

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 3099	Date: October 24, 2014
	Change Request 8966

SUBJECT: Instructions for Retrieving the 2015 Pricing and HCPCS Data Files through CMS' Mainframe Telecommunications Systems

I. SUMMARY OF CHANGES: This transmittal provides the annual update to the various pricing files used by FIs/MACs to adjudicate Part B fee schedule paid claims. The attached Recurring Update Notification applies to chapter 23 section 40.

EFFECTIVE DATE: January 1, 2015

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

IMPLEMENTATION DATE: January 5, 2015

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	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 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

Attachment - Recurring Update Notification

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I. GENERAL INFORMATION

A. Background: Attached are the instructions for retrieving the 2015 Pricing and HCPCS Data Files through CMS' Mainframe Telecommunications System (MTS). These instructions pertain to institutional abstract files only, so there is no Part B MAC impact. CMS' Division of Data Systems (DDS) will release the fee schedules files on the dates indicated. Contractors shall use these files for pricing HCPCS codes for dates of service beginning January 1, 2015.

B. Policy: This Recurring Update Notification replaces CR 8492, dated October 25, 2013.

Section 5102(b) of the Deficit Reduction Act requires payment for imaging services to be limited to the Medicare Outpatient Department fee schedule amount established under the prospective payment system for hospital outpatient department services. To the extent possible, this limit is reflected in the fees contained in these files. However, contractor priced services are not included in these files. For any imaging services that are contractor priced, the contractor will need to ensure this limit is implemented when their fee is developed.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility										Other
		A/B MAC			D M E	Shared- System Maintainers						
		A	B	H H H		F I S S	M C S	V M S	C W F			
8966.1	Medicare contractors shall download the 2015 HCPCS file with the following name from the CMS MTS in late October after 8:00 PM EST: P@HCP.@AAA2360.HCPC2015.CONTR	X									VDC	

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		
	CMS will provide the date of retrieval via separate email communication.										
8966.2	Medicare contractors shall download the 2015 fee amounts for clinical diagnostic laboratory services with the following name from the CMS MTS on November 14, 2014, after 8:00 PM EST: <u>MU00.@BF12394.CLAB.CY15.V1117.FI</u>	X									VDC
8966.3	Medicare contractors shall download the 2015 fee amounts for DMEPOS with the following name from the CMS MTS on November 14, 2014 after 8:00 PM EST: <u>MU00.@BF12393.DMEPOS.T150101.V1101.FI</u>	X		X							VDC
8966.3.1	MACs shall retrieve from the following DMEPOS categories as appropriate: OS, IL, P/O SC, and S/D	X									
8966.3.2	Medicare contractors shall retrieve as appropriate from all DMEPOS categories except T/S.	X		X							
8966.4	Medicare contractors shall download the 2015 physician fee schedule abstract fee amounts for outpatient rehabilitation and CORF services with the following name from the CMS MTS on November 14, 2014, after 8:00 PM EST: <u>MU00.@BF12390.MPFS.CY15.ABSTR.V1101.FI</u>	X									VDC
8966.5	Medicare contractors shall download the 2015 fee amounts for Part B hospice claims, outpatient rehabilitation, CORF, SNF and CAH services with the following name from the CMS MTS on November 14,	X		X							VDC

Number	Requirement	Responsibility									
		A/B MAC			D M E	Shared- System Maintainers				Other	
		A	B	H H H		M A C	F I S S	M C S	V M S		C W F
	<u>MU00.@AAA2390.AMBFS.FINAL.CY2015.V1114</u>										
8966.10	Medicare contractors shall use the locality structure in Attachment B to identify the carrier associated with the locality name and number.	X		X							
8966.11	Medicare contractors shall treat pricing data confidential and shall not release data until notification is received from CMS (publication of the final rule implementing the fee schedule for physician services for 2015.)	X		X							
8966.12	Medicare contractors shall price claims with dates of service on and after January 1, 2015, with codes and fee rates furnished in the 2015 files.	X		X							
8966.13	For each file referenced above, notification of successful receipt shall be sent via e-mail to price_file_receipt@cms.hhs.gov stating the name of the file received and the entity for which it was received (fiscal intermediary name and number.)	X		X							
8966.14	Medicare contractors shall compare selected carrier priced imaging service fees to the outpatient PPS amount in their system for the same service and load the lower amount for payment.	X									

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility	
		A/B MAC	D M E

		A	B	H H H	M A C
	None				

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: See Attachments B for pricing and localities. The record layouts can be found in Pub. 100-04 Chapter 23, sections 40 through 50.

V. CONTACTS

Pre-Implementation Contact(s): Wil Gehne, Wilfried.Gehne@cms.hhs.gov , Shauntari Cheely, Shauntari.Cheely@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

Section A: 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.

ATTACHMENTS: 1

ATTACHMENT A

INSTRUCTIONS FOR RECEIVING 2015 PART B PRICING FILES VIA CMS' MAINFRAME TELECOMMUNICATIONS SYSTEM

Listed below are instructions for receiving the 2015 Part B Pricing Files via CMS' mainframe telecommunications system. In order not to incur additional transmission cost, transmission must occur during the evening hours, specifically after 8:00 P.M. Eastern Standard Time (EST).

Listed below are the most common problems encountered when A/M MACs receive data via CMS' mainframe telecommunications system:

- o Receipt was performed in interactive mode, rather than batch. If transmission is performed interactively, it is impossible for DHPPD to access the CMS' mainframe telecommunications system log to verify transmission success/failure.
- o Omission or change of NEWNAME parameter. Omission of this parameter makes it extremely difficult and cumbersome for DHPPD to access CMTS log to verify transmission success/failure. See the following NEWNAME parameters:
 - **DMEPOS** for services priced under the durable medical equipment, prosthetics, orthotic and supply fee schedule
 - **CLAB** for services priced under the clinical diagnostic laboratory fee schedule
 - **MPFS** for the radiology and other diagnostic services priced under the physician fee schedule
 - **HCPCS** for procedure coding information required for claims processing
- o Omission or change of STARTT parameter. This parameter establishes the starting time for the batch job. As stated earlier, transmission must occur during the evening hours. Setting the STARTT to 20:00:00 hours assures that transmission will not commence prior to 8:00 PM EST.

The following is the JCL required for setting up a CMTS transmission of the 2015 Part B Pricing Files file from the CMS Data Center.

```
//UID#DMEP JOB (ACCTNG),'NAME',MSGCLASS=A,CLASS=C,
//  MSGLEVEL=(1,1)
//DMBATCH EXEC PGM=DMBATCH,REGION=512K,PARM=(YYSLYNN)
//DMPUBLIB DD DSN= NDM.PROCESS.LIBRARY,DISP=SHR
//DMMSGFIL DD DSN= NDM.MESSAGE.LIBRARY,DISP=SHR
//DMNETMAP DD DSN= NDM.NETWORK.MAP,DISP=SHR
//DMPRINT DD SYSOUT=*
//NDMCMDS DD SYSOUT=*
//SYSUDUMP DD SYSOUT=*
//SYSPRINT DD SYSOUT=*
//SYSIN DD *
SIGNON USERID=(NDM USERID) -
        NODE= NDM NODE ID -
        NETMAP= NDM NETWORK MAP
SUBMIT DSN= PROCESS LIBRARY MEMBER -
        STARTT=(,20:00:00) -
        NEWNAME=DMEPOS or CLAB or MPFS or HCPCS
SIGNOFF
```

/*
//

Prior to submitting this job, supply the following parameters particular to your job site:

UID#	= Your system User-ID
ACCTNG	= Accounting Information, if applicable
NAME	= Programmer's Name
<i>NDM.PROCESS.LIBRARY</i>	= NDM Process Library for your system
<i>NDM.MESSAGE.LIBRARY</i>	= NDM Message Library for your system
<i>NDM.NETWORK.MAP</i>	= NDM Network Map File for your system
<i>NDM USERID</i>	= NDM Userid for your system
<i>NDM NODE</i>	= NDM Node ID for your system
<i>PROCESS LIBRARY MEMBER</i>	= Member where the code for the NDM COPY (see next page) is stored

The following code should be placed in your process library. This code will be executed from within CMTS to perform the copying of the 2015 Part B pricing data from a file at the CMS Data Center to a file at your processing site.

```
DMEPOS PROCESS PNODE= NDM NODE -
        SNODE=NDM.CMS -
        SNODEID=(TWXX, PASSWD) -
        PACCT= 'ACCTNG' -
        &DSN= DATASET NAME
STEP01 COPY -
FROM -
(DSN=CMS FILE
DISP=SHR -
SNODE) -
TO -
(DSN=&DSN -
DISP=(,CATLG,DELETE) -
UNIT= UNIT ID -
PNODE)
```

Supply the following parameters particular to your job site:

<i>NDM NODE</i>	= NDM Node ID for your system
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TWXX = NDM User ID for CMS' system
PASSWD = Password to access NDM at CMS
ACCTNG = Accounting Information (if required)
DATASET NAME = File to receive HCFA data transmission
CMS FILE = **APPROPRIATE DATA SET NAME**
UNIT ID = Unit Identifier for your system

The submission of this JCL will enter this job in the MTS queue. In order not to incur additional transmission line costs, the job must not run before 8:00 P.M. (EST) of the day it is submitted.

CARRIER LOCALITY/STATE LOCALITY MAP

2015 PRICING AREA		
Carrier	Locality	Locality name
10102	00	Alabama
02102	01	Alaska
03102	00	Arizona
07102	13	Arkansas
01182	26	Anaheim/Santa Ana, CA
01182	18	Los Angeles, CA
01112	03	Marin/Napa/Solano, CA
01112	07	Oakland/Berkeley, CA
01112	99	Rest of California
01182	99	Rest of California
01112	05	San Francisco, CA
01112	06	San Mateo, CA
01112	09	Santa Clara, CA
01182	17	Ventura, CA
04112	01	Colorado
13102	00	Connecticut
12202	01	DC + MD/VA Suburbs
12102	01	Delaware
09102	03	Fort Lauderdale, FL
09102	04	Miami, FL
09102	99	Rest of Florida
10202	01	Atlanta, GA
10202	99	Rest of Georgia
01212	01	Hawaii/Guam
02202	00	Idaho
06102	16	Chicago, IL
06102	12	East St. Louis, IL
06102	99	Rest of Illinois
06102	15	Suburban Chicago, IL
08102	00	Indiana
05102	00	Iowa
05202	00	Kansas
15102	00	Kentucky
07202	01	New Orleans, LA
07202	99	Rest of Louisiana
14112	99	Rest of Maine
14112	03	Southern Maine

12302	01	Baltimore/Surrounding Counties, MD
12302	99	Rest of Maryland
14202	01	Metropolitan Boston
14202	99	Rest of Massachusetts
08202	01	Detroit, MI
08202	99	Rest of Michigan
06202	00	Minnesota
07302	00	Mississippi
05302	02	Metropolitan Kansas City, MO
05302	01	Metropolitan St Louis, MO
05302	99	Rest of Missouri
03202	01	Montana
05402	00	Nebraska
01312	00	Nevada
14312	40	New Hampshire
12402	01	Northern NJ
12402	99	Rest of New Jersey
04212	05	New Mexico
13202	01	Manhattan, NY
13202	02	NYC Suburbs/Long I., NY
13202	03	Poughkeepsie /N NYC Suburbs, NY
13292	04	Queens, NY
13282	99	Rest of New York
11502	00	North Carolina
03302	01	North Dakota
15202	00	Ohio
04312	00	Oklahoma
02302	01	Portland, OR
02302	99	Rest of Oregon
12502	01	Metropolitan Philadelphia, PA
12502	99	Rest of Pennsylvania
09202	20	Puerto Rico
14412	01	Rhode Island
11202	01	South Carolina
03402	02	South Dakota
10302	35	Tennessee
04412	31	Austin, TX
04412	20	Beaumont, TX
04412	09	Brazoria, TX
04412	11	Dallas, TX
04412	28	Fort Worth, TX
04412	15	Galveston, TX
04412	18	Houston, TX
04412	99	Rest of Texas
03502	09	Utah

14512	50	Vermont
09302	50	Virgin Islands
11302	00	Virginia
02402	99	Rest of Washington
02402	02	Seattle (King Cnty), WA
11402	16	West Virginia
06302	00	Wisconsin
03602	21	Wyoming

*Payment locality is serviced by two B/MACs.