File Name/File Code	Provision #	Subject	Effective/Implementation Date
		Medicare Prescription Drug Discount Card; Revision of Marketing Rules for Endorsed Drug	
CMS-4063-F	101	Card Sponsors	10/01/2005
CMS-4063-IFC	101	Medicare Program; Medicare Prescription Drug Discount Card	06/08/2004
		Medicare Prescription Drug Discount Card and Transitional Low-Income Assistance Program:	
<u>CMS-4063-N</u>	101	Notice of Solicitation of Application	06/08/2004
<u>CMS-4068-F</u>	101	Medicare Drug Benefit Effective CY 2006 (Title 1)	01/01/2006
CMS-4068-F2	101	Medicare Drug Benefit Effective CY 2006 (Title 1)-Clarification	01/01/2006
		Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	
<u>CMS-4068-N</u>	101	Classes of Drugs-August 27, 2004	N/A
<u>CMS-4068-P</u>	101	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4068-F	102	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4068-F2	102	Medicare Drug Benefit Effective CY 2006 (Title I)-Clarification	01/01/2006
		Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	
<u>CMS-4068-N</u>	102	Classes of Drugs-August 27, 2004	N/A
<u>CMS-4068-P</u>	102	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4068-F	103	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4068-F2	103	Medicare Drug Benefit Effective CY 2006 (Title I)- Clarification	01/01/2006
		Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	
<u>CMS-4068-N</u>	103	Classes of Drugs-August 27, 2004	N/A
CMS-4068-P	103	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4068-F	104	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4068-F2	104	Medicare Drug Benefit Effective CY 2006 (Title I)- Clarification	01/01/2006
		Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	
<u>CMS-4068-N</u>	104	Classes of Drugs-August 27, 2004	N/A
<u>CMS-4068-P</u>	104	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4080-N	104	Recognition of NAIC Standards for Regulation of Medicare Supplemental Insurance	09/01/2005
CMS-4068-F	105	Medicare Drug Benefit Effective CY 2006 (Title 1)	01/01/2006
CMS-4068-F2	105	Medicare Drug Benefit Effective CY 2006 (Title 1)- Clarification	01/01/2006
		Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	
<u>CMS-4068-N</u>	105	Classes of Drugs-August 27, 2004	N/A
<u>CMS-4068-P</u>	105	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-2200-N	106	Request for Nominations for the State Pharmaceutical Assistance Transition Commission	03/01/2004
CMS-2200-N2	106	Establishment of the State Pharmaceutical Assistance Transition Commission	03/01/2004
CMS-2200-N3	106	State Pharmaceutical Assistance Transition Commission Meeting	03/01/2004
		State Pharmaceutical Assistance Transition Commission Members and October 14, 2004	. ,
CMS-2200-N4	106	Meeting	N/A
CMS-4068-F	106	Medicare Drug Benefit Effective CY 2006 (Title 1)	01/01/2006

CMS-4068-F2	106	Medicare Drug Benefit Effective CY 2006 (Title 1)- Clarification	01/01/2006
		Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	
<u>CMS-4068-N</u>	106	Classes of Drugs-August 27, 2004	N/A
CMS-4068-P	106	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4068-F	107	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4068-F2	107	Medicare Drug Benefit Effective CY 2006 (Title I)- Clarification	01/01/2006
		Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	
<u>CMS-4068-N</u>	107	Classes of Drugs-August 27, 2004	N/A
<u>CMS-4068-P</u>	107	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4068-F2	108	Medicare Drug Benefit Effective CY 2006 (Title I)- Clarification	01/01/2006
		Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	
<u>CMS-4068-N</u>	108	Classes of Drugs-August 27, 2004	N/A
<u>CMS-4068-P</u>	108	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
<u>CMS-4068-F</u>	109	Medicare Drug Benefit Effective CY 2006 (Title 1)	01/01/2006
CMS-4068-F2	109	Medicare Drug Benefit Effective CY 2006 (Title 1)- Clarification	01/01/2006
CN45, 4050 N	400	Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	21/2
CMS-4068-N	109	Classes of Drugs-August 27, 2004	N/A
CMS-4068-P	109	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
<u>CMS-4068-F</u>	110	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
<u>CMS-4068-F2</u>	110	Medicare Drug Benefit Effective CY 2006 (Title I)- Clarification	01/01/2006
CMS 4069 N	110	Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	N/A
CMS-4068-N	+	Classes of Drugs-August 27, 2004	
CMS-4068-P	110	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4068-F	111	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
<u>CMS-4068-F2</u>	111	Medicare Drug Benefit Effective CY 2006 (Title I)-Clarification Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	01/01/2006
CMS-4068-N	111	Classes of Drugs-August 27, 2004	N/A
CMS-4068-P	111	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4069-F	201	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F2	201	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-N	201	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
CMS-4069-P	201	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	211	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F2	211	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-N	211	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
CMS-4069-P	211	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	221	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F2	221	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CIVI3-4003-FZ	221	interticate Advantage Frogram (Title II)- Clarification	01/01/2000

CMS-4069-N	221	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
CMS-4069-P	221	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	222	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F2	222	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-N	222	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
CMS-4069-P	222	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	223	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F2	223	Medicare Advantage Program (Title II)-Clarification	01/01/2006
CMS-4069-N	223	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
CMS-4069-P	223	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	231	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F2	231	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-N	231	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
CMS-4069-P	231	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	232	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-F2	232	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-N	232	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
CMS-4069-P	232	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	233	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-F2	233	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-N	233	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
<u>CMS-4069-P</u>	233	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	234	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-F2	234	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-N	234	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
<u>CMS-4069-P</u>	234	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	235	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-F2	235	Medicare Advantage Program (Title II)- Clarification	01/01/2006
<u>CMS-4069-N</u>	235	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
<u>CMS-4069-P</u>	235	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	236	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-F2	236	Medicare Advantage Program (Title II)- Clarification	01/01/2006
<u>CMS-4069-N</u>	236	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
CMS-4069-P	236	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	237	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-F2	237	Medicare Advantage Program (Title II)- Clarification	01/01/2006
CMS-4069-N	237	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A

CMS-4069-P	237	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	238	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F2	238	Medicare Advantage Program (Title II)-Clarification	01/01/2006
CMS-4069-N	238	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
CMS-4069-P	238	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F	241	Medicare Advantage Program (Title II)	01/01/2006
CMS-4069-F2	241	Medicare Advantage Program (Title II)-Clarification	01/01/2006
CMS-4069-N	241	Public Meeting on Medicare Advantage Program (Title II); July 21, 2004	N/A
CMS-4069-P	241	Medicare Advantage Program (Title II)	01/01/2006
CMS-6272-IFC	301	Medicare Secondary Payer (MSP) Amendments	02/24/2006
R25MSP	301	Medicare Secondary Payer Provisions: Section 301(b)(3)	04/25/2005
		Competitive Acquisition for Certain Durable Medical Equipment, Prosthetics, Orthotics, and	
CMS-1270-F	302	Supplies (DMEPOS)	04/10/2007
		Competitive Acquisition for Certain Durable Medical Equipment, Prosthetics, Orthotics, and	
<u>CMS-1270-P</u>	302	Supplies (DMEPOS)	Published 05/01/2006
		Solicitation of Nominations for the Program Advisory and Oversight Committee; Competitive	
<u>CMS-1279-N</u>	302	Bidding	N/A
CNAC 4270 N2	202	Meeting of the Program Advisory and Oversight Committee for Competitive Acquisition for	21/2
CMS-1279-N2	302	Certain DMEPOSOctober 6, 2004 Monthly Payment Amounts for Oxygen Oxygen Equipment for 2005, in Accordance with	N/A
CMS-1299-N	302	Section 302(c) of Medicare Modernization Act	N/A
CMS-3017-F	302	Conditions for Coverage for Payment of Power-Operated Vehicles (Scooters)	04/05/2006
<u>CIVI3-3017-F</u>	302	Conditions for Coverage for Payment of Power-Operated Venices (Scoolers) Conditions for Coverage of Power Mobility Devices, including Powered Wheelchairs and	04/03/2000
CMS-3017-IFC	302	Power-Operated Vehicles (Scooters)	12/08/2003
<u> </u>		Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS) Supplier	,,
CMS-6040-N	302	Accreditation Applications from Independent Accrediting Bodies	Pub. 08/16/2006
		Competitive Acquisition Program (CAP)-Claim Processing for Not Otherwise Classified (NOC)	
R1034CP	302	Drugs	eff.01/01/2006 imp.01/02/200
		Payment for Durable Medicare Equipment; Competitive Acquisition of Certain Items and	
<u>R110CP</u>	302	Services	01/01/2004
D4406D		Payment for Durable Medicare Equipment; Competitive Acquisition of Certain Items and	04 /04 /000 4
<u>R119CP</u>	302	Services Roymont for Durable Medicare Equipment: Competitive Acquisition of Cortain Items and	01/01/2004
R128PI	302	Payment for Durable Medicare Equipment; Competitive Acquisition of Certain Items and Services	01/03/2006
IVIZOFI	302	Evidence of Medical Necessity: Wheelchair and Power-Operated Vehicle (POV) Claims	01/03/2000
R157PI	302	(Clarification of CR 3952, Transmittal 128, dated October 28, 2005	eff. 06/05/2006 imp.10/16/2006
<u></u>	1	Payment for Durable Medicare Equipment; Competitive Acquisition of Certain Items and	,,p,,, -
R35OTN	302	Services	01/01/2004
		Payment for Durable Medicare Equipment; Competitive Acquisition of Certain Items and	
R54CP	302	Services	01/01/2004

		Payment for Durable Medicare Equipment; Competitive Acquisition of Certain Items and	
<u>R55CP</u>	302	Services	01/01/2004
		Payment for Durable Medicare Equipment; Competitive Acquisition of Certain Items and	
<u>R748CP</u>	302	Services	10/25/2005
DAECDI	202(-)	Evidence of Medical Necessity: Wheelchair and Power-Operated Vehicle (POV) Claims	
<u>R156PI</u>	302(a)	(Clarification of CR 3952, Transmittal #128, dated October 28, 2005)	June 5, 2006/September 18, 200
R49DEMO	302(b)	Competitive Bidding Demonstration-Phase 1 of 2	January 1, 2006/January 2, 200
R50DEMO	302(b)	Lab Competitive Bidding	04-01-07/04-02-07
<u>CMS-1325-IFC</u>	303	Medicare Part BCompetitive Acquisition of Outpatient Drugs and Biologicals	01/01/2006
<u>CMS-1325-P</u>	303	Medicare Part B-Competitive Acquisition of Outpatient Drugs and Biologicals	01/01/2006
CMS-1372-IFC	303	Changes to Medicare Payment for Drugs and Physician Fee Schedule Payments for Calendar Year 2004	01/01/2004
CMS-1380-F	303	Manufacturer';s Submission of Average Sales Price Data for Medicare Part B Drugs and Biologicals (ASP)	10/01/2004
CMS-1380-IFC	303	Manufacturer Submission of Average Sales Price Data for Medicare Part B Drugs and Biologicals (ASP)***	04/30/2004
R110CP	303	Payment for Drugs and Biologicals	01/01/2004
R1100TN	303	Payment for Drugs and Biologicals	01/01/2005
R119CP	303	Payment for Drugs and Biologicals	01/01/2004
<u>R148OTN</u>	303	Payment for Drugs and BiologicalsLimits the application of AWP reform to oncologists	05/16/2005
<u>R248CP</u>	303	Payment for Drugs and Biologicals	01/01/2005
<u>R257CP</u>	303	Payment for Drugs and Biologicals	01/01/2005
<u>R269CP</u>	303	Payment for Drugs and Biologicals	01/01/2005
<u>R352CP</u>	303	Payment for Drugs and Biologicals	04/04/2005
<u>R361CP</u>	303	Payment for Drugs and Biologicals	01/03/2005
<u>R397CP</u>	303	Re-issued	01/01/2005
R480CP	303	Payment for Drugs and Biologicals	04/04/2005
<u>R54CP</u>	303	Payment for Drugs and Biologicals	01/01/2004
<u>R55CP</u>	303	Payment for Drugs and Biologicals	01/01/2004
<u>R561CP</u>	303	Payment for Drugs and Biologicals	10/03/2005
<u>R653CP</u>	303	Payment for Drugs and Biologicals	10/03/2005
<u>R729CP</u>	303	Payment for Drugs and Biologicals	11/28/2005
<u>R731CP</u>	303	Payment for Drugs and Biologicals	01/03/2006
<u>R841CP</u>	303	Payment Reform for Covered Outpatient Drugs and Biologicals	07/03/2006
R857CP	303	Payment Reform for Covered Outpatient Drugs and Biologicals	03/17/2006
R866CP	303	Payment Reform for Covered Outpatient Drugs and Biologicals	07/03/2006
R876CP	303	Payment Reform for Covered Outpatient Drugs and Biologicals	04/03/2006

		Chemotherapy Administration and Nonchemotherapy Injection and Infusion Coding and	
<u>R968CP</u>	303(a)	Payment Policy - Update to Pub. 100-04 Medicare Claims Processing Manual	June 26, 2006/June 26, 2006
		October 2006 Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing File, Effective	
		October 1, 2006, and Revisions to January 2006, April 2006 and July 2006 Quarterly ASP	
<u>R1059CP</u>	303(c)	Medicare Part B Drug Pricing Files	eff.10/01/2006 imp.10/02/2006
		July 2006 Quarterly Average Sales Price (ASP) Medicare Part B Drug Pricing File, Effective July	
		1, 2006, and Revisions to January 2006 and April 2006 Quarterly ASP Medicare Part B Drug	
<u>R974CP</u>	303(c)	Pricing Files	July 1, 2006/July 3, 2006
N/A	303(d)	Payment Reform for Covered Outpatient Drugs and Biologicals	PENDING (07/05/2005)
		Competitive Acquisition Program (CAP)-Claim Processing for Not Otherwise Classified (NOC)	
<u>R1034CP</u>	303(d)	Drugs	January 1, 2006/January 2, 200
		Competitive Acquisition Program (CAP):Instructions on Special CAP Appeals Requirement and	
<u>R1076CP</u>	303(d)	Delivery of Dispute Resolution Services	07/01/06 / 11/13/06
		Instructions for Coordination of Medicare Secondary Payer (MSP) Claims for the Competitive	
R1088CP	303(d)	Acquisition Program (CAP)	01-01-07/ 01-02-07
<u>R649CP</u>	303(d)	Payment Reform for Covered Outpatient Drugs and Biologicals	01/03/2006
<u>R699CP</u>	303(d)	Payment Reform for Covered Outpatient Drugs and Biologicals	04/03/2006
R715CP	303(d)	Payment Reform for Covered Outpatient Drugs and Biologicals	01/03/2006
R932CP	303(d)	Competitive Acquisition Program (CAP) for Part B Drugs Physician Election	05/30/2006
R953CP	303(d)	Revisions to CAP Drugs	10/02/2006
		Payment Reform for Covered Outpatient Drugs and BiologicalsThe Secretary is required,	
		beginning with January 1, 2005, to establish a separate payment amount for furnishing blood	
R551CP	303(e)(2)	clotting factors	10/03/2005
R738CP	303(h)	Payment Reform for Covered Outpatient Drugs and Biologicals	01/01/2006
	, ,	Extension of application of payment reform for covered outpatient drugs and biologicals to	
R110CP	304	other physician services	01/01/2004
		Extension of application of payment reform for covered outpatient drugs and biologicals to	
R119CP	304	other physician services	01/01/2004
		Extension of application of payment reform for covered outpatient drugs and biologicals to	
R47OTN	304	other physician services	01/01/2004
		Extension of application of payment reform for covered outpatient drugs and biologicals to	
<u>R54CP</u>	304	other physician services	01/01/2004
		Extension of application of payment reform for covered outpatient drugs and biologicals to	
<u>R55CP</u>	304	other physician services	01/01/2004
		Extension of application of payment reform for covered outpatient drugs and biologicals to	
<u>R75CP</u>	304	other physician services	01/01/2004
		Changes to Medicare Payment for Drugs and Physician Fee Schedule Payments for Calendar	
<u>CMS-1372-IFC</u>	305	Year 2004	01/01/2004
<u>CMS-1428-F</u>	305	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	305	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004

<u>R110CP</u>	305	Payment for inhalation drugs	01/01/2004
R119CP	305	Payment for inhalation drugs	01/01/2004
<u>R54CP</u>	305	Payment for inhalation drugs	01/01/2004
R55CP	305	Payment for inhalation drugs	01/01/2004
<u>R75CP</u>	305	Payment for inhalation drugs	01/01/2004
			September 11, 2006/September
<u>R104FM</u>	306	Updated Procedures for AC Communication with RAC	1
R24DEMO	306	Demonstration Project for Use of Recovery Audit Contractors	04/25/2005
R27MSP	306	Demonstration Project for Use of Recovery Audit Contractors	04/25/2005
<u>R68FM</u>	306	Demonstration Project for Use of Recovery Audit Contractors	04/25/2005
<u>R74FM</u>	306	Demonstration Project for Use of Recovery Audit Contractors	01/03/2005
<u>CMS-1428-F</u>	401	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
<u>CMS-1428-P</u>	401	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
		Equalizing urban and rural standardized payment amounts under the Medicare Inpatient	
<u>R160TN</u>	401	Hospital Prospective Payment System Equalizing urban and rural standardized payment amounts under the Medicare Inpatient	10/01/2003
R64OTN	401	Hospital Prospective Payment System	10/01/2003
CMS-1428-F	401	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	402	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
R64OTN	402	Beginning in FY 2004, the formula currently used to calculate the DSH adjustment	04/05/2004
CMS-1428-F	402	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	403	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-F	405	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
			· ·
<u>CMS-1428-P</u>	405	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
<u>R103CP</u>	405	Improvements to Critical Access Hospital Program: Revision of Bed Limitation for Hospitals	01/01/2004
R276CP	405	Improvements to Critical Access Hospital Program: Revision of Bed Limitation for Hospitals	01/01/2004
R285CP	405	Improvements to Critical Access Hospital Program: Revision of Bed Limitation for Hospitals	01/01/2004
<u>INZOSCI</u>	403	improvements to entitled Access hospital Program. Revision of Bed Elimitation for hospitals	01/01/2004
<u>R465CP</u>	405	Improvements to Critical Access Hospital Program: Revision of Bed Limitation for Hospitals	07/05/2005
<u>R63CP</u>	405	Improvements to Critical Access Hospital Program: Revision of Bed Limitation for Hospitals	01/01/2004
R68CP	405	Improvements to Critical Access Hospital Program: Revision of Bed Limitation for Hospitals	01/01/2004
CMS-1428-F	406	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	406	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1286-F	408	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	09/01/2005

CMS-3844-P	408	Hospice Care Conditions of Participation	Pub. 05/27/2005
		Recognition of Attending Nurse Practitioners as Attending Physicians to Serve Hospice	
<u>R15BP</u>	408	Patients	10/04/2004
		Recognition of Attending Nurse Practitioners as Attending Physicians to Serve Hospice	
R205CP	408	Patients	10/04/2004
R22BP	408	Re-issued	10/04/2004
R304CP	408	Re-issued	10/04/2004
CMS-5029-N	409	Rural Hospice Demonstration Project	Pub. 04/07/2005
CMS-1428-F	410	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	410	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
		Exclusion of Certain Rural Health Clinic and Federally Qualified Health Center Services from	
N/A	410	the Prospective Payment System for Skilled Nursing Facilities	Pending
		Exclusion of Certain Rural Health Clinic and Federally Qualified Health Center Services from	
R390CP	410	the Prospective Payment System for Skilled Nursing Facilities	01/01/2005
		Rural Community Hospital Demonstration ProgramThe provision establishes a 5-year	
R20DEMO	410(a)	demonstration program	03/04/2005
54555146		Method of Cost Settlement for Inpatient Services for Rural Hospital Participating under	07/44/9005
R45DEMO	410A	Demonstration Authorized by Section 410A of the Medicare Modernization Act 2-Year Extension of Hold Harmless Provisions for Small Rural Hospitals and Sole Community	07/14/2006
		Hospitals Under the Prospective Payment System for Hospital Outpatient Department	
R30OTN	411	Services	01/01/2004
R28OTN	412	Establishment of Floor on Work Geographic Adjustment	01/01/2004
NZOOTN	412	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	01/01/2004
CMS-1429-F2	413	Correcting Amendment	01/01/2005
<u>CIVIS 1425 12</u>	413	correcting rimenament	01,01,2003
CMS-1429-FC	413	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	01/01/2005
CMS-1429-P	413	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	11/01/2004
N/A	413	Medicare Incentive Payment Program Improvements for Physician Scarcity	Pending
R523CP	413	Medicare Incentive Payment Program Improvements for Physician Scarcity	07/05/2005
R530CP	413	Medicare Incentive Payment Program Improvements for Physician Scarcity	07/05/2005
R57FM	413	Medicare Incentive Payment Program Improvements for Physician Scarcity	04/04/2005
R65FM	413	Medicare Incentive Payment Program Improvements for Physician Scarcity	07/05/2005
R807CP	413(a)	Revision to IOM 100-4, Chapter 12, Sections 90.4.1.1 and 90.4.2	02/06/2006
R88FM		Clarification to IOM 100-06, Sections 290.7 and 290.8	02/06/2006
NOOFIVI	413(a)	Ciarrication to ioivi 100-00, Sections 230.7 alia 230.8	02/06/2006
	I		
R1021CP	413(b)	Annual Update for the Health Professional Shortage Area (HPSA) Bonus Payment	January 1, 2006/January 2, 200
R1021CP CMS-1492-IFC	413(b) 414	Annual Update for the Health Professional Shortage Area (HPSA) Bonus Payment Medicare Ambulance Fee Schedule Updates Beginning July 1, 2004	January 1, 2006/January 2, 200 07/01/2004

R320CP	414	Payment for Rural and Urban Ambulance Services	01/02/2005
R88CP	414	Payment for Rural and Urban Ambulance Services	07/05/2004
R102PI	415	Re-issued	02/13/2004
R93PI	415	Providing Appropriate Coverage of Rural Air Ambulance Services	02/13/2004
		Treatment of Certain Diagnostic Laboratory Tests Furnished to Hospital Outpatients in	
<u>R100CP</u>	416	Certain Areas	07/06/2004
		Increase payments to home health agencies for services provided in a rural area by 5 percent	
<u>CMS-1265-F</u>	421	for one year, beginning April 1, 2004	01/01/2005
<u>CMS-1265-P</u>	421	Home Health Prospective Payment System Rate Update Calendar Year 2005	01/01/2005
D2626D	424	Increase payments to home health agencies for services provided in a rural area by 5 percent	
R362CP	421	for one year, beginning April 1, 2004 Increase payments to home health agencies for services provided in a rural area by 5 percent	04/01/2004
R59OTN	421	for one year, beginning April 1, 2004	04/01/2004
CMS-1428-F	422	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
	422	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	+	Redistribution of Unused Resident Positions	
R1250TN	422	Realstribution of Unused Resident Positions Re-issued	06/04/2004
R127OTN	422		06/04/2004
<u>R77OTN</u>	422	Redistribution of Unused Resident Positions	06/04/2004
R87OTN	422	Re-issued	06/04/2004
<u>CMS-5030-N</u>	434	Frontier Extended Stay Clinic Demonstration	08/25/2006
<u>CMS-1428-F</u>	501	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
<u>CMS-1428-P</u>	501	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
N/A	501	Hospital Quality Initiative Use this link to view "Reporting Hospital Data for Annual Update."	N/A
CMS-1428-F	502	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	502	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
R610TN	502	Raised the IME adjustment between April 1, 2004 and October 1, 2004 to 5.98%	04/01/2004
CMS-1268-N	503	Town Hall Meeting on New Technology ApplicantsMarch 15, 2004	03/15/2004
<u>CIVI3-1208-IV</u>	303	Town Hall Meeting on the 2006 Applications for New Medical Services Technologies Add-On	03/13/2004
CMS-1292-N	503	Payments Under Hospital IPPS 2004	N/A
CMS-1329-N	503	New Technology Town Hall Meeting -February 16, 2006	12/23/2005
CMS-1428-F	503	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	503	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-F	504	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	504	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
R64OTN	504	The PPS rate for hospitals in Puerto Rico	04/05/2004
CMS-1428-F	505	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	505	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
<u> </u>		O - 1-15 1 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-15 1 1-1	, : , ::

R62OTN	507	Clarifications to Certain Exceptions to Medicare Limits on Physician Referrals	04/02/2004
CMS-1373-N	508	Notice of One-Time Appeal Process for Hospital Wage Index Classification	01/01/2004
CMS-1373-N2	508	Revisions to the One-Time Appeal Process for Hospital Wage Index Classification	01/01/2004
R32OTN	508	Time Appeals Process for Hospital Wage Index Classification	01/01/2004
R64OTN	508	Time Appeals Process for Hospital Wage Index Classification	01/01/2004
R65OTN	508	Time Appeals Process for Hospital Wage Index Classification	01/01/2004
CMS-1249-N	511	Prospective Payment System and Consolidated Billing for Skilled Nursing Facilities-Update for FY 2005	07/30/2004
R160CP	511	Payment for Covered Skilled Nursing Facility Services	10/04/2004
R28BP	512	Coverage of Hospice Consultation Services	01/03/2005
R386CP	512	Coverage of Hospice Consultation Services	01/03/2005
R28OTN	601	Revision of Updates for Physicians'; Services	01/01/2004
R34OTN	601	Revision of Updates for Physicians'; Services	01/01/2004
R38OTN	601	Revision of Updates for Physicians'; Services	01/01/2004
CMS-1372-CN	602	Changes to Medicare Payment for Drugs and Physician Fee Schedule Payments for Calendar Year 2004Correction Notice	01/01/2004
CMS-1372-CN2	602	Changes to Medicare Payment for Drugs and Physician Fee Schedule Payments for Calendar Year 2004Correction Notice	01/01/2004
CMS-1372-IFC	602	Changes to Medicare Payment for Drugs and Physician Fee Schedule Payments for Calendar Year 2004	01/01/2004
<u>R280TN</u>	602	Treatment of Physicians' Services Furnished in Alaska	01/01/2004
<u>R4BP</u>	603	Inclusion of podiatrists, dentists, and optometrists under private contracting authority	01/01/2004
<u>CMS-1427-FC</u>	611	Changes to the Hospital Outpatient Prospective Payment System and Calendar Year 2005 Payment Rates	01/01/2005
CMS-1427-FC	611	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	01/01/2005
CMS-1427-P	611	Changes to the Hospital Outpatient Prospective Payment System and Calendar Year 2005 Payment Rates	01/01/2005
CMS-1429-F2	611	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005 Correcting Amendment	01/01/2005
<u>CMS-1429-FC</u>	611	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	01/01/2005
CMS-1429-P	611	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	11/01/2004
CMS-1429-F2	612	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005 Correcting Amendment	01/01/2005
CMS-1429-FC	612	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	01/01/2005

<u>CMS-1429-P</u>	612	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	11/01/2004
R28NCD	612	Coverage of Cardiovascular Screening Blood Tests	03/11/2005
		Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	
<u>CMS-1429-F2</u>	613	Correcting Amendment	01/01/2005
CMS-1429-FC	613	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	01/01/2005
CMS-1429-P	613	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	11/01/2004
R28NCD	613	Coverage of Diabetes Screening Tests	03/11/2005
R409CP	613	Coverage of Diabetes Screening Tests	03/11/2005
R446CP	613	Re-issued	01/03/2005
R457CP	613	Re-issued	01/03/2005
145761	013	Changes to the Hospital Outpatient Prospective Payment System and Calendar Year 2005	01,03,2003
CMS-1427-FC	614	Payment Rates	01/01/2005
CMS-1427-P	614	Changes to the Hospital Outpatient Prospective Payment System and Calendar Year 2005 Payment Rates	01/01/2005
CMS-1371-IFC	621	Hospital Outpatient Prospective Payment System Payment Reform for Calendar Year 2004	01/01/2004
<u>CMS-1427-FC</u>	621	Hospital Outpatient Prospective Payment System Payment Reform for Calendar Year 2004	01/01/2004
<u>CMS-1427-P</u>	621	Hospital Outpatient Prospective Payment System Payment Reform for Calendar Year 2004	01/01/2004
		Maintenance and Update of the Temporary Hook Created to Hold OPPS Claims that Include	
<u>R1057CP</u>	621(a)	Certain Drug HCPCS Codes	eff.01/01/2006 imp. 01/02/2006
<u>R112CP</u>	621(a)	Requires use of Medicaid definitions for drugs	04/01/2004
<u>R113CP</u>	621(a)	Requires use of Medicaid definitions for drugs	04/01/2004
CMS-1429-F2	623	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005- Correcting Amendment	01/01/2005
CMS-1429-FC	623	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	01/01/2005
CMS-1429-P	623	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	11/01/2004
CMS-5033-N	623	Establishment of an ESRD Advisory Group and Solicitation for New Members	01/01/2006
CMS-5033-N2	623	Establishment of an ESRD Advisory Group and Solicitation for New Members	01/01/2006
CMS-5033-N3	623	ESRD Advisory Group: Announcement of MeetingApril 13, 2005	01/01/2006
CMS-5033-N4	623	ESRD Advisory Group: Announcement of Meeting-May 24, 2005	01/01/2006
CMS-5033-N5	623	ESRD Advisory Group: Announcement of Meeting-July 14 and 15, 2005	01/01/2006
R61BP	623	Implementation of Changes in End Stage Renal Disease (ESRD) Payment for Calendar Year (CY) 2007	01-01-2007/01-02-2007

		The composite rate will be increased by 1.6% for services provided on or after January 1,	
R101CP	623 (b)	2005: dialysis facility exceptions	03/01/2004
		The composite rate will be increased by 1.6% for services provided on or after January 1,	
R7BP	623 (b)	2005: dialysis facility exceptions	03/01/2004
<u>R477CP</u>	623 (d) (1)	The composite rate will be increased by 1.6%	04/04/2005
N/A	623(e)	Payment For Renal Dialysis Services	Pending
		Revised Manual Instructions for Processing End Stage Renal Disease (ESRD) Exceptions Under	
R781CP	623(f)	the Composite Rate Reimbursement System	01/17/2006
R40OTN	624	2-year moratorium on therapy caps; provisions relating to reports	N/A
R42CP	624	2-year moratorium on therapy caps; provisions relating to reports	N/A
<u>R510TN</u>	626 (a)	For FY 2004, beginning April 1, reduces the update to CPI minus 3 percentage points 2007 Annual Update for Clinical Laboratory Fee Schedule and Laboratory Services Subject to	04/01/2004
R1122CP	628	Reasonable Charge Payment	01-01-2007/01-02-2007
R200TN	628	Payment for clinical diagnostic laboratory tests	01/01/2004
		·	
<u>R31OTN</u>	628	Payment for clinical diagnostic laboratory tests	01/01/2004
CMS-8020-N	629	Medicare Part B Monthly Actuarial Rates and Premium Rate Beginning January 1, 2005	09/30/2004
CMS-8027-N	629	Medicare Part B Monthly Actuarial Rates, Premium Rate, and Annual Deductible for Calendar Year 2006	09/30/2005
CMS-8030-N	629	Part B Monthly Actuarial Rates and Premium Rate Beginning January 1, 2007	Pub. 09/18/2006
R3GI	629	The Part B Medicare deductible remains \$100 through 2004	01/01/2004
		5-Year Authorization of Reimbursement for All Medicare Part B Services Furnished by Certain	
<u>R241CP</u>	630	Indian Hospitals and Clinics	01/03/2005
D267CD	620	5-Year Authorization of Reimbursement for All Medicare Part B Services Furnished by Certain	01/02/2005
R367CP	630	Indian Hospitals and Clinics 5-Year Authorization of Reimbursement for All Medicare Part B Services Furnished by Certain	01/03/2005
R425CP	630	Indian Hospitals and Clinics	01/03/2005
		5-Year Authorization of Reimbursement for All Medicare Part B Services Furnished by Certain	· ·
R430CP	630	Indian Hospitals and Clinics	01/03/2005
		5-Year Authorization of Reimbursement for All Medicare Part B Services Furnished by Certain	
<u>R461CP</u>	630	Indian Hospitals and Clinics	07/01/2005
CMS-5043-N	636	Physician-Hospital Collaboration Demonstration	Pub. 09/11/2006
CMS-5025-CN	641	Medicare Replacement Drug Demonstration-Correction	N/A
CMS-5025-N	641	Demonstration for Coverage of Certain Prescribed Drugs and Biologicals	03/08/2004
		Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	
CMS-1429-F2	642	Correcting Amendment	01/01/2005
CMS-1429-FC	642	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	01/01/2005

CMS-1429-P	642	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	11/01/2004
R6BP	642	Extension of coverage of intravenous immune globulin	04/01/2004
R74CP	642	Extension of coverage of intravenous immune globulin	04/01/2004
CMS-5017-N	646	Medicare Health Care Quality (MHCQ) Demonstration Program	N/A
R29DEMO	646	Medicare Health Care Quality Demonstration Programs	01/03/2006
CMS-5037-N	651	Demonstration for Coverage of Chiropractic Services Under Medicare	N/A
CMS-1265-F	701	Home Health Prospective Payment System Rate Update Calendar Year 2005	01/01/2005
CMS-1265-P	701	Home Health Prospective Payment System Rate Update Calendar Year 2005	04/01/2004
R59OTN	701	Home health prospective payment system (PPS) update	04/01/2004
R18DEMO	702	Establishes a 2-year demonstration to test an expanded homebound definition	07/05/2005
R3DEMO	702	Establishes a 2-year demonstration to test an expanded homebound definition	10/04/2004
CMS-5022-N	703	Medical Adult Day-Care Services Demonstration	Pub. 06/24/2005
R17DEMO	703	Furnished by Certain Indian Hospitals and Clinics	07/05/2005
R44DEMO	703	Additional Billing Guidance for HHA Sites in the Demonstration Project for Medical Adult Day- Care (MMA Section 703)	05/08/2006
R809CP	706	Update to Payment Rates for Religious Nonmedical Health Care Institution Services Furnished in the Home, Calendar Year 2006	02/13/2006
CMS-1428-F	711	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	711	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	Pub. 05/18/2004
		Reinstates the freeze on further updates to hospitals with per resident amounts above 140	
R61OTN	711	percent of the national average	04/01/2004
<u>CMS-1428-F</u>	712	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
<u>CMS-1428-P</u>	712	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	Pub. 05/18/2004
<u>R610TN</u>	712	Exception to initial residency period for geriatric residency or fellowship programs	01/01/2004
CMS-1428-F	713	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	713	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	Pub. 05/18/2004
R61OTN	713	Treatment of volunteer supervision	01/01/2004
CMS-5004-N	721	Chronic Care Improvement Program	12/08/2004
R256CP	721	Voluntary Chronic Care Improvement Under Traditional Fee-For-Service	01/03/2005
R5DEMO	721	Voluntary Chronic Care Improvement Under Traditional Fee-For-Service	01/03/2005
CMS-4106-PN	722	Changes in Medicare Advantage Deeming Authority	N/A
CMS-3141-N	731	Procedure for Producing Guidance Documents Describing Medicare';s Coverage Process	N/A
N/A	731	Improvements in National and Local Coverage Determination Process to Respond to Changes in Technology	Pending (1/3/2005)
R1310TN	731	Improvements in National and Local Coverage Determination Process to Respond to Changes in Technology	01/03/2005

<u>R147PI</u>	731	Evaluation of LCD Topics for NCD Consideration	06/19/2006
		Improvements in National and Local Coverage Determination Process to Respond to Changes	
R47NCD	731	in Technology	01/03/2006
		Improvements in National and Local Coverage Determination Process to Respond to Changes	
R48NCD	731	in Technology	06/19/2006
DE 7NCD	731	Home Use of Oxygen in Approved Clinical Trials	March 20, 2006/October 2, 2006
R57NCD	/31	Home Ose of Oxygen in Approved Clinical Thais	March 20, 2006/October 2, 2006
R961CP	731	Home Use of Oxygen in Approved Clinical Trails	March 20, 2006/October 2, 2006
		Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005 -	
CMS-1429-F2	732	Correcting Amendment	01/01/2005
CMS-1429-FC	732	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	Pub. 11/15/2004
CIVI3-1429-FC	732	Revisions to Fayinent Policies offuer the Physician Fee Schedule for Calendar Fear 2003	Fub. 11/13/2004
CMS-1429-P	732	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	11/01/2004
		Independent Laboratory Billing for the Technical Component (TC) of Physician Pathology	
R1046CP	732	Services	eff.12/01/2006 imp.12/01/2006
R1098CP	732	Duplicate Claim for Inpatient/Outpatient Services	04-01-07/04-02-07
R382CP	732	Extension of Treatment of Certain Physician Pathology Services Under Medicare	01/03/2005
<u>R456CP</u>	732	Extension of Treatment of Certain Physician Pathology Services Under Medicare - Rescinded	07/05/2005
		Payment for Pancreatic Islet Cell Investigational Transplants for Medicare Beneficiaries in	
R18NCD	733	Clinical Trials	10/04/2004
CMS-8020-N	811	Medicare Part B Monthly Actuarial Rates and Premium Rate Beginning January 1, 2005	09/30/2004
<u> </u>	011	Schedule for Publishing Medicare Final Regulations after a Proposed or Interim Final	03/30/2001
CMS-9026-N	902	Regulation	12/08/2003
R739CP	903	Compliance with Changes in Regulations and Policies	02/01/2006
CMS-1219-F	911	DMERC Service Areas and Related Matters	10/01/2005
<u>CMS-1219-N</u>	911	Changes in Geographical Boundaries of Durable Medical Equipment Regional Service Areas	10/01/2005
<u>R1090CP</u>	911	MSN Appeals and Written Correspondence Address Changes for J3 MAC only	04-01-07/04-02-07
<u>R1610TN</u>	911	Consolidation and flexibility in contracting	08/08/2005
		Durable Medical Equipment Medicare Administrative Contractors (DME MACs) Adoption or	
D16EDI	011	Rejection of LCDs Recommended by Durable Medicare Equipment Program Safeguard	00/11/06/10/25/05
<u>R165PI</u>	911	Contractors (DME PSCs) Contractor Number Change for Noridian Administrative Services Idaho and Oregon Part A	09/11/06 / 10/26/06
R216OTN	911	Workload Workload	05/01/2006
			, - ,
		Contractor Number Changes for National Heritage Insurance Company-Jurisdiction A DME	
R223OTN	911	MAC Workload and AdminaStar Federal, Inc-Jurisdiction BDME MAC Workload	07/03/2006

<u>R224OTN</u>	911	(MMA) A/B MAC Implementation (FISS and CWF)	10/02/2006
		New Contractor Numbers for Jurisdiction 3 Part AB Medicare Administrative Services (MAC)	
<u>R236OTN</u>	911	Workload	eff.10/01/2006 imp.10/02/2006
		New Contractor Number for the Jurisdiction D DME MAC Workload for Noridian	
<u>R237OTN</u>	911	Administrative Services, LLC	eff. 09/30/2006 imp.10/02/2006
<u>R248OTN</u>	911	Optical Character Recognition (OCR) Interface in FISS	01-01-07/01-02-07
R34MSP	911	Consolidation and flexibility in contracting	09/07/2005
R38MSP	911	Consolidation and flexibility in contracting	01/14/2006
R47MSP	911	Increased Flexibility in Medicare Administration	04/10/2006
R97OTN	911	Consolidation and flexibility in contracting	01/03/2005
<u>R861CP</u>	911(d)	Increased Flexibility in Medicare Administration - Limitation on liability	03/02/2006
<u>R5SS</u>	912	Requirements for Information Security for Medicare Administrative Contractors	02/28/2005
N/A	921	Consolidation and flexibility in contracting	Pending
N/A	921	Provider Education and Technical Assistance	Pending (1/3/2005)
<u>R113OTN</u>	921	Provider Contact Centers Training Program	09/01/2005
R13COM	921	Provider Contact Centers Training Program	09/01/2005
R14COM	921	Provider Education and Technical Assistance	01/01/2006
CMS-1324-N	924	Public Meeting for New Clinical Laboratory Tests	Published 05/26/2006
CMS-1546-N	924	Public Meeting for Payment for New Clinical Laboratory Test July 16, 2007	05/25/2007
CMS-1428-F	926	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
CMS-1428-P	926	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	Pub. 05/18/2004
<u>R96FM</u>	930	Development of New Report to Capture BIPA and MMA Appeals Data	July 1, 2006/July 3, 2006
N/A	931	Transfer of Responsibility for Medicare Appeals	Pending
<u>R76FM</u>	931	Transfer of Responsibility for Medicare Appeals	01/03/2006
R862CP	931	Transfer of Responsibility for Medicare Appeals	03/17/2006
<u>R86FM</u>	931	Transfer of Responsibility for Medicare Appeals	04/01/2006
<u>R96FM</u>	931	Development of New Report to Capture BIPA and MMA Appeals Data	July 1, 2006/July 3, 2006
CMS-4064-IFC	932	Revisions to the Appeals Process for Initial Claims Determinations	12/08/2003
N/A	932	Process for Expedited Access to Review	Pending
<u>R76FM</u>	932	Transfer of Responsibility for Medicare Appeals	01/03/2006
R862CP	932	Process for Expedited Access to Review	03/17/2006
R86FM	932	Process for Expedited Access to Review	04/01/2006
R96FM	932	Development of New Report to Capture BIPA and MMA Appeals Data	July 1, 2006/July 3, 2006
CMS-4064-IFC	933	Revisions to the Appeals Process for Initial Claims Determinations	12/08/2003
R862CP	933	Revisions to Medicare Appeals Process	03/17/2006
R96FM	933	Development of New Report to Capture BIPA and MMA Appeals Data	July 1, 2006/July 3, 2006
R86FM	933 (a)	Revision to the Medicare Appeals Process	04/01/2006

Process for Expedited Access to Review Pending				
R76FM 933(a) Transfer of Responsibility for Medicare Appeals 01/03/2006 N/A 933(b) Revisions to Medicare Appeals Process Pending R76FM 933(c) Revisions to Medicare Appeals 01/03/2006 N/A 933(c) Revisions to Medicare Appeals 01/03/2006 N/A 933(c) Revisions to Medicare Appeals Process Pending R76FM 933(c) Transfer of Responsibility for Medicare Appeals 01/03/2006 N/A 933(d) Revisions to Medicare Appeals Process Pending R76FM 933(d) Transfer of Responsibility for Medicare Appeals 01/03/2006 N/A 933(d) Revisions to Medicare Appeals Process Pending R76FM 934(d) Revisions to Medicare Appeals Process Pending R76FM 934(d) Prepayment Review 01/10/2005 R76FM 934 Prepayment Review 01/10/2005 CMS-6032-P 935 Limitation on Recoupment of Overpayments Pub. 09/22/2006 CMS-6032-P 935 Use of Repayment Plans Pub. 11/27/2006 N/A 935 Recovery of Overpayments Pending Pending Pending Pub. 11/27/2006 R1079CP 935 Recovery of Overpayments Pending Pending	N/A	933(a)	Process for Expedited Access to Review	Pending
N/A 933(b) Revisions to Medicare Appeals Process Pending	R87FM	933(a)	Update to Carrier Demand Letter Appeals Language	01/03/2006
R76FM 933(b) Transfer of Responsibility for Medicare Appeals 01/03/2006	<u>R76FM</u>	933(a0	Transfer of Responsibility for Medicare Appeals	01/03/2006
N/A 933(c) Revisions to Medicare Appeals Process R76FM 933(c) Transfer of Responsibility for Medicare Appeals 01/03/2006 N/A 933(d) Revisions to Medicare Appeals Process Pending R76FM 933(d) Revisions to Medicare Appeals Process Pending N/A 932(d) Revisions to Medicare Appeals Process Pending CMS-6022-P 934 Termination of Non-Random Prepayment Medical Review Pub. 10/07/2005 R80Pl 934 Prepayment Review 01/10/2005 CMS-6025-P 935 Limitation on Recoupment of Overpayments Pub. 09/22/2006 CMS-6032-P 935 Use of Repayment Plans Pub. 11/27/2006 N/A 935 Recovery of Overpayments N/A 935 Recovery of Overpayments Pending N/A 935 Recovery of Overpayments Pending N/A 935 Recovery of Overpayments Pending (5/31/2005) R109CP 935 Payment System (HHPPS) Claims Failing to Report Prior Hospitalization 01/18/07 / 01/18/07 Recovery of Overpayments—Describes the rights of a provider when under audit by a Medicare contractor R109Pl 935 Financial Reporting of Delinquent Debts Affer the MMA Section 935 Appeal Process 04-01-07/04-02-07 Enhance the Multi Carrier System (MCS) to Enable Payments to be Reduced by the Amount of the Corresponding Outstanding Account Receivable January 1, 2006/January 2, 200 R84FM 935 Recovery of Overpayments 02/14/2005 CMS-6003-P2 936 Requirements for Providers and Suppliers to Establish and Maintain Medicare Enrollment 04/21/2006 Appeals of CMS or Contractor Determination When a Provider or Supplier Fails to Meet the Requirements for Providers and Suppliers to Establish and Maintain Medicare Enrollment 08/02/2007 R151Pl 936 Provider Enrollment Appeals Process 08/14/2006 CMS-6003-P2 937 Re-openings and Revisions of Claim Determinations and Decisions 11/29/06 11/29/06 CMS-6024-P 938 Prior Determination Process for Cert	N/A	933(b)	Revisions to Medicare Appeals Process	Pending
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R76FM 933(d) Transfer of Responsibility for Medicare Appeals 01/03/2006 N/A 933(dc) Revisions to Medicare Appeals Process Pending CMS-6022-P 934 Termination of Non-Random Prepayment Medical Review Pub. 10/07/2005 R90P1 934 Prepayment Review 01/10/2005 CMS-6022-P 935 Limitation on Recoupment of Overpayments Pub. 11/27/2006 CMS-6032-P 935 Use of Repayment Plans Pub. 11/27/2006 N/A 935 Recovery of Overpayments Pending N/A 935 Recovery of Overpayments Pending N/A 935 Recovery of Overpayments Pending (5/31/2005) Changes to the Process for Recovering Medicare Payments for Home Health Prospective Payment System (HHPPS) Claims Failing to Report Prior Hospitalization 01/18/07 / 01/18/07 R109PL 935 Medicare Contractor 05/31/2005 R111FM 935 Financial Reporting of Delinquent Debts After the MMA Section 935 Appeal Process 04-01-07/04-02-07 R111FM 935 Financial Reporting of Delinquent Debts After the MMA Section 935 Appeal Process 04-01-07/04-02-07 R233OTN 935	<u>R76FM</u>	933(c)	Transfer of Responsibility for Medicare Appeals	01/03/2006
N/A 933(dc) Revisions to Medicare Appeals Process CMS-6022-P 934 Termination of Non-Random Prepayment Medical Review Pub. 10/07/2005 R90P1 934 Prepayment Review 01/10/2005 CMS-6025-P 935 Limitation on Recoupment of Overpayments Pub. 09/22/2006 CMS-6032-P 935 Use of Repayment Plans Pub. 11/27/2006 N/A 935 Recovery of Overpayments Pending N/A 935 Recovery of Overpayments Pending N/A 935 Recovery of Overpayments Panding Changes to the Process for Recovering Medicare Payments for Home Health Prospective Payment System (HHPPS) Claims Failing to Report Prior Hospitalization 01/18/07 / 01/18/07 R108P1 935 Recovery of Overpayments—Describes the rights of a provider when under audit by a Medicare contractor 05/31/2005 R111FM 935 Financial Reporting of Delinquent Debts After the MMA Section 935 Appeal Process 04-01-07/04-02-07 Enhance the Multi Carrier System (MCS) to Enable Payments to be Reduced by the Amount of the Corresponding Outstanding Account Receivable January 1, 2006/January 2, 200 R54FM 935 Recovery of Overpayments 10/25/2004 R99P1 935 Recovery of Overpayments 00/14/2005 CMS-6002-F 936 Requirements for Providers and Suppliers to Establish and Maintain Medicare Enrollment Appeals of CMS or Contractor Determination When a Provider or Supplier Fails to Meet the CMS-6003-P2 936 Requirements for Medicare Billing 03/02/2007 R151P1 936 Provider Enrollment Appeals Process 08/14/2006 CMS-6004-PC 937 Expedited Determination Procedures for Provider Service Terminations (BIPA 521) 11/15/2005 R1059CP 937 Re-openings and Revisions of Claim Determinations and Services Pub. 08/30/2005 N/A 938 Prior Determination Process for Certain Items and Services; Advance Beneficiary Notices Pending (1/3/2005)	N/A	933(d)	Revisions to Medicare Appeals Process	Pending
CMS-6022-P 934 Termination of Non-Random Prepayment Medical Review Pub. 10/07/2005	<u>R76FM</u>	933(d)	Transfer of Responsibility for Medicare Appeals	01/03/2006
R90P 934 Prepayment Review 01/10/2005	N/A	933(dc)	Revisions to Medicare Appeals Process	Pending
CMS-603-P 935 Limitation on Recoupment of Overpayments Pub. 09/22/2006 CMS-6032-P 935 Use of Repayment Plans Pub. 11/27/2006 N/A 935 Recovery of Overpayments Plans Pending N/A 935 Recovery of Overpayments Plans Pending N/A 935 Recovery of Overpayments Plans Pending Changes to the Process for Recovering Medicare Payments for Home Health Prospective Payment System (HHPPS) Claims Failing to Report Prior Hospitalization 01/18/07 / 01/18/07 Recovery of Overpayments—Describes the rights of a provider when under audit by a Medicare contractor 05/31/2005 R111FM 935 Financial Reporting of Delinquent Debts After the MMA Section 935 Appeal Process 04-01-07/04-02-07 Enhance the Multi Carrier System (MCS) to Enable Payments to be Reduced by the Amount January 1, 2006/January 2, 200 R54FM 935 Recovery of Overpayments 10/25/2004 R96Pl 935 Recovery of Overpayments 02/14/2005 CMS-6002-F 936 Requirements for Providers and Suppliers to Establish and Maintain Medicare Enrollment Appeals of CMS or Contractor Determination When a Provider or Supplier Fails to Meet the Requirements for Medicare Billing 03/02/2007 R151Pl 936 Provider Enrollment Appeals Process 08/14/2006 CMS-6003-P2 936 Requirements for Medicare Billing 03/02/2007 R151Pl 936 Provider Enrollment Appeals Process 08/14/2006 CMS-6004-FC 937 Expedited Determination Procedures for Provider Service Terminations (BIPA 521) 11/15/2005 R1069CP 937 Re-openings and Revisions of Claim Determinations and Decisions 11/29/06 / 11/29/06 CMS-6004-P 938 Prior Determination Process for Certain Items and Services; Advance Beneficiary Notices Pending (1/3/2005)	CMS-6022-P	934	Termination of Non-Random Prepayment Medical Review	Pub. 10/07/2005
CMS-6032-P 935 Use of Repayment Plans Pub. 11/27/2006 N/A 935 Recovery of Overpayments Pending N/A 935 Recovery of Overpayments Pending N/A 935 Recovery of Overpayments Pending (S/31/2005) Changes to the Process for Recovering Medicare Payments for Home Health Prospective Payment System (HHPPS) Claims Failing to Report Prior Hospitalization 01/18/07 / 01/18/07 Recovery of Overpayments—Describes the rights of a provider when under audit by a Medicare contractor 05/31/2005 R111FM 935 Financial Reporting of Delinquent Debts After the MMA Section 935 Appeal Process 04-01-07/04-02-07 Enhance the Multi Carrier System (MCS) to Enable Payments to be Reduced by the Amount of the Corresponding Outstanding Account Receivable January 1, 2006/January 2, 200 R54FM 935 Recovery of Overpayments 10/25/2004 R96PI 935 Recovery of Overpayments 02/14/2005 CMS-6002-F 936 Requirements for Providers and Suppliers to Establish and Maintain Medicare Enrollment Appeals of CMS or Contractor Determination When a Provider or Supplier Fails to Meet the Requirements for Medicare Billing 03/02/2007 R151Pl 936 Provider Enrollment Appeals Process 08/14/2006 CMS-6003-P2 937 Expedited Determination Process for Provider Service Terminations (BIPA 521) 11/15/2005 R1059CP 937 Re-openings and Revisions of Claim Determinations and Decisions 11/29/06 / 11/29/06 CMS-6024-P 938 Prior Determination Process for Certain Items and Services; Advance Beneficiary Notices Pending (1/3/2005)	<u>R90PI</u>	934	Prepayment Review	01/10/2005
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R1079CP 935 Recovery of Overpayments Pending (5/31/2005)	CMS-6032-P	935	Use of Repayment Plans	Pub. 11/27/2006
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R233OTN935of the Corresponding Outstanding Account ReceivableJanuary 1, 2006/January 2, 200R54FM935Recovery of Overpayments10/25/2004R96PI935Recovery of Overpayments02/14/2005CMS-6002-F936Requirements for Providers and Suppliers to Establish and Maintain Medicare Enrollment04/21/2006Appeals of CMS or Contractor Determination When a Provider or Supplier Fails to Meet the Requirements for Medicare Billing03/02/2007R151PI936Provider Enrollment Appeals Process08/14/2006CMS-4004-FC937Expedited Determination Procedures for Provider Service Terminations (BIPA 521)11/15/2005R1069CP937Re-openings and Revisions of Claim Determinations and Decisions11/29/06 / 11/29/06CMS-6024-P938Prior Determination Process for Certain Items and ServicesPub. 08/30/2005N/A938Prior Determination Process for Certain Items and Services; Advance Beneficiary NoticesPending (1/3/2005)	<u>R111FM</u>	935		04-01-07/04-02-07
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N/A 938 Prior Determination Process for Certain Items and Services; Advance Beneficiary Notices Pending (1/3/2005)		938	Prior Determination Process for Certain Items and Services; Advance Beneficiary Notices	Pending (1/3/2005)
	N/A	938	Prior Determination Process for Certain Items and Services; Advance Beneficiary Notices	Pending (1/3/2005)

CMS-4064-IFC	939	Revisions to the Appeals Process for Initial Claims Determinations	12/08/2003
N/A	939	Appeals by Providers when there is no Other Party Available	Pending
R87FM	939	Update to Carrier Demand Letter Appeals Language	01/03/2006
CMS-4064-IFC	940	Revisions to the Appeals Process for Initial Claims Determinations	12/08/2003
N/A	940	Revisions to Appeals Timeframes and Amounts	Pending
N/A	940	Revisions to Appeals Timeframes and Amounts	Pending (11/15/2004)
N/A	940	Revisions to Appeals Timeframes and Amounts	Pending (11/15/2004)
N/A	940	Revisions to Appeals Timeframes and Amounts	Pending (11/15/2004)
R55FM	940	Revisions to Appeals Timeframes and Amounts	11/15/2004
R87FM	940	Update to Carrier Demand Letter Appeals Language	01/03/2006
R96OTN	940	Revisions to Appeals Timeframes and Amounts	10/01/2004
CMS-1293-N	942	Public Meeting for New Clinical Laboratory Tests Payment DeterminationsJuly 18, 2005	Pub. 05/27/2005
		Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	
CMS-1429-F2	942	Correcting Amendment	01/01/2005
CN4C 4420 FC	0.43	Devisions to Develop the Helician Helician Helician Devision For Cohodula for Color dev Very 2005	Duly 44 /45 /2004
CMS-1429-FC	942	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	Pub. 11/15/2004
CMS-1429-P	942	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	11/01/2004
N/A	942	Improvement in oversight of technology and coverage	Pending
N/A	942	Improvement in oversight of technology and coverage	Pending
14/71	1	Treatment of Hospitals for Certain Services Under Medicare Secondary Payer (MSP)	
R11MSP	943	Provisions	03/29/2004
		Treatment of Hospitals for Certain Services Under Medicare Secondary Payer (MSP)	
<u>R228CP</u>	943	Provisions	08/16/2004
<u>R84PI</u>	944	EMTALA Improvements - Recinded	11/22/2004
<u>R86PI</u>	944	EMTALA Improvements - Reissued	11/22/2004
<u>CMS-1269-N</u>	945	Establishment of an EMTALA Technical Advisory Group and Solicitation for New Members	01/01/2004
CN4C 12CO N2	0.45	Second Request for Nominations for Two Specific Categories of Members of the EMTALA	01/01/2004
CMS-1269-N2	945	Technical Advisory Group EMTALA Technical Advisory Group Meeting and Announcement of MembersMarch 30,	01/01/2004
CMS-1269-N3	945	2005	01/01/2004
CMS-1269-N4	945	EMTALA Technical Advisory Group MeetingJune 15-17, 2005	N/A
C.713 1203 11T	3-3	Emergency Medical Treatment and Labor Act (EMTALA) Technical Advisory Group (TAG)	1.4/11
CMS-1269-N7	945	Announcement of a New Member	03/24/2006
	945	EMTALA Technical Advisory Group Meeting May 1-2, 2006	04/07/2006
CIVI2-1491-IV			
CMS-1481-N CMS-1481-N2	945	EMTALA Technical Advisory Group Meeting November 2-3, 2006	Pub. 09/29/2006

CMS-3844-P	946	Hospice Care Conditions of Participation	Pub. 05/27/2005
<u>CMS-6019-P</u>	949	Revised Civil Money Penalties, Assessments, Exclusions, and Related Appeals Procedures	12/08/2003
<u>CMS-1428-F</u>	951	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	10/01/2004
<u>CMS-1428-P</u>	951	Changes to the Hospital Inpatient Prospective Payment System and FY 2005 Rates	Pub. 05/18/2004
		Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	
CMS-1429-F2	952	Correcting Amendment	01/01/2005
CMS-1429-FC	952	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	Pub. 11/15/2004
CMS-1429-P	952	Revisions to Payment Policies Under the Physician Fee Schedule for Calendar Year 2005	11/01/2004
R111CP	952	Allows physicians to reassign payment for Medicare covered services to entities	03/12/2004
R228CP	952	Allows physicians to reassign payment for Medicare covered services to entities	03/12/2004
CMS-2062-N	1001	Disproportionate Share Hospital (DSH) PaymentsInstitutions for Mental Disease (IMDs)	12/08/2003
CMS-2198-P	1001	DSH Hospital Programs	12/08/2003
CMS-2209-N	1001	Disproportionate Share Hospital PaymentsInstitutions for Mental Disease (IMDs)	N/A
CMS-2243-N	1001	Fiscal Year Disproportionate Share Hospital Allotments and Disproportionate Share Hospital Institutions for Mental Disease Limits	Pub. 10/03/2006
		Health Care Infrastructure Improvement Program; Selection Criteria of Loan Program for	
CMS-1287-IFC	1016	Qualifying Hospitals Engaged in Cancer-Related Health Care	Published 09/30/2005
CMS-1320-P	1016	Health Care Infrastructure Improvement Program; Forgiveness of Indebtedness	Published 09/30/2005
		Changes to the Hospital Inpatient Prospective Payment Systems and FY 2007 Rates (Health	
		Care Infrastructure Improvement Program; Selection Criteria of Loan Program for Qualifying	
		Hospitals Engaged in Cancer-Related Health Care Health Care Infrastructure Improvement	
<u>CMS-1488-F</u>	1016	Program; Forgiveness of Indebtedness)	Pub. 08/18/2006
<u>CMS-0011-F</u>	1860	E-Prescribing and the Prescription Drug Program	01/01/2006
CMS-0011-P	1860	Electronic Prescribing; Medicare Modernization Act	09/01/2005
		Physicians'; Referrals to Health Care Entities with Which They Have Financial Relationships	
<u>CMS-1303-F</u>	1860	E-Prescribing Exception	08/08/2006
		Physicians'; Referrals to Health Care Entities With Which They Have Financial RelationshipsE-	
<u>CMS-1303-P</u>	1860	Prescribing Exception	Pub. 10/11/2005
CMS-4068-F	1860	Medicare Drug Benefit Effective CY 2006 (Title 1)	01/01/2006
CMS-4068-F2	1860	Medicare Drug Benefit Effective CY 2006 (Title 1)- Clarification	01/01/2006
		Open Public Meeting Regarding the Development of the Model Guidelines for Categories and	
CMS-4068-N	1860	Classes of Drugs-August 27, 2004	N/A
CMS-4068-P	1860	Medicare Drug Benefit Effective CY 2006 (Title I)	01/01/2006
CMS-4088-N	1860	Part D Reinsurance Payment Demonstration	N/A

		Open Door Forum September 30, 2004Requirements for Coordination Between Plans		ĺ
CMS-6027-N	1860	Primary or Secondary to Part D Under the MMA	07/01/2005	