

August 2007

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# The Healthcare Bulletin

## Skilled Nursing Facility (SNF) Consolidated Billing- 2008 HCPCS Annual Update

Medicare claims processing systems currently have edits in place for claims received for beneficiaries in a Part A covered SNF stay, as well as for beneficiaries in a non-covered stay. Changes to Healthcare Common Procedure Coding System (HCPCS) codes and Medicare Physician Fee Schedule are used to revise these edits to allow Medicare Contractors to make appropriate payments in accordance with policy for SNF CB contained in the Medicare Claims Processing Manual. These edits only allow services that are excluded from CB to be separately paid by Medicare contractors. Physicians and providers are advised that, by the first week in December 2007, new code files will be posted on the CMS website. Read more at <http://www.cms.hhs.gov/MLN Matters Articles/downloads/MM5696.pdf>.

### NPI Update

Since October 2, 2006, providers have been encouraged to submit both the NPI and Medicare legacy identifier (PIN) on their claims. During this timeframe, providers were not penalized for invalid NPI/legacy ID combinations.

Effective October 15, 2007, Medicare Contractors will begin editing the NPI/legacy ID combinations for validity against the NPI crosswalk file. Where a match cannot be located on the crosswalk, claims will be rejected or returned to the provider.

When the claim is returned, a provider should first verify that the correct NPI was submitted. If correct, you will need to verify that your legacy identifier (PIN or NSC) number corresponds with the information on file with the National Plan and Provider Enumeration System (NPPES). NPPES data may be checked on line at <https://nppes.cms.hhs.gov>.

### CDC Issues New Guidelines for Healthcare Settings

The Centers for Disease Control (CDC) has issued *Guideline for Isolation Precautions: Preventing Transmission of Infectious Agents in Healthcare Settings 2007*. This document can be downloaded at <http://www.cdc.gov/>

[ncidod/dhap/pdf/isolation2007.pdf](http://ncidod/dhap/pdf/isolation2007.pdf).

### Webcast - Physical Restraints in Nursing Homes

Providers may view the Centers for Medicare and Medicaid Services (CMS) webcast, "Physical Restraints in Nursing Homes: The Exception Not the Rule, Part I" at <http://cms.internetstreaming.com>. The program is available for one year. The show includes a review of CMS policy guidance and discussion about coding the physical restraint section of the MDS, the use of Quality Indicators, and a recap of a recent memo addressing physical restraint issues.

### Communication Between State Survey Agencies (SAs) and State Long-Term Care (LTC) Ombudsman

The Social Security Act obliges SAs to notify their respective LTC Ombudsman of certain findings of Skilled Nursing Facility non-compliance or adverse action. In addition, the State Operations Manual specifies additional forms of regular communication. Ref: S&C-07-26, July 6, 2007.

### Billing Requirements for Beneficiaries Enrolled in Medicare Advantage Plans

The Centers for Medicare and Medicaid Services has clarified billing instructions for Skilled Nursing Facilities (SNFs) to follow when they admit beneficiaries enrolled in Medicare Advantage (MA) plans. Effective January 1, 2008, CMS will require SNFs to submit covered claims to their Medicare fiscal intermediary/contractor for residents who are admitted under a MA plan. See the complete listing of instructions and policies in the CMS Medicare Claims Processing Manual, Chapter 6 - SNF Inpatient Part A Billing, 90.2.

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