CMS Manual System Pub 100-20 One-Time Notification

Transmittal 199

Department of Health & Human Services (DHHS) Centers for Medicare & Medicaid Services (CMS) Date: DECEMBER 30, 2005 Change Request 4230

SUBJECT: New Medicare Summary Notice (MSN) Message Used for the Physician's Voluntary Reporting Program (PVRP)

I. SUMMARY OF CHANGES: The Physician Voluntary Reporting Program (PVRP) will begin on January 1, 2006. The PVRP will use a set of G-codes to better analyze the quality of care provided to Medicare beneficiaries. These G-codes are for reporting purposes only. Physicians should not charge for these codes. Therefore, a new Medicare Summary Notice (MSN) message has been created to be used for processing claims submitted with the PVRP G-codes.

NEW/REVISED MATERIAL EFFECTIVE DATE: January 01, 2006 IMPLEMENTATION DATE: No later than 30 days from issuance (January 30, 2006)

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. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

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

R/N/D	Chapter / Section / SubSection / Title
N/A	

III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2006 operating budgets.

IV. ATTACHMENTS:

One-Time Notification

*Unless otherwise specified, the effective date is the date of service.

Attachment – One-Time Notification

Pub. 100-20Transmittal: 199Date: December 30, 2005Change Request 4230

SUBJECT: New Medicare Summary Notice (MSN) Message Used for the Physician's Voluntary Reporting Program (PVRP)

I. GENERAL INFORMATION

A. Background: The Physician Voluntary Reporting Program (PVRP) will begin on January 1, 2006. The PVRP will use a set of G-codes to better analyze the quality of care provided to Medicare beneficiaries. These G-codes are for informational/reporting purposes only. Physicians should not charge for these codes.

B. Policy: There are currently no specific Medicare Summary Notice (MSN) messages for processing claims with the new PVRP G-codes. The existing MSN messages are too generic. Therefore, a new MSN message has been created to be used for processing claims submitted with the PVRP G-codes.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement "Should" denotes an optional requirement

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		F I	R H H I	C a r i e r	D M E R C		red S intain M C S	Systeners V M S	С	Other
4230.1	For claims with dates of service on or after January 1, 2006, contractors shall use the following new MSN message when denying the PVRP G-codes (G8000 through G8999) billed with \$0.00 or billed with an amount: 36.7 - This code is for informational/reporting purposes only. You should not be charged for this code. If there is a charge, you do not have to pay the amount. The Spanish version is: 36.7 - Este código es para propósitos			X						

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		F I	R H H I	C a r r i e r	D M E R C	Sha	red S	Systeners V M S	C	Other
	informativos solamente. A usted no se le debió haber cobrado por este código. Si hay un costo, usted no tiene que pagar esta cantidad.									

III. PROVIDER EDUCATION

Requirement Number	Requirements	Responsibility ("X" indicates the columns that apply)								
		FI	R H H I	C a r r i e r	D M E R C	Sha Mai F I S S			em C W F	Other
	None.									

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements						

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

V. SCHEDULE, CONTACTS, AND FUNDING

Effective Date*: January 1, 2006. Implementation Date: No later than 30 days from issuance (January 30, 2006)	No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating
Pre-Implementation Contact(s):	budgets.
Kathleen Kersell at 410-786-2033 or <u>kathleen.kersell@cms.hhs.gov</u> and	
Bill Stojak at 410-786-6984 or william.stojak@cms.hhs.gov	
Post-Implementation Contact(s): Appropriate Regional Office.	

*Unless otherwise specified, the effective date is the date of service.