

CMS Manual System

Pub 100-04 Medicare Claims Processing

Transmittal 960

Department of Health & Human Services (DHHS)

Centers for Medicare & Medicaid Services (CMS)

Date: MAY 26, 2006

Change Request 5066

SUBJECT: July 2006 Non-Outpatient Prospective Payment System Outpatient Code Editor (Non-OPPS OCE) Specifications Version 21.3

I. SUMMARY OF CHANGES: This instruction informs the Fiscal Intermediaries (FIs) that the July 2006 Non-Outpatient Prospective Payment System Outpatient Code Editor (Non-OPPS OCE) has been updated with new additions, changes and deletions to HCPCS codes and procedure codes.

NEW/REVISED MATERIAL

EFFECTIVE DATE: July 1, 2006

IMPLEMENTATION DATE: July 3, 2006

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.

II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R = REVISED, N = NEW, D = DELETED – *Only One Per Row.*

R/N/D	Chapter / Section / SubSection / Title
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III. FUNDING:

No additional funding will be provided by CMS; Contractor activities are to be carried out within their FY 2006 operating budgets.

IV. ATTACHMENTS:

Recurring Update Notification

**Unless otherwise specified, the effective date is the date of service.*

Attachment – Recurring Update Notification

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SUBJECT: July 2006 Non-Outpatient Prospective Payment System Outpatient Code Editor (Non-OPPS OCE) Specifications Version 21.3

I. GENERAL INFORMATION

A. Background: The Non-OPPS OCE has been updated with any new additions, changes, and deletions to Healthcare Common Procedure Coding System/Current Procedural Terminology (HCPCS/CPT) codes. This OCE is used to process bills from hospitals not paid under the OPSS.

B. Policy: The following changes were made to version 21.3 of the Non-OPPS OCE.

Code Descriptions:

- Update the Code Description Database with the same codes and descriptions used for OPSS OCE v7.2

New HCPCS Procedure codes

- The following codes have been **added** to the list of valid **HCPCS**, effective **4/1/06** (OCE v21.2):

Code	Description
3046F	Hemoglobin A1c level > 9.0%
3047F	Hemoglobin A1c level <= 9.0%
3048F	LDL-C <100 mg/dL
3049F	LDL-C 100-129 mg/dL
3050F	LDL-C >= 130 mg/dL
3076F	Syst bp < 140 mm hg
3077F	Syst bp >= 140 mm hg
3078F	Diast bp < 80 mm hg
3079F	Diast bp 80-89 mm hg
3080F	Diast bp >= 90 mm hg

- The following codes have been **added** to the list of valid **HCPCS**, effective **7/1/06** (OCE v21.3):

Code		
0012F	1036F	2028F
1015F	1038F	3006F
1018F	1039F	3011F
1019F	2010F	3014F
1022F	2014F	3017F
1026F	2018F	3020F
1030F	2022F	3021F
1034F	2024F	3022F
1035F	2026F	3023F

3025F	4035F	K0733
3027F	4037F	K0734
3028F	4040F	K0735
3035F	4045F	K0736
3037F	4050F	K0737
3040F	6005F	K0738
3042F	0155T	K0739
3060F	0156T	K0740
3061F	0157T	
3062F	0158T	
3066F	0159T	
3072F	0160T	
4025F	0161T	
4030F	C9229	
4033F	C9230	

Deleted HCPCS procedure codes

- The following codes have been **deleted** from the list of valid **HCPCS** and removed from any edits to which they had been assigned, effective **4/1/2001** (OCE v 16.1.1):

Code	Description
C8892	Predefined New Device Tech
C8893	Predefined New Device Tech
C8894	Predefined New Device Tech
C8895	Predefined New Device Tech
C8896	Predefined New Device Tech
C8897	Predefined New Device Tech
C8898	Predefined New Device Tech
C8899	Predefined New Device Tech
Q3019	ALS emer trans no ALS serv
Q3020	ALS nonemer trans no ALS ser

- The following codes have been **deleted** from the list of valid **HCPCS** and removed from any edits to which they had been assigned, effective **4/1/2006** (OCE v 16.1.1):

Code	Description
Q3019	ALS emer trans no ALS serv
Q3020	ALS nonemer trans no ALS ser

MEDICARE OUTPATIENT CODE EDITS

Conflict Cataract Procedures:

- The following code was **added** to the list of conflict cataract procedures, effective **1/1/01** (OCE 16.1):

Code
66982

1006F	G8029	G8113
1007F	G8030	G8114
1008F	G8031	G8115
2000F	G8032	G8116
2001F	G8033	G8117
2002F	G8034	G8126
2003F	G8035	G8127
2004F	G8036	G8128
3000F	G8037	G8129
3002F	G8038	G8130
4000F	G8039	G8131
4001F	G8040	G8152
4002F	G8041	G8153
4003F	G8051	G8154
4006F	G8052	G8155
4009F	G8053	G8156
4011F	G8054	G8157
4012F	G8055	G8158
4014F	G8056	G8159
4015F	G8057	G8160
4016F	G8058	G8161
4017F	G8059	G8162
4018F	G8060	G8163
G8006	G8061	G8164
G8007	G8062	G8165
G8008	G8075	G8166
G8009	G8076	G8167
G8010	G8077	G8170
G8011	G8078	G8171
G8012	G8079	G8172
G8013	G8080	G8182
G8014	G8081	G8183
G8015	G8082	G8184
G8016	G8093	G8185
G8017	G8094	G8186
G8018	G8099	G9050
G8019	G8100	G9051
G8020	G8103	G9052
G8021	G8104	G9053
G8022	G8106	G9054
G8023	G8107	G9055
G8024	G8108	G9056
G8025	G8109	G9057
G8026	G8110	G9058
G8027	G8111	G9059
G8028	G8112	G9060

G9061	G9085	G9109
G9062	G9086	G9110
G9063	G9087	G9111
G9064	G9088	G9112
G9065	G9089	G9113
G9066	G9090	G9114
G9067	G9091	G9115
G9068	G9092	G9116
G9069	G9093	G9117
G9070	G9094	G9118
G9071	G9095	G9119
G9072	G9096	G9120
G9073	G9097	G9121
G9074	G9098	G9122
G9075	G9099	G9123
G9076	G9100	G9124
G9077	G9101	G9125
G9078	G9102	G9126
G9079	G9103	G9127
G9080	G9104	G9128
G9081	G9105	G9129
G9082	G9106	G9130
G9083	G9107	
G9084	G9108	

- The following codes were **added** to the **Non-Reportable list**, effective **4/1/06**:

Code	
43644	3048F
43645	3049F
43770	3050F
43845	3076F
43846	3077F
43847	3078F
3046F	3079F
3047F	3080F

- The following codes were added to the **Non-Reportable list**, effective **7/1/06**:

Code		
0012F	1034F	2022F
1000F	1035F	2024F
1015F	1036F	2026F
1018F	1038F	2028F
1019F	1039F	3006F
1022F	2010F	3011F
1026F	2014F	3014F
1030F	2018F	3017F

III. PROVIDER EDUCATION

Requirement Number	Requirements	Responsibility (“X” indicates the columns that apply)								
		F I	R H H I	C a r r i e r	D M E R C	Shared System Maintainers				Other
						F I S S	M C S	V M S	C W F	
5066.3	A provider education article related to this instruction will be available at www.cms.hhs.gov/MLNMattersArticles shortly after the CR is released. You will receive notification of the article release via the established "MLN Matters" listserv. Contractors shall post this article, or a direct link to this article, on their Web site and include information about it in a listserv message within 1 week of the availability of the provider education article. In addition, the provider education article shall be included in your next regularly scheduled bulletin and incorporated into any educational events on this topic. Contractors are free to supplement Medlearn Matters articles with localized information that would benefit their provider community in billing and administering the Medicare program correctly.	X	X							

IV. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: OPPS OCE/ PRICER

D. Contractor Financial Reporting /Workload Impact: N/A

E. Dependencies: N/A

F. Testing Considerations: N/A

V. SCHEDULE, CONTACTS, AND FUNDING

<p>Effective Date: July 1, 2006</p> <p>Implementation Date: July 3, 2006</p> <p>Pre-Implementation Contact(s): Diana Motsiopoulos at diana.motsiopoulos@cms.hhs.gov or Antoinette Johnson at antoinette.johnson@cms.hhs.gov</p> <p>Post-Implementation Contact(s): Regional Office</p>	<p>No additional funding will be provided by CMS; contractor activities are to be carried out within their FY 2006 operating budgets.</p>
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