

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11421	Date: May 17, 2022
	Change Request 12647

Transmittal 11340, dated April 7, 2022, is being rescinded and replaced by Transmittal 11421, dated, May 17, 2022 to revise section A of the supporting information portion of the business requirements adding CWF and FISS edit information. All other information remains the same.

SUBJECT: Updates to Current Inpatient Claim Edits

I. SUMMARY OF CHANGES: This instruction updates current Skilled Nursing Facility (SNF) edits to bypass services related to an emergency room encounter and there is also a 250 revenue code present on the same claim, which is currently being done by the Medicare Administrative Contractor (MAC). This CR also makes updates to certain duplicate edits since the implementation of SNF Patient Driven Payment Model (PDPM.). Finally, this CR will update an Inpatient Prospective Payment System (IPPS) edit to allow MACs to bypass after claims review.

EFFECTIVE DATE: October 1, 2022

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

IMPLEMENTATION DATE: October 3, 2022

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: 11421	Date: May 17, 2022	Change Request: 12647
-------------	--------------------	--------------------	-----------------------

Transmittal 11340, dated April 7, 2022, is being rescinded and replaced by Transmittal 11421, dated, May 17, 2022 to revise section A of the supporting information portion of the business requirements adding CWF and FISS edit information. All other information remains the same.

SUBJECT: Updates to Current Inpatient Claim Edits

EFFECTIVE DATE: October 1, 2022

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

IMPLEMENTATION DATE: October 3, 2022

I. GENERAL INFORMATION

A. Background: This Change Request (CR) implements changes to correct current inpatient claims processing edits. MACs are currently processing these claims correctly with the appropriate bypass. This CR is applicable to the Fiscal Intermediary Shared System (FISS) and the Common Working File (CWF). This CR will also correct hospital overlap edits when billing during an interrupted stay where the hospital claim was denied/rejected and an ancillary claim is submitted and allow MACs to bypass certain CWF editing.

B. Policy: No policy changes exist with this CR.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility										
		A/B MAC			D M E M A C	Shared- System Maintainers				Other		
		A	B	H H H		F I S S	M C S	V M S	C W F			
12647.1	Contractors shall process and pay an inpatient claim (TOB11X) during an SNF inpatient stay (TOB 21X), when the 11X falls within OSC 74 indicating an interrupted stay. Note: Inpatient claim equals 11X, including 110.							X				
12647.1.1	Contractors shall process and pay an incoming SNF claim (TOB 21X) or Swing Bed claim (TOB 18X) that contains OSC 74 dates (interrupted stay) that fall within the Dates of Service of an Inpatient claim (11X).							X				

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared-System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
12647.2	Contractors shall end date the current SNF PPS edit that verifies OC 50 is submitted correctly under SNF PPS, effective October 1, 2019. Note: Reason Code 31742 should still assign on claims with Dates of Service prior to 10/1/19. Reason Code 34992 should only assign on claims with Dates of Service on or after 10/1/19						X				
12647.3	Contractors shall allow duplicate provider editing to be bypassed by the MAC after manual review, effective 1/1/2020.									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		
	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:
3	CWF Edits: 7270 and 7271
2	FISS Edit-31742 termed 10/1/2019 FISS PDPM Edit-34992 effective 10/1/2019
1	FISS Edit: 38020

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

V. CONTACTS

Pre-Implementation Contact(s): Valeri Ritter, 410-786-8652 or valeri.ritter@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: 0