CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 3935	Date: December 19, 2017
	Change Request 10302

Transmittal 3865, dated September 22, 2017, is being rescinded and replaced by Transmittal 3935, dated, December 19, 2017, to correct the file name in business requirement 10302.1. All other information remains the same.

SUBJECT: Instructions for Retrieving the 2018 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 MACs to adjudicate Part B fee schedule paid claims. The attached Recurring Update Notification applies to chapter 23 section 40.

EFFECTIVE DATE: January 1, 2018

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

IMPLEMENTATION DATE: January 2, 2018

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: 3935 Date: December 19, 2017 Change Request: 10302

Transmittal 3865, dated September 22, 2017, is being rescinded and replaced by Transmittal 3935, dated, December 19, 2017, to correct the file name in business requirement 10302.1. All other information remains the same.

SUBJECT: Instructions for Retrieving the 2018 Pricing and HCPCS Data Files through CMS' Mainframe Telecommunications Systems

EFFECTIVE DATE: January 1, 2018

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

IMPLEMENTATION DATE: January 2, 2018

I. GENERAL INFORMATION

- **A. Background:** Attached are the instructions for retrieving the 2018 Pricing and HCPCS Data Files through CMS' Mainframe Telecommunications System (MTS). These instructions pertain to institutional abstract files only, so there is no A/B MAC (Part B) 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, 2018.
- **B.** Policy: This Recurring Update Notification replaces CR 9860, dated October 31, 2016.

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	R	Responsibility								
			A/B		D	Shared-			-	Other	
]	MAC		M	System			1		
					Е	Maintainers			ers		
		A	В	Н		F	M	V	С		
				Н	M	Ι	C	M	W		
				Н	A	S	S	S	F		
					C	S					

Number	Requirement	Responsibility								
			A/B		D		Sha			Other
		l	MA(J	M E		Sys laint			
		Α	В	Н		F		V		
				Н		I	С	M	W	
				Н	A C	S	S	S	F	
10302.1	Medicare contractors shall download the 2018 HCPCS file with the following name from the CMS MTS on or after November 1, 2017.	X								VDC
	P@HCP.@AAA2360.HCPC2018.CONTR									
	CMS will provide the date of retrieval via separate email communication.									
10302.2	Medicare contractors shall download the 2018 fee amounts for clinical diagnostic laboratory services with the following name from the CMS MTS on or after November 1, 2017 after 8:00 PM EST:	X								VDC
	MU00.@BF12394.CLAB.CY18.V1115.FI									
10302.3	Medicare contractors shall download the 2018 fee amounts for DMEPOS with the following name from the CMS MTS on or after November 21, 2017 after 8:00 PM EST:	X		X						VDC
	MU00.@BF12393.DMEPOS.T180101.V1201.FI									
10302.3.1	MACs shall retrieve from the following DMEPOS categories as appropriate:	X								
	OS, IL, P/O SC, and S/D									
10302.3.2	Medicare contractors shall retrieve as appropriate from all DMEPOS categories except T/S.	X		X						
10302.4	Medicare contractors shall download the 2018 physician fee schedule abstract fee amounts for outpatient rehabilitation and CORF services with the following name from the CMS MTS on or after November 1, 2017 after 8:00 PM EST:	X								VDC
	MU00.@BF12390.MPFS.CY18.ABSTR.V1101.FI									

Number	Requirement	Re	espe	onsi	bili	ty				
			A/B		D		Sha			Other
		N	MAC		,					
		Α	В	Н	Е	F			C	
		A	В	Н	M	I				
				Н	Α		S	S		
					C	S				
10202.5	Medicare contractors shall download the 2018 fee	X		X						VDC
10302.5	amounts for Part B hospice claims, outpatient rehabilitation, CORF, SNF and CAH services with the following name from the CMS MTS on or after November 1, 2017 after 8:00 PM EST:	A		A						VDC
	MU00.@BF12390.MPFS.CY18.HHH.V1101.FI									
10302.5.1	Medicare contractors shall download the 2018 Physician Fee Schedule Payment Policy Indicator file for Method II CAH professional services with the following name from the CMS MTS on or after November 1, 2017 after 8:00 PM EST:	X								VDC
	MU00.@BF12390.MPFS.CY18.PAYIND.V1101.FI									
10302.6	Medicare contractors shall download the 2018 fee amounts for the new digital mammography technology and regular screening mammography services with the following name from the CMS MTS on or after November 1, 2017 after 8:00 PM EST:	X								VDC
	MU00.@BF12390.MPFS.CY18.MAMMO.V1101.FI									
10302.7	Medicare contractors shall download the 2018 fee amounts for Part B SNF claims with the following name from the CMS MTS on or after November 1, 2017 after 8:00 PM EST:	X								VDC
	MU00.@BF12390.MPFS.CY18.SNF.V1101.FI									
10302.8	Medicare contractors shall download the 2018 Anesthesia conversion factor fee amounts for CAH services from the CMS MTS on or after November 1, 2017 after 8:00 PM EST:	X								VDC
	NOTE: The data set name for this file will be provided									

Number	Requirement	Re	espe	onsi	bili	ty				
			A/B		D		Sha		Other	
		N	MAC		M		System laintainers			
		_			E					
		A	В	H H	М	F I			C W	
				Н	A		S	S		
				11	C	S				
	in email from OIS later.									
10302.9	Medicare contractors shall download the 2018	X								VDC
	ambulance fee amounts by locality for all localities									
	with the following name from the CMS MTS on									
	November 15, 2017 after 8:00 PM EST:									
	MU00.@AAA2390.AMBFS.FINAL.CY2018.V1115									
	11000. @ AAA2370.AMD13.111VAL.C 12010. V 1113									
10302.10	Medicare contractors shall refer to the locality	X		X						
	structure listed in the file below to identify the carrier									
	number associated with the locality name and number.									
	http://www.cms.gov/Medicare/Medicare-Fee-for-									
	Service-Payment/PhysicianFeeSched/PFS-Relative-									
	Value-Files.html									
10302.11	Medicare contractors shall treat pricing data	X		X						
	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 2018.)									
10302.12	Medicare contractors shall price claims with dates of	X		X						
	service on and after January 1, 2018, with codes and									
	fee rates furnished in the 2018 files.									
10302.13	For each file referenced above, notification of	X	 	X						
	successful receipt shall be sent via e-mail to									
	<pre>price_file_receipt@cms.hhs.gov stating the name of</pre>									
	the file received and the entity for which it was									
	received (fiscal intermediary name and number).									
10302.14	Medicare contractors shall compare selected contractor	X								
	priced imaging service fees to the outpatient PPS									
	amount in their system for the same service and load									
	the lower amount for payment.									

III. PROVIDER EDUCATION TABLE

Number	Requirement	Re	espo	onsi	bilit	ty
			A/B MA(D M E M A	D I
	None					

IV. SUPPORTING INFORMATION

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

[&]quot;Should" denotes a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	
	N/A

Section B: All other recommendations and supporting information: The record layouts can be found in Pub. 100-04 Chapter 23, sections 40 through 50.

V. CONTACTS

 $\label{lem:contact} \textbf{Pre-Implementation Contact}(s) \textbf{:} \ \ \textbf{Wil Gehne}, \ \ \textbf{Wilfried.Gehne@cms.hhs.gov} \ \ \textbf{,} \ \ \textbf{Shauntari.Cheely@cms.hhs.gov} \ \ \textbf{,} \ \ \textbf{Shauntari.Cheely@cms.hhs.gov} \ \ \textbf{,} \ \ \textbf{Shauntari.Cheely@cms.hhs.gov} \ \ \ \textbf{,} \ \ \textbf{Shauntari.Cheely@cms.hhs.gov} \ \ \ \textbf{,} \ \ \textbf{Shauntari.Cheely@cms.hhs.gov} \ \ \ \textbf{,} \ \ \textbf{Shauntari.Cheely.gov} \ \ \ \textbf{,} \ \ \ \textbf{,} \ \ \textbf{,}$

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

TTACHMENT A

INSTRUCTIONS FOR RECEIVING 2018 PART B PRICING FILES VIA CMS' MAINFRAME TELECOMMUNICATIONS SYSTEM

Listed below are instructions for receiving the 2018 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/B 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 2018 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=*
       DD *
//SYSIN
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

NDM.PROCESS.LIBRARY= NDM Process Library for your systemNDM.MESSAGE.LIBRARY= NDM Message Library for your systemNDM.NETWORK.MAP= NDM Network Map File for your system

NDM USERID= NDM Userid for your systemNDM NODE= NDM Node ID for your system

PROCESS LIBRARY MEMBER = 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 2018 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=UNITID -
PNODE)
```

Supply the following parameters particular to your job site:

```
NDM \ NODE = NDM Node ID for your system
```

TWXX= NDM User ID for CMS' systemPASSWD= Password to access NDM at CMSACCTNG= Accounting Information (if required)DATASET NAME= File to receive HCFA data transmissionCMS FILE= APPROPRIATE DATA SET NAMEUNIT 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.