| CMS Manual System                     | Department of Health & Human Services (DHHS)      |  |  |  |  |
|---------------------------------------|---|--|--|--|--|
| Pub 100-04 Medicare Claims Processing | Centers for Medicare &<br>Medicaid Services (CMS) |  |  |  |  |
| Transmittal 3946                      | Date: January 5, 2018                             |  |  |  |  |
|                                       | <b>Change Request 10429</b>                       |  |  |  |  |

SUBJECT: File Conversions Related to the Spanish Translation of the Healthcare Common Procedure Coding System (HCPCS) Descriptions

**I. SUMMARY OF CHANGES:** This Change Request (CR) provides direction for the contractors to perform any necessary file conversions related to the Spanish translation of the Healthcare Common Procedure Coding System (HCPCS) descriptions provided by First Coast Service Options (FCSO) on a quarterly basis. This recurring update notification applies to Chapter 21 Section 20.

EFFECTIVE DATE: April 1, 2018 - or after, the effective date is the processing date

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

**IMPLEMENTATION DATE: April 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: 3946 Date: January 5, 2018 Change Request: 10429

SUBJECT: File Conversions Related to the Spanish Translation of the Healthcare Common Procedure Coding System (HCPCS) Descriptions

EFFECTIVE DATE: April 1, 2018 - or after, the effective date is the processing date

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

**IMPLEMENTATION DATE: April 2, 2018** 

#### I. GENERAL INFORMATION

- **A. Background:** This Change Request (CR) provides direction for the contractors to perform any necessary file conversions related to the Spanish translation of the Healthcare Common Procedure Coding System (HCPCS) descriptions provided by First Coast Service Options (FCSO) on a quarterly basis.
- **B.** Policy: CMS provides contractors with updates to the Spanish HCPCS descriptions on a quarterly basis.

# II. BUSINESS REQUIREMENTS TABLE

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

| Number Rec   | equirement   | Responsibility |      |   |         |   |      |      |       |            |  |
|--|--|----------------|------|---|---------|---|------|------|-------|------------|--|
|  |  | A/B            |      | D | Shared- |   |      |      | Other |            |  |
|  |  | N              | /IAC |   | M       |   | Sys  | tem  |       |            |  |
|  |  |                |      |   | Е       | M | aint | aine | ers   |            |  |
|  |  | A              | В    | Н |         | F | M    | V    | C     |            |  |
|  |  |                |      | Н |         | _ | C    | M    | W     |            |  |
|  |  |                |      | Н | A       | S | S    | S    | F     |            |  |
|  |  |                |      |   | C       | S |      |      |       |            |  |
| First Spate perfection is a Correct (VI spread quate character). | rest Coast Service Options (FCSO) that contain the anish translations of the HCPCS descriptions and rform any necessary file conversions so that this file available to the Medicare Administrative ontractors (MACs) at the Virtual Data Centers DCs) for processing. This Spanish translation readsheet will include the new HCPCS added for the arter. The spreadsheet includes only add-ons and anges that were translated. It is not a full file blacement. | X              | X    | X | X       | X |      | X    |       | IOCE, VDCs |  |

# III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility |
|--------|-------------|----------------|
|        |             |                |

|      |   | A/B<br>MA( |              | D | C |
|------|---|------------|--------------|---|---|
|      | I | MA(        | $\mathbb{C}$ | M | Е |
|      |   |            |              | Е | D |
|      | A | В          | Н            |   | I |
|      |   |            | Н            | M |   |
|      |   |            | Н            | Α |   |
|      |   |            |              | C |   |
| None |   |            |              |   |   |

## IV. SUPPORTING INFORMATION

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

<sup>&</sup>quot;Should" denotes a recommendation.

| X-Ref       | Recommendations or other supporting information: |
|-------------|--|
| Requirement |  |
| Number      |  |

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

## V. CONTACTS

**Pre-Implementation Contact(s):** Scott Schiller, 410-786-4514 or scott.schiller@cms.hhs.gov , Cindy Ardissone, 410-786-7410 or cynthia.ardissone@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**