CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 3240	**Date: April 24, 2015**
	Change Request 9142

SUBJECT: Medicare Claims Processing Manual - Chapter 15, Section 40, Ambulance - Medical Conditions List

I. SUMMARY OF CHANGES: The ICD-9-CM Medical Conditions List and transportation indicators list in Chapter 15, section 40 of the Claims Processing Manual has been moved to the CMS Web site.

EFFECTIVE DATE: July 27, 2015
**Unless otherwise specified, the effective date is the date of service.*
IMPLEMENTATION DATE: July 27, 2015

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	15/40/Medical Conditions List and Instructions

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 construe 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 regarding continued performance requirements.

IV. ATTACHMENTS:

Business Requirements
Manual Instruction

Attachment - Business Requirements

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I. GENERAL INFORMATION

A. Background: The CMS issued the ICD-9-CM Medical Conditions List as guidance via a manual revision as a result of interest expressed in the ambulance industry for this tool. In addition to the ICD-9-CM Medical Conditions list, CMS provided information on the appropriate use of transportation indicators. CMS has decided to move this information from the Claims Processing Manual to the CMS website.

B. Policy: There are no policy changes as a result of moving this information to the CMS website.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
9142.1	Contractors shall be aware of the changes to the Medicare Claims Processing Manual - Chapter 15, section 40.	X	X							

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
9142.2	MLN Article: A provider education article related to this instruction will be available at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/ shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web sites and include information about it in a listserv message within 5 business days after receipt of the notification from CMS announcing the	X	X			

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	availability of the article. In addition, the provider education article shall be included in the contractor's next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements: N/A

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information: N/A

Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Amy Gruber, 410-786-1542 or amy.gruber@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: For Medicare Administrative Contractors (MACs):
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ATTACHMENTS: 0

40 - Medical Conditions List and Instructions

(Rev. 3240, Issued: 04-24- 15, Effective: 07-27-15, Implementation: 07-27-15)

See http://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center.html for a medical conditions list and instructions to assist ambulance providers and suppliers to communicate the patient's condition to Medicare contractors, as reported by the dispatch center and as observed by the ambulance crew. Use of the medical conditions list does not guarantee payment of the claim or payment for a certain level of service.

In addition to *reporting one of the medical conditions on the claim,* one of the transportation indicators may be included on the claim to indicate why it was necessary for the patient to be transported in a particular way or circumstance. The provider or supplier will place the transportation indicator in the "narrative" field on the claim. *Information on the appropriate use of transportation indicators is also available at http://www.cms.gov/Center/Provider-Type/Ambulances-Services-Center.html.*