Policy: National Correct Coding Initiative

Purpose:
The purpose of this Health Reimbursement Policy is to document payment policy for covered medical and surgical services and supplies. Health care providers (facilities, physicians and other professionals) are expected to exercise independent medical judgment in providing care to members. Reimbursement policy is not intended to impact care decisions or medical practice.

Providers are responsible for accurately, completely, and legibly documenting the services performed. The billing office is expected to submit claims for services rendered using valid codes. Claims should be coded appropriately according to industry standard coding guidelines (including but not limited to AMA, CPT, CPT Assistant, HCPCS, DRG guidelines, CMS’ National Correct Coding Initiative (NCCI) Policy Manual, NCCI table edits and other CMS guidelines).

When processing claims for contracted and non-contracted providers, WPS/Arise/Aspirus Arise follow industry standards relating to standard billing modifiers and coding practices. To the extent there are any conflicts between Reimbursement Policy/Provider Program and the provider contract language, the Provider Program will prevail.

Overview:
This reimbursement policy applies to services reported using both the UB-04 and CMS 1500 or its electronic equivalent. This policy applies to all Commercial Lines of Business and all network and non-network physicians and other qualified health care professionals.

Reimbursement Guidelines:
WPS/Arise/Aspirus Arise will follow the three types of National Correct Coding Initiative (NCCI) edits. Procedure to procedure, Medically Unlikely Edits, and Add-on code edits.

Definition:
National Correct Coding Initiative (NCCI) – Developed by the Centers for Medicare & Medicaid Services (CMS) to control improper coding that leads to inappropriate reimbursement for codes that are unbundled. The coding policies are based on coding conventions defined in the American Medical Association’s Current Procedural Terminology (CPT) Manual, national and local Medicare policies and edits, coding guidelines developed by national societies, standard medical and surgical practice, and/or current coding practice.¹


Approved by: _______________________________ Date

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