

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-20 One-Time Notification	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2422	Date: January 22, 2020
	Change Request 11335

Transmittal 2408, dated December 12, 2019, is being Rescinded and Replaced by Transmittal 2422, dated, January 22, 2020 to revise business requirements 11335.3 and 11335.5 removing the reference to the HIQA/HIQH and ELGA/ELGH screens. All other information remains the same.

SUBJECT: Add Dates of Service (DOS) for Pneumococcal Pneumonia Vaccination (PPV) Health Care Procedure Code System (HCPCS) Codes (90670, 90732), and remove Next eligible dates for PPV HCPCS

I. SUMMARY OF CHANGES: This Change Request (CR) instructs CWF to send the Date of Service (DOS) for PPV HCPCS codes (90670 and 90732) in separate records to the MBD/NGD and remove the next eligible dates for PPV HCPCS codes.

EFFECTIVE DATE: April 1, 2020 - For all requirements except 11335. 8; July 1, 2020 - For requirement 11335.8

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

IMPLEMENTATION DATE: April 6, 2020 - For all requirements except 11335. 8; July 6, 2020 - For requirement 11335.8

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:

One Time Notification

Attachment - One-Time Notification

Pub. 100-20	Transmittal: 2422	Date: January 22, 2020	Change Request: 11335
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I. GENERAL INFORMATION

A. Background: HCPCS codes 90670 and 90732 are codes for PPV that are supported by eligibility transaction systems.

Currently, the CWF groups these two HCPCS codes under the “PPV” HCPCS group code and sends a single date of service on the CWF Beneficiary Master file that is passed down to Medicare Beneficiary Database (MBD). There is no logic included on the MBD extract file to differentiate between the initial vaccine (code 90670) and the second vaccine (code 90732).

For eligibility transactions, CWF processes the two codes as if they were the same code and stores the next eligible date in the one field that exists in the CWF Beneficiary Master File for PPV. This means that the date stored in this field may represent the date of the Initial dose or the second dose. The date from the CWF Beneficiary Master file is passed on to MBD on daily extract file in the XX:-PPV-DATE field. Claims processing is not impacted by this issue, only eligibility transactions.

Eligibility transactions have a need to return the PPV dates of service (DOS) as well as NPI for both of these PPV HCPCS codes (90670 and 90732) for a beneficiary, so that a provider may determine if a beneficiary is eligible for either service, or if the services have been rendered.

With this CR, Eligibility transactions shall be able to send its users PPV details for a beneficiary. This includes the historical PPV dates and NPI for each beneficiary.

B. Policy: There is no policy change associated with this CR.

II. BUSINESS REQUIREMENTS TABLE

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

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		
11335.1	CWF shall create a new Auxiliary File in HIMR to maintain 10 most recent occurrences of Dates of services and NPI information for each PPV HCPCS codes (90670 and 90732) (this applies to Institutional Outpatient, Home Health and Professional claims). NOTE: It will be Institutional NPI for Part A and Rendering NPI for Part B						X		X		
11335.2	CWF shall read full beneficiary claim history for PPV HCPCS (90670 and 90732) to get the Dates of Services for these PPV HCPCS code. NOTE: Dates of service for Terminated HCPCS codes not needed.									X	
11335.3	CWF shall send/display data in separate records for Dates of Service (DOS) and NPI of each PPV HCPCS codes (90670 and 90732) from new Auxiliary to: <ul style="list-style-type: none">Extract of MBD/NGDProvider Inquiry HUQA. NOTE: Dates of service for Terminated HCPCS codes not needed.					X				X	HETS, MBD, NGD
11335.3.1	CWF shall remove the PPV Date on physical Beneficiary Master Record (BENA/BENB in HIMR) to carry it on the new PPV Auxiliary File instead.						X			X	
11335.4	CWF shall send the full date of service including day, month and year. NOTE: full date including Day, Month, and Year is needed to meet the HIPAA X12N Guidelines.									X	HETS, MBD, NGD
11335.5	CWF shall send/display 10 most recent occurrences of Date of Service as well as NPI of each PPV HCPCS (90670 and 90732) to: <ul style="list-style-type: none">extract of MBD/NGDProvider Inquiry HUQA.					X				X	HETS, MBD, NGD
11335.5.1	CWF shall send a full refresh of the new Auxiliary file for PPV services.									X	MBD, NGD
11335.6	CWF shall not send/display Next eligible date of PPV HCPCS (90670 and 90732) to: <ul style="list-style-type: none">extract of MBD/NGD					X	X			X	HETS, MBD, NGD

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	
	<ul style="list-style-type: none">Provider Inquiry Screens HIQA/HIQH, ELGA/ELGH and HUQA.PRVN in HIMR									
11335.7	CWF shall not send/display occurrences of Date of Service of Terminated PPV HCPCS to: <ul style="list-style-type: none">extract of MBD/NGDProvider Inquiry Screens HIQA/HIQH, ELGA/ELGH and HUQA.PRVN in HIMR					X	X		X	HETS, MBD, NGD
11335.8	CWF shall create a new HICR function for the new PPV Auxiliary File with the July 2020 release.								X	CWF Host
11335.9	The contractors shall establish the connection(s), if not present, to the CWF maintainer environments and test the changes.					X	X		X	

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility					
		A/B MAC			D M E M A C	C E D I	
		A	B	H H H			
11335.10	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	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): Rupinder Singh, 4107867484 or Rupinder.Singh@cms.hhs.gov.

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR).

VI. FUNDING

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ATTACHMENTS: 0