

Related Change Request (CR) #: 3194
Related CR Release Date: April 30, 2004
Related CR Transmittal #:167
Effective Date: October 1, 2004
Implementation Date: October 4, 2004

Medlearn Matters Number: MM3194

Discontinued Use of Revenue Code 0910

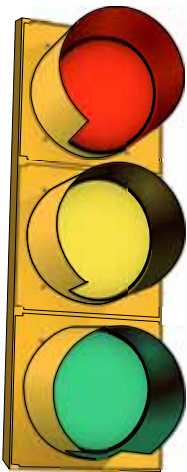
IMPORTANT NOTE: MM3343 (Transmittal 98 dated July 23, 2004) made the following revision to this instruction: the revenue code change in MM3194 will now be effective for claims with "dates of service" on or after October 16, 2003.

To see MM3343, go to: <http://www.cms.hhs.gov/medlearn/matters/mmarticles/2003/MM3343.pdf>

Provider Types Affected

Comprehensive outpatient rehabilitation facilities (CORFs), rural health clinics (RHCs), and federally qualified health centers (FOHCs) that bill for services subject to the Outpatient Mental Health Treatment Limitation; hospital outpatient departments, community mental health centers (CMHCs), and critical access hospitals (CAHs) billing under the Outpatient Partial Hospitalization Program.

Provider Action Needed



STOP – Impact to You

Effective October 1, 2004, your reimbursement may be impacted if you don't use Revenue code 0900 in place of Revenue code 0910 on your claims for certain psychiatric/psychological treatment and services.

CAUTION – What You Need to Know

Revenue code 0910 will not be accepted after September 30, 2004. You must use revenue code 0900 in its place when billing for certain psychiatric/psychological treatment and services.

GO – What You Need to Do

Make sure that your billing staffs are aware that they must substitute revenue code 0900 in place of revenue code 0910 when billing for certain psychiatric/psychological treatment and services.

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Background

Historically, CORFs, RHCs, and FOHCs have been required to use revenue code 0910 as the basis for applying the Outpatient Mental Health Treatment Limitation to their claims when billing for psychiatric/psychological services. Likewise, hospital outpatient departments, CMHCs, and CAHs billing under the Outpatient Partial Hospitalization Program have also been required to use this revenue code.

However, the National Uniform Billing Committee (NUBC) has approved the restructuring/renaming of the 090X and 091X revenue code series for psychiatric and psychological services; as part of this restructuring, it has designated revenue code 0910 as "Reserved for National Use." Thus, the code is unavailable for use. You can no longer use Revenue code 0910 and you must use 0900 in its place effective October 1, 2004. This includes provider-initiated adjustments.

Specifically, CORFs, RHCs, and FOHCs must use revenue code 0900 to report psychiatric/ psychological treatment and services that are subject to the outpatient mental health treatment limitation just as revenue code 0910 was used in the past.

Similarly, hospital outpatient departments, CMHCs, and CAHs that formerly reported psychiatric/psychological services under the Outpatient Partial Hospitalization Program using revenue code 0910 must now report such treatment under revenue code 0900. Please be aware that the October release of the Outpatient Code Editor will be changed to no longer accept revenue code 0910.

NOTE: Revenue code 0900 description is as follows:

090X Behavioral Health Treatments/Services (also see 091X, an extension of 090X)

Subcategory

0 - General Classification.

Additional Information

You can find additional material related to this CR on the CMS web site at:

http://www.cms.hhs.gov/manuals/transmittals/cr_num_dsc.asp

From that web page, look for CR 3194 in the CR NUM column on the right, and click on the file for this CR.

You can find more detail about revenue code 0900 in various chapters of the Medicare Claims Processing Manual (Publication 100-4):

- Chapter 1, Section 50.22 – Frequency of Billing to FIs for Outpatient Services;
- Chapter 4, Section 20.5 – HCPCS/Revenue Code Chart;
- Chapter 4, Section 170 – Hospital and CMHC Reporting Requirements for Services Performed on the Same Day;
- Chapter 4, Section 260.1 – Special Partial Hospitalization Billing Requirements for Hospitals, Community Mental Health Centers, and Critical Access Hospitals;

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- Chapter 4, Section 260.7 – Bill Review for Partial Hospitalization Services Provided in Community Mental Health Centers (CMHCs);
- Chapter 9, Section 60.2 – Application of Limit;
- Chapter 9, Section 100 – General Billing Requirements;
- Chapter 25, Section 60 – General Instructions for Completion of Form CMS-1450 for Billing; and
- Chapter 25, Section 100 – Form CMS-1450, UB-92, ANSI X12n 837A 4010 and 3051 3A.01 Crosswalk of Data Elements.

This manual can be found on the CMS web site at:

<http://www.cms.hhs.gov/manuals/cmsindex.asp>

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