

Reimbursement Policy

National Correct Coding Initiative, Medically Unlikely Edits

Reimbursement Policy – Claims Editing

Optum is implementing claim processing edits that may impact claim payment. This notice provides information about medically unlikely edits. Reimbursement policies establish processes to ensure accurate and appropriate claim processing in accordance with industry standards. These processes serve to identify potentially inappropriate billing and/or utilization of services. Requests for medical records may be made for administrative review (not based or used for Medical Necessity). Record requests outline what is to be submitted; please provide requested records within defined time-frames. Optum provides education and support as a component of our process.

As new processes are developed further Alerts will be made in an effort to keep providers informed.

Medicare National Correct Coding Initiative (NCCI) Medically Unlikely Edits (MUE)

The Centers for Medicare and Medicaid Services (CMS) implemented Medically Unlikely Edits in their claims systems on January 1, 2007. CMS developed the National Correct Coding Initiative “to promote national correct coding methodologies and to control improper coding leading to inappropriate payment in Part B claims. CMS developed its coding policies based on coding conventions defined in the American Medical Association's 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.”

An MUE for a HCPCS/CPT code reflects the maximum units of service that a provider would be allowed to bill under most circumstances for a single beneficiary on a single date of service when reported without the appropriate modifier. Not all HCPCS/CPT codes have an MUE.

Optum uses the CMS Practitioner Services MUE Table for the edit of claims billed by physicians and practitioners. This table is updated quarterly. Claims submissions not in compliance with this rule will be denied.

Specific listings of HCPCS/CPT codes and maximum units of service which are subject to edit can be obtained from the CMS web site, Medically Unlikely Edits.

Resources

- Centers for Medicare and Medicaid Services, Medically Unlikely Edits:
<http://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/MUE.html>
- CMS NCCI Coding Policy Manual:
http://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/Downloads/NCCI_Policy_Manual.zip
- American Medical Association (AMA) Current Procedural Terminology (CPT) Manual.