CMS Manual System	Department of Health & Human Services (DHHS)						
Pub 100-08 Medicare Program Integrity	Centers for Medicare & Medicaid Services (CMS)						
Transmittal 152	Date: JULY 21, 2006						
	Change Request 5136						

Subject: Correction of Common Working File (CWF) Edit D903 for Wheelchair and Power Operated Vehicle (POV) Codes

**I. SUMMARY OF CHANGES:** This instruction removes IRP codes that were inappropriately added under Transmittal 128, CR 3952, from the D903 edit.

New/Revised Material: Effective Date: May 5, 2005

Implementation Date: January 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

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
N/A	

#### 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:

**One-Time Notification** 

<sup>\*</sup>Unless otherwise specified, the effective date is the date of service.

# **Attachment – One-Time Notification**

Pub. 100-08 | Transmittal: 152 | Date: July 21, 2006 | Change Request 5136

SUBJECT: Correction of Common Working File (CWF) Edit D903 for Wheelchair and Power Operated Vehicle (POV) Codes

#### I. GENERAL INFORMATION

**A. Background:** On October 28, 2005, CMS issued Transmittal 128, Change Request 3952, entitled: Evidence of Medical Necessity: Wheelchair and POV Claims. As a result of this instruction, several Healthcare Common Procedure Coding System (HCPCS) codes were incorrectly added to CWF Edit D903. Edit D903, which tracks certain HCPCS codes after the purchase option or rental cap has been met, applies specifically to capped-rental items of durable medical equipment, prosthetics, orthotics, and supplies. However, some of the codes that were added to the edit are not capped rental codes but are, rather, inexpensive and routinely purchased (IRP) codes.

This instruction removes the IRP codes that were inappropriately added under Transmittal 128 from the D903 edit.

**B. Policy:** The D903 edit does not apply to IRP items.

# II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement

<sup>&</sup>quot;Should" denotes an optional requirement

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)							
		FI	R H H I	C a r r i e r	D M E R C	Shar Mai F I S	•	C W F	Other
5136.1	For claims with dates of service on or after May 5, 2005, CWF shall remove the following HCPCS codes from edit D903: E0973, E0984, E1161, E1230 through E1238, K0005, K0009, K0017, K0018, K0046, K0047 and K0053.							X	

# III. PROVIDER EDUCATION

Requirement	Requirements	Responsibility ("X" indicates the								
Number		columns that apply)								
		F I	R H H I	C a r r i e r	D M E R C	Shared Mainta F M I C S S S	iners V	C W F	Other	
	None.									

# IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: May 5, 2005  Implementation Date: January 2, 2007	No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2007 operating
<b>Pre-Implementation Contact(s):</b> Renée Hildt (410) 786-1446 or renee.hildt@cms.hhs.gov	budgets.
<b>Post-Implementation Contact(s):</b> Appropriate regional office	

<sup>\*</sup>Unless otherwise specified, the effective date is the date of service.