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# PROGRAM MEMORANDUM INTERMEDIARIES/CARRIERS

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Department of Health  
and Human Services

Health Care Financing  
Administration

**Transmittal AB-00-18**

**Date MARCH 2000**

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## CHANGE REQUEST 1070

**SUBJECT: Consolidated Billing for Skilled Nursing Facilities (SNFs)--The Balanced Budget Refinement Act of 1999**

This Program Memorandum (PM) gives updated information concerning consolidated billing for SNFs. Consolidated billing for SNF residents in a Part B stay is still delayed until further notice (AB-98-35). Consolidated billing continues to apply to all the services and supplies that an SNF resident receives while in an SNF PPS Part A stay, other than those services that are specifically identified as being excluded from this requirement (e.g., renal dialysis services that are covered under Part B). When a resident receives a type of service that is excluded from consolidated billing, the outside entity that furnishes the service must submit a bill directly to Medicare rather than through the SNF. When billing Medicare directly, the outside entity must bill the Part B carrier, the DMERC, or the fiscal intermediary as appropriate for the services and supplies rendered to the resident.

Section 103 of the Balanced Budget Refinement Act of 1999 makes certain additions to the statutory exclusion list at section 1888(e)(2)(A) of the Social Security Act, effective for services furnished on or after April 1, 2000. First, it expands the existing statutory exclusion of Part B-covered dialysis services to encompass ambulance services that are furnished in conjunction with the excluded dialysis services. Thus, for ambulance services that are necessary to transport an SNF resident offsite to receive Part B dialysis services, the ambulance supplier will bill Medicare directly rather than through the SNF.

In addition, this provision identifies, by HCFA Common Procedure Coding System (HCPCS) code, certain individual excluded services within several broader categories of services that are not excluded. The HCPCS codes for the excluded services appear below, by service category. Thus, within the following categories, the specific services identified by the HCPCS codes shown below are separately billable by an outside entity when furnished to an SNF resident. All other services within these categories remain subject to consolidated billing and must be billed by the SNF itself when furnished to an SNF resident while in an SNF PPS Part A stay.

### Chemotherapy Items

The excluded HCPCS codes for chemotherapy items are:

J9000	J9065	J9095	J9150	J9206	J9270	J9350
J9015	J9070	J9096	J9151	J9208	J9280	J9360
J9020	J9080	J9097	J9170	J9211	J9290	J9370
J9040	J9090	J9100	J9181	J9230	J9291	J9375
J9045	J9091	J9110	J9182	J9245	J9293	J9380
J9050	J9092	J9120	J9185	J9265	J9310	J9390
J9060	J9093	J9130	J9200	J9266	J9320	J9600
J9062	J9094	J9140	J9201	J9268	J9340	

**HCFA-Pub. 60AB**

**Chemotherapy Administration Services**

The excluded HCPCS codes for chemotherapy administration services are:

36260	36530	36534	96405	96412	96423	96450
36261	36531	36535	96406	96414	96425	96520
36262	36532	36640	96408	96420	96440	96530
36489	36533	36823	96410	96422	96445	96542

**Radioisotope Services**

The excluded HCPCS codes for applicable radioisotope services are:

79030	79100	79200	79300	79400	79420	79440
79035						

**Customized Prosthetic Devices**

The excluded HCPCS codes for applicable customized prosthetic devices are:

L5050	L5628	L5678	L5826	L6310	L6682	L6865
L5060	L5629	L5680	L5828	L6320	L6684	L6867
L5100	L5630	L5682	L5830	L6350	L6686	L6868
L5105	L5631	L5684	L5840	L6360	L6687	L6870
L5150	L5632	L5686	L5845	L6370	L6688	L6872
L5160	L5634	L5688	L5846	L6400	L6689	L6873
L5200	L5636	L5690	L5850	L6450	L6690	L6875
L5210	L5637	L5692	L5855	L6500	L6691	L6880
L5220	L5638	L5694	L5910	L6550	L6692	L6920
L5230	L5639	L5695	L5920	L6570	L6693	L6925
L5250	L5640	L5696	L5925	L6580	L6700	L6930
L5270	L5642	L5697	L5930	L6582	L6705	L6935
L5280	L5643	L5698	L5940	L6584	L6710	L6940
L5300	L5644	L5699	L5950	L6586	L6715	L6945
L5310	L5645	L5700	L5960	L6588	L6720	L6950
L5320	L5646	L5701	L5962	L6590	L6725	L6955
L5330	L5647	L5702	L5964	L6600	L6730	L6960

L5340	L5648	L5704	L5966	L6605	L6735	L6965
L5500	L5649	L5705	L5968	L6610	L6740	L6970
L5505	L5650	L5706	L5970	L6615	L6745	L6975
L5510	L5651	L5707	L5972	L6616	L6750	L7010
L5520	L5652	L5710	L5974	L6620	L6755	L7015
L5530	L5653	L5711	L5975	L6623	L6765	L7020
L5535	L5654	L5712	L5976	L6625	L6770	L7025
L5540	L5655	L5714	L5978	L6628	L6775	L7030
L5560	L5656	L5716	L5979	L6629	L6780	L7035
L5570	L5658	L5718	L5980	L6630	L6790	L7040
L5580	L5660	L5722	L5981	L6632	L6795	L7045
L5585	L5661	L5724	L5982	L6635	L6800	L7170
L5590	L5662	L5726	L5984	L6637	L6805	L7180
L5595	L5663	L5728	L5985	L6640	L6806	L7185
L5600	L5664	L5780	L5986	L6641	L6807	L7186
L5610	L5665	L5785	L5988	L6642	L6808	L7190
L5611	L5666	L5790	L6050	L6645	L6809	L7191
L5613	L5667	L5795	L6055	L6650	L6810	L7260
L5614	L5668	L5810	L6100	L6655	L6825	L7261
L5616	L5669	L5811	L6110	L6660	L6830	L7266
L5617	L5670	L5812	L6120	L6665	L6835	L7272
L5618	L5672	L5814	L6130	L6670	L6840	L7274
L5620	L5674	L5816	L6200	L6672	L6845	L7362
L5622	L5675	L5818	L6205	L6675	L6850	L7364
L5624	L5676	L5822	L6250	L6676	L6855	L7366
L5626	L5677	L5824	L6300	L6680	L6860	

**The effective date for this PM is April 1, 2000.**

**The implementation date for this PM is April 1, 2000.**

**These instructions should be implemented within your current operating budget.**

**This PM may be discarded after March 31, 2001.**

**Questions concerning this PM should be directed to your regional office.**