CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1606	Date: OCTOBER 2, 2008
	Change Request 6213

Subject: Laboratory National Coverage Determination (NCD) Edit Software for October 2008

**I. SUMMARY OF CHANGES:** This transmittal applies to Chapter 16, §120.2, Pub. 100-04 and announces the changes that will be included in the October 2008 quarterly release of the edit module for clinical diagnostic laboratory services. The NCDs for clinical diagnostic laboratory services were developed by the laboratory negotiated rulemaking committee and published a final rule on November 23, 2001. Nationally uniform software was developed and incorporated in the shared systems so that laboratory claims subject to one of the 23 NCDs were processed uniformly throughout the nation effective January 1, 2003.

**New / Revised Material** 

Effective Date: October 1, 2008

Implementation Date: October 6, 2008

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:

SECTION A: For Fiscal Intermediaries and Carriers:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their operating budgets.

SECTION B: 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**

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

## **Attachment – Recurring Update Notification**

Pub. 100-04 Transmittal: 1606 Date: October 2, 2008 Change Request: 6213

SUBJECT: Laboratory National Coverage Determination (NCD) Edit Software for October 2008

Effective Date: October 1, 2008

**Implementation Date:** October 6, 2008

## I. GENERAL INFORMATION

**A. Background:** This transmittal announces the changes that will be included in the October 2008 quarterly release of the edit module for clinical diagnostic laboratory services. The NCDs for clinical diagnostic laboratory services were developed by the laboratory negotiated rulemaking committee and published a final rule on November 23, 2001. Nationally uniform software was developed and incorporated in the shared systems so that laboratory claims subject to one of the 23 NCDs were processed uniformly throughout the nation effective January 1, 2003.

**B. Policy:** In accordance with Chapter 16, §120.2, Pub. 100-04, the laboratory edit module is updated quarterly as necessary to reflect ministerial coding updates and substantive changes to the NCDs developed through the NCD process. The changes are a result of coding analysis decisions developed under the procedures for maintenance of codes in the negotiated NCDs and biannual updates of the ICD-9-CM codes. This instruction communicates requirements to shared system maintainers (SSMs) and contractors notifying them of changes to the laboratory edit module to update it for changes in laboratory NCD code lists for October 2008. Changes are being made to the NCD code lists as described below. These changes are effective for services furnished on or after October 1, 2008.

## II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable						licable			
		column)									
		A	D	F	C	R			Syste		OTHER
		B	M E	I	A R	H	F	Maint M	ainers	C	
		ь	E		R	П	I I	C	M	W	
		M	M		I	-	S	S	S	F	
		Α	A		Е		S				
		C	C		R						
6213.1	The module developer shall add ICD-9-CM codes										Fu Associates
	03812, 59970, 59971, 59972, 78060, 78061, 78062,										Associates
	78063, 78064, 78065, 78891, and 78899 to the list of										
	ICD-9-CM codes covered by Medicare for the Urine										
	Culture, Bacterial (190.12) NCD.										
6213.1.1	The module developer shall delete ICD-9-CM codes										Fu Associates
	5997, 7806, and 7889 from the list of ICD-9-CM										Associates
	codes covered by Medicare for the Urine Culture,										
	Bacterial (190.12) NCD.										
6213.1.2	The module developer shall delete ICD-9-CM codes										Fu Associates
	V288 and V680 from the list of ICD-9-CM codes										Associates
	denied by Medicare for the Urine Culture, Bacterial										
	(190.12) NCD.										
6213.2	The module developer shall delete ICD-9-CM codes										Fu
	V288 and V680 from the list of ICD-9-CM codes										Associates

Number	Requirement		spon lumn		ity (p	lace	an "	X" in	each	app	licable
		A / B	D M E	F	C A R	R H H		hared- Maint M			OTHER
		M A C	M A C		R I E R	I	I S S	CS	M S	W F	
	denied by Medicare for the Human Immunodeficiency Virus (HIV) Testing (Prognosis Including Monitoring) (190.13) NCD.										
6213.3	The module developer shall add ICD-9-CM codes 07812, 13621, 13629, 78060, 78061, 78062, 78063, 78064, and 78065 to the list of ICD-9-CM codes covered by Medicare for the HIV Testing (Diagnosis) (190.14) NCD.										Fu Associates
6213.3.1	The module developer shall delete ICD-9-CM codes 1362 and 7806 from the list of ICD-9-CM codes covered by the HIV Testing (Diagnosis) (190.14) NCD.										Fu Associates
6213.3.2	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by the HIV Testing (Diagnosis) (190.14) NCD.										Fu Associates
6213.4	The module developer shall add ICD-9-CM codes 07812, V4511, V4512, V4983, V510, V518, V6101, V6102, V6103, V6104, V6105, V6106, V6109, V6221, V6222, V6229, and V7242 to the list of ICD-9-CM codes that Do Not Support Medical Necessity for the Blood Counts (190.15) NCD.										Fu Associates
6213.4.1	The module developer shall delete ICD-9-CM codes V451, V51, V610, and V622 from the list of ICD-9-CM codes that Do Not Support Medical Necessity for the Blood Counts (190.15) NCD.										Fu Associates
6213.4.2	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Blood Counts (190.15) NCD.										Fu Associates
6213.5	The module developer shall add ICD-9-CM codes 2755, 23877, 57142, 59970, 59971, 59972, and 61189 to the list of ICD-9-CM codes covered by Medicare for the Partial Thromboplastin Time (PTT) (190.16) NCD.										Fu Associates
6213.5.1	The module developer shall delete ICD-9-CM codes 5997 and 6118 from the list of ICD-9-CM codes covered by Medicare for the PTT (190.16) NCD.										Fu Associates
6213.5.2	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the PTT (190.16) NCD.										Fu Associates
6213.6	The module developer shall add ICD-9-CM codes 20920, 20921, 20922, 20923, 20924, 20925, 20926, 20927, 20929, 23877, 51181, 51189, 57142, 59970, 59971, 59972, 61189, and 99989 to the list of										Fu Associates

Number	Requirement	Responsibility (place an "X" in each applicable column)												
		A /	D M	F	CA	R H		Shared-System OTHE Maintainers						
		B M A C	E M A C		R R I E R	H	F I S S	M C S	V M S	C W F				
	ICD-9-CM codes covered by Medicare for the Prothrombin Time (PT) (190.17) NCD.				K									
6213.6.1	The module developer shall delete ICD-9-CM codes 5118, 5997, 6118, and 9998 from the list of ICD-9-CM codes covered by Medicare for the PT (190.17) NCD.										Fu Associates			
6213.6.2	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the PT (190.17) NCD.										Fu Associates			
6213.7	The module developer shall add ICD-9-CM codes 1992, 20940, 20941, 20942, 20943, 20950, 20951, 20952, 20953, 20954, 20955, 20956, 20957, 20960, 20961, 20962, 20963, 20964, 20965, 20966, 20967, 20969, 20930, 23877, 57142, 99989, 20900, 20901, 20902, 20903, 20910, 20911, 20912, 20913, 20914, 20915, 20916, 20917, 20920, 20921, 20922, 20923, 20924, 20925, 20926, 20927, and 20929 to the list of ICD-9-CM codes covered by Medicare for the Serum Iron Studies (190.18) NCD.										Fu Associates			
6213.7.1	The module developer shall delete ICD-9-CM codes 9998 and V152 from the list of ICD-9-CM codes covered by Medicare for the Serum Iron Studies (190.18) NCD.										Fu Associates			
6213.7.2	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for Serum Iron Studies (190.18) NCD.										Fu Associates			
6213.8	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Collagen Crosslinks, Any Method (190.19) NCD.										Fu Associates			
6213.9	The module developer shall add ICD-9-CM codes 03812, 70720, 70721, 70722, 70723, 70724, 70725, 78072, V2385, and V2386 to the list of ICD-9-CM codes covered by Medicare for the Blood Glucose Testing (190.20) NCD.										Fu Associates			
6213.9.1	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Blood Glucose Testing (190.20) NCD.										Fu Associates			
6213.10	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Glycated Hemoglobin/Glycated Protein (190.21) NCD.										Fu Associates			
6213.11	The module developer shall add ICD-9-CM codes										Fu Associates			

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A /	D M	F	CA	R H		hared- Maint	•		OTHER	
		B M A	E M A		R R I E	H	F I S S	M C S	V M S	C W F		
	2755, 78072, 78060, 78061, 78062, 78063, 78064, and 78065 to the list of ICD-9-CM codes covered by Medicare for the Thyroid Testing (190.22) NCD.	С	С		R							
6213.11.1	The module developer shall delete ICD-9-CM code 7806 from the list of ICD-9-CM codes covered by Medicare for the Thyroid Testing (190.22) NCD.										Fu Associates	
6213.11.2	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Thyroid Testing (190.22) NCD.										Fu Associates	
6213.12	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Lipids Testing (190.23) NCD.										Fu Associates	
6213.13	The module developer shall add ICD-9-CM codes 2755, 3393, and 78072 to the list of ICD-9-CM codes covered by Medicare for the Digoxin Therapeutic Drug Assay (190.24) NCD.										Fu Associates	
6213.13.1	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Digoxin Therapeutic Drug Assay (190.24) NCD.										Fu Associates	
6213.14	The module developer shall add ICD-9-CM codes 57142, 20920, 20921, 20922, 20923, 20924, 20925, 20926, 20927, and 20929 to the list of ICD-9-CM codes covered by Medicare for the Alpha-Fetoprotein (190.25) NCD.										Fu Associates	
6213.14.1	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Alpha-Fetoprotein (190.25) NCD.										Fu Associates	
6213.15	The module developer shall add ICD-9-CM codes 20900, 20901, 20902, 20903, 20910, 20911, 20912, 20913, 20914, 20915, 20916, 20917, 20920, 20921, 20922, 20923, 20924, 20925, 20926, 20927, and 20929 to the list of ICD-9-CM codes covered by Medicare for the Carcinoembryonic Antigen (190.26) NCD.										Fu Associates	
6213.15.1	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Carcinoembryonic Antigen (190.26) NCD.										Fu Associates	
6213.16	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Human Chorionic										Fu Associates	

Number	Requirement		spon lumn		ity (p	lace	an "	X" in	each	app	licable
		A / B M A C	D M E M A C	F I	C A R R I E	R H H I		hared- Maint M C S			OTHER
	Gonadotropin (190.27) NCD.										
6213.17	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Tumor Antigen By Immunoassay-CA125 (190.28) NCD.										Fu Associates
6213.18	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Tumor Antigen By Immunoassay-CA15-3/CA27.29 (190.29) NCD.										Fu Associates
6213.19	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Tumor Antigen By Immunoassay-CA19-9 (190.30) NCD.										Fu Associates
6213.20	The module developer shall add ICD-9-CM codes 59970, 59971, and 59972 to the list of ICD-9-CM codes covered by Medicare for the Prostate Specific Antigen (PSA) (190.31) NCD.										Fu Associates
6213.20.1	The module developer shall delete ICD-9-CM code 5997 from the list of codes covered by Medicare for the PSA (190.31) NCD.										Fu Associates
6213.20.2	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the (PSA) (190.31) NCD.										Fu Associates
6213.21	The module developer shall add ICD-9-CM codes 2755, 03812, 20920, 20921, 20922, 20923, 20924, 20925, 20926, 20927, 20929, 23877, 55841, 55842, and 57142 to the list of ICD-9-CM codes covered by Medicare for the Gamma Glutamyl Transferase (190.32) NCD.										Fu Associates
6213.21.1	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Gamma Glutamyl Transferase (190.32) NCD.										Fu Associates
6213.22	The module developer shall add ICD-9-CM code 78072 to the list of ICD-9-CM codes covered by Medicare for the Hepatitis Panel/Acute Hepatitis Panel (190.33) NCD.										Fu Associates
6213.22.1	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the Hepatitis Panel/Acute Hepatitis Panel (190.33) NCD.										Fu Associates
6213.23	The module developer shall add ICD-9-CM codes 20940, 20941, 20942, 20943, 20950, 20951, 20952, 20953, 20954, 20955, 20956, 20957, 20900, 20901, 20902, 20903, 20910, 20911, 20912, 20913, 20914,										Fu Associates

Number	Requirement	Responsibility (place an "X" in each applicable column)								licable	
		A / B M A C	D M E M A	FI	C A R R I E	R H H I		hared- Maint M C S			OTHER
	20915, 20916, 20917, 53013, 55841, 55842, 56944, 57142, and 78072 to the list of ICD-9-CM codes covered by Medicare for the Fecal Occult Blood Test (FOBT) (190.34) NCD.		C		K						
6213.23.1	The module developer shall delete ICD-9-CM codes V288 and V680 from the list of ICD-9-CM codes denied by Medicare for the FOBT (190.34) NCD.										Fu Associates
6213.24	The module developer shall add ICD-9-CM codes V2881, V2882, V2889, V6801, and V6809 to the list of denied ICD-9-CM codes for all NCDs.										Fu Associates
6213.25	The module developer shall make the revised software available to download from the CMS data center via connect:direct. The developer shall notify the SSMs of the data set names via email.										Fu Associates
6213.26	The SSMs shall install the edit module after testing and distribute it to the contractors as part of their routine release.						X	X			

## III. PROVIDER EDUCATION TABLE

Number	Requirement		spon umn		ty (p	lace a	an "Y	K" in	each	app	licable
		A / B	D M E	F	C A R	R H H		nared- Maint			OTHER
		M A	M A		R I E	I	I S S	C S	M S	W F	
6213.27	A provider education article related to this instruction will be available at <a href="http://www.cms.hhs.gov/MLNMattersArticles">http://www.cms.hhs.gov/MLNMattersArticles</a> shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv.  Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within one week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin. Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.	X	C	X	X						

## IV. SUPPORTING INFORMATION

# A. For any recommendations and supporting information associated with listed requirements, use the box below:

Use "Should" to denote a recommendation.

X-Ref	Recommendations or other supporting information:
Requirement	
Number	
None.	

## B. For all other recommendations and supporting information, use this space: N/A

## **V. CONTACTS**

**Pre-Implementation Contact(s):** Lisa Eggleston, 410-786-6130, <u>Lisa.Eggleston@cms.hhs.gov</u>, Kimberly Long, 410-786-5702, <u>Kimberly.Long@cms.hhs.gov</u>, Patricia Brocato-Simons, 410-786-0261, <u>Patricia.Brocatosimons@cms.hhs.gov</u>

**Post-Implementation Contact(s):** Appropriate CMS Regional offices

#### VI. FUNDING

## Section A: For Fiscal Intermediaries (FIs) and Carriers:

No additional funding will be provided by CMS; contractor activities are to be carried out within their operating budgets.

#### **Section B:** 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.