



All Provider Types

Updated Quarterly National Correct Coding Initiative (NCCI) Edits

In this Newsletter:

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Contact Details

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Updated Quarterly National Correct Coding Initiative (NCCI) Edits

Effective July 1, 2014, the updated quarterly National Correct Coding Initiative (NCCI) edits were implemented in eMedNY. There are two types of NCCI edits:

1. Procedure-to-procedure (PTP) edits define pairs of codes that should not be reported together for a variety of reasons. When a PTP edit is set it may show on your remittance statement as **Edit 00715 - PROCEDURE CONFLICTS WITH PRIOR SERVICE** (Claim Adjustment Reason Code: 97) or **Edit 02169 - SERVICE CONFLICTS WITH PRIOR SERVICE, PAY AND ADJUST THE HISTORY CLAIM** (Claim Adjustment Reason Code: B13).
2. Medically Unlikely Edits (MUEs) define for each code the maximum units of service (UOS) that a provider would report under most circumstances for a single beneficiary on a single date of service. When an MUE edit is set it may show on your remittance statement as **Edit 00180 - UNITS GREATER THAN MAXIMUM** (Claim Adjustment Reason Code: 50) or **Edit 02074 - UNITS GREATER THAN MAXIMUM** (Claim Adjustment Reason Code: 50).

More information regarding NCCI is available at the National Correct Coding Initiative in Medicaid website:

<http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Data-and-Systems/National-Correct-Coding-Initiative.html>

More information regarding edits, including possible causes and solutions, can be found at the Edit / Error Knowledge Base Search Tool:

https://www.emedny.org/HIPAA/5010/edit_error/index.aspx

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For billing questions, call CSC at 1-800-343-9000.

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