

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-04 Medicare Claims Processing</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 11116</b>	<b>Date: November 16, 2021</b>
	<b>Change Request 12485</b>

**SUBJECT: April 2022 Healthcare Common Procedure Coding System (HCPCS) Quarterly Update Reminder**

**I. SUMMARY OF CHANGES:** The complete HCPCS file is updated and released quarterly to the Medicare contractors. The file contains existing, new, revised and discontinued HCPCS codes for the April 2022 quarter. Contractors must download the file via the CMS mainframe in March 2022. The recurring update notification applies to chapter 23, section 20 of the Medicare Claims Processing Manual.

**EFFECTIVE DATE: April 1, 2022**

*\*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.

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
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

Pub. 100-04	Transmittal: 11116	Date: November 16, 2021	Change Request: 12485
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**EFFECTIVE DATE: April 1, 2022**

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**IMPLEMENTATION DATE: April 4, 2022**

## I. GENERAL INFORMATION

**A. Background:** Medicare providers submitting claims to Medicare contractors for Part B services use a HCPCS code to indicate the service that was rendered. The updated HCPCS file containing the HCPCS codes is released quarterly to Medicare contractors via the CMS mainframe telecommunications system. If any adjustments/updates are needed prior to the Change Request effective date, the contractors shall be notified by an email from CMS to the CMS Functional Workgroups. The email will include instructions to implement the adjustments/updates. The alphanumeric index and the table of drugs will also be posted to the CMS website in February 2022. The website address is <https://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/HCPCS-Quarterly-Update>

**B. Policy:** There is no new policy associated with this change request.

## 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		
12485.1	Medicare contractors shall download the April 2022 quarterly HCPCS update from the CMS mainframe. Contractors will be notified by an email from the CMS Functional Workgroups when the file is available for downloading in mid-February 2022. The filename is as follows: MU00.@AAA2360.HCPC2022.CONTR.Q2	X	X	X	X	X	X		X	CMS, PDAC, VDC	
12485.2	Contractors shall notify CMS of successful receipt via email to <a href="mailto:price_file_receipt@cms.hhs.gov">price_file_receipt@cms.hhs.gov</a> stating the name of the file received and the entity for which it was received (i.e., include states, contractor numbers, quarter, and if Part A, Part B, or both).	X	X	X	X	X	X		X	VDC	
12485.3	If any adjustments/updates are needed prior to the Change Request implementation date, such as a corrected HCPCS file, CMS shall notify the	X	X	X	X	X	X		X	CMS, PDAC, VDC	

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	
	contractors by an email from CMS to the CMS Functional Workgroup. The email shall instruct the contractors what action(s) to take to implement the adjustments/updates.									
12485.3.1	Contractors shall implement the adjustments/updates to the HCPCS file in accordance with the instructions CMS has sent to the CMS Functional Workgroup.	X	X	X	X	X	X		X	PDAC, VDC

### 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		
	None					

### IV. SUPPORTING INFORMATION

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

*"Should" denotes a recommendation.*

X-Ref Requirement Number	Recommendations or other supporting information:
	N/A

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

### V. CONTACTS

**Pre-Implementation Contact(s):** Thomas Dorsey, [thomas.dorsey@cms.hhs.gov](mailto:thomas.dorsey@cms.hhs.gov), Rebecca Zeller, [Rebecca.Zeller@cms.hhs.gov](mailto:Rebecca.Zeller@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**