CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 4471	Date: December 6, 2019
	Change Request 11550

SUBJECT: April 2020 Healthcare Common Procedure Coding System (HCPCS) Quarterly Update Reminder

I. SUMMARY OF CHANGES: The complete HCPCS file is updated and released quarterly to the Medicare contractors. The file contains existing, new, revised and discontinued HCPCS codes for the April 2020 quarter. Contractors must download the file via the CMS mainframe in March 2020. The recurring update notification applies to chapter 23, section 20 of the Medicare Claims Processing Manual.

EFFECTIVE DATE: April 1, 2020

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

IMPLEMENTATION DATE: April 6, 2020

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

SUBJECT: April 2020 Healthcare Common Procedure Coding System (HCPCS) Quarterly Update Reminder

EFFECTIVE DATE: April 1, 2020

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IMPLEMENTATION DATE: April 6, 2020

I. GENERAL INFORMATION

A. Background: Medicare providers submitting claims to Medicare contractors for Part B services use a HCPCS code to indicate the service that was rendered. The updated HCPCS file containing the HCPCS codes is released quarterly to Medicare contractors via the CMS mainframe telecommunications system.

If any adjustments/updates are needed, the contractors shall be notified by an email from CMS to the CMS Functional Workgroups. The email will include instructions to implement the adjustments/updates.

The alphanumeric index and the table of drugs will also be posted to the CMS website in March. The website address is https://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/Alpha-Numeric-HCPCS.html

B. Policy: There is no new policy associated with this change request, other than the fact that this update reminder is now issued quarterly beginning in April 2020. Previously, the change request was issued on an annual basis.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
			A/B	,	D		Sha	red-		Other
		N	/IA	\mathbb{C}	M		Sys	tem		
					Е	M	aint	aine	ers	
		A	В	Н		F	M	V	C	
				Н		I	C	M	W	
				Н		S	S	S	F	
					C	S				
11550.1	Medicare contractors shall download the April 2020 HCPCS update from the CMS mainframe. Contractors will be notified by an email from the CMS Functional Workgroups when the file is available for downloading in mid-February 2020. The filename is as follows: P@HCP.@AAA2360.HCPC2020.CONTR.Q2 NOTE: The new HCPCS update is effective for dates of service on or after April 1, 2020, unless otherwise	X	X	X	X	X	X		X	PDAC, VDC

Number	Requirement Responsibility										
Number	Kequirement						C1			0.1	
		A/B		D		~	red-		Other		
		N	MAC		M	•					
					E	M	aint	aine	ers		
		Α	В	Н		F	M	V	C		
				Н	M	I	C	M	W		
				Н	A	S	S	S	F		
					C	S					
11550.2	Contractors shall notify CMS of successful receipt via	X	X	X	X	X	X		X	VDC	
	email to price_file_receipt@cms.hhs.gov stating the										
	name of the file received and the entity for which it										
	was received (i.e., include states, contractor numbers,										
	quarter, and if Part A, Part B, or both).										
	4.00.001, 0.00.001.00.001.00.000.001.000.000.000.										
11550.3	If any adjustments/updates are needed prior to the	X	X	X	X	X	X		X	CMS, PDAC,	
	Change Request implementation date, such as a									VDC	
	corrected HCPCS file, CMS shall notify the										
	contractors by an email from CMS to the CMS										
	Functional Workgroup. The email shall instruct the										
	contractors what action(s) to take to implement the										
	adjustments/updates. This could occur multiple times										
	prior to the Change Request implementation date as										
	needed and as the adjustments/updates are known.										
	needed and as the adjustments/updates are known.										
11550.3.1	Contractors shall implement the adjustments/updates	X	X	X	X	X	X		X	PDAC, VDC	
	to the HCPCS file in accordance with the instructions									, -	
	CMS has sent to the CMS Functional Workgroup.										
	care and some to the care a menoral and the same										
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III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	spo	nsil	bilit	\mathbf{y}
		-	A/B		D	C
		N	/IAC	7)	M	Е
					Е	D
		Α	В	Н		Ι
				Н	M	
				Н	A	
					C	
	None					

IV. SUPPORTING INFORMATION

Section A: Recommendations and supporting information associated with listed requirements:

[&]quot;Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
11550.1	CR 11538

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

V. CONTACTS

 $\label{lem:pre-Implementation Contact} \textbf{Pre-Implementation Contact(s):} \ \textbf{Rebecca Zeller}, \ \textbf{rebecca.zeller@cms.hhs.gov}, \ \textbf{Thomas Dorsey}, \ \textbf{thomas.dorsey@cms.hhs.gov}$

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: 0