

n05744
Coding Policy

Values

Accountability • Integrity • Service Excellence • Innovation • Collaboration

Abstract Purpose:

This policy provides the resources utilized by Network Health to ensure correct coding is applied to all claims. This policy is applicable to all lines of business.

Policy Detail:

Network Health utilizes various nationally recognized coding resources to ensure accurate and consistent reimbursement for all providers. These resources include, but are not limited to:

- I. American Academy of Professional Coders (AAPC)
- II. American Medical Association (AMA)
- III. Centers for Medicare and Medicaid Services (CMS)
 - A. CMS Claims Processing Manual(s) and Transmittals
 - B. Local Coverage Articles (LCA)
 - C. Local and National Coverage Determinations (LCD and NCD)
 - D. Medically Unlikely Edits (MUE)
 - E. National Physician Fee Schedule Relative Value File
 - F. National Correct Coding Initiative (NCCI)
 - G. Procedure-to-Procedure (PTP)
- IV. Claims Editing System (CES)
- V. Current Procedure Terminology (CPT)
- VI. Diagnosis Related Group (DRG)
- VII. Encoder Pro
- VIII. Healthcare Common Procedure Coding System (HCPCS) Guidelines
- IX. International Classification of Disease (ICD-10)
- X. International Classification of Disease, Procedure Coding System (ICD-10 PCS)
- XI. Uniform Billing Editor

Network Health's Coding Policy is a general resource. It is not intended to address every aspect of a coding situation. Changes in coding policies will be made without warranties of any kind, either express or implied.

Definitions:

Medically Unlikely Edits (MUE): An MUE is a maximum unit of service that a provider would report under most circumstances for a single beneficiary on a single date of service.

Procedure-to-Procedure (PTP): These edits aim to prevent utilization of multiple codes that bill for the same service

Regulatory Citations:

Centers for Medicare and Medicaid Services (CMS)

Related Policies:

Claim Submission Policy

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