

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-04 Medicare Claims Processing</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 11013</b>	<b>Date: October 1, 2021</b>
	<b>Change Request 12468</b>

**SUBJECT: Changes to the Laboratory National Coverage Determination (NCD) Edit Software for January 2022**

**I. SUMMARY OF CHANGES:** This Change Request (CR) announces the changes that will be included in the January 2022 quarterly release of the edit module for clinical diagnostic laboratory services. This Recurring Update Notification applies to Chapter 16, Section 120.2, Publication 100-04.

**EFFECTIVE DATE: January 1, 2022 - Unless noted differently in requirements.**

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

**IMPLEMENTATION DATE: January 3, 2022**

*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.

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
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 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**























Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	1/1/2021 to the list of ICD-10-CM codes that are denied by Medicare for the Hepatitis Panel/Acute Hepatitis Panel (190.33) NCD.									
12468.25	The module developer shall add ICD-10 CM codes provided in the link effective 10/1/2021 to the list of ICD-10-CM codes that are covered by Medicare for the Fecal Occult Blood Test (190.34) NCD.									Fu Associates
12468.25.1	The module developer shall add the ICD-10 CM code provided in the link effective 1/1/2021 to the list of ICD-10-CM codes that are denied by Medicare for the Fecal Occult Blood Test (190.34) NCD.									Fu Associates
12468.25.2	The module developer shall add the ICD-10 CM code provided in the link effective 1/1/2021 to the list of ICD-10-CM codes that are covered by Medicare for the Fecal Occult Blood Test (190.34) NCD.									Fu Associates
12468.26	The module developer shall provide the revised software as a mainframe (i.e., load module) to CMS to be distributed to the Shared System Maintainers (SSMs).									Fu Associates
12468.27	The SSMs shall install the edit module after testing and distribute it to the contractors as part					X	X			

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	of their routine release.									
12468.28	Contractors shall adjust claims brought to their attention. Contractors do not need to search their files to either retract payment for claims already paid or retroactively pay claims.	X	X							

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
12468.29	Medicare Learning Network® (MLN): CMS will market provider education content through the MLN Connects® newsletter shortly after CMS releases the CR. MACs shall follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 instructions for distributing the MLN Connects newsletter information to providers and link to relevant information on your website. You may supplement MLN content with your local information after we release the MLN Connects newsletter. Subscribe to the “MLN Connects” listserv to get MLN content notifications. You don’t need to separately track and report MLN content releases when you distribute MLN Connects newsletter content per the manual section referenced above.	X	X			

### 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: N/A**

### V. CONTACTS

**Pre-Implementation Contact(s):** Wanda Belle, 410-786-7491 or wanda.belle@cms.hhs.gov , Patricia Brocato-Simons, 410-786-0261 or patricia.brocatosimons@cms.hhs.gov , Kimberly Long, 410-786-5702 or kimberly.long@cms.hhs.gov

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

## **VI. FUNDING**

### **Section A: For Medicare Administrative Contractors (MACs):**

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**ATTACHMENTS: 0**