

CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 10364	Date: September 25, 2020
	Change Request 11984

SUBJECT: Quarterly Update to the National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP) Edits, Version 27.0, Effective January 1, 2021

I. SUMMARY OF CHANGES: This is the quarterly update to 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: January 1, 2021

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

IMPLEMENTATION DATE: January 4, 2021

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

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	
	<p>CCI) representatives shall access the file from the VDC in the same manner they downloaded the previous versions.</p> <p>The filenames for the regions are:</p> <p>Test File:</p> <p>MU00.@BF12372.CCIALL.MEEDITS.TEST01.V270</p> <p>MU00.@BF12372.CCIALL.CMPEDITS.TEST01.V270</p> <p>Final File:</p> <p>MU00.@BF12372.CCIALL.MEEDITS.FINAL01.V270</p> <p>MU00.@BF12372.CCIALL.CMPEDITS.FINAL01.V270</p>								
11984.2	<p>Contractors shall use the specific job control language in order to access Version 27.0 through the Network Data Mover and load the files into the system. The filenames for the contractors are:</p> <p>Test File:</p> <p>MU00.@BF12372.CCINDM.MEEDITS.TEST01.V270</p> <p>MU00.@BF12372.CCINDM.CMPEDITS.TEST01.V270</p> <p>Final File:</p> <p>MU00.@BF12372.CCINDM.MEEDITS.FINAL01.V270</p> <p>MU00.@BF12372.CCINDM.CMPEDITS.FINAL01.V270</p>		X						VDC
11984.3	<p>The NCCI adds, deletes, and modifier indicator change lists shall be forthcoming from the NCCI contractor to CMS via electronic mail, on or about November 17, 2020. The contractors shall receive the change reports via Technical Direction from CMS prior to this version</p>		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	
	effective date.									
11984.4	Contractors shall maintain the NCCI and MEC file formats contained in publication 100-04, Medicare Claims Processing Manual, chapter 23, section 20.9.		X							
11984.5	Contractors shall not search their files either to retract payment or to retroactively pay claims.		X							
11984.6	Contractors shall adjust claims if they are brought to their attention.		X							
11984.7	If contractors foresee any problems with loading the CCI files, they shall load the files 2-3 days prior to the effective date (including weekends).		X							

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		
11984.8	MLN Article: CMS will make available an MLN Matters provider education article that will be marketed through the MLN Connects weekly newsletter shortly after the CR is released. MACs shall follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1, instructions for distributing MLN Connects information to providers, posting the article or a direct link to the article on your website, and including the article or a direct link to the article in your bulletin or newsletter. You may supplement MLN Matters articles with localized information benefiting your provider community in billing and administering the Medicare program correctly. Subscribe to the "MLN Matters" listserv to get article release notifications, or review them in the MLN Connects weekly 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

Pre-Implementation Contact(s): Amin Koraganie, 410-786-9615 or amin.koraganie@cms.hhs.gov , Valeria Allen, 410-786-7443 or valeria.allen@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