One-Time Notification

Table of Contents

Transmittals through Transmittal Number 428, dated January 9, 2009, are included in this update. As new transmittals are issued, they will be identified on this page.

FILE	COMM. DATE	SUBJECT/SUMMARY OF CHANGES	IMPL DATE	CR NUM
R428OTN	01/09/09	Influenza Pandemic Emergency Preparedness – Additional Guidance Concerning Tentative and Final Settlements, Periodic Interim Payments (PIP) and Pass-Through Payments, Medicare Secondary Payer (MSP), Accelerated Payments, Repayments and Financial Management	02/13/09	6256
R426OTN	12/31/08	Adjustment for Medicare Mental Health Services	02/02/09	6208
<u>R425OTN</u>	12/31/08	Health Insurance Portability and Accountability Act (HIPAA) Inbound 837 Institutional (837i) and Inbound 837 Professional (837p) Flat Files	04/06/09	6299
<u>R424OTN</u>	12/24/08	HIGLAS Part A Changes for Limitation on Recoupment	04/06/09	6298

<u>R423OTN</u>	12/24/08	New Contractor Numbers for the J9 Medicare Administrative Contractor (MAC) Part A and Part B Workloads for the State of Florida and Territories of Puerto Rico and the Virgin Islands	01/05/09	6285
R421OTN	12/23/08	Changes in Payment for Oxygen Equipment as a Result of the Medicare Improvements for Patients and Providers Act (MIPPA) of 2008 and Additional Instructions Regarding Payment for DMEPOS	01/06/09	6297
R420OTN	12/19/08	Implementation - Processing All Diagnosis Codes Reported on Claims Submitted to Durable Medical Equipment Medicare Administrative Contractors (DME MACs)	10/05/09	6068
R419OTN	12/19/08	Summary of Policies in the 2009 Medicare Physician Fee Schedule (MPFS) and the Telehealth Originating Site Facility Fee Payment Amount	01/05/09	6349
<u>R418OTN</u>	12/19/08	Moratorium on Classification of Long-Term Hospitals or Satellites/Increase in Certified Beds	01/20/09	6172
<u>R414OTN</u>	12/12/08	Improved Access to Ambulance Services Payment Rates for Effective Dates of Service July 1, 2008 - December 31, 2009	01/12/09	6206

<u>R413OTN</u>	12/12/08	Excluded LUPA Claims for HHPPS Episode Sequence Edits	01/12/09	6283
<u>R411OTN</u>	12/05/08	Influenza Pandemic Emergency Preparedness- Additional Instructions Concerning Financial Management and Program Integrity	01/05/09	6209
<u>R410OTN</u>	12/05/08	Process for Recovering Medicare Payments for Home Health Prospective Payment System (HH PPS) Claims Failing to Report Prior Hospitalizations	03/05/09	6276
<u>R408OTN</u>	11/28/08	New Numbers for all MAC Jurisdictions	12/29/08	6259
R406OTN	11/21/08	Analysis Only for New FISS, CWF, and NCH Systems Requirements for all 837 I Outpatient Claims Related to Physician/Practitioners	05/15/09	6289
<u>R405OTN</u>	11/21/08	FISS Reason Code Language Expansion	04/06/09	6247

<u>R401OTN</u>	11/14/08	2008 Physician Quality Reporting Initiative Claims-Based Reporting of Measures Groups	12/15/08	6187
<u>R400OTN</u>	11/14/08	Revised 4010A1 837 Professional (837P) Flat File	04/06/09	6167
<u>R399OTN</u>	11/07/08	Apply IRS Form 1099-MISC Updates to VMS System	01/05/09	6202
<u>R397OTN</u>	10/31/08	Claim Adjustments to Correct Home Health Prospective Payment System (HH PPS) Payment Errors	02/02/09	6250
R396OTN	10/29/08	Influenza Pandemic Emergency Preparedness - Instructions Concerning Financial Management Policies	11/25/08	6174
<u>R395OTN</u>	10/24/08	J3 A/B MAC Merge of the Part B Arizona, Montana, and Utah CICS Production and User Acceptance Testing Regions	01/05/09	6199

<u>R393OTN</u>	10/24/08	Update to the CR 5020: Method of Cost Settlement for Inpatient Services for Rural Hospital	11/24/08	6226
R392OTN	10/24/08	Revision to the CWF Requirements for Updating Spells of Illness for SNF and SB Claims	04/06/09	6257
<u>R391OTN</u>	10/24/08	Archiving and Retrieving of the Integrated Outpatient Code Editor and the Medicare Code Editor for Processing Claims	04/06/09	6177
<u>R390OTN</u>	10/24/08	Influenza Pandemic Emergency Preparedness - Instructions Concerning Financial Management Policies	11/25/08	6174
R389OTN	10/24/08	New 2008 Medicare Physician Fee Schedule (MPFS) Payment Rates Effective for Dates of Service July 1, 2008, Through December 31, 2008	10/24/08	6212
<u>R3880TN</u>	10/24/08	Analysis of Systems Changes Needed to Change Type of Bill (TOB) for Federally Qualified Health Centers (FQHCs) from 73x to 77x	07/06/09	6246

<u>R387OTN</u>	10/17/08	Medicare Payment for Air Ambulance Services Under Section 146(b)(1) of the Medicare Improvements for Patients and Providers Act (MIPPA) of 2008	01/05/09	6214
R386OTN	10/17/08	Influenza Pandemic Emergency PreparednessMedicare Fee-For- Service Payment Policies and Billing Instructions	11/17/08	6146
R384OTN	10/10/08	Limitation of Recoupment - VMS Recoupment and Claims Adjustment Process	01/05/09	6204
<u>R383OTN</u>	10/03/08	J5 Production Region Merge of the Kansas, Missouri, Nebraska, and Iowa Part A Workloads	02/02/09	6152
<u>R381OTN</u>	10/03/08	Competitive Acquiition Program for Part B Drugs and Biologicals Vendor Identification Number, Iron Dextran Payment Update, and Physician Elections	01/05/09	6210
<u>R380OTN</u>	10/03/08	Reporting Non-Tax Withholding Due to Federal Payment Levy Program (FPLP)	01/05/09	6228

<u>R379OTN</u>	09/26/08	Influenza Pandemic Emergency Policies Concerning the Medicare Prescription Drug Program (Part D) and Medicare Advantage (Part C)	10/27/08	6164
R376OTN	09/26/08	Limitation on Recoupment - MCS Recoupment and Claims Adjustment Process	01/05/09	5986
R374OTN	09/05/08	Expansion of the Legal Business Name Field in VMS	01/05/09	5933
<u>R373OTN</u>	09/05/08	Schedule for Completing the Calendar Year (CY) 2009 Fee Schedule Updates and the Participating Physician Enrollment Procedures	10/06/08	6156
R372OTN	08/29/08	Update to the Intern to Bed Ratio for Method II Critical Access Hospitals	01/05/09	6176
R370OTN	08/15/08	Add Provider Measures to the Program Integrity Management Reporting (PIMR) System	01/05/09	6141

R369OTN	08/15/08	Fiscal Internediary Shared System Merge Program Accommodation for Duplicate Check Numbers	01/05/09	6142
<u>R367OTN</u>	08/15/08	Reporting Withholding due to IFS Federal Payment Levy Program	10/06/08	6125
<u>R366OTN</u>	08/15/08	2008 Reminder for Roster Billing and Centralized Billing for Influenza and Pneumococcal Vaccinations	09/15/08	6121
<u>R365OTN</u>	08/08/08	CWF Automation of the Contractor Table to Support MAC Workload Renumbering	10/06/08	6092
R364OTN	08/08/08	Modification of Part B Flat File for Electronic Remittance Advice and Standard Paper remit	01/01/09	6127
R363OTN	08/08/08	FY 2008 Supplementary Security Income (SSI) Data	09/08/08	

<u>R362OTN</u>	08/01/08	Requirement to Educate Providers Regarding CMS' Use of Medicare Cost Report Data	01/05/09	6132
R361OTN	07/25/08	Administrative Instructions for Support Income Tax Reporting	08/25/08	6117
R360OTN	07/18/08	Implementation - Processing All Diagnosis Codes Reported on Claims Submitted to Durable Medical Equipment Medicare Administrative Contractors (DME MACs)	07/06/09	6068
R359OTN	07/18/08	Composite Ambulatory Payment Classification (APC) Processing under the Outpatient Prospective Payment System (OPPS)	01/05/09	6056
R358OTN	07/11/08	Instructions for Non-MSP Debts Returned to Agency (RTA) from the Department of Treasury from Inception of RTA Process to Dates of Implementation of this Change Request	08/11/08	6082
R357OTN	07/07/08	Pathology Services: Notification of the Sunset for the Payment of Physician Pathology Services for Independent Laboratories	07/07/08	6088

<u>R356OTN</u>	06/20/08	National Competitive Bidding (NCB) for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) - Phase VIIB of Implementation	07/07/08	6069
<u>R355OTN</u>	06/13/08	2008 Physician Quality Reporting Initiative (PQRI) Establishment of Alternative Reporting Periods and Reporting Criteria	07/07/08	6104
<u>R354OTN</u>	06/13/08	Hospitals Exempt from Present on Admission (POA) Reporting (i.e., non Inpatient PPS or IPPS Hospitals) & the Affects on Grouper	10/06/08	6086
<u>R353OTN</u>	06/13/08	Payment for Complex Rehabilitative Power Mobility Device Services that Span the Implementation Date of DMEPOS Competitive Bidding Programs	07/07/08	6112
R352OTN	06/13/08	Quarterly Update to the Ambulance Fee Schedule Public Use File (PUF)	07/28/08	6091
<u>R351OTN</u>	06/13/08	508 Compliancy for Medicare Remit East Print Software	10/06/08	6073

R349OTN	06/06/08	Inappropriate Denials of Claims for Percutaneous Transluminal Angioplasty (PTA) of Carotid Arteries Concurrent with Stenting Based on Facility Recertification Due Dates	7/7/08	6046
R348OTN	06/06/08	Modify the CWF Feed to Limit the Amount of Preventive Data Rows Being Loaded	10/06/08	5819
R347OTN	06/06/08	Analysis and Design Only - Systems Improvements to Streamline Updates to the Place of Service (POS) Code Set	10/06/08	6066
<u>R344OTN</u>	05/23/08	VMS Modifications to Implement the Common Electronic Data Interchange (CEDI) System, Part II	10/06/08	6026
R343OTN	05/23/08	New Contractor Numbers for the States of Connecticut and New York in Jurisdiction 13 Part A/B MAC Workload	07/07/08	5843
R342OTN	05/16/08	Medicare Fraud Edit Module Phase 2	10/06/08	6035

<u>R341OTN</u>	05/16/08	Update the Medicare Secondary Payer Payment (MSPPAY) Module to Accommodate the Medicare Part A Claims Expansion	09/08/08	5975
R3400TN	05/16/08	NCB for DMEPOS Phase VII Correction of CWF Category for Portable Oxygen	10/06/08	6055
R339OTN	05/09/08	Implementation of the 2007-2008 update to the Medicare Wage Index Occupational Mix Survey (Form CMS-10079 (2008))	06/09/08	5992
R338OTN	05/02/08	Shared Systems Active and Non-Active Edits/Reason Codes and Audit Trail Reporting	07/07/08	5927
R337OTN	05/02/08	Processing Federally Qualified Health Center (FQHC) Claims for the Telehealth Originating Site Facility Fee	10/06/08	6039
<u>R336OTN</u>	05/02/08	Beneficiary Address Change for Shared Systems	10/06/08	5962

<u>R335OTN</u>	05/02/08	Modification of Core-Based Statistical Area (CBSA) Payment Localities for Contractors that Process Ambulatory Surgical Center (ASC) Claims	10/06/08	6952
R334OTN	05/02/08	New Contractor Numbers for the J.12 Medicare Administrative Contractor Part A and Part B Workloads for the States of Delaware, Maryland, New Jersey, Pennsylvania, and the District of Columbia	07/07/08	5842
R333OTN	04/18/08	Assignment of Providers to MACs	05/19/08	5979
R332OTN	04/11/08	Instructions for Fiscal Intermediary Standard System, Mulit-Carrier System and Healthcare Integrated General Ledger Accounting System Changes	07/07/08	5957
<u>R331OTN</u>	04/11/08	Clinical Laboratory Fee Schedule - Implementation of Sec 112 MMSCHIP Legislation	05/12/08	5987
<u>R330OTN</u>	04/04/08	Extension of Reasonable Cost Payment for Clinical Lab Tests Furnished by Hospitals with Fewer Than 50 Beds in Qualified Rural Areas	07/07/08	5961

<u>R329OTN</u>	04/04/08	Instructions for Fiscal Intermediary Standard System (FISS) and Multi- Carrier System (MCS) Healthcare Integrated General Ledger Accounting System (HIGLAS) Changes	04/07/08	5956
R328OTN	03/26/08	SPLIT OF HI/NV/AZ Part B Workloads and Merge of AZ/Ut/Mt	04/01/08	5733
R327OTN	03/07/08	Production region split for CIGNA Idaho Part B Data	04/07/08	5796
R326OTN	03/07/08	Medicare Fraud Edit Module	07/07/08	5725
R325OTN	03/07/08	New Contractor Numbers for the States of California, Hawaii and Nevada and American Samoa, Guam and Northern Marianna Islands Jurisdiction 1 Part A Medicare Administrative Contractor (MAC) Workload	04/07/08	5901
<u>R324OTN</u>	03/07/08	New Contractor Numbers for the States of Hawaii and Nevada and American Samoa, Guam and Northern Marianna Islands Jurisdiction 1 Part B Medicare Administrative Contractor (MAC) Workload	07/07/08	5904

<u>R323OTN</u>	03/07/08	New Contractor Numbers for the State of California Jurisdiction 1 Part B Medicare Administrative Contractor (MAC) Workload	07/07/08	5905
R321OTN	02/29/08	Refinements in Cost Reporting Due to CMS's Revised Procedures for Recalibrating DRG Relative Weights Under the Inpatient Prospective Payment System	03/31/08	5928
R320OTN	02/08/08	Part A Merge	05/01/08	5778
<u>R319OTN</u>	02/08/08	Fiscal Intermediary Shared System (FISS) Mid-Month Production Region Split	07/07/08	5894
R318OTN	02/08/08	Create User Account for Next Generation Desktop (NGD) on Common Working File (CWF)	07/01/08	5828
R317OTN	02/04/08	Production Region Split and New Contractor Number for Riverbend New Jersey Part A Workload	03/03/08	5786

<u>R316OTN</u>	02/04/08	Submitting Outpatient Provider Specific Data	07/07/08	5869
R315OTN	02/01/08	BOI Extract for CWF and MBD	07/07/08	5864
R314OTN	02/01/08	Limitation of Recoupment - FISS Recoupment and Claims Adjustment Process	07/01/08	5873
<u>R313OTN</u>	02/01/08	New Contractor Numbers for the States of Colorado, New Mexico, Oklahoma, and Texas in Jurisdiction 4 Part AB Medicare Administrative Services (MAC) Workload	03/01/08	5788
R312OTN	02/01/08	EMERGENCY Legislative Change Affecting the 2008 Medicare Physician Fee Schedule (MPFS), and Extension of the 2008 Participation Open Enrollment Period	01/07/08	5944
<u>R311OTN</u>	01/25/08	Support Income Tax Reporting	01/30/08	5816

<u>R3100TN</u>	01/18/08	Requirements for Including an 8- Digit Clinical Trial Number on Claims	04/07/08	5790
R308OTN	01/04/08	SPLIT OF HI/NV/AZ Part B Workloads and Merge of AZ/Ut/Mt	04/01/08	5733
<u>R307OTN</u>	12/21/07	National Provider Identifier Accounts Receivable Netting Process	01/07/08	5654
R306OTN	12/21/07	New Inpatient Spell and Adjustment Process for VA Claims	07/07/08	5783
R305OTN	12/14/07	New Contractor Numbers for the states of Iowa, Kansas, Nebraska and Missouri in Jurisdiction 5 A/B Medicare Administrative Contractor (MAC) Workload	12/01/07	5809
<u>R304OTN</u>	11/30/07	Medicare Exclusion Database (MED) Addition of National Provider Identifier (NPI)	01/07/08	5750

R303OTN	11/23/07	Addition of Data Elements to the Common Working File Database Extract into the Next Generation Desktop Data Repository	01/07/08	5709
R302OTN	11/02/07	Rejection of X12 276 Claim Status Requests That Lack National Provider Identifiers (NPIs)	04/07/08	5726
<u>R301OTN</u>	11/02/07	Automate Adjustments to Home Health Agency (HHA) and Managed Care (MC) Common Working File (CWF) Informational Unsolicited Responses (IURs)	04/07/08	5782
<u>R300OTN</u>	11/02/07	Healthcare Integrated General Ledger Accounting System (HIGLAS) Changes for Implementation of Stage 3 of National Provider Identifier (NPI)	04/07/08	5590
R299OTN	11/02/07	NCPDP Inbound Claim and COB Companion Documents Updated for NPI Reporting	04/07/08	5716
<u>R298OTN</u>	11/02/07	Update Multi-Carrier System (MCS) to Deactivate Billing Numbers for Non-Frequent Billers (Note, this instruction supersedes CR 5296 dated 9/29/2006)	04/07/08	5676

<u>R297OTN</u>	10/26/07	Instructions for Fiscal Intermediary Standard System (FISS) and Multi- Carrier System (MCS) Healthcare Integrated General Ledger Accounting System (HIGLAS) Changes	01/07/08	5773
<u>R296OTN</u>	10/19/07	New Numbers for All MAC Jurisdictions	12/01/07	5651
R295OTN	10/15/07	Durable Medical Equipment Medicare Administrative Contractors (DME MACs) - Discontinuance/Cancellation of the Use of a "WL" Modifier on Claims for the DeWall Posture Protector Orthotic Body Jacket HCPCS Code (L0430)	11/16/07	5758
<u>R294OTN</u>	10/15/07	New Contractor Workload Number for Cahaba RHHI Data	11/01/07	5566
R293OTN	10/05/07	Instructions for Fiscal Intermediary Standard System (FISS) and Multi- Carrier System (MCS) Healthcare Integrated General Ledger Accounting System (HIGLAS) Changes	10/01/07	5705
<u>R291OTN</u>	09/18/07	Cessation of FI-to-FI Moves for Providers that are Members of Chains	10/18/07	5720

<u>R290OTN</u>	08/24/07	New Contractor Number for Trispan Missouri Part A Workload	10/01/07	5650
R289OTN	07/20/07	Present on Admission Indicator Systems Implementation	01/07/08	5679
<u>R288OTN</u>	07/20/07	Creating a New File Transaction Layout Utilizing Automatic Response units	01/07/08	5666
<u>R287OTN</u>	07/13/07	FISS Recoupment and Claims Adjustment Process Changes- Limitation of Recoupment- Analysis and Design	01/07/08	5605
R286OTN	06/29/07	Adding a CMS Specialty Code for Suppliers of Oxygen and/or Oxygen Related Equipment	01/02/08	5563
<u>R285OTN</u>	06/22/07	Implement Changes to the VMS DME Standard System to include SAFE Audit Records	10/01/07	5565

<u>R284OTN</u>	06/22/07	Limiting Numbers of Letters Automatically Generated For Claims Suspended When There is No One-to- One Match of National Provider Identifier (NPI) to Legacy Provider Number	10/01/07	5621
<u>R823OTN</u>	06/15/07	Notifying Affected Parties Regarding Changes to the Mandatory Medigap ("Claim-Based") Crossover Process	07/16/07	5662
R282OTN	05/25/07	Common Working File Informational Unsolicited ResponseAnalysis Only	10/01/07	5611
R281OTN	05/25/07	Revision on the Medicare Summary Notice (MSN) Printing Cycle	10/01/07	5588
R280OTN	05/25/07	Adding Three CMS Specialty Codes for Suppliers of Durable Medical Equipment, Prosthetics, Orthotics and Supplies (DMEPOS)	01/02/08	5576
<u>R279OTN</u>	05/25/07	Continuation of Legacy Number Reporting on Outbound Claims for COBA Process	07/02/07	5549

<u>R278OTN</u>	05/25/07	Department of Veterans Affairs Medicare-equivalent Remittance Advice (MRA) Project: Continued Use of Part A Legacy Provider Numbers After National Provider Identifiers (NPIs) Are Fully Implemented	10/01/07	5615
<u>R277OTN</u>	05/18/07	Physician Quality Reporting Initiative (PQRI) Coding & Reporting Principles	05/18/07	5640
<u>R276OTN</u>	05/01/07	New Contractor Number for Jurisdiction 3 Arizona Part A Workload	10/01/07	5589
<u>R275OTN</u>	05/01/07	New Contractor Workload Number for Cahaba RHHI Data	11/01/07	5566
<u>R274OTN</u>	04/27/07	nvalid Skilled Nursing Facility (SNF) Informational Unsolicited Responses (IURs) from CWF	07/02/07	5587
R273OTN	04/27/07	Discontinuing the Application of Outpatient Frequency of Billing Edits to Roster Bills	10/01/07	5580

<u>R272OTN</u>	04/27/07	Medicare Claims System (MCS) Provider File Extract to the Railroad Retirement Board	10/01/07	5540
R271OTN	04/20/07	Recovery Audit Contractor (RAC)/Other Medicare Contractors Claims Mass Adjustments in VIPS Medicare System (VMS)- Analysis and Design	10/01/07	5497
<u>R269OTN</u>	04/03/07	Instructions for FISS and MCS HIGLAS Changes	07/02/07	5553
<u>R268OTN</u>	03/30/07	Recovery Audit Contractors (RAC)/Other Medicare Contractors Claims Mass Adjustments in MCS- Analysis and Design	07/01/07	5496
<u>R267OTN</u>	03/30/07	RAC/Other Medicare Contractors Claims Mass Adjustments in FISS	09/04/07	5494
<u>R266OTN</u>	03/23/07	New Contractor Number for CIGNA Government Services, LLC- Jurisdiction C DME MAC Workload	06/01/07	5548

<u>R265OTN</u>	03/09/07	Program Overview: 2007 Physician Quality Reporting Initiative	04/09/07	5558
<u>R264OTN</u>	03/09/07	Instructions for Fiscal Intermediary Standard System (FISS) and Mulit- Carrier System (MCS) Healthcare Integrated General Ledger Accounting System (HIGLAS) Changes	04/02/07	5515
R262OTN	01/26/07	Invalid Managed Care Informational Unsolicited Responses (MCIURs) from CWF	04/26/07	5507
<u>R260OTN</u>	01/12/07	Enhance the Multi Carrier System (MCS) to Avoid Duplicate Payments When a Full Claim Adjustment Is Performed. This CR rescinds and fully replaces CR 3878.	04/02/07	5424
<u>R259OTN</u>	01/05/07	Additional Codes for Physician Voluntary Reporting Program (PVRP)	01/02/07	5409
<u>R258OTN</u>	12/26/06	Payment Amounts and Policies in the 2007 Medicare Physician Fee Schedule and the Telehealth Originating Site Facility Fee Payment Amount	01/02/07	5443

<u>R256OTN</u>	12/22/06	Payment Allowances for the Influenza Virus Vaccine (CPT 90655, 90656, 90657, and 90658) and the Pneumococcal Vaccine (CPT 90732) When Payment Is Based on 95 Percent of the Average Wholesale Price (AWP)	01/22/07	5365
<u>R255OTN</u>	12/22/06	Provider Migration	02/01/07	5419
R254OTN	12/22/06	Provision of Data for the Care Management for High Cost Beneficiaries Demonstration from Selected FIs, Carriers, and DME MAC Contractors	01/22/07	5398
R253OTN	12/15/06	Home Health Prospective Payment System (HH PPS) Update for Calendar Year (CY) 2007	01/02/07	5423
<u>R252OTN</u>	12/08/06	Additional Codes for Physician Voluntary Reporting Program (PVRP)	01/02/07	5409
<u>R250OTN</u>	11/17/06	PECOS to FISS Interface Via Extract File	04/02/07	4094

<u>R249OTN</u>	11/13/06	Claims Submitted With Only a National Provider Identifier (NPI) During the Stage 2 NPI Transition Period	11/20/06	5378
<u>R248OTN</u>	11/03/06	Optical Character Recognition (OCR) Interface in the Fiscal Intermediary Standard Systems (FISS)	01/02/07	5347
<u>R247OTN</u>	11/03/06	Returning Paper Claims Received From Clearinghouse	01/02/07	5341
<u>R245OTN</u>	10/27/06	Department of Veterans Affairs (VA) Medicare-equivalent Remittance Advice (MRA) Project: Continued Use of Professional Legacy Provider Numbers After National Provider Identifiers (NPIs) Are Fully Implemented	04/02/07	5352
R244OTN	10/27/06	New Contractor Numbers for Part A for the States of Montana, North Dakota, South Dakota, Utah, and Wyoming in Jurisdiction 3 Part AB Medicare Administrative Services (MAC) Workload	11/01/06	5381
<u>R243OTN</u>	10/27/06	Reporting the National Provider Identifier (NPI) on Physician Claims for Service Purchased Outside of the Local Carrier Jurisdiction	04/02/07	5289

<u>R242OTN</u>	10/27/06	C-Peptide Criteria Exception Guidance	11/27/06	5337
<u>R241OTN</u>	10/12/2006	Update to the Medicare Part B 835 Flat File	11/06/06	5360
R239OTN	09/29/06	Communications Infrastructure Testing	10/30/06	5336
<u>R238OTN</u>	09/29/06	Instructions for Fiscal Intermediary Standard System (FISS) and Multi- Carrier System (MCS) Healthcare Integrated General Ledger Accounting System (HIGLAS) Changes	01/02/07	5305
R237OTN	09/15/06	New Contractor Number for the Jurisdiction D DME MAC Workload for Noridan Adm. Serv., LLC	10/02/06	5279
<u>R236OTN</u>	09/11/06	New Contractor Numbers for Jurisdiction 3 Part AB Medicare Administrative Services (MAC) Workload	10/02/06	5291

R235OTN	08/18/06	Correction of Business Requirement 4320.19	11/20/06	5217
R234OTN	08/18/06	Modification of Editing Requirements in CR 4023 - NPIs and Medicare Legacy Identifiers	10/02/06	5229
R233OTN	08/04/06	Enhance the Multi Carrier System (MCS) to avoid duplicate payments when a full claim adjustment is performed: Analysis and Design Phase	01/02/07	3878
R232OTN	08/04/06	Allowing Veterans Administration (VA) Claims with Various OSCAR Numbers	01/02/07	5240
R230OTN	06/16/06	New Remittance Advice Remark Code Message Used for the Physician's Voluntary Reporting Program (PVRP)	07/17/06	5091
<u>R229OTN</u>	06/09/06	Healthcare Integrated General Ledger Accounting System (HIGLAS) Changes for Stage 2 National Provider Identifier (NPI)	10/02/06	5034

<u>R227OTN</u>	05/26/06	National Council of Prescription Drug Programs Coordination of Benefits (COB) Companion Document Update	08/28/06	5080
<u>R226OTN</u>	05/24/06	Allowing Adjustments to Part A and Part B Veterans Administration (VA) Medicare Remittance Advice (MRA) Claims	10/02/06	4370
<u>R225OTN</u>	05/05/06	Requirements for Systems Changes Needed to Generate Unsolicited Responses to the VA	10/02/06	5077
R224 OTN	04/28/06	Part A and Part B Medicare Administrative Contractor Jurisdiction Implementation	10/2/06	5033
R223 OTN	04/28/06	Contractor Number Changes for National Heritage Insurance Company - Jurisdiction A DME MAC Workload and AdminaStar Federal, Inc Jurisdiction B DME MAC Workload	7/3/06	5053
R221_OTN	04/21/06	Beneficiary Change of Address - Part 2	10/2/06	5021

R220 OTN	04/21/06	Addition of Data Elements to Common Working File (CWF) Database Extract into Next Generation Desktop (NGD) Datamart	10/2/06	5014
R218 OTN	04/07/06	Nesiritide for Treatment of Heart Failure Patients	5/22/06	4312
R217_OTN	03/31/06	2006 Revised American National Standards Institute X12N 837 Institutional Health Care Claim Companion Document	6/29/06	4379
R216_OTN	03/24/06	Contractor Number Changes for Noridian Administrative Services Idaho and Oregon Part A Workloads	5/1/06	4391
R215_OTN	03/10/06	Payment for Power Mobility Device (PMD) Claims	ASAP but No Later Than 3/24/06	4372
R214_OTN	02/17/06	Procedures for Preventing Duplicate Crossover File Submissions to the Coordination of Benefits Contractor	03/17/06	4285

				· · · · ·
R212_OTN	02/10/06	Full Replacement of CR 3980, Termination of Existing Crossover Agreements as Trading Partners Transition to the National Coordination of Benefits Agreement (COBA) Program (CR 3980 is rescinded.)	03/13/06	4325
R211_OTN	02/10/06	Temporary 5 Percent Payment Increase for Home Health Services Furnished in a Rural Area for One Year Under the Home Health Prospective Payment System (HH PPS), Change of the HH PPS Calendar Year (CY) 2006 Update from that of 2.8 Percent Update (Home Health Market Basket Update of 3.6 Minus 0.8 Percentage Point) to that of a Zero Percent Update	02/13/06	4282
R210_OTN	02/10/06	Creation of a Second Participation Enrollment Period for 2006	02/15/06	4346
R209_OTN	02/10/06	Q4080 - Change in HCPCS Code Descriptor	03/13/06	4324
R208_OTN	02/06/06	Analysis of Systems Changes Needed to Generate Unsolicited Responses to the Veterans Administration (VA)	07/03/06	4318

R207_OTN	02/01/06	New 2006 Payment Rate for Services Paid Under the Medicare Physician Fee Schedule	02/13/06	4313
R206_OTN	02/01/06	Modifications/Additions to CR 3730, Frequent Hemodialysis Network (FHN) Payments for Approved Clinical Trial Costs	03/03/06	4138
R205_OTN	02/01/06	Beneficiary Change of Address	07/03/06	4224
R204 OTN	02/01/06	Stage 1 Use and Editing of National Provider Identifier Numbers Received in Electronic Data Interchange Transactions, via Direct Data Entry Screens, or on Paper Claim Forms	01/03/06	4320
R203_OTN	02/01/06	Revision for PPS Payment for Blood Clotting Factor Administered to Hemophilia Inpatients.	03/06/06	4311
R201_OTN	01/19/06	Calculation of the Interim Payment of Indirect Medical Education (IME) Through the Inpatient PPS PRICER for Hospitals That Received an Increase to Their Full-time Equivalent Resident Caps Under Section 422 of the Medicare Modernization Act (MMA), P.L. 108-173 (Replaces 194)	03/31/06	4025

R200_OTN	01/13/06	Mandatory Transition to New Registry That Satisfies Medicare Data Reporting Requirements for Implantable Cardioverter Defibrillators (ICDs)	02/13/06	4249
R199_OTN	12/30/05	New Medicare Summary Notice (MSN) Message Used for the Physician's Voluntary Reporting Program (PVRP)	No later than 30 days from issuance (January 30, 2006)	4230
R198_OTN	12/09/05	Termination of the Eligibility File- Based Crossover Process At All Medicare Contractors	01/09/06	4231
R197_OTN	12/09/05	Inpatient Prospective Payment System (IPPS) and Skilled Nursing Facilities (SNF) Wage Index Corrections FY 2005-2006	01/09/06	4205
R195_OTN	11/10/05	Change of Medicare Part A contractor in the State of Idaho, Oregon, and Utah from Regence Blue Cross and Blue Shield to Noridian Administrative Services	01/03/06	4189
R194_OTN	11/04/05	Calculation of the Interim Payment of Indirect Medical Education (IME) Through the Inpatient PPS PRICER for Hospitals That Received an Increase to Their Full-time Equivalent Resident Caps Under Section 422 of the Medicare Modernization Act (MMA), P.L. 108-173	03/30/06	4025

R193_OTN	11/04/05	Change of Medicare Part B contractor in the State of Utah from Regence Blue Cross and Blue Shield of Utah to Noridian Administrative Services.	01/03/06	4174
R191_OTN	11/03/05	Noridian North Dakota/South Dakota Carrier Number Issue	04/03/06	4165
R190_OTN	11/03/05	Stage 2 Requirements for Use and Editing of National Provider Identifier (NPI) Numbers Received in Electronic Data Interchange (EDI) Transactions, via Direct Data Entry (DDE) Screens, or on Paper Claim Forms	04/03/06	4023
R186 OTN	10/28/05	Coverage by Medicare Advantage (MA) Plans for Implantable Automatic Cardiac Defibrillator (ICD) Services Not Previously Included in MA Capitation Rates	01/03/06	4133
R185_OTN	10/21/05	Payment Allowances for the Influenza Virus Vaccine (CPT 90655, 90656, 90657, and 90658) and the Pneumoccocal Vaccine (CPT 90732) When Payment is Based on 95 Percent of the Average Wholesale Price (AWP)	11/21/05	4109
R184_OTN	10/14/05	National Modifier and Condition Code To Be Used To Identify Disaster Related Claims CR4106 (Replaces 183)	10/03/05	4106

<u>R183_OTN</u>	10/13/05	National Modifier and Condition Code To Be Used To Identify Disaster Related Claims CR4106 (Replaces 181)	10/03/05	4106
R181_OTN	09/23/05	National Modifier and Condition Code To Be Used To Identify Disaster Related Claims	10/03/05	4106
R179 OTN	09/16/05	Calculation of the Interim Payment of Indirect Medical Education (IME) Through the Inpatient PPS PRICER for Hospitals That Received an Increase to Their Full-time Equivalent Resident Caps Under Section 422 of the Medicare Modernization Act (MMA), P.L. 108- 173	12/01-05	4025
<u>R177_OTN</u>	09/02/05	Termination of Existing Crossover Agreements As Trading Partners Transition to the National Coordination of Benefits Agreement (COBA) Program	10/03/05	3980
R176_OTN	08/26/05	Change of the CareFirst Part A Plan to Highmark in the State of Maryland and Washington, DC	10/03/05	4043
<u>R175 OTN</u>	08/26/05	Common Working File (CWF) Calculation of Next Eligible Date for Preventive Services (Replaces 151)	10/03/05	4011

<u>R174_OTN</u>	08/19/05	Fiscal Intermediary Shared System (FISS) Modification	01/03/06	3970
R173_OTN	08/16/05	Overnight Oximetery Testing (Replaces 166)	01/01/06	3751
<u>R171_OTN</u>	08/04/05	Preliminary System Updates in Preparation for Ending the Medicare Contingency Plan in October 2005	10/03/05	3956
<u>R170_OTN</u>	07/29/05	Updates to the Coordination of Benefits Agreement Insurance File (COIF) For Use in the National Crossover Program	01/03/06	3976
R169_OTN	07/29/05	Analysis of Systems Improvements to Streamline Place of Service (POS) Code Set Updates	01/03/06	3950
R168_OTN	07/29/05	Shared System Maintainer Hours for Resolution of Problems Detected During Health Insurance Portability and Accountability Act (HIPAA) Transaction January 2006 Release Testing	01/03/06	3974

R166_OTN	07/22/05	Overnight Oximetery Testing	08/22/05	3751
R164 OTN	07/15/05	Medicare HIPAA Electronic Claims Report - Third Reporting Timeframe Extension	08/05/05	3926
R163_OTN	07/08/05	Qualified Independent Contractor Jurisdictions	08/08/05	3908
R162_OTN	07/08/05	Instructions for Fiscal Intermediary Standard System (FISS) and Multi- Carrier System (MCS) Healthcare Integrated General Ledger	08/08/05	3757
R161_OTN	07/08/05	Accounting System (HIGLAS) Changes Kansas Blue Cross Blue Shield Carrier Numbering Issue	08/03/05	3876
<u>R159 OTN</u>	06/17/05	Requirements for Voided, Canceled, and Deleted Claims (Replaces R149)	10/03/05	3627
		and Dorotte Ciamis (Replaces ICI 17)		

<u>R158 OTN</u>	06/17/05	Instructions for Fiscal Intermediaries (FIs) to Process Payment Adjustments Resulting From Data Assessment and Verification (DAVE) Program Safeguard Contractor (PSC) Medical Review	07/18/05	3799
R157 OTN	06/03/05	CD-ROM Initiative for Distribution of the Annual Disclosure, "Dear Doctor" Letter and Participation Enrollment Material	07/05/05	3891
R156 OTN	05/13/2005	New Patient Status Code 66 to Define Discharges and Transfers to a Critical Access Hospital (CAH)	10/03/2005	3829
<u>R155 OTN</u>	05/09/2005	Payment to Ambulatory Surgery Centers (ASCs) for New CPT Code 66711 (Replaces R153OTN)	07/05/2005	3817
R154_OTN	05/06/2005	Correction 2005 Clinical Laboratory Travel Fee (Codes P9603 and P9604)	07/05/2005	3785
R153 OTN	05/06/2005	Payment to Ambulatory Surgery Centers (ASCs) for New CPT Code 66711	06/06/2005	3817

R151_OTN	04/29/2005	Common Working File (CWF) Calculation of Next Eligible Date for Preventive Services	10/03/2005	3776
R150_OTN	04/29/2005	Shared System Maintainer Hours for Resolution of Problems Detected During Health Insurance Portability and Accountability Act (HIPAA) Transaction Release Testing	10/03/2005	3821
R149 OTN	04/29/2005	Requirements for Voided, Canceled, and Deleted Claims	10/03/2005	3627
R148 OTN	04/15/2005	Revised Coding Guidelines for Drug Administration Codes	05/16/2005	3818
R147 OTN	04/08/2005	Medicare HIPAA Electronic Claims Report - Second Reporting Timeframe Extension	05/06/2005	3780
R146_OTN	03/25/2005	Appeals Transition- BIPA Section 521 Appeals	04/25/2005	3530

R145_OTN	03/11/05	Frequent Hemodialysis Network Payment Changes for Approved Clinical Trial Costs	07/05/05	3730
R144_OTN	03/04/05	Debt Collection Improvement Act Backlog Non-MSP Collections from February 1998 to September 2004	04/05/05	3612
R142 OTN	02/18/05	Frequent Hemodialysis Network Payment Changes for Approved Clinical Trial Costs	07/05/05	3730
<u>R141 OTN</u>	02/04/2005	Shared System and CWF Renovation of Override Code Process (Phase 3)	07/05/05	3718
R140_OTN	02/04/2005	Revisions to January 2005 Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing File	02/04/05	3728
R139 OTN	01/28/2005	Update to the Evaluation Plan for the CD-ROM Initiative Used in the Mailing of the 2005 Annual Participation Enrollment Material	02/15/05	3700

R138_OTN	01/28/2005	Production of Provider Flat Files, including Taxpayer Identification Numbers (TIN), from the Fiscal Intermediary Standard System (FISS), Financial Master Files	07/05/05	3553
R137 OTN	01/28/2005	Instructions to Contractors regarding aged, pre-settlement cases and Inter-Contractor Notices (ICN)s	02/28/2005	3598
R136_OTN	01/21/2005	Medlearn Matters Article Related to the Flu Demonstration	01/28/2005	3696
<u>R135 OTN</u>	01/21/2005	Shared System Maintainer Hours for Resolution of Problems Detected During Health Insurance Portability and Accountability Act (HIPAA) Transaction Release Testing	07/05/2005	3597
R134 OTN	01/14/2005	Revisions to January 2005 Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing File	01/18/2005	3695
R133 OTN	12/23/2004	Shared System Maintainer Hours for Resolution of Problems Detected as a Result of Implementation of CR 2525 and CR 2527	04/04/2005	3603

R131_OTN	12/17/2004	Coverage of Routine Costs of Clinical Trials Involving Investigational Device Exemption (IDE) Category A Devices	01/03/2005	3548
R130_OTN	12/17/2004	Development of a Coordination of Benefits Agreement (COBA) Auxiliary File and Modification of the Health Insurance Portability and Accountability Act (HIPAA) 837 Coordination of Benefits (COB) Flat File and National Council for Prescription Drug Programs (NCPDP) File	04/04/2005	3614
R129_OTN	12/10/2004	2005 Drug Administration Coding Revisions	01/17/2005	3631
R128 OTN	12/10/2004	Promoting Medicare's Preventive Benefits and Services on an Annual Basis	01/03/2005	3527
R127_OTN	12/03/2004	This Transmittal Replaces Transmittal 125. Instructions Applicable to the Audit of Hospitals that are Part of an Affiliated Group in Relation to the "Redistribution of Unused Resident Positions," Section 422 of the Medicare Modernization Act of 2003 (MMA), P.L. 108-173, for Purposes of Graduate Medical Education (GME) Payments	12/06/2004	3558
R126_OTN	11/19/2004	Replaced by Transmittal 27 in Pub. 100-02, Medicare Benefit Policy.	01/03/2005	3554
R125_OTN	11/05/2004	Instructions Applicable to the Audit of Hospitals that are Part of an Affiliated Group in Relation to the "Redistribution of Unused Resident Positions," Section 422 of the Medicare Modernization Act of 2003 (MMA), P.L. 108-173, for Purposes of Graduate Medical Education (GME) Payments	12/06/2004	3558

R124 OTN	10/29/2004	Common Working File (CWF) Duplicate Claim Edit for Referred Clinical Diagnostic and Purchased Diagnostic Services	04/04/2005	3551
<u>R123_OTN</u>	10/29/2004	Instructions For Pricing Treprostinil (Q4077)	11/29/2004	3533
R122_OTN	10/29/2004	Shared System and CWF Renovation of Override Code Process and Recognition of Four 2-byte Modifier Fields on the Part B Query Record – For MCS Phased Implementation Approach Only	04/04/2005	3494
R121_OTN	10/29/2004	Modification to Fiscal Intermediary Standard System (FISS) Regarding Common Working File Initiated Adjustments	04/04/2005	3330
R120_OTN	10/22/2004	Override of Common Working File (CWF) Edit for Observation Services Exceeding 48 Hours	04/04/2005	3311
R119_OTN	10/22/2004	Shared System Maintainer Hours for Resolution of Problems Detected During Health Insurance Portability and Accountability Act (HIPAA) Transaction Release Testing	04/04/2005	3495
R118 OTN	10/15/2004	Shared Systems Maintainer Hours for Resolution of Problems Detected as a Result of Implementation of Change Request 2525 and Change Request 2527	01/03/2005	3536
R117_OTN	09/29/2004	New Remark Code Message for Use with Claims for PEN Pumps – DMERC Only	10/01/2004	3405
R116_OTN	09/24/2004	Notification of Medlearn Matters (MM) Article for Confidential Change Request (CR) 3301	N/A	3465
R114_OTN	09/17/2004	Payment Allowances for the Influenza virus Vaccine (CPT 90658) and the Pneumoccocal Vaccine (CPT 90732) When Payment is Based on 95 Percent of Average Wholesale Price (AWP)	10/01/2004	3490
<u>R113_OTN</u>	09/10/2004	Implementation of Section 921 of the Medicare Modernization Act (MMA) – Provider Customer Service Program	01/05/2005	3376
R112_OTN	09/13/2004	Billing Instructions for ADVATE rAHF-PFM on Medicare Claims	09/27/2004	3331

- 444 OF	00/07/00:	G 1 0 GTTTE 1 111 1	04/00/000	2 4 7 2
<u>R111_OTN</u>	08/27/2004	Creation of CWF Auxiliary File and	01/03/2005	3450
		Associated Logic to Properly		
		Calculate Medicare-Equivalent		
		Deductibles for VA Claims		
R110_OTN	08/27/2004	MMA Drug Pricing Update –	09/27/2004	3418
		Payment Limits for J1000 (Depo-		
		Estradiol cypionate inj)		
R109_OTN	08/27/2004	Billing Instruction for ADVATE	09/27/2004	3331
		rAHF-PFM on Medicare Claims		
<u>R108_OTN</u>	08/27/2004	New Remark Code Message for Use	09/27/2004	3405
		With Claims for Parenteral Pumps-		
		Durable Medical Equipment Regional		
		Carrier (DMERC) Only		
<u>R107_OTN</u>	08/27/2004	CWF Analysis to Process Claims Per	01/03/2004	3320
		the Renovated Override Code		
		Processing and CWF Analysis to		
		Review System Edits for Additional		
		2-byte Modifiers Added in CR 3190.		
R106_OTN	08/24/2004	MMA Drug Pricing Update-Payment	09/24/2004	3419
		Limits for J9045 (Carboplatin		
		injection and J9310 (Rituximab		
		cancer treatment)		

D 4 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0= 120 1200 1		04/08/8005	2221
<u>R103_OTN</u>	07/30/2004	This transmittal replaces Transmittal	01/03/2005	3236
		100.		
		ANCI V12 Transaction 925 Flat File		
		ANSI X12 Transaction 835 Flat File		
		and Companion Document Correction for Carriers and DMERCs, and		
		Deletion of a Hard Coded Reason		
		Code A2 that Has Been Deactivated		
R102_OTN	07/30/2004	Update to the Healthcare Provider	01/03/2005	3259
<u>K102_O1N</u>	07/30/2004	Taxonomy Codes (HPTC)/Medicare	01/03/2003	3239
		Specialty Code Crosswalk		
R101_OTN	07/30/2004	Change of the Premera Blue Cross	10/04/2004	3380
KIOI_OIN	07/30/2004	Medicare Part A Plan Under Contract	10/04/2004	3300
		to BCBSA to a Part A Fiscal		
		Intermediary Contract with Noridian		
		Mutual Insurance Company in the		
		States of Washington and Alaska		
R100_OTN	07/23/2004	This transmittal has been replaced by	01/03/2005	3236
		Transmittal 103.		
R99_OTN	07/23/2004	This One-Time Notification is a Full	01/03/2005	3383
		Replacement for Transmittal 86 (CR		
		3142) Interface File From Recovery		
		Management and Accounting System		
<u>R98_OTN</u>	07/23/2004	Changes to Previous Transmittal	10/04/2004	3343
		Regarding the Discontinued use of		
		Revenue Code 0910		
<u>R97_OTN</u>	07/23/2004	Implementation of the Business	01/03/2005	3362
		Segment Identifier (BSI) in the		
		Healthcare Integrated General Ledger		
Doc Conv	05/00/200	Accounting System (HIGLAS)	40/04/2005	2271
<u>R96_OTN</u>	07/23/2004	Annual Changes to the Amount in	10/01/2005	3354
		Controversy Thresholds for the		
		Administrative Law Judge and		
		Judicial Review Levels of the Claim		
		Appeals Process as Required by		
		Section 940 of the Medicare		
		Prescription Drug, Improvement, and Modernization Act of 2003		
R95_OTN	07/30/2004		01032005	3400
K95_OIN	07/30/2004	Modification to Post-payment Adjustment Process for Home Health	01032003	3400
		Prospective Payment System Claims		
		Failing to Report Prior Inpatient		
		Discharges		
R94_OTN	07/23/2004	Shared System Maintainer Hours for	01/03/2005	3316
10 10111	07,23,2004	Resolution of Problems Detected	01/05/2005	5510
l .	<u> </u>	resolution of Housellis Detected		

		Desire Health Learning Destabilities		
		During Health Insurance Portability		
		and Accountability Act (HIPAA)		
DOG OFFILE	07/00/2004	Transaction Release Testing	07/00/2004	22.52
R93_OTN	07/09/2004	Temporary SNF Extension	07/09/2004	3352
<u>R92_OTN</u>	07/02/2004	Additional Instructions Related to the	07/16/2004	3353
		"Redistribution of Unused Resident		
		Positions," Section 422 of the		
		Medicare Modernization Act of 2003		
		(MMA), P.L. 108-173, for Purposes		
		of Graduate Medical Education		
		(GME) Payments		
<u>R90_OTN</u>	06/25/2004	MMA Drug Pricing Update-Payment	07/25/2004	3312
		Limits for J7308 (Levulan Kerastick)		
		and J9395 (Faslodex)		
R89_OTN	06/25/2004	Shared System Maintainer Hours for	10/04/2004	3305
		Resolution of Problem Detected As A		
		Result of Implementation of CR 2525		
		and CR 2527		
R88_OTN	06/10/2004	Clarification and Revision of Change	07/06/2004	3342
		Request 3084, Implementation of		
		Section 508 (f) of the Medicare		
		Prescription Drug, Improvement, and		
		Modernization Act of 2003 (Public		
		Law 108-173)		
R87_OTN	05/27/2004	Instructions Related to Redistribution	06/14/2004	3247
		of Unused Resident Positions, Section		
		422 CR 3247 (This replaced		
		Transmittal 77)		
R86_OTN	5/28/2004	Interface File from Recovery		3142
		Management and Accounting System		
R85_OTN	5/28/2004	CD-ROM Initiative for Distribution	06/28/2004	3292
		of the Annual Disclosure, Dear		
		Doctor Letter and Participation		
		Enrollment Material		
R84_OTN	5/25/2004	Reporting Medicare Secondary Payer	10/04/2004	3284
		Information on the Health Insurance		
		Portability and Accountability Act for		
		1996 X12N 837 Created Via Free		
		Billing Software		
R83_OTN	05/14/2004	Additional Health Insurance Health	06/14/2004	3255
		Insurance Portability and		
		Accountability Act Coordination of		
		Benefits Information for Trading		
		Partners		
R82_OTN	05/14/2004	Changes in Determining Rural Status	06/01/2004	3214
		of Hospital for Transitional	10/04/2004	
1	1	1		

		Outpatient Payments for 2004		
R81_OTN	05/14/2004	Requirement for Carriers, Durable Medical Equipment Regional Carriers, Fiscal Intermediaries	04/30/04	3157
R80_OTN	05/07/2004	Medicare Systems Acceptance of New Provider Numbers for Home Health Agencies	10/04/2004	3245
R79_OTN	05/07/2004	18-Month Moratorium on Physician Self-Referrals to Specialty Hospitals; Processing of Form CMS-855A Applications to Become a Medicare Certified Hospital	06/07/2004	3193
<u>R78_OTN</u>	04/30/2004	Renovate Override Code Processing In Common Working File	10/04/2004	3190
<u>R77_OTN</u>	04/30/2004	Instructions Related to "Redistribution of Unused Resident Positions, Section 422 of the Medicare Modernization Act of 2003, P.L. 108-173, for Purposes of Graduate Medical Education Payments	06/04/2004	3247
R76_OTN	04/30/2004	Shared System Maintainer Hours for Resolution of Problems Detected During Health Insurance Portability and Accountability Act Transaction Release Testing	10/04/2004	3178
R75_OTN	04/23/2004	One time instructions for audit intermediary cost reporting processes to accommodate claims processing error that prevented some supply charges from being reported on home health prospective payment system claims	05/24/2004	3147
R74_OTN	04/23/2004	Emergency Correction Regarding Correction to Healthcare Common Procedure Coding System (HCPCS) Codes for Low Osmolar Contrast Material	05/24/2004	3187
R73_OTN	04/23/2004	Revised American National Standards Institute X12N 837 Professional Health Care Claim Companion Document	05/24/2004	3177
R72_OTN	04/16/2004	Changes in Determining Rural Status of Hospitals for Transitional Outpatient Payment	01/01/2004 10/04/2004	3214
<u>R71_OTN</u>	04/16/2004	Update to the Healthcare Provider	05/17/2004	3188

		taxonomy codes version		
R70_OTN	04/09/2004	How Fiscal Intermediary's are to Record Coinsurance Amounts from The Provider Statistical and Reimbursement (PS&R) Report for Providers Who Elected to Accept Reduced Coinsurance for Outpatient Prospective Payment System (OPPS) Services	05/10/2004	3166
R69_OTN	04/09/2004	Carrier Only* Shared System Maintainer Hours for Resolution of Problems Detected As A Result of Implementation of CR 2525 and CR 2527	07/06/2004	3146
R68_OTN	04/02/2004	Transmittal 49 Implementation Date Extension	07/06/2004	3197
R67_OTN	04/02/2004	Requirement for Carriers, Durable Medical Equipment Regional Carriers, Fiscal Intermediaries, and Full Program Safeguard Contractors to Encourage Providers to Submit Medical Records to the Comprehensive Error Rate Testing Contractor for Use in the November 2004 Improper Medicare Fee-For- Service Payment Report	04/30/2004	3157
R65_OTN	03/26/2004	Implementation of Section 508(f) of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (Public Law 108-173)	04/26/2004	3084
R64_OTN	03/26/2004	Implementation of Sections 401, 402, 504 and 508(a) of the Medicare Prescription Drug, Improvement, and Modernization Act of 2003 (Public Law 108-173)	04/05/2004	3158
R63_OTN	03/26/2004	Durable Medical Equipment Regional Carriers (DMERCs) – DeWall Posture Protector Orthotic Body Jacket (L0430): Continuation of CMS' Policy Stated in CR 2711 (B- 03-025) dated April 11, 2003.	N/A	3224
R62_OTN	03/26/2004	Physician Self-Referral Prohibition; 18-Month Moratorium on Physician Investment in Specialty Hospitals	04/02/2004	
R61_OTN	03/12/2004	Changes to the FY 2004 Graduate Medical Education (GME) Payments	05/12/2004	3071

		as Required by the Medicare Modernization Act of 2003 (MMA), P.L. 108-173		
R59 OTN	02/20/2004	Temporary 5 Percent Payment Increase for Home Health Services Furnished in a Rural Area for One year Under the Home Health Prospective Payment System (HH PPS), Change of HH PPS Annual Update from a Fiscal Year Update from a Fiscal Year Update to a Calendar Year Update, and Adjustment to HH PPS Annual Update to the Home Health Market Basket Percentage Increase Minus 0.8 Percent	04/05/2004	3085
R58_OTN	02/13/2004	Program Integrity Management Reporting (PIMR) System Program Integrity Management Reporting System (PIMR) FY 2004 F and T Codes	01/01/2004, for FISS and MCS and 07/06/2004 for VIPS	3110
R56OTN	02/06/2004	Program Integrity Management Reporting (PIMR) System for Part A -Phase 4	07/06/2004	3113
R55OTN	02/06/2004	Shared System Maintainer Hours for Resolution of Problems Detected During Health Insurance Portability and Accountability Act (HIPAA) Transaction Release Testing	07/06/2004	3067
R54OTN	02/06/2004	Introduction of "Medlearn MattersInformation for Medicare Providers" and Instructions for Carrier/Intermediary Use of This New Provider Education Vehicle	03/08/2004	3129
R53OTN	02/06/2004	Surgical Lines with No Charges	07/06/2004	3104
R52OTN	02/06/2004	Provider Data on Outbound	07/06/2004	3101
		Coordination of Benefit (COB) Files		
R51OTN	02/06/2004	Changes in Payment for Services Furnished in Ambulatory Surgical Centers for Fiscal Year 2004	04/05/2004	3082
R50OTN	01/30/03	ANSI X12 Transaction 270/271 Changes	04/05/2004	3065
R49OTN	01/30/03	Announcement of Medicare Rural	03/02/2004	3075

	1	Health Clinica (DHC-) and Enda H	1	
		Health Clinics (RHCs) and Federally		
		Qualified Health Centers (FQHCs)		
D 100 FD 1	04/20/02	Payment Rate Increases	0.4/0.4/200.4	20.52
R48OTN	01/30/03	Transfer of "WW" Codes for Oral	04/01/2004	2863
		Anti-Cancer Drugs Billed Using		
		National Drug Codes (NDCs) on		
		Durable Medical Equipment Regional		
		Carrier (DMERC) Claims		
<u>R470TN</u>	01/23/2004	Implementation of the Occupational	02/23/2004	3043
		Mix Survey		
<u>R46OTN</u>	01/23/2004	Railroad Medicare Carrier Collection	02/23/2004	3041
		of Data		
R45OTN	01/23/2004	Emergency Correction to Healthcare	04/05/2004	3053
		Common Procedure Coding System		
		(HCPCS) Codes for Low Osmolar		
		Contrast Material		
<u>R44OTN</u>	01/23/2004	Correction—CWF Edits for Inserts	04/01/2004	3029
		for Therapeutic Shoes		
R43OTN	01/23/2004	Correction To The Effective Date On	02/23/2004	3008
		9 Code Pairs in Correct Coding		
		Initiative (CCI) Version 9.3		
		(Cardiology edits)		
R42OTN	01/16/2004	Payment to Ambulatory Surgical	02/02/2004	2979
		Centers (ASCs) for G0260 and to		
		Physicians for 27096 When 27096 is		
		Performed in an ASC		
<u>R410TN</u>	01/09/2004	Provider Education Article: New	01/09/2004	3044
		Enrollee Rights, New Provider		
		Responsibilities in M+C Program		
R40OTN	01/06/2004	Provider Education Article: Renewed	01/20/2004	3045
		Moratorium on Outpatient		
		Rehabilitation Therapy Caps		
<u>R390TN</u>	01/06/2004	This One-Time Notification replaces	01/05/2004	2963
		Transmittal 18, originally a		
		Confidential Requirement. The only		
		change to this transmittal is that it is		
		no longer a Confidential		
		Requirement and can now be posted		
		to the Internet or Intranet. All other		
		information remains the same.		
		Change in Coding on Medicare		
		Claims for Darbepoetin Alfa (trade		
		name Aranesp) and Epoetin Alfa		
		(trade name Epogen, EPO) For		
		Treatment Of Anemia In End Stage		
I	ĺ	Renal Disease (ESRD) Patients On	Ĭ	i

		Dialysis		
R38OTN	01/02/2004	Provider Education Article: 2004 Medicare Physician Fee Schedule Increase and Extension of the Annual Participation Enrollment Period	01/05/2004	3040
R37OTN	01/02/2004	One time instructions for home health cost reporting processes to accommodate claims processing errors that prevented some supply charges from being reported on home health prospective payment system claims	02/02/2004	2993
R36OTN	12/24/2003	Additional Modification Regarding Change Request (CR) 2963: Change in Coding on Medicare Claims for Darbepoetin Alfa (trade name Aranesp) and Epoetin Alfa (trade name Epogen, EPO) For Treatment of Anemia In End Stage Renal Disease (ESRD) Patients On Dialysis	01/05/2004	3037
R35OTN	12/24/2003	Emergency Correction to the Fee Schedule Update for 2004 for Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)	01/05/2004	3020
R34OTN	12/24/2003	2004 Medicare Physician Fee Schedule ANNUAL CHANGES	01/05/2004	3028
R33OTN	12/19/2003	Change of Medicare Part A Plan under contract with the Blue Cross/Blue Shield Association (BCBSA) and change of Part B carrier in the State of Rhode Island from BC/BS of Rhode Island to Arkansas BC/BS.	02/01/2004	2974
R32OTN	12/19/2003	January 2004 Update of the Hospital Outpatient Prospective Payment System (OPPS)	01/05/2004	3007
R31OTN	12/19/2003	Emergency Revised 2004 Update of the DMEPOS and Clinical Laboratory Fee Schedules	01/05/2004	3013
R30OTN	12/19/03	Changes in Transitional Outpatient Payment (TOP) for 2004	01/05/2004	3015
R29OTN	12/19/03	Revised American National Standards Institute X12N 837 Professional Health Care Claim Companion Document	01/20/2004	2900
R28OTN	12/10/03	2004 Medicare Physician Fee	01/05/04	3009

		Schedule Increase and Extension of the Annual Participation Enrollment		
		Period		
R27OTN	12/08/03	Emergency Correction to the 2004 Healthcare Common Procedure Coding System (HCPCS) File	01/05/04	3002
R26OTN	11/28/03	Coding and Billing Instructions for Velcade TM (bortezomib)	01/01/04	2982
R25OTN	11/28/03	Clarification of Mammography Annual Screening Examination	12/10/03	2932
R23OTN	11/21/2003	Payment for Ambulance Services Furnished by New Suppliers	N/A	2700
R22OTN	11/21/2003	Clarification to Transmittal B-03-059 (CR 2755) - Minimum Number of Pricing Files That Must Be Maintained Online for Medicare Single Drug Pricer (SDP)	01/05/04	2950
R20OTN	11/07/2003	2004 Annual for Clinical Laboratory Fee Schedule and Laboratory Services Subject to Reasonable Charge Payment Method.	01/05/2004	2959
R17OTN	10/31/2003	This transmittal provides instructions for updating and implementing the 2004 fee schedule amounts for DMEPOS.	01/05/2004	2957
R16OTN	10/31/2003	This corrects certain wage index values and hospital geographical classifications published incorrectly in the Federal fiscal year 2004 Federal Register, instructs the fiscal intermediaries (FI) to reprocess claims containing diagnosis-related groups 104, 105, and 525.	11/05/2003	2971
R15OTN	10/31/03	Changes in Transitional Outpatient Payment (TOP) for 2004.	01/05/2004	2908
R14OTN	10/31/2003	This one time notification updates the record format requirements for the CERT provider address file and the sample claims resolution file. There is new information regarding record sizes and field definitions in this one time notification.	04/05/2004	2824
R13OTN	10/31/2003	This is a One Time Notification for Program Integrity Management Reporting (PIMR) System for Part A -Phase 3	04/05/2004	2646
R12OTN	10/24/2003	This instruction informs contractors	01/01/2004	2935

		of new waived tests approved by the Food and Drug Administration under Clinical Laboratory Improvement Amendments of 1988. Since these tests are marketed immediately after approval, the Centers for Medicare and Medicaid Services must notify its contractors of the new tests so that the contractors can accurately process claims.		
R10OTN	10/22/2003	This instruction communicates requirements to shared system maintainers and contractors notifying them of changes to the laboratory edit module to update it for changes in the NCDs for January 1, 2004.	01/01/2004	2940
R9OTN	10/17/2003	This instruction provides updated information regarding the hours reserved to correct problems in the April 2004 release.	04/01/2004	2920
R8OTN	10/17/2003	This instruction provides a revised X12N 4010A1 837 professional flat file for carriers. R	04/01/2004	2840
R7OTN	10/17/2003	This instruction adds two HCPCS codes to existing CWF edit for inserts for therapeutic shoe.	04/01/2004	2746
R6OTN	10/01/2003	This notification provides the Table of Contents for One-Time Notification instructions.	N/A	N/A
R5OTN	10/01/03	New Waived Tests - October 2003	10/01/2003	2791
R4OTN	09/22/2003	Revision to Attachment 2 in CR 2880.	01/01/2004	2922
R3OTN	09/12/2003	This transmittal provides the payment allowances for the influenza virus vaccine (CPT 90658 and CPT 90659) when payment is based on 95 percent of the Average Wholesale Price.	10/01/2003	2918
R2OTN	09/12/2003	The New Online CMS Manual System Announcement	10/01/2003	2886
R1OTN	09/08/2003	This notification indicates the method by which tositumomab and Iodine I-131 tositumomab (Bexxar) are paid if covered by the Medicare program.	10/01/2003	2914