



PROVIDER BULLETIN
#25-2013

TO: Participating hospitals and ambulatory surgical centers

FROM: Contracting and Provider Networks

DATE: November 22, 2013

SUBJECT: Medically Unlikely Edits

The purpose of this bulletin is to reinforce the application of Medically Unlikely Edits (MUE) for facility claims, as referenced in Bulletin #08-2010: Fee Schedule Update and Reminders for Billing Outpatient Units of Service and ER Follow-Up Care.

As previously communicated, Independence Blue Cross is in the process of transitioning to a new operating platform. Claims processed on the new platform will continue to be adjudicated using the Centers for Medicare & Medicaid Services (CMS) MUEs for facility claims. An MUE is assigned to certain HCPCS/CPT[®] codes to identify the maximum units of service that a provider can perform on a patient on a given date of service.

Claim lines with billed units of service that exceed the CMS MUE limits will be rejected. Please note that this information only applies to HCPCS/CPT codes – claims reported with ICD-9 procedure codes are not affected.

For a complete listing of the CMS MUE values, please visit www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/MUE.html.

For more information about our Business Transformation, please visit our dedicated site at www.ibx.com/pnc/businesstransformation.

Note: As of November 1, 2013, MUEs are also applicable to professional claims that are processed on the new platform.

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We encourage you to share this information with appropriate members of your staff.

Independence Blue Cross offers products directly, through its subsidiaries Keystone Health Plan East and QCC Insurance Company, and with Highmark Blue Shield — independent licensees of the Blue Cross and Blue Shield Association.