

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-04 Medicare Claims Processing</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 1534</b>	<b>Date: JUNE 13, 2008</b>
	<b>Change Request 6075</b>

**SUBJECT: New "K" Code for Replacement Interface Material**

**I. SUMMARY OF CHANGES:** Effective April 1, 2008, a new "K" code will be established for replacement interface material. The initial release of this RN can be found in chapter 23, section 20 of Pub. 100-04 of the Internet-only Manual.

**New / Revised Material**

**Effective Date: April 1, 2008**

**Implementation Date: June 27, 2008**

*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	

**III. FUNDING:**

**SECTION A: For Fiscal Intermediaries and Carriers:**

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

**SECTION B: 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**

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

# Attachment – Recurring Update Notification

<b>Pub. 100-04</b>	<b>Transmittal: 1534</b>	<b>Date: June 13, 2008</b>	<b>Change Request: 6075</b>
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**SUBJECT: New “K” Code for Replacement Interface Material**

**Effective Date:** April 1, 2008

**Implementation Date:** June 27, 2008

## I. GENERAL INFORMATION

**A. Background:** Effective April 1, 2008, a new “K” code will be established for replacement interface material.

**B. Policy:** Effective April 1, 2008, the following code will be added to the system.

K0672 – Addition to lower extremity orthosis, removable soft interface, all components, replacement only, each

## II. BUSINESS REQUIREMENTS TABLE

*Use “Shall” to denote a mandatory requirement*

Number	Requirement	Responsibility (place an “X” in each applicable column)								
		A / B  M A C	D M  M A C	F I	C A  R R I E R	R H  H I	Shared-System Maintainers			
						F I S S	M C S	V M S	C W F	
6075.1	K0672 shall be added to the system for processing.  K0672 – Addition to lower extremity orthosis, removable soft interface, all components, replacement only, each	X		X						
6075.2	FIs and Part A MACs should consult with the DME MACs for instruction as to how they are paying claims on an individual consideration basis for HCPCS code K0672, with dates of service from April 1, 2008 through June 30, 2008. For claims with dates of service from July 1, 2008 through December 31, 2008, FIs and Part A MACs should consult with the DME MACs for local fee schedule amounts for paying K0672 claims.	X	X	X						

### 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	R H I	Shared-System Maintainers				OTHER
							F I S S	M C S	V M S	C W F	
6075.3	<p>A provider education article related to this instruction will be available at <a href="http://www.cms.hhs.gov/MLNMattersArticles/">http://www.cms.hhs.gov/MLNMattersArticles/</a> shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv.</p> <p>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 correctly.</p>	X		X							

### IV. SUPPORTING INFORMATION

**Section 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:

**Section B: For all other recommendations and supporting information, use this space:**

### V. CONTACTS

**Pre-Implementation Contact(s):** FIs and Part A MACs should contact Wil Gehne on (410)786-6148. DME MACs should contact Angela Costello on (410)768-1554.

**Post-Implementation Contact(s):** FIs and Part A MACs should contact Wil Gehne on (410)786-6148. DME MACs should contact Angela Costello on (410)786-1554.

## **VI. FUNDING**

**Section A: For *Fiscal Intermediaries (FIs), Carriers, and Regional Home Health Carriers (RHHIs)* use only one of the following statements:**

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

**Section B: For *Medicare Administrative Contractors (MACs)*, use the following statement:**

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.