



## QUARTERLY UPDATES VERSION 24.2 NATIONAL CORRECT CODING INITIATIVE (NCC/CCI) CHANGES EFFECTIVE JULY 1, 2018

Refer to [User Guide: National Correct Coding Initiative \(NCCI\)](#)

According to The Centers for Medicare & Medicaid Services (CMS), the National Correct Coding Initiative (NCC/CCI) is to encourage correct coding methodologies and to regulate improper coding that leads to inappropriate payment for Part B claims. CMS develops these coding policies based on coding conventions defined in the American Medical Association'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.

**REMINDER:** Column 1 codes are the Comprehensive codes and Column 2 codes are the Component codes (*Component codes are included in the Column 1 Comprehensive codes*).

**REMINDER:** Modifier indicator flag '1' associated with a pair of CPT codes allows eligible providers to bill both services for the same patient on the same day provided documentation supports medical necessity for both codes and proper use of a CCM\* modifier and the modifier is affixed to the **component** column 2 CPT code.  
Modifier flag '0' associated with a pair of CPT codes will only allow payment of one of the codes, i.e., no modifier will bypass the NCC edit.

**REMINDER:** \*Correct Coding Modifiers (CCM) is used to address modifier flag '1' scenarios, i.e., Anatomical modifiers are used in NCC modifier flag '1' scenarios; see below referenced website for CCM\* modifiers.  
<https://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/index.html>  
NOTE: Modifier 25 is only ever affixed to Evaluation & Management (E&M) CPT codes (99201-99499).

Effective July 1, 2018, Version 24.2 edits include a total of 314 new CPT code pairs, 63 deleted CPT code pairs and 213 changed code pairs. There are also update to Mutually Exclusive Code Edits with 148 additions and 43 revisions.

The complete list of Additions, Deletions and Mutually Exclusive Code Edits is available via the CMS website:  
[https://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/Version\\_Update\\_Changes.html](https://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/Version_Update_Changes.html)

### Notable changes in Version 24.2:

HCPCS code **G0515** *Development of cognitive skills to improve attention, memory, problem solving (includes compensatory training), direct (one-on-one) patient contact, each 15 minutes* now has a limit of 8 one the number of units practices can report.

There are 26 new code bundles involving CPT **93668** *Peripheral arterial disease (PAD) rehabilitation, per session*, which providers can perform dozens of times for patients with a PAD diagnosis, accepts a modifier flag '1' with 24 of the code pairs to allow both services to be reported on the same day provided a modifier is appended and providers can prove medical necessity.

Additional CPT codes that allow a modifier flag '1' are:

Electrocardiogram (EKG) Services:

**93000** *Routine EKG using at least 12 leads including interpretation and report*

**93005** *Routine EKG with tracing using at least 12 leads*

**93010** *Routine EKG using at least 12 leads with interpretation and report*

**93040 – 93042** *Rhythm ECG, 1-3 leads, with interpretation and report; tracing only; interpretation and report only*

Physical Therapy (PT) Services:

*Therapeutic procedure, 1 or more areas, each 15 minutes...*

**97110** *therapeutic exercises to develop strength and endurance, range of motion and flexibility*

**97112** *neuromuscular reeducation of movement, balance coordination, kinesthetic sense, posture, and/or proprioception for sitting and/or standing activities*

**97116** *gait training (includes stair climbing)*

**97140** *Manual therapy techniques (eg, mobilization/manipulation, manual lymphatic drainage, manual traction), 1 or more regions, each 5 minutes*

**97150** *Therapeutic procedure(s) group (2 or more individuals)*

Pain Management Injections:

All anesthesia and pain management edits in v24.2 include one of two new HCPCS codes for 2018:

- C9738** *Adjunctive blue light cystoscopy with fluorescent imaging agent (list separately in addition to code for primary procedure)*
- C9748** *Transurethral destruction of prostate tissue; by radiofrequency water vapor (steam) thermal therapy.*

Injection procedures that can no longer be reported, i.e., modifier flag '0', with C9738 or C9748 is extensive, see below for examples:

- 64461 - 64463** *Paravertebral block (PVB) (paraspinous block), thoracic ...*
- 64479 and +64480** *Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with imaging guidance (fluoroscopy or CT) ...*
- 64483 and +64484** *Injection(s), anesthetic agent and/or steroid, transforaminal epidural, with imaging guidance (fluoroscopy or CT) ...*
- 64486 - 64489** *Transversus abdominis plane (TAP) block (abdominal plane block, rectus sheath block) ...*
- 64490 - +64495** *Injection(s), diagnostic or therapeutic agent, paravertebral facet (zygapophyseal) joint (or nerves innervating that joint) with image guidance (fluoroscopy or CT) ...*
- 64505 - 64530** *Injection, anesthetic agent ... to anatomic sites including the carotid sinus, stellate ganglion, superior hypogastric plexus, paravertebral sympathetic nerve, and others*

**SCORE CARDS:**

As of publication date, there is no score card available for version 24.2.

CCI version 24.1 scorecard					
Changes effective April 1.					
<i>(For more on CCI version 24.1 edits, see related story, p. 1.)</i>					
Codes	CCI code pairs added	CCI code pairs deleted	MUEs added	MUEs deleted	MUEs revised
0001T — 0999T	8	0	0	0	1
00000 — 09999	0	0	0	0	0
10000 — 19999	0	0	0	0	0
20000 — 29999	6	0	8	0	3
30000 — 39999	1	1	0	0	6
40000 — 49999	38	38	0	0	0
50000 — 59999	0	0	2	0	0
60000 — 69999	9	0	0	0	0
70000 — 79999	0	4	2	0	0
80000 — 89999	0	0	2	0	11
90000 — 99999	22	15	4	0	10
A0000 — V9999	121	1	123	0	34
<b>Totals</b>	<b>205</b>	<b>59</b>	<b>141</b>	<b>0</b>	<b>65</b>

Note: Code range is based on the comprehensive code of the edit.  
Source: Part B News analysis of CCI version 24.1 changes.

CCI Version 24.0 scorecard					
Changes effective Jan 1.					
Code range	CCI code pairs added	CCI code pairs deleted	MUEs added	MUEs deleted	MUEs revised
0001T — 0999T	2,534	2,695	26	15	0
00000 — 09999	1,652	2,706	0	0	0
10000 — 19999	651	262	6	1	0
20000 — 29999	682	703	18	2	0
30000 — 39999	7,193	2,745	45	12	4
40000 — 49999	756	0	30	0	0
50000 — 59999	546	170	16	1	0
60000 — 69999	668	703	15	3	0
70000 — 79999	89	325	29	18	0
80000 — 89999	6,502	432	113	12	1
90000 — 99999	1,887	1,173	39	4	4
A0000 — V9999	712	237	251	22	9
<b>Totals</b>	<b>23,872</b>	<b>11,448</b>	<b>588</b>	<b>90</b>	<b>18</b>

Note: Code range is based on the comprehensive code of the edit.  
Source: Part B News analysis of CCI version 24.0 changes.

See prior News Blasts for previous NCCI Changes and score cards (available via [www.medtronsoftware.com](http://www.medtronsoftware.com)):

CCI, MUE version 23.2 scorecard					
Changes effective July 1.					
<i>(For more on CCI version 23.2 edits, see related story, p. 2.)</i>					
Code range	CCI code pairs added	CCI code pairs deleted	MUEs added	MUEs deleted	MUEs revised
0001T — 0999T	23	0	5	0	0
00000 — 09999	1,614	0	0	0	0
10000 — 19999	53	0	0	0	0
20000 — 29999	4	4	0	0	0
30000 — 39999	125	2	0	0	0
40000 — 49999	140	0	0	0	0
50000 — 59999	14	0	0	0	10
60000 — 69999	4	0	0	0	8
70000 — 79999	337	0	0	0	0
80000 — 89999	3	3	0	0	4
90000 — 99999	881	51	0	0	4
A0000 — V9999	1,245	40	52	0	86
<b>Totals</b>	<b>4,443</b>	<b>100</b>	<b>57</b>	<b>0</b>	<b>112</b>

Note: Code range is based on the comprehensive code of the edit.  
Source: Part B News analysis of CCI v23.2 changes.

MUE edit changes were added as of the NCCI version 23.2 scorecards published via the [Part B News](#).

CCI Version 23.3 scorecard					
Changes effective Oct. 1.					
<i>(For more on CCI version 23.3 edits, see related story, p. X.)</i>					
Code range	CCI code pairs added	CCI code pairs deleted	MUEs added	MUEs deleted	MUEs revised
0001T — 0999T	276	0	10	0	3
00000 — 09999	0	0	0	0	0
10000 — 19999	53	0	0	0	0
20000 — 29999	39	0	0	0	6
30000 — 39999	127	1	0	0	0
40000 — 49999	111	0	0	0	0
50000 — 59999	32	3	0	0	1
60000 — 69999	22	0	0	0	0
70000 — 79999	7	3	0	0	1
80000 — 89999	4	0	0	0	5
90000 — 99999	529	11	8	0	1
A0000 — V9999	334	0	163	1	10
<b>Totals</b>	<b>1,534</b>	<b>18</b>	<b>181</b>	<b>1</b>	<b>27</b>

Note: Code range is based on the comprehensive code of the edit.  
Source: Part B News analysis of CCI v23.3 changes.

CMS MUE: <https://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/MUE.html>

Contact MEDTRON's Support Dept for assistance or any questions via:

From MEDPDM or MEDEHR Sign On screens, double click on 'support@medtronsoftware.com' to compose an email to the Support Dept.

-OR-

Phone: (985) 234-0599 (local)  
(800) 978-0599 (toll free)

-OR-

Fax: (985) 234-0609