
CMS Manual System

Pub. 100-04 Medicare Claims Processing

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

Transmittal 400

Date: DECEMBER 16, 2004

CHANGE REQUEST 3435

NOTE: Transmittal 335, dated October 29, 2004, is rescinded and replaced with Transmittal 400, dated December 16, 2004. We are removing the requirement that this should be in the NCPDP format. All other information remains the same.

SUBJECT: Incorrect Reporting of MTUS Indicator When Drugs are Billed Using an NDC Code

I. SUMMARY OF CHANGES: ViPS (for DMERCs) has been incorrectly inserting the MTUS Indicator value of “6” when a drug is billed in the NCPDP format using a NDC code. This is an invalid value and should be discontinued. ViPS is to code in the MTUS Indicator value of “3” in the circumstance when a drug is billed using a NDC code. A new section has been placed in the manual to explain MTUS.

NEW/REVISED MATERIAL - EFFECTIVE DATE*: April 1, 2005

IMPLEMENTATION DATE: April 4, 2005

Disclaimer for manual changes only: The revision date and transmittal number apply to the red italicized material only. 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 not updated.)
(R = REVISED, N = NEW, D = DELETED)

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
R	26/Table of Contents
N	26/10.10/Miles/Times/Units/Services (MTUS)
N	26/10.10.1/Methodology of Coding Number of Services, MTUS Count and MTUS Indicator Fields

III. FUNDING: Medicare contractors shall implement these instructions within their current operating budgets.

IV. ATTACHMENTS:

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

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