



Update to the Medicare Claims Processing Manual

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PROVIDER TYPES AFFECTED

This MLN Matters Article is for physicians, providers and suppliers billing Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries.

WHAT YOU NEED TO KNOW

CR 11958 updates the Medicare Claims Processing Manual, Chapters 12 and 23. The list of non-facility Place of Service (POS) codes in the Medicare Claims Processing Manual, Chapter 12, Section 20.4.2, is updated to reflect previous updates to the POS list in Chapter 26, Section 10.5. Therefore, the Non-Residential Opioid Treatment Facility (POS code 58) setting is now included in Chapter 12, Section 20.4.2.

Also, the Medicare Physician Fee Schedule Database (MPFSDB) file layout in the Chapter 23 Addendum is updated to show the procedure code series that are not included on the MPFSBD file.

There are no policy changes, and no changes to the function of the MPFSBD file.

ADDITIONAL INFORMATION

The official instruction, CR 11958, issued to your MAC regarding this change, is available at <u>https://www.cms.gov/files/document/r10356cp.pdf</u>.

If you have questions, your MACs may have more information. Find their website at <u>http://go.cms.gov/MAC-website-list</u>.



DOCUMENT HISTORY

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