Program Memorandum Intermediaries

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

Transmittal A-03-019 Date: MARCH 14, 2003

CHANGE REQUEST 2612

SUBJECT: Reactivation of Outpatient Prospective Payment System (OPPS) Outpatient Code Editor (OCE) Edit 15, "Service Unit Out Of Range" and Guidance on

Editing for Low Osmolar Contrast Media (LOCM) Procedures

I. GENERAL INFORMATION

A. Background:

OPPS OCE Edit 15

OPPS OCE Edit 15 was causing a large number of claim suspensions in the past and as a result, CMS instructed Shared System Maintainers (SSMs) to discontinue application of this edit until further notice.

Reporting Requirements for LOCM

Under previous instruction, CMS required that until further notice, hospitals that are subject to the OPPS were not to report LOCM HCPCS codes A4644, A4645, or A4646 when billing for LOCM furnished on or after January 1, 2003. CMS also required you to return to the provider any claims submitted with LOCM HCPCS codes A4644, A4645, or A4646 for services furnished on or after January 1, 2003.

B. Policy:

OPPS OCE Edit 15

As part of the recurring quarterly update of the OPPS OCE, CMS is lifting the moratorium on application of the OPPS OCE Edit 15. Therefore, you are instructed to reactivate OPPS OCE Edit 15 for claims with dates of service on or after April 1, 2003. The units of service edit will not be applied to all services at this time. Instead, there will be limited edits applied to certain services for this quarter. However subsequent modifications to this edit will be made in upcoming OPPS OCE releases. CMS' goal is to eventually allow OCE Edit 15 to operate the way it was fully intended and to avoid any additional inconsistencies with required units.

Reporting Requirements for LOCM

This Program Memorandum (PM) also provides guidance on the reporting of LOCM. Hospitals may report LOCM using HCPCS codes A4644, A4645, and A4646 for services furnished on or after April 1, 2003.

II. BUSINESS REQUIREMENTS

Req. #	Requirements	Resp.
1.1	You must reinstate in your systems the OCE Edit 15 for dates of service April 1, 2003 and later.	FI
2.1	You must turn off any edit that requires certain requirements be met when OPPS hospitals report HCPCS codes A4644, A4645, or A4646 to bill for LOCM.	FI
2.2	Do not Return to Provider (RTP) claims received with LOCM HCPCS codes A4644, A4645, or A4646.	FI
2.3	Non-OPPS hospitals must continue to follow the billing instructions in §§443.C.3f and 443.C.3g of the Medicare Hospital Manual and §§3631.C.3f and 3631.C.3g of the Medicare Intermediary Manual. These instructions continue to be applicable to non-OPPS hospitals.	FI

III. SUPPORTING INFORMATION AND POSSIBLE DESIGN CONSIDERATIONS

A. Other Instructions:

X-Ref Req.	Instructions
#	
1.1	Medicare intermediaries must post a notice on their Web site of these changes within 2 weeks of receiving this PM.
1.1	Medicare intermediaries must educate providers that the Units of Service Editing will be phased in over the next several releases.
1.1	Medicare intermediaries must handle questions on the operation of OCE in accordance with regular procedures.
1.1	For units of service editing questions, Medicare intermediaries, may contact Antoinette Johnson at 410-786-9326, CMS Division of Institutional Claims Processing.
1.1	Medicare intermediaries must publish these changes in their next regularly scheduled bulletin.
2.1	Medicare intermediaries must post a notice on their Web site of these changes within two weeks of receiving this PM
2.1	Medicare intermediaries must publish these changes in their next regularly scheduled bulletin
2.1	Medicare intermediaries must educate OPPS hospitals on these new billing instructions for LOCM.
2.2	For LOCM questions, Medicare intermediaries may contact Joan Sanow at 410-786-9739, CMS, DOC.

B. Design Considerations:

X-Ref Req. #	Recommendation for Medicare System Requirements	

C. Interfaces: Outpatient Code Editor v4.1

D. Contractor Financial Reporting /Workload Impact:

E. Dependencies: N/A

IV. ATTACHMENTS: None

Version:	Effective Date: April 1, 2003	
Implementation Date: April 1, 2003	Funding: Within Current Operating Budget	
Discard Date: April 1, 2004	Pre-Implementation Contact: Antoinette Johnson (6-9326)	
Post-Implementation Contact: Appropriate regional office		