

n05663

**DME Services - Medicare Line of Business**

*Values*

Accountability • Integrity • Service Excellence • Innovation • Collaboration

**Abstract Purpose:**

Network Health is committed to processing Medicare Advantage claims based on the quarterly Medically Unlikely Edits (MUE) update implemented by the Centers for Medicare & Medicaid Services (CMS).

**Policy Detail:**

- I. CMS created MUEs which indicate the maximum Units of Service (UOS) reimbursable per CPT/HCPC code per member per date of service. These CPT/HCPC codes should be submitted for reimbursement based on their MUE Value, as well as their MUE Adjudication Indicator (MAI).
- II. If the number of units submitted is over the MUE value for a single date of service (DOS), all units will be denied for that DOS.
  - **Please note:** only the beginning DOS submitted on the HCFA 1500 claim form is used in the claim validation process.
- III. **MUE Adjudication Indicator**

Indicator	Description
MAI of 1	Edit is applied at the line level vs. the claim level
MAI of 2	Absolute date of service edits. These are “per day edits based on policy.”
MAI of 3	Claims will process as a date of service edit. These are “per day edits based on the clinical benchmarks.”

**Regulatory Citations:**

Centers for Medicare and Medicaid Services (CMS)

**Origination Date: 3/1/2020**

**Update Date: 5/11/2023**

**Next Review Date: 5/11/2024**