Correct Coding Initiative Edits

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Agenda

- National Correct Coding Initiative (NCCI)
- NCCI Tables
- Review of modifiers
- Medicaid NCCI Implementation
- Commercial carrier claim edits
- Medical policies
- Proactive steps to ensure claim payment

National Correct Coding Initiative (NCCI)

- Why is it important to check the edits?
  - Ensure proper coding and billing
  - Improve collections
  - Reduce the number of appeals you file
- All Medicare claims are processed against NCCI.
  - NCCI are now an approved audit issue under the Recovery Audit Contractor (RAC) program
- Health System Reform requires Medicaid CCI Compliance

National Correct Coding Initiative (NCCI)

- Developed by CMS to promote national correct coding methodologies and to control improper coding leading to inappropriate payment

- Based on coding conventions defined in the AMA CPT manual, national and local policies and edits, coding guidelines developed by national societies, analysis of standard medical and surgical practices, and a review of current coding practices

National Correct Coding Initiative (NCCI)

- NCCI Concerns
  - Check with your specialty society
  - Submit supportive documentation, including medical journal articles

    National Correct Coding Initiative

    Correct Coding Solutions LLC

    P.O. Box 907

    Carmel, IN 46082-0907

    Attention: Niles R. Rosen, MD, Medical Director

    and Linda S. Dietz, Coding Specialist

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National Correct Coding Initiative (NCCI)

- Purpose of CCI edits is to ensure the most comprehensive groups of codes are billed rather than the component parts.

- Edits also check for mutually exclusive code pairs.

- Edits are pairs of CPT or HCPCS Level II codes that are not payable separately except under certain circumstances.

- Edits are applied to services billed by the same physician for the same patient on the same date of service.

Medicare National Correct Coding Initiative (NCCI)

- Two types of code edits, arranged by two sets of tables:
  - Column 1/Column 2 Correct Coding edits
  - Mutually exclusive edits
- Medically Unlikely Edits (MUE)
- Edits are under constant refinement, and revisions are published quarterly.

Medicare National Correct Coding Initiative (NCCI)

- Medically Unlikely Edits (MUEs):
  - Not all HCPCS and CPT codes have an MUE
  - Some MUEs are considered confidential by CMS

Medicare National Correct Coding Initiative (NCCI)

- Edits consist of code pairs arranged in two columns (Column 1 and Column 2)
  - Column 1 generally is the major procedure or service.
  - Column 2 often represents the component part of the Column 1 code.
- Column 2 is not payable if performed on the same day on the same patient by the same physician as the code listed in Column 1.
- Some edits permit the use of a modifier.

Medicare National Correct Coding Initiative (NCCI)

- Mutually Exclusive Edits

  - Identify code pairs that, for clinical reasons, are unlikely to be performed on the same patient on the same day.

- Within the mutually exclusive edits table, the Column 2 code generally represents the procedure or service with the higher work Relative Value Unit (RVU), and it is not reimbursed when reported with the Column 1 code.

Medicare National Correct Coding Initiative (NCCI)

- Correct coding modifier indicators (0, 1, or 9) are assigned to each code pair on both tables.
  - 0 – No modifiers associated with NCCI and no circumstances in which both procedures of the code pair should be paid
  - 1 – Modifiers associated with NCCI allowed when appropriate
  - 9 – NCCI edits not applicable to this code pair

Medicare National Correct Coding Initiative (NCCI)

Anatomical Modifiers			Global Surgery Modifier		Other Modifiers
-E1	-F6	-T1	-25	-78	-59
-E2	-F7	-T2	-58	-79	-91
-E3	-F8	-T3			
-E4	-F9	-T4			
-FA	-LC	-T5			
-F1	-LD	-T6			
-F2	-RC	-T7			
-F3	-LT	-T8			
-F4	-RT	-T9			
-F5	-TA				

Medicare National Correct Coding Initiative (NCCI)

- Two frequently used modifiers are -25 and -59.

  - -25 – Significant, separately identifiable E&M service by same physician on same day of procedure or other service

  - -59 – Procedures/services normally not reported together but appropriate under the circumstances; may represent different session/patient encounter, different procedure/surgery, different site or organ system, separate incision/excision, separate lesion, separate injury

Medicare National Correct Coding Initiative (NCCI)

- Use -59 only when none of the other modifiers are appropriate.

- Medical records must reflect the modifier's appropriate use in describing the services.

- Example of using -59:
  - CPT codes 38221 and 38220

Medicare National Correct Coding Initiative (NCCI)

Column1/Column 2 Edits					
Column 1	Column 2	* = In existence prior to 1996	Effective Date	Deletion Date *=no data	Modifier 0=not allowed 1=allowed 9=not applicable
40490	C8950		20060101	20061231	1
40490	C8952		20060101	20061231	1
40490	G0345		20050101	20051231	1
40490	G0347		20050101	20051231	1
40490	G0351		20050701	20051231	1
40490	G0353		20050701	20051231	1
40490	G0354		20050701	20051231	1
40490	J0670		20100701	*	1
40490	J2001		20040701	*	1
40490	00170		20020701	*	0
40490	0213T		20100701	*	0
40490	0216T		20100701	*	0
40490	10021		20020401	*	1
40490	10022		20020401	*	1
40490	36000		20021001	*	1
40490	36400		20090401	*	1
40490	36405		20090401	*	1
40490	36406		20090401	*	1
40490	36410		20021001	*	1
40490	36420		20090401	*	1
40490	36425		20090401	*	1
40490	36430		20090401	*	1
40490	36440		20090401	*	1
40490	36600		20090401	*	1
40490	36640		20090401	*	1
40490	37202		20021001	*	1
40490	43752		20090401	*	1
40490	51701		20071001	*	1

Medicare National Correct Coding Initiative (NCCI)

Mutually Exclusive Edits					
Column 1	Column 2	* = In existence prior to 1996	Effective Date	Deletion Date *=no data	Modifier 0=not allowed 1=allowed 9=not applicable
40520	40525		19960101	*	1
40525	40527		19960101	*	1
40650	13150		19960101	*	1
40650	13151		19960101	*	1
40650	13152		19960101	*	1
40650	40652		19960101	*	1
40650	40654		19961001	*	1
40652	13151		19960101	*	1
40652	13152		19960101	*	1
40652	40654		19961001	*	1
40654	13152		19960101	*	1
40700	40720		19960101	*	1
40700	40761		19960101	*	1
40702	40701		19960101	*	1
40702	40720		19960101	*	1
40702	40761		19960101	*	1
40720	40701		19960101	*	1
40720	40761		19960101	*	1
40761	40701		19960101	*	1
40814	40816		19960101	*	1
40820	40810		19960101	*	1
40820	40812		19960101	*	1
40820	40814		19960101	*	1
40820	40816		19960101	*	1
40830	40831		19960101	*	1
40840	40842		19980101	*	0
41000	10061		19970401	*	1

Medicare National Correct Coding Initiative (NCCI)

- CMS and Trailblazer provide NCCI instruction manuals

- Trailblazer additional resources
  - Evaluation and Management Services Manual

    (25 modifier)
  - Surgery Manual

    (59 modifier)

Medicaid NCCI Implementation

- Effective February 25, 2011, as required by Health System Reform, Texas Medicaid & Healthcare Partnership (TMHP) has implemented Medicaid CCI edits

- Applies to all claims with Dates of Service (DOS) on or after October 1, 2010, including appealed or reprocessed claims

- Claims that have denied based on CCI may be appealed with the appropriate modifier and documentation of medical necessity

Medicaid NCCI Implementation

- Includes Column 1/Column 2, Mutually Exclusive and Medically Unlikely Edits

- Updated quarterly

- CCI Modifiers will be considered

- Multiple surgery guidelines still apply

- Format is similar to Medicare CCI edits, however, there are differences, as well as certain exceptions

Medicaid NCCI Implementation

- Major difference is that the Column 1/Column 2 and Mutually Exclusive Edits are combined into one table

- Medicaid CCI do not have a previous edit indicator column

- Medicaid policy is more restrictive than CCI edits in some cases, Medicaid policy prevails

- Exceptions are permitted and must be approved by CMS

Medicaid NCCI Implementation

Column 1 / Column 2 Edits (Includes Mutually Exclusive Edits)				
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Column 1	Column 2	Effective Date	Deletion Date *=no data	Modifier 0=not allowed 1= allowed 9= not applicable
40525	40500	20101001	*	1
40525	40510	20101001	*	1
40525	40527	20101001	*	1
40525	43752	20101001	*	1
40525	51701	20101001	*	1
40525	51702	20101001	*	1
40525	51703	20101001	*	1
40525	62310	20101001	*	0
40525	62311	20101001	*	0
40525	62318	20101001	*	0
40525	62319	20101001	*	0
40525	64400	20101001	*	0
40525	64402	20101001	*	0
40525	64405	20101001	*	0

Medicaid NCCI Implementation

- TMA is currently working with the Texas Health & Human Services Commission and TMHP, to address concerns relating to multiple surgeries and to make the process more transparent

- Monitor TMHP for important updates

- Review Texas Medicaid Provider Procedures Manual for rules and limitations

Medicaid NCCI Implementation

- CMS Medicaid CCI Coding Web Page
  - http://www.cms.gov/MedicaidNCCICoding/01_Overview.asp#TopOfPage
- NCCI State Medicaid Director Newsletter
  - http://www.cms.gov/smdl/downloads/SMD10017.pdf
- Medicaid CCI Coding Policy Manual
  - Not fully implemented by TMHP

McKesson ClaimCheck

- Code auditing software utilized by many insurance companies (BCBS, Cigna, Aetna, UHC)

- Insurance company can turn edits off and on

- Sometimes follows NCCI but doesn't always "mirror" it

- Can vary among insurance companies

McKesson ClaimCheck

- Edit-check located under the following sections of the companies' Web sites:
  - BCBS: General Reimbursement
  - Cigna: Medical Resources
  - Aetna: NaviNet
  - UHC: Claims & Payment

Medical Policies and Reimbursement Policies

- Medicare Policies

  - National Coverage Determinations (NCD)

  - Local Coverage Determinations (LCD)

- Medicaid

  - Texas Medicaid Provider Procedures Manual

- Commercial medical policies

Review

- NCCI are available on the CMS web site

- Important: NCCI edits are updated quarterly, always make sure to update the edits, use the most current edits and using the correct tables

- Check NCCI, medical and reimbursement policies before billing services.

- Again, effective for DOS October 1, 2010 Medicaid CCI Edits were implemented

Using All This Information

- Consider loading the CCI edits into your software

- Utilize NCCI when appealing commercial carrier claims

- Discuss with your staff how to monitor the NCCI quarterly updates, medical and reimbursement policies, and carrier web sites

- Verify that multiple procedure reductions are being calculated correctly

Payment Advocacy Services

- Hassle Factor Log Program

- Mini-Consultations

- Coding and Billing Hotline

- Medicare/Medicaid Bulletin Index

- TMA Payment Advocacy Facebook Page

Resources

- CMS Modifier -59 article

  - www.cms.hhs.gov/NationalCorrectCodInitEd/Downloads/modifier59.pdf

- CMS NCCI edits for physicians

  - http://www.cms.gov/NationalCorrectCodInitEd/NCCIEP/list.asp#TopOfPage

- CMS Booklet: How to Use The National Correct Coding Initiative (NCCI) Tools

  - http://www.cms.gov/MLNProducts/downloads/How-To-Use-NCCI-Tools.pdf

- Connolly

  - http://www.connolly.com/Pages/ConnollyHomePage.aspx

Resources

- Purchase NCCI edits from NTIS

  - http://www.ntis.gov/products/cci.aspx

- TrailBlazer NCCI and MUEs Manual

  - http://www.trailblazerhealth.com/Publications/Training%20Manual/NCCI.pdf

- Texas Medicaid & Healthcare Partnership

  - http://www.tmhp.com/Pages/default.aspx

Acronyms

- (AMA) American Medical Association
- (BCBS) Blue Cross Blue Shield
- (CCI) Correct Coding Initiative
- (CMS) Centers for Medicaid & Medicare Services
- (CPT) Current Procedural Terminology
- (HCPCS) Healthcare Common Procedure Coding System

Acronyms

- (LCD) Local Coverage Determination

- (MUE) Medically Unlikely Edit

- (NCCI) National Correct Coding Initiative

- (RVU) Relative Value Unit

- (TMHP) Texas Medicaid & Healthcare Partnership

- (UHC) United Healthcare

Thank you!

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