

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2865	Date: January 31, 2014
	Change Request 8494

Transmittal 2806, dated November 1, 2013, is being rescinded and replaced by Transmittal 2865, dated January 31, 2014 to correct the year in Requirement 8494.2 from 11/25/2003 to 11/25/2002. All other information remains the same.

SUBJECT: Changes to the Laboratory National Coverage Determination (NCD) Software for ICD-10 Codes

I. SUMMARY OF CHANGES: The Laboratory National Coverage Determination (NCD) Edit Software will be updated to accommodate the processing of the ICD-10 diagnosis codes. This is a follow-up to CR8202 / Transmittal 1174, dated February 1, 2013 that extended the ICD-9 codes to ICD-10 implementation date to October 1, 2014.

EFFECTIVE DATE: October 1, 2014

IMPLEMENTATION DATE: January 6, 2014

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 Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers:
No additional funding will be provided by CMS; Contractors activities are to be carried out with their operating budgets

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 obliged 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.*

Recurring Update Notification

Pub. 100-04	Transmittal: 2865	Date: January 31, 2014	Change Request: 8494
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Transmittal 2806, dated November 1, 2013, is being rescinded and replaced by Transmittal 2865, dated January 31, 2014 to correct the year in Requirement 8494.2 from 11/25/2003 to 11/25/2002. All other information remains the same.

SUBJECT: Changes to the Laboratory National Coverage Determination (NCD) Software for ICD-10 Codes

EFFECTIVE DATE: October 1, 2014
IMPLEMENTATION DATE: January 6, 2014

I. GENERAL INFORMATION

A. Background: In accordance with Chapter 16, Section 120.2, Publication 100-04, 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 (SSMs) and contractors notifying them of changes to the laboratory edit module.

B. Policy: The Laboratory NCD Edit Software will be updated to accommodate the processing of the ICD-10 diagnosis codes. This is a follow-up to CR8202 / Transmittal 1174, dated February 1, 2013 that extended the ICD-9 to ICD-10 implementation date to October 1, 2014. There are no updates to the laboratory NCD code lists for this quarter.

II. BUSINESS REQUIREMENTS TABLE

"Shall" denotes a mandatory requirement, and "should" denotes an optional requirement.

Number	Requirement	Responsibility											
		A/B MAC		D M E M A C	F I R E R	C A R I E R	R H I	Shared-System Maintainers				Other	
		A	B					H H H	F I S S	M C S	V M S		C W F
8494.1	The Shared Systems Maintainer shall implement software updates to the Online Inquiry System from the Lab Edit Changes Spreadsheet: Element #17 "INVALID DATE ENTERED" was changed to show the 2 year window messages: "SERVICE DATE MORE THAN 2 YEARS BEFORE SESSION DATE" or "SERVICE DATE MORE THAN 2 YEARS AFTER SESSION DATE" when appropriate.							X	X				
8494.2	The Shared Systems Maintainer shall implement software updates to the Online Inquiry System: Element #17 "SERVICE DATE < 11/2002 OR >							X	X				

Number	Requirement	Responsibility											
		A/B MAC			D M E M A C	F I	C A R R I E R	R H I	Shared-System Maintainers				Other
		A	B	H H H					F I S S	M C S	V M S	C W F	
	10/2014" modified to "SERVICE DATE < 11/25/2002 OR > 9/30/2014.												

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility										
		A/B MAC			D M E M A C	F I	C A R R I E R	R H I	Other			
		A	B	H H H					F I S S	M C S	V M S	C W F
8494.3	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 one week of the availability of the provider education 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:

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
.2	From the Lab Edit Changes Spreadsheet, dated 5/6/2013, Element #17 "SERVICE DATE < 11/2002 OR > 10/2014" was modified to "SERVICE DATE< 11/25/2002 OR > 9/30/2014. The impact is that the dates in the error messages are now more accurate.

X-Ref Requirement Number	Recommendations or other supporting information:
.1	From the Lab Edit Changes Spreadsheet, dated 5/6/2013, Element #17 "INVALID DATE ENTERED" was changed to show the 2 year window messages: "SERVICE DATE MORE THAN 2 YEARS BEFORE SESSION DATE" or "SERVICE DATE MORE THAN 2 YEARS AFTER SESSION DATE" when appropriate. The impact is that the error messages are now more accurate.

Section B: All other recommendations and supporting information:

V. CONTACTS

Pre-Implementation Contact(s): Patricia Brocato-Simons, 410-786-0261 or Patricia.BrocatoSimons@cms.hhs.gov , Kimberly Long, 410-786-5702 or Kimberly.Long@cms.hhs.gov , Wanda Belle, 410-786-7491 or Wanda.Belle@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR) or Contractor Manager, as applicable.

VI. FUNDING

Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), and/or Carriers:

No additional funding will be provided by CMS; Contractors activities are to be carried out with their operating budgets

Section B: For Medicare Administrative Contractors (MACs):

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