# **Medicare B News**

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## **Alert: Medicare Fraud Scheme Involving Phishing Fax Requests**

CMS has identified a fraud scheme targeting Medicare providers and suppliers. Scammers are impersonating CMS and sending phishing fax requests for medical records and documentation, falsely claiming to be part of a Medicare audit.

**Important**: CMS does not initiate audits by requesting medical records via fax. Protect your information. If you receive a suspicious request, don't respond.

Legitimate requests for medical records are typically sent via mail or courier services, not fax.

Valid requests for records will provide the name of the beneficiary, as well as relevant details such as date of service, claim number, or services or items billed, so the receiver can provide the appropriate records.

Valid requests will include the name of the requester, such as the Medicare Administrative Contractor (MAC), Durable Medical Equipment MAC (DME MAC), Unified Program Integrity Contractor (UPIC), Recovery Audit Contractor (RAC), Comprehensive Error Rate Testing (CERT) program or Supplemental Medical Review Contractor (SMRC). These entities may use the CMS logo on their cover sheets or letterhead, in addition to the requesting companies name and/or logo.

If you receive phone calls in follow-up to this fax, these are not valid. CMS will never call requesting records. Please inform the caller that you will not be complying as the request is not valid or ignore the calls.

If you think you received a fraudulent or questionable request, work with your <u>Medical</u> Review Contractor to confirm it's real.

# **August is Suicide Prevention Awareness Month**

The <u>Substance Abuse and Mental Health Services Administration (SAMHSA)</u> created a digital toolkit to help providers talk to Medicare beneficiaries about suicide, raise awareness, and normalize seeking mental health help.

The <u>SAMHSA</u> webpage has suicide prevention resources, a Partner Toolkit for the suicide prevention hotline (988), and a suicide prevention resource center. The site provides links to resources to spot warning signs, access information about suicidal ideation, and SAMHSA's suicide prevention initiatives.

For CY2025, CMS finalized HCPCS G0560 for safety planning with the beneficiary. This can be billed in 20-minute increments, and services must be personally performed by the billing provider.

Medicare pays for <u>Psychotherapy for Crisis</u> using the CPT codes 90839 and 90840. This service can help a Medicare beneficiary who is actively exhibiting suicidal thoughts or actions.

#### **CERT Awareness Month: 2025 CERT Documentation Deadline**

The Part A, Part B, Durable Medical Equipment (DME), Home Health and Hospice, and Railroad Board Medicare Administrative Contractors (MACs) are working together to promote the importance of complying with CERT documentation requests. This is the first of four articles in our CERT Awareness Month.

Providers and suppliers must send all requested documentation to the CERT Review Contractor (RC) by **Thursday**, **August 7**, **2025**, for claims submitted July 1, 2023 - June 30, 2024. Favorable CERT decisions ensure proper payment and lowers the national improper payment rate. Send questions to <a href="mailto:CERTQuestion@noridian.com">CERTQuestion@noridian.com</a>.

#### Resources

- CERT RC C3HUB
- Collaborative Patient Care is a Provider Partnership

# **CERT Awareness Month: Steps to Take if You Get a Cert Documentation Request**

The Part A, Part B, Durable Medical Equipment (DME), Home Health and Hospice, and Railroad Board Medicare Administrative Contractors (MACs) are working together to promote the importance of complying with CERT documentation requests. This is the second of four articles in our CERT Awareness Month.

To be compliant and ensure a timely response to CERT review contractor (RC) documentation requests:

- Review the CERT RC letter request for these important sections
  - Action: Medical Records Required
    - This is the list of records to support claim payment
  - When: "Date"
    - This is the deadline to provide medical records to the CERT RC
- Prepare the records for submission
  - Locate and assemble all records listed on the CERT RC's letter
  - Identify if anything is missing and if so, take action to obtain the needed record(s)

- Make copies and keep the originals
- Submit the information by the deadline
  - Follow instructions on the CERT RC's letter
  - o Place the CERT RC's bar-coded cover sheet in front of your records

Follow up by accessing the <u>CERT RC C3HUB</u>. The Claim Status Search feature will confirm if the CERT RC got your records. Failure to submit the requested documentation to the CERT RC may result in a recoupment of payment.

#### Resources

- CERT Background
- Complying With Medical Records Documentation Requirements Fact Sheet
- Provider Minute: The Importance of Proper Documentation

# **CERT Awareness Month: Verify Your Medical Records Correspondence Address**

The Part A, Part B, Durable Medical Equipment (DME), Home Health and Hospice, and Railroad Board (RRB) Medicare Administrative Contractors (MACs) are working together to promote the importance of complying with CERT documentation requests. This is the third of four articles in our CERT Awareness Month.

If you have a payment recoupment for a CERT error, but didn't get a CERT Review Contractor (RC) documentation request, verify your Provider Enrollment, Chain, and Ownership System (PECOS) Medical Records Correspondence Address. Please refer to the CERT RC's C3HUB "Letters and Contact Information" and "How to Submit Address Updates."

\*For Part B RRB claims, refer to Palmetto RRB's <u>Update an Enrollment Record</u> to ensure your provider information is up-to-date with the RRB Specialty MAC.

Updating address information with the CERT RC will only update for the current claim under review. Any additional CERT RC claim reviews will revert to your current MAC contact information for CERT RC requests.

#### Resource

CERT Background

## **CERT Awareness Month: We Appreciate Your Efforts**

The Part A, Part B, Durable Medical Equipment (DME), Home Health and Hospice, and Railroad Board Medicare Administrative Contractors (MACs) are working together to promote the importance of complying with CERT documentation requests. This is the last of four articles in our CERT Awareness Month.

Thank you for your attention to this national MAC effort to promote CERT documentation awareness and compliance. We created this article series to help you understand CERT processes. For additional information, contact CERTQuestion@noridian.com.

#### Resources

- CERT Background
- CERT RC C3HUB
- **CERT Reports**
- CERT Task Force

## **Clarifying New Patient vs Established Patient**

A new patient is an individual who has not received any face-to-face professional services, Evaluation and Management (E/M) or other service (e.g., surgical procedure), from the same physician or physician group practice (same physician specialty) within the previous three years.

Verify the new patient E/M codes are accurate to submit or if the established patient E/M codes should be submitted.

If Dr. A furnished a service to a patient at a previous clinic, then moved to a new clinic and the patient continued to receive treatment from Dr. A at the new clinic, this is an established patient to Dr. A. The new vs established patient is not determined by a new location.

CMS guidance can be found in the <u>Internet Only Manual (IOM), Medicare Claims</u>
<u>Processing Manual, Publication 100-04, Chapter 12, Section 30.6.7</u>

Noridian webpage: New Patient vs Established Patient Visit

## **Community Health Integration (CHI)**

Visit the <u>Community Health Integration (CHI) webpage</u> for requirements to be compliant when billing these services. CHI is a new Medicare benefit that supports care coordination under the general supervision of a physician or other eligible healthcare practitioners.

#### Requirements include:

- Initiating visit
- Consent from patient
- Documentation to support general supervision for 'incident to' requirements and health-related unmet social drivers interfering with diagnosis or treatment
- Trained auxiliary staff working incident to the billing provider

## **Connecting Beneficiaries and Suicide Prevention Resources**

Suicide is the 10th leading cause of death in the United States. To provide impactful suicide prevention services, there are two critical components.

- 1. Creating insightful assessments
  - <u>SAMHSA SAFE-T Suicide Assessment Five Step Evaluation and Triage</u> –
     Substance Abuse and Mental Health Services Administration (SAMHSA)
    - · Important points to consider at each step
    - Suicide Prevention Resources, such as 988 Suicide and Crisis Lifeline
    - Assessments at first contact, subsequent suicidal ideation or pertinent clinical change, and prior to changes in behavioral health treatment and inpatient discharge
  - SAMHSA Toolkit with social media shareables
- 2. Connecting survivors with community resources
  - Accessibility and visibility of resources is crucial to those needing support
    - Major barrier to seeking help is finding and having access to support
    - Establishing clear pathways to care encourages help-seeking and saves lives
  - With suicidal thoughts, connection, thorough planning, and dedicated follow-up care create safety and support
  - Promoting evidence-based care is key to suicide prevention
  - Working together on a safety plan provides a sense of control and hope
  - Provide culturally aware approaches to suicide prevention
  - Examine how other states are working to strengthen their communities

## **DMEPOS Fee Schedules and Labor Payment - 3rd quarter 2025 update**

Updates to the DMEPOS <u>Jurisdiction listing</u> for 3rd quarter 2025 have been published. This resource, updated quarterly, shows which Medicare Administrative Contractors (MACs) have jurisdiction over which Healthcare Common Procedural Coding System (HCPCS) codes.

## **Documentation Requirements Guide for Outpatient Therapy Providers**

Noridian offers a "Documentation Requirements" reference guide to support outpatient therapy providers in submitting complete and accurate records. Providers are responsible for ensuring all required documentation is properly compiled and submitted to the appropriate contractor upon request.

For a detailed checklist, visit our <u>Outpatient Therapy Documentation Requirements</u> webpage.

## Hyperbaric Oxygen (HBO) Therapy Resources

Noridian offers information on coverage, noncovered conditions, documentation requirements, billing and coding guidance, tips and more, all on one page.

View these resources under Browse by Topic > Wound Care > Hyperbaric Oxygen (HBO) Therapy.

# Materials Available from the Sept. 17 National Ambulance Coalition Meeting

The presentation from the September 17, 2025, National AB MAC Ambulance Provider/Supplier Coalition Meeting has been posted as a PDF to the Noridian website. The PDF handout contains over 100 questions and answers that were submitted prior to the event. You can find the materials in the Educational Resources section of the <a href="mailto:Ambulance homepage">Ambulance homepage</a>.

# **NCCI Policy Manual Awareness**

Attention Billers, Compliance Officers and Coders: Are you aware of the CMS National Correct Coding Initiative (NCCI) Policy Manual that contains chapters, CPT and HCPCS codes, and scenarios for most Medicare coding and so much more? The manual

supports accurate coding and compliance with Medicare rules and helps to avoid denials and billing errors.

Did you know these were available?

- Surgery Chapters 3 through 8 (10000-69999) divided by system code ranges for integumentary, musculoskeletal, respiratory, digestive, etc.
- Radiology and Radiation Oncology Chapter 9 (70000-79999) includes both Radiology with diagnostic imaging, computed tomography (CT), nuclear medicine, radiopharmaceuticals, etc., and Radiation Oncology with brachytherapy, physics consultation, stereotactic radiosurgery (SRS), intensity modulated radiation treatment (IMRT), etc.
- **Supplemental Services** Chapter 12 (A0000-V9999) includes information for some drug HCPCS (e.g., J7321), pulmonary rehab, diabetes medical nutrition therapy, and a plethora of miscellaneous information.

Read more at CMS <a href="https://www.cms.gov/medicare/coding-billing/national-correct-coding-initiative-ncci-edits/medicare-ncci-policy-manual">https://www.cms.gov/medicare/coding-billing/national-correct-coding-billing/national-coding-b

# Proposed 2026 Medicare Allowances for Portable X-Ray Transportation Codes

#### Introduction

The A/B Medicare Administrative Contractors (MACs) recently completed a preliminary evaluation of data submitted through the portable x-ray (PXR) survey. The PXR survey was designed to capture cost and utilization details from suppliers across all jurisdictions and ensure accurate and equitable reimbursement methodologies for transportation of portable x-ray equipment. The survey responses inform MAC allowances and represent the first phase of review and will inform the next steps in refining payment allowances.

Due to the inadequate response to the Portable X-Ray Survey in Noridian Jurisdiction JF, the proposed allowances for HCPCS codes R0070 and R0075 have been increased using the FY2026 Ambulance Inflation Factor (AIF) 2%.

The preliminary allowances for each state and locality may be found in the table below:

State / territory	Amount
North Dakota	\$189.98
South Dakota	\$189.98

State / territory	Amount
Wyoming	\$189.98
Idaho	\$167.55
Arizona	\$232.90
Utah	\$227.64
Montana	\$178.76
Washington	\$218.91
Oregon	\$208.00
Alaska	\$189.98

#### Methodology

To ensure consistency and transparency, the MACs applied the following methodology to evaluate all survey responses.

## 1. Establishing Relative Value Units (RVUs):

Survey cost inputs were normalized and translated into RVUs, providing a standardized way to compare data across suppliers.

## 2. Applying Local Geographic Practice Cost Indices (GPCIs):

When supplier data was sufficiently detailed, local GPCIs were factored into the calculations to reflect regional variations in operating costs.

#### 3. Use of the Ambulance Inflation Factor (AIF) for 2026:

In cases where the survey participation was limited or responses insufficient to generate reliable values, the previous allowance was adjusted using the Inflation Factor (AIF) for 2026 to ensure continuity of pricing. This preserves consistency across all MAC jurisdictions.

#### 4. Validation and Review:

Each MAC is responsible for validating supplier-submitted data, including cost components and utilization assumptions, before and after integration into the pricing model.

This layered approach balances supplier-provided survey data with standardized national practices, ensuring that reimbursement rates are fair, consistent, and aligned with Medicare program requirements.

#### **Excluded Line Items**

Specific line items were excluded from the preliminary results because they are already accounted for within the practice expense (PE) component of the diagnostic test itself.

#### **Excluded as Overhead Costs**

- Credit Card fees
- Donations
- Employee inducements (sign-on bonus, retention bonus, appreciation bonus, recognition bonus, 401k match)
- Executive management costs (salaries, bonuses, vehicles)
- Fleet Management
- Legal Penalties
- Medical director/physician supervisor costs (salary, bonuses, fees)
- Shredding Services
- Traffic violations/tickets

## Excluded as Already Included in X-Ray Procedural Costs

- Radiation monitoring/ X-Ray Dosimetry
- Radiology interpretations
- Supplies utilized in X-Ray Procedure (e.g. PPE, Barium Products)
- X-Ray Equipment costs and depreciation

#### **Excluded when Context not Provided**

- Bank fees
- Billing service
- Contract labor
- Dues
- Interest
- Office equipment depreciation
- Office equipment property tax
- Subscriptions
- Travel/meals

## Partially Excluded (some cost allowed)

- Billing Service
- Customer Service Payroll
- Marketing Costs
- Sales Payroll

Excluding these items avoids duplication in reimbursement and ensures consistency with Medicare's pricing methodology, which captures overhead and general practice

costs within the PE calculation of the diagnostic test code rather than within the transportation allowance.

#### **Next Steps**

The Proposed 2026 Medicare Allowances for Portable X-Ray Transportation Codes are out for comment until 10/30/2025. Suppliers will be provided with a 30-day comment period to submit clarifications to MAC email <a href="medicalpolicy@noridian.com">medicalpolicy@noridian.com</a> or additional supporting information related to their previously submitted surveys or request a brief meeting. This opportunity allows suppliers to:

- Correct any errors or omissions in their survey responses.
- Provide documentation to support reported costs or utilization.
- Clarify unique circumstances that may have affected their submissions.

It is important to note that this comment period is **not a resubmission window**. Suppliers may only provide clarifications or additional support for data already submitted; entirely new surveys or additional line items will not be accepted.

MACs will review all feedback received during this comment period and the final allowances will be posted prior to their effective date of January 1, 2026. While supplier input will be carefully considered and may inform adjustments, it does not guarantee changes to the preliminary results. Any revisions must be consistent with CMS regulations, established methodologies, and national payment policy.

Following the review of comments, MACs will finalize validations, refine allowances where appropriate, and publish their final fees for notice.

#### **Disclaimer**

The methodology and exclusions described in this article are consistent with CMS regulations and guidance governing Medicare payment policy. Specifically:

- 42 CFR §414.22 outlines the methodology for establishing practice expense relative value units, including the incorporation of overhead and indirect costs into the PE component.
- Social Security Act §1848(c)(2)(C)(ii) requires that PE RVUs reflect the direct and indirect practice costs associated with furnishing a service.
- Each MAC is required to validate supplier survey submissions in accordance with these authorities to ensure accuracy, avoid duplication, and maintain compliance with national payment policy.

## **Recovery Audit Contract Announcement**

On April 28, 2025, CMS awarded Cotiviti GOV Services LLC the Recovery Audit Program Contract (RAC) for Region 4 that includes Noridian Jurisdictions E and F. Cotiviti GOV Services LLC is the incumbent contractor for this region.

CMS anticipates Cotiviti will begin conducting reviews in the summer of 2025. Visit the Cotiviti RAC website for more information and to learn about their Provider Portal.

To contact Cotiviti Region 4:

Phone: 833-510-9689 Fax: 203-529-2995 Email questions

CMS Medicare Fee for Service Recovery Audit Program

# Redetermination Versus Reconsideration Forms - Appeals Newsletter Part 18

The Appeals team has identified that incorrect forms are being submitted for appeals. To ensure appeals are processed efficiently, it is critical to use the correct forms and submit them to the appropriate location. This article provides a summary of where appeals should be sent and which forms must be used for redeterminations and reconsiderations. To avoid submitting the incorrect form, Noridian encourages all providers to submit their appeals through the Noridian Medicare Portal (NMP).

#### Redetermination

- Redetermination Form
  - Send to:

Redeterminations Medicare Part B

Attn: Redeterminations

PO Box (Select from table on form)

Fargo, ND 58108-(Select from table on form)

Fax Redetermination requests to: 701-277-7852

#### Reconsideration

- C2C QIC Part B North
- Reconsideration Form
  - o Send to:

C2C Innovative Solutions, Inc.

QIC Part B North Reconsiderations

PO Box 45208

Jacksonville, FL 32232-5208

o Fax Reconsideration requests to: 904-539-4081

#### **Appeals Resources**

- Noridian Appeals Tutorials
- CMS Internet Only Manual (IOM), Publication 100-04, Medicare Claims Processing Manual, Chapter 29, Appeals of Claims Decision

## Reminder to Use "Browse by Specialty" for Radiation Oncology

Accurate billing for Radiation Oncology services begins with a thorough review of applicable coverage criteria. Providers should review all relevant guidelines prior to claims submission to ensure services meet medical necessity and the appropriateness of the services rendered.

When requested submit complete supporting documentation, including clinical records and treatment plans. For detailed guidance on billing, coding, and documentation requirements, refer to the educational resources available under "Browse by Specialty" for <u>Radiation Oncology</u> services.

## **Renal Dialysis Includes Evaluation and Management**

Renal dialysis procedures, CPT codes 90935, 90937, 90945, 90947, G0491, and G0492, include the Evaluation and Management (E/M) services related to the dialysis procedure and the renal failure. If dialysis and medically reasonable and necessary E/M service unrelated to the dialysis procedure or renal failure are performed by the same provider, on the same date of service, these services may be separately reported.

The National Correct Coding Initiative (NCCI) manual, chapter 11, CMS allows providers to additionally report appropriate E/M CPT codes 99202-99215, 99221-99223, 99238-99239, and 99291-99292 with modifier 25 if performed on the same date of service as the dialysis procedure. Per CMS payment policy, any E/M service related to the renal failure (e.g., hypertension, fluid overload, uremia, electrolyte imbalance) or to the dialysis procedure and that is performed on the same date of service as the dialysis procedure shall not be reported separately, even if performed at a separate patient encounter. E/M services for conditions unrelated to the dialysis procedure or renal failure may be reported separately with modifier 25 only if they cannot be performed during the dialysis session.

## The Noridian Educational Experience is Live

We are pleased to announce that the <u>Noridian Educational Experience</u> is now live. This platform is designed to support your ongoing learning and professional development through a wide range of self-paced training modules. Whether you're looking to expand your knowledge or earn Continuing Education Unit (CEU) credits, the Noridian Educational Experience offers comprehensive curriculums tailored to meet your needs.

Registration is open exclusively to providers and suppliers within Noridian's jurisdictions. Please note that a valid National Provider Identifier (NPI) and Provider Transaction Access Number (PTAN) are required to complete the registration process.

## **Understanding Digital Mental Health Treatments**

Starting with calendar year (CY) 2025, CMS added coverage for digital mental health treatment.

Devices must have FDA clearance under <u>21 Code of Federal Regulations (CFR) 882.5801</u>. These computerized behavioral therapy devices are prescription-only devices intended to provide computerized versions of condition-specific behavioral therapy, in conjunction with outpatient treatments.

Digital mental health treatment (DMHT) uses devices provided "incident to" professional behavioral health services with treatment under a behavioral health or therapy plan of care.

- Billing practitioner must prescribe or order DMHT device cleared under section 510(k) of the Food, Drug, and Cosmetic Act
- Patient can use DMHT devices at home or in an outpatient setting, if FDA classification allows

#### **HCPCS Codes**

- G0552: Supply of digital mental health treatment device and initial education and onboarding, per course of treatment that augments a behavioral therapy plan Contractor pricing
- **G05532**: First 20 minutes of monthly treatment management services related to the device's use.
- **G0554**: Each additional 20 minutes of monthly treatment management services related to device's use.

POS 02 and 10 cannot be used for these non-face-to-face services and are excluded from the list of reimbursable telehealth services.

#### Resource

 CMS Medicare Learning Network (MLN) 1986542 Medicare and Mental Health Coverage

# Updates to JE/JF Local Coverage Determinations (LCDs) and Billing and Coding Articles (BCAs)

In the coming weeks, all Noridian LCDs and BCAs for Medicare Part A and B will be updated to combine Jurisdiction E and Jurisdiction F into a single document. The current JF versions will be retired and consolidated into the JE versions.

Per the Centers for Medicare & Medicaid Services (CMS), this update is considered nonsubstantive and does not alter the intent of coverage or non-coverage outlined in any LCD.

Once these updates are reflected in the Medicare Coverage Database, the Noridian website will also be revised to display the new unified documents.

# 2025 Q3 MoIDX CPT/HCPCS Billing and Coding Article Updates - Effective July 1, 2025

Date Posted: July 3, 2025

The following MoIDX Billing and Coding Articles have been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 1, 2025

**Summary of Changes:** The following MoIDX Billing and Coding Articles have been updated to include and/or remove CPT/HCPCS codes as well as update descriptions. For description changes, either the short and/or long code description was changed. Please Note: Depending on which descriptor was used, there may not be any changes to the code display in the article.

MCD Number	Billing and Coding Article Title	New CPT/HCPCS Codes	Deleted CPT/HCPCS Codes	CPT/HCPCS Codes Descriptor changes
A59642	Billing and Coding: MoIDX: Proteomics Testing	0568U, 0573U	NA	NA
A57527	Billing and Coding: MoIDX: Molecular Diagnostic Tests (MDT)	0552U, 0553U, 0554U, 0555U, 0556U, 0557U, 0560U, 0561U, 0562U, 0563U, 0564U 0565U, 0566U, 0567U, 0569U, 0571U	0240U, 0241U, 0369U, 0370U, 0373U, 0374U	0285U
A57332	Billing and Coding: MoIDX: Repeat Germline Testing	81308, 81349, 81353, 81374, 81377, 81381, 81383, 0335U, 0567U	NA	NA

Visit the <u>Active MoIDX Billing and Coding Articles</u> webpage or the <u>Active MoIDX LCD</u> webpage to view the Billing and Coding Article or access it via the CMS <u>Medicare</u> <u>Coverage Database (MCD)</u>.

# Allergen Immunotherapy (AIT) with Subcutaneous Immunotherapy (SCIT) Final LCD - Effective October 26, 2025

Date Posted: September 11, 2025

This Local Coverage Determination (LCD) has completed the Open Public Meeting and Contractor Advisory Committee (CAC) comment period and is now finalized under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY). Responses to comments received may be found as a link at the bottom of the final LCD.

# **Medicare Coverage Database (MCD) Number/Contractor Determination Number:** L40052

LCD Title: Allergen Immunotherapy (AIT) with Subcutaneous Immunotherapy (SCIT)

Effective Date: October 26, 2025

**Summary of LCD**: This Local Coverage Determination (LCD) has been developed to create a policy consistent with current evidence and covers allergen immunotherapy. This LCD outlines limited coverage for this service with specific details under *Coverage Indications, Limitations and/or Medical Necessity*.

Visit the <u>Proposed LCDs</u> webpage to access this LCD.

# Billing and Coding: Artificial Hearts and Percutaneous Endovascular Cardiac Assist Procedures and Devices (A59658) - R2 - September 30, 2024

Date Posted: July 31, 2025

This Billing and Coding article has been revised and published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: September 30, 2024

Summary of Article Changes: Revision Effective Date: 09/30/2024

Due to ICD-10 Annual Update:

Under Group 2 ICD-10 Codes Q23.8 was deleted from Group 2

06/17/2025: At this time the 21st Century Cures Act applies to new and revised LCDs which require comment and notice. This revision is to an article that is not a local coverage determination.

Visit the Noridian <u>Billing and Coding Articles</u> webpage to view the complete listing of Billing and Coding articles and/or access the Active, Future, or Retired articles available in the CMS MCD.

# Billing and Coding: BDX-XL2 (A57357) - R5 - Effective April 28, 2022

Date Posted: September 25, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: April 28, 2022

## **Summary of Changes:**

Under **Article Text** replaced sentence "The following coding and billing guidance is to be used with its associated Local Coverage Determination BDX-XL2 L37062." with "The information in this article contains billing, coding or other guidelines that complement the Local Coverage Determination (LCD) for BDX-XL2 L37062."

Visit the Noridian Molecular Diagnostic Services webpage to view the Active MolDX LCDs or access it via the CMS MCD.

# Billing and Coding: Billing Limitations for Pharmacies (A56124) Retirement - Effective September 18, 2025

Date Posted: September 18, 2025

This Billing and Coding article has been retired under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: September 18, 2025

**Summary:** This article is being retired due to outdated, updated and/or expanded information. Updated direction regarding these services will be moved to our Noridian POE website in the future.

Visit the CMS Medicare Coverage Database (MCD) to access the Retired articles.

# Billing and Coding: Hypoglossal Nerve Stimulation for the Treatment of Obstructive Sleep Apnea (A57949) - R6 - Effective January 1, 2025

Date Posted: July 24, 2025

This Billing and Coding Article has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: January 1, 2025

**Summary of Changes**: Effective January 1, 2025, CPT code 64568 was added to Group 1 CPT codes.

Visit the Noridian <u>Active LCDs</u> webpage to view the document or access it via the CMS <u>Medicare Coverage Database (MCD)</u>.

# Billing and Coding: Implantable Infusion Pumps for Chronic Pain (A55323) - R21 - Effective July 1, 2025

Date Posted: July 3, 2025

This coverage article has been revised and published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 1, 2025 Summary of Article Changes:

Updated pricing for Prialt (Ziconotide) and Ropivacaine per quarterly ASP Drug File update:

Effective 07/01/2025 - 09/30/2025

Prialt (Ziconotide) = \$10.129

Ropivacaine = \$0.061

Visit the Noridian <u>Billing and Coding Articles</u> webpage to view the complete listing of coverage articles and/or access the Active, Future, or Retired articles available in the CMS MCD.

Billing and Coding: Investigational Device Exemptions (IDE) - IDE Documentation Requirements for Studies with an FDA Approval dated January 01, 2015, or later (A54917) - R8 - Effective October 1, 2015

Date Posted: July 3, 2025

This Billing and Coding article has been revised and published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: October 01, 2015

**Summary of Article Changes**: Under Article Text: updated the zip code to be 58108-6782 and removed the link to the IDE form.

Visit the Noridian <u>Billing and Coding Articles</u> webpage to view the complete listing of Billing and Coding articles and/or access the Active, Future, or Retired articles available in the CMS MCD.

# Billing and Coding: Micro-Invasive Glaucoma Surgery (MIGS) (A57864) - R8 - Effective November 17, 2024

Date Posted: July 31, 2025

This Billing and Coding Article has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: November 17, 2024

Summary of Changes: Removed Type of Bill (TOB) 083X - Ambulatory Surgery Center (ASC) and Revenue Code 049X - Ambulatory Surgical Care - General Classification, as ASC's can no longer bill Part A. Therefore, the TOB is no longer applicable.

At this time the 21st Century Cures Act applies to new and revised LCDs which require comment and notice. This revision is to an article that is not a local coverage determination.

Visit the Noridian <u>Active LCDs</u> webpage to view the document or access it via the CMS Medicare Coverage Database (MCD).

# Billing and Coding: MoIDX: Abbott RealTime IDH1 and IDH2 testing for Acute Myeloid Leukemia (AML) (A55712) - R7 - Effective June 1, 2023

Date Posted: September 25, 2025

This Billing and Coding article has been revised and published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: June 1, 2023

**Summary of Article Changes**: Under Article Text, added the following statement as it was previously missing:

To report an Abbott RealTime IDH1 service, please submit the following claim information:

Visit the Noridian <u>Active MoIDX Billing and Coding Articles and Educational Articles</u> webpage to view the Billing and Coding article or access it via the CMS <u>MCD</u>.

# Billing and Coding: MoIDX: Biomarkers in Cardiovascular Risk Assessment (A57055) - R6 - Effective October 1, 2025

Date Posted: August 28, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: October 1, 2025

#### **Summary of Changes:**

Under *ICD-10 Codes that Support Medical Necessity Group 1: Codes* deleted E78.01 and E88.1. Added E78.010, E78.011, and E78.019. This revision is due to the Annual ICD-10-CM Update and will become effective on 10/1/2025.

Under *CMS National Coverage Policy* revised the following regulation: CMS Internet-Only Manual, Pub. 100-04, Medicare Claims Processing Manual, Chapter 16, §50.5 Jurisdiction of Laboratory Claims, §60.1.1 Independent Laboratory Specimen Drawing, §60.2 Travel Allowance. This revision is effective 10/1/2025.

Updated **Associated Documents** to remove Billing and Coding: MoIDX: ApoE Genotype. Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MoIDX LCDs</u> or access it via the <u>CMS MCD</u>.

# Billing and Coding: MoIDX: Breast Cancer Index® (BCI) Gene Expression Test (A57774) - R4 - Effective October 9, 2021

Date Posted: September 25, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: October 9, 2021

#### **Summary of Changes:**

Updated *Article Title* to correct superscript symbol with ®.

Updated Article Text fifth paragraph, third bullet to include "Part B"

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCDs</u> or access it via the <u>CMS MCD</u>.

# Billing and Coding: MoIDX: FDA-Approved KRAS Tests (A54500)- R9 - Effective July 14, 2022

Date Posted: September 25, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 14, 2022

**Summary of Changes:** 

Updated *Does the CPT 30% Coding Rule Apply?* From No to Yes.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCDs</u> or access it via the <u>CMS MCD</u>.

# Billing and Coding: MoIDX: Genetic Testing in Heritable Thoracic Aortic Disease (A59870) - R1 - Effective August 17, 2025

Date Posted: September 25, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: August 17, 2025

**Summary of Changes:** 

Under *ICD-10 Codes that Support Medical Necessity Group 1: Codes* added Q79.63. This revision is effective 8/17/2025.

Visit the Noridian Molecular Diagnostic Services webpage to view the Active MolDX LCDs or access it via the CMS MCD.

# Billing and Coding: MoIDX: Germline testing for use of PARP inhibitors (A55295) - R12 - Effective October 1, 2025

Date Posted: September 4, 2025

This Billing and Coding article has been revised and published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: October 1, 2025

## **Summary of Article Changes:**

Under *ICD-10 Codes that Support Medical Necessity Group 1: Codes* added C50.A0, C50.A1, C50.A2, and Z85.4A. This revision is due to the Annual ICD-10-CM Update and will become effective on 10/1/2025.

Under Associated Documents updated Related Local Coverage Documents

Visit the Noridian <u>Active MoIDX Billing and Coding Articles and Educational Articles</u> webpage to view the Billing and Coding article or access it via the CMS MCD.

# Billing and Coding: MoIDX: Lab-Developed Tests for Inherited Cancer Syndromes in Patients with Cancer (A58681) - R9 - Effective October 1, 2025

Date Posted: September 4, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602

Effective Date: October 1, 2025

**Summary of Changes:** 

Under *ICD-10 Codes that Support Medical Necessity Group 1: Codes* added C50.A0, C50.A1, C50.A2, Z85.4A, and Z86.00A. This revision is due to the Annual ICD-10-CM Update and will become effective on 10/1/2025.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX</u> LCDs or access it via the CMS MCD.

# Billing and Coding: MoIDX: MammaPrint (A54447) - R9 - Effective January 1, 2022

Date Posted: September 25, 2025

This Billing and Coding article has been revised and published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: January 1, 2022

**Summary of Article Changes**: Under Article Text, added the verbiage 'appropriate' to the Part B claim instructions.

Visit the Noridian <u>Active MoIDX Billing and Coding Articles and Educational Articles</u> webpage to view the Billing and Coding article or access it via the CMS <u>MCD</u>.

# Billing and Coding: MoIDX: Minimal Residual Disease Testing for Solid Tumor Cancers (A58456) - R11 - Effective July 1, 2025

Date Posted: July 10, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 1, 2025

## **Summary of Changes:**

Under *CPT/HCPCS Codes Group 1: Codes* added 0569U. This revision is due to the 2025 Q3 CPT/HCPCS Code Update and is effective 7/01/2025.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX</u> LCDs or access it via the CMS MCD.

# Billing and Coding: MoIDX: Minimal Residual Disease Testing for Solid Tumor Cancers (A58456) - R12 - Effective July 31, 2025

Date Posted: July 31, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 31, 2025

#### **Summary of Changes:**

Under *Article Text* revised Table 1 row 3 to remove "Whole Exome" and replaced with "Bespoke Assay Design" to Signatera and RaDaR test names. Revised row 4 to read "Guardant360 Response (Guardant, Inc)". Revised row 5 to add "in accordance with NCD 90.2". Revised row 9 to remove "Whole Exome Design" and replaced with "Bespoke Assay Design" to Signatera and RaDaR test names. Revised row 11 to read "NavDX single Plasma Test (Naveris, Inc)" and "Guardant Reveal single Plasma Test (Guardant, Inc)". Under subheading Additional Test-specific Indications, Limitations and Instructions revised first sentence to remove "Natera" and replaced with "Signatera". Revised "Guardant" to read "Guardant Reveal". Revised second sentence to remove "Natera" and "NavDX". Revised third

sentence to read "Guardant Response". Removed "Natera" and replaced with "Signatera". Formatting and punctuation errors were corrected throughout the article. This revision is effective 7/31/2025.

Under *Article Text* revised Table 1 row 3 to add "Oncodetect Bespoke Assay Design + Plasma Test **Bundle** (Exact Sciences Corp)". Revised row 6 to add "Oncodetect Plasma Test **Bundle** (Exact Sciences Corp)". Revised row 9 to add "Oncodetect Bespoke Assay Design + single Plasma Test (Exact Sciences Corp)". Revised row 10 to add "Oncodetect single Plasma Test (Exact Sciences Corp)". Under subheading **Additional Test-specific Indications, Limitations and Instructions** revised first sentence to add "Oncodetect". This revision is due to a new covered test that has successfully completed a TA and is effective for 4/18/2025.

Visit the Noridian Molecular Diagnostic Services webpage to view the Active MolDX LCDs or access it via the CMS MCD.

# Billing and Coding: MoIDX: Minimal Residual Disease Testing for Solid Tumor Cancers (A58456) - R13 - Effective October 1, 2025

Date Posted: September 4, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: October 1, 2025

#### **Summary of Changes:**

Under *ICD-10 Codes that Support Medical Necessity Group 1: Codes* added Z85.4A. Under *ICD-10 Codes that Support Medical Necessity Group 2: Codes* added Z85.4A. This revision is due to the Annual ICD-10-CM Update and will become effective on 10/1/2025.

Under **Article Text** revised Table 1 row 9 to add "Pathlight Recurrence Monitoring Bespoke Assay Design + Plasma Test (SAGA Diagnostics)". Revised row 10 to add "Pathlight Recurrence Monitoring single Plasma Test (SAGA Diagnostics)". Under subheading **Additional Test-specific Indications, Limitations and Instructions** revised 2nd sentence to add "Pathlight". Under **ICD-10 Codes that Support Medical Necessity Group 3: Codes** added Z85.3 This revision is due to a new covered test that has successfully completed a TA and is effective for 3/28/2025.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCDs</u> or access it via the <u>CMS MCD</u>.

# Billing and Coding: MoIDX: Molecular Diagnostic Tests (MDT) (A57527) - R24 - Effective August 14, 2025

Date Posted: August 14, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: August 14, 2025

#### **Summary of Changes:**

Under CPT/HCPCS Codes Group 1: Codes added 0008U. This revision is effective 4/17/2022.

Under CPT/HCPCS Codes Group 1: Codes added 0252U. This revision is effective 7/1/2021.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCDs</u> or access it via the <u>CMS MCD</u>.

# Billing and Coding: MoIDX: Molecular Syndromic Panels for Infectious Disease Pathogen Identification Testing (A58726) - R26 - Effective July 1, 2025

Date Posted: July 3, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 1, 2025

#### **Summary of Changes:**

Under *CPT/HCPCS Codes Group 1: Codes* deleted 0240U and 0241U. Under CPT/HCPCS Codes Group 6: Codes added 0563U and 0564U. This revision is due to the 2025 Q3 CPT/HCPCS Code Update and is effective 7/1/2025.

Under *ICD-10 Codes that Support Medical Necessity Group 11: Codes* added B01.9, B01.81, B02.7, B02.8, B02.31, B02.33, B02.34, B02.30, B02.32, B02.39. This revision is effective 5/27/2025.

Visit the Noridian Molecular Diagnostic Services webpage to view the Active MolDX LCDs or access it via the CMS MCD.

# Billing and Coding: MoIDX: Molecular Syndromic Panels for Infectious Disease Pathogen Identification Testing (A58726) - R27 - Effective October 1, 2025

Date Posted: August 28, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: October 1, 2025

#### **Summary of Changes:**

Under *ICD-10 Codes that Support Medical Necessity Group 2: Codes* added B88.09 and R10.85. Under *ICD-10 Codes that Support Medical Necessity Group 5: Codes* deleted R10.2. Added R10.20, R10.21, R10.22, R10.23, R10.24, and R10.8A3. Under *ICD-10 Codes that Support Medical Necessity Group 6: Codes* added D71.1, D71.8 and D71.9. Under *ICD-10 Codes that Support Medical Necessity Group 7: Codes* added D71.1, D71.8 and D71.9. This revision is due to the Annual ICD-10-CM Update and will become effective on 10/1/2025.

Under *ICD-10 Codes that Support Medical Necessity Group 5: Codes* added O09.90, O09.91, O09.92, O09.93, Z34.00, Z34.01, Z34.02, Z34.03, Z34.80, Z34.81, Z34.82, Z34.83, Z34.90, Z34.91, Z34.92, and Z34.93. This revision is effective 9/2/2025.

Visit the Noridian Molecular Diagnostic Services webpage to view the Active MolDX LCDs or access it via the CMS MCD.

# Billing and Coding: MoIDX: Molecular Syndromic Panels for Infectious Disease Pathogen Identification Testing (A58726) - R29 - Effective October 1, 2025

Date Posted: September 11, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: October 1, 2025

#### **Summary of Changes:**

Revision History R27 was inappropriately posted.

The correct Revision History for these updates is R28.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCDs</u> or access it via the <u>CMS MCD</u>.

# Billing and Coding: MoIDX: Molecular Testing for Identification and Management of Hereditary Transthyretin Amyloidosis (A59874) - R1 - Effective August 17, 2025

Date Posted: September 25, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: August 17, 2025

**Summary of Changes:** 

Under *CPT/HCPCS Codes Group 1: Codes* added 81404. This revision is effective 8/17/2025.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCDs</u> or access it via the <u>CMS MCD</u>.

# Billing and Coding: MoIDX: Molecular Testing for Solid Organ Allograft Rejection (A58170) - R11 - Effective July 24, 2025

Date Posted: July 24, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 24, 2025

## **Summary of Changes:**

Under **Article** Text added "Eurofins" to the manufacturer name for the 7th row. This revision is effective 7/24/2025.

Under **Article** Text revised the test and manufacturer name for the 9th row on the table. This revision is effective 6/17/2025.

Visit the Noridian Molecular Diagnostic Services webpage to view the Active MolDX LCDs or access it via the CMS MCD.

# Billing and Coding: MoIDX: Oncotype DX® Colon Cancer (A54486) - R4 - Effective November 1, 2019

Date Posted: September 25, 2025

This Billing and Coding article has been revised and published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: November 1, 2019

**Summary of Article Changes:** Under Article Text, updated the Part B claim instructions from 'Item 19 for paper claims' to 'Item 19 for paper claim'.

Under Article Text, updated the Part A claim instructions from 'Block 80 for UB04 claim form' to 'Block 80 for the UB04 claim form'.

Under Bill Type Codes, added 013X - Hospital Outpatient.

Visit the Noridian <u>Active MoIDX Billing and Coding Articles and Educational Articles</u> webpage to view the Billing and Coding article or access it via the CMS <u>MCD</u>.

# Billing and Coding: MoIDX: Pharmacogenomics Testing (A57385) - R16 - Effective July 1, 2025

Date Posted: July 3, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 1, 2025

## **Summary of Changes:**

Under **Article Text** revised Table 1 to add new row for CYP2D6 for metoprolol tartrate and metoprolol succinate. This revision is due to CPIC guidelines and is effective 7/1/2024.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX</u> <u>LCDs</u> or access it via the <u>CMS MCD</u>.

# Billing and Coding: MoIDX: Plasma-Based Genomic Profiling in Solid Tumors (A58975) - R9 - Effective July 1, 2025

Date Posted: July 10, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 1, 2025

#### **Summary of Changes:**

Under *CPT/HCPCS Codes Group 1: Codes* added 0571U. This revision is due to the 2025 Q3 CPT/HCPCS Code Update and is effective 7/1/2025.

Under CPT/HCPCS Codes Group 1: Codes deleted 0409U. This is effective 7/1/2025.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCDs</u> or access it via the <u>CMS MCD</u>.

# Billing and Coding: MoIDX: Plasma-Based Genomic Profiling in Solid Tumors (A58975) - R10 - Effective July 1, 2025

Date Posted: September 25, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 1, 2025

#### **Summary of Changes:**

Updated *CPT/HCPCS Codes: Group 2* Paragraph Formatting, punctuation, and typographical errors were corrected.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCDs</u> or access it via the <u>CMS MCD</u>.

# Billing and Coding: MoIDX: Prometheus® IBD sgi Diagnostic® Policy (A57517) - R4 - Effective October 20, 2022

Date Posted: September 25, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: October 20, 2022

#### **Summary of Changes:**

Updated *CPT/HCPCS Codes: Group 2* Paragraph Formatting, punctuation, and typographical errors were corrected.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX</u> LCDs or access it via the CMS MCD.

# Billing and Coding: MoIDX: Prostate Cancer Genomic Classifier Assay for Men with Localized Disease (A57236) - R5 - Effective January 1, 2021

Date Posted: September 25, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: January 1, 2021

#### **Summary of Changes:**

Updated **Article Text** from "To report a Prostate Genomic Classifier service, please submit the following claim information:" to "To report a Prostate Genomic Classifier service, please submit the following claim information:"

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCDs</u> or access it via the <u>CMS MCD</u>.

# Billing and Coding: MoIDX: Proteomics Testing (A59642) - R10 - Effective August 14, 2025

Date Posted: August 14, 2025

This Billing and Coding article has been revised and published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: August 14, 2025 Summary of Article Changes:

Under *CPT/HCPCS Codes Group 1: Codes* added 81538. This revision is effective 1/31/2024.

Visit the Noridian <u>Active MolDX Billing and Coding Articles and Educational Articles</u> webpage to view the Billing and Coding article or access it via the CMS MCD.

# Billing and Coding: Single Chamber and Dual Chamber Permanent Cardiac Pacemakers - Coding and Billing (A54931) - R11 - Effective October 1, 2023

Date Posted: September 25, 2025

This Billing and Coding article has been revised and published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: October 1, 2023

**Summary of Article Changes:** Under Group 1: Paragraph added the verbiage 'Group 1' to the statement.

Visit the Noridian <u>Billing and Coding Articles</u> webpage to view the complete listing of Billing and Coding articles and/or access the Active, Future, or Retired articles available in the CMS MCD.

# CORRECTED Billing and Coding: MoIDX: Prometheus® IBD sgi Diagnostic® Policy (A57517) - R4 - Effective October 20, 2022

Date Posted: September 29, 2025

This Billing and Coding Article has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: October 20, 2022

**Summary of Changes:** 

Updated **CMS National Coverage Policy** Formatting, punctuation, and typographical errors were corrected.

This is a correction to the notification article posted on September 25th, 2025.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCDs</u> or access it via the <u>CMS MCD</u>.

## Local Coverage Determination (LCD) Finalized - Effective November 2, 2025

Date Posted: September 18, 2025

The following Local Coverage Determination (LCD) has completed the Open Public Meeting comment period and are now finalized under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Medicare Coverage Database Number	LCD Title
L36353	Lab: Special Histochemical Stains and Immunohistochemical Stains

Medicare Coverage Database Number	Billing and Coding Article Title
A57614	Billing and Coding: Lab: Special Histochemical Stains and Immunohistochemical Stains

Medicare Coverage Database Number	Response to Comments
A60320	Response to Comments: Lab: Special Histochemical Stains and Immunohistochemical Stains

Effective Date: November 2, 2025

View Active LCDs on our website or the Medicare Coverage Determination (MCD)

# Micro Invasive Glaucoma Surgery L38301 - R6 - Effective November 17, 2024

Date Posted: September 18, 2025

This Local Coverage Determination (LCD) has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: November 17, 2024

#### **Summary of Changes:**

Under Coverage Indications, Limitations and/or Medical Necessity, Limitation of Coverage #3 changed i to is.

Visit the Noridian <u>Active LCDs</u> webpage to view the Active LCD or access it via the CMS <u>MCD</u>.

# MoIDX: Biomarker Testing for Risk Stratification in DCIS - Published for Review and Comments

Date Posted: July 17, 2025

This proposed Local Coverage Determination (LCD) has been published for review and comments for contract numbers: 02102 (AK), 03102 (AZ), 02202 (ID), 03202 (MT), 03302 (ND), 02302 (OR), 03402 (SD), 03502 (UT), 02402 (WA), and 03602 (WY).

Medicare Coverage Database (MCD) Number: DL40144

LCD Title: MoIDX: Biomarker Testing for Risk Stratification in DCIS

**Comment period:** July 17, 2025 - August 31, 2025

Visit the CMS MCD to access Proposed LCDs not released to final LCDs.

Providers may address details for comment submission. When sending comments, reference the specific policy to which they are related. See the <u>Proposed MoIDX LCDs</u> webpage for email and mail specifics.

# MoIDX: Breast Cancer Index® (BCI) Gene Expression Test (L37822) - R5 - Effective July 3, 2025

Date Posted: July 3, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 3, 2025

**Summary of Changes:** 

Under **Bibliography** revised the broken hyperlink for the 21st reference and changes were made to citations to reflect AMA citation guidelines.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS <u>Medicare Coverage Database (MCD)</u>.

# MoIDX: Genetic Testing for BCR-ABL Negative Myeloproliferative Disease (L36186) - Retirement - Effective August 17, 2025

Date Posted: August 21, 2025

This Local Coverage Determination (LCD) has been retired under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Medicare Coverage Database (MCD) Number: L36186

Effective Date: August 17, 2025

Rationale: L36186 MoIDX: Genetic Testing for BCR-ABL Negative Myeloproliferative Disease and A57422 Billing and Coding: MoIDX: Genetic Testing for BCR-ABL Negative Myeloproliferative Disease will be retired on 8/17/2025 because the information in the LCD and article have been incorporated within the MoIDX: Non-Next Generation Sequencing Tests for the Diagnosis of BCR-ABL Negative Myeloproliferative Neoplasms L39923 LCD and related article.

Visit the Retired LCDs webpage to access the retired LCDs.

# MoIDX: HLA-DQB1\*06:02 Testing for Narcolepsy (L36544) - R5 - August 24, 2023

Date Posted: August 21, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: August 24, 2023

#### **Summary of Changes:**

Under *CMS National Coverage Policy* updated section heading for 3rd regulation, and revised the following regulation CMS Internet-Only Manual, Pub. 100-02, Medicare Benefit Policy Manual, Chapter 15, §80 Requirements for Diagnostic X-Ray, Diagnostic Laboratory, and Other Diagnostic Tests to include section 80.1.1. Under *Bibliography* changes were made to citations to reflect AMA citation guidelines. This revision is effective on 8/24/2023.

Updated *CMS National Coverage Policy* to reflect changes for a revision on 8/24/23. This revision is effective 8/24/23.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS <u>Medicare Coverage Database (MCD)</u>.

# MoIDX: Local Coverage Determinations (LCDs) Finalized - Effective August 17, 2025

Date Posted: July 3, 2025

The following Local Coverage Determinations (LCDs) have completed the Open Public Meeting comment period and are now finalized under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Medicare Coverage Database Number	MoIDX LCD Title
L39946	MoIDX: Genetic Testing for Heritable Thoracic Aortic Disease
L39950	MoIDX: Molecular Testing for Identification and Management of Hereditary Transthyretin Amyloidosis

Medicare Coverage Database Number	MoIDX LCD Title
L39927	MoIDX: Non-Next Generation Sequencing Tests for the Diagnosis of BCR-ABL Negative Myeloproliferative Neoplasms

Medicare Coverage Database Number	MoIDX Billing and Coding Article Title	
A59870	Billing and Coding: MoIDX: Genetic Testing in Heritable Thoracic Aortic Disease	
A59874	Billing and Coding: MolDX: Molecular Testing for Identification and Management of Hereditary Transthyretin Amyloidosis	
A59837	Billing and Coding: MoIDX: Non-Next Generation Sequencing Tests for the Diagnosis of BCR-ABL Negative Myeloproliferative Neoplasms	

Medicare Coverage Database Number	Response to Comments
A60207	Response to comments: MoIDX: Genetic Testing in Heritable Thoracic Aortic Disease
A60202	Response to comments: MoIDX: Molecular Testing for Identification and Management of Hereditary Transthyretin Amyloidosis
A60228	Response to Comments: MoIDX: Non-Next Generation Sequencing Tests for the Diagnosis of BCR-ABL Negative Myeloproliferative Neoplasms

Effective Date: August 17, 2025

View Active MoIDX LCDs on our website or the CMS MCD.

# MoIDX: MGMT Promoter Methylation Analysis (L36192) - R6 - Effective August 7, 2025

Date Posted: August 7, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: August 7, 2025

#### **Summary of Changes:**

Formatting, punctuation, and typographical errors were corrected throughout the LCD. Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS <u>Medicare Coverage Database (MCD)</u>.

# MoIDX: Molecular Biomarker Testing to Guide Targeted Therapy Selection in Rheumatoid Arthritis (L39469) - R2 - Effective August 7, 2025

Date Posted: August 7, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: August 7, 2025

#### **Summary of Changes:**

Updated to remove **Related National Coverage Document** 90.2 – Next Generation Sequencing (NGS). This was added in error. This is effective 8/7/25.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS Medicare Coverage Database (MCD).

# MoIDX: Molecular Biomarkers to Risk-Stratify Patients at Increased Risk for Prostate Cancer (L39007) - R2 - Effective July 3, 2025

Date Posted: July 3, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 3, 2025

### **Summary of Changes:**

Under *Bibliography* revised the broken hyperlink for the 62nd reference and changes were made to citations to reflect AMA citation guidelines.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS <u>Medicare Coverage Database (MCD)</u>.

# MoIDX: Molecular Syndromic Panels for Infectious Disease Pathogen Identification Testing (L39003) - R4 - Effective July 3, 2025

Date Posted: July 3, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 3, 2025

#### **Summary of Changes:**

Under *Bibliography* revised the broken hyperlink for the 78th and 84th reference and changes were made to citations to reflect AMA citation guidelines.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS <u>Medicare Coverage Database (MCD)</u>.

## MoIDX: Molecular Testing for Solid Organ Allograft Rejection - Published for Review and Comments

Date Posted: July 17, 2025

This proposed Local Coverage Determination (LCD) has been published for review and comments for contract numbers: 02102 (AK), 03102 (AZ), 02202 (ID), 03202 (MT), 03302 (ND), 02302 (OR), 03402 (SD), 03502 (UT), 02402 (WA), and 03602 (WY).

Medicare Coverage Database (MCD) Number: DL40062

LCD Title: MoIDX: Molecular Testing for Solid Organ Allograft Rejection

Comment period: July 17, 2025 - August 31, 2025

Visit the CMS MCD to access Proposed LCDs not released to final LCDs.

Providers may address details for comment submission. When sending comments, reference the specific policy to which they are related. See the <u>Proposed MoIDX LCDs</u> webpage for email and mail specifics.

# MoIDX: Molecular Testing for Solid Organ Allograft Rejection (L38671) - R1 - Effective July 10, 2025

Date Posted: July 10, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 10, 2025

**Summary of Changes:** 

Under *Bibliography* revised the broken hyperlink for the 1st reference.

Under **CMS National Coverage Policy** updated section headings and descriptions. Under **Bibliography** deleted duplicate references #27 and #31 and changes were made to citations to reflect AMA citation guidelines as it was missed in the previous update. Formatting, punctuation, and typographical errors were corrected throughout the LCD.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS <u>Medicare Coverage Database (MCD)</u>.

# MoIDX: Non-Next Generation Sequencing Tests for the Diagnosis of BCR-ABL Negative Myeloproliferative Neoplasms (L39927) - R1 - Effective July 3, 2025

Date Posted: September 25, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: Effective July 3, 2025

**Summary of Changes:** 

Updated *Related Local Coverage Documents* added Billing and Coding: MoIDX: BCR-ABL.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS <u>Medicare Coverage Database (MCD)</u>.

# MoIDX: Open Public Meeting Announcement Multiple LCDs - October 8, 2025

Date Posted: August 28, 2025

These policies have been published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Noridian Healthcare Solutions will be hosting a MoIDX Open Public Meeting on October 8, 2025, from 2- 4pm CT.

Advance <u>registration</u> is required for both General Registration or Registration for presentations or comments.

- Registration deadline to present comments or presentations on any MoIDX LCD will close on October 1, 2025, at 11:59 pm CDT.
- General Registration deadline to participate by listen-only mode will close on October 7, 2025, at 11:59 pm CDT.

Proposed MoIDX Local Coverage Determination (LCDs) and Billing and Coding Articles:

Medicare Coverage Database Number	LCD Title
DL40222/DA60239	MoIDX: Non-Next Generation Sequencing Targeted Molecular Panel Tests for Predictive Testing in Cancer
DL40197/DA60217	MoIDX: Biomarker Testing for Risk Stratification in Metabolic Dysfunction-Associated Steatotic Liver Disease and Metabolic Dysfunction-Associated Steatohepatitis
DL40242/DA60272	MoIDX: Genetic Testing for Hereditary Thrombophilia

View meeting details and register now from the MolDX Open Public Meeting webpage.

## MoIDX: Pharmacogenomics Testing (L38337) - R2 - Effective July 3, 2025

Date Posted: July 3, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 3, 2025

## **Summary of Changes:**

Under *Bibliography* revised the broken hyperlink for the 40th reference and changes were made to citations to reflect AMA citation guidelines.

Updated *Analysis of Evidence (Rationale for Determination) paragraphs* #1, #5, and #8 to mirror the paragraphs used presently by the MoIDX team at Palmetto GBA as part of an annual review. Revision history dates and language may not exactly match the MoIDX PGBA revision history. However, these revisions do not change coverage or guidance.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS Medicare Coverage Database (MCD).

# MoIDX: Phenotypic Biomarker Detection from Circulating Tumor Cells (L38645) - R2 - Effective July 3, 2025

Date Posted: July 3, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 3, 2025

#### **Summary of Changes:**

Under *Bibliography* revised the broken hyperlink for the 67th reference and changes were made to citations to reflect AMA citation guidelines.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS <u>Medicare Coverage Database (MCD)</u>.

# MoIDX: Predictive Classifiers for Early Stage Non-Small Cell Lung Cancer (L38329) - R3 - Effective July 3, 2025

Date Posted: July 3, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 3, 2025

**Summary of Changes:** 

Under *Bibliography* revised the broken hyperlink for the 12th reference and changes were made to citations to reflect AMA citation guidelines.

This revision is effective on 07/03/2025.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS <u>Medicare Coverage Database (MCD)</u>.

# MoIDX: Prognostic and Predictive Molecular Classifiers for Bladder Cancer (L38649) - R2 - Effective July 3, 2025

Date Posted: July 3, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 3, 2025

#### **Summary of Changes:**

Under *Bibliography* revised the broken hyperlink for the 12th reference and changes were made to citations to reflect AMA citation guidelines.

Visit the Noridian <u>Molecular Diagnostic Services</u> webpage to view the <u>Active MolDX LCD</u> or access it via the CMS <u>Medicare Coverage Database (MCD)</u>.

# MoIDX: Prostate Cancer Genomic Classifier Assay for Men with Localized Disease (L38341) - R3 - Effective July 3, 2025

Date Posted: July 3, 2025

This MoIDX Local Coverage Determination (LCD) has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: July 3, 2025

#### **Summary of Changes:**

Under *Bibliography* revised the broken hyperlink for the 16th reference and changes were made to citations to reflect AMA citation guidelines.

Visit the Noridian Molecular Diagnostic Services webpage to view the Active MolDX LCD or access it via the CMS Medicare Coverage Database (MCD).

# Multi-Jurisdictional CAC Meeting Announcement - Cardiac Percutaneous Lithotripsy - August 20, 2025, 2:30 pm - 4:30 pm CT

Date Posted: June 23, 2025

This article has been published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Noridian, Novitas, WPS, NGS, CGS and FCSO will host a Multi-Jurisdictional Contractor Advisory Committee (CAC) Meeting via Microsoft Teams Webinar on August 20, 2025, from 2:30 pm - 4:30 pm CT. Discussions will focus on Cardiac Percutaneous Lithotripsy.

The Centers for Medicare & Medicaid Services (CMS) assigned Medicare Administrative Contractors (MACs) the task of developing Local Coverage Determinations (LCDs). The purpose of the CAC meeting is to provide a formal mechanism for healthcare professionals to be informed of the evidence used in developing an LCD and promote communication between the MACs and the healthcare community. The CAC panel will discuss clinical literature related to [LCD Name]. Discussions will occur between CAC panelists and Contractor Medical Directors. The public may attend; however, questions from the public will not be entertained.

Interested stakeholders are invited to attend via webinar; however, advanced registration is required.

Once registered you will receive the webinar information via email. Lines will remain muted throughout the conference except for the invited CAC panelists and the MAC hosts.

View meeting details and register now from the CAC Meeting webpage.

# Multi-Jurisdictional CAC Meeting Announcement - MolDX: Molecular Testing for Detection of Upper Gastrointestinal Metaplasia, Dysplasia, Neoplasia: Agenda

September 04, 2025|1:00 p.m. - 3:00 p.m. CT Teleconference Only

## **Agenda**

- Welcome and Introductions
  - Dr. Gabriel Bien-Willner
- 2. Key Questions and Discussion
  - CAC Members and Contractor Medical Directors (CMDs)

3. Closing Remarks and Adjournment

• Dr. Gabriel Bien-Willner

Date Posted: July 17, 2025

Multi-Jurisdictional CAC Meeting Announcement - MoIDX: Molecular Testing for Detection of Upper Gastrointestinal Metaplasia, Dysplasia, Neoplasia - September 4, 2025, 1 - 3 p.m. CT

Date Posted: July 17, 2025

This article has been published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Palmetto GBA, CGS Administrators, Noridian Healthcare Solutions and WPS Government Health Administrators will host a Multi-Jurisdictional Contractor Advisory Committee (CAC) Meeting via Microsoft Teams Webinar on September 04, 2025, from 1 - 3 p.m. CT. Discussions will focus on MolDX: Molecular Testing for Detection of Upper Gastrointestinal Metaplasia, Dysplasia, Neoplasia.

The Centers for Medicare & Medicaid Services (CMS) assigned Medicare Administrative Contractors (MACs) the task of developing Local Coverage Determinations (LCDs). The purpose of the CAC meeting is to provide a formal mechanism for healthcare professionals to be informed of the evidence used in developing an LCD and promote communications between the MACs and the healthcare community. The CAC panel will discuss the clinical literature related to MolDX: Molecular Testing for Detection of Upper Gastrointestinal Metaplasia, Dysplasia, Neoplasia. Discussions will occur between CAC panelists and Contractor Medical Directors. The public may attend; however, questions from the public will not be entertained.

Interested stakeholders are invited to attend via webinar; however, advanced registration is required.

**Note**: Registration deadline to participate by listen-only mode will close on September 3, 2025, 11:59 PM.

Once registered you will receive the webinar information via email. Lines will remain muted throughout the conference except for the invited CAC panelists and the MAC hosts.

View meeting details and register now from the <u>CAC Meeting</u> webpage.

# Multi-Jurisdictional Contractor Advisory Committee (CAC) Coronary Intravascular Lithotripsy (IVL) - Agenda

August 20, 2025, 2:30 - 4:30 p.m. CT Teleconference/Webinar Only

#### **Facilitators**

Dr. Gina Mullen (NGS) and Dr. Meredith Loveless (CGS)

#### Welcome and Introduction

Dr. Gina Mullen

## **Participating Medicare Administrative Contractors (MACS)**

- National Government Services
- CGS Administrators
- Palmetto GBA
- Noridian Healthcare Solutions
- WPS
- Novitas Solutions
- First Coast

#### **Discussion of Evidence and Key Questions**

Contractor Medical Directors (CMDs) and Subject Matter Experts (SMEs)

#### **Concluding Remarks**

• Dr. Gina Mullen and Dr. Meredith Loveless

# Multi-Jurisdictional Contractor Advisory Committee (CAC) Coronary Intravascular Lithotripsy (IVL) - Bibliography

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# Multi-Jurisdictional Contractor Advisory Committee (CAC) Coronary Intravascular Lithotripsy (IVL) - Key Questions

- 1. Does the evidence demonstrate that Intravascular Lithotripsy (IVL) is effective for the treatment of severely calcified coronary vessels? ADDIN EN.CITE.DATA 1-11 Is there evidence for use in moderately severe calcified coronary vessels?12
- 2. How do we classify the severity of plaque (such as moderate or severe- e.g. calcium angles, plaque without motion)? What definition should be used, and does it make a difference in the outcomes? ADDIN EN.CITE.DATA 11-19
- 3. What is the best success measurement for this procedure as it does not seem to be measured consistently in literature? e.g. flow, pressure across the width of the stent, residual diameter stenosis less than 50%, 30%, 20%?

- 4. What is the best method to evaluate the lesion needed for Intravascular Lithotripsy? E.g. Fractional Flow Reserve (FFR) by CT or invasive, optical coherence tomography, intravascular ultrasound. This is measured by different techniques in many of these articles and does it make a difference in the results?
- 5. The evidence does not necessarily compare the same artery to the same arteryare there standards on which arteries are appropriate for treatment based on the current evidence?
- 6. Are there standards set on the techniques for current standard of care procedures (such as rotational or laser atherectomy, cutting balloons, high-pressure balloons, etc.), and do these standards affect the outcomes of these procedures?
- 7. Please define the a) patient population and b) angiographic criteria for which lithotripsy would be the preferred procedure or alternative to the current procedures (rotational or laser atherectomy, cutting balloons, high pressure ballons, etc.) for calcified coronary artery lesions. Please opine in context to these issues:
  - Shockwave Coronary Lithotripsy (IVL) System with Shockwave C2 Coronary Intravascular Lithotripsy (IVL) Catheter PMA was approved based on the DISRUPT CAD III trial. PMA # P200039. Clinical Trials# NCT03595176. IDE# G180146 (2019). Approval for this device and procedure is indicated for lithotripsy-enabled, low-pressure balloon dilatation of **severely calcified**, stenotic **de novo** coronary arteries prior to stenting. This PMA has very detailed inclusion and exclusion criteria (e.g. lesion site, no ostial lesions, no LM, no totally occluded lesions, target vessel diameter and length, patients without YHA Class III or IV CHF, no chronic dialysis, or creatinine >2.5, etc.) FDA S008. 12.13.2022. Approval for the addition of a sterile sleeve and labeling modifications, including an increase in the maximum pulse count from 80 to 120. There is limited data regarding outcomes, safety, or MACE with this increase to 120 maximum pule count.?1,20
- 8. Will lithotripsy be an alternative or adjunct to the established current procedures at the same time of the initial procedure for these severely calcified, stenotic de novo coronary artery lesions?
- 9. Are there different considerations for treatment depending on the location of the Coronary Artery calcification (CAC) aka which artery is affected? How does IVL compare to the Coronary Artery Bypass Grafting (CABG) for left main CAC? Is there evidence to show IVL is safe for use in left main disease?3,13,14,16,21-23
- 10. Is there long -term outcome data regarding IVL sufficient to support this procedure? Please opine on any long-term outcome data regarding restenosis rates, frequency or need for repeat cardiac intervention procedures or CABG, or MACE compared to the current standard of care procedures (rotational or laser atherectomy, cutting balloons, high pressure ballons, etc.) for calcified coronary

- artery lesions? How does the safety profile compare to other calcium modification interventions? ADDIN EN.CITE.DATA 11-14,16-19,24,25
- 11. Based on the evidence what (if any) measures that should be used to improve safety (eg. Intravascular ultrasound)? US and point system?21,26,27
- 12. How does intravascular lithotripsy compare to other calcium modification techniques for management of this condition? ADDIN EN.CITE.DATA 11-14,16-19,25,28 Are there certain factors/criteria that is considered when choosing the calcium modification technique that will be used?
- 13. The comparators vary in the studies for instance some articles use rotational atherectomy or orbital atherectomy as the comparator while others do not-how does this impact the outcomes?
- 14. The technology is FDA approved for severely calcified de novo coronary lesions prior to stenting. There are many reports of off-label use. Based on the evidence what limitations should be considered for this technology? ADDIN EN.CITE.DATA 12-14,18,19,22-24,28-32
  - a. Combined with other calcium modification devices 18
  - b. Used peri-procedure with stent in place29
  - c. Anatomical locations13,21,30 (eg. bifurcation, LM)
  - d. Acute coronary syndrome18,23,24,29,33,34
  - e. Lesions size
  - f. Total occlusion12
- 15. Does the use of calcium modification devices improve Percutaneous Coronary Intervention (PCI) outcomes? For what duration is outcome data available?17,22,24,31
- 16. Are there different considerations for treatment depending on the location of the CAC aka which artery is affected? How does IVL compare to the CABG for left main CAC? Is there evidence to show IVL is safe for use in left main disease? What are the percentage failures at 1, 5, 10 years?
- 17. What are the contraindications for Intravascular Lithotripsy? 34
- 18. Is it appropriate to perform these procedures in Ambulatory Surgery or Office-Based centers without surgical back-up and if so who (if any) would or would not be eligible?20
- 19. Please opine the additional training and certification requirements for physicians and medical staff (radiology or imaging technicians and RNs, etc.)?
- 20. What ICD-10 codes do you think are appropriate for this technology?

## Multi-Jurisdictional Contractor Advisory Committee (CAC) Meeting Announcement - Implantation of Anterior Segment Intraocular Nonbiodegradable Drug-eluting System - November 12, 2025, 2 - 4 pm CT

Date Posted: September 26, 2025

This article has been published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

CGS Administrators, National Government Services, Wisconsin Physicians Service, Noridian Healthcare Solutions, and Palmetto GBA will host a multi-jurisdictional CAC Meeting on November 12, 2025, from 2 - 4 pm CT. Discussions will focus on Implantation of Anterior Segment Intraocular Nonbiodegradable Drug-eluting System.

The Centers for Medicare & Medicaid Services (CMS) assigned Medicare Administrative Contractors (MACs) the task of developing Local Coverage Determinations (LCDs). The purpose of the CAC meeting is to provide a formal mechanism for healthcare professionals to be informed of the evidence used in developing an LCD and promote communication between the MACs and the healthcare community. The CAC panel will discuss the clinical literature related to Implantation of Anterior Segment Intraocular Nonbiodegradable Drug-eluting System. Discussions will occur between CAC panelists and Contractor Medical Directors. The public may attend; however, questions from the public will not be entertained.

Interested stakeholders are invited to attend via webinar; however, advanced registration is required.

Once registered you will receive the webinar information via email. Lines will remain muted throughout the conference except for the invited CAC panelists and the MAC hosts.

View meeting details and register now from the <u>CAC Meeting</u> webpage.

# Multiple Billing and Coding Articles Retirement - Effective September 25, 2025

Date Posted: September 25, 2025

The following Billing and Coding Articles have been retired under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Medicare Coverage Database Number	Billing and Coding Article Title	New Medicare Coverage Database Number
A55479	Billing and Coding: Abbreviated Daytime Sleep Study (e.g. PAP-NAP)	A55478
A54063	Billing and Coding: Arthroscopic Lavage and Arthroscopic Debridement for Osteoarthritic Knees	A54061
A59658	Billing and Coding: Artificial Hearts and Percutaneous Endovascular Cardiac Assist Procedures and Devices	A59657
A53028	Billing and Coding: Bariatric Surgery Coverage	A53026
A55585	Billing and Coding: Billing Medicare for the SphenoCath® and Other Similar Devices	A55584
A57914	Billing and Coding: Chiropractor Services	A57913
A59753	Billing and Coding: Cryoneurolysis Instructions	A59752
A52767	Billing and Coding: Fracture Care	A53322
A55756	Billing and Coding: Home PT/INR Monitoring (G0249) Billing and Coding	A55754
A52732	Billing and Coding: Hydration Services	A54635
A56342	Billing and Coding: Implantable Automatic Defibrillators	A56340
A55214	Billing and Coding: Incident To Clarification for OPPS and CAH Outpatient	A55215
A59056	Billing and Coding: Influenza Diagnostic Tests	A59055

Medicare Coverage Database Number	Billing and Coding Article Title	New Medicare Coverage Database Number
A55062	Billing and Coding: IUD (Hormone- Eluting) for Endometrial Hyperplasia - CPT 58999	A55061
A55932	Billing and Coding: JW and JZ Modifier Billing Guidelines	A53024
A59828	Billing and Coding: Leadless Pacemakers	A59819

Effective Date: September 25, 2025

Rationale: The above-mentioned Billing and Coding Articles were retired to consolidate JF policies with JE policies to have one unified document and policy number. Per the Centers for Medicare & Medicaid Services (CMS), this update is considered non-substantive and does not alter the intent of coverage or non-coverage outlined in any article.

Visit the CMS Medicare Coverage Database (MCD) to access the Retired articles.

# Multiple LCDs and Billing and Coding Articles Retirement - Effective August 14, 2025

Date Posted: August 14, 2025

The following Local Coverage Determinations (LCDs) and Billing and Coding Articles have been retired under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Medicare Coverage Database Number	LCD Title	New Medicare Coverage Database Number
L37088	Transcranial Magnetic Stimulation (TMS)	L37086
L36707	Urine Drug Testing	L36668
L34051	Vitamin D Assay Testing	L36692

Medicare Coverage Database Number	Billing and Coding Article Title	New Medicare Coverage Database Number
A57693	Billing and Coding: Transcranial Magnetic Stimulation (TMS)	A57692
A55030	Billing and Coding: Urine Drug Testing	A55001
A57719	Billing and Coding: Vitamin D Assay Testing	A57718

Effective Date: August 14, 2025

Rationale: The above-mentioned LCDs and Billing and Coding Articles were retired to consolidate JF policies with JE policies to have one unified document and policy number. Per the Centers for Medicare & Medicaid Services (CMS), this update is considered non-substantive and does not alter the intent of coverage or non-coverage outlined in any LCD.

Visit the Retired LCDs webpage to access the retired LCDs.

# Multiple LCDs and Billing and Coding Articles Retirement - Effective September 11, 2025

Date Posted: September 11, 2025

The following Local Coverage Determinations (LCDs) and Billing and Coding Articles have been retired under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Medicare Coverage Database Number	LCD Title	New Medicare Coverage Database Number
L37027	Cataract Surgery in Adults	L34203
L39762	Cervical Fusion	L39758
L38826	Colon Capsule Endoscopy (CCE)	L38824
L38700	Computed Tomography Cerebral Perfusion Analysis (CTP)	L38709

Medicare Coverage Database Number	LCD Title	New Medicare Coverage Database Number
L39242	Epidural Steroid Injections for Pain Management	L39240
L34076	Injections - Tendon, Ligament, Ganglion Cyst, Tunnel Syndromes and Morton's Neuroma	L34218
L39962	Intervertebral Disc Repair	L39960
L37618	Lab: Cystatin C Measurement	L37616
L37738	Magnetic-Resonance-Guided Focused Ultrasound Surgery (MRgFUS) for Essential Tremor and Tremor Dominant Parkinson's Disease	L37729
L39060	Platelet Rich Plasma Injections for Non- Wound Injections	L39058
L34040	Polysomnography and Other Sleep Studies	L36861
L38904	Wound and Ulcer Care	L38902

Medicare Coverage Database Number	Billing and Coding Article Title	New Medicare Coverage Database Number
A57196	Billing and Coding: Cataract Surgery in Adults	A57195
A59645	Billing and Coding: Cervical Fusion	A59624
A58438	Billing and Coding: Colon Capsule Endoscopy (CCE)	A58436

Medicare Coverage Database Number	Billing and Coding Article Title	New Medicare Coverage Database Number
A58225	Billing and Coding: Computed Tomography Cerebral Perfusion Analysis (CTP)	A58223
A58995	Billing and Coding: Epidural Steroid Injections for Pain Management	A58993
A57201	Billing and Coding: Injections - Tendon, Ligament, Ganglion Cyst, Tunnel Syndromes and Morton's Neuroma	A57079
A59884	Billing and Coding: Intervertebral Disc Repair	A59882
A57644	Billing and Coding: Lab: Cystatin C Measurement - R6	A57643
A57513	Billing and Coding: Magnetic-Resonance- Guided Focused Ultrasound Surgery (MRgFUS) for Essential Tremor and Tremor Dominant Parkinson's Disease	A57512
A58790	Billing and Coding: Platelet Rich Plasma Injections for Non-Wound Injections	A58788
A57698	Billing and Coding: Polysomnography and Other Sleep Studies	A57697
A58567	Billing and Coding: Wound and Ulcer Care	A58565

Effective Date: September 11, 2025

Rationale: The above-mentioned LCDs and Billing and Coding Articles were retired to consolidate JF policies with JE policies to have one unified document and policy number. Per the Centers for Medicare & Medicaid Services (CMS), this update is considered non-substantive and does not alter the intent of coverage or non-coverage outlined in any LCD.

Visit the Retired LCDs webpage to access the retired LCDs.

# Open Meeting Announcement - MoIDX: Biomarker Testing for Risk Stratification in DCIS - August 27, 2025

Date Posted: July 17, 2025

This article has been published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Noridian Healthcare Solutions will be hosting an Open Public Meeting on August 27, 2025, from 2 p.m. to 4 p.m. CT.

Advance registration is required.

- Registration deadline to present comments on an LCD will close on August 20, 2025, at 11:59 pm CDT.
- General Registration deadline to participate by listen-only mode will close on August 26, 2025, at 11:59 pm CDT.

#### Proposed Local Coverage Determination (LCD)

MolDX: Biomarker Testing for Risk Stratification in DCIS DL40144

View meeting details and register now from the MolDX Open Public Meeting webpage.

# Open Meeting Announcement - MolDX: Molecular Testing for Solid Organ Allograft Rejection - August 26, 2025

Date Posted: July 17, 2025

This article has been published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Noridian Healthcare Solutions will be hosting an Open Public Meeting on August 26, 2025, from 2 p.m. to 4 p.m. CT.

Advance <u>registration</u> is required.

- Registration deadline to present comments on an LCD will close on August 19, 2025, at 11:59 pm CDT.
- General Registration deadline to participate by listen-only mode will close on August 25, 2025, at 11:59 pm CDT.

#### Proposed Local Coverage Determination (LCD) and Local Coverage Article (LCA)

- MolDX: Molecular Testing for Solid Organ Allograft Rejection DL40062
- Billing and Coding: MolDX: Molecular Testing for Solid Organ Allograft Rejection DA60155

View meeting details and register now from the MoIDX Open Public Meeting webpage.

## Open Public Meeting Announcement Multiple LCDs - October 30, 2025

Date Posted: September 25, 2025

This article has been published for notice under contract numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Noridian Healthcare Solutions will be hosting an Open Public Meeting on October 30, 2025, from 2-4 pm CT.

#### Advance registration is required.

- Registration deadline to present comments on the LCD will close on October 23, 2025, at 11:59 pm CDT.
- General Registration deadline to participate by listen-only mode will close on October 29, 2025, at 11:59 pm CDT.

Proposed Local Coverage Determination (LCD) and Billing and Coding Article:

- Peripheral Nerve Blocks and Procedures for Chronic Pain
- Temporary Nontherapeutic Ambulatory Cardiac Monitoring Devices

View meeting details and register now from the Open Meeting webpage.

## Peripheral Nerve Stimulation (L37360) - R5 - Effective December 1, 2019

Date Posted: September 25, 2025

This Local Coverage Determination (LCD) has been revised under contractor numbers: 02102 (AK), 02202 (ID), 02302 (OR), 02402 (WA), 03102 (AZ), 03202 (MT), 03302 (ND), 03402 (SD), 03502 (UT), and 03602 (WY).

Effective Date: Effective December 1, 2019

#### **Summary of Changes:**

Under Coverage Indications, Limitations, and/or Medical Necessity, corrected the typographical error in Paragraph 1 from 'interdenominational' to 'interventional'.

At this time 21st Century Cures Act will apply to new and revised LCDs that restrict coverage which requires comment and notice. This revision is not a restriction to the coverage determination.

Visit the Noridian Active LCDs webpage to view the Active LCD or access it via the CMS MCD.

# Policy Revision for Local Coverage Determination Facet Joint Interventions for Pain Management - Effective July 17, 2025

Date Posted: July 17, 2025

The following Local Coverage Determinations (LCDs) has been revised under contract number: 02102 (AK), 03102 (AZ), 02202 (ID), 03202 (MT), 03302 (ND), 02302 (OR), 03402 (SD), 03502 (UT), 02402 (WA), and 03602 (WY).

Medicare Coverage Database Number	LCD Title and Revision Number
L38803	Facet Joint Interventions for Pain Management

Effective Date: July 17, 2025

**Summary of Changes**: Typographical and grammatical updates were made throughout the LCD as well as updates to hyperlinks found in the Bibliography.

Visit the Noridian <u>Active LCDs</u> webpage or access it via the CMS <u>Medicare Coverage</u> Database (MCD).

## **Proposed LCDs - Published for Review and Comments**

Date Posted: August 28, 2025

The following three proposed Local Coverage Determinations (LCDs) have been published for review and comments for contract numbers: 02102 (AK), 03102 (AZ), 02202 (ID), 03202 (MT), 03302 (ND), 02302 (OR), 03402 (SD), 03502 (UT), 02402 (WA), and 03602 (WY).

Medicare Coverage Database Number	LCD Title
DL40222	MoIDX: Non-Next Generation Sequencing Targeted Molecular Panel Tests for Predictive Testing in Cancer
DL40197	MoIDX: Biomarker Testing for Risk Stratification in Metabolic Dysfunction-Associated Steatotic Liver Disease and Metabolic Dysfunction-Associated Steatohepatitis

Medicare Coverage Database Number	LCD Title
DL40242	MoIDX: Genetic Testing for Hereditary Thrombophilia

Comment Period: August 28, 2025 - October 12, 2025

View the CMS MCD to access Proposed LCDs not released to final LCDs.

Providers may address details for comment submission. When sending comments, reference the specific policy to which they are related. See the <a href="Proposed MoIDX LCDs">Proposed MoIDX LCDs</a> webpage for email and mail specifics.

## **Proposed LCDs - Published for Review and Comments**

Date Posted: September 25, 2025

The following two proposed Local Coverage Determinations (LCDs) have been published for review and comments for contract numbers: 02102 (AK), 03102 (AZ), 02202 (ID), 03202 (MT), 03302 (ND), 02302 (OR), 03402 (SD), 03502 (UT), 02402 (WA), and 03602 (WY).

Medicare Coverage Database Number	LCD Title
DL40265	Peripheral Nerve Blocks and Procedures for Chronic Pain
DL40255	Temporary Nontherapeutic Ambulatory Cardiac Monitoring Devices

Comment Period: September 25, 2025 - November 8, 2025

View the CMS MCD to access Proposed LCDs not released to final LCDs.

Providers may address details for comment submission. When sending comments, reference the specific policy to which they are related. See the <u>Proposed LCDs</u> webpage for email and mail specifics.

## MLN Connects - July 3, 2025

MLN Connects Newsletter: July 3, 2025

#### **Proposed Payment Rules**

- ESRD: CY 2026 Proposed Rule Submit Comments by August 29
- Home Health: CY 2026 Proposed Rule Submit Comments by August 29

#### News

- CMS Launches New Model to Target Wasteful, Inappropriate Services in Original Medicare
- National Health Care Fraud Takedown Results in 324 Defendants Charged in Connection with Over \$14.6 Billion in Alleged Fraud
- Skilled Nursing Facilities: Revalidation Deadline August 1
- Hospice Quality Reporting Program: Vendor Update Slide Deck & Errata for Data Specifications Effective October 1

#### MLN Matters® Articles

- Inpatient Rehabilitation Facility Prospective Payment System: FY 2026 Pricer Update
- Hospital Outpatient Prospective Payment System: July 2025 Update

#### **Publications & Multimedia**

Screening, Brief Intervention & Referral to Treatment (SBIRT) Services - Revised

#### Information for Patients

CMS Notifies Individuals Potentially Impacted by Data Incident

## MLN Connects - July 10, 2025

MLN Connects Newsletter: July 10, 2025

#### News

- Hospital Price Transparency: Respond to Accuracy & Completeness RFI by July 21
- Alert: Medicare Fraud Scheme Involving Phishing Requests Via Fax and Other Means

 Transcatheter Edge-to-Edge Repair for Tricuspid Valve Regurgitation: Final National Coverage Determination

#### Compliance

- Medicare Improperly Paid Suppliers for Intermittent Urinary Catheters
- Acute Care Hospital Outpatient Services for Hospice Enrollees: Reduce Improper Payments

#### Claims, Pricers & Codes

HCPCS Application Summaries & Coding Decisions: Drugs & Biologicals

#### From Our Federal Partners

Providers Accepting CHAMPVA: You Must Get Paid by EFT

## MLN Connects - July 15, 2025

CMS Proposes Physician Payment Rule to Significantly Cut Spending Waste, Enhance Quality Measures, and Improve Chronic Disease Management for People with Medicare

## MLN Connects - July 16, 2025

#### **CY 2026 Proposed Payment Rule**

CMS Proposes Bold Reforms to Modernize Hospital Payments, Strengthen Transparency, and Put Patients Back in Control

#### News

CMS Expands Access to Lifesaving Gene Therapies Through Innovative State Agreements

## MLN Connects - July 17, 2025

MLN Connects Newsletter: July 17, 2025

#### News

 CMS Announces Resources, Flexibilities to Assist with Public Health Emergency in State of Texas

- Skilled Nursing Facilities: Revalidation Deadline Extended to January 1
- Join an Accountable Care Organization

#### Compliance

Ostomy Supplies: Prevent Claim Denials

#### Claims, Pricers & Codes

Core-Based Statistical Area: Revised ZIP Code Files

#### **Publications & Multimedia**

- Chronic Care Management Services Revised
- Patients in Custody Under a Penal Authority Revised

### MLN Connects - July 24, 2025

MLN Connects Newsletter: July 24, 2025

#### News

- 2025 Quality Conference Highlights
- July 2025 Provider Specific Data for Public Use Files

#### Compliance

Remote Patient Monitoring: Use & Bill Correctly

#### **Publications & Multimedia**

Hospice Fast Facts

## MLN Connects - July 31, 2025

MLN Connects Newsletter: July 31, 2025

#### News

- White House, Tech Leaders Commit to Create Patient-Centric Healthcare Ecosystem
- Medicare & Medicaid at 60: Strengthening Health Care for the Future
- Skilled Nursing Facilities: Revalidation Deadline Extended to January 1

## Compliance

 Opioid Use Disorder: Learn about Services to Help Your Patients Continue Treatment

#### MLN Matters® Articles

- Acute Kidney Injury Renal Dialysis Billing: Additional Revenue Codes
- Laboratory National Coverage Determination Edit Software Updates: October 2025

## MLN Connects - August 4, 2025

MLN Connects Newsletter: 5 FY 2026 Final Payment Rules - Monday, August 4, 2025

#### **FY 2026 Final Payment Rules**

- Hospital Inpatient Prospective Payment System & Long-Term Care Hospital Prospective Payment System
- Inpatient Rehabilitation Facility Prospective Payment System
- Inpatient Psychiatric Facility Prospective Payment System & Quality Reporting Updates
- Skilled Nursing Facility Prospective Payment System
- Hospice Wage Index, Payment Rate Update & Quality Reporting Program Requirements

## **MLN Connects - August 7, 2025**

MLN Connects® Newsletter for Thursday, August 7, 2025

#### News

- Laboratories: Switch to Electronic Fee Coupons & CLIA Certificates
- Improve Your Search Results for CMS Content

## Fraud, Waste & Abuse

Crushing Fraud

#### Compliance

Evaluation & Management Services: Prevent Claim Denials

## Claims, Pricers & Codes

- Ambulance Claims: Revised July ZIP Code Files
- Skilled Nursing Facility Prospective Payment System: FY 2025 Pricer Update

#### **Events**

 CMS Listening Session: Opportunities to Enhance Real-Time Claims Processing & EDI Cybersecurity Controls - August 13

#### MLN Matters® Articles

- Billing the Laboratory Specimen Collection Travel Allowance to the 10th of a Mile
- National Coverage Determination 20.37: Transcatheter Tricuspid Valve Replacement
- Ambulatory Surgical Center Payment System: July 2025 Update Revised

# MLN Connects - August 14, 2025

MLN Connects® for Thursday, August 14, 2025

#### News

 FY 2026 SNF VBP Program: Download Your August 2025 Performance Score Reports

## Compliance

• Skilled Nursing Facilities: Identify & Prevent Improper Part D Payments for Drugs

#### Claims, Pricers & Codes

- Method II Critical Access Hospitals
- Incarcerated Beneficiaries: Update to National Uniform Billing Committee Condition Code 63

#### MLN Matters® Articles

 Bypassing Common Working File Edits on Inpatient Medicare Part B Ancillary 12X Claims: Effective Date Change

#### **Publications & Multimedia**

- Medicare Preventive Services Revised
- Combating Medicare Parts C & D Fraud, Waste & Abuse Revised

# MLN Connects - August 21, 2025

MLN Connects® Newsletter for Thursday, August 21, 2025

#### News

- Information for Critical Access Hospitals
- 2023 Doctors & Clinicians Preview Period Closing August 21
- Nursing Home Care Compare Updates: Temporary Pause
- Ambulance Fee Schedule Ground Ambulance Services: Updated List of Advanced Life Support, Level 2 Procedures

#### Fraud, Waste & Abuse

Crushing Fraud Chili Cook-Off Competition

### Claims, Pricers & Codes

- Seasonal Flu Vaccine Pricing for 2025–2026 Season
- Integrated Outpatient Code Editor: Correcting Errors for Reason Code W7113
- Home Health Prospective Payment System Grouper: October Update

#### **Publications & Multimedia**

- Evaluation and Management Services Revised
- Part C Organization Determinations, Appeals & Grievances Revised
- Part D Coverage Determinations, Appeals & Grievances Revised

# MLN Connects - August 28, 2025

MLN Connects® Newsletter for Thursday, August 28, 2025

#### News

 HHS Drives Reform to Restore Patient-Centered Care, Announces Request for Nominations of Members to Serve on Federal Healthcare Advisory Committee

#### Claims, Pricers & Codes

- Rural Health Clinic & Federal Qualified Health Center: Adjusting Claims for Care Coordination Services
- HCPCS Application Summaries & Coding Determinations: Non-Drug & Non-Biological Items and Services

#### MLN Matters® Articles

- Home-Based Noninvasive Positive Pressure Ventilation to Treat Chronic Respiratory Failure Due to Chronic Obstructive Pulmonary Disease
- ICD-10 & Other Coding Revisions to National Coverage Determinations: January 2026 Update
- National Coverage Determination 20.38: Transcatheter Edge-to-Edge Repair for Tricuspid Valve Regurgitation

#### **Publications & Multimedia**

 A Prescriber's Guide to Medicare Prescription Drug (Part D) Opioid Policies – Revised

# MLN Connects - September 4, 2025

MLN Connects® Newsletter for Thursday, September 4, 2025

#### Fraud, Waste & Abuse

• Ambulatory Surgical Centers: Prior Authorization Pilot Demonstration

#### Compliance

DME: Complying with Proof of Delivery Requirements

#### Claims, Pricers & Codes

• National Correct Coding Initiative: October Update

#### MLN Matters® Articles

 Implementing the Transforming Episode Accountability Model: Skilled Nursing Facility 3-Day Rule Waiver

#### **Publications & Multimedia**

Complying with Medicare Signature Requirements – Revised

# MLN Connects - September 11, 2025

MLN Connects® Newsletter for Thursday, September 11, 2025

#### News

 Clinical Laboratory Fee Schedule: Submit Comments & Reconsideration Requests by October 9

### Fraud, Waste & Abuse

CMS IDea Challenge: Submit Interest Form by September 26

## Compliance

Orthopedic Footwear: Prevent Claim Denials

### Claims, Pricers & Codes

- COVID-19 Vaccine Pricing for 2025–2026 Season
- Ambulatory Surgical Center: Medicare Approved New High-Cost Gene Therapy Drug
- Medicare Part B Drug Pricing Files & Revisions: October Update
- Medicare Physician Fee Schedule Database: October Update
- Clinical Laboratory Fee Schedule: Revised Third Quarter File

#### MLN Matters® Articles

• National Fee Schedule for Vaccine Administration: October 2025 Update

# MLN Connects - September 18, 2025

MLN Connects® Newsletter for Thursday, September 18, 2025

- News
- Information for Critical Access Hospitals
- Prostate Cancer: Talk to Your Patients about Screening

## **MLN Matters® Articles**

- Clinical Laboratory Fee Schedule & Laboratory Services Subject to Reasonable Charge Payment: October 2025 Update
- DMEPOS Fee Schedule: October 2025 Quarterly Update

#### **Publications & Multimedia**

- Evaluation and Management Services Revised
- Ground Ambulance Data Collection System Codebook Updated

## MLN Connects - September 25, 2025

MLN Connects® Newsletter for Thursday, September 25, 2025

#### News

- Outpatient Therapy Services: Clarifying Qualifications for Speech-Language Pathologists
- Cognitive Assessment: Recommend Medicare-Covered Services for Your Patients

#### Fraud, Waste & Abuse

Duplicate Enrollment in Medicaid & Marketplace: New Fast Facts

## Compliance

Manual Wheelchairs: Prevent Claim Denials

#### Claims, Pricers & Codes

- Clinical Laboratory Fee Schedule: COVID-19 & Influenza Virus Types A and B Test Code
- Drug Claims: Billing for Zero Charges

#### MLN Matters® Articles

- Hospice Payments: FY 2026 Update
- Inpatient & Long-Term Care Hospital Prospective Payment Systems: FY 2026 Changes
- Medicare Claims Processing Manual, Chapter 18 Update: Hepatitis C Virus Preventive & Screening Services
- Medical Severity Diagnosis-Related Groups Subject to Inpatient Prospective Payment System Replaced Devices Policy: FY 2026 Update

### **From Our Federal Partners**

Ebola Outbreak in the Democratic Republic of the Congo

# ASC Payment System: July 2025 Update - Revised

Related CR Release Date: August 1, 2025
MLN Matters Number: MM14101 Revised

Effective Date: July 1, 2025

Related Change Request (CR) Number: CR 14101

Implementation Date: July 7, 2025

Related CR Transmittal Numbers: R13259CP & R13344CP

**Note**: CMS revised this article to update the number of new HCPCS codes and coding information in the drugs, biologicals, and radiopharmaceuticals section. CMS also updated the CR release date, transmittal numbers, and transmittal links. Substantive content changes are in dark red (page 3).

CR 14101 tells you about:

- Ambulatory Surgical Center (ASC) payment indicator (PI) change and new CPT code pairs for HCPCS code C1739
- New CPT code pair for HCPCS code C1602
- New CPT category III codes
- Drugs, biologicals, and radiopharmaceuticals
- Skin substitute products

Make sure your billing staff knows about these payment system updates effective July 1, 2025.

View the complete CMS Medicare Learning Network (MLN) Matters (MM)14101.

# Billing the Laboratory Specimen Collection Travel Allowance to the 10th of a Mile

Related CR Release Date: July 24, 2025

MLN Matters Number: MM14130 Effective Date: January 1, 2026

Related Change Request (CR) Number: CR 14130

Implementation Date: January 5, 2026

Related CR Transmittal Number: R13320CP

CR 14130 tells you about:

• Allowing you to bill HCPCS code P9603 calculated to the 10th of a mile

- How to properly bill to the 10th of a mile
- When to bill using a whole number of miles

Make sure your billing staff knows about these changes effective January 1, 2026.

View the complete CMS Medicare Learning Network (MLN) Matters (MM)14130.

# **CLFS Subject to Reasonable Charge Payment: October 2025 Update**

Related CR Release Date: September 5, 2025

MLN Matters Number: MM14211 Effective Date: October 1, 2025

Related Change Request (CR) Number: CR 14211

Implementation Date: October 6, 2025

Related CR Transmittal Number: R13362CP

CR 14211 tells you about:

- When the next Clinical Laboratory Fee Schedule (CLFS) reporting period for clinical diagnostic laboratory tests (CDLTs) begins
- New and deleted CPT codes effective October 1, 2025

Make sure your billing staff knows about these changes.

View the complete CMS Medicare Learning Network (MLN) Matters (MM)14211.

# **DMEPOS Fee Schedule: October 2025 Quarterly Update**

Related CR Release Date: September 5, 2025

MLN Matters Number: MM14214 Effective Date: October 1, 2025

Related Change Request (CR) Number: CR 14214

Implementation Date: October 6, 2025

Related CR Transmittal Number: R13388CP

CR 14214 tells you about:

- Added and deleted HCPCS codes
- Corrected 2024 deflation factors originally found in the January 2025 DMEPOS fee schedule quarterly update

Make sure your billing staff knows about these updates effective October 1, 2025

View the complete CMS Medicare Learning Network (MLN) Matters (MM)14214.

# ICD-10 & Other Coding Revisions to NCDs: January 2026 Update (1 of 2)

Related CR Release Date: August 21, 2025

MLN Matters Number: MM14197 Effective Date: January 1, 2026

Related Change Request (CR) Number: CR 14197

Implementation Date: January 5, 2026

**Related CR Transmittal Number: R133750TN** 

CR 14197 provides a maintenance update of ICD-10 conversions and other coding updates specific to National Coverage Determinations (NCDs). These NCD coding changes are the result of newly available codes, coding revisions to NCDs released separately, or coding feedback received.

Make sure your billing staff knows about updates to NCDs) with new or deleted ICD-10 diagnosis codes effective January 1, 2026.

View the complete <a href="Months:CMS Medicare Learning Network">CMS Medicare Learning Network</a> (MLN) <a href="Matters">Matters</a> (MM)14197.

# ICD-10 & Other Coding Revisions to National Coverage Determinations: January 2026 Update (2 of 2) - Revised

Related CR Release Date: August 26, 2025 MLN Matters Number: MM14194 Revised

Effective Date: January 1, 2026

Related Change Request (CR) Number: CR 14194

Implementation Date: January 5, 2026

Related CR Transmittal Numbers: R13360OTN & R13383OTN

**Note**: CMS made no substantive changes to the article other than to update the CR release date, transmittal numbers, and transmittal links.

CR 14194 provides a maintenance update of ICD-10 conversions and other coding updates specific to National Coverage Determinations (NCDs). These NCD coding changes are the result of newly available codes, coding revisions to NCDs released separately, or coding feedback received.

Make sure your billing staff knows about updates to NCDs) with new or deleted ICD-10 diagnosis codes effective January 1, 2026.

View the complete CMS Medicare Learning Network (MLN) Matters (MM)14194.

# Laboratory National Coverage Determination Edit Software Updates: October 2025

Related CR Release Date: July 21, 2025

MLN Matters Number: MM14153 Effective Date: October 1, 2025

Related Change Request (CR) Number: CR 14153

Implementation Date: October 6, 2025

Related CR Transmittal Number: R13292CP

Related CR Title: Changes to the Laboratory National Coverage Determination (NCD) Edit

Software for October 2025

CR 14153 tells you about:

 Make sure your billing staff knows about National Coverage Determinations (NCDs) with added and deleted ICD-10-CM codes.

View the complete CMS Medicare Learning Network (MLN) Matters (MM)14153.

# Medicare Claims Processing Manual, Chapter 18 Update: HCV Preventive & Screening Services

Related CR Release Date: September 18, 2025

MLN Matters Number: MM14119

Effective Date: June 27, 2024

Related Change Request (CR) Number: CR 14119

Implementation Date: October 20, 2025
Related CR Transmittal Number: R13423CP

CR 14119 tells you about:

- Incorporating place of service (POS) code 19 as an approved setting for Hepatitis C Virus (HCV) screening services
- Adding HCPCS code G0567 for HCV screening procedures

Make sure your billing staff knows about these updates to the Medicare Claims Processing Manual effective June 27, 2024.

View the complete CMS Medicare Learning Network (MLN) Matters (MM)14119.

# **National Coverage Determination 20.37: TTVR**

Related CR Release Date: July 31, 2025

MLN Matters Number: MM14149 Effective Date: March 19, 2025

Related Change Request (CR) Number: CR 14149

Implementation Date: January 5, 2026

Related CR Transmittal Number: R13343CP & R13343NCD

CR 14149 tells you about:

Criteria

Coverage with evidence development (CED) study criteria

Claims processing requirements

Make sure your billing staff knows about the national coverage of transcatheter tricuspid valve replacement (TTVR).

View the complete CMS Medicare Learning Network (MLN) Matters (MM)14149.

# NCD 20.38: Transcatheter Edge-to-Edge Repair for T-TEER

Related CR Release Date: August 14, 2025

MLN Matters Number: MM14200

Effective Date: July 2, 2025

Related Change Request (CR) Number: CR 14200

Implementation Date: January 5, 2026

Related CR Transmittal Number: R13366CP & R13366NCD

CR 14200 tells you about:

Criteria

- Coverage with evidence development (CED) study criteria
- Claims processing requirements

Make sure your billing staff knows about National Coverage Determination (NCD) of transcatheter edge-to-edge repair for tricuspid valve regurgitation (T-TEER).

Make sure your billing staff know about these changes.

View the complete CMS Medicare Learning Network (MLN) Matters (MM)14200.

### **Noridian Part B Customer Service Contact**

<u>Provider Contact Center (PCC)</u> - View hours of availability, call flow, authentication details and customer service areas of assistance.

<u>Email Addresses</u> - Providers may submit emails to Noridian for answers regarding basic Medicare regulations and coverage information. View this page for details and request form.

<u>Fax Numbers</u> - View fax numbers and submission guidelines.

<u>Holiday Schedule</u> - View holiday dates that Noridian operations, including PCC phone lines, will be unavailable for customer service.

<u>Interactive Voice Response (IVR)</u> - View conversion tool and information on how to use IVR and what information is available through system. General IVR inquiries available 24/7.

<u>Mailing Addresses</u> - View mail addresses for submitting written correspondence, such as claims, letters, questions, general inquiries, enrollment applications and changes, written redetermination requests and checks to Noridian.

# **Medicare Learning Network Matters Disclaimer Statement**

Below is the Centers for Medicare & Medicaid (CMS) Medicare Learning Network (MLN) Matters Disclaimer statement that applies to all MLN Matters articles in this bulletin.

"This article was prepared as a service to the public and is not intended to grant rights or impose obligations. MLN Matters articles may contain references or links to statutes, regulations or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents."

## Sources for "Medicare B News" Articles

The purpose of "Medicare B News" is to educate the Noridian Medicare Part B provider community. The educational articles can be advice written by Noridian staff or directives from CMS. Whenever Noridian publishes material from CMS, we will do our best to retain the wording given to us; however, due to limited space in our bulletins, we will occasionally edit this material. Noridian includes "Source" following CMS derived articles to allow for those interested in the original material to research it on the CMS

Manuals webpage. CMS Change Requests and the date issued will be referenced within the "Source" portion of applicable articles.

CMS has implemented a series of educational articles within the Medicare Leaning Network (MLN), titled "MLN Matters," which will continue to be published in Noridian bulletins. The Medicare Learning Network is a brand name for official CMS national provider education products designed to promote national consistency of Medicare provider information developed for CMS initiatives.

# **Unsolicited or Voluntary Refunds Reminder**

All Medicare providers need to be aware that the acceptance of a voluntary refund as repayment for the claims specified in no way affects or limits the rights of the Federal Government, or any of its agencies or agents, to pursue any appropriate criminal, civil, or administrative remedies arising from or relating to these or any other claims.

## **Background**

Medicare carriers and intermediaries and AB MACs receive unsolicited or voluntary refunds from providers. These voluntary refunds are not related to any open accounts receivable. Providers billing intermediaries typically make these refunds by submitting adjustment bills, but they occasionally submit refunds via check. Providers billing carriers usually send these voluntary refunds by check.

Related Change Request (CR) 3274 is intended mainly to provide a detailed set of instructions for Medicare carriers and intermediaries regarding the handling and reporting of such refunds. The implementation and effective dates of that CR apply to the carriers and intermediaries. But, the important message for providers is that the submission of such a refund related to Medicare claims in no way limits the rights of the Federal Government, or any of its agencies or agents, to pursue any appropriate criminal, civil, or administrative remedies arising from or relating to those or any other claims.

#### **Additional Information**

The official CMS CR3274 instruction may be viewed in the Medicare Learning Network (MLN) Matters article MM3274.

Effective Date: January 1, 2005

Implementation Date: January 4, 2005

**Sources**: Transmittal 50, CR 3247 dated July 30, 2004; Internet Only Manual (IOM) Medicare Financial Management Manual, Publication 100-06, Chapter 5, Section 410

## **Do Not Forward Initiative Reminder**

The Internet Only Manual (IOM) Medicare Claims Processing Manual, Publication 100-04 instructs Part A and Part B Medicare Administrative Contractors (A/B MACs) and carriers to use "return service requested" envelopes when mailing paper checks and remittance advices to providers.

When the post office returns a "return service requested" envelope, the A/B MAC/carrier applies a "do not forward" (DNF) flag to the provider's Medicare enrollment file. The A/B MAC/carrier will not generate any additional checks for that provider until the provider sends a properly completed change of address form back to the A/B MAC/carrier. We are not required to contact the provider to notify them that the flag has been added to their file.

Upon verifying the new address, the A/B MAC/carrier removes the DNF flag and can again generate payments for the provider. Electronic Funds Transfer (EFT) is required; therefore, when the address change update is completed, the provider will be set up to use EFT and will no longer receive paper checks.

**Note**: Because many providers get paid through EFT, there may be cases where a provider does not have a correct address on file, but the A/B MAC/carrier continues to pay the provider through EFT. It is still the provider's responsibility to submit and address change update so that remittance notices and special checks would be sent to the proper address.

Noridian encourages providers to enroll or make changes using Internet-based Provider Enrollment, Chain and Ownership System (PECOS) for faster processing time. Applications and changes completed online currently have an average processing time of 10 days. All Medicare providers may use the new enrollment process on the CMS <a href="Medicare Enrollment">Medicare Enrollment</a> website. To log into this internet-based PECOS, providers will use their NPI Userid and password.

#### **Policy**

Effective October 1, 2002, A/B MACs/carriers must use "return service requested" envelopes for hardcopy remittance advices and checks, with respect to providers that have elected to receive hardcopy remittance advices. (PM B-02-023, CR 2038 dated April 12, 2002; Transmittal 1794, CR 2684 dated May 2, 2003)

#### Implementation Process

1. "Return service requested" envelopes are used for all hardcopy remittance advices starting October 1, 2002. These envelopes will be used for all providers.

- "Return service requested" envelopes will not be used for beneficiary correspondence, such as Medicare Summary Notices (MSNs) or for overpayment demand letters.
- 3. When the post office returns a remittance advice due to an incorrect address, A/B MACs/carriers will follow the same procedures as followed for returned checks, that is:
  - Flag the provider's file DNF.
  - A/B MAC/carrier staff will notify provider enrollment team.
  - A/B MAC/carriers will cease generating any further payments or remittance advice to that provider or supplier until furnished with a new, verified address.
- 4. When the provider establishes a new, verified address, A/B MACs/carriers will remove the DNF flag and pay the provider any funds which are still being held due to a DNF flag. A/B MAC/carriers must also reissue any remittance advices, which have been held.
- 5. Previously, CMS only required corrections to the "pay to" address. However, with the implementation of this initiative, CMS requires corrections to all addresses before the contractor can remove the DNF flag and begin paying the provider or supplier again. Therefore, A/B MAC/carriers cannot release any payments to DNF providers until the provider enrollment department has verified and updated all addresses for that provider's location.

#### **IRS-1099 Reporting**

Provider or supplier checks returned and voided during the same year they were issued are not reported on the Internal Revenue Service (IRS) Form 1099 until the returned check is reissued (i.e., the DNF flag is removed and the A/B MAC/carrier reissues payment to the provider.) Checks returned and voided in the current year that were issued in prior years are not netted from the current year's IRS Form 1099.

Monies withheld because a DNF flag exists on a provider or supplier record are not reported on IRS-1099s until the calendar year in which payment is made (i.e., the point at which the A/B MAC/carrier pays the provider once the DNF flag is removed.) If DNF amounts are erroneously included on IRS-1099 forms, A/B MACs/carriers will issue corrected IRS Form 1099s to affected providers.

**Source**: IOM Medicare Claims Processing Manual, Publication 100-04, Chapter 22, Section 50.1

# **Jurisdiction F Part B Quarterly Ask the Contractor Meetings (ACM)**

ACMs are designed to open communication between providers and Noridian, which allows for timely identification of problems, and sharing information in an informal and interactive question and answer (Q&A) format. No Personal Health Information (PHI) is allowed.

Noridian representatives from various Part B departments are available to address your Medicare questions and concerns. All questions are entertained and the Q&As are posted on our website for provider convenience.

ACM dates, times, toll-free number, and Q&As are available on the <u>Jurisdiction F Part B</u> Ask the Contractor Meetings (ACM) webpage.

Attendees must register through a free web-based training tool (GoToWebinar) which requires an Internet connection and a toll-free telephone number (provided in confirmation email). Allow email <a href="mailto:registrations@noridian.com">registrations@noridian.com</a>. Unless otherwise specified, ACMs are general in nature. No CEUs are provided.

By completing and submitting the Noridian Part B <u>ACM Question Submission Form</u>, providers may ask question(s), up to five (5) days prior, to be answered during the next ACM. Questions submitted with this form will be answered first. Lines will then be opened for additional questions, as time permits. **Do not include any Personal Health Information (PHI) or claim specific inquiries on this form. If you have claim specific questions, contact the Provider Contact Center.** 

We look forward to your participation in these important calls.

Medicare Part B ACMs do not address Medicare Part A or Durable Medical Equipment (DME) inquiries.

If you are interested in attending a Part A or a DME ACM, select the appropriate link below for more information.

- Jurisdiction F Part A ACMs
- Jurisdiction D DME ACMs
- Jurisdiction A DME ACMs