



**News Flash** - Beginning December 19, 2008, the names of physicians and other health care professionals who reported quality information under the Physician Quality Reporting Initiative (PQRI) in 2007 will be available at <http://www.medicare.gov/physician>, the Physician and Other Healthcare Professional Directory located on <http://www.medicare.gov/physician>. This information includes all eligible professionals identified by their National Provider Identifier (NPI) who submitted at least one quality data code on their Medicare claims for services furnished between July 1, 2007 and December 31, 2007. For more information on the PQRI and the instructions for reporting and requirements for satisfactory reporting, go to <http://www.cms.hhs.gov/pqri> on the CMS website.

MLN Matters Number: MM6290

Related Change Request (CR) #:6290

Related CR Release Date: December 31, 2008

Effective Date: January 1, 2009

Related CR Transmittal #: R1658CP

Implementation Date: January 5, 2009

## Quarterly Update to Correct Coding Initiative (CCI) Edits, Version 15.0, Effective January 1, 2009

### Provider Types Affected

Physicians submitting claims to Medicare Carriers and/or Part A/B Medicare Administrative Contractors (A/B MACs) for services provided to Medicare beneficiaries

### Provider Action Needed

This article is based on Change Request (CR) 6290, which provides a reminder for physicians to take note of the quarterly updates to Correct Coding Initiative (CCI) edits.

### Background

The Centers for Medicare & Medicaid Services (CMS) developed the National Correct Coding Initiative (CCI) 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:

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- American Medical Association's (AMA's) *Current Procedural Terminology (CPT) 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 15.0, is effective January 1, 2009, and includes all previous versions and updates from January 1, 1996, to the present. It will be organized in the following two tables:

- Column 1/ Column 2 Correct Coding Edits, and
- Mutually Exclusive Code (MEC) Edits.

Version 15.0 will be available via the CMS Data Center, and a test file will be available on or about November 2, 2008. The final file will be available on or about November 17, 2008.

## Additional Information

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The CCI and MEC file formats are defined in the *Medicare Claims Processing Manual*, Chapter 23, Section 20.9, which can be found at <http://www.cms.hhs.gov/manuals/downloads/clm104c23.pdf> on the CMS website. The official instruction (CR 6290) issued to your carrier and A/B MAC, RHHI regarding this change may be viewed at <http://www.cms.hhs.gov/Transmittals/downloads/R1658CP.pdf> on the CMS website.

If you have any questions, please contact your carrier or A/B MAC at their toll-free number, which may be found at <http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip> on the CMS website.

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