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Attention Providers!



Medicare will delay claims payments during the last 9 days of fiscal year 2006 (September 22 through September 30). For complete details, see MLN Matters article MM4349 at <http://www.cms.gov/outreach-and-education/medicare-learning-network-mln/mlnmattersarticles/downloads/MM4349.pdf>

MLN Matters Number: MM5244

Related Change Request (CR) #: 5244

Related CR Release Date: September 1, 2006

Effective Date: October 1, 2006

Related CR Transmittal #: R1045CP

Implementation Date: October 2, 2006

October 2006 Outpatient Prospective Payment System (OPPS) Outpatient Code Editor (OCE) Specifications Version 7.3

Note: This article was updated on June 5, 2013, to reflect current Web addresses. All other information remains unchanged.

Provider Types Affected

Providers billing Medicare fiscal intermediaries (FIs) and regional home health intermediaries (RHHIs) for services paid under the OPPS

Impact on Providers

This article is based on Change Request (CR) 5244, which informs your FI that the October 2006 Outpatient Prospective Payment System Outpatient Code Editor (OPPS OCE) specifications have been updated with new additions, deletions, and changes.

Background

This article is based on Change Request (CR) 5244, which reflects specifications that were issued for the July revision of the OPPS OCE (Version 7.2).

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CR 5244 provides the revised OPPTS OCE instructions and specifications that will be utilized under the OPPTS for hospital outpatient departments, Community Mental Health Centers (CMHCs) and for limited services provided in a Home Health Agency (HHA) not under the Home Health Prospective Payment System or to a hospice patient for the treatment of a non-terminal illness.

Attachment A of CR5244 contains specifications issued for the October 2006 OCE (Version 7.3), and all shaded material in Attachment A reflects changes from the prior release which have been incorporated into the July 2006 version of the OPPTS OCE (Version 7.2).

The modifications of the OCE/APC for the October 2006 release (V7.3) are detailed in the tables within CR 5244, and that CR is available at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R1045CP.pdf> on the CMS website.

You should also read through the specifications attached to CR5244 and note the highlighted sections, which indicate change from the prior release of the OPPTS OCE software.

Note also that some of these modifications have an effective date earlier than October 1, 2006, and such dates are reflected at the beginning of each table in CR5244.

The following is an excerpt of one table in CR5244 (Attachment A, Appendix L). It summarizes the key modifications of the OCE/APC for the October 2006 release (V7.3).

	Mod. Type	Effective Date	Edit	
1.	Logic	10/1/06	74	New edit 74 – Units greater than one for bilateral procedure billed with modifier 50... Return to Provider . For any code on the Conditional or Independent bilateral list that is submitted with modifier 50 and units of service greater than one on the same line (Appendix A).
2.	Logic	4/1/05		Modify appendix F to bypass edits 8, 9, 11, 12, 44, 50, 53, 54, 55, 59 & 69 for bill types 71x and 73x. Modify appendix E to reflect the changes made in appendix F.
3.	Logic	10/1/06		Modify appendix D to apply bilateral procedure discounting to Non-type T procedures that are on the Conditional bilateral list, when submitted with modifier 50. [The bilateral indicator to supersede the SI, to determine discounting].
4.	Content			Make HCPCS/APC/SI changes, as specified by CMS.

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	Mod. Type	Effective Date	Edit	
5.	Content	7/1/06	19,20,39,40	Implement version 12.2 of the NCCI file, removing all code pairs which include Anesthesia (00100-01999), E&M (92002-92014, 99201-99499), or MH (90804-90911); and the following Drug Admin code pairs: C8950-C8952, C8953-C8950, C8953-C8952, C8954-C8950, C8954-C8952, C8954-C8953.
6.	Content	10/1/06	1	Update valid diagnosis code lists with ICD-9-CM changes
7.	Content	10/1/06	2,3	Update diagnosis/age and diagnosis/sex conflict edits with MCE changes
8.	Content	1/1/05	22	Add new CPT modifiers (genetic testing category) to global 'valid modifier' list.
9.	Content	1/1/06	71	Update procedure/device edit list

Some OCE/Ambulatory Patient Classification (APC) modifications in the release may also be retroactively added to prior releases. If so, the retroactive date will appear in the "Effective Date" column.

Additional Information

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.

Flu Shot Reminder

September is the perfect time to start talking with your patients about getting the flu shot. Medicare provides coverage for the flu vaccine and its administration. Please encourage your Medicare patients to take advantage of this vital benefit. And don't forget – health care professionals and their staff benefit from the flu vaccine also.

Protect Yourself. Protect Your Patients. Get Your Flu Shot.

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