CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12291	Date: October 5, 2023
	Change Request 13244

Transmittal 12147 issued July 20, 2023, is being rescinded and replaced by Transmittal 12291, dated October 5, 2023, to restore subsections in the Benefit Policy Manual update that were accidentally omitted. This correction does not make any revisions to the companion Pub. 100-04; all revisions are associated with Pub. 100-02. All other information remains the same.

NOTE: This Transmittal is no longer sensitive and is being re-communicated November 02, 2023. The Transmittal Number, date of Transmittal and all other information remains the same. This instruction may now be posted to the Internet.

SUBJECT: Separate Payment for Disposable Negative Pressure Wound Therapy Devices on Home Health Prospective Payment System Claims

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to implement section 4136 of the Consolidated Appropriations Act of 2023, which requires separate payment of disposable negative pressure wound therapy devices on the type of bill most commonly used by home health agencies.

EFFECTIVE DATE: January 1, 2024 - Claim "Through" Dates on or after this date.
*Unless otherwise specified, the effective date is the date of service.
IMPLEMENTATION DATE: January 2, 2024

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	10/40.2/HH PPS Claims
R	10/90.3/Billing Instructions for Disposable Negative Pressure Wound Therapy Services

III. FUNDING:

For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construct this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions

Cms Manual 100 04

Carol J. Buck

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The OTA's Guide to Documentation Marie Morreale, 2024-06-01 The bestselling newly updated occupational therapy assistant OTA textbook The OTA's Guide to Documentation Writing SOAP Notes Fifth Edition explains the critical skill of documentation while offering multiple opportunities for OTA students to practice documentation through learning activities worksheets and bonus videos The Fifth Edition contains step by step instruction on occupational therapy documentation and the legal ethical and professional documentation standards required for clinical practice and reimbursement of services Students and professors alike can expect the same easy to read format from previous editions to aid OTAs in learning the purpose and standards of documentation throughout all stages of the occupational therapy process and different areas of clinical practice Essentials of documentation reimbursement and best practice are reflected in the many examples presented throughout the text Worksheets and learning activities provide the reader with multiple opportunities to practice observation skills and clinical reasoning learn documentation methods create occupation based goals and develop a repertoire of professional language Templates are provided to assist beginning OTA students in formatting occupation based SOAP notes and the task of documentation is broken down into smaller units to make learning easier Other formats and methods of recording client care are also explained such as the use of electronic health records and narrative notes This text also presents an overview of the initial evaluation process delineating the roles of the OT and OTA and guidelines for implementing appropriate interventions New in the Fifth Edition Incorporation of the Occupational Therapy Practice Framework Domain and Process Fourth Edition and other updated American Occupational Therapy Association documents Updated information to meet Medicare Part B and other third party payer requirements Revised clinical terminology on par with current trends Added examples from emerging practice areas Expanded tables along with new worksheets and learning activities Included with the text are online supplemental materials for faculty use in the classroom this includes access to supplemental website worksheets learning activities and scenario based videos to practice the documentation process

Acute and Chronic Wounds - E-Book Ruth Bryant, Denise Nix, 2023-05-18 Acute Telehealth and Wound Management Quality Tracking Across the Continuum and Medications and Phytotherapy Impact on Wounds provide evidence based coverage of these important topics UPDATED Consolidated pressure injuries content puts everything you need to know into one chapter Expanded full color insert includes 50 new images for a total of 95 color plates with more than 160 images that visually reinforce key concepts New information presents the latest developments in biofilm assessment and management topical oxygen therapy skin manifestations related to COVID 19 and strategies to enhance engagement as well as updated product photos and more authors who are clinical experts and providers

Observation Medicine Sharon E.

Mace, 2017-03-16 This guide to successful practices in observation medicine covers both clinical and administrative aspects for a multinational audience

Federal Register, 2012-11

Medicare and Medicaid Guide, 1969

Medicare

Explained 2007 CCH Incorporated, 2007-03-21 The Workers' Compensation Laws of California California, 2013

CPT Expert 2004 Medicode, Ingenix, 2003-12 The CPT Expert offers physicians offices codes and icons denoting new changed and deleted language from the latest release CPT 2004 plus information that will help the coder find and use the CPT codes more easily An extensive index terms to know and other additions help clarify the codes and speed assigning accurate codes The product also provides valuable information about coding CPT for Medicare Part B American Medical Association, 2003 All HCPCS 2004 codes and modifiers including deleted codes for 2004 Easy to use color coded bars icons and tabs to help the user know which codes are governed by which Medicare coding rules Medicare Carriers Manual and Coverage Issues Manual excerpts that indicate drugs and services that are not reimbursed 2004 deleted codes conveniently integrated with current codes with strikeouts that help you finish claims from last year Modifier information identifies which modifiers are appropriate for each HCPCS code Detailed annotations and coding advice make code selection easier and more accurate QuickFlip color coded tabs helps the user find the right code quickly and easily Payers Appendix Know which payers accept HCPCS Level II codes to the file claims with confidence Expanded Front Index Allows you to easily locate the code needed and also references many of the brand name DME supplies like wheelchairs by which these items are known Coding and Reimbursement for Hospital Inpatient Services Karen S. Scott, 2006 The most comprehensive resource for hospital inpatient coding and reimbursement Provides educators students and healthcare practitioners with the most authoritative guidance available for managing inpatient coding and reimbursement issues This must have resource was developed to give you easier access to the most up to date information you need for inpatient coding and reimbursement You ll save time and make more effective decisions with this one of a kind resource Covers reimbursement methodologies for hospital inpatient services the structure and organization of hte Medicare Inpatient Acute Care Prospective Payment System the relationship between coding and DRG assignment and data quality and coding compliance processes related to coding and reimbursement for inpatient services Communicating Clinical Decision-Making Through Documentation: Coding, Payment, and Patient Categorization Eric Shamus, Debra F. Stern, William F. McGehee, 2021-02-01 Publisher's Note Products purchased from Third Party sellers are not guaranteed by the publisher for quality authenticity or access to any online entitlements included with the product Clear concise and simple to follow everything you need to master the documentation process quickly and easily Communicating Clinical Decision Making Through Documentation is the top choice for professionals and students seeking complete coverage of the documentation process including billing and coding It shows how to ensure every service rendered and billed is supported by showing what to document how to do it and why it is so important This text includes a refreshing student friendly approach to the topic You will find an abundance of cases portraying real life case scenarios and it delivers must know information on writing patient client care notes incorporating document guidelines documenting clinical decision making includes evidence based practice

and performing billing and coding tasks With Communicating Clinical Decision Making Through Documentation you ll effectively maintain and organize records record appropriate information and receive proper payment based on the documentation content A to Z coverage of physical therapy documentation including Documentation Standards and Guidelines Medicare Home Health Electronic Medical Records EMR International Classification of Functioning ICF Model and Application Pediatrics Legal Issue Utilization Review Management Skilled Nursing Facilities Sample Documentation Content Initial Examination and Evaluation Criteria Continuum of Care Content and Goal Writing Exercises Documentation Aspects of Supervising PTAs Abbreviations Payment ICD 10 and CPT Codes and Application Chapter Review Questions **Content Principles** CMS Publication 100-4 Chapter 10 Paula Long, 2011-02-07 CMS Publication 100 4 Chapter 10 CMS Home Health Billing Manual This handy manual updated to reflect 2010 changes is a great resource for finding answers quickly and easily when you re stumped with a home health billing question Spend less time looking for answers while receiving the most appropriate payment allowed It's the perfect supplementary guide to your billing and payment procedures Packed with examples definitions and calculations from CMS this helpful guide also provides a guick billing reference for services and supplies as well as tips when billing for non routine supplies In addition it identifies what has changed and what has been eliminated since the start of the revised PPS This convenient manual will help you Understand the general guidelines for processing home health agency HHA claims such as where and how to bill Report non routine supplies on the claim Use the Common Working File CWF for the PPS Meet provider and supplier responsibilities regarding services subject to consolidated billing Submit requests for anticipated payment RAPs and claims Become adept at completing form CMS 1450 UB 04 Identify required quality data and the payment reduction for submission failure Explore special billing situations involving OASIS assessments multiple agencies and more **HCPCS Expert** Ingenix,2006-12 This is the most comprehensive HCPCS book available It contains important information as dictated by CMS but presents it in an easytouse format to guide the coder confidently through current codes and modifiers as well as code changes additions and deletions

Medicare Explained 2006 CCH Incorporated,2006-03 HCPCS Level II 2008 Carol J. Buck,2007-12-21 Including the latest codes according to the HCPCS 2008 SAUNDERS 2008 HCPCS LEVEL II helps you code quickly accurately and efficiently It includes all the essentials for medical billing in an easy to use format Plus the Evolve companion website keeps codes consistently updated for the most current information Latest Level II HCPCS code categorization reminds you to code for these often overlooked items Updated CIM and MCM information includes carrier specific or Medicare specific regulations that affect HCPCS coding essential to coding accurately Helpful symbols identify new and revised codes from the previous year An at a glance listing of all new and revised codes for 2008 located in the front of the reference help you quickly see what codes have changed HCPCS 2006 Carol J. Buck,2005-12 Designed to help readers learn how to code more quickly accurately and efficiently this convenient book provides the latest HCPCS 2006 coding references essential for

medical billing in an easy to use format HCPCS Level II of the national codes for durable goods crutches prosthetics drugs etc to remind students to code for these often overlooked items The CIM and MCM section has been updated with information about carrier specific or Medicare specific regulations that affect HCPCS coding Two distinctive symbols clearly identify all new and revised codes from the previous year At a glance listing of all new and revised codes for that year located in front matter is helpful to professional coders who may not be aware of certain updates to codes they use frequently

<u>Understanding Telehealth</u> Karen Schulder Rheuban, Elizabeth A. Krupinski, 2017-12-22 The first complete guide to the rapidly expanding field of telehealth From email to videoconferencing telehealth puts real time healthcare solutions at patients and clinicians fingertips Every year the field continues to evolve enhancing access to healthcare supporting clinicians and improving the patient experience However since telehealth is in its infancy no text has offered a comprehensive definitive survey of this up and coming field until now Written by past presidents of the American Telemedicine Association Understanding Telehealth explains how clinical applications leveraging telehealth technology are optimizing healthcare delivery In addition this timely resource examines the bedrock principles of telehealth and highlights the safety standards involved in the diagnosis and treatment of patients through digital communications Logically organized and supported by high yield clinical vignettes the book begins with essential background information including a look at telehealth history definitions and roles and rural health It then provides an overview of clinical services for adults from telestroke to telepsychiatry The third section addresses pediatric clinical services encompassing pediatric emergency and critical care telecardiology and more A groundbreaking resource Chapters cover a broad spectrum of technologies evidence based guidelines and application of telehealth across the healthcare continuum Ideal for medical staff public healthcare executives hospitals clinics payors healthcare advocates and researchers alike Incisive coverage of the legal and regulatory **HCPCS Level II Expert - 2006** Ingenix, 2005-12 This is the most environment underpinning telehealth practice comprehensive HCPCS book available It contains important information as dictated by CMS but presents it in an easytouse format to guide the coder confidently through current codes and modifiers as well as code changes additions and deletions

California Law of Employee Injuries and Workmen's Compensation: Principles of substantive law Warren Leonard Hanna, 2004 Healthcare Financial Management, 2008

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