CMS Manual System

Pub. 100-04 Medicare Claims Processing

Department of Health & Human Services (DHHS)
Centers for Medicare & Medicaid Services (CMS)

Transmittal 120 Date: MARCH 19, 2004

CHANGE REQUEST 3155

I. SUMMARY OF CHANGES: April update to the January Medicare Outpatient Code Editor (OCE) Specifications Version 19.1 R1 for bills from hospitals that are not paid under the Outpatient Prospective Payment System (OPPS)

NEW/REVISED MATERIAL - EFFECTIVE DATE: Various dates as described in

the instruction

*IMPLEMENTATION DATE: April 5, 2004

Disclaimer for manual changes only: The revision date and transmittal number apply to the red italicized material only. 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: (R = REVISED, N = NEW, D = DELETED)

R/N/D	CHAPTER/SECTION/SUBSECTION/TITLE	
N/A		

*III. FUNDING:

These instructions shall be implemented within your current operating budget.

IV. ATTACHMENTS:

	Business Requirements
	Manual Instruction
	Confidential Requirements
	One-Time Notification
\mathbf{X}	Recurring Update Notification

^{*}Medicare contractors only

Attachment – Recurring Update Notification

Pub. 100-04 | Transmittal: 120 | Date: March 19, 2004 | Change Request 3155

SUBJECT: April Update to the January Medicare Outpatient Code Editor (OCE)
Specifications Version 19.1 R1 For Bills From Hospitals That Are Not Paid
Under The Outpatient Prospective Payment System

I. GENERAL INFORMATION

- **A. Background:** This change request (CR) informs you that the OCE has been updated with new additions, changes, and deletions to Healthcare Common Procedure Coding System/Current Procedural Terminology, Fourth Edition (HCPCS/CPT-4) codes. The CMS sent detailed information about these changes in sep9arate communications. See Program Memorandum AB-03-140, dated September 12, 2003. This OCE is used to process bills from hospitals not paid under the OPPS.
- **B.** Policy: The following are changes made to version 19.1 R1 of the non-OPPS OCE:
 - The following codes have been deleted from the valid HCPCS list, effective 1/1/03:
 - 1. L0474
 - 2. Q3021
 - 3. Q3022
 - 4. Q3023
 - The following code has been added to the list of Non-Reportable procedures, effective 1/1/03:
 - 1. 92510
 - The following code has been added to the list of Non-Covered procedures, effective 4/1/03:
 - 1. G0282
 - The following codes have been added to the list of valid HCPCS, effective 1/1/04:
 - 1. C9400
 - 2. C9402
 - 3. C9403
 - 4. C9404
 - 5. C9405
 - 6. C9406
 - 7. C9408
 - 8. C9410
 - 9. C9411
 - 10. C9412
 - 11. C9413
 - 12. C9414

- 13. C9415
- 14. C9416
- 15. C9417
- 16. C9418
- 17. C9419
- 18. C9420
- 19. C9421
- 20. C9422
- 21. C9423
- 22. C9424
- 23. C9425
- 24. C9426
- 25. C9427
- 26. C9428
- 27. C9429
- 28. C9430
- 29. C9431
- 30. C9432
- 31. C9433
- 32. C9434
- 33. C9438
- The following codes have been deleted from the list of valid HCPCS, effective 1/1/04:
 - 1. C1088
 - 2. E2350
- The following code has been removed from the list of Non-Covered procedures, effective 1/1/04:
 - 1. 93788
- The following codes have been added to the list of Non-Reportable procedures, effective 1/1/04:
 - 1. 90919
 - 2. 90920
 - 3. 90921
 - 4. 90922
 - 5. 90923
 - 6. 90924
 - 7. 99601
 - 8. 99602
 - 9. A0800
 - 10. A4208
 - 11. A4421
 - 12. C9400
 - 13. C9402

- 14. C9403
- 15. C9404
- 16. C9405
- 17. C9406
- 18. C9408
- 19. C9410
- 20. C9411
- 21. C9412
- 22. C9413
- 22 CO414
- 23. C9414
- 24. C9415 25. C9416
- 23. 07410
- 26. C9417
- 27. C9418
- 28. C9419
- 29. C9420
- 30. C9421
- 31. C9422
- 32. C9423
- 33. C9424
- 34. C9425
- 35. C9426
- 36. C9427
- 37. C9428
- 38. C9429
- 39. C9430
- 40. C9431
- 41. C9432
- 42. C9433
- 43. C9434
- 44. C9438
- 45. E1150 46. L3031
- 47. L3902
- 17. E3702
- 48. Q4054
- 49. Q4055
- 50. V2756
- The following code has been added to the list of Non-Covered procedures effective 1/1/04:
 - 1. A4207
- The following codes have been added to the list of valid HCPCS, effective 4/1/04:
 - 1. A4644
 - 2. A4645
 - 3. A4646

- 4. G0110
- 5. G0111
- 6. G0112
- 7. G0113
- 8. G0114
- 9. G0115
- 10. G0116
- 11. K0627
- 12. K0628
- 13. K0629
- 14. K0630
- 15. K0631
- 16. K0632
- 17. K0633
- 18. K0634
- 19. K0635
- 20. K0636
- 21. K0637
- 22. K0638
- 23. K0639
- 24. K0640
- 25. K0641
- 26. K0642
- 27. K0643
- 28. K0644
- 29. K0645
- 30. K0646
- 31. K0647
- 32. K0648
- 33. K0649
- The following codes have been added to the list of Non-Reportable procedures, effective 4/1/04:
 - 1. A5500
 - 2. A5501
 - 3. A5503
 - 4. A5504
 - 5. A5505
 - 6. A5506
 - 7. A5507
 - 8. A5508
 - 9. A5509
 - 10. A5511
 - 11. A9525
 - 12. K0627
 - 13. K0628

14. K0629 15. L0476 16. L0478 17. L0500 18. L0510 19. L0520 20. L0530 21. L0540 22. L0550 23. L0560

24. L0561 25. L0565

26. L0600 27. L0610

28. L0620

29. L0960

29. L0960

C. Provider Education: A provider education article related to this instruction will be available at www.cms.hhs.gov/medlearn/matters shortly after the CR is released. You will receive notification of the article release via the established "medlearn 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 one week of the availability of the provider education article. In addition, the provider education article must be included in your next regularly scheduled bulletin.

II. BUSINESS REQUIREMENTS

"Shall" denotes a mandatory requirement "Should" denotes an optional requirement

Requirement #	Requirements	Responsibility
3155.1	Shared Systems Maintainers (SSMs) shall install OCE version 19.1 R1 into their systems.	SSMs
Fiscal Intermediaries (FIs) shall inform providers of the OCE changes for 2004 detailed		FIs

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

in this recurring change notification.

A. Other Instructions: N/A

X-Ref Requirement #	Instructions

B. Design Considerations: N/A

X-Ref Requirement #	Recommendation for Medicare System Requirements

C. Interfaces: OCE

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

E. Dependencies: N/A

F. Testing Considerations: N/A

IV. SCHEDULE, CONTACTS, AND FUNDING

Effective Date: Various dates as described in the	These instructions shall be
instruction.	implemented within your
	current operating budget.
Implementation Date: April 5, 2004	
Pre-Implementation Contact(s): Joe Bryson	
jbryson2@cms.hhs.gov	
Post-Implementation Contact(s): regional office	