

DEPARTMENT OF HEALTH & HUMAN
SERVICES
Centers for Medicare & Medicaid Services
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MEDICARE PLAN PAYMENT GROUP

DATE: December 13, 2023

TO: All Medicare Advantage, Cost, PACE, and Demonstration Organizations Systems Staff

FROM: Jennifer R. Shapiro, Director, Medicare Plan Payment Group

SUBJECT: Encounter Data Software Release Updates: December 2023 Release

The Centers for Medicare and Medicaid Services (CMS) continues to implement software improvements to the systems related to accepting and processing encounter data to support the Medicare Advantage (MA) program. The changes described in this memo impact the Encounter Data Processing System (EDPS) and are effective for submissions beginning December 20, 2023.

New Institutional Edits

Edit 25065 ‘HH Telehealth Visits Submission Error’ – is a new header level informational edit that will validate that the home health telecommunications HCPCS codes G0320, G0321 and G0322 are submitted on the Home Health (TOB 032X) encounters with corresponding revenue codes effective for January 1, 2023 dates of service.

Edit 25065 will post when:

- a. HCPCS code G0320, G0321 or G0322 is present and
- b. TOB does not equal to 032x and
- c. Service line from Date of Service is on or after 01/01/2023.

OR

- a. HCPCS Code G0320, G0321 or G0322 is present and
- b. TOB equals to 032x and
- c. Revenue code does not equal to 042x, 043x, 044x, 055x, 056x or 057x and
- d. Service line from Date of Service is on or after 01/01/2023.

Edit 25070 ‘HCPCS not Valid for HH Visit Rev Code’ – is a new line level informational edit that validates that revenue codes (042x, 043x, 044x, 055x, 056x and 057x) submitted on Home Health (TOB 032X) encounters have an appropriate HCPCS code.

Edit 25070 will post when:

- TOB equal to 032x and
- Service line From Date of Service is on or after **January 1, 2018** and
- Encounter contains one of the following revenue codes without an appropriate HCPCS code associated with it as indicated below:
 - Revenue code 042X with HCPCS codes other than G0151, G0157, G0159, Q5001, Q5002, or Q5009 or
 - Revenue code 043X with HCPCS codes other than G0152, G0158, G0160, Q5001, Q5002 or Q5009 or
 - Revenue code 044X with HCPCS codes other than G0153, G0161, Q5001, Q5002, or Q5009 or
 - Revenue code 055X with HCPCS codes other than G0162, G0299, G0300, G0493, G0494, G0495, G0496, Q5001, Q5002, or Q5009 or
 - Revenue code 056X with HCPCS codes other than G0155, Q5001, Q5002, or Q5009 or
 - Revenue code 057X with HCPCS codes other than G0156, Q5001, Q5002, or Q5009

OR

- TOB equal to 032x and
- Service line From Date of Service is on or after **January 1, 2020** and
- Encounter contains one of the following revenue codes without an appropriate HCPCS code associated with it as indicated below:
 - Revenue code 042X with HCPCS codes other than G0151, G0157, G0159, **G2168**, Q5001, Q5002, or Q5009 or
 - Revenue code 043X with HCPCS codes other than G0152, G0158, G0160, **G2169**, Q5001, Q5002 or Q5009

OR

- TOB equal to 032x and
- Service line From Date of Service is on or after **January 1, 2023** and
- Encounter contains one of the following revenue codes without an appropriate HCPCS code associated with it as indicated below
 - Revenue code 042X with HCPCS codes other than G0151, G0157, G0159, G2168, **G0320, G0321, G0322**, Q5001, Q5002 or Q5009 or
 - Revenue code 043X with HCPCS codes other than G0152, G0158, G0160, G2169, **G0320, G0321, G0322**, Q5001, Q5002 or Q5009 or
 - Revenue code 044X with HCPCS codes other than G0153, G0161, **G0320, G0321, G0322**, Q5001, Q5002, or Q5009 or

- Revenue code 055X with HCPCS codes other than G0162, G0299, G0300, **G0320, G0321, G0322**, G0493, G0494, G0495, G0496, Q5001, Q5002, or Q5009 or
- Revenue code 056X with HCPCS codes other than G0155, **G0320, G0321, G0322**, Q5001, Q5002, or Q5009 or
- Revenue code 057X with HCPCS codes other than G0156, **G0320, G0321, G0322**, Q5001, Q5002, or Q5009.

Updates to existing Informational Edits

Edit 22470 – ‘HH Claim Missing Skilled Services’ – is an existing header level institutional informational edit that validates Home Health (TOB 0327 or TOB 0329) encounters when both covered charges and non-covered charges are submitted. The update adds two new revenue codes, 056x and 057x, and the logic is updated to bypass the edit when Telehealth HCPCS codes G0320, G0321 or G0322 are submitted.

Edit 22470 will post when:

- Type of Bill (TOB) is 0327 or 0329 and
- The Admission Date is not null and
- The encounter statement ‘From’ Date is not equal to the Admission Date and
- Service lines contain revenue code 042x, 043x, 044x, 055x, **056x or 057x** with covered charges greater than zero is not present on the encounter and lines containing revenue code **do not contain Telehealth HCPCS codes G0320, G0321 or G0322** and
- Condition code 20, 21 or 54 is not present

Note: Covered Charge = Billed Amount – Non-Covered Charge

Edit 18270 ‘Rev Code and HCPCS Required’ – is an existing line level institutional informational edit that is being updated with new applicable TOB and revenue codes. The new codes include TOB 074x and TOB 075x, and the edit updates revenue codes that implement the bypass condition of the edit. New code additions are in bold.

Edit 18270 will post when:

- Type of Bill (TOB) is 013X, **074X, 075X**, 076X or
- Type of Bill is 012X or 014X without condition code 41 and
- The HCPCS code is blank.

Bypass issuing this edit for the following revenue codes listed below:

- 0500, 0509, 0521, 0522, 0524, 0525, 0527, 0528, 0583, **0660-0663**, 0669, **0905-0907**, 0931, 0932, 0948, 099X, 100X, 210X, 310X

Updated institutional reject edit

Edit 18260 ‘HCPCS Required with Submitted Rev Code’ – is a line level institutional reject edit that is being updated with a new description and changes to the edit logic.

The new description will read “**Revenue Code not Covered by Medicare**”. The edit logic is being updated to validate the submitted revenue code against the CMS published I/OCE (Integrated Outpatient Code Editor) Quarterly Release Files. The files are publicly available (<https://www.cms.gov/medicare/coding-billing/outpatient-code-editor-oce/quarterly-release-files>); upon downloading the files for latest I/OCE version, please refer to ‘DSC_Edits’ spreadsheet which is located under “Report-Table” folder. This file contains the listing of revenue codes subject to edit 18260. This list may change for each quarter based on I/OCE specification changes. Additional edit changes include validating the revenue code on the I/OCE list submitted regardless of whether a HCPCS is submitted on the line or is left blank. This edit will continue to be bypassed for Chart Review Records.

Edit 18260 ‘Revenue Code not Covered by Medicare’ will post when:

- Revenue code reported is valid, but not listed on the recent quarter’s I/OCE list
- HCPCS is submitted or when the HCPCS field is blank.

Questions can be submitted to RiskAdjustmentOperations@cms.hhs.gov, please specify, “Encounter Data Software Release Updates: December 2023 Release” in the subject line. Thank you.

Appendix A

The Memo contains patient discharge status codes, revenue and condition codes. The American Hospital Association (AHA) has granted to the Centers for Medicare & Medicaid Services (CMS or the agency) and its authorized agents a limited, royalty-free permission to reproduce portions of the National Uniform Billing Code (NUBC) UB-04 Data Specifications Manual and a limited license to use NUBC UB-04 Specifications Data in CMS publications, both print and electronic media, as agency requirements demand.

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