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# CMS Manual System

## Pub. 100-01 Medicare General Information, Eligibility, and Entitlement

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Department of Health & Human Services (DHHS)  
Centers for Medicare & Medicaid Services (CMS)

Transmittal 14

Date: December 10, 2004

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CHANGE REQUEST 3550

**SUBJECT: Scheduled Release for January Updates to Software Programs and Pricing/Coding Files**

**I. SUMMARY OF CHANGES:** This recurring update notification provides information to contractors about updates of the CMS Managed Modules for software programs and pricing/coding files.

**NEW/REVISED MATERIAL - EFFECTIVE DATE: January 10, 2005**

**\*IMPLEMENTATION DATE: January 10, 2005**

*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.*

**II. CHANGES IN MANUAL INSTRUCTIONS: N/A**

**(R = REVISED, N = NEW, D = DELETED – (Only One Per Row.)**

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE
N/A	

**\*III. FUNDING:**

**These instructions shall be implemented within your current operating budget.**

**IV. ATTACHMENTS:**

	<b>Business Requirements</b>
	<b>Manual Instruction</b>
	<b>Confidential Requirements</b>
	<b>One-Time Notification</b>
<b>X</b>	<b>Recurring Update Notification</b>

**\*Medicare contractors only**

# Attachment – Recurring Update Notification

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**SUBJECT: Scheduled Release for January Updates to Software Programs and Pricing/Coding Files**

**I. GENERAL INFORMATION**

**A. Background:** The managed module for software programs and pricing/coding files is updated quarterly. It is informational only and has no systems impact.

**B. Policy:** N/A

**C. Provider Education:** None.

**II. BUSINESS REQUIREMENTS**

*“Shall” denotes a mandatory requirement*

*“Should” denotes an optional requirement*

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)							
		F I R I S S	R H I R S S	C a r r i e r	D M E R C	Shared System Maintainers			
F I S S	M C S					V M S	C W F		
3550.1	Medicare contractors shall download the January update when the software and file become available (See Attachment for scheduled release dates).	X	X	X	X	X	X	X	

**III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS**

**A. Other Instructions:** N/A

X-Ref Requirement #	Instructions

**B. Design Considerations:** N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: N/A

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

#### IV. SCHEDULE, CONTACTS, AND FUNDING

<p><b>Effective Date*:</b> January 10, 2005</p> <p><b>Implementation Date:</b> January 10, 2005</p> <p><b>Pre-Implementation Contact(s):</b> Joe Bryson at <a href="mailto:jbryson2@cms.hhs.gov">jbryson2@cms.hhs.gov</a> or 410-786-2986</p> <p><b>Post-Implementation Contact(s):</b> Regional Office</p>	<p><b>Medicare contractors shall implement these instructions within their current operating budgets.</b></p>
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\*Unless otherwise specified, the effective date is the date of service.

## Attachment

Title of software/ Pricing Files	Scheduled Release Date	Description of Update	Release Cycle
Inpatient PRICER	no January update	Updates rates and DRGs.	Semi-annual – (October and April)
IRF PRICER	no January update	Updates rates and DRGs.	Annual - (October)
LTCH PRICER	no January update	Updates rates and DRGs.	Semi-annual
OPPS PRICER	12/13	Updates to APC rates, wage indices and new logic.	Quarterly
HHA PRICER	11/1	Updates rates and wage indices.	Annual - (January)
ASC PRICER	12/1	Update to HCPCS code.	Semi-annual – (October and January)
SNF PRICER	no January update	Updates rates and wage indices.	Annual - (October)
Hospice PRICER	no January update	Updates rate increases and wage indices.	Annual – (October)
ASP Pricing File	11/1*	Update containing payment amounts for covered drugs.	Quarterly
OPPS OCE	12/13	Changes to CMS coding, edits, flags, APCs, status indicator descriptions and logic.	Quarterly
Non-OPPS OCE	12/13	Changes to codes, ASC payment groups edits and logic.	Quarterly
Inpatient GROUPER	no January update	Update to DRGs and/or ICD-9 codes.	Annual – (October)
MCE	no January update	Update to DRGs and/or ICD-9 codes.	Annual – (October)
Zip Code File	11/1*	Update of zip codes for ambulance reporting.	Quarterly

Title of software/ Pricing Files	Scheduled Release Date	Description of Update	Release Cycle
Clinical Diagnostic Laboratory Edit Table	11/1*	Update to ICD-9 and CPT codes in the edit table.	Quarterly
MPFSDB	11/1*	Update to fee schedule.	Quarterly
MPFSDB Abstract File (Therapy/CORF/CAH)	11/1*	Update to fee schedule.	Quarterly
Supplemental File (Therapy/CORF)	11/1*	Updates fee schedule services and their related prices.	Quarterly
Hospice File for RHHIs	11/1*	Update to fee schedule.	Quarterly
Mammography Benefit Pricing File	11/1*	Update to fee schedule.	Quarterly
SNF Extract of the MPFSDB	11/1*	Update to fee schedule.	Quarterly
Railroad Board File	11/1*	Update to fee schedule.	Quarterly
Clinical Diagnostic Lab Fee Schedule	Carrier – 11/4 FI – 11/18	Updates rates under the fee schedule.	Annual
DMEPOS Fee Schedule	Carrier – 11/2 DMERC – 11/2 FI – 11/18	Update to fee schedule.	Quarterly

Title of software/ Pricing Files	Scheduled Release Date	Description of Update	Release Cycle
Ambulance Fee Schedule File	11/29*	Update per The Medicare Prescription, Drug and Modernization Act (MMA).	Annual
HCPCS	10/27	Update of HCPCS codes.	Annual – (January)

\* The release of this file is subject to change and, therefore, should be considered “on or around” this date. CMS is unable to provide a specific release date for this file at the time of CR 3550’s issuance.

**Note:** All dates on the above table are for CY 2004.

The PRICER software will be made available for retrieval from CMS’s Mainframe Telecommunications System. Shared System maintainers will be notified via e-mail when the software is available and will notify you via routine bulletins when they release the PRICER software to you.

The pricing/coding files will be available for retrieval from CMS’s Mainframe Telecommunication System. You will be notified in future One-Time Notifications of when the pricing/coding files will be available.

**Acronyms:**

- APC – Ambulatory Payment Classification
- ASC – Ambulatory Surgical Center
- ASP – Average Sale Price
- BIPA – Benefits Improvement and Protection Act
- CAH – Critical Access Hospital
- CMHC – Community Mental Health Center
- CORFs – Comprehensive Outpatient Rehabilitation Facilities
- CY – Calendar Year
- DMEPOS – Durable Medical Equipment Prosthetic Orthotic and Supply
- DRGs – Diagnosis Related Groups
- HHA – Home Health Agency
- HCPCS – Healthcare Common Procedure Coding System
- ICD-9-CM – International Classification of Disease, 9<sup>th</sup> Revision, Clinical Modification
- IRF – Inpatient Rehabilitation Facility
- LTCH – Long Term Care Hospital
- MCE – Medicare Code Editor
- MPFSDB – Medicare Physician Fee Schedule Database
- NWI – New Wage Indexes
- OCE – Outpatient Code Editor
- OPPS – Outpatient Prospective Payment System
- RHHIs – Regional Home Health Intermediaries
- SNF – Skilled Nursing Facilities

