CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1887	Date: January 6, 2010
	Change Request 6796

NOTE: Transmittal 1886, dated December 23, 2009, is being rescinded and replaced with Transmittal 1887, dated January 6, 2010. File names in Attachment 2 were changed to coincide with the name of the files that were released to Medicare contractors on Wednesday, December 23, 2009. All other information remains the same.

Subject: Emergency Update to the 2010 Medicare Physician Fee Schedule Database

I. SUMMARY OF CHANGES: Payment files were issued to contractors based upon the 2010 Medicare Physician Fee Schedule (MPFS) Final Rule. This change request amends those payment files.

New / Revised Material Effective Date: January 1, 2010 Implementation Date: January 4, 2010

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: One-Time Notification *Unless otherwise specified, the effective date is the date of service.

Attachment – One-Time Notification

Pub. 100-04	Transmittal: 1887	Date: January 6, 2010	Change Request: 6796
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NOTE: Transmittal 1886, dated December 23, 2009, is being rescinded and replaced with Transmittal 1887, dated January 6, 2010. File names in Attachment 2 were changed to coincide with the name of the files that were released to Medicare contractors on Wednesday, December 23, 2009. All other information remains the same.

SUBJECT: Emergency Update to the 2010 Medicare Physician Fee Schedule Database (MPFSDB)

Effective Date: January 1, 2010

Implementation Date: January 4, 2010

I. GENERAL INFORMATION

A. Background: Payment files were issued to contractors based upon the 2010 Medicare Physician Fee Schedule (MPFS) Final Rule. This change request amends those payment files.

B. Policy: Section 1848(c)(4) of the Social Security Act authorizes the Secretary to establish ancillary policies necessary to implement relative values for physicians' services.

II. BUSINESS REQUIREMENTS TABLE

Use"Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable column)									
					C A R R	H H	Sy	are ster aint	n	er	OTH ER
		M A C	Α		I E R		F I S S	M C S	V M S	C W F	
6796.1	Contractors shall retrieve the corrected payment files, as identified in Attachment 2, from the CMS Mainframe Telecommunications System. Files will be available for retrieval on December 17, 2009.	X		X	X						
6796.2	Notification of successful receipt shall be sent via e-mail to price_file_receipt@cms.hhs.gov stating the name of the file received and the entity for which it was received (e.g., Medicare contractor/fiscal intermediary name and number).	X		X	X						
6796.3	CMS will send CWF two files to facilitate duplicate billing edits: 1) Purchased Diagnostic and 2) Duplicative Radiology Editing. CWF shall install these files into their systems. CWF will be notified via e-mail when these files have been sent									X	

Number	Requirement		Responsibility (place an "X" in each applicable column)						n each		
		Α	D	F	C	R	Sh	are	d-		OTH
		1	Μ	ΙΙ	Α	Η	Sy	ster	n		ER
		B	Ε		R	Η	Μ	aint	ain	er	
					R	Ι	S				
		M	M	[Ι		F	Μ	V	C	
		A	Α		Ε		Ι	C	Μ	W	
		C	C		R		S	S	S	F	
							S				
	to them.										

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)				n each					
		A D / M B E		F I	C A R R	Η	Sy	are ster aint		er	OTH ER
		M A C	M A C		I E R		F I S S	M C S	V M S	C W F	
6796.4	A provider education article related to this instruction will be available at http://www.cms.hhs.gov/MLNMattersArticles/ shortly after the CR is released. You will receive notification of the article's 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 correctly.	X		X	X						

IV. SUPPORTING INFORMATION

A. For any recommendations and supporting information associated with listed requirements, use the box below:

Use "Should" to denote a recommendation.

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

V. CONTACTS

Pre-Implementation Contact(s): Gaysha Brooks, Gaysha.Brooks@cms.hhs.gov, (410) 786-9649

Post-Implementation Contact(s): Appropriate Regional Office

VI. FUNDING

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.

B. For Medicare Administrative Contractors (MAC) :

The Medicare Administrative Contractor (MAC) is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as changes to the MAC 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.

Attachment 1 & 2

Attachment 1

Changes included in the Emergency Update to the 2010 Medicare Physician Fee Schedule Database (MPFSDB) are as follows:

The following changes are effective for dates of service on and after January 1, 2010:

CPT/HCPCS	ACTION
0575F	Procedure Status: M
19340	Work RVU: 13.99 Transitional Non-Facility PE RVU: 5.22 Fully Implemented Non-Facility PE RVU: 11.57 Transitional Facility PE RVU: 5.22 Fully Implemented Facility PE RVU: 11.57
20550	Bilateral Indicator: 1
42145	Work RVU: 9.78 Transitional Non-Facility PE RVU: 8.03 Fully Implemented Non-Facility PE RVU: 8.94 Transitional Facility PE RVU: 8.03 Fully Implemented Facility PE RVU: 8.94
4270F	Procedure Status: M
4280F	Procedure Status: M
50543	Bilateral Indicator: 1
50548	Bilateral Indicator: 1
64490	Transitional Non-Facility PE RVU: 3.08 Fully Implemented Non-Facility PE RVU: 3.08
64491	Transitional Non-Facility PE RVU: 1.29 Fully Implemented Non-Facility PE RVU: 1.29
64492	Transitional Non-Facility PE RVU: 1.32 Fully Implemented Non-Facility PE RVU: 1.32
64493	Transitional Non-Facility PE RVU: 2.88 Fully Implemented Non-Facility PE RVU: 2.88

64494	Transitional Non-Facility PE RVU: 1.24 Fully Implemented Non-Facility PE RVU: 1.24
64495	Transitional Non-Facility PE RVU: 1.27 Fully Implemented Non-Facility PE RVU: 1.27
77785	Transitional Non-Facility PE RVU: 4.00 Fully Implemented Non-Facility PE RVU: 5.08 Transitional Facility PE RVU: 4.00 Fully Implemented Facility PE RVU: 5.08
77785-TC	Transitional Non-Facility PE RVU: 3.47 Fully Implemented Non-Facility PE RVU: 4.48 Transitional Facility PE RVU: 3.47 Fully Implemented Facility PE RVU: 4.48
77786	Transitional Non-Facility PE RVU: 11.84 Fully Implemented Non-Facility PE RVU: 11.31 Transitional Facility PE RVU: 11.84 Fully Implemented Facility PE RVU: 11.31
77786-TC	Transitional Non-Facility PE RVU: 10.70 Fully Implemented Non-Facility PE RVU: 9.93 Transitional Facility PE RVU: 10.70 Fully Implemented Facility PE RVU: 9.93
77787	Transitional Non-Facility PE RVU: 18.35 Fully Implemented Non-Facility PE RVU: 19.99 Transitional Facility PE RVU: 18.35 Fully Implemented Facility PE RVU: 19.99
77787-TC	Transitional Non-Facility PE RVU: 16.52 Fully Implemented Non-Facility PE RVU: 17.91 Transitional Facility PE RVU: 16.52 Fully Implemented Facility PE RVU: 17.91
80100	Procedure Status: X
93740	Transitional Non-Facility PE RVU: 0.09 Transitional Facility PE RVU: 0.09
93770	Transitional Non-Facility PE RVU: 0.06 Transitional Facility PE RVU: 0.06
A4641	Procedure Status: C

A4642	Procedure Status: C
A9698	Procedure Status: X
S2118	Procedure Status: I
S2270	Procedure Status: I
S3628	Procedure Status: I
S3711	Procedure Status: I
S3860	Procedure Status: I
S3861	Procedure Status: I
S3862	Procedure Status: I
S9433	Procedure Status: I

Attachment 2 File Names for Revised Payment Files

The President signed the Department of Defense Act of 2010 on December 19, 2009. This Act provides a two month zero percent (0%) update to the 2010 Medicare Physician Fee Schedule (MPFS) effective only for dates of service January 1, 2010 through February 28, 2010. Therefore, new fee schedule files were created and released to Medicare contractors on December 22, 2009. The file names are listed below:

Anesthesia (Carriers and FIs):

MU00.@BF12390.MPFS.CY10.ANES.V1217

File names for Carriers:

<u>MU00.@BF12390.MPFS.CY10.R1.C00000.V1217</u> <u>MU00.@BF12390.MPFS.CY10.PURDIAG.RV1.V1217</u>

File names for FIs:

MU00.@BF12390.MPFS.CY10.RV1.ABSTR.V1217.FI MU00.@BF12390.MPFS.CY10.RV1.ALL.V1217.RHHI MU00.@BF12390.MPFS.CY10.RV1.MAMMO.V1217.FI MU00.@BF12390.MPFS.CY10.RV1.PAYIND.V1217 MU00.@BF12390.MPFS.CY10.RV1.SNF.V1217.FI MU00.@BF12390.MPFS.CY10.RV1.SUPL.V1217.FI