

DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Centers for Medicare & Medicaid Services



MLN Matters® Number: MM9751 **Revised**      Related Change Request (CR) #: CR 9751  
Related CR Release Date: November 17, 2016      Effective Date: January 1, 2017 - Unless otherwise noted  
Related CR Transmittal #: R1753OTN      Implementation Date: January 3, 2017

### Coding Revisions to National Coverage Determination (NCDs)

**Note: This article was revised on November 17, 2016 to reflect the revised CR9571 issued on the same day. CR9571 was revised to change the NCD180.1 effective date in spreadsheet history to 1/1/16, in NCD160.18, remove reactivation of MCS 012L from spreadsheet history and business requirement, and in NCD220.6.20 to remove reference to 'primary diagnosis' regarding diagnosis code Z00.6 in spreadsheet, and reference FISS new RC for value code D4 in spreadsheet history. In the article, the CR release date, transmittal number and the Web address for CR9571 are revised. All other information remains the same.**

### Provider Types Affected

This MLN Matters® Article is intended for physicians and other providers submitting claims to Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries.

### Provider Action Needed

Change Request (CR) 9751 is the 9th maintenance update of International Classification of Diseases, Tenth Revision (ICD-10) conversions and other coding updates specific to national coverage determinations (NCDs). The majority of the NCDs included are a result of feedback received from previous ICD-10 NCD CRs, specifically CR7818, CR8109, CR8197, CR8691, CR9087, CR9252, CR9540, and CR9631; while others are the result of revisions required to other NCD-related CRs released separately. MLN Matters® Articles [MM7818](#), [MM8109](#), [MM8197](#), [MM8691](#), [MM9087](#), [MM9252](#), [MM9540](#), and [MM9631](#) contain information pertaining to these CR's.

#### Disclaimer

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## Background

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The translations from ICD-9 to ICD-10 are not consistent 1-1 matches, nor are all ICD-10 codes appearing in a complete General Equivalence Mappings (GEMS) mapping guide or other mapping guides appropriate when reviewed against individual NCD policies. In addition, for those policies that expressly allow MAC discretion, there may be changes to those NCDs based on current review of the NCDs against ICD-10 coding. For these reasons, there may be certain ICD-9 codes that were once considered appropriate prior to ICD-10 implementation that are no longer considered acceptable as of October 1, 2015.

No policy-related changes are included with these updates. Any policy-related changes to NCDs continue to be implemented via the current, long-standing NCD process. Edits to ICD-10 and other coding updates specific to NCDs will be included in subsequent, quarterly releases as needed.

CR9751 makes adjustments to the following NCDs:

- NCD 20.7 Percutaneous Transluminal Angioplasty (PTA)
- NCD 20.19 Ambulatory Blood Pressure Monitoring (ABPM)
- NCD 20.33 Transcatheter Mitral Valve Repair (TMVR) Therapy
- NCD 40.1 Diabetes Self-Management Training (DSMT)
- NCD 160.18 Vagus Nerve Stimulation (VNS)
- NCD 180.1 Medical Nutrition Therapy (MNT)
- NCD 190.3 Cytogenetic Studies
- NCD 220.6.17 FDG PET for Solid Tumors
- NCD 220.6.20 PET Beta Amyloid in Dementia/Neurological/ Disorders
- NCD 230.18 Sacral Nerve Stimulation (SNS) for Urinary Incontinence
- NCD 260.1 Adult Liver Transplants

The spreadsheets for the above NCDs are available at

<https://www.cms.gov/Medicare/Coverage/DeterminationProcess/downloads/CR9751.zip>.

Remember that coding and payment are areas of the Medicare Program that are separate and distinct from coverage policy/criteria. Revisions to codes within an NCD are carefully and thoroughly reviewed and vetted by the Centers for Medicare & Medicaid Services and are not intended to change the original intent of the NCD. The exception to this is when coding revisions are released as official implementation of new or reconsidered NCD policy following a formal national coverage analysis.

Your MACs will use default Council for Affordable Quality Healthcare (CAQH) Committee on Operating Rules for Information Exchange (CORE) messages where appropriate:

- Remittance Advice Remark Codes (RARC)

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- N386 - This decision was based on a National Coverage Determination (NCD). An NCD provides a coverage determination as to whether a particular item or service is covered; with
- Claim Adjustment Reason Codes (CARC)
  - 50 - These are non-covered services because this is not deemed a “medical necessity” by the payer;
  - 96 - Non-covered charge(s); or
  - 119 Benefit maximum for this time period has been reached.

Group Code PR (Patient Responsibility) assigning financial responsibility to the beneficiary (if a claim is received with occurrence code 32, or with occurrence code 32 and a GA modifier, indicating a signed Advance Beneficiary Notice (ABN) is on file). Group Code CO (Contractual Obligation) assigning financial liability to the provider (if a claim is received with a GZ modifier indicating no signed ABN is on file).

## Additional Information

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The official instruction, CR 9751, issued to your MAC regarding this change, is available at <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R1753OTN.pdf>.

If you have any questions, please contact your MAC at their toll-free number. That number is available at <http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/index.html>.

## Document History

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- November 17, 2016 – This article was revised to reflect the revised CR9571 issued on the same day. CR9571 was revised to change the NCD180.1 effective date in spreadsheet history to 1/1/16, in NCD160.18, remove reactivation of MCS 012L from spreadsheet history, and in NCD220.6.20 to remove reference to 'primary diagnosis' regarding diagnosis code Z00.6 in spreadsheet, and reference FISS new RC for value code D4 in spreadsheet history. In the article, the CR release date, transmittal number and the Web address for CR9571 are revised. All other information remains the same.
- August 19, 2016 – Initial Issuance

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