

Related Change Request (CR) #: 4106

Medlearn Matters Number: MM4106

Related CR Release Date: September 23, 2005

Related CR Transmittal #: 181

Effective Date: August 21, 2005

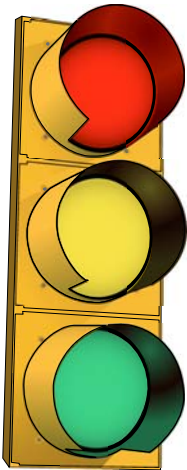
Implementation Date: October 3, 2005, but no later than October 31, 2005

National Modifier and Condition Code To Be Used To Identify Disaster Related Claims

Provider Types Affected

Physicians, suppliers, and providers billing Medicare contractors (carriers, including Durable Medical Equipment Regional Carriers (DMERCs) and/or Fiscal Intermediaries (FIs), including Regional Home Health Intermediaries) for services rendered to beneficiaries affected by Hurricane Katrina.

Provider Action Needed



STOP – Impact to You

This article is based on Change Request (CR) 4106, which establishes a new condition code and modifier for providers to use to indicate claims for Hurricane Katrina and other disaster victims.

CAUTION – What You Need to Know

To accommodate the emergency health care needs of beneficiaries and providers affected by Hurricane Katrina and any future disasters, the Centers for Medicare & Medicaid Services (CMS) has created the following new condition code and modifier, effective for dates of service on and after August 21, 2005. The new condition code is "DR (Disaster related)" and the new modifier is "CR (Catastrophe/Disaster Related)."

GO – What You Need to Do

See the *Background* section of this article for further details regarding these changes.

Background

CMS has acted to ensure that the programs will be flexible in order to accommodate the emergency health care needs of beneficiaries and medical providers in the states devastated by Hurricane Katrina. Many of the programs' normal operating procedures have been relaxed to speed the provision of health care services to the elderly, children, and persons with disabilities who depend on the services.

Disclaimer

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Because of hurricane damage to local health care facilities, many beneficiaries have been evacuated to neighboring states where receiving hospitals and nursing homes have no access to patients':

- Health care records;
- Current health status; or
- Verification of status as Medicare or Medicaid beneficiaries.



Note: CMS is assuring facilities and medical providers receiving Medicare beneficiaries affected by Hurricane Katrina, that *the normal requirements for documentation will be waived and the presumption of eligibility should be made.*

Health care providers that furnish medical services in good faith, but who cannot comply with normal program requirements because of Hurricane Katrina, will be:

- Paid for services provided; and
- Exempt from sanctions for noncompliance (unless it is discovered that fraud or abuse occurred).

New Condition Code and Modifier

To facilitate claims processing and track services and items provided to victims of Hurricane Katrina and any future disasters, CMS has established a new condition code and modifier for providers to use on disaster related claims. The new condition code and modifier are for use by providers submitting claims for beneficiaries who are Katrina disaster patients in any part of the country and are effective for dates of service on and after August 21, 2005. The new codes are the following:

- The new condition code is **DR - Disaster Related**
- The new modifier is **CR - Catastrophe/Disaster Related**

For physicians or suppliers billing their local carrier or DMERC, only the modifier (CR) should be reported and not the condition code. A condition code is used in FI billing.

For institutional billing, either the condition code or modifier may be reported. The condition code would identify claims that are impacted or may be impacted by specific payor policies related to a national or regional disaster. The modifier would indicate a specific Part B service that may be impacted by policy related to the disaster.

CR4106 instructs Medicare contractors to recognize the new condition code and modifier on October 3, 2005, if possible, but no later than October 31, 2005.

In addition to this Medlearn Matters Article, CMS regional offices will help facilitate contractor outreach regarding provider education on the use of the new modifier and condition code.

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Implementation

The targeted implementation date is October 3, 2005, but no later than October 31, 2005.

Additional Information

For complete details, please see the official instruction issued to your carrier/DMERC/intermediary regarding this change. That instruction may be viewed at

http://www.cms.hhs.gov/manuals/transmittals/comm_date_dsc.asp on the CMS web site. From that web page, look for CR4106 in the CR NUM column on the right, and click on the file for that CR.

If you have any questions, please contact your carrier/DMERC/intermediary at their toll-free number, which may be found at <http://www.cms.hhs.gov/medlearn/tollnums.asp> on the CMS web site.

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