Program Memorandum
Intermediaries

Transmittal A-01-84   Date: JULY 13, 2001

CHANGE REQUEST 1785

SUBJECT: **Problems With Processing Certain Clinical Diagnostic Laboratory Claims and Other Claims Through the July Outpatient Code Editor (OCE)**

This Program Memorandum (PM) advises you that the July OCE (version V2.2) contains an error which will require data centers and their shared processors to hold claims in their systems until a revised OCE is made available.

Several clinical diagnostic laboratory codes were erroneously listed as valid for payment under the Outpatient Prospective Payment System (OPPS) when payment should be made under the clinical diagnostic laboratory fee schedule. As a result, these codes were being paid an ambulatory payment classification (APC), and a deductible and coinsurance was being applied. A revised July OCE will correctly assign a status indicator of "A" to these codes which will result in correct payment and non-application of deductible and coinsurance. The codes are as follows:

80201	84512	86148	86361	87472	87477
87482	87487	87492	87497	87512	87517
87522	87527	87530	87533	87536	87539
87542	87552	87557	87562	87582	87592
87622	87652	87799	88142		

Hospital OPPS claims containing any of the above codes with dates of service of October 1, 2000, and forward should be held in your system until the corrected July OCE is received and installed. At that time release the claims for payment, including any applicable interest, as interest payments may be payable due to the inability to process these claims timely. In addition, adjust any claims that were processed incorrectly. The revised July OCE will be shipped to the Standard System Maintainers on July 13, 2001 for delivery on July 16, 2001. You should work with your data center to install the revised OCE as soon as possible.

In addition, the July OCE did not change HCPCS codes Q0181 and C9107 to non-reportable. This correction will be included in the October OCE and will be made retroactive to July. Code Q0181 will be added as non-covered and code C9107 will be deleted. Do not hold claims containing these codes in your system. PRICER will issue a return code 30. At that time, return the claim to the provider.

Post a notice on your website regarding this information as well as specific timeframes for when systems changes will be implemented and when hospital OPPS claims that are being held will be processed. In addition, advise your professional relations staff of this information.

The *effective date* for this PM is July 13, 2001.

The *implementation date* for this PM is July 13, 2001.

These instructions should be implemented within your current operating budget.

This PM may be discarded after July 31, 2003.

If you have any questions, contact Faith Ashby at 410-786-6145.

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