

<b>CMS Manual System</b>	<b>Department of Health &amp; Human Services (DHHS)</b>
<b>Pub 100-04 Medicare Claims Processing</b>	<b>Centers for Medicare &amp; Medicaid Services (CMS)</b>
<b>Transmittal 11544</b>	<b>Date: August 4, 2022</b>
	<b>Change Request 12869</b>

**SUBJECT: Quarterly Update to the Medicare Physician Fee Schedule Database (MPFSDB) - October 2022 Update**

**I. SUMMARY OF CHANGES:** Payment files were issued to contractors based upon the 2022 Medicare Physician Fee Schedule (MPFS) Final Rule. The purpose of this Change Request (CR) is to amend those payment files. This recurring update notification applies to Publication (Pub.) 100-04, Medicare Claims Processing Manual, chapter 23, section 30.1.

**EFFECTIVE DATE: October 1, 2022**

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

**IMPLEMENTATION DATE: October 3, 2022**

*Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.*

**II. CHANGES IN MANUAL INSTRUCTIONS:** (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-*Only One Per Row.*

<b>R/N/D</b>	<b>CHAPTER / SECTION / SUBSECTION / TITLE</b>
N/A	N/A

**III. FUNDING:**

**For Medicare Administrative Contractors (MACs):**

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**IV. ATTACHMENTS:**

**Recurring Update Notification**

# Attachment - Recurring Update Notification

Pub. 100-04	Transmittal: 11544	Date: August 4, 2022	Change Request: 12869
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**EFFECTIVE DATE: October 1, 2022**

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**IMPLEMENTATION DATE: October 3, 2022**

## I. GENERAL INFORMATION

**A. Background:** Payment files were issued to contractors based upon the CY 2022 Medicare Physician Fee Schedule (MPFS) Final Rule, published in the Federal Register on November 19, 2021 to be effective for services furnished between January 1, 2022 and December 31, 2022.

**B. Policy:** Section 1848(c)(4) of the Social Security Act authorizes the Secretary to establish ancillary policies necessary to implement relative values for physicians' services.

## II. BUSINESS REQUIREMENTS TABLE

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

Number	Requirement	Responsibility									
		A/B MAC			D M E	Shared- System Maintainers				Other	
		A	B	H H H		F M V C	I C S S	M S S	W F		
12869.1	The CMS shall notify the Medicare contractors via e-mail when the revised payment files are available for their retrieval.  Note: These files will be available on or around August 19, 2022. (See attachment for a summary of changes and effective dates.)										CMS
12869.1.1	Medicare contractors shall retrieve the revised payment files and update their systems (manually or via provided files), as identified in this Change Request, from the CMS Mainframe Telecommunications System.	X	X	X		X					
12869.2	The contractors shall notify CMS of successful receipt via e-mail to <a href="mailto:price_file_receipt@cms.hhs.gov">price_file_receipt@cms.hhs.gov</a> , stating the name of the file received (e.g., CLAB, Average Sales Price (ASP), etc.), and the entity for which it was received (i.e., include states, carrier numbers, quarter, and if Part A, Part B, or both).	X	X	X							

Number	Requirement	Responsibility								
		A/B MAC			D M E M A C	Shared-System Maintainers				Other
		A	B	H H H		F I S S	M C S	V M S	C W F	
12869.3	Medicare contractors shall not search their files to retract payment for claims already paid or to retroactively pay claims. However, contractors shall adjust claims brought to their attention.	X	X	X						
12869.4	The contractors shall, in accordance with Pub 100-04, Medicare Claims Processing Manual, chapter 23, section 30.1, give providers a 30-day notice before implementing the changes identified in this Change Request.	X	X	X						
12869.5	The CMS shall notify the Common Working File (CWF) maintainer via e-mail when the MPFSDB files are available for downloading, along with the file names for the files below to facilitate duplicate billing edits:  1) Duplicate Radiology editing;  2) Duplicate Diagnostic editing;  3) Pathology editing, and;  4) Relative Value Units (RVU) and payment indicator files.								CMS	
12869.5.1	The CWF shall compare the existing files to the new files and install any necessary changes.							X		

### III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility				
		A/B MAC			D M E M A C	C E D I
		A	B	H H H		
12869.6	Medicare Learning Network® (MLN): CMS will market provider education content through the MLN Connects® newsletter shortly after CMS releases the CR. MACs shall follow IOM Pub. No. 100-09 Chapter 6, Section 50.2.4.1 instructions for distributing the MLN Connects newsletter information to providers and link to relevant information on your website. You may supplement MLN content with your local information after we release the MLN	X	X	X		

Number	Requirement	Responsibility				
		A/B MAC			D M E	C E D I
		A	B	H H H		
	Connects newsletter. Subscribe to the “MLN Connects” listserv to get MLN content notifications. You don’t need to separately track and report MLN content releases when you distribute MLN Connects newsletter content per the manual section referenced above.					

#### IV. SUPPORTING INFORMATION

##### Section A: Recommendations and supporting information associated with listed requirements:

*"Should" denotes a recommendation.*

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

##### Section B: All other recommendations and supporting information: N/A

#### V. CONTACTS

**Pre-Implementation Contact(s):** Michael Soracoe, 410 786-6312 or Michael.Soracoe@cms.hhs.gov , Kathleen Kersell, 410-786-2033 or kathleen.kersell@cms.hhs.gov , Julie Adams, 410-786-8932 or julie.adams@cms.hhs.gov

**Post-Implementation Contact(s):** Contact your Contracting Officer's Representative (COR).

#### VI. FUNDING

##### Section A: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

**ATTACHMENTS: 1**

**Attachment for CR: 12869      Quarterly Update to the Medicare Physician Fee Schedule  
Database (MPFSDB) – October 2022 Update**

Below is a summary of the changes for the October update to the 2022 MPFSDB. Unless otherwise stated, these changes are effective for dates of service on and after January 1, 2022.

There is a revision to the short descriptor for the following HCPCS code effective October 1, 2022:

**CODE    DESCRIPTOR**

Q4128 Flexhd/allopachhd/sq cm

The following are HCPCS codes from the July 2022 HCPCS file update.

Please see the link below for more information on the new codes:

<https://www.cms.gov/Medicare/Coding/HCPCSReleaseCodeSets/HCPCS-Quarterly-Update>

**CODE    ACTION**

**Effective Date**

G9678 Proc Stat = I

July 01, 2022

0074A Proc Stat = X; payment policy indicators do not apply

May 17, 2022

The following new HCPCS codes are from the October 2022 HCPCS file update. They are effective for dates of service May 11, 2022, and after.

**CODE    ACTION**

G0310 Proc Stat = I; payment policy indicators do not apply

G0311 Proc Stat = I; payment policy indicators do not apply

G0312 Proc Stat = I; payment policy indicators do not apply

G0313 Proc Stat = I; payment policy indicators do not apply

G0314 Proc Stat = I; payment policy indicators do not apply

G0315 Proc Stat = I; payment policy indicators do not apply

The following new HCPCS codes are from the October 2022 HCPCS file update. They are effective for dates of service June 17, 2022, and after.

**CODE    ACTION**

91308 Proc Stat = X; payment policy indicators do not apply.

91311 Proc Stat = X; payment policy indicators do not apply.

0081A Proc Stat = X; payment policy indicators do not apply.

0082A Proc Stat = X; payment policy indicators do not apply.

0083A Proc Stat = X; payment policy indicators do not apply.

0091A Proc Stat = X; payment policy indicators do not apply.

0092A Proc Stat = X; payment policy indicators do not apply.

0093A Proc Stat = X; payment policy indicators do not apply.

0111A Proc Stat = X; payment policy indicators do not apply.

0112A Proc Stat = X; payment policy indicators do not apply.

0113A Proc Stat = X; payment policy indicators do not apply.

The following new HCPCS codes are from the October 2022 HCPCS file update. They are effective for dates of service July 13, 2022, and after.

**CODE    ACTION**

91304 Proc Stat = X; payment policy indicators do not apply.

0041A Proc Stat = X; payment policy indicators do not apply.

0042A Proc Stat = X; payment policy indicators do not apply.

The following new HCPCS codes are from the October 2022 HCPCS file update. They are effective for dates of service October 1, 2022, and after.

**CODE ACTION**

A9602 Proc Stat = X; payment policy indicators do not apply.  
A9607 Proc Stat = X; payment policy indicators do not apply.  
A9800 Proc Stat = X; payment policy indicators do not apply.  
J1302 Proc Stat = E; payment policy indicators do not apply.  
J1932 Proc Stat = E; payment policy indicators do not apply.  
J2777 Proc Stat = E; payment policy indicators do not apply.  
J9274 Proc Stat = E; payment policy indicators do not apply.  
J9298 Proc Stat = E; payment policy indicators do not apply.  
Q2056 Proc Stat = E; payment policy indicators do not apply.  
Q5125 Proc Stat = E; payment policy indicators do not apply.