

<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 12838</b>	<b>Date: September 11, 2024</b>
	<b>Change Request 13795</b>

**SUBJECT: Instructions for Retrieving the 2025 Pricing and Healthcare Common Procedure Coding System (HCPCS) Data Files through CMS' Mainframe Telecommunications Systems**

**I. SUMMARY OF CHANGES:** The purpose of this Change Request (CR) is to provide the annual update to the various pricing files used by the Medicare Administrative Contractors (MACs).

The attached recurring update notification applies to chapter 23, section 40.

**EFFECTIVE DATE: January 1, 2025**

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

**IMPLEMENTATION DATE: January 6, 2025**

*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**





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			
	following name from the CMS MTS on or after November 1, 2024, after 8:00 PM EST:  MU00.@BF12390.MPFS.CY25.PAYIND.V1101.FI											
13795.6	Medicare contractors shall download the 2025 fee amounts for the new digital mammography technology and regular screening mammography services with the following name from the CMS MTS on or after November 1, 2024, after 8:00 PM EST:  MU00.@BF12390.MPFS.CY25.MAMMO.V1101.FI	X										
13795.7	Medicare contractors shall download the 2025 fee amounts for Part B SNF claims with the following name from the CMS MTS on or after November 1, 2024, after 8:00 PM EST:  MU00.@BF12390.MPFS.CY25.SNF.V1101.FI	X										
13795.8	Medicare contractors shall download the 2025 Anesthesia conversion factor fee amounts for CAH services from the CMS MTS on or after November 1, 2024, after 8:00 PM EST:  <b>NOTE:</b> The data set name for this file will be provided in email from CMS later.	X										
13795.9	Medicare contractors shall retrieve the Cloud 2025 ambulance fee schedule file that shall be available on or after November 15, 2024, after 8:00PM EST.  <b>NOTE:</b> As a reminder, contractors can retrieve all quarterly releases of the ambulance fee schedule file from the Cloud. A mainframe version will no longer be issued.	X										
13795.10	Medicare contractors shall refer to the locality structure listed in the file below to identify the carrier number associated with the locality name and number.  <a href="http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Relative-">http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Relative-</a>	X		X								

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		
	Value-Files.html										
13795.11	Medicare contractors shall treat pricing data confidential and shall not release data until notification is received from CMS (publication of the final rule implementing the fee schedule for physician services for 2025).	X		X							
13795.12	Medicare contractors shall price claims with dates of service on and after January 1, 2025, with codes and fee rates furnished in the 2025 files.	X		X							
13795.13	Medicare contractors shall notify CMS of successful receipt via e-mail to price_file_receipt@cms.hhs.gov stating the name of the file received, (e.g., Clinical Lab (CLAB), Average Sales Price (ASP), etc.) and the entity for which it was received (i.e., include states, carrier numbers, quarter, and if Part A, Part B, or both).	X		X							
13795.14	Medicare contractors shall compare selected contractor priced imaging service fees to the outpatient PPS amount in their system for the same service and load the lower amount for payment.	X									

#### IV. 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						

#### V. SUPPORTING INFORMATION

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

*"Should" denotes a recommendation.*

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

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

## **VI. CONTACTS**

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

## **VII. FUNDING**

### **Section A: For Medicare Administrative Contractors (MACs):**

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**ATTACHMENTS: 0**