

CMS Manual System

Pub 100-01 Medicare General Information, Eligibility, and Entitlement

Transmittal 36

Department of Health & Human Services (DHHS)

Centers for Medicare & Medicaid Services (CMS)

Date: FEBRUARY 24, 2006
Change Request 4343

SUBJECT: Scheduled Release for April 2006 Software Programs and Pricing/Coding Files

I. SUMMARY OF CHANGES: This instruction includes the April 2006 schedule for software programs and pricing/coding files. It is informational only and has no systems impact.

NEW/REVISED MATERIAL

EFFECTIVE DATE: March 27, 2006

IMPLEMENTATION DATE: March 27, 2006

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:

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.

IV. ATTACHMENTS:

Recurring Update Notification

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

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*: March 27, 2006 Implementation Date: March 27, 2006 Pre-Implementation Contact(s): Joe Bryson at joseph.bryson@cms.hhs.gov or 410-786-2986 Post-Implementation Contact(s): Regional Office	No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.
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Attachment

Attachment

Title of software/ Pricing Files	Scheduled Release Date	Description of Update	Release Cycle
IPPS PRICER	no April update	Not applicable.	Semi-annual – (October and April)
IRF PPS PRICER	no April update	Not applicable.	Annual - (October)
LTCH PPS PRICER	January 23	Updates the October 2005 version of the LTC Pricer with CICS formatting (off-cycle release).	Semi-annual – (July and October)
OPPS PRICER	February 28	Updates APC rates and any necessary payment logic. However, because CMS does not receive ASP data until March 22 nd , a second release will be sent on or around March 28 th to update ASP data. This second release date is dependent on availability of ASP data and is therefore subject to change. CMS will be issuing contractor instructions (through a separate CR or JSM) for how to process any clean claims affected by a late release.	Quarterly
HH PPS PRICER	no April update	Not applicable.	Annual - (January)
ASC PRICER	November 17	Updates HCPCS codes.	Quarterly – (released quarterly as needed)
SNF PPS PRICER	no April update	Not applicable.	Annual - (October)
Hospice PPS PRICER	no April update	Not applicable.	Annual – (October)
IPF PPS PRICER	February 7	Updating ICD-9 codes.	Annual – (July)
ESRD PPS PRICER	no April update	Not applicable.	Annual – (January)

Title of software/ Pricing Files	Scheduled Release Date	Description of Update	Release Cycle
OPPS OCE	February 15	Updates CMS coding, edits, flags, APCs, status indicator descriptions and logic.	Quarterly
Non-OPPS OCE	February 15	Updates codes, ASC payment groups edits and logic.	Quarterly
Inpatient GROUPEP	no April update	Not applicable.	Annual – (October)
MCE	no April update	Not applicable.	Annual – (October)
ASP Pricing File	March 20	Update containing payment amounts for covered drugs.	Quarterly
Zip Code File	March 1	Update of zip codes for ambulance reporting.	Quarterly
Clinical Diagnostic Laboratory Edit Table	February 3	Update to the table (dependent on Final Rule).	Quarterly
MPFSDB	February 8 for both Carriers and FIs	Update to fee schedule.	Quarterly
MPFSDB Abstract File (Therapy/ CORF/CAH)	February 8 for both Carriers and FIs	Update to fee schedule.	Quarterly
Supplemental File (Therapy/ CORF)	February 8 for both Carriers and FIs	Updates fee schedule services and their related prices.	Quarterly
Hospice File for RHHIs	February 8 for both Carriers and FIs	Update to fee schedule.	Quarterly

Title of software/ Pricing Files	Scheduled Release Date	Description of Update	Release Cycle
Mammography Benefit Pricing File	February 8 for both Carriers and FIs	Update to fee schedule.	Quarterly
SNF Extract of the MPFSDB	February 8 for both Carriers and FIs	Update to fee schedule.	Quarterly
MPFS National Abstract File for Purchased Diagnostic Tests and Interpretations	February 8 for both Carriers and FIs	Update to codes. Allows carriers to accept and process claims for purchased diagnostic tests/interpretations billed by suppliers regardless of location.	Quarterly
DMEPOS Fee Schedule	Carriers: 2/14 FIs: 2/21	Update to fee schedule.	Quarterly
Clinical Diagnostic Lab Fee Schedule	no April update	Not applicable.	Annual – (January)
Ambulance Fee Schedule File	no April update	Not applicable.	Annual – (January)
HCPCS	no April update	Not applicable.	Annual – (January)
Anesthesia Conversion Factor File	no April update	Not applicable.	Annual – (January)

Note: All dates on the above table are for 2006.

The PRICER software will be made available for retrieval from CMS's Mainframe Telecommunications System. Shared System maintainers will be notified via e-mail when the software is available and will notify data centers via routine bulletins when they release the PRICER software.

The pricing/coding files will be available for retrieval from CMS's Mainframe Telecommunication System. Contractors will be notified of the availability of pricing/coding files per future OTNs or RUNs.

Acronyms:

APC – Ambulatory Payment Classification
ASC – Ambulatory Surgical Center
ASP – Average Sale Price
BIPA – Benefits Improvement and Protection Act
CAH – Critical Access Hospital
CMHC – Community Mental Health Center
CORFs – Comprehensive Outpatient Rehabilitation Facilities
CY – Calendar Year
DMEPOS – Durable Medical Equipment Prosthetic Orthotic and Supply
DRGs – Diagnosis Related Groups
ESRD – End Stage Renal Disease
HH – Home Health
HCPCS – Healthcare Common Procedure Coding System
ICD-9-CM – International Classification of Disease, 9th Revision, Clinical Modification
IPPS – Inpatient Prospective Payment System
IPF – Inpatient Psychiatric Facility
IRF – Inpatient Rehabilitation Facility
LTCH – Long Term Care Hospital
MCE – Medicare Code Editor
MPFSDB – Medicare Physician Fee Schedule Database
NWI – New Wage Indexes
OCE – Outpatient Code Editor
OPPS – Outpatient Prospective Payment System
OTN – One-Time Notice
PPS – Prospective Payment System
RHHIs – Regional Home Health Intermediaries
RUN – Recurring Update Notification
SNF – Skilled Nursing Facilities