| CMS Manual System | Department of Health & Human Services (DHHS) |
| --- | --- |
| Pub 100-04 Medicare Claims Processing | Centers for Medicare & Medicaid Services (CMS) |
| Transmittal 2172 | Date: March 11, 2011 |
| | Change Request 7344 |

**SUBJECT: April 2011 Integrated Outpatient Code Editor (I/OCE) Specifications Version 12.1**

**I. SUMMARY OF CHANGES:** This notification provides the Integrated OCE instructions and specifications for the Integrated OCE that will be utilized under the OPPS and Non-OPPS for hospital outpatient departments, community mental health centers, and for all non-OPPS providers, and for limited services when provided in a home health agency not under the Home Health Prospective Payment System or to a hospice patient for the treatment of a non-terminal illness.   This Recurring Update Notification applies to Chapter 4, Section 40.1.

**EFFECTIVE DATE: *April 1, 2011**
**IMPLEMENTATION DATE: April 4, 2011**

*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:**
**For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers:**
No additional funding will be provided by CMS; Contractor activities are to be carried out within their operating budgets.

**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

| Pub. 100-04 | Transmittal: 2172 | Date: March 11, 2011 | Change Request: 7344 |
|---|---|---|---|

**SUBJECT:  April 2011 Integrated Outpatient Code Editor (I/OCE) Specifications Version 12.1**

**EFFECTIVE DATE: April 1, 2011**

**IMPLEMENTATION DATE: April 4, 2011**

## I.    GENERAL INFORMATION

**A.      Background:**  This instruction informs the Fiscal Intermediaries (FIs), A/B MACs, and the Fiscal Intermediary Standard System (FISS) that the I/OCE was updated for April 1, 2011.  The I/OCE routes all institutional outpatient claims (which includes non-OPPS hospital claims) through a single integrated OCE which eliminates the need to update, install, and maintain two separate OCE software packages on a quarterly basis.  Claims with dates of service prior to July 1, 2007, should be routed through the non-integrated versions of the OCE software (OPPS and non-OPPS OCEs) that coincide with the versions in effect for the date of service on the claim.  **The integration did not change the logic that is applied to outpatient bill types that previously passed through the OPPS OCE software.  It merely expanded the software usage to include non-OPPS hospitals.**

**B.      Policy:**  This notification provides the Integrated OCE instructions and specifications for the Integrated OCE that will be utilized under the OPPS and Non-OPPS for hospital outpatient departments, community mental health centers, all non-OPPS providers, and for limited services when provided in a home health agency not under the Home Health Prospective Payment System or to a hospice patient for the treatment of a non-terminal illness.  The I/OCE specifications will be posted to the CMS Website and can be found at http://www.cms.hhs.gov/OutpatientCodeEdit/.

## II.   BUSINESS REQUIREMENTS TABLE

| Number | Requirement | A/B MAC | DME MAC | FI | CARRIER | RHHI | FISS | MCS | VMS | CWF | OTHER |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | | | | | | Shared-System Maintainers | | | | |
| 7344.1 | The Shared System Maintainer shall install the Integrated OCE (I/OCE) into their systems. | | | | | | X | | | | |
| 7344.2 | Medicare contractors shall identify the I/OCE specifications on the CMS Website at http://www.cms.gov/OutpatientCodeEdit/ | X | | X | | X | X | | | | |

## III.    PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility (place an "X" in each applicable column) | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | | A / B MAC | D M E MAC | F I | C A R R I E R | R H H I | Shared-System Maintainers | | | | OTHER |
| | | | | | | | F I S S | M C S | V M S | C W F | |
| 7344.3 | A provider education article related to this instruction will be available at http://www.cms.gov/MLNMattersArticles/ shortly after the CR is released.  You will receive notification of the article release via the established "MLN Matters" listserv.<br><br>Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within one week of the availability of the provider education article.  In addition, the provider education article shall be included in your next regularly scheduled bulletin.  Contractors are free to supplement MLN Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly. | X | | X | | X | | | | | |

## IV.    SUPPORTING INFORMATION

**A.  For any recommendations and supporting information associated with listed requirements, use the box below:**

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

**B.  For all other recommendations and supporting information, use this space:**  CR 5344, Transmittal 1107:  Notification of an Integrated Outpatient Code Editor (OCE) for the July 2007 Release

## V.  CONTACTS

**Pre-Implementation Contact(s):**
Yvonne Young at yvonne.young@cms.hhs.gov or Anita Antkowiak at Anita.Antkowiak2@cms.hhs.gov

For Policy related questions contact Marina Kushnirova at marina.kushnirova@cms.hhs.gov or Susan Mathew at susan.mathew1@cms.hhs.gov

**Post-Implementation Contact(s):**
Contact your Contracting Officer's Technical Representative (COTR) or Contractor Manager, as applicable.


## VI.  FUNDING

**A.** *For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers***:**

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

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

The Medicare Administrative Contractor (MAC) is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as changes to the MAC Statement of Work (SOW). The contractor is not obligated to incur costs in excess of the amounts specified 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:  Summary of Data Changes**

**Appendix M – Summary of Modifications**

# Appendix M
# Summary of Modifications

The modifications of the IOCE for the April 2011 release (V12.1) are summarized in the table below.
Readers should also read through the entire document and note the highlighted sections, which also indicate changes from the prior release of the software.

Some IOCE modifications in the update may also be retroactively added to prior releases.  If so, the retroactive date will appear in the 'Effective Date' column.

| # | Type | Effective Date | Edits Affected | Modification |
|---|------|----------------|----------------|--------------|
| 1. | Logic | 4/1/11 | 24 | Modify the software to maintain 28 prior quarters (7 years) of programs in each release. Remove older versions with each release. <br> (The earliest version date included in this April 2011 release will be 7/1/04.) |
| 2. | | | | |
| 3. | Content | 4/1/11 | - | Make HCPCS/APC/SI changes as specified by CMS (data change files). |
| 4. | Content | - | 19, 20, 39, 40 | Implement version **17.0** of the NCCI (as modified for applicable institutional providers). |
| 5. | Content | **1/1/11** | 8 | Remove CPT code 88177 from the female-only procedures list. |
| 6. | Content | **1/1/11** | 22 | Add new modifier 33 to the valid modifier list. |
| 7. | Doc | 4/1/11 | - | Create 508-compliant versions of the specifications & Summary of Data Changes documents for publication on the CMS web site. |

**Final**

**Summary of Data Changes**

**Integrated OCE v 12.1**

**Effective April 1, 2011**

# Table of Contents

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# DEFINITIONS

- A blank in a field indicates 'no change'

- The "old" column describes the attribute prior to the change being made in the current update, which is indicated in the "new" column. If the effective date of the change is the same as the effective date of the new update, 'old' describes the attribute up to the last day of the previous quarter. If the effective date is retroactive, then 'old' describes the attribute for the same date in the previous release of the software.

- "Unassigned", "Pre-defined" or "Placeholder" in APC or HCPCS descriptions indicates that the APC or HCPCS code is inactive. When the APC or HCPCS code is activated, it becomes valid for use in the OCE, and a new description appears in the "new description" column, with the appropriate effective date.

- Activation Date (ActivDate) indicates the mid-quarter date of FDA approval for a drug, or the mid-quarter date of a new or changed code resulting from a National Coverage Determination (NCD). The Activation Date is the date the code becomes valid for use in the OCE. If the Activation Date is blank, then the effective date takes precedence.

- Termination Date (TermDate) indicates the mid-quarter date when a code or change becomes inactive. A code is not valid for use in the OCE after its termination date.

- For codes with SI of "Q1, Q2, and Q3", the APC assignment is the standard APC to which the code would be assigned if it is paid separately.

# APC CHANGES

## Added APCs

The following APC(s) were added to the IOCE, **effective 01-01-11**

| APC | APCDesc | StatusIndicator |
|-----|---------|-----------------|
| 01351 | Matristem wound matrix | K |

The following APC(s) were added to the IOCE, **effective 04-01-11**

| APC | APCDesc | StatusIndicator |
|-----|---------|-----------------|
| 09280 | Injection, eribulin mesylate | G |
| 09281 | Injection, pegloticase | G |
| 09282 | Injection, ceftaroline fosamil | G |

# HCPCS/CPT PROCEDURE CODE CHANGES

## Added HCPCS/CPT Procedure Codes

The following new HCPCS/CPT code(s) were added to the IOCE, **effective 04-01-11**

| HCPCS | CodeDesc | SI | APC | Edit | ActivDate | TermDate |
|-------|----------|----|-----|------|-----------|----------|
| C9280 | Injection, eribulin mesylate | G | 09280 | 55 | | |
| C9281 | Injection, pegloticase | G | 09281 | 55 | | |
| C9282 | Inj, ceftaroline fosamil | G | 09282 | 55 | | |
| C9729 | Percut lumbar lami | T | 00208 | 55 | | |
| Q2040 | Incobotulinumtoxin A | G | 09278 | | | |

## Deleted HCPCS/CPT Procedure Codes

The following HCPCS/CPT code(s) were deleted from the IOCE, **effective 01-01-11**

| HCPCS | CodeDesc |
|-------|----------|
| 90470 | Immune admin H1N1 im/nasal |
| 90663 | Flu vacc pandemic H1N1 |

The following HCPCS/CPT code(s) were deleted from the IOCE, **effective 04-01-11**

| HCPCS | CodeDesc |
|-------|----------|
| C9278 | Incobotulinumtoxin A |
| Q1003 | Ntiol category 3 |
| S2270 | Insertion vaginal cylinder |
| S2344 | Endosc balloon sinuplasty |
| S3905 | Auto handheld diag nerv test |

## HCPCS Description Changes

The following code descriptions were changed, **effective 10-01-10**

| HCPCS | Old Description | New Description |
|-------|-----------------|----------------|
| G0435 | Rapid immunoassay HIV-1,2 | Oral HIV-1/HIV-2 screen |

The following code descriptions were changed, **effective 01-01-11**

| HCPCS | Old Description | New Description |
|-------|-----------------|----------------|
| G0431 | Drug screen multip class | Drug screen multiple class |

## HCPCS Changes- APC, Status Indicator and/or Edit Assignments

The following code(s) had an APC and/or SI and/or edit change, **effective 01-01-11** \*\*A blank in the field indicates no change.

| HCPCS | CodeDesc | Old APC | New APC | Old SI | New SI | Old Edit | New Edit |
|-------|----------|---------|---------|--------|--------|----------|----------|
| 80100 | Drug screen qualitate/multi | | | A | E | N/A | 28 |
| 80104 | Drug scrn 1+ class nonchromo | | | | | 9 | 28 |
| 90654 | Flu vaccine no preserv, ID | | | B | E | 62 | 9 |
| A9273 | Hot/cold h2obot/cap/col/wrap | | | E | Y | 9 | 61 |
| G0010 | Admin hepatitis b vaccine | 00000 | 00436 | B | S | 62 | N/A |
| Q4119 | Matristem wound matrix | 00000 | 01351 | E | K | 28 | N/A |

## Hcpcs Edit Changes

The following code(s) were removed from the list of female procedures, **effective 01-01-11**

| Hcpcs |
|-------|
| 88177 |

## Edit Assignments

The following code(s) were added to the conditional bilateral list, **effective 01-01-11**

| HCPCS |
|-------|
| 0245T |
| 0246T |
| 0247T |
| 0248T |
| 29914 |
| 29915 |
| 29916 |
| 31295 |
| 31296 |

5

| HCPCS |
|-------|
| 31297 |
| 37220 |
| 37221 |
| 37222 |
| 37223 |
| 37224 |
| 37225 |
| 37226 |
| 37227 |
| 37228 |
| 37229 |
| 37230 |
| 37231 |
| 37232 |
| 37233 |
| 37234 |
| 37235 |
| 38900 |
| 64568 |
| 64569 |
| 64570 |
| 65778 |
| 65779 |
| 66174 |
| 66175 |

The following code(s) were added to the inherently bilateral list, **effective 01-01-11**

| HCPCS |
|-------|
| 64611 |
| 92132 |
| 92133 |
| 92134 |
| 92227 |
| 92228 |

# MODIFIERS

## Added Modifiers

The following modifier(s) were added to the list of valid modifiers, **effective 01-01-11**

| modif | ACTIVATIONDATE |
|-------|----------------|
| 33    | 0              |