

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 2047	Date: September 10, 2010
	Change Request 7131

SUBJECT: Instructions for Downloading the Medicare ZIP Code File for January 2011

I. SUMMARY OF CHANGES: This instruction describes the process for updating the two Medicare ZIP Code files (ZIP5 and ZIP9) for the January 2011 quarter. This instruction also describes the revision to and the process for downloading the Calendar Year-End ZIP Code files per CR 5881, Transmittal 1463. The attached Recurring Update Notification applies to Chapter 15, Section 20.1.5(B).

EFFECTIVE DATE: *January 1, 2011

IMPLEMENTATION DATE: January 3, 2011

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/revise 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

R/N/D	CHAPTER / SECTION / SUBSECTION / TITLE
N/A	

III. FUNDING:

For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers:

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

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. ATTACHMENT:

Recurring Update Notification

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

Attachment – Recurring Update Notification

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SUBJECT: Instructions for Downloading the Medicare ZIP Code File for January 2011

Effective Date: January 1, 2011

Implementation Date: January 3, 2011

I. GENERAL INFORMATION

A. Background: Each calendar quarter, CMS issues an updated, 5-digit ZIP Code file (ZIP5) and 9-digit ZIP Code File (ZIP9) to be used for pricing Medicare claims.

Every 2 months, CMS obtains an updated listing of ZIP Codes from the U.S. Postal Service (USPS). On the basis of the updated USPS file, CMS updates the Medicare ZIP Code files and makes them available to contractors.

Under normal circumstances, approximately 6 weeks prior to the beginning of each calendar quarter (i.e., approximately 6 weeks prior to January 1, April 1, July 1, and October 1), CMS will make available the updated ZIP5 and ZIP9 files. Thus, the updated files will be available on approximately November 15th for the January 1 release, approximately February 15th for the April 1 release, approximately May 15th for the July 1 release, and approximately August 15th for the October 1 release.

In addition to the 5 and 9-digit ZIP Code files, CMS will post on the CMS Web site at http://www.cms.hhs.gov/prospmedicarefeesvcpmtgen/01_overview.asp a list of the 5-digit ZIP Codes that require a 4-digit extension, and a list of the most recent additions and deletions to that file. Under normal circumstances, these two files will also be posted approximately 6 weeks prior to the beginning of each calendar quarter.

When the updated files are loaded to the Connect: Direct, it will add to the inventory of ZIP Code files on the mainframe. The name of the ZIP5 file is [MU00.@AAA2390.ZIP5.LOCALITY.Vyyyyr](#), where “yyyy” equals the calendar year and “r” equals the release number with January = 1, April = 2, July = 3, and October = 4. Also, the name of the ZIP9 file is [MU00.@AAA2390.ZIP9.LOCALITY.Vyyyyr](#).

NOTE: Even the most recently updated ZIP Code files will not contain ZIP Codes established by the USPS after CMS compiled the file. Therefore, for ZIP Codes reported on claims that are not on the most recent ZIP Code files, follow the instructions in Publication 100-04, Medicare Claims Processing Manual, chapter 15, section 20.1.5(B).

B. Policy: This instruction describes the process for updating the Medicare ZIP Code files for both the January 2011 Quarterly Update and the 2010 Calendar Year-end Release.

II. BUSINESS REQUIREMENTS TABLE

“Shall” denotes a mandatory requirement

Number	Requirement	Responsibility (place an “X” in each applicable column)						
		A	D	F	C	R	Shared-System Maintainers	OTHER
		/	M	I	A	H		

		B M A C	E M A C		R R I E R	H I	F I S S	M C S	V M S	C W F	
	NONE										

IV. SUPPORTING INFORMATION

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

"Should" denotes a recommendation.

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

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

V. CONTACTS

Pre-Implementation Contact(s): Felicia Rowe (410) 786-5655 or email at Felicia.Rowe@cms.hhs.gov.

Post-Implementation Contact(s): For availability of the ZIP-5 or ZIP-9 file: Felicia Rowe by dialing 410-786-5655 or email at Felicia.Rowe@cms.hhs.gov; for the accuracy of ZIP Code entries or for urban/rural designations: Glenn McGuirk by dialing (410) 786-5723 or email at Glenn.McGuirk@cms.hhs.gov; for the accuracy/availability of the file listing 5-digit ZIP Codes requiring a 4-digit extension: Fiscal Intermediaries / A/B MACs contact Jason Kerr (410)786-2123 or email at Jason.Kerr@cms.hhs.gov; Carriers / A/B MACs contact Leslie Trazzi (410)786-7544 or email at Leslie.Trazzi@cms.hhs.gov

VI. FUNDING

Section A: For *Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), and/or 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.