DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Medicare & Medicaid Services

MLN Matters®
Official Information Health Care Professionals Can Trust

March is Save Your Vision Month -Medicare provides payment for some vision-related services provided to patients with Medicare, subject to certain eligibility criteria. CMS has developed the following resources to help health care professionals understand coverage, coding, and payment guidelines for these services:

- Medicare Learning Network® "**Medicare Vision Services**" Fact Sheet
- Medicare Learning Network® "**Quick Reference Information: Preventive Services**" Educational Tool
- Medicare Learning Network® "**Ophthalmology Resource Information Center**" Web Page

MLN Matters® Number: MM9108	**Related Change Request (CR) #: CR 9108**
Related CR Release Date: March 27, 2015	**Effective Date: July 1, 2015**
Related CR Transmittal #: R3222CP	**Implementation Date: July 6, 2015**

Quarterly Update to the Correct Coding Initiative (CCI) Edits, Version 21.2, Effective July 1, 2015

Provider Types Affected

This MLN Matters® Article is intended for physicians, other providers, and suppliers submitting claims to Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries.

Provider Action Needed

Change Request (CR) 9108 informs MACs about the release of the latest package of National Correct Coding Initiative (NCCI) edits, Version 21.2, which will be effective July 1, 2015. Make sure that your billing staffs are aware of these changes.

Background

The Centers for Medicare & Medicaid Services (CMS) developed the NCCI edits to promote national correct coding methodologies and to control improper coding that leads to inappropriate payment in Part B claims. The coding policies developed are based on coding conventions defined in the American Medical Association's Current Procedural Terminology manual, national and local policies and edits, coding guidelines developed by national societies, analysis of standard medical and surgical practice, and review of current coding practice.

The latest package of CCI edits, Version 21.2, effective July 1, 2015, will be available via the CMS Data Center (CDC). A test file will be available on or about May 2, 2015, and a final file will be available on or about May 17, 2015.

Version 21.2 will include all previous versions and updates from January 1, 1996, to the present. In the past, CCI was organized in two tables: Column 1/Column 2 Correct Coding Edits and Mutually Exclusive Code (MEC) Edits. In order to simplify the use of NCCI edit files (two tables), on April 1, 2012, CMS consolidated these two edit files into the Column One/Column Two Correct Coding edit file. Separate consolidations have occurred for the two practitioner NCCI edit files and the two NCCI edit files used for OCE. It will only be necessary to search the Column One/Column Two Correct Coding edit file for active or previously deleted edits. CMS no longer publishes a Mutually Exclusive edit file on its website for either practitioner or outpatient hospital services, since all active and deleted edits will appear in the single Column One/Column Two Correct Coding edit file on each website. **The edits previously contained in the Mutually Exclusive edit file are NOT being deleted but are being moved to the Column One/Column Two Correct Coding edit file**.

Additional Information

The official instruction, CR 9108 issued to your MAC regarding this change is available at **http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/Downloads/R3222CP.pdf** on the CMS website.

Refer to the CMS NCCI webpage for additional information at **http://www.cms.gov/ Medicare/Coding/NationalCorrectCodInitEd/index.html** on the CMS website.

If you have any questions, please contact your MAC at their toll-free number. That number is available at **http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/index.html** under - How Does It Work.