CMS Manual System	Department of Health & Human Services (DHHS)		
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)		
Transmittal 10025	Date: April 1, 2020		
	Change Request 11656		

Transmittal 2433, dated February 7, 2020, is being rescinded and replaced by Transmittal 10025, dated, April 1, 2020, to add the new diagnosis code for the 2019 Novel Coronavirus (COVID-19) to the background, revise business requirement 11656.1 and to change the implementation date to April 6, 2020. All other information remains the same.

SUBJECT: Update to the Home Health Grouper for New Diagnosis Codes for Vaping Related Disorder and COVID-19.

I. SUMMARY OF CHANGES: This Change Request updates the version of the Home Health Grouper software used in Original Medicare claims processing. The new version includes the diagnosis codes recently created for vaping related disorder and for the 2019 Novel Coronavirus (COVID-19).

FFECTIVE 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	

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:

One Time Notification

Attachment - One-Time Notification

Pub. 100-20 Transmittal: 10025 Date: April 1, 2020 Change Request: 11656

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SUBJECT: Update to the Home Health Grouper for New Diagnosis Codes for Vaping Related Disorder and COVID-19.

EFFECTIVE DATE: April 1, 2020

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IMPLEMENTATION DATE: April 6, 2020

I. GENERAL INFORMATION

A. Background: In response to recent occurrences of vaping related disorders, the Centers for Disease Control and Prevention's National Center for Health Statistics (CDC/NCHS) is implementing a new diagnosis code into the International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) for reporting vaping-related disorder effective April 1, 2020. The code is U07.0, Vaping-related disorder and will correspond to the clinical grouping MMTA, Respiratory.

Additionally, on March 11, 2020, the Novel Coronavirus Disease, COVID-19, was declared a pandemic by the World Health Organization. On March 13, 2020, a national emergency was declared in the United States concerning the COVID-19 Outbreak. Given these developments, and the urgent need to capture the reporting of this condition in our nation's claims and surveillance data, the Centers for Disease Control (CDC), under the National Emergencies Act Section 201 and 301, is announcing a change in the effective date of new diagnosis code U07.1, COVID-19, from October 1, 2020 to April 1, 2020. Code U07.1 will correspond to the clinical grouping MMTA, Respiratory, and will receive the low comorbidity adjustment.

The Grouper Contractor, 3M Health Information Systems (3M-HIS), developed the new HH Grouper, Version 01.1.20, software package to accommodate the new codes, effective for claim From dates on or after April 1, 2020. The HH Grouper assigns each claim into a Home Health Resource Group (HHRG) based on the reported claim and patient assessment information.

The revised HH Grouper and related documentation will be located on the CMS webpage at https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/HomeHealthPPS/CaseMixGrouperSoftware.

B. Policy: There is no policy change. Current instructions regarding the HH Grouper are available in the Claims Processing Manual Publication (Pub.) 100-04, chapter 10, section 80.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility													
		A/B MAC							MAC			Sys	red- tem aine		Other
		A	В	H H H	M A C	F I S S	M C S	V M S	C W F						
11656.1	The contractor shall process HH claims (Type of Bill 032x other than 322 and 320) with From dates on and after April 1, 2020 using HH Grouper version 01.1.20 software.					X									
11656.2	The contractor shall create documentation to perform the tasks necessary for future recurring updates to the HH Groupers, to serve as the basis for new recurring CR Rxxx86Q. The document shall be posted to ECHIMP.					X									
11656.3	The contractor shall estimate the recurring hours and post them in the estimates attachment section of ECHIMP by 4/01/2020.					X									

III. PROVIDER EDUCATION TABLE

Number	Requirement		esponsibility			
			A/B MA(D M E	C E D	
		A	В	H H H	M A C	Ι
11656.4	MLN Article: CMS will make available an MLN Matters provider education article that will be marketed through the MLN Connects weekly newsletter shortly after the CR is released. MACs shall follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1, instructions for distributing MLN Connects information to providers, posting the article or a direct link to the article on your website, and including the article or a direct link to the article in your bulletin or newsletter. You may supplement MLN Matters articles with localized information benefiting your provider community in billing and administering the Medicare program correctly. Subscribe to the "MLN Matters" listserv to get article release notifications, or review them in the MLN Connects weekly newsletter.			X		

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:
11656.2	The first recurring update to the HH Grouper will occur in October 2020. Updates will always occur in October each year, to reflect changes in the ICD-10 codeset. Additional updates may occur in January to reflect HH case-mix system changes and other quarters to reflect off-cycle ICD-10 changes.

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

V. CONTACTS

Pre-Implementation Contact(s): Carla Douglas, carla.douglas@cms.hhs.gov , Wil Gehne, wilfried.gehne@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