CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 13461	Date: November 14, 2025
	Change Request 14222

SUBJECT: Instructions for Retrieving the January 2026 Opioid Treatment Program (OTP) Payment **Rates File**

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to provide instructions for the Medicare contractors to download and implement the annual OTP update file. In addition, Medicare contractors will need to be prepared to implement up to three revised OTP payment files for the January update in the event that technical errors are discovered or any other corrections are required. This recurring update notification applies to Pub. 100-04 chapter 39, section 30.

EFFECTIVE DATE: January 1, 2026

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

IMPLEMENTATION DATE: January 5, 2026

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 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

Attachment - Recurring Update Notification

Pub. 100-04	Transmittal: 13461	Date: November 14, 2025	Change Request: 14222
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SUBJECT: Instructions for Retrieving the January 2026 Opioid Treatment Program (OTP) Payment Rates File

EFFECTIVE DATE: January 1, 2026

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

IMPLEMENTATION DATE: January 5, 2026

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to provide instructions for the Medicare contractors to download and implement the annual OTP update file. In addition, Medicare contractors will need to be prepared to implement up to three revised OTP payment files for the January update in the event that technical errors are discovered or any other corrections are required. This recurring update notification applies to Pub. 100-04 chapter 39, section 30.

II. GENERAL INFORMATION

- **A. Background:** This CR provides the Medicare contractors with instructions for downloading, testing, and implementation of the annual OTP update. In addition, Medicare contractors will need to be prepared to implement up to three revised January OTP payment files in the event that technical errors are discovered or any other corrections are required.
- **B.** Policy: Section 2005 of the Substance Use-Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities (SUPPORT) Act requires that the payment rates for OTPs be updated on an annual basis. All of the codes in the OTP file can be billed by specialty D5 (Opioid Treatment Program). The OTP file will reflect all current allowable codes and reflect any newly added codes for 2026 dates of service. Codes deleted from the OTP list for 2026 dates of service have been removed from the 2026 OTP file.

III. BUSINESS REQUIREMENTS TABLE

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

Numb er	Requirement	Re	Responsibility							
		A/B MAC		A/B MAC DM E			Shared- Maint	Other		
		A	В	HH H	MA C	FIS S	MC S	VM S	CW F	
14222.	Medicare contractors shall download the 2026 OTP payment file and/or data from the cloud service around November 1, 2025, or after. Note: The 2026 OTP payment mainframe file will be provided as a back-up to the data in the cloud service.	X	X							Hybri d Cloud Data Center (HCD C), PCS

Numb er	Requirement	Responsibility								
		A/B MAC		IAC DM Shared-System E Maintainers					Other	
		A	В	HH H	MA C	FIS S	MC S	VM S	CW F	
	Note: For Part A, the FISS system will compare the mainframe files with the Cloud Data.									
	Note: In the event of unexpected circumstances or issues, CMS will provide further instructions to the MACs and Data Centers (DCs) via email to load the Mainframe Files.									
14222. 1.1	The CMS shall notify the contractors when the 2026 OTP payment file and data in the cloud service is available for downloading, along with the mainframe file name, through an e-mail notification via the Part A and Part B Functional Workgroups as soon as the 2026 Physician Fee Schedule (PFS) final rule goes on display (around November 1, 2025).									CMS, PCS
14222. 1.2	Contractors shall post the following link on their websites as soon as possible, but no later than 10 business days after receipt of the files: https://www.cms.gov/medicare/payment/opioid-treatment-program/billing-payment	X	X							
	NOTE: This link to the CMS website contains information about billing and payment for OTPs, including links to the national and locality-adjusted fees.									
14222.	In the event that corrections are required and a replacement 2026 OTP payment file is issued or data in the cloud is updated, contractors shall be prepared to retrieve up to three replacement OTP payment files from the CMS mainframe and/or three quarters of data from the cloud service.	X	X							Hybri d Cloud Data Center (HCD C), PCS
14222. 2.1	The CMS shall notify the contractors when the replacement file and/or data in the cloud service is available for retrieval, along with the mainframe file name, through an e-mail notification via									CMS, PCS

Numb er	Requirement	Responsibility											
		A/B MAC		A/B MAC		A/B MAC I		MAC DM E					Other
		A	В	HH H	MA C	FIS S	MC S	VM S	CW F				
	the Part A and Part B Functional Workgroups.												
14222. 2.2	Contractors shall be ready to implement any replacement files and/or updated data from the cloud service no later than the January 5, 2026, implementation date of this CR, unless otherwise directed by CMS. (NOTE: Replacement files shall not be issued under this CR too far into January, when claims are no longer routinely being held for the January	X	X							CMS			
	Release. Any revisions after then will need a separate instruction.)												
14222.	Contractors shall notify CMS of successful receipt of the file described in requirement 14222.1 and requirement 14222.2 when a replacement file is issued, via e-mail to price_file_receipt@cms.hhs.gov, stating the name of the file received (e.g., CLAB, Average Sales Price (ASP), etc.), and the entity for which it was received (i.e., include states, workload numbers, quarter, and if Part A, Part B, or both).	X	X							PCS			
14222.	For claims with dates of service on and after January 1, 2026, A/B MACs shall implement all applicable instructions, including those pertaining to the D5 specialty code, beneficiary coinsurance, and Place of Service (POS) code 58 to any new Healthcare Common Procedure Coding System (HCPCS) codes included on the OTP payment file, as outlined in CR 11353.		X										
14222. 5	Contractors shall add new OTP HCPCS codes to any applicable PARMs.	X											

IV. PROVIDER EDUCATION

Impacted Contractors: None

V. 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:
	N/A

Section B: All other recommendations and supporting information: N/A

VI. CONTACTS

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

VII. 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: 0