|
| | | A/B MAC | | H H H | D M E M A C | Shared- System Maintainers | | | | Other | |
| | | A | B | | | F I S S | M C S | V M S | C W F | | |
| | <p>in history 7114 Outpatient Therapeutic Service against Inpatient in history 7115 Inpatient against Outpatient Therapeutic Service</p> <p>1-Day Payment Window Edits</p> <p>7119 Outpatient Diagnostic Services against Inpatient in history 7120 Inpatient against Outpatient Diagnostic Services in history 7121 Outpatient Therapeutic Services against Inpatient in history 7122 Inpatient against Outpatient Therapeutic Services in history</p> | | | | | | | | | | |
| 11312.2 | The CWF maintainer shall determine if any other conditions or new edits since the original implementation of the April 2012 CR need to be revised or bypassed. | | | | | | | | | X | |

III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility | | | | | | |
|---------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|---|-------------|----------------------------|-----------------------|------------------|---|
| | | A/B MAC | | H H H | D M E M A C | D M E D I | C E D I | I |
| | | A | B | | | | | |
| 11312.3 | MLN Article: CMS will make available an MLN Matters provider education article that will be marketed through the MLN Connects weekly newsletter shortly after the CR is released. MACs shall follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1, instructions for distributing MLN Connects information to providers, posting the article or a direct link to the article on your website, and including the article or a direct link to the article in your bulletin or newsletter. You may supplement MLN Matters articles with localized information benefiting your provider community in billing and administering the Medicare program correctly. Subscribe to the “MLN Matters” listserv to get article release notifications, or review them in the MLN Connects weekly newsletter. | 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: |
|-----------------------------------------|---------------------------------------------------------|
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Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Cami DiGiacomo, Cami.DiGiacomo@cms.hhs.gov , Fred Rooke, fred.rooke@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