CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1766	Date: JULY 10, 2009
	Change Request 6548

SUBJECT: Changes to the Laboratory National Coverage Determination (NCD) Edit Software for October 2009

I. SUMMARY OF CHANGES: In accordance with Pub. 100-04, chapter 16, 120.2, the laboratory edit module is updated quarterly as necessary to reflect ministerial coding updates and substantive changes to the NCDs developed through the NCD process. The changes are a result of coding analysis decisions developed under the procedures for maintenance of codes in the negotiated NCDs and biannual updates of the ICD-9-CM codes. This instruction communicates requirements to shared system maintainers and contractors notifying them of changes to the laboratory edit module to update it for changes in laboratory NCD code lists for July 2009. These changes are effective for services furnished on or after October 1, 2009.

NEW / REVISED MATERIAL EFFECTIVE DATE: OCTOBER 1, 2009 IMPLEMENTATION DATE: OCTOBER 5, 2009

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

R/N/D	Chapter / Section / Subsection / Title
N/A	

III. FUNDING:

SECTION A: For Fiscal Intermediaries and Carriers:

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

SECTION B: 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

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

Attachment – Recurring Update Notification

Pub. 100-04 T	Fransmittal: 1766	Date: July 10, 2009	Change Request: 6548

SUBJECT: Changes to the Laboratory National Coverage Determination (NCD) Edit Software for October 2009

Effective Date: October 1, 2009 Implementation Date: October 5, 2009

I. GENERAL INFORMATION

A. Background: This transmittal announces the changes that will be included in the October 2009 quarterly release of the edit module for clinical diagnostic laboratory services. The NCDs for clinical diagnostic laboratory services were developed by the laboratory negotiated rulemaking committee and the final rule was published on November 23, 2001. Nationally uniform software was developed and incorporated in the shared systems so that laboratory claims subject to one of the 23 NCDs were processed uniformly throughout the nation effective January 1, 2003.

B. Policy: In accordance with Pub. 100-04, chapter 16, §120.2, the laboratory edit module is updated quarterly as necessary to reflect ministerial coding updates and substantive changes to the NCDs developed through the NCD process. The changes are a result of coding analysis decisions developed under the procedures for maintenance of codes in the negotiated NCDs and biannual updates of the ICD-9-CM codes. This instruction communicates requirements to shared system maintainers and contractors notifying them of changes to the laboratory edit module to update it for changes in laboratory NCD code lists for July 2009. Changes are being made to the NCD code lists as described below. These changes are effective for services furnished on or after October 1, 2009.

II. BUSINESS REQUIREMENTS TABLE

Use"Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable column)									plicable
		A / B M A C	D M E M A C	FI	C A R I E R	R H H I		nared- Mainta M C S	•	m C W F	OTHER
6548.1	The module developer shall add ICD-9-CM codes 670.10, 670.12, 670.14, 670.20, 670.22, 670.24, 670.30, 670.32, 670.34, 670.80, 670.82, 670.84, and 789.7 to the list of ICD-9-CM codes that are covered by Medicare for the Urine Culture, Bacterial (190.12) NCD.										Fu Associates
6548.2	The module developer shall add ICD-9-CM codes V26.42, V26.82, V53.50-V53.51, V53.59, V61.07- V61.08, V61.23-V61.25, V61.42, V72.60-V72.63, and V72.69 to the list of ICD-9-CM codes that Do Not Support Medical Necessity for the Blood Counts (190.15) NCD.										Fu Associates
6548.2.1	The module developer shall delete ICD-9-CM codes V53.5 and V72.6 from the list of ICD-9-CM codes										Fu Associates

Number	Requirement	Responsibility (place an "X" in each applicable column)													
		A	D	F	C A	R H		hared-			OTHER				
		B	M B E					1	R	H H	F	Mainta M	V	C	
		М	М		R I	Ι	I S	C S	M S	W F					
		A C	A C		E R		Š	2							
	that Do Not Support Medical Necessity for the Blood														
	Counts (190.15) NCD.														
6548.3	The module developer shall add ICD-9-CM codes										Fu				
	453.50-453.52, 453.6, 453.71-453.77, 453.79,										Associates				
	453.81-453.87, 453.89, 789.7, and 995.24 to the list														
	of ICD-9-CM codes that are covered by Medicare for the Partial Thromboplastin Time (PTT) (190.16)														
	NCD.														
6548.3.1	The module developer shall delete ICD-9-CM code										Fu				
05-0.5.1	453.8 from the list of ICD-9-CM codes that are										Associates				
	covered by Medicare for the Partial Thromboplastin										11550014105				
	Time (PTT) (190.16) NCD.														
6548.4	The module developer shall add ICD-9-CM codes										Fu				
	209.70-209.75, 209.79, 453.50-453.52, 453.6,										Associates				
	453.71-453.77, 453.79, 453.81-453.87, 453.89,														
	789.7, and 995.24 to the list of ICD-9-CM codes that														
	are covered by Medicare for the Prothrombin Time														
	(PT) (190.17) NCD.														
6548.4.1	The module developer shall delete ICD-9-CM code										Fu				
	453.8 from the list of ICD-9-CM codes that are										Associates				
	covered by Medicare for the Prothrombin Time (PT) (190.17) NCD.														
6548.4.2	The module developer shall replace the duplicate										Fu				
	ICD-9-CM code 868.19 with 868.09 within the list of										Associates				
	ICD-9-CM codes that are covered by Medicare for														
	the Prothrombin Time (PT) (190.17) NCD.														
6548.5	The module developer shall add ICD-9-CM codes										Fu				
	209.31-209.36, 209.70-209.75, 209.79, 239.81,										Associates				
	239.89, 285.3, 453.50-453.52 and 569.87 to the list														
	of ICD-9-CM codes that are covered by Medicare for														
	the Serum Iron Studies (190.18) NCD.										-				
6548.5.1	The module developer shall delete ICD-9-CM code 239.8 from the list of ICD-9-CM codes that are										Fu				
											Associates				
	covered by Medicare for the Serum Iron Studies (190.18) NCD.														
6548.6	The module developer shall add ICD-9-CM codes										Fu				
05 10.0	279.41, 279.49, 784.42-784.44, 784.51, 784.59,										Associates				
	799.21-799.25, 799.29, and V10.91 to the list of						1				- 1000010000				
	ICD-9-CM codes that are covered by Medicare for						1								
	the Thyroid Testing (190.22) NCD.	L							L						
6548.6.1	The module developer shall delete ICD-9-CM codes										Fu				
	279.4, 784.5, and 799.2 from the list of ICD-9-CM			1				Associates							
	codes that are covered by Medicare for the Thyroid						1								
	Testing (190.22) NCD.														
6548.7	The module developer shall add ICD-9-CM codes										Fu				

Number	Requirement	Responsibility (place an "X" in each applicable column)												
		A / B M	D M E M	FI	C A R R I	R H H I		nared- Mainta M C S		n C W F	OTHER			
		A C	A C		E R		S							
	438.13-438.14 to the list of ICD-9-CM codes that are										Associates			
	covered by Medicare for the Lipids Testing (190.23)													
	NCD.													
6548.8	The module developer shall add ICD-9-CM codes										Fu			
	787.04, 799.21-799.25, 799.29 and 995.24 to the list										Associates			
	of ICD-9-CM codes that are covered by Medicare for													
6548.8.1	the Digoxin Therapeutic Drug Assay (190.24) NCD.										F			
0348.8.1	The module developer shall delete ICD-9-CM code 799.2 from the list of ICD-9-CM codes that are										Fu Associates			
	covered by Medicare for the Digoxin Therapeutic										Associates			
	Drug Assay (190.24) NCD.													
6548.9	The module developer shall add ICD-9-CM codes										Fu			
0210.7	209.70-209.75 and 209.79 to the list of ICD-9-CM										Associates			
	codes that are covered by Medicare for the Alpha-										1 1000 010000			
	fetoprotein (190.25) NCD.													
6548.10	The module developer shall add ICD-9-CM codes										Fu			
	209.70-209.75 and 209.79 to the list of ICD-9-CM										Associates			
	codes that are covered by Medicare for the													
	Carcinoembryonic Antigen (190.26) NCD.													
6548.11	The module developer shall add ICD-9-CM codes										Fu			
	209.70-209.75, 209.79, 453.6, 453.71-453.77,										Associates			
	453.79, 453.81-453.87, 453.89, 569.87, 969.00-													
	969.05, 969.09, 969.70-969.73 and 969.79 to the list													
	of ICD-9-CM codes that are covered by Medicare for the Common Clutomy Transformers (100, 22) NCD													
6548.11.1	the Gamma Glutamyl Transferase (190.32) NCD.										Fu			
0346.11.1	The module developer shall delete ICD-9-CM codes 453.8, 969.0 and 969.7 from the list of ICD-9-CM										ru Associates			
	codes that are covered by Medicare for the Gamma										Associates			
	Glutamyl Transferase (190.32) NCD.													
6548.12	The module developer shall add ICD-9-CM codes										Fu			
	787.04 and 789.7 to the list of										Associates			
	ICD-9-CM codes that are covered by Medicare for													
	the Hepatitis Panel/Acute Hepatitis Panel (190.33)													
	NCD.													
6548.13	The module developer shall add ICD-9-CM codes										Fu			
	209.70-209.75, 209.79, 285.3, 569.87, 787.04, 789.7,										Associates			
	and 995.24 to the list of													
	ICD-9-CM codes that are covered by Medicare for the Facel Occult Placed Test (100.24) NCD					1	1							
6510 12 1	the Fecal Occult Blood Test (190.34) NCD.										En			
6548.13.1	The module developer shall delete CPT® code					1	1				Fu Associates			
	G0394 from the list of CPT® codes covered by Medicare for the Fecal Occult Blood Test (190.34)					1	1				Associates			
	NCD.													
6548.14	The module developer shall add ICD-9-CM codes					+	+				Fu			
00 1011 f	V20.31-V20.32 to the list of ICD-9-CM codes that					1	1				Associates			

Number	Requirement	Responsibility (place an "X" in each applicable												
		column)												
		A	D	F	C	R		nared-		m	OTHER			
		B	M E	I	A R	H H	F	Mainta M	v v	C				
		Б	E		R	I	F I	C	M	w				
		Μ	М		Ι	_	S	S	S	F				
		A C	A C		E R		S							
	are denied by Medicare for all 23 Lab NCDs.				R									
6548.15	The module developer shall add ICD-9-CM codes										Fu			
	V60.81 and V60.89 to the list of ICD-9-CM codes										Associates			
	that are denied by Medicare for all 23 Lab NCDs.													
6548.16	The module developer shall add ICD-9-CM codes										Fu			
	V80.01 and V80.09 to the list of ICD-9-CM codes										Associates			
	that are denied by Medicare for all 23 Lab NCDs.													
6548.17	The module developer shall delete ICD-9-CM code										Fu			
	V60.8 from the list of ICD-9-CM codes non-covered										Associates			
	by Medicare for all 23 Lab NCDs.													
6548.18	The module developer shall delete ICD-9-CM code										Fu			
	V80.0 from the list of ICD-9-CM codes non-covered										Associates			
	by Medicare for all 23 Lab NCDs.													
6548.19	The module developer shall make the revised										Fu			
	software available to download from the CMS data										Associates			
	center via connect: direct. The developer shall notify													
	the SSMs of the data set names via email.													
6548.20	The SSMs shall install the edit module after testing						Х	Х						
	and distribute it to the contractors as part of their													
	routine release.													

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)									
		A / B M A	D M E M A C	F I	C A R I E R	R H H I		hared- Maint M C S			OTHER
6548.21	A provider education article related to this instruction will be available at 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 site and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in your 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		х	X						

IV. SUPPORTING INFORMATION

A. For any recommendations and supporting information associated with listed requirements, use the box below:

Use "Should" to denote a recommendation

X-Ref	Recommendations or other supporting information:
Requirement	
Number	
None	

B. For all other recommendations and supporting information, use this space: N/A

V. CONTACTS

Pre-Implementation Contact(s): Lisa Eggleston, 410-786-6130, <u>Lisa.Eggleston@cms.hhs.gov</u>, Kimberly Long, 410-786-5702, <u>Kimberly.Long@cms.hhs.gov</u>, Patricia Brocato-Simons, 410-786-0261, <u>Patricia.Brocatosimons@cms.hhs.gov</u>

Post-Implementation Contact(s): Appropriate regional offices

VI. FUNDING

Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RRHIs), and Carriers:

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

Section B: 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.