

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 11170	Date: December 22, 2021
	Change Request 12575

SUBJECT: Changes to the Laboratory National Coverage Determination (NCD) Edit Software for April 2022

I. SUMMARY OF CHANGES: This Change Request (CR) announces the changes that will be included in the April 2022 quarterly release of the edit module for clinical diagnostic laboratory services. This Recurring Update Notification applies to Chapter 16, Section 120.2, Publication 100-04.

EFFECTIVE DATE: April 1, 2022 - Unless noted differently in requirements.

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

IMPLEMENTATION DATE: April 4, 2022

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

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared- System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
12575.5.1	The module developer shall delete ICD-10 CM codes provided in the link effective 9/30/2021 from the list of ICD-10-CM codes that are denied by Medicare for the Partial Thromboplastin Time (PTT) (190.16) NCD.										
12575.6	The module developer shall add ICD-10 CM codes provided in the link effective 10/1/2021 to the list of ICD-10-CM codes that are denied by Medicare for the Prothrombin Time (PT) (190.17) NCD.										Fu Associates
12575.6.1	The module developer shall delete ICD-10 CM codes provided in the link effective 9/30/2021 from the list of ICD-10-CM codes that are denied by Medicare for the Prothrombin Time (PT) (190.17) NCD.										Fu Associates
12575.7	The module developer shall add ICD-10 CM codes provided in the link effective 10/1/2021 to the list of ICD-10-CM codes that are denied by Medicare for the Serum Iron Studies (190.18) NCD.										Fu Associates
12575.7.1	The module developer shall delete ICD-10 CM cods provided in the link effective 9/30/2021 from the list of ICD-10-CM codes that are denied by Medicare for the Serum Iron Studies (190.18) NCD.										Fu Associates
12575.8	The module developer shall add ICD-10 CM codes provided in the link effective 10/1/2021 to the list of ICD-10-CM codes that are denied by Medicare for the Collagen Crosslinks, Any Method (190.19) NCD.										Fu Associates
12575.8.1	The module developer shall delete ICD-10 CM codes provided in the link effective 9/30/2021 from the list of ICD-10-CM codes that are denied by Medicare for the Collagen Crosslinks, Any Method (190.19) NCD.										Fu Associates
12575.9	The module developer shall add the ICD-10 CM code provided in the link effective 10/1/2021 to the list of ICD-10-CM codes that are covered by Medicare for the Blood Glucose Testing (190.20A) NCD.										Fu Associates
12575.9.1	The module developer shall add ICD-10 CM codes provided in the link effective 10/1/2021 to the list of ICD-10-CM codes that are denied by Medicare for the Blood Glucose Testing (190.20A) NCD.										Fu Associates

Number	Requirement	Responsibility									
		A/B MAC			D M E M A C	Shared- System Maintainers				Other	
		A	B	H H H		F I S S	M C S	V M S	C W F		
12575.13	The module developer shall add ICD-10 CM codes provided in the link effective 10/1/2021 to the list of ICD-10-CM codes that are denied by Medicare for the Lipids Testing (190.23A) NCD.										Fu Associates
12575.13.1	The module developer shall delete ICD-10 CM codes provided in the link effective 9/30/2021 from the list of ICD-10-CM codes that are denied by Medicare for the Lipids Testing (190.23A) NCD.										Fu Associates
12575.14	The module developer shall add ICD-10 CM codes provided in the link effective 10/1/2021 to the list of ICD-10-CM codes that are denied by Medicare for the Lipids Testing (190.23B) NCD.										Fu Associates
12575.14.1	The module developer shall delete ICD-10 CM codes provided in the link effective 9/30/2021 from the list of ICD-10-CM codes that are denied by Medicare for the Lipids Testing (190.23B) NCD.										Fu Associates
12575.15	The module developer shall add ICD-10 CM codes provided in the link effective 10/1/2021 to the list of ICD-10-CM codes that are denied by Medicare for the Digoxin Therapeutic Drug Assay (190.24) NCD.										Fu Associates
12575.15.1	The module developer shall delete ICD-10 CM codes provided in the link effective 9/30/2021 from the list of ICD-10-CM codes that are denied by Medicare for the Digoxin Therapeutic Drug Assay (190.24) NCD.										Fu Associates
12575.16	The module developer shall add ICD-10 CM codes provided in the link effective 10/1/2021 to the list of ICD-10-CM codes that are denied by Medicare for the Alpha-fetoprotein (190.25) NCD.										Fu Associates
12575.16.1	The module developer shall delete ICD-10 CM codes provided in the link effective 9/30/2021 from the list of ICD-10-CM codes that are denied by Medicare for the Alpha-fetoprotein (190.25) NCD.										Fu Associates
12575.17	The module developer shall add ICD-10 CM codes provided in the link effective 10/1/2021 to the list of ICD-10-CM codes that are denied by Medicare for the Carcinoembryonic Antigen (190.26) NCD.										Fu Associates
12575.17.1	The module developer shall delete ICD-10 CM codes provided in the link effective 9/30/2021 from the list										Fu Associates

Number	Requirement	Responsibility										
		A/B MAC			D M E	Shared-System Maintainers				Other		
		A	B	H H H		F M V C	I C M W	S S S F				
	the Fecal Occult Blood Test (190.34) NCD.											
12575.26	The module developer shall provide the revised software as a mainframe (i.e., load module) to CMS to be distributed to the Shared System Maintainers (SSMs).										Fu Associates	
12575.27	The SSMs shall install the edit module after testing and distribute it to the contractors as part of their routine release.					X	X					
12575.28	Contractors shall adjust claims brought to their attention. Contractors do not need to search their files to either retract payment for claims already paid or retroactively pay claims.	X	X									

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility						
		A/B MAC			D M E	C E D I		
		A	B	H H H			M A C	
12575.29	Medicare Learning Network® (MLN): CMS will market provider education content through the MLN Connects® newsletter shortly after CMS releases the CR. MACs shall follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 instructions for distributing the MLN Connects newsletter information to providers and link to relevant information on your website. You may supplement MLN content with your local information after we release the MLN Connects newsletter. Subscribe to the “MLN Connects” listserv to get MLN content notifications. You don’t need to separately track and report MLN content releases when you distribute MLN Connects newsletter content per the manual section referenced above.	X	X					

IV. SUPPORTING INFORMATION

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

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:
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Section B: All other recommendations and supporting information: N/A

V. CONTACTS

Pre-Implementation Contact(s): Kimberly Long, 410-786-5702 or kimberly.long@cms.hhs.gov , Wanda Belle, 410-786-7491 or wanda.belle@cms.hhs.gov , Patricia Brocato-Simons, 410-786-0261 or patricia.brocato-simons@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