
CMS Manual System

Pub. 100-04 Medicare Claims Processing

Department of Health &
Human Services (DHHS)
Centers for Medicare &
Medicaid Services (CMS)

Transmittal 105

Date: FEBRUARY 20, 2004

CHANGE REQUEST 3128

I. SUMMARY OF CHANGES: 1st Update to the 2004 Medicare Physician Fee Schedule Database

NEW/REVISED MATERIAL - EFFECTIVE DATE: January 1, 2004

***IMPLEMENTATION DATE: April 5, 2004**

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.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual not updated.)
(R = REVISED, N = NEW, D = DELETED – (Only One Per Row.)

| R/N/D | CHAPTER/SECTION/SUBSECTION/TITLE |
|-------|----------------------------------|
| | N/A |
| | |
| | |
| | |

***III. FUNDING:**

These instructions shall be implemented within your current operating budget.

IV. ATTACHMENTS:

| | |
|----------|--------------------------------------|
| | Business Requirements |
| | Manual Instruction |
| | Confidential Requirements |
| | One-Time Notification |
| X | Recurring Update Notification |

***Medicare contractors only**

Attachment – Recurring Update Notification

| | | | |
|-------------|------------------|-------------------------|---------------------|
| Pub. 100-04 | Transmittal: 105 | Date: February 20, 2004 | Change Request 3128 |
|-------------|------------------|-------------------------|---------------------|

SUBJECT: 1st Update to the 2004 Medicare Physician Fee Schedule Database

I. GENERAL INFORMATION

A. Background: Payment files were issued to carriers based upon the November 7, 2003, and January 7, 2004 Final Rules. This CR corrects mistakes that were in those payment files.

B. Policy: Section 1848(c)(4) of the Social Security Act

C. Provider Education: Intermediaries and carriers shall inform affected providers by posting either a summary or relevant portions of this document on their Web site within 2 weeks. Also, intermediaries and carriers shall publish this same information in their next regularly scheduled bulletin. If they have a listserv that targets affected providers, they shall use it to notify subscribers that information about the 1st Update to the 2004 Medicare Physician Fee Schedule Database is available on their Web site.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement

"Should" denotes an optional requirement

| Requirement # | Requirements | Responsibility |
|---------------|---|----------------|
| 3128.1 | Carriers shall, in accordance with Pub 100-4, Chapter 23, §30.1, give providers 30 days notice before implementing the revised payment amounts identified in Attachment 1. Unless otherwise stated in this transmittal, changes will be retroactive to January 1, 2004. | |
| 3128.2 | Carriers and intermediaries need not search their files to either retract payment for claims already paid or to retroactively pay claims. However, carriers shall adjust claims brought to their attention. | |
| 3128.3 | Carriers and intermediaries shall retrieve the revised payment files, as identified in Attachment 2, from the CMS Mainframe Telecommunications System on February 9, 2004. | |

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| 3128.4 | Intermediaries and carriers shall inform affected providers by posting either a summary or relevant portions of this document on their Web site within two weeks. Also, intermediaries and carriers shall publish this same information in their next regularly scheduled bulletin. If they have a listserv that targets affected providers, they shall use it to notify subscribers that information about the 1 st Update to the 2004 Medicare Physician Fee Schedule Database is available on their Web site. | |
|--------|---|--|

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions:

| X-Ref Requirement # | Instructions |
|---------------------|--------------|
| | |

B. Design Considerations:

| X-Ref Requirement # | Recommendation for Medicare System Requirements |
|---------------------|---|
| | |

C. Interfaces:

D. Contractor Financial Reporting /Workload Impact:

E. Dependencies:

F. Testing Considerations:

IV. SCHEDULE, CONTACTS, AND FUNDING

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| <p>Effective Date: January 1, 2004</p> <p>Implementation Date: April 5, 2004</p> <p>Pre-Implementation Contact(s): Rick Ensor, (410) 786-5617</p> <p>Post-Implementation Contact(s): Rick Ensor, , (410) 786-5617</p> | <p>These instructions shall be implemented within your current operating budget.</p> |
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Attachment 1

Changes included in this 1st Update to the 2004 Medicare Physician Fee Schedule Database are as follows;

| <u>CPT/HCPCS</u> | <u>ACTION</u> |
|------------------|--|
| A4644 | Procedure Status = E |
| A4645 | Procedure Status = E |
| A4646 | Procedure Status = E |
| A9525 | Procedure Status = I |
| G0268 | TOS Indicator = 2 This change is effective January 1, 2003. |
| 0037T | Bilateral Surgery Indicator = 1 Effective for services performed on or after January 1, 2003. |
| 47133 | Procedure Status = X |
| 47525 | Bilateral Surgery Indicator = 1 |
| 52001 | Endoscopic Base Code = 52000 |
| 52001 | Multiple Procedure Indicator = 3 |
| 52005 | Endoscopic Base Code = 52000 |
| 52005 | Multiple Procedure Indicator = 3 |
| 52234 | Endoscopic Base Code = 52000 |
| 52234 | Multiple Procedure Indicator = 3 |
| 52235 | Endoscopic Base Code = 52000 |
| 52235 | Multiple Procedure Indicator = 3 |
| 52240 | Endoscopic Base Code = 52000 |
| 52240 | Multiple Procedure Indicator = 3 |

| | |
|------------|---|
| 52400 | Endoscopic Base Code = 52000 |
| 52400 | Multiple Procedure Indicator = 3 |
| 63048 | Bilateral Surgery Indicator = 1 |
| 73720 | Bilateral Surgery Indicator = 0 |
| 73720 – 26 | Bilateral Surgery Indicator = 0 |
| 73720 – TC | Bilateral Surgery Indicator = 0 |
| 76070 | Effective for payment 01/01/2003 |
| 76070 - 26 | Effective for payment 01/01/2003 |
| 76070 - TC | Effective for payment 01/01/2003 |
| | Note: Carriers should duplicate all indicators that existed effective 03/01/2003. |
| 76511 | Non Facility PE RVU = 1.83 Facility PE RVU = 1.83 |
| 76511 - TC | Non Facility PE RVU = 1.43 Facility PE RVU = 1.43 |
| 76512 | Non Facility PE RVU = 1.75 Facility PE RVU = 1.75 |
| 76512 - TC | Non Facility PE RVU = 1.45 Facility PE RVU = 1.45 |
| 76513 | Non Facility PE RVU = 1.84 Facility PE RVU = 1.84 |
| 76513 - TC | Non Facility PE RVU = 1.54 Facility PE RVU = 1.54 |
| 76516 | Non Facility PE RVU = 1.45 Facility PE RVU = 1.45 |
| 76516 - TC | Non Facility PE RVU = 1.20 Facility PE RVU = 1.20 |
| 76519 | Non Facility PE RVU = 1.54 Facility PE RVU = 1.54 |
| 76519 - TC | Non Facility PE RVU = 1.29 Facility PE RVU = 1.29 |

76529 Non Facility PE RVU = 1.40
Facility PE RVU = 1.40

76529 - TC Non Facility PE RVU = 1.15
Facility PE RVU = 1.15

76950 - TC Diagnostic Supervision Indicator = 1

89220 Procedure Status = A
Non-Facility PE RVU= 0.40
Facility PE RVU= 0.40
Malpractice RVU = 0.02
PC/TC = 3
SOS = 1
Multiple Procedure Indicator = 0
Bilateral Procedure Indicator = 0
Assistant at Surgery Indicator = 0
Co-Surgery Indicator = 0
Team Surgery Indicator = 0

89230 Procedure Status = A
Non-Facility PE RVU= 0.44
Facility PE RVU= 0.44
Malpractice RVU = 0.02
PC/TC = 3
SOS = 1
Multiple Procedure Indicator = 0
Bilateral Procedure Indicator = 0
Assistant at Surgery Indicator = 0
Co-Surgery Indicator = 0
Team Surgery Indicator = 0

89240 Procedure Status = C
PC/TC = 0
SOS = 1
Multiple Procedure Indicator = 0
Bilateral Procedure Indicator = 0
Assistant at Surgery Indicator = 0
Co-Surgery Indicator = 0
Team Surgery Indicator = 0

92136 – 26 Bilateral Surgery Indicator = 3

94240 Non Facility PE RVU = 0.70
Facility PE RVU = 0.70

94240 - TC Non Facility PE RVU = 0.62
Facility PE RVU = 0.62

96412 Work RVU = 0.17

Attachment 2

Filenames For Revised Payment Files

The filename for this 1st Update to the 2004 Medicare Physician Fee Schedule Database for carriers is:

[MU00.@BF12390.MPFS.CY04.UP1.C00000.V0209](#)

The file names for this 1st Update to the 2004 Medicare Physician Fee Schedule Database for intermediaries are:

SNF Abstract File

[MU00.@BF12390.MPFS.CY04.UP1.SNF.V0209.FI](#)

Railroad Board File

[MU00.@BF12390.MPFS.CY04.UP1.V0209.RRB](#)

Therapy/CORF Abstract File

[MU00.@BF12390.MPFS.CY04.UP1.ABSTR.V0209.FI](#)

Therapy/CORF Supplemental File:

[MU00.@BF12390.MPFS.CY04.UP1.SUPL.V0209.FI](#)

Mammography Abstract File

[MU00.@BF12390.MPFS.CY04.UP1.MAMMO.V0209.FI](#)

Hospice File

[MU00.@BF12390.MPFS.CY04.UP1.ALL.V0209.RHHI](#)