Medicare Learning Network
MLN Matters
CMS CENTERS for MEDICARE & MEDICAID SERVICES
Information for Medicare Fee-for-Service Health Care Professionals

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Effective Date: October 1, 2005
Implementation Date: October 3, 2005

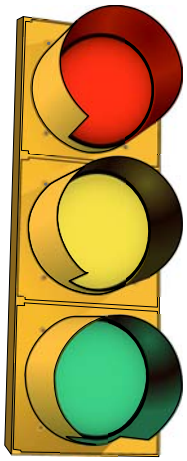
Modification of FISS Edits for Colorectal Cancer Screening Services (HCPCS Codes G0104, G0106, G0107, G0120, and G0328) Furnished at Skilled Nursing Facilities (SNFs)

Note: This article was revised to contain Web addresses that conform to the new CMS web site and to show they are now MLN Matters articles. All other information remains the same.

Provider Types Affected

Skilled Nursing Facilities (SNFs) submitting claims for the subject HCPCS codes to Medicare Fiscal Intermediaries (FIs)

Provider Action Needed



STOP – Impact to You

Effective October 1, 2005 for covered Part A stay beneficiaries, you may submit (or re-submit), on a 22x type of bill (TOB), colorectal cancer screening claims for:

- HCPCS codes G0104, G0106, G0107, and G0120 with dates of service back to April 1, 2002; and
- HCPCS code G0328 with dates of service back to January 1, 2004.

CAUTION – What You Need to Know

Effective October 1, 2005, this instruction (CR 3763) modifies the Medicare claims processing systems to accept colorectal cancer screening service claims for HCPCS codes G0104, G0106, G0107, and G0120 with dates of service back to April 1, 2002; and for HCPCS code G0328 back to January 1, 2004.

GO – What You Need to Do

Make sure that your billing staffs are aware of these modifications.

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Background

Note: Coverage of screening and preventive services rendered to SNF beneficiaries in a covered Part A stay remains subject to consolidated billing, and must be billed separately under Part B on a 22x type of bill (TOB). Remember not to include claims for these services as part of your global Part A bill.

CR 2874 (February 6, 2004) extended Skilled Nursing Facility (SNF) coverage to include colorectal cancer screening procedures: 1) HCPCS codes G0104 (flexible sigmoidoscopy), 2) G0106 (barium enema, as an alternative to G0104, screening sigmoidoscopy), 3) G0107 (fecal-occult blood test), and 4) G0120 (barium enema, as an alternative to G0105, screening colonoscopy) for dates of service on or after July 1, 2004. However, Medicare's Fiscal Intermediary Shared System (FISS) rejected claims for such services with dates of service prior to this date. (FISS is the system used by FIs to process their claims.)

This instruction (CR 3763) modifies current FISS edits for colorectal cancer screenings services to allow claims for these HCPCS codes with dates of service on or after April 1, 2002.

It further instructs FIs to allow claims for colorectal cancer screening services (HCPCS code G0328 (fecal-occult blood test [immunoassay-based]) with dates of service on or after January 1, 2004.

Implementation Date

The implementation date for this instruction is October 3, 2005.

Additional Information

You can find more information about these changes at http://www.cms.hhs.gov/Transmittals/downloads/R544CP.pdf on the CMS web site.

You might also want to look at the revision to the Medicare Claims Processing Manual, Chapter 18 (Preventive and Screening Services), Section 60.2.1, Common Working Files (CWF) edits attached to CR 3763.

Finally, if you have any questions, please contact your carrier/intermediary at their toll-free number, which may be found at http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.pdf on the CMS web site.

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