A Message to

Business Office Managers

AmeriHealth

8000 Midlantic Drive, Suite 333, Mt. Laurel N.J. 08054

Memorandum

TO: AmeriHealth Participating Hospitals in New Jersey

FROM: Kathleen Mariano
Manager, Provider Relations

DATE: February 11, 2005

SUBJECT: REVISIONS TO EDI PROVIDER BUSINESS EDITS FOR OUTPATIENT CLAIMS

To accommodate on-going changes to HCPCS/CPT-4 and revisions to our billing requirements, we have updated the EDI business edits for outpatient claims. The attached tables are the complete list of revenue codes that require HCPCS codes on the line level, correlation edits, interventional radiology edits and miscellaneous HCPCS edits. Some of the notable changes to the tables are listed below:

ATTACHMENT I - REVENUE CODE REQUIRES HCPCS

- 343 and 344, Diagnostic and Therapeutic Radiopharmaceuticals, have been correlated to the appropriate radiopharmaceutical HCPCS codes.
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ATTACHMENT II – CORRELATION EDIT

- This document has been revised to present the various correlation edits alphabetically by category.

- Cardiology: Codes 93631, 93650, 93651, 93652 and 93662 have been removed from the cardiology correlation.

- Neurology: 922 Electromyelogram, has been added to the neurology correlation to reflect CMS requirements for billing these procedures.

- Pharmacy: We have eliminated temporary code ranges.

- Radiology: Radiation Oncology, 77261-77799 and Radiosurgery codes G0173, G0242, G0243 have been removed from this edit.

- Surgery: We have added additional HCPCS codes to the correlation to describe implantable devices and brachytherapy sources.

- Modifications have been made to incorporate 2005 Procedure Code changes to the following: Audiology, Cardiology, Chemotherapy, Gastroenterology, Laboratory, PT/OT, Radiology and Surgery.

- Dialysis and Radiation Therapy have been updated to include expanded code lists.

ATTACHMENT III – INTERVENTIONAL RADIOLOGY

- No changes have been made to this edit.

ATTACHMENT IV – MISCELLANEOUS HCPCS

- No changes have been made to this edit.

Please share these documents with appropriate members of your staff. And as always, if you have questions about this bulletin, please contact your Hospital Service Coordinator or Provider Relations Department at 856-778-6500. For questions about the business edits, please contact Germaine Anderson, Manager, Facility Payment at 215-241-2635 or via e-mail at Germaine.Anderson@amerihealth.com.

Attachments

EDI EDITS FOR OUTPATIENT CLAIMS
REVENUE CODES THAT REQUIRE HCPCS CODES

The following revenue codes are subject to this edit and require HCPCS/CPT-4 codes on the line level. The claims will reject with the message "HCPCS Procedure code required for revenue code (XXX) is missing" if they are submitted without a valid Procedure Code.

REVENUE CODE	DESCRIPTION
250	Pharmacy - General
251	Pharmacy - Generic
252	Pharmacy - Non-Generic
253	Pharmacy - Take Home
254	Pharmacy - Incident to Diagnostic Services
255	Pharmacy - Incident to Radiology
256	Pharmacy - Experimental
258	Pharmacy - IV Solutions
259	Pharmacy - Other
280	Oncology - General
289	Oncology - Other
300	Lab - General
301	Lab - Chemistry
302	Lab - Immunology
303	Lab - Renal Patient Home
304	Lab - Non-Routine Dialysis
305	Lab - Hematology
306	Lab - Bacteriology/Microbiology
307	Lab - Urology
309	Lab - Other
310	Lab/Path - General
311	Lab/Path - Cytology
312	Lab/Path - Histology
314	Lab/Path - Biopsy
319	Lab/Path - Other
320	Dx Radiology - General
321	Dx Radiology - Angiocardiology
322	Dx Radiology - Arthrography
323	Dx Radiology - Arteriography
324	Dx Radiology - Chest X-ray
329	Dx Radiology - Other
330	Rx Radiology - General
331	Rx Radiology - Chemotherapy Injected
332	Rx Radiology - Chemotherapy Oral
333	Rx Radiology - Radiation Therapy
335	Rx Radiology - Chemotherapy IV
339	Rx Radiology - Other
340	Nuclear Medicine - General
341	Nuclear Medicine - Diagnostic
342	Nuclear Medicine - Therapeutic

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REVENUE CODE	DESCRIPTION
343	**Diagnostic Radiopharmaceuticals**
344	**Therapeutic Radiopharmaceuticals**
349	Nuclear Medicine - Other
350	CT Scan - General
351	CT Scan - Head
352	CT Scan - Body
359	CT Scan - Other
360	OR - General
361	OR - Minor
362	OR - Other Transplant
367	OR - Kidney Transplant
369	OR - Other Transplant
400	Imaging - General
401	Dx Mammography
402	Ultrasound
403	Screening Mammography
404	PET
409	Imaging - Other
410	Respiratory - General
412	Inhalation
413	Hyperbaric Oxygen
419	Other Respiratory Services
420	PT - General
421	PT - Visit
422	PT - Hourly
423	PT - Group
424	PT - Evaluation
429	PT - Other
430	OT - General
431	OT - Visit
432	OT - Hourly
433	OT - Group
434	OT - Evaluation
439	OT - Other
440	ST - General
441	ST - Visit
442	ST - Hourly
443	ST - Group
444	ST - Evaluation

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REVENUE CODE	DESCRIPTION
449	ST - Other
450	ER - General
451	ER - Screening
452	ER - Beyond Screening
456	ER - Urgent Care
459	ER - Other
460	Pulmonary - General
469	Pulmonary - Other
470	Audiology - General
471	Audiology - Diagnostic
472	Audiology - Treatment
479	Other Audiology
480	Cardiology Services - General
481	Cardiac Cath Lab
482	Stress Test
483	Echocardiography
489	Cardiology Services - Other
490	Ambulatory Surgery - General
499	Ambulatory Surgery - Other
610	MRT - General
611	MRI - Brain and Brainstem
612	MRI - Spinal Cord and Spine
614	MRI - Other
615	MRA - Head and Neck
616	MRA - Lower Extremities
618	MRA - Other
619	MRT - Other
630	Pharmacy
631	Pharmacy
632	Pharmacy
633	Pharmacy
634	Pharmacy
635	Pharmacy
636	Pharmacy
637	Pharmacy
730	EKG - General
731	Holter Monitor
732	Telemetry
739	EKG - Other
740	EEG - General

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REVENUE CODE	DESCRIPTION
749	EEG - Other
750	Gastrointestinal Services - General
759	Gastrointestinal Services - Other
761	Treatment Room
771	Vaccine Administration
790	Lithotripsy - General
799	Lithotripsy - Other
820	Hemodialysis - General
821	Hemodialysis - Composite or Other Rate
822	Hemodialysis - Home Supplies
823	Hemodialysis - Home Equipment
824	Hemodialysis - Maintenance
825	Hemodialysis - Support Services
829	Hemodialysis - Other Outpatient
830	Peritoneal Dialysis - General
831	Peritoneal Dialysis - Composite Rate
832	Peritoneal Dialysis - Home Supplies
833	Peritoneal Dialysis - Home Equipment
834	Peritoneal Dialysis - Maintenance
835	Peritoneal Dialysis - Support Services
839	Peritoneal Dialysis - Other
840	CAPD - General
841	CAPD - Composite Rate
842	CAPD - Home Supplies
843	CAPD - Home Equipment
844	CAPD - Maintenance
845	CAPD - Support
849	CAPD - Other
850	CCPD - General
851	CCPD - Composite Rate
852	CCPD - Home Supplies
853	CCPD - Home Equipment
854	CCPD - Maintenance
855	CCPD - Support
859	CCPD - Other
920	Other Dx Services - General
921	Peripheral Vascular Lab
922	EMG
923	Pap Smear
924	Allergy Test

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REVENUE CODE	DESCRIPTION
925	Pregnancy Test
929	Other Dx Services
940	Other Therapeutic Services - General
941	Other Therapeutic Services - Recreational Therapy
942	Other Therapeutic Services - Education/Training
943	Other Therapeutic Services - Cardiac Rehab
944	Other Therapeutic Services - Drug Rehab
945	Other Therapeutic Services - Alcohol Rehab
946	Other Therapeutic Services - Complex Medical Equipment - Routine
947	Other Therapeutic Services - Complex Medical Equipment - Ancillary
949	Other Therapeutic Service
951	Other Therapeutic Services - Athletic Training
952	Other Therapeutic Services - Kinesiotherapy

EDI EDITS FOR OUTPATIENT CLAIMS
CORRELATION EDIT

Attachment II

Category	Revenue Code	Acceptable Code Range
Audiology/Speech	440-444, 449, 470-472, 479	21084, 74230, 92502-92510, 92512-92588, 92590-92604, 92606-92609, 92610-92611, 92620-92621, 92625, 96105, 96110-96111, 96115, G0268, S0618
Cardiovascular	480, 482-483, 489, 730-732, 739,921	92960, 93000, 93005, 93012, 93014-93018, 93024-93025, 93040-93042, 93224-93227, 93230-93233, 93235-93237, 93267, 93270-93272, 93278, 93303-93304, 93307-93308, 93313-93318, 93320-93321, 93325, 93350, 93600, 93602-93603, 93607, 93609, 93610, 93612-93613, 93615-93616, 93618-93624, 93631, 93640-93642, 93660, 93701, 93720-93722, 93724, 93727, 93731-93738, 93740-93745, 93760, 93762, 93770, 93784, 93786, 93788, 93790, 93875, 93880, 93882, 93886, 93888, 93890, 93892-93893, 93922-93926, 93930-93931, 93965, 93970-93971, 93975-93976, 93978-93981, 93990, 0086T
Chemotherapy	331, 332, 335	96400, 96405-96406, 96408, 96410, 96412, 96414, 96420, 96422-96423, 96425, 96440, 96445, 96450, 96520, 96530, 96542, 96545, 96549, G0363, Q0083, Q0084, Q0085
Dialysis	820-821, 825, 829-831, 835, 840-841, 849-851, 855, 859	90935, 90937, 90939, 90940, 90945, 90947, 90989, 90993, 90997, 90999, G0257
Emergency Services	450-452, 456, 459	99199, 99201, 99281-99285, 99291-99292, 99354, 99355
Gastroenterology	750, 759	91000, 91010-91012, 91020, 91030, 91034-91035, 91040, 91052, 91055, 91060, 91065, 91100, 91105, 91110, 91120, 91122-91123, 91132-91133, 91299
Laboratory	300-307, 309-312, 314, 319, 923, 925	36415, 36416, 36540, 78267-78268, 80002-88175, 88184-89999, 99000-99001, 99199, A9900, A9901, G0001, G0025-G0027, G0058-G0060, G0103, G0107, G0123-G0124, G0141-G0148, G0306-G0307, P2028-P7001, P9603, P9604, P9612, Q0111-Q0115, Q0091, S2085, S3625, S3645, S3650, S3652, S3655, S3820, S3822, S3823, S3828, S3829, S333-S3834, S3840-S3853
Neurology (Nerve Conduction)	740-749, 922	95900, 95903-95904, 95920-95923, 95925-95929, 95930, 95933-95934, 95936-95937, 95950-95951, 95953-95958, 95961-95962, 95965-95967, 95978-95979, G0255
Neurology (Sleep Studies)	740, 749, 922	95805-95808, 95810-95813, 95816, 95819, 95822, 95824, 95827-95834, 95851-95852, 95857-95858, 95860-95861, 95863-95864, 95867-95872, 95875
Pharmacy	630-636, 250-256, 258-259	90281-90399, 90471-90474, 90476-90749, A0001-A9999 (excluding A4300, A4301, A4643-A4646, A9900, A9901), C0001-C9999 (excluding C1716-C1722, C1728, C1767, C1772, C1777-C1778, C1785-C1786, C1788-C1789, C1813, C1874, C1877, C1881-C1882, C1895-C1896, C1898-C1899, C2614, C2616-C2617, C2619-C2622, C2632, C9408, C9416, C9414, C9434, C9714, C9715, C9728) J0001-J9999 (excluding J7310) Q0001-Q9999 (excluding Q0083-Q0085, Q0183-Q0185, Q1001-Q1005) Q0091-Q0092, Q0103-Q0104, Q0109-Q0115) S0012-S0195, S4993-S5014, S5550-S5571
Pharmacy (Radiopharmaceuticals)	343	A4642, A9500, A9502-A9503, A9505, A9507-A9508, A9510-A9516, A9519, A9520-A9521, A9524, A9526, A9528-A9529, A9531, A9600, C1079-C1082, C1091-C1092, C1122, C1200-C1201, C1775, C9013, C9102-C9103, C9400-C9401, C9403-C9404, Q3000, Q3002-Q3012
Pharmacy (Radiopharmaceuticals)	344	A9517-A9517, A9530, A9532, A9600, A9605, A9699, C1083, C9402, C9405

EDI EDITS FOR OUTPATIENT CLAIMS
CORRELATION EDIT

Attachment II

Category	Revenue Code	Acceptable Code Range
PT/OT	420-424, 429, 430-434, 439, 951, 952	97001-97006, 97010, 97012, 97014, 97016, 97018, 97020, 97022, 97024, 97026, 97028, 97032-97036, 97039, 97110, 97112-97113, 97116, 97122, 97124, 97139, 97140, 97150, 97250, 97260-97261, 97265, 97504, 97520, 97530, 97532-97533, 97535, 97537, 97542, 97545-97546, 97597-97598, 97602, 97605-97606, 97703, 97750, 97755, 97780-97781, G0281-G0283, G0295, Q0103-Q0104, Q0109-Q0110, S0390, S8948, S8950, S8990
Pulmonary/ Respiratory	410, 412-413, 419, 460, 469	36600, 94010, 94014-94016, 94060, 94070, 94150, 94200, 94240, 94250, 94260, 94350, 94360, 94370, 94375, 94400, 94450, 94620-94621, 94640, 94642, 94650-94652, 94656-94657, 94660, 94662, 94664-94665, 94667-94668, 94680-94681, 94690, 94720, 94772, 94799, 95070-95071, 99183, C1300, G0237-G0239, S9437
Radiology	320-324, 329, 340-342, 349-352, 359, 400-404, 409, 610-612, 614-616, 618-619	70010-76999, 78000-78807, 78811-78816, 78990-78991, 79005, 79101, 79400, 79420, 79445-79999, 99199, A4643-A4646, A9900-A9901, C8918-C8920, C9722, G0030-G0047, G0050, G0062-G0063, G0120, G0122, G0125-G0126, G0130-G0132, G0161-G0165, G0188, G0202, G0204, G0206, G0210-G0234, G0236, G0252-G0254, G0262. G0275, G0278, G0288, G0296, Q0092, R0070, R0075, S8035-S8049, S8060, S8075, S8092, S9022-S9024
Radiation Therapy	280, 289, 330, 333, 339	77261-77263, 77280, 77285, 77290, 77295, 77299-77301, 77305, 77310, 77315, 77321, 77326-77328, 77331-77334, 77336, 77370, 77399, 77401-77404, 77406-77409, 77411-77414, 77416-77418, 77427, 77431-77432, 77470, 77499, 77520, 77522-77523, 77525, 77600, 77605, 77610, 77615, 77620, 77750, 77761-77763, 77776-77778, 77781-77784, 77789-77790, 0082T-0083T, G0173, G0242, G0243, G0251, G0273, G0274, G0338-G0340
Surgery	360-362, 367, 369, 481, 490, 499, 790, 799	0008T-0009T, 0012T-0013T, 0020T, 0027T, 0046T-0053T, 0054T-0056T, 10021-21083, 21085-35907, 36002, 36005-36410, 36420-36425, 36460-36503, 36505-36510, 36530-36539, 36550-36599, 36620-50576, 50580-50957, 50961-50976, 50980-52346, 52351-54235, 54300-59020, 59070, 59072, 59074, 59076, 59100-69999, 92018-92019, 92511, 92612, 92614, 92616, 92950-92959, 92961-92998, 93501-93572, 93631, 93650-93652, 93662, 93727, 93799, 95970-95975, 95991, 96570-96571, 99170, 99199, 99999, A4300-A4301, C1716-C1722, C1767, C1772, C1777-C1778, C1785-C1786, C1788-C1789, C2614, C2616-C2622, C2632, C2634-C2636, C9206, C9220-C9222, C9713, C9718-C9719, C9721, D0100-D2962, D2980-D6010, D6205-D7280, D7283-D7999, E0616, E0751-E0752, E0756, E0782-E0783, E0785, G0051-G0053, G0104-G0106, G0120-G0121, G0159, G0168, G0170-G0171, G0251, G0256, G0259-G0261, G0269, G0289-G0291, G0338-G0340, G0364-G0365, J7310, J7343,-J7344, L8600, L8605, L8614, L8670, L8699, L9900, Q0183-Q0185, Q1001-Q1005, S0601 S0800-S0801, S2070, S2090-S2091, S2095, S2109, S2113, S2130-S2131, S2135, S2210, S2213, S2225, S2255, S2262, S2265-S2267, S2310, S2350-S2351, S2362-S2363, S9092, S9527-S9528, V2785

EDI EDITS FOR OUTPATIENT CLAIMS
MISCELLANEOUS HCPCS

> Miscellaneous HCPCS codes should not be used to report administrative services.
> However, these codes will be accepted when submitted on the same claim with surgery or emergency room revenue codes.

The following codes are still subject to this edit and will cause the claim to reject with the message "Miscellaneous HCPCS codes are not billable through EDI (XXXXX)" when submitted without a surgery or an emergency room visit.

Proc Code	Description
76499	Unlisted diagnostic radiologic procedure
76999	Unlisted diagnostic ultrasound procedure
78099	Unlisted endocrine procedure, diagnostic nuclear medicine
78199	Unlisted hematopoietic/reticuloendothelial and lympathic procedure, dx nuclear med
78299	Unlisted gastrointestinal procedure, diagnostic nuclear medicine
78399	Unlisted musculoskeletal procedure, diagnostic nuclear medicine
78499	Unlisted cardiovascular procedure, diagnostic nuclear medicine
78599	Unlisted respiratory procedure, diagnostic nuclear medicine
78699	Unlisted nervous system procedure, diagnostic nuclear medicine
78799	Unlisted genitourinary procedure, diagnostic nuclear medicine
78999	Unlisted miscellaneous procedure, diagnostic nuclear medicine
79999	Unlisted radiopharmaceutical procedure
81099	Unlisted urinalysis procedure
84999	Unlisted chemistry procedure
85999	Unlisted hematology procedure
86586	Unlisted skin test; unlisted antigen each
86849	Unlisted immunology procedure
87999	Unlisted microbiology procedure
88199	Unlisted cytopathology procedure
88299	Unlisted cytogenetic procedure
88399	Unlisted surgical pathology procedure
89240	Unlisted miscellaneous pathology procedure
97799	Unlisted physical medicine service or procedure