MLN Matters® Number: MM7159

Related Change Request (CR) #: 7159

Related CR Release Date: September 10, 2010

Effective Date: January 1, 2011

Related CR Transmittal #: R2048CP

Implementation Date: January 3, 2011

2011 Annual Update of Healthcare Common Procedure Code System (HCPCS) Codes for Skilled Nursing Facility (SNF) Consolidated Billing (CB) Update

Provider Types Affected

Physicians, providers, and suppliers submitting claims to Medicare contractors (carriers, DME Medicare Administrative Contractors (DME MACs), Fiscal Intermediaries (FIs), and/or A/B Medicare Administrative Contractors (A/B MACs)) for services provided to Medicare beneficiaries who are in a Part A covered SNF stay.

Provider Action Needed

STOP – Impact to You

This article is based on Change Request (CR) 7159 which provides the 2011 annual update of Healthcare Common Procedure Coding System (HCPCS) Codes for Skilled Nursing Facility Consolidated Billing (SNF CB) and how the updates affect edits in Medicare claims processing systems.
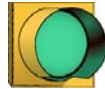
CAUTION – What You Need to Know

Physicians and providers are advised that, by the first week in December 2010, new code files will be posted at

http://www.cms.hhs.gov/SNFConsolidatedBilling/ on the Centers for Medicare & Medicaid Services (CMS) website. Note that this site will include new Excel® and PDF format files. It is **important and necessary** for the provider community to view the "General Explanation of the Major Categories" PDF file located at the bottom of each year's FI/A/B MAC update listed at *http://www.cms.hhs.gov/SNFConsolidatedBilling/* on the CMS website in order to understand the Major Categories, including additional exclusions not driven by HCPCS codes.

GO – What You Need to Do

See the Background and Additional Information Sections of this article for further details regarding these changes.

Background

Medicare's claims processing systems currently have edits in place for claims received for beneficiaries in a Part A covered SNF stay as well as for beneficiaries in a non-covered stay. Changes to HCPCS codes and Medicare Physician Fee Schedule designations are used to revise these edits to allow carriers, A/B MACs, DME MACs, and FIs to make appropriate payments in accordance with policy for Skilled Nursing Facility Consolidated Billing (SNF CB) contained in the Medicare Claims Processing Manual (Chapter 6, Section 110.4.1 for carriers and Chapter 6, Section 20.6 for FIs) which is available at *http://www.cms.gov/manuals/downloads/clm104c06.pdf* on the CMS website. These edits only allow services that are excluded from CB to be separately paid by Medicare contractors.

Additional Information

The official instruction, CR 7159, issued to your carriers, DME MACs, FIs, and A/B MACs regarding this change may be viewed at *http://www.cms.gov/Transmittals/downloads/R2048CP.pdf* on the CMS website.

If you have any questions, please contact your carriers, DME MACs, FIs, or A/B MACs at their toll-free number, which may be found at *http://www.cms.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip* on the CMS website.