



# MLN Matters®



Information for Medicare Fee-For-Service Health Care Professionals

Related Change Request (CR) #: 3621

MLN Matters Number: MM3621

Related CR Release Date: December 17, 2004

Related CR Transmittal #: 402

Effective Date: January 1, 2005

Implementation Date: January 3, 2005

## *January 2005 Update to the Medicare Non-OPPS Outpatient Code Editor (OCE) Specifications Version 20.1 for Bills from Hospitals Not Paid Under the Outpatient Prospective Payment Systems (OPPS)*

**Note:** This article was updated on May 12, 2013, to reflect current Web addresses. All other information remains unchanged.

### Provider Types Affected

Hospitals and other providers that provide outpatient services billed to Medicare Fiscal Intermediaries (FIs) and are not paid under the OPPS

### Provider Action Needed

This article includes information contained in Change Request (CR) 3621, which informs FIs that the Outpatient Code Editor (OCE), used to process bills from hospitals not paid under the OPPS (Non-OPPS), has been updated with new additions, changes, and deletions to Healthcare Common Procedure Coding System (HCPCS) codes, diagnosis codes, and procedure codes to ensure correct billing.

### Background

The Non-OPPS OCE has been updated with additions, changes, and deletions to HCPCS Current Procedural Terminology, Fourth Edition (HCPCS/CPT-4) codes. This OCE is used to process bills from hospitals not paid under the OPPS, and the Centers for Medicare & Medicaid Services (CMS) has provided detailed information about these changes in separate communications.

The following are changes made for Version 20.1 of the Non-OPPS OCE:

The following ASC procedure codes will be **deleted** from Ambulatory Surgical/Surgery Center (ASC) procedures and payments groups, effective **January 1, 2005**:

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Code	Description of Code
50559	Renal endoscopy/radiotracer
50959	Ureter endoscopy & tracer
50978	Ureter endoscopy & tracer

The following new procedures have been added to the list of procedures for Females Only, effective January 1, 2005:

Code	Description of Code
57267	Insert mes/pelvic flr addon
57283	Colpopexy, intraperitoneal
58356	Endometrial cryoblation
58565	Hysteroscopy, sterilization
58956	Bso, omentectomy w/tah
84163	Pappa, serum
0500F	Initial prenatal care visit
0501F	Prenatal flow sheet
0502F	Subsequent prenatal care
0503F	Postpartum care visit
0071T	U/s leiomyomata ablate <200
0072T	U/s leiomyomata ablate >200

The following new procedure codes have been added to the list of procedures for Males Only effective January 1, 2005:

Code	Description of Code
52402	Cystourethro cut ejacul duct
0084T	Temp prostate urethral stent

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The following codes have been **removed** from the list of Non-Reportable procedures **effective January 1, 2002**:

Code	Description of Code
90379	Rsv ig, iv
90389	Tetanus ig, im

The following codes have been **removed** from the list of Non-Reportable procedures **effective January 1, 2005**:

Code	Description of Code
36415	Routine venipuncture
96400	Chemotherapy, sc/im
96405	Intralesional chemo admin
96406	Intralesional chemo admin
96408	Chemotherapy, push technique
96410	Chemotherapy, infusion method
96412	Chemo, infuse method add-on
96414	Chemo, infuse method add-on
96420	Chemotherapy, push technique
96422	Chemotherapy, infuse method
96423	Chemotherapy, infusion method add-on
96425	Chemotherapy, infusion
96440	Chemotherapy, intracavitary
96445	Chemotherapy, intracavitary
96450	Chemotherapy into CNS
96542	Chemotherapy injection
96545	Provide chemotherapy agent
96549	Chemotherapy, unspecified

- The new HCPCS/CPT codes, as described in **Appendix A of CR 3621**, have been **added** to the list of valid codes for the Non-OPPS OCE.

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- The HCPCS/CPT codes listed in **Appendix B and C of CR 3621** have been **deleted** from the Non-OPPS OCE.
- The HCPCS/CPT codes listed in **Appendix D of CR 3621** have been **added** to the list of Non-Reportable procedures.

### Additional Information

For complete details, see CR 3621, which is the official instruction issued to your intermediary regarding this change and includes the following:

- **Appendix A** - HCPCS/CPT codes **added** to the list of valid codes for the Non-OPPS OCE
- **Appendix B and C** - HCPCS/CPT codes **deleted** from the Non-OPPS OCE
- **Appendix D** - HCPCS/CPT codes **added** to the list of Non-Reportable procedures

That instruction may be viewed at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R402CP.pdf> on the CMS website.

If you have any questions, please contact your intermediary at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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