

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12870	Date: October 8, 2024
	Change Request 13701

Transmittal 12705 issued August 1, 2024, is being rescinded and replaced by Transmittal 12870, dated October 8, 2024, to correct an error regarding the reference to an incorrect OMB Bulletin by revising business requirement 13701.3. In addition, the responsibility for BR 13701.1 was changed from FISS to A/B MAC Part A, and FISS was removed from BR 13701.4. All other information remains the same.

SUBJECT: Medicare Part A Skilled Nursing Facility (SNF) Prospective Payment System (PPS) Pricer Update Fiscal Year (FY) 2025

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to provide information on the updates to the payment rates used under the PPS for SNFs, for FY 2025, as required by statute. The update can be found in chapter 6, section 30.5 of the Claims Processing Manual.

EFFECTIVE DATE: October 1, 2024

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

IMPLEMENTATION DATE: October 7, 2024

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:

Recurring Update Notification

Attachment - Recurring Update Notification

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II. GENERAL INFORMATION

A. Background: The purpose of this Change Request (CR) is to provide information on the updates to the payment rates used under the PPS for SNFs, for FY 2025, as required by statute. The update can be found in chapter 6, section 30.5 of the Claims Processing Manual.

Annual updates to the PPS rates are required by §1888(e) of the Social Security Act, as amended by the Medicare, Medicaid, and State Children's Health Insurance Program (SCHIP) Balanced Budget Refinement Act of 1999 (the BBRA), the Medicare, Medicaid, and SCHIP Benefits Improvement and Protection Act of 2000 (the BIPA), and the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (the MMA), relating to Medicare payments and consolidated billing for SNFs.

B. Policy: Each July, the CMS publishes the SNF payment rates for the upcoming FY (that is, October 1, 2024 through September 30, 2025) in the Federal Register, available online at <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/SNFPSP/List-of-SNF-Federal-Regulations.html>. The payment rates will be effective October 1, 2024.

Provider Specific File (PSF) Updates

Effective FY 2023, a permanent five percent cap was adopted and applied to all SNF providers on any decrease to a provider's final wage index from that provider's final wage index of the prior fiscal year. Under the five (5) percent cap policy, a new SNF that opens during FY 2025 would be paid the wage index for the area in which it is geographically located for its first full or partial FY with no cap applied because a new SNF would not have a wage index in the prior FY. To implement this policy for FY 2025, the following fields will be updated in the PSF:

1. Supplemental Wage Index - used for the prior fiscal year wage index value

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	
	“Supplemental Wage Index” field.									
13701.4	Contractors shall access the SNF PPS Pricer via the Cloud to pay FY 2025 payment rates on claims with discharge dates on or after October 1, 2024.	X								

IV. PROVIDER EDUCATION

Medicare Learning Network® (MLN): CMS will develop and release national provider education content and market it through the MLN Connects® newsletter shortly after we issue the CR. MACs shall link to relevant information on your website and follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 for distributing the newsletter to providers. When you follow this manual section, you don’t need to separately track and report MLN content releases. You may supplement with your local educational content after we release the newsletter.

Impacted Contractors: A/B MAC Part A

V. 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:
	N/A

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

VI. CONTACTS

Pre-Implementation Contact(s): Valeri Ritter, 410-786-8652 or Valeri.Ritter@cms.hhs.gov , Anthony Hodge, Anthony.Hodge@cms.hhs.gov

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

VII. FUNDING

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ATTACHMENTS: 0