### **CMS Manual System**

# **Pub 100-04 Medicare Claims Processing**

**Transmittal 493** 

Department of Health & Human Services

Center for Medicare and & Medicaid Services

Date: MARCH 4, 2005 Change Request 3671

SUBJECT: Revision to Chapter 1, and Removal of Section 70 from Chapter 25 of the Medicare Claims Processing Manual

**I. SUMMARY OF CHANGES:** This Change Request revises and deletes outdated instructions located in Chapter 1, deletes Sections 80.5.2 and 80.5.2.1, and removes Section 70 from Chapter 25 of the Medicare Claims Processing Manual.

#### **NEW/REVISED MATERIAL:**

**EFFECTIVE DATE: April 4, 2005** 

**IMPLEMENTATION DATE: April 4, 2005** 

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   |
|-------|--|
| R     | 1/50.2.1/Inpatient Billing From Hospitals and SNFs   |
| R     | 1/50.2.3/Submitting Bills in Sequence for a Continuous Inpatient Stay or Course of Treatment |
| R     | 1/60.5/Intermediary Processing of No-Payment Bills   |
| R     | 1/70/Time Limitations for Filing Provider Claims to Fiscal Intermediaries                    |
| R     | 1/70.7.2/Statement of Intent (SOI)   |
| R     | 1/70.8/Filing Request for Payment to Carriers-Medicare Part B                                |
| R     | 1/70.8.16/Statement of Intent (SOI)  |
| R     | 1/80.3.2.2/FI Consistency Edits  |
| D     | 1/80.5.2/FI DNF Requirements   |

| D | 1/80.5.2.1/Reporting Requirements - FIs  |
|---|--|
| R | 1/90/Patient is a Member of a Medicare Advantage (MA)<br>Organization for Only a Portion of the Billing Period |
| R | 1/130.1.3/Late Charges   |
| R | 1/130.2/Inpatient Part A Hospital Adjustment Bills   |
| D | 25/70/Form CMS-1450 Consistency Edits  |

### III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2005 operating budgets.

### **IV. ATTACHMENTS:**

**Business Requirements Manual Instruction** 

<sup>\*</sup>Unless otherwise specified, the effective date is the date of service.