MLN Matters®
Information for Medicare Fee-for-Service Health Care Professionals

News Flash - Did you know that your local Medicare contractor (carrier, fiscal intermediary, or Medicare Administrative Contractor (MAC)) is a valuable source of news and information regarding Medicare business in your specific practice location? Through their electronic mailing lists, your local contractor can quickly provide you with information pertinent to your geographic area, such as local coverage determinations, local provider education activities, etc. If you have not done so already, you should go to your local contractor website and sign up for their listserv or e-mailing list. Many contractors have links on their home page to take you to their registration page to subscribe to their listserv. If you do not see a link on the homepage, just search their site for "listserv" or "e-mail list" to find the registration page. If you do not know the Web address of your contractor's homepage, it is available at *http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip* on the CMS website.

MLN Matters® Number: MM6338

Related Change Request (CR) #: 6338

Related CR Release Date: April 24, 2009

Effective Date: April 1, 2010

Related CR Transmittal #: R477OTN

Implementation Date: April 1, 2010

Type of Bill (TOB) for Federally Qualified Health Centers (FQHCs) from 73x to 77x

Provider Types Affected

FQHCs submitting claims to Medicare contractors (Fiscal Intermediaries (FIs) and/or Part A Medicare Administrative Contractors (A MACs)) for services provided to Medicare beneficiaries

Provider Action Needed

STOP – Impact to You

On August 5, 2008, the National Uniform Billing Committee (NUBC) voted to change the TOB that is used to identify FQHCs from 73x to 77x effective April 1, 2010.

Disclaimer
This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

CAUTION – What You Need to Know

Medicare fee-for-service payer and provider systems will be updated to accommodate this change of bill type.

GO – What You Need to Do

See the Background and Additional Information Sections of this article for further details regarding these changes.

Background

On August 5, 2008, the NUBC voted to change the TOB that is used to identify FQHCs from 73x to 77x effective April 1, 2010. The NUBC created the new TOB for FQHCs because TOB 73x, which has historically been used for FQHCs, is technically designed to apply to free-standing clinics of any kind.

Note that when billing the FI or A MAC for FQHC service, TOB 77x will be used for both:

- Free-standing FQHCs, and
- Provider-based FQHCs.

For dates of service (DOS) on or after April 1, 2010, TOB 73x will continue to be a valid bill type for certain non-Medicare claims. See NUBC requirements for further details.

Most Medicare fee-for-service payer and provider systems will need to change in order to accommodate this change of bill type. All Medicare fee-for-service systems will implement the change of the TOB for FQHCs from 73x to 77x effective for all claims with DOS on or after April 1, 2010.

Effective with dates of service on or after April 1, 2010, Medicare will return to provider (RTP) any FQHC claims submitted on TOB 73x. Such claims will be returned with group code CO (contractual obligation) and adjustment reason code 5 (the procedure code/bill type is inconsistent with the place of service.). If this edit is received, you should resubmit with the 77x bill type.

Additional Information

The official instruction, CR 6338, issued to your FI and A MAC regarding this change may be viewed at

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http://www.cms.hhs.gov/Transmittals/downloads/R477OTN.pdf on the Centers for Medicare & Medicaid Services (CMS) website.

If you have any questions, please contact your FI or A MAC at their toll-free number, which may be found at *http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip* on the CMS website.

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