

July 24, 2024

## PROVIDER ALERT: PAYMENT INTEGRITY UPDATES

Medstar Family Choice will be enhancing our overall Payment Integrity program to continue our objective of ensuring all claims are being paid accurately according to our stated policies. This will include comprehensive prospective claims editing according to National Correct Coding Initiative (NCCI). The National Correct Coding Initiative was designed to promote correct coding methodologies and to control improper coding that leads to inappropriate payment for applicable claims. Consistent with National Correct Coding Initiative (NCCI), MedStar Family Choice aligns with the NCCI program coding policies which are based on and defined in the AMA's CPT manual, Medicaid policies and edits and/or current coding practices.

The NCCI program is comprised of 3 types of edits – NCCI Procedure to Procedure (PTP) edits, Add-on Code (AOC) and Medically Unlikely Edits (MUE). NCCI edits do not apply to Hospital Inpatient Prospective Payment Systems (IPPS). Guidance for the NCCI program along with additional information can be found on the CMS website: <https://www.cms.gov/medicare/coding-billing/ncci-medicare>

In addition, MedStar Family Choice will be expanding its existing CMS Outpatient Code Editor (OCE) edits. The OCE is an editing system created and maintained by CMS to process outpatient facility claims. The OCE edits identify incorrect and improper coding of these claims. Additional information on OCE edits can be found here:

<https://www.cms.gov/Medicare/Coding/OutpatientCodeEdit/OCEQtrReleaseSpecs>

MedStar Family Choice will also be partnering with **Advanced Medical Pricing Solutions (AMPS)** effective September 1, 2024, to perform prospective (pre-payment) as well as retrospective (post-payment) claims editing and high-dollar inpatient Itemized Bill reviews.

For high dollar inpatient claims (excluding DRG), we are introducing a new mandatory Itemized Bill review for all claims over \$25k billed. Claims that meet this criteria will require an itemized bill (IB) and providers will be notified via remit as well as a faxed cover letter with instructions on how to submit the requested information.

Thank you for your patience as we continue to ensure we are processing claims timely and accurately.

For questions concerning this Provider Alert, please contact the MedStar Family Choice District of Columbia Provider Customer Service Department, Monday through Friday, 8 a.m. to 5:30 p.m.

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