



News Flash - The Centers for Medicare & Medicaid Services (CMS) has posted "Medicare's Practical Guide to the E-Prescribing Incentive Program", which explains the e-prescribing incentive program, how eligible professionals can participate, and how to choose a qualified e-prescribing system. To read or print the guide, visit

<u>http://www.cms.hhs.gov/partnerships/downloads/11399.pdf</u> on the CMS website. By adopting e-prescribing through Medicare's program, eligible professionals can save time, enhance office and pharmacy productivity, and improve patient safety and quality of care while earning incentives from Medicare. For additional information about e-prescribing, you can also visit: http://www.cms.hhs.gov/PQRI and select "E-prescribing Incentive Program"; or visit http://www.cms.hhs.gov/eprescribing (for information on Part D e-prescribing standards that will be effective April 1, 2009); and http://www.ehealthinitiative.org/ to download "A Clinician's Guide to Electronic Prescribing."

MLN Matters Number: MM6106 Related Change Request (CR) #: 6106

Related CR Release Date: November 21, 2008 Effective Date: January 1, 2009

Related CR Transmittal #: R1639CP Implementation Date: January 5, 2009

Health Professional Shortage Area (HPSA) Bonus Payment Policy Changes

Provider Types Affected

Physicians and providers submitting claims to Medicare Carriers, Medicare Administrative Contractors (A/B MACs), and/or Fiscal Intermediaries (FIs) for services provided to Medicare beneficiaries in areas designated as geographic HPSAs.

Provider Action Needed

This article is based on Change Request (CR) 6106 and informs providers who are serving Medicare beneficiaries in areas that were eligible on December 31 of the prior year for the HPSA bonus but not on the automated ZIP code list to use the AQ modifier to receive the HPSA bonus payment. Make sure billing staff are aware of the clarified criteria for proper use of the AQ modifier.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

Background

The Section 1833(m) of the Social Security Act provides for an additional 10 percent bonus payment for physicians' services furnished to a covered individual in an area that is designated as a geographic HPSA prior to the beginning of the year in which the services were provided. Such HPSA areas are identified by the Secretary of the Department of Health and Human Services prior to the beginning of such year. The Centers for Medicare & Medicaid Services (CMS) posts a file annually of ZIP codes within which the HPSA bonus payment should be made automatically. Physicians furnishing services in areas that were eligible for the HPSA bonus prior to the beginning of the year but not on the automated list have been instructed to use the AQ modifier to receive the HPSA bonus payment.

Key Points

- Effective for claims with dates of service on or after January 1, 2009, only services furnished in areas that are designated as geographic HPSAs as of December 31 of the prior year are eligible for the HPSA bonus payment.
- Services furnished in areas that are designated at any time during the current year will not be eligible for the HPSA bonus payment until the following year, provided they are still designated on December 31.
- If you are providing services to Medicare beneficiaries in areas that are
 designated on December 31 of the prior year but not included on the list of
 zip codes eligible for automated HPSA bonus payments make certain you
 use the AQ modifier to receive the HPSA bonus payment.
- Remember, your Medicare Contractor will automatically make a HPSA bonus payment to physicians providing eligible services in a ZIP code included in the annual file.

Additional Information

If you have questions, please contact your Medicare Carrier, FI or A/B MAC at their toll-free number which may be found at http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip

<u>nttp://www.cms.nns.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip</u> on the CMS website.

For complete details regarding this Change Request (CR) please see the official instruction (CR6106) issued to your Medicare A/B MAC, carrier or FI. That instruction may be viewed by going to

<u>http://www.cms.hhs.gov/Transmittals/downloads/R1639CP.pdf</u> on the CMS website.

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