

Related Change Request (CR) #: 3867

MLN Matters Number: MM3867

Related CR Release Date: May 20, 2005

Related CR Transmittal #: 564

Effective Date: July 1, 2005

Implementation Date: July 5, 2005

July Update to the Medicare Outpatient Code Editor (OCE) Version 20.3 for Bills From Hospitals that are Not Paid Under the Outpatient Prospective Payment System (Non-OPPS)

Note: This article was updated on March 28, 2013, to reflect current Web addresses. All other information remains unchanged

Provider Types Affected

Providers billing services to Medicare fiscal intermediaries (FIs) for outpatient services that are not subject to the OPSS

Provider Action Needed



STOP – Impact to You

This article includes information from Change Request (CR) 3867 which informs your Fiscal Intermediary (FI) that changes have been made to the Non-OPPS OCE used to process claims from hospitals not paid under the Outpatient OPSS.



CAUTION – What You Need to Know

The Non-OPPS OCE has been updated with new additions, deletions, and changes to ensure proper payment of your Non-OPPS claims.



GO – What You Need to Do

See the *Background* section of this article to find out further details regarding these changes.

Background

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

Change Request (CR) 3867 informs your Fiscal Intermediary (FI) that the Non-OPPS OCE has been updated with new additions, changes, and deletions to Healthcare Common Procedure Coding System/Current Procedural Terminology, Fourth Edition (HCPCS/CPT-4) codes.

The following are changes made to Version 20.3 of the Non-OPPS OCE:

Changes Retroactive to April 1, 2004

Code L0960 (post surgical support pads) was **removed** from the Non-Reportable list.

Changes Retroactive to January 1, 2005

The following new HCPCS codes were added to the list of valid codes.

Code	Description
G0375	Smoke/Tobacco counseling 3-10
G0376	Smoke/Tobacco counseling >10

The following code was **added** to Non-Reportable list:

Code	Description
0065T	Ocular photoscreen bilat

The following code was **added** to the ASC list and Payment Group:

Code	Payment Group
66711	2

The following codes were **removed** from the Non-Reportable list:

Code	Description
E0950	Tray
E0951	Loop heel
E0952	Toe loop/holder, each
G0345	IV infuse hydration, initial
G0346	Each additional infuse hour
G0347	IV infusion therapy/diagnost
G0348	Each additional hr up to 8hr
G0349	Additional sequential infuse
G0350	Concurrent infusion
G0351	Therapeutic/diagnostic inje
G0353	IV push, single original drug

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

Code	Description
G0354	Each addition sequential IV
G0355	Chemo adminisrate subcut/IM
G0356	Hormonal anti-neoplastic
G0357	IV push single/initial subst
G0358	IV push each additional drug
G0359	Chemotherapy IV one hr initi
G0360	Each additional hr 1-8 hrs
G0361	Prolong chemo infuse>8hrs pu
G0362	Each add sequential infusion
G0363	Irrigate implanted venous de
G0368	EKG interpret & report preve
G0369	Pharm fee 1 st month transpla
G0370	Pharmacy fee oral cancer etc

Changes Retroactive to April 1, 2005

The following new HCPCS codes were **added** to the list of valid codes:

Code	Description
K0730	Ctrl dose inh drug deliv sys
K0731	Lith ion batt cid, on body
K0732	Lith ion batt cid behind ear

The following code was added to the Non-Reportable list:

Code	Description
K0730	Ctrl dose inh drug deliv sys

Changes Effective July 1, 2005

The following new HCPCS codes were **added** to the list of valid codes:

Code	Description
C9129	Inj clofarabine
Q9958	HO CM <=149 mg/ml iodine, 1ml
Q9959	HO CM 150-199 mg/ml iodine, 1ml
Q9960	HO CM 200-249 mg/ml iodine, 1ml
Q9961	HO CM 250-299 mg/ml iodine, 1ml
Q9962	HO CM 300-349 mg/ml iodine, 1ml

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

Code	Description
Q9963	HOCM 350-399 mg/ml iodine, 1ml
Q9964	HOCM >= 400 mg/ml iodine, 1ml
S0118	Ziconotide intrathecal 1 mcg
S0133	Histerlin implant
S0145	Peg interferon alfa-2B/10
S0146	Peg interferon alfa-2B/10
S0198	Inj pegaptanib 0.3 mg
S0265	Genetic counsel 15 mins
S0613	Ann breast exam
S2900	Robotic surgical system
S8270	Enuresis alarm

The following code was **deleted** from the list of valid HCPCS:

Code	Description
C9126	Injection, natalizumab

The following codes were **added** to the Non-reportable list:

Code	Description
59050	Fetal monitor w/report
C9129	Inj clofarabine
G0250	MD review interpret of test
L8620	Repl lithium ion battery
S0118	Ziconotide intrathecal 1 mcg
S0133	Histerlin implant
S0145	Peg interferon alfa-2B/10
S0146	Peg interferon alfa-2B/10
S0198	Inj pegaptanib 0.3 mg
S0265	Genetic counsel 15 mins
S0613	Ann breast exam
S2900	Robotic surgical system
S8270	Enuresis alarm

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

The following code was removed from the Non-Reportable list:

Code	Description
59510	Cesarean delivery

Additional Information

For complete details, please see the official instruction issued to your intermediary regarding this change. That instruction may be viewed by going to <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R564CP.pdf> on the CMS website.

If you have any questions, please contact your intermediary at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.