

ADDENDUM D1.—PROPOSED OPPTS PAYMENT STATUS INDICATORS

Indicator	Item/Code/Service	OPPS Payment Status
A	<p>Services furnished to a hospital outpatient that are paid under a fee schedule or payment system other than OPPTS, for example:</p> <ul style="list-style-type: none"> ● Ambulance Services ● Clinical Diagnostic Laboratory Services ● Non-Implantable Prosthetic and Orthotic Devices ● EPO for ESRD Patients ● Physical, Occupational, and Speech Therapy ● Routine Dialysis Services for ESRD Patients Provided in a Certified Dialysis Unit of a Hospital ● Diagnostic Mammography ● Screening Mammography 	<p>Not paid under OPPTS. Paid by fiscal intermediaries/MACs under a fee schedule or payment system other than OPPTS.</p> <p>Not subject to deductible or coinsurance.</p> <p>Not subject to deductible.</p>
B	<p>Codes that are not recognized by OPPTS when submitted on an outpatient hospital Part B bill type (12x and 13x).</p>	<p>Not paid under OPPTS.</p> <ul style="list-style-type: none"> ● May be paid by fiscal intermediaries/MACs when submitted on a different bill type, for example, 75x (CORF), but not paid under OPPTS. ● An alternate code that is recognized by OPPTS when submitted on an outpatient hospital Part B bill type (12x and 13x) may be available.
C	<p>Inpatient Procedures</p>	<p>Not paid under OPPTS. Admit patient. Bill as inpatient.</p>
D	<p>Discontinued Codes</p>	<p>Not paid under OPPTS or any other Medicare payment system.</p>
E	<p>Items, Codes, and Services:</p> <ul style="list-style-type: none"> ● That are not covered by Medicare based on statutory exclusion. ● That are not covered by Medicare for reasons other than statutory exclusion. ● That are not recognized by Medicare but for which an alternate code for the same item or service may be available. ● For which separate payment is not provided by Medicare. 	<p>Not paid under OPPTS or any other Medicare payment system.</p>

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F	Corneal Tissue Acquisition; Certain CRNA Services and Hepatitis B Vaccines	Not paid under OPPS. Paid at reasonable cost.
G	Pass-Through Drugs and Biologicals	Paid under OPPS; separate APC payment includes pass-through amount.
H	Pass-Through Device Categories	Separate cost-based pass-through payment; not subject to copayment.
K	(1) Nonpass-Through Drugs and Biologicals (2) Therapeutic Radiopharmaceuticals	(1) Paid under OPPS; separate APC payment. (2) Paid under OPPS; separate APC payment.
L	Influenza Vaccine; Pneumococcal Pneumonia Vaccine	Not paid under OPPS. Paid at reasonable cost; not subject to deductible or coinsurance.
M	Items and Services Not Billable to the Fiscal Intermediary/MAC	Not paid under OPPS.
N	Items and Services Packaged into APC Rates	Paid under OPPS; payment is packaged into payment for other services, including outliers. Therefore, there is no separate APC payment.
P	Partial Hospitalization	Paid under OPPS; per diem APC payment.
Q1	STVX-Packaged Codes	Paid under OPPS; Addendum B displays APC assignments when services are separately payable. (1) Packaged APC payment if billed on the same date of service as a HCPCS code assigned status indicator "S," "T," "V," or "X." (2) In all other circumstances, payment is made through a separate APC payment.
Q2	T-Packaged Codes	Paid under OPPS; Addendum B displays APC assignments when services are separately payable. (1) Packaged APC payment if billed on the same date of service as a HCPCS code assigned status indicator "T." (2) In all other circumstances, payment is made through a separate APC payment.

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Q3	Codes That May Be Paid Through a Composite APC	<p>Paid under OPPS; Addendum B displays APC assignments when services are separately payable.</p> <p>Addendum M displays composite APC assignments when codes are paid through a composite APC.</p> <p>(1) Composite APC payment based on OPPS composite-specific payment criteria. Payment is packaged into a single payment for specific combinations of service.</p> <p>(2) In all other circumstances, payment is made through a separate APC payment or packaged into payment for other services.</p>
R	Blood and Blood Products	Paid under OPPS; separate APC payment.
S	Significant Procedure, Not Discounted when Multiple	Paid under OPPS; separate APC payment.
T	Significant Procedure, Multiple Reduction Applies	Paid under OPPS; separate APC payment.
U	Brachytherapy Sources	Paid under OPPS; separate APC payment.
V	Clinic or Emergency Department Visit	Paid under OPPS; separate APC payment.
X	Ancillary Services	Paid under OPPS; separate APC payment.
Y	Non-Implantable Durable Medical Equipment	Not paid under OPPS. All institutional providers other than home health agencies bill to DMERC.