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| CMS Manual System | Department of Health & Human Services (DHHS) |
| Pub 100-04 Medicare Claims Processing | Centers for Medicare & Medicaid Services (CMS) |
| Transmittal 1151 | Date: JANUARY 11, 2007 |
| | Change Request 5389 |

***NOTE:** Transmittal 1109, dated November 9, 2006 is rescinded and replaced by Transmittal 1151, dated January 11, 2007. This transmittal corrects/revises Pub. 100-04, Section 180.6 as follows: "For other services related to the ER encounter (i.e. lab, radiology) the line item date of service reported is the date the service was actually rendered." All other information remains the same.*

Subject: Skilled Nursing Facility (SNF) Consolidated Billing (CB) Common Working File (CWF) Edit Bypass Instructons for Hospital Emergency Room Services Spanning Multiple Service Dates

I. SUMMARY OF CHANGES: This transmittal clarifies instructions in the previously issued CR 4252, Transmittal 881 titled "Outpatient Prospective Payment System Emergency Room Services Exceeding 24 Hours". Additionally, this instruction updates CWF SNF CB edits to bypass those services related to an ER encounter performed on subsequent dates when the ET (emergency services) modifier is appended to those line items.

New / Revised Material

Effective Date: October 1, 2005

Implementation Date: April 2, 2007

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 |
|-------|--|
| R | 4/Table of Contents |
| R | 4/180.6/Emergency Room Services That Span Multiple Service Dates |
| R | 6/20.1.2.2/Emergency Services |

III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2007 operating budgets.

IV. ATTACHMENTS:

Business Requirements

Manual Instruction

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

Attachment - Business Requirements

| | | | |
|--------------------|--------------------------|-------------------------------|----------------------------|
| Pub. 100-04 | Transmittal: 1151 | Date: January 11, 2007 | Change Request 5389 |
|--------------------|--------------------------|-------------------------------|----------------------------|

NOTE: Transmittal 1109, dated November 9, 2006 is rescinded and replaced by Transmittal 1151, dated January 11, 2007. This transmittal corrects/revises Pub. 100-04, Section 180.6 as follows: “For other services related to the ER encounter (i.e. lab, radiology) the line item date of service reported is the date the service was actually rendered.” All other information remains the same.

SUBJECT (Change Request Title): Skilled Nursing Facility (SNF) Consolidated Billing (CB) Common Working File (CWF) Edit Bypass Instructions for Hospital Emergency Room Services (ER) Spanning Multiple Service Dates

Effective Date: October 1, 2005

Implementation Date: April 2, 2007

I. GENERAL INFORMATION

A. Background: Emergency room (ER) services performed in a hospital are excluded from SNF CB for beneficiaries that are in skilled Part A SNF stays. Hospitals report ER services under the 045X revenue code with a line item date of service (LIDOS) indicating the date the patient entered the ER. Services related to the ER encounter are also excluded from the SNF CB provision. Current CWF SNF CB edits have bypasses to allow ER related services with LIDOS that match the reported LIDOS on the 045X revenue code to bypass SNF CB edits.

Problems arise where services related to the ER encounter span more than one service date. Services related to the ER encounter performed on subsequent service dates are currently being rejected by the CWF because the LIDOS for these services does not match the LIDOS reported under 045x ER revenue code. In order to bypass services related to the ER encounter which are performed on subsequent service dates, hospitals must identify those services by appending a modifier ET (Emergency Services) to those line items. The CWF SNF CB edits shall be updated to bypass those services related to the ER encounter performed on subsequent dates based on the ET modifier.

B. Policy: Section 1888 of the Social Security Act requires SNF CB.

II. BUSINESS REQUIREMENTS TABLE

Use “Shall” to denote a mandatory requirement

| Number | Requirement | Responsibility (place an “X” in each applicable column) | | | | | | | | | | |
|--------|---|---|---|---|---|---|---|---------------------------|-----|--|---|-------|
| | | A | D | F | C | D | R | Shared-System Maintainers | | | | OTHER |
| B | E | I | R | R | H | F | M | V | CWF | | | |
| M | M | | I | C | I | S | S | S | | | | |
| A | A | | E | | | | | | | | | |
| C | C | | R | | | | | | | | | |
| 5389.1 | The CWF shall bypass SNF CB edits for ER related service line items identified by modifier ET | | | | | | | | | | X | |

| Number | Requirement | Responsibility (place an "X" in each applicable column) | | | | | | | | | | | |
|--------|--|---|--------------------------------|--------|---------------------------------|-----------------------|-----------------------|------------------------------|-------------|-----|--|-------|--|
| | | A / B M A C | D M E M A C | F I | C A R R I E R | D M R R C | R M H R I | Shared-System Maintainers | | | | OTHER | |
| | | | | | | | F I S S | M C S | V M S | CWF | | | |
| | (Emergency Services) on outpatient bill types 13x and 85x when revenue code 045x (Emergency Room) is present on the claim. Note: The line item date of service for revenue code 045x is not required to match the line item date for the service lines containing modifier ET. | | | | | | | | | | | | |

III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility (place an "X" in each applicable column) | | | | | | | | | | | |
|--------|---|---|--------------------------------|--------|---------------------------------|-----------------------|-----------------------|------------------------------|-------------|-----|--|-------|--|
| | | A / B M A C | D M E M A C | F I | C A R R I E R | D M R R C | R M H R I | Shared-System Maintainers | | | | OTHER | |
| | | | | | | | F I S S | M C S | V M S | CWF | | | |
| 5389.2 | A provider education article related to this instruction will be available at http://www.cms.hhs.gov/MLNMaterialsArticles/ 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 site and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in your 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 | X | | X | | | | | | | | | |

| Number | Requirement | Responsibility (place an "X" in each applicable column) | | | | | | | | | |
|--------|-------------|---|--------------------------------|--------|---------------------------------|-----------------------|------------------|------------------------------|-------------|-----|--|
| | | A / B M A C | D M E M A C | F I | C A R R I E R | D M R E C | R H I | Shared-System Maintainers | | | |
| | | | | | | | F I S S | M C S | V M S | CWF | |
| | correctly. | | | | | | | | | | |

IV. SUPPORTING INFORMATION

A. For any recommendations and supporting information associated with listed requirements, use the box below:
 Use "Should" to denote a recommendation.

| X-Ref Requirement Number | Recommendations or other supporting information: |
|--------------------------|--|
| | |

B. For all other recommendations and supporting information, use the space below:

V. CONTACTS

Pre-Implementation Contact(s): Jason Kerr (410) 786-2123 or Jason.Kerr@cms.hhs.gov (for SNF billing issues); Diana Motsiopoulos (410) 786-3379 or Diana.Motsiopoulos@cms.hhs.gov (for outpatient hospital billing issues)

Post-Implementation Contact(s): Regional Office

VI. FUNDING

A. For TITLE XVIII Contractors, use only one of the following statements:

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2007 operating budgets.

B. For Medicare Administrative Contractors (MAC), use only one of the following statements:

The contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the Statement of Work (SOW). The contractor is not obligated to incur costs in excess of the amounts specified 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.

Medicare Claims Processing Manual

Chapter 4 - Part B Hospital (Including Inpatient Hospital Part B and OPPS)

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(Rev. 1151, 01-11-07)

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180 - Accurate Reporting of Surgical, and Medical Procedures and Services

180.6 – Emergency Room Services *That Span Multiple Service Dates*

180 - Accurate Reporting of Surgical and Medical Procedures and Services

(Rev. 1151, Issued: 01-11-07, Effective: 10-01-05, Implementation: 04-02-07)

180.6 – Emergency Room Services *That Span Multiple Service Dates*

(Rev. 1151, Issued: 01-11-07, Effective: 10-01-05, Implementation: 04-02-07)

Emergency room (ER) services provided by hospital outpatient departments (OPPS & Non-OPPS) should be billed in the following manner:

- Emergency room services are reported under the 045x revenue code*
- The line item date of service for the ER encounter is the date the patient entered the ER even if the patients encounter spans multiple service dates*
- For all other services related to the ER encounter (i.e. lab, radiology, etc) the line item date of service reported is the date the service was actually rendered*

***Note:** For patients in a Skilled Nursing Facility (SNF) see Chapter 6, Section 20.1.2.2 “Emergency Services” for special billing instructions using the ET modifier. This applies to hospital ER services spanning multiple service dates that are provided to patients in a Part A SNF stay and related CWF SNF consolidated billing edits.*

20.1.2.2 - Emergency Services

(Rev. 1151, Issued: 01-11-07, Effective: 10-01-05, Implementation: 04-02-07)

Emergency room services performed in hospitals, including CAHs, are excluded from SNF CB for beneficiaries that are in skilled Part A SNF stays. Hospitals report emergency room (ER) services under the 045X (Emergency Room - "x" represents a varying third digit) revenue code with a line item date of service (LIDOS) indicating the date the patient entered the ER. Services related to the ER encounter are also excluded from the SNF CB provision.

Where services related to the ER encounter span more than one service date, hospitals must identify those services by appending a modifier ET (Emergency Services) to those line items. The reporting of the ET modifier will alert CWF that these are related ER services performed on subsequent dates so the SNF CB edits in CWF will be bypassed.