MLN Matters®
Information for Medicare Fee-for-Service Health Care Professionals

News Flash - Medicare paid over $92 million in incentives for 2008 under the Physician Quality Reporting Initiative (PQRI). More than 85,000 physicians and other eligible professionals who successfully reported quality-related data to Medicare under the 2008 PQRI received these payments, which were well above the $36 million paid in 2007. The number of eligible professionals who earned an incentive payment increased by one-third from 2007, when 56,700 eligible professionals earned an incentive payment. More information about the PQRI program, including participation guidance and the criteria to qualify for an incentive payment is available at *http://www.cms.hhs.gov/PQRI* on the CMS website.

MLN Matters Number: MM6818

Related Change Request (CR) #: 6818

Related CR Release Date: January 8, 2010

Effective Date: January 1, 2010

Related CR Transmittal #: R1891CP

Implementation Date: January 15, 2010

Correction to CR 6728 on Correct Coding Initiative (CCI) Edits, Version 16.0, Effective January 1, 2010

Provider Types Affected

Physicians submitting claims to Medicare Carriers and Part A/B Medicare Administrative Contractors (A/B MACs) for services provided to Medicare beneficiaries

Provider Action Needed

This article is based on Change Request (CR) 6818, which informs physicians that the latest package of Correct Coding Initiative (CCI) edits, Version 16.0, effective January 1, 2010, is being corrected to replace the files in CR 6728, which was released on November 20, 2009.

Background

The coding policies developed are based on coding conventions defined in the:

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- American Medical Association's (AMA's) *Current Procedural Terminology (CPT) Manual;*
- National and local policies and edits;
- Coding guidelines developed by national societies;
- Analysis of standard medical and surgical practice; and
- Review of current coding practice.

The corrected version for 16.0 will include all previous versions and updates from January 1, 1996, to the present and will be organized in two tables: Column I/Column 2 Correct Coding Edits and Mutually Exclusive Code (MEC) Edits.

Additional Information

Additional information about CCI, including the current CCI and MEC edits, is available at *http://www.cms.hhs.gov/NationalCorrectCodInitEd* on the CMS website.

The CCI and MEC file formats are defined in the *Medicare Claims Processing Manual*, Chapter 23, Section 20.9, which can be found at *http://www.cms.hhs.gov/manuals/downloads/clm104c23.pdf* on the CMS website.

The official instruction CR 6818, issued to your carrier and A/B MAC regarding this change, may be viewed at *http://www.cms.hhs.gov/Transmittals/downloads/R1891CP.pdf* on the CMS website.

The related MLN Matters® article (MM6728) can be found at *http://www.cms.hhs.gov/MLNMattersArticles/downloads/MM6728.pdf* on the CMS website.

If you have any questions, please contact your carrier or A/B MAC at their toll-free number, which may be found at *http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.zip* on the CMS website.

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