CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 3870	Date: September 29, 2017
	Change Request 10317

#### SUBJECT: 2018 Annual Update for the Health Professional Shortage Area (HPSA) Bonus Payments

**I. SUMMARY OF CHANGES:** This Change Request provides files for the automated payments of HPSA bonuses for dates of service January 1, 2018 through December 31, 2018. This Recurring Update Notification applies to Chapter 4, Section 250.2 and Chapter 12, Section 90.4.2.

### **EFFECTIVE DATE: January 1, 2018**

\*Unless otherwise specified, the effective date is the date of service. IMPLEMENTATION DATE: January 2, 2018

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**

	Pub. 100-04	Transmittal: 3870	Date: September 29, 2017	Change Request: 10317
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#### SUBJECT: 2018 Annual Update for the Health Professional Shortage Area (HPSA) Bonus Payments

#### **EFFECTIVE DATE: January 1, 2018**

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## I. GENERAL INFORMATION

**A. Background:** A new automated HPSA bonus payment file is created annually. This Change Request provides the name of the new file. This Recurring Update Notification applies to Chapter 4, Section 250.2 and Chapter 12, Section 90.4.2.

**B. Policy:** Section 413(b) of the Medicare Prescription Drug, Improvement and Modernization Act of 2003 mandated an annual update to the automated HPSA bonus payment file. CMS automated HPSA ZIP code file shall be populated using the latest designations as close as possible to November 1 of each year. The HPSA ZIP code file shall be made available to contractors in early December of each year. Contractors shall implement the HPSA ZIP code file and for claims with dates of service January 1 to December 31 of the following year, shall make automatic HPSA bonus payments to physicians providing eligible services in a ZIP code contained on the file.

### II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility																																																																	
		A/B MAC																																																														Sys	red- tem aine		Other
		A	В	H H H	M A C	F I S S	M C S	V M S	C W F																																																										
10317.1	For 2018, the contractors shall download the new HPSA bonus payment test file with the following file name: MU00.@AAA2390.ZIP.HPSA2018.TEST		X							VDC																																																									
10317.1.1	CMS shall make available the test file on or about October 31, 2017.									CMS																																																									
10317.2	For 2018, the contractors shall download the new HPSA bonus payment final file with the following file name: MU00.@AAA2390.ZIP.HPSA2018.ALL		X							VDC																																																									
10317.2.1	CMS shall make available the final file on or about November 7, 2017.									CMS																																																									
10317.2.1 .1	Contractors shall use this file for the automated bonus payment for claims with dates of service on or after January 1, 2018, through December 31, 2018.	X	Х																																																																

Number	Requirement	Responsibility																																
		A/B			D		Sha	red-		Other																								
		MAC			MAC			MAC			MAC			MAC 1		MAC		MAC		MAC M System														
					E	Μ	aint	aine	ers																									
		Α	В	Η		F	Μ		С																									
				Η	M	-	С	Μ																										
				Η	A	~	S	S	F																									
					C	S																												
10317.3	Contractors shall continue to accept the AQ modifier	Х	Х																															
	for partially designated HPSA claims.																																	
10317.4	Contractors shall continue to review samples of paid		Х																															
	claims submitted with the AQ modifier.																																	

## III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	spo	nsib	ility	
			A/B MA(		D M E	C E D
		A	В	H H H	M A C	Ι
10317.5	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 5 business days after receipt of the notification from CMS announcing the availability of the 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			

## IV. SUPPORTING INFORMATION

# $\label{eq:section} \textbf{Section A: Recommendations and supporting information associated with listed requirements: N/A \\$

"Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	

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

V. CONTACTS

**Pre-Implementation Contact(s):** Cindy Pitts, 410-786-2222 or cindy.pitts@cms.hhs.gov, Christi Lewis, 410-786-6900 or christi.lewis@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**