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| CMS Manual System | Department of Health & Human Services (DHHS) |
| Pub 100-04 Medicare Claims Processing | Centers for Medicare & Medicaid Services (CMS) |
| Transmittal 3797 | Date: June 16, 2017 |
| | Change Request 10156 |

SUBJECT: Changes to the Laboratory National Coverage Determination (NCD) Edit Software for October 2017

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to announce the changes that will be included in the October 2017 quarterly release of the edit module for clinical diagnostic laboratory services. This Recurring Update Notification applies to Chapter 16, Section 120.2, Publication 100-04.

EFFECTIVE DATE: October 1, 2017 - Unless noted differently in requirements.

**Unless otherwise specified, the effective date is the date of service.*

IMPLEMENTATION DATE: October 2, 2017

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 |
|--------------|---|
| N/A | |

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:

Recurring Update Notification

| Number | Requirement | Responsibility | | | | | | | | |
|-----------|--|----------------|---|-------------|----------------------------|----------------------------------|-------------|-------------|---------------|---------------|
| | | A/B MAC | | | D M E M A C | Shared- System Maintainers | | | | Other |
| | | A | B | H H H | | F I S S | M C S | V M S | C W F | |
| | ICD-10-CM codes that are covered by Medicare for the Human Chorionic Gonadotropin (190.27) NCD. | | | | | | | | | |
| 10156.4 | The module developer shall delete (unspecified eye) ICD-10-CM codes E083219, E083299, E083319, E083399, E083419, E083499, E083519, E083529, E083539, E083549, E083559, E083599, E0837X9, E093219, E093299, E093319, E093399, E093419, E093499, E093519, E093529, E093539, E093549, E093559, E093599, E0937X9, E103219, E103299, E103319, E103399, E103419, E103499, E103519, E103529, E103539, E103549, E103559, E103599, E1037X9, E113219, E113299, E113319, E113399, E113419, E113499, E113519, E113529, E113539, E113549, E113559, E113599, E1137X9, E133219, E133299, E133319, E133399, E133419, E133499, E133519, E133529, E133539, E133549, E133559, E133599, and E1337X9 from the list of ICD-10-CM codes that are covered by Medicare for the Glycated Hemoglobin/Glycated Protein (190.21) NCD. | | | | | | | | FU Associates | |
| 10156.4.1 | The module developer shall delete ICD-10-CM code Z8482 from the list of ICD-10-CM codes that are covered by Medicare for the Glycated Hemoglobin/Glycated Protein (190.21) NCD. | | | | | | | | | FU Associates |
| 10156.5 | The module developer shall provide the revised software as a mainframe (i.e., load module) to CMS to be distributed to the Shared System Maintainers (SSMs). | | | | | | | | | FU Associates |
| 10156.6 | The SSMs shall install the edit module after testing and distribute it to the contractors as part of their routine release. | | | | | X | X | | | |
| 10156.7 | Contractors shall adjust claims brought to their attention. Contractors do not need to search their files to either retract payment for claims already paid or retroactively pay claims. | X | X | | | | | | | |

III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility |
|--------|-------------|----------------|
|--------|-------------|----------------|

| | | A/B MAC | | | D M E M A C | C E D I |
|---------|---|------------|---|-------------|----------------------------|------------------|
| | | A | B | H H H | | |
| 10156.8 | 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 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. | X | X | | | |

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: |
|--------------------------|--|
| | |

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

V. CONTACTS

Pre-Implementation Contact(s): Wanda Belle, 410-786-7491 or wanda.belle@cms.hhs.gov , Kimberly Long, 410-786-5702 or kimberly.long@cms.hhs.gov , Patricia Brocato-Simons, 410-786-0261 or patricia.brocato-simons@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

