CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12540	Date: March 14, 2024
	Change Request 13554

# SUBJECT: Changes to the Laboratory National Coverage Determination (NCD) Edit Software for July 2024

**I. SUMMARY OF CHANGES:** The purpose of this Change Request (CR) is to announce the changes that will be included in the July 2024 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: July 1, 2024 - Unless noted differently in requirements.**

\*Unless otherwise specified, the effective date is the date of service. IMPLEMENTATION DATE: July 1, 2024

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**

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## I. GENERAL INFORMATION

**A. Background:** The purpose of this CR is to announce the changes that will be included in the July 2024 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 the final rule was published on November 23, 2001. Nationally uniform software was developed and incorporated in the Medicare shared systems so that laboratory claims subject to one of the 23 NCDs (Publication 100-03, Sections 190.12 - 190.34) were processed uniformly throughout the nation, effective April 1, 2003.

**B. Policy:** In accordance with Chapter 16, §120.2, Publication 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 International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-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 July 2024. Please access the link below for the NCD spreadsheet included with this change request:

https://www.cms.gov/Medicare/Coverage/DeterminationProcess/downloads/July-2024.zip

## II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility						Responsibility					
		A/B MAC		DME	DME Shared-System Maintainers								
		Α	В	HHH	MAC	FISS	MCS	VMS	CWF				
13554.1	The module developer shall add ICD-10 CM code provided in the link effective July 1, 2024 to the list of ICD-10-CM codes that are covered by Medicare for the Serum Iron Studies (190.18) NCD.									Fu Associates			
13554.2	The module developer shall add ICD-10 CM code provided in the link									Fu Associates			

Number	Requirement	Re	spoi	nsibility	r					
		A/B MAC		DME Shared-System Maintainers					Other	
		Α	В	HHH	MAC	FISS	MCS	VMS	CWF	
	effective January 1, 2024 to the list of ICD-10-CM codes that are covered by Medicare for the Glycated Hemoglobin/Glycated Protein (190.21B) NCD.									
13554.3	The module developer shall add ICD-10 CM codes provided in the link effective July 1, 2024 to the list of ICD-10-CM codes that are covered by Medicare for the Prostate Specific Antigen (190.31) NCD.									Fu Associates
13554.4	The module developer shall provide the revised software as a mainframe (i.e., load module) to CMS to be distributed to the SSMs.									Fu Associates
13554.5	The SSMs shall install the edit module after testing and distribute it to the contractors as part of their routine release.					Х	Х			
13554.6	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	Re	spoi	nsibility		
			A/ M/		DME MAC	CEDI
		A	В	ННН		
13554.7	Medicare Learning Network® (MLN): CMS will develop and release national provider education content and market it through the MLN Connects® newsletter shortly after we issue the CR. MACs shall link to relevant information on your website and follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 for distributing the newsletter to providers. When you follow this manual section, you don't need to separately track and report MLN content releases. You may supplement with your local educational content after we release the newsletter.	X	X			

## **IV. SUPPORTING INFORMATION**

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

"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

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**