



Quarterly Update to the National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP) Edits, Version 25.1 Effective April 1, 2019

MLN Matters Number: MM11126

Related Change Request (CR) Number: 11126

Related CR Release Date: January 11, 2019

Effective Date: April 1, 2019

Related CR Transmittal Number: R4193CP

Implementation Date: April 1, 2019

PROVIDER TYPES AFFECTED

This MLN Matters Article is for physicians, providers, and suppliers billing Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries.

PROVIDER ACTION NEEDED

CR11126 updates the National Correct Coding Initiative (NCCI) Procedure-to-Procedure (PTP) edits, which relate to Chapter 23, Section 20.9 of the Medicare Claims Processing Manual. Please make sure your billing staffs are aware of these updates.

BACKGROUND

The Centers for Medicare & Medicaid Services (CMS) developed the NCCI to promote national correct coding methods and to control improper coding that leads to inappropriate payment in Part B claims.

Version 25.1 includes all previous versions and updates from January 1, 1996 to the present. In the past, NCCI was organized in two tables: Column 1/Column 2 Correct Coding Edits and Mutually Exclusive Code (MEC) Edits. To simplify the use of NCCI edit files (two tables), on April 1, 2012, CMS consolidated these two edit files into the Column One/Column Two Correct Coding edit file. Separate consolidations occurred for the two practitioner NCCI edit files and the two NCCI edit files used for the Outpatient Code Editor (OCE). You only have to search the Column One/Column Two Correct Coding edit file for active or previously deleted edits. CMS no longer publishes a Mutually Exclusive edit file for either practitioner or outpatient hospital services, since all active and deleted edits will appear in the single Column One/Column Two Correct Coding edit file. The edits previously available in the Mutually Exclusive edit file are NOT deleted but are moved to the Column One/Column Two Correct Coding edit file.

Refer to the CMS NCCI webpage for additional information at <http://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/index.html>.

These coding policies are based on coding conventions defined in the American Medical Association's Current Procedural Terminology manual, national and local policies and edits, coding guidelines developed by national societies, analysis of standard medical and surgical practice, and review of current coding practice.

ADDITIONAL INFORMATION

The official instruction, CR1126, issued to your MAC regarding this change is available at <https://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/2019Downloads/R4193CP.pdf>.

If you have questions, your MACs may have more information. Find their website at <http://go.cms.gov/MAC-website-list>.

DOCUMENT HISTORY

Date of Change	Description
January 11, 2019	Initial article released.

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