CMS Manual System	Department of Health & Human Services (DHHS)
Pub 100-04 Medicare Claims Processing	Centers for Medicare & Medicaid Services (CMS)
Transmittal 1376	Date: NOVEMBER 16, 2007
	Change Request 5736

Subject: Instructions for Downloading the Medicare ZIP Code File for April 2008

I. SUMMARY OF CHANGES: This instruction describes the process for updating the two Medicare ZIP code files (ZIP5 and ZIP9) for the April 2008 quarter.

New / Revised Material Effective Date: April 1, 2008

Implementation Date: April 7, 2008

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

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

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

R/N/D	Chapter / Section / Subsection / Title
N/A	

III. FUNDING:

SECTION A: For Fiscal Intermediaries and Carriers:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their operating budgets.

SECTION B: 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

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

Attachment – Recurring Update Notification

SUBJECT: Instructions for Downloading the Medicare ZIP Code File for April 2008

Effective Date: April 1, 2008

Implementation Date: April 7, 2008

I. GENERAL INFORMATION

A. Background: Each calendar quarter, CMS issues an updated, 5-digit ZIP code file (ZIP5) and 9-digit ZIP code File (ZIP9), used for pricing Medicare claims.

Every 2 months, CMS obtains an updated listing of ZIP codes from the U.S. Postal Service (USPS). On the basis of the updated USPS file, CMS updates the Medicare ZIP code files and makes them available to contractors.

Approximately 6 weeks prior to the beginning of each calendar quarter (i.e., approximately 6 weeks prior to January 1, April 1, July 1, and October 1), CMS will make available the updated ZIP5 and ZIP9 files. Thus, the updated files will be available on November 15th for the January 1 release, February 15th for the April 1 release, May 15th for the July 1 release, and August 15th for the October 1 release.

When the updated files are loaded to the Connect: Direct, it will add to the inventory of ZIP code files on the mainframe. The name of the ZIP5 file is MU00.@AAA2390.ZIP5.LOCALITY.Vyyyyr, where "yyyy" equals the calendar year and "r" equals the release number with January = 1, April = 2, July = 3, and October = 4. Also the name of the ZIP9 file is MU00.@AAA2390.ZIP9.LOCALITY.Vyyyyr.

NOTE: Even the most recently updated ZIP code files will not contain ZIP codes established by the USPS after CMS compiled the file. Therefore, for ZIP codes reported on claims that are not on the most recent ZIP code files, follow the instructions in the CMS Manual System, Publication 100-4, chapter 15, section 20.1.5.

B. Policy: This instruction describes the process for updating the Medicare ZIP Code files.

NOTE: For information regarding usage of the ZIP9 File, please refer to Transmittal 1193 (R1193CP), CR 5208 released March 9, 2007.

II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A /	D M	F I	C A	D M	R H			Syste: ainers		OTHER
		B M A	E M A		R R I	E R C	H	F I S	M C S	V M S	C W F	
		C	C		R			S				
5736.1	Contractors shall use the most recent version of the Medicare ZIP5 code files to process ambulance claims.	X		X	X			X	X			
5736.1.1	Contractors shall do jurisdictional pricing for other benefit categories where instructions direct the use of the ZIP code files.	X		X	X			X	X			
5736.2	Contractors shall go to the Connect: Direct and search for the ZIP code files approximately six (6) weeks before the beginning of each calendar quarter.	X		X	X			X	X			
5736.2.1	Contractors shall confirm that the release number (the last 5 digits) corresponds to the upcoming calendar quarter.	X		X	X			X	X			
5736.2.2	Contractors shall notify Eric Coulson by dialing 410-786-3352 or email at Eric.Coulson@cms.hhs.gov , if the release number (the last 5 digits) does not correspond to the upcoming calendar	X		X	X			X	X			

Number	Requirement		spons umn		ty (p	lace a	an "I	ζ" in	each	app	licab	ole
		A /	D M	F I	C A	D M	R H			Syster ainers		OTHER
		B M A C	E M A C		R R I E R	E R C	H I	F I S S	M C S	V M S	C W F	
5736.2.3	quarter. Contractors shall download the <i>following</i> files and incorporate the files into their testing regime for the upcoming model release: • The ZIP5 file for the April 2008 release: MU00.@AAA2390.ZIP5.LOCALITY.V20082 (The release number for this file is 20082, i.e., release 2 for the year 2008). • The ZIP9 file for the April 2008 release: MU00.@AAA2390.ZIP9.LOCALITY.V20082 (The release number for this file is 20082, i.e., release 2 for the year 2008).	X		X	X			X	X			EDC

III. PROVIDER EDUCATION TABLE

Number	Requirement	Responsibility (place an "X" in each applicable column)										
		A /	D M	F I	C A	D M	R H			Systen ainers		OTHER
		B M A	E M A		R R I E	E R C	H	F I S S	M C S	V M S	C W F	
	NONE	C	C		R							

IV. SUPPORTING INFORMATION

A. For any recommendations and supporting information associated with listed requirements, use the box below: *Use "Should" to denote a recommendation.*

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

B. For all other recommendations and supporting information, use this space: N/A

V. CONTACTS

Pre-Implementation Contact(s): Eric Coulson (410) 786-3352 or email at Eric.Coulson@cms.hhs.gov

Post-Implementation Contact(s): For availability of the file: Eric Coulson by dialing 410-786-3352 or email at Eric.Coulson@cms.hhs.gov; For the accuracy of zip code entries or for urban/rural designations: Glenn McGuirk (410) 786-5723.

VI. FUNDING

A. For Fiscal Intermediaries, Carriers, and the Durable Medical Equipment Regional Carrier (DMERC), use only one of the following statements:

No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2008 operating budgets.

B. For Medicare Administrative Contractors (MAC), use the following statement:

The contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the Statement of Work (SOW). 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.