CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 12378	**Date: November 22, 2023**
	Change Request 13431

SUBJECT: Combined Common Edits/Enhancements Modules (CCEM) Code Set Update

I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to direct the Medicare shared system maintainers to obtain the most recent external code sets, and use them to update the necessary tables and/or reference files as part of the CCEM software utilized by the A/B Medicare Administrative Contractors (MACs). This recurring update notification applies to publication 100-04, chapter 24, section 50.3.4.

EFFECTIVE DATE: April 1, 2024
**Unless otherwise specified, the effective date is the date of service.*
IMPLEMENTATION DATE: April 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: In order for the Medicare fee-for-service program to correctly and accurately edit the inbound Accredited Standards Committee X12 version 5010 837 Institutional, 837 Professional claims, and the 276 Claim Status Inquiry, several code set updates are required. These are common code sets that are used across both the Part A and Part B CCEMs and are updated on a regular basis.

B. Policy: Health Insurance Reform: Modifications to the Health Insurance Portability and Accountability Act: Final Rules published in the Federal Register on January 16, 2009, by the Department of Health and Human Services at 45 Code for Federal Regulation Part 162.

II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
13431.1	The Shared System Maintainers of the CCEM software shall update the tables in business requirement 13431.1.1 for the external code sets required for claim editing.						X			
13431.1.1	The Shared System Maintainers of the CCEM software shall update the maintainer maintained Spitab tables for the following external codes sets: • Country Codes (International Organization for Standardization (ISO) 3166-1) • Country Subdivision Codes (ISO 3166-2)						X			

Number	Requirement	Responsibility								
		A/B MAC			DME MAC	Shared-System Maintainers				Other
		A	B	HHH		FISS	MCS	VMS	CWF	
	• State Codes (US, CA, MX) • Not Otherwise Classified (NOC) Procedure Codes (as defined by CMS) • National Uniform Billing Committee Condition Codes – that are valid for use on the 837 Professional per National Uniform Claim Committee Note: Continue to check for codes until the 30 day point of the release.									
13431.1.1.1	The Shared System Maintainers of the CCEM software shall refer all inquiries regarding NOC Procedure Codes (as defined by CMS) to HCPCS@cms.hhs.gov.						X			
13431.2	The Shared System Maintainers of the CCEM software shall distribute a copy of the NOC Procedure Codes (as defined by CMS) code set to EDI_CR@cms.hhs.gov 30 days prior to the quarterly release.						X			

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			DME MAC	CEDI
		A	B	HHH		
	None					

IV. SUPPORTING INFORMATION

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

"Should" denotes a recommendation.

X-Ref Requirement Number	Recommendations or other supporting information:

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):
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ATTACHMENTS: 0