



News Flash – The Centers for Medicare & Medicaid Services (CMS) has released MLN Matters Special Edition Article #SE1017 to assist all providers that will be affected by Medicare Administrative Contractor (MAC) implementations, or DME MAC transitions due to re-competing DME MAC Contracts. This article updates material contained in MLN Matters Article #SE0837, which was originally issued in November 2008, to reflect current experiences with transitions to a MAC. For more details, please read the article at <http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/SE1017.pdf> on the CMS website.

MLN Matters® Number: MM7057

Related Change Request (CR) #: 7057

Related CR Release Date: July 16, 2010

Effective Date: October 1, 2010

Related CR Transmittal #: R2001CP

Implementation Date: October 4, 2010

Note: This article was updated on December 7, 2012, to reflect current Web addresses. All other information remains unchanged.

Changes to the Laboratory National Coverage Determination (NCD) Edit Software for October 2010

Provider Types Affected

This article is for physicians, providers, and suppliers submitting claims to Medicare carriers, fiscal intermediaries (FIs), or Part A/B Medicare Administrative Contractors (A/B MACs) for clinical diagnostic laboratory services provided for Medicare beneficiaries.

Provider Action Needed

This article is based on Change Request (CR) 7057, which announces the changes that will be included in the October 2010 release of Medicare's edit module for clinical diagnostic laboratory National Coverage Determinations (NCDs). The last quarterly release of the edit module was issued in July 2010. Please ensure that your billing staffs are aware of these changes.

Disclaimer

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Background

The NCDs for clinical diagnostic laboratory services were developed by the laboratory negotiated rulemaking committee and published in a final rule on November 23, 2001. Nationally uniform software was developed and incorporated in Medicare's systems so that laboratory claims subject to one of the 23 NCDs were processed uniformly throughout the nation effective July 1, 2003. In accordance with the Medicare Claims Processing Manual, Chapter 16, Section 120.2, available at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c16.pdf> on the Centers for Medicare & Medicaid Services (CMS) website, 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.

CR 7057 announces changes to the laboratory edit module for changes in laboratory NCD code lists for October 2010. These changes become effective for services furnished on or after October 1, 2010. The changes that are effective for dates of service on and after October 1, 2010 are as follows:

For Bacterial Urine Cultures:

- Add ICD-9-CM code 780.66 to the list of ICD-9-CM codes that are covered by Medicare for the Urine Culture, Bacterial (190.12) NCD.

For Human Immunodeficiency Virus (HIV) Testing (Diagnosis):

- Add ICD-9-CM codes 780.66, 786.30, 786.31, and 786.39 to the list of ICD-9-CM codes that are covered by Medicare for the Human Immunodeficiency Virus (HIV) Testing (Diagnosis) (190.14) NCD.
- Delete ICD-9-CM code 786.3 from the list of covered ICD-9-CM codes for the Human Immunodeficiency Virus (HIV) Testing (Diagnosis) (190.14) NCD.

For Blood Counts:

- Add ICD-9-CM codes 832.2, V11.4, V25.11, V25.12, V25.13, V49.86, and V62.85 to the list of "Do Not Support Medical Necessity" ICD-9-CM codes that are covered by Medicare for the Blood Counts (190.15) NCD.
- Delete ICD-9-CM code V25.1 from the list of covered "Do Not Support Medical Necessity" ICD-9-CM codes for the Blood Counts (190.15) NCD.

For Partial Thromboplastin Time (PTT):

- Add ICD-9-CM codes 275.01, 275.02, 275.03, 275.09, 287.41, 287.49, 786.30, 786.31, and 786.39 to the list of ICD-9-CM codes covered by Medicare for the Partial Thromboplastin Time (PTT) (190.16) NCD.

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- Delete ICD-9-CM codes 275.0, 287.4, and 786.3 from the list of covered ICD-9-CM codes for the PTT (190.16) NCD.

For Prothrombin Time:

- Add ICD-9-CM codes 275.01, 275.02, 275.03, 275.09, 287.41, 287.49, 786.30, 786.31, 786.39, 999.80, 999.83, 999.84, and 999.85 to the list of ICD-9-CM codes covered by Medicare for the Prothrombin Time (190.17) NCD.
- Delete ICD-9-CM codes 275.0, 287.4, and 786.3 from the list of covered ICD-9-CM codes covered for the Prothrombin Time (190.17) NCD.
- Correct a typographical error by replacing ICD-9-CM code 531.21 with ICD-9-CM code 534.21 within the code range 534.20-531.21 for the Prothrombin Time (190.17) NCD.

For Serum Iron Studies:

- Add ICD-9-CM codes 237.73, 237.79, 275.01, 275.02, 275.03, 275.09, 287.41, 287.49, 999.80, 999.83, 999.84, and 999.85 to the list of ICD-9-CM codes covered by Medicare for the Serum Iron Studies (190.18) NCD.
- Delete ICD-9-CM codes 275.0 and 287.4 from the list of covered ICD-9-CM codes for the Serum Iron Studies (190.18) NCD.

For Blood Glucose Testing:

- Add ICD-9-CM codes 275.01, 275.02, 275.03, 275.09, 276.61, 276.69, 780.33, 787.60, 787.61, 787.62, and 787.63 to the list of ICD-9-CM codes covered by Medicare for the Blood Glucose Testing (190.20) NCD.
- Delete ICD-9-CM codes 275.0, 276.6, and 787.6 from the list of covered ICD-9-CM codes for the Blood Glucose Testing (190.20) NCD.

For Glycated Hemoglobin/Glycated Protein:

- Add ICD-9-CM codes 275.01, 275.02, 275.03, and 275.09 to the list of ICD-9-CM codes covered by Medicare for the Glycated Hemoglobin/Glycated Protein (190.21) NCD.
- Delete ICD-9-CM code 275.0 from the list of covered ICD-9-CM codes for the Glycated Hemoglobin/Glycated Protein (190.21) NCD.

For Lipids Testing:

- Add ICD-9-CM code 278.03 to the list of ICD-9-CM codes covered by Medicare for the Lipids Testing (190.23) NCD.

For Digoxin Therapeutic Drug Assay:

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- Add ICD-9-CM codes 276.61 and 276.69 to the list of ICD-9-CM codes covered by Medicare for the Digoxin Therapeutic Drug Assay(190.24) NCD.
- Delete ICD-9-CM code 276.6 from the list of covered ICD-9-CM codes for the Digoxin Therapeutic Drug Assay (190.24) NCD.

For Alpha-fetoprotein:

- Add ICD-9-CM codes 275.01, 275.02, 275.03, and 275.09 to the list of ICD-9-CM codes covered by Medicare for the Alpha-fetoprotein (190.25) NCD.
- Delete ICD-9-CM code 275.0 from the list of covered ICD-9-CM codes for the Alpha-fetoprotein (190.25) NCD.

For Gamma Glutamyl Transferase:

- Add ICD-9-CM codes 273.73, 237.79, 275.01, 275.02, 275.03, 275.09, 560.32, 780.66, 970.81, and 970.89 to the list of ICD-9-CM codes covered by Medicare for the Gamma Glutamyl Transferase (190.32) NCD.
- Delete ICD-9-CM codes 275.0 and 970.8 from the list of covered ICD-9-CM codes for the Gamma Glutamyl Transferase (190.32) NCD.

For Hepatitis Panel/Acute Hepatitis Panel:

- Add ICD-9-CM code 780.33 to the list of ICD-9-CM codes covered by Medicare for the Hepatitis Panel/Acute Hepatitis Panel (190.33) NCD.

For Fecal Occult Blood Test:

- Add ICD-9-CM codes 287.41, 287.49, and 560.32 to the list of ICD-9-CM codes covered by Medicare for the Fecal Occult Blood Test (190.34) NCD.
- Delete ICD-9-CM code 287.4 from the list of covered ICD-9-CM codes for the Fecal Occult Blood Test (190.34) NCD.

Additional Information

If you have questions, please contact your Medicare carrier, FI or MAC at their toll-free number which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

The official instruction, CR 7057, issued to your Medicare carrier, FI, or A/B MAC regarding this change may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R2001CP.pdf> on the CMS website.

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