

MLN Matters Number: MM3542

Related Change Request (CR) #: 3542

Related CR Release Date: November 5, 200

Effective Date: January 1, 2005 (for services provided on or after that date)

Related CR Transmittal #: 360

Implementation Date: January 3, 2005

Annual Update of Healthcare Common Procedure Coding System (HCPCS) Codes Used for Skilled Nursing Facility (SNF) Consolidated Billing (CB)

Note: This article was updated on May 12, 2013, to reflect current Web addresses. All other information remains unchanged.

Provider Types Affected

Skilled nursing facilities, physicians, providers, and suppliers

Provider Action Needed

Affected providers should note that this article and the related CR3542 contain the annual update of HCPCS codes used for SNF CB. It provides an updated list of exclusions and some inclusions to SNF CB, and only applies to codes affected by Medicare fiscal intermediary (FI) claims processing.

Background

The Social Security Act (Section 1888) codifies SNF Prospective Payment System (PPS) and Consolidated Billing (CB). New coding identified in each update describes the same services that are subject to SNF PPS payment by law. No additional services will be added by these routine updates. The new updates are required by changes to the coding system, not because the services subject to SNF CB are being redefined. Other regulatory changes beyond code list updates will be noted when and if they occur.

This notification provides a list of the exclusions, and some inclusions, to SNF CB, and applies only to codes affected by Medicare FI claims processing.

A separate notification is published for codes affected by Medicare carrier claims processing.

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2005 Annual Update

CR3542 is the 2005 annual update in the routine and comprehensive process that the Centers for Medicare & Medicaid Services (CMS) has established for updating SNF CB edits affected by HCPCS coding changes in each quarter.

It is the first quarterly SNF CB update for Fiscal Year (FY) 2005, and it incorporates a list of new temporary codes (such as K codes, if applicable), as well as the annual update of all HCPCS codes.

Since this is the only quarter in which new permanent HCPCS codes are produced, the instruction is referred to as an annual update. Other updates for the remaining quarters of the FY will occur **as needed** due to the creation of new temporary codes prior to the next annual update. In lieu of any other update, editing based on these codes remains in effect.

In several past instructions, the (CMS) established the process of periodically updating the lists of HCPCS codes that are subject to the CB provision of the SNF PPS. Services that appear on this list of HCPCS codes submitted on claims to both Medicare fiscal intermediaries (FIs) and carriers (including Durable Medical Equipment Regional Carriers (DMERCs)) will not be paid by Medicare to providers, other than a SNF, when **included** in SNF CB.

For non-therapy services, SNF CB applies only when the services are furnished to a SNF resident during a covered Part A stay; however, SNF CB applies to physical and occupational therapies and speech-language pathology services whenever they are furnished to an SNF resident, regardless of whether Part A covers the stay.

Services **excluded** from SNF PPS and CB may be paid to providers, other than SNFs, for beneficiaries, even when in a SNF stay. In order to assure proper payment in all settings, Medicare systems must edit for services provided to SNF beneficiaries both included and excluded from SNF CB.

Note: A revised SNF Help File, separate from the code list, is **not** included in CR3542. The Help File provides billing guidance **only** to FIs, SNFs, and suppliers on HCPCS codes. It includes codes affected by SNF CB and many other codes, and it will be updated from the current version **separately** after release of this notification with the new code list.

Additional Information

The official instruction issued to your intermediary contains a comprehensive list of HCPCS codes involved in editing claims submitted to FIs for services subject to SNF consolidated billing (CB).

In that list, new codes listed subsequent to prior publications appear in bold in HCPCS code charts, and boldface is also used outside of the code charts in cases

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as noted when type of bill (i.e., bill type) or revenue codes, rather than HCPCS codes, are used to perform editing. Bolding is also used to highlight titles, captions, and other billing information for SNFs. Codes from previous lists not appearing have been deleted. For complete details and to see the comprehensive list, please see the official instruction issued to your intermediary regarding this change. That instruction may be viewed by going to <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R360CP.pdf> on the CMS website.

If you have any questions, please contact your intermediary at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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