| CMS Manual System | Department of Health & Human Services (DHHS) |
|---|---|
| Pub 100-04 Medicare Claims Processing | Centers for Medicare & Medicaid Services (CMS) |
| **Transmittal 12529** | **Date: March 7, 2024** |
| | **Change Request 13561** |

**SUBJECT: Quarterly Update to the National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP) Edits, Version 30.2, Effective July 1, 2024**

**I. SUMMARY OF CHANGES:** The purpose of this Change Request (CR) is to update the National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP) edits. The attached recurring update notification applies to Publication 100-04, Chapter 23, Section 20.9.

**EFFECTIVE DATE: July 1, 2024**
**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

| Pub. 100-04 | Transmittal: 12529 | Date: March 7, 2024 | Change Request: 13561 |
|---|---|---|---|

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**EFFECTIVE DATE: July 1, 2024**
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**IMPLEMENTATION DATE: July 1, 2024**

## I. GENERAL INFORMATION

**A. Background:** The Centers for Medicare & Medicaid Services (CMS) developed the National Correct Coding Initiative (NCCI) to promote national correct coding methodologies and to control improper coding that leads to inappropriate payment in Part B claims.

The latest package of NCCI Procedure-to-Procedure (PTP) edits, Version 30.2 effective July 1, 2024, will be available via the CMS Virtual Data Center (VDC). A test file will be available on or about May 2, 2024, and a final file will be available on or about May 17, 2024.

Version 30.2 will include all previous versions and updates from January 1, 1996 to the present. In the past, NCCI was organized in two tables: Column 1/Column 2 Correct Coding Edits and Mutually Exclusive Code (MEC) Edits. In order to simplify the use of NCCI edit files (two tables), on April 1, 2012, CMS consolidated these two edit files into the Column One/Column Two Correct Coding edit file. Separate consolidations have occurred for the two practitioner NCCI edit files and the two NCCI edit files used for the Outpatient Code Editor (OCE). It will only be necessary to search the Column One/Column Two Correct Coding edit file for active or previously deleted edits. CMS no longer publishes a Mutually Exclusive edit file on its website for either practitioner or outpatient hospital services, since all active and deleted edits will appear in the single Column One/Column Two Correct Coding edit file on each website. **The edits previously contained in the Mutually Exclusive edit file are NOT being deleted but are being moved to the Column One/Column Two Correct Coding edit file.** Refer to the CMS NCCI webpage for additional information at https://www.cms.gov/medicare-medicaid-coordination/national-correct-coding-initiative-ncci/ncci-medicare.

**B. Policy:** The coding policies developed are based on coding conventions defined in the American Medical Association's Current Procedural Terminology manual, national and local policies and edits, coding guidelines developed by national societies, analysis of standard medical and surgical practice, and review of current coding practice.

## II. BUSINESS REQUIREMENTS TABLE

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

| Number | Requirement | Responsibility | | | |
|---|---|---|---|---|---|
| | | A/B MAC | D M E | Shared-System Maintainers | Other |

| | | A | B | HHH | MAC | FISS | MCS | VMS | CWF | |
|---|---|---|---|---|---|---|---|---|---|---|
| 13561.1 | The Regional Office Correct Coding Initiative (RO CCI) representatives shall access the file from the VDC in the same manner they downloaded the previous versions.<br><br>The filenames for the regions are:<br><br>**Test File:**<br><br>MU00.@BF12372.CCIALL.MEEDITS.TEST01.V302<br><br>MU00.@BF12372.CCIALL.CMPEDITS.TEST01.V302<br><br>**Final File:**<br><br>MU00.@BF12372.CCIALL.MEEDITS.FINAL01.V302<br><br>MU00.@BF12372.CCIALL.CMPEDITS.FINAL01.V302 | | | | | | | | | CMS, VDC |
| 13561.2 | Contractors shall use the specific job control language in order to access Version 28.1 through the Network Data Mover and load the files into the system. The filenames for the contractors are:<br><br>**Test File:**<br><br>MU00.@BF12372.CCINDM.MEEDITS.TEST01.V302<br><br>MU00.@BF12372.CCINDM.CMPEDITS.TEST01.V302<br><br>**Final File:**<br><br>MU00.@BF12372.CCINDM.MEEDITS.FINAL01.V302<br><br>MU00.@BF12372.CCINDM.CMPEDITS.FINAL01.V302 | | X | | | | | | | VDC |
| 13561.3 | The NCCI adds, deletes, and modifier indicator change lists shall be forthcoming from the NCCI contractor to CMS via electronic mail, on or about | | X | | | | | | | |

| Number | Requirement | Responsibility | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|
| | | A/B MAC | | | DME MAC | Shared-System Maintainers | | | | Other |
| | | A | B | HHH | | FISS | MCS | VMS | CWF | |
| | May 17, 2024. The contractors shall receive the change reports via Technical Direction from CMS prior to this version effective date. | | | | | | | | | |
| 13561.4 | Contractors shall maintain the NCCI and MEC file formats contained in publication 100-04, Medicare Claims Processing Manual, chapter 23, section 20.9. | | X | | | | | | | |
| 13561.5 | Contractors shall not search their files either to retract payment or to retroactively pay claims. | | X | | | | | | | |
| 13561.6 | Contractors shall adjust claims if they are brought to their attention. | | X | | | | | | | |
| 13561.7 | The contractors shall load the files 2-3 days prior to the effective date (including weekends), if they foresee any problems with loading the CCI files. | | X | | | | | | | |

## III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility | | | | |
|---|---|---|---|---|---|---|
| | | A/B MAC | | | DME MAC | CEDI |
| | | A | B | HHH | | |
| 13561.8 | 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 | | | |

## 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

**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**