Medicaid National Correct Coding Initiative

Edit Design Manual

2016
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FILE TYPES

There are two types of National Correct Coding Initiative (NCCI) edits:

- NCCI Procedure-to-Procedure (NCCI PTP) edits
- Medically Unlikely Edits (MUEs) (units of service)

NCCI PTP files and MUE files are prepared for three provider types:

- Practitioner (PRA)
- Outpatient Hospital (OPH)
- Durable Medical Equipment (DME)

NCCI PTP and MUE files are prepared for posting to two websites:

- The Medicaid Integrity Institute (MII) website, which is located on the secure Regional Information Sharing System portal (RISSNET), funded by the United States Department of Justice, and

There are two sets of files:

- Complete edit files – contain a complete replacement file for each quarter’s NCCI PTP edits and MUEs, and
- Change Report files – contain a list of only the additions, deletions, revisions, and correct coding modifier indicator changes for the quarterly release.

MII Files – File Formats

The NCCI PTP and MUE complete edit files posted to the MII website are prepared in three file formats to allow greatest flexibility for claims processors implementing the edits.

- Each file format contains the same records although there may be some difference in the detail or the order of some of the fields. However, the essential information is identical.
- Each claims processor should select the file format that best suits their need and use that format consistently when retrieving and implementing the edits.

The three formats are:

- Fixed-Width ASCII text
- Tab-delimited ASCII text
- Excel 2007/2010

The PTP and MUE Change Report files posted to the MII website are prepared in two formats:

- Tab-delimited ASCII text
- Excel 2007/2010
Publication Files – File Formats


- Each file format contains the same records.
- Each user can select the file format that best suits their need.

The two formats are:

- Tab-delimited ASCII text
- Excel 2007/2010

Important Notes:

- State Medicaid agencies should only use the quarterly Medicaid NCCI complete edit files that are posted on the MII website to process their Medicaid claims and not the complete edit quarterly Medicaid NCCI files posted on the CMS website.
- States should not use the Change Report files to update their NCCI edit files.
- The quarterly Medicaid NCCI files that are posted on the MII website can ONLY be downloaded by a state Medicaid agency.
FILE NAMES

Complete Edit Files

For the complete edit files posted to the MII website, the naming convention that will be used is:

  Payer - MCD = Medicaid
  Type of Edit - PTP or MUE
  Provider type - PRA (Practitioner), OPH (Outpatient Hospital), or DME (Durable Medical Equipment)
  Version number – Year and quarter # (1, 2, 3, 4)
  Release type and rendition number – F = Final – e.g., F1 = first rendition of final file (If there is a
    subsequent revision to a quarterly file, it would be designated F2.)
  Format - T = Fixed-Width ASCII Text; D = Tab-Delimited ASCII Text; E = Excel 2007/2010
  File extension - .txt – Fixed-Width ASCII Text and Tab-Delimited ASCII Text; .xlsx – Excel

For example, the initial final versions of the January 2013 MII website files were named:

  MCD-PTP-PRA-v2013q1-F1-T.txt
  MCD-PTP-PRA-v2013q1-F1-D.txt
  MCD-PTP-PRA-v2013q1-F1-E.xlsx
  MCD-PTP-OPH-v2013q1-F1-T.txt
  MCD-PTP-OPH-v2013q1-F1-D.txt
  MCD-PTP-OPH-v2013q1-F1-E.xlsx
  MCD-PTP-DME-v2013q1-F1-T.txt
  MCD-PTP-DME-v2013q1-F1-D.txt
  MCD-PTP-DME-v2013q1-F1-E.xlsx
  MCD-MUE-PRA-v2013q1-F1-T.txt
  MCD-MUE-PRA-v2013q1-F1-D.txt
  MCD-MUE-PRA-v2013q1-F1-E.xlsx
  MCD-MUE-OPH-v2013q1-F1-T.txt
  MCD-MUE-OPH-v2013q1-F1-D.txt
  MCD-MUE-OPH-v2013q1-F1-E.xlsx
  MCD-MUE-DME-v2013q1-F1-T.txt
  MCD-MUE-DME-v2013q1-F1-D.txt
  MCD-MUE-DME-v2013q1-F1-E.xlsx
For the complete edit Publication files posted to the CMS Medicaid website, Medicaid.gov, the naming convention that will be used is:

- **Payer - MCD = Medicaid**
- **Type of Edit - PTP or MUE**
- **Provider type – Practitioner Services, Outpatient Hospital Services, or DME**
- **Effective date – Effective_mmddyyyy**
- **File extension - .txt – Tab-Delimited ASCII Text; .xlsx – Excel**

For example, the January 2013 Publication files were named:

- MCD-PTP-PractitionerServices-Effective_01012013.txt
- MCD-PTP-PractitionerServices-Effective_01012013.xlsx
- MCD-PTP-OutpatientHospitalServices-Effective_01012013.txt
- MCD-PTP-OutpatientHospitalServices-Effective_01012013.xlsx
- MCD-PTP-DMEServices-Effective_01012013.txt
- MCD-PTP-DMEServices-Effective_01012013.xlsx
- MCD-MUE-PractitionerServices-Effective_01012013.txt
- MCD-MUE-PractitionerServices-Effective_01012013.xlsx
- MCD-MUE-OutpatientHospitalServices-Effective_01012013.txt
- MCD-MUE-OutpatientHospitalServices-Effective_01012013.xlsx
- MCD-MUE-DMEServices-Effective_01012013.txt
- MCD-MUE-DMEServices-Effective_01012013.xlsx

**Change Report Files:**

For Change Report files posted to the **MII website and the** CMS Medicaid website, Medicaid.gov, the naming convention that will be used is:

- **Payer - MCD = Medicaid**
- **Type of Edit - PTP or MUE**
- **Provider type – Practitioner Services (PRA), Outpatient Hospital Services (OPH), or DME (DME)**
- **Change Type – Additions (Adds), Deletions (Dels), Revisions (Revs), CCMI (modifier indicator) changes**
- **Effective date – Effective_mmddyyyy**
- **File extension - .txt – Tab-Delimited ASCII Text or .xlsx – Excel**

For example, the January 2013 Change Report files were named:

- MCD_PTP_PRA_Adds_Eff_01-01-2013.txt
- MCD_PTP_PRA_Dels_Eff_01-01-2013.txt
- MCD_PTP_PRA_CCMI_Changes_Eff_01-01-2013.txt
- MCD_PTP_PRA_Changes_Eff_01-01-2013.xlsx
Note: In the text (.txt) format, each Change Report is formatted individually. Therefore, additions, deletions, revisions, and CCMI changes are contained in separate files. The Excel (.xlsx) format contains a single file with a separate tab for each change type i.e., additions (Adds), deletions (Dels), revisions (Revs), CCMI Changes (CCMIChgs).
NCCI PROCEDURE-TO-PROCEDURE (PTP) EDITS

Edit Characteristics

(1) NCCI PTP edits apply to services by same provider to same beneficiary on same date of service. The edits apply regardless of whether the codes are reported on the same claim or on different claims.

(2) Each edit consists of a code pair (column one code and column two code), a policy statement, the CLEID, an effective date, a deletion date if applicable, and a modifier indicator.
   (a) Column one HCPCS/CPT code
   (b) Column two IPCS/CPT code
   (c) Policy statement – The coding rationale for the edit
   (d) CLEID – Correspondence Language Example Identification number for correspondence
   (e) Effective date – The date that an edit was initially implemented. Claims with dates of service “on or after” this date and “on or before” the deletion date (if any) must be subject to the edit.
   (f) Deletion date – The last date that an edit is active. Claims with dates of service “on or before” the “deletion date” and “on or after” the “effective date” must be subject to the edit. Claims with dates of service after the deletion date are not subject to the edit.
   (g) Modifier indicator (CCMI)
      (i) “0” – Edit cannot be bypassed with an NCCI PTP-associated modifier. (See sections below on NCCI PTP-Associated Modifiers and Claim Adjudication Rules.)
      (ii) “1” – Edit may be able to be bypassed with an NCCI PTP-associated modifier. (See sections below on “NCCI PTP-Associated Modifiers” and “Claim Adjudication Rules”.)
      (iii) “9” – The edit was deleted retroactive to its implementation date. The edit pair is not active and should not be the basis for denying either code of the edit.

(3) The presence of a HCPCS/CPT code in a PTP edit does not necessarily indicate that the code is covered by any state Medicaid program or by all state Medicaid programs.

NCCI PTP-Associated Modifiers

The NCCI PTP-associated modifiers are the following:


   Non-anatomical modifiers:  24, 25, 27, 57, 58, 59, 78, 79, 91, XE, XP, XS, XU

The state’s claims processing system must recognize all of these modifiers and allow the PTP edit to be bypassed, if any of these modifiers is appended to the appropriate code of the edit pair with a modifier indicator of “1” and if the other conditions specified in the Claim Adjudication Rules section below are met. Failure to do this will result in incorrect denials of payment that will be incorrectly attributed to NCCI.
PTP-associated modifiers may be appended if and only if appropriate, based on clinical circumstances, and in accordance with the NCCI program and HCPCS/CPT Manual instructions/definitions for the modifier/procedure code combination. For example, modifier 25 (significant separately identifiable evaluation and management service by the same physician on the same day of the procedure or other service) should only be appended to an evaluation and management (E&M) code (99201 – 99499, 92002-92014), regardless of whether the E&M code is the column 1 or column 2 code. It would never be appropriate for use with other codes, such as surgery codes.

Medicaid NCCI does not require that modifier 59 be appended to the column two code of a PTP edit. It may be appended to either the column one or the column two code. States, providers, and other interested parties should also refer to the Modifier 59 article and the NCCI Policy Manual for Medicaid Services for specific information regarding modifier usage, which can be found on the Medicaid.gov website at http://www.medicaid.gov/Medicaid-CHIP-Program-Information/By-Topics/Data-and-Systems/National-Correct-Coding-Initiative.html.

Claim Adjudication Rules

1. Apply edits to claims for services by the same provider to the same beneficiary on the same date of service.
2. Determine whether type of claim and site of service are subject to the NCCI PTP edits.
   a. The Practitioner NCCI PTP edit file should be applied to Medicaid claims from:
      - practitioners, in which a unique provider identification number for an individual practitioner is associated with each claim line, regardless of the site of service, and
      - ambulatory surgical centers.
   b. The Outpatient Hospital NCCI PTP edit file should be applied to Medicaid claims:
      - from outpatient hospitals and
      - for facility (hospital) emergency department, observation, and hospital laboratory services.
   c. States have the option of applying the Outpatient Hospital NCCI PTP edit file to provider types other than those described in (2)(a), (2)(b), or (2)(d) that submit claims in which a unique provider number for an individual practitioner is not associated with each claim line.
   d. Either the Durable Medical Equipment, Practitioner, or Outpatient Hospital NCCI PTP edit file should be applied to Medicaid claims for durable medical equipment, prosthetics, orthotics, and supplies. Identical edits for these items are present in all three of these files.
3. For each HCPCS/CPT code submitted on a claim, identify all other HCPCS/CPT codes submitted on the current claim or earlier claims in history with the same date of service for the same provider and same beneficiary. This is the subset of HCPCS/CPT codes for each code that needs to be tested against the NCCI procedure-to-procedure edit files.
   a. For each code in the subset, use it as a column one code and pair it with every other code in the subset as a column two code. Each code is paired with every other code as both column one and column two codes. (Note that this method identifies code pairs such that each code as a column one code is paired with every other code as a column two code AND each code as a column two code is paired with every other code as a column one code.) Determine whether any of these code pairs match any of
the code pair edits in the appropriate NCCI PTP edit file for the relevant site of service.

(b) After code pairs that match NCCI PTP edits in the edit file are identified, test the date of service against the effective date and deletion date (if relevant) for each edit. Apply the NCCI PTP edit to the claim only if the date of service is “on or after” the effective date and “on or before” the deletion date of the edit. Most edits do not have deletion dates.

(c) After code pairs that match PTP edits in the edit file with dates of service within the effective period of the corresponding edit are identified, determine whether the column one code is eligible for payment. Apply the NCCI PTP edit to the claim only if the column one code is eligible for payment. Bypass the PTP edit if it is not.

(d) After code pairs that match NCCI PTP edits in the edit file with dates of service within the effective period of the corresponding edit and with a column one code that is eligible for payment are identified, determine whether an NCCI PTP-associated modifier is correctly appended to either or both of the codes of the code pair. Proceed as follows:

(i) If the modifier indicator of the edit is “0”, the column two code is denied (not payable) regardless of whether an NCCI PTP-associated modifier is appended. These edits cannot be bypassed.

(ii) If the modifier indicator of the edit is “1” and if no NCCI PTP-associated modifier is correctly appended to either code, the column two code is denied.

(iii) If the modifier indicator of the edit is “1” and if an NCCI PTP-associated modifier is correctly appended to an appropriate code in the edit, the PTP edit is bypassed and the column two code is eligible for payment. An exception to this rule is that if both codes have the same anatomical modifier (see above) and neither code has modifier 58, 59, 78, 79, XE, XP, XS, or XU, the PTP edit is NOT bypassed and the column two code is denied.

(iv) If the modifier indicator of the edit is “9”, both codes are eligible for payment. The corresponding edit is inactive and was deleted retroactive to its implementation date.

(e) If a code is denied because of an NCCI PTP edit, a denial message should be added to the code denial on the provider payment notice. Some recommendations follow:

(i) Provider Payment Notice Advice alternatives:

   i. “Payment denied based on NCCI edit.”
   
   ii. “Payment denied because service not payable with another service on the same date of service.”

   iii. Do NOT state:
   
   “Payment denied because service is component of another service (or integral to another service) on same date of service.” Most NCCI PTP edits are NOT based on one service being a component of another more comprehensive service or one service being integral to another service.

(f) There should also be a notice on the claim payment advice indicating that the denied service SHOULD NOT be billed to the beneficiary. The denied service is a provider liability. Providers cannot use any type of an “Advanced Beneficiary Notice” or “Waiver” form to obtain payment from beneficiary.
Because reported HCPCS/CPT codes for the same date of service on the current claim are tested with all other codes with the same date of service from claims in history, it is possible that an NCCI PTP edit will be triggered where the column one code on the current claim is payable and the column two code that should have been denied was previously paid from a claim in history that was adjudicated earlier. In this situation, the claims processor must see to it that the prior inappropriate payment for the column two code is recouped, offset, or otherwise adjusted, so that the provider receives appropriate payment for only the column one code.

A state’s Medicaid Management Information System (MMIS) should apply NCCI edits at the appropriate point in the sequence of claim processing edits. Details of the required order of edits are found in the Medicaid NCCI Technical Guidance Document, Sections 7.3 – 7.3.3.
MII WEBSITE FORMATS – NCCI PTP COMPLETE EDIT FILES

The NCCI Procedure-to-Procedure (PTP) complete edit files are posted to the MII website in three formats. The specifications for each format and sample screen prints have been included on the following pages. The three formats are:

1. Fixed-Width ASCII Text
2. Tab-Delimited ASCII Text

Fixed-Width ASCII Text Format

(1) In the NCCI procedure-to-procedure (PTP) MII website edit files in fixed-width ASCII text format, each edit will have the following format:

![Fixed-width text format example](image)

(2) There will be three separate final NCCI PTP MII website edit files. Their file names will be:
   a. Practitioner/ASC NCCI PTP edit file: MCD-PTP-PRA-vXXXXqX-FX-T.txt
   b. Outpatient Hospital NCCI PTP edit file: MCD-PTP-OPH-vXXXXqX-FX-T.txt
   c. Durable Medical Equipment (DME) NCCI PTP edit file: MCD-PTP-DME-vXXXXqX-FX-T.txt

   **Note:** Refer to page 7 for details of file naming convention.

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Notes</th>
<th>Type</th>
<th>Beg. Char</th>
<th># of Char</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column 1 code (no label)</td>
<td>AAAAAA</td>
<td>Alpha-Numeric Text</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td>Column 2 code (no label)</td>
<td>BBBB</td>
<td>Alpha-Numeric Text</td>
<td>6</td>
<td>5</td>
</tr>
</tbody>
</table>
| Standard Policy Statement (no label) | 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## Field Name | Notes | Type | Beg. Char | # of Char
--- | --- | --- | --- | ---
**CLEID** (no label) | Correspondence Language Example Identification number format: DD.EEEEEEEE The first 2 digits correspond to the Standard Policy Statement for the edit. The digits following the “.” correspond to the section of the Medicaid Correspondence Language Manual from which an example can be extracted to incorporate into correspondence such as provider inquiry responses. The last four characters of the CLEID field may contain empty spaces. When a PTP edit is terminated, the CLEID will be changed to 13.DELETEPR4, which corresponds to the delete edit language and example in the Correspondence Language Manual. | Alpha-Numeric Text | 71 | 12

**Effective Date** (no label) | Julian date format: yyyyddd | Numeric | 83 | 7

**Deletion Date** (no label) | Julian date format: yyyyddd Edits with <blank> Deletion Date values are ACTIVE from the date in the Effective Date field. | Numeric | 90 | 7

**Correct Coding Modifier Indicator** (no label) | Indicated in the example as “I” Valid values = 0, 1, or 9 0 = modifiers not allowed 1 = modifiers allowed 9 = Edit terminated retroactively, edit does not apply | Numeric | 97 | 1
The following is an example of a section of a fixed-width ASCII text NCCI PTP MII website edit file:
Tab-Delimited ASCII Text Format

(1) In the NCCI procedure-to-procedure (PTP) MII website edit files in tab-delimited ASCII text format, each edit will have the following format:

(2) There will be three separate final NCCI PTP MII website edit files. Their file names will be:
   a. Practitioner/ASC NCCI PTP edit file: **MCD-PTP-PRA-vXXXXqX-FX-D.txt**
   b. Outpatient Hospital NCCI PTP edit file: **MCD-PTP-OPH-vXXXXqX-FX-D.txt**
   c. Durable Medical Equipment (DME) NCCI PTP edit file: **MCD-PTP-DME-vXXXXqX-FX-D.txt**

**Note:** Refer to page 7 for details of file naming convention.

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Notes</th>
<th>Type</th>
<th>Delimiter</th>
<th># of Char</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column 1 code (labeled Col1)</td>
<td>AAAAAA</td>
<td>Alpha-Numeric Text</td>
<td>-</td>
<td>5</td>
</tr>
<tr>
<td>Column 2 code (labeled Col2)</td>
<td>BBBB</td>
<td>Alpha-Numeric Text</td>
<td><strong>tab</strong></td>
<td>5</td>
</tr>
<tr>
<td>Effective Date (labeled EffDt)</td>
<td>Gregorian – Year (y), Month (m) Day (d) format: yyyymmd&lt;br&gt;Edits with &lt;blank&gt; Deletion Date values are ACTIVE from the date in the Effective Date field.</td>
<td>Numeric</td>
<td><strong>tab</strong></td>
<td>8</td>
</tr>
<tr>
<td>Deletion Date (labeled DelDt)</td>
<td>Gregorian – Year (y), Month (m) Day (d) format: yyyymmd</td>
<td>Numeric</td>
<td><strong>tab</strong></td>
<td>8</td>
</tr>
<tr>
<td>Correct Coding Modifier Indicator (labeled Mod Ind)</td>
<td>Indicated in the example as “I”&lt;br&gt;Valid values = 0, 1, or 9&lt;br&gt;0 = modifiers not allowed&lt;br&gt;1 = modifiers allowed&lt;br&gt;9 = Edit terminated retroactively, edit does not apply</td>
<td>Numeric</td>
<td><strong>tab</strong></td>
<td>1</td>
</tr>
<tr>
<td>Field Name</td>
<td>Notes</td>
<td>Type</td>
<td>Delimiter</td>
<td># of Char</td>
</tr>
<tr>
<td>------------</td>
<td>-------</td>
<td>------------</td>
<td>-----------</td>
<td>-----------</td>
</tr>
<tr>
<td>CLEID</td>
<td>Correspondence Language Example Identification number format: DD.EEEEEEEE</td>
<td>Alpha-Numeric Text</td>
<td>tab</td>
<td>12</td>
</tr>
</tbody>
</table>

The first 2 digits correspond to the Standard Policy Statement for the edit. The digits following the “.” correspond to the section of the Medicaid Correspondence Language Manual from which an example can be extracted to incorporate into correspondence such as provider inquiry responses.

The last four characters of the CLEID field may contain empty spaces.

When a PTP edit is terminated, the CLEID will be changed to 13.DELETEPR4, which corresponds to the deleted edit language and example in the Correspondence Language Manual.

Documents and web postings containing these tab-delimited ASCII text files should include the following notification:

**Please note – In tab-delimited text files, the records may not align with the column headings or from row to row. This is because of the logic that tells the computer where to place certain values when the data is imported into other applications. For example, on rows for edits that do not have a deletion date, the Correct Coding Modifier Indicator will appear aligned. But, on rows for edits that do have a deletion date, the Correct Coding Modifier Indicator will appear to shift to the right. Even though they appear skewed to the reader’s eye, from a programming standpoint, the Correct Coding Modifier Indicator in both lines will be in the same position.**
The following is an example of a section of a tab-delimited ASCII text NCCI PTP MII website edit file:
Excel 2007/2010 Format

(1) In the NCCI procedure-to-procedure (PTP) MII website edit files in Excel 2007/2010 format, each edit will have the following format:

<table>
<thead>
<tr>
<th>Column 1 code (labeled Column 1)</th>
<th>AAAAAA</th>
<th>Alpha-Numeric Text</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column 2 code (labeled Column 2)</td>
<td>BBBBBB</td>
<td>Alpha-Numeric Text</td>
</tr>
<tr>
<td>Effective Date</td>
<td>YYYYMMDD</td>
<td>Gregorian – Year (y), Month (m) Day (d) format: yyyymmded</td>
</tr>
<tr>
<td>Deletion Date</td>
<td>YYYYMMDD</td>
<td>Gregorian – Year (y), Month (m) Day (d) format: yyyymmded</td>
</tr>
</tbody>
</table>

Edits with <blank> Deletion Date values are ACTIVE from the date in the Effective Date field.

<table>
<thead>
<tr>
<th>Correct Coding Modifier Indicator (labeled Modifier Indicator)</th>
<th>Indicated in the example as “I”</th>
<th>Numeric</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valid values = 0, 1, or 9</td>
<td>0 = modifiers not allowed</td>
<td></td>
</tr>
<tr>
<td>1 = modifiers allowed</td>
<td>9 = Edit terminated retroactively, edit does not apply</td>
<td></td>
</tr>
</tbody>
</table>

Note: Refer to page 7 for details of file naming convention.
<table>
<thead>
<tr>
<th>Column Name</th>
<th>Notes</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>CLEID</td>
<td>Correspondence Language Example Identification number</td>
<td>Alpha-Numeric Text</td>
</tr>
<tr>
<td></td>
<td>format:</td>
<td></td>
</tr>
<tr>
<td></td>
<td>DD.EEEEEEEEE</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The first 2 digits correspond to the Standard Policy Statement for the edit. The digits following the “.” correspond to the section of the Medicaid Correspondence Language Manual from which an example can be extracted to incorporate into correspondence such as provider inquiry responses.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>The last four characters of the CLEID field may contain empty spaces.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>When an edit is terminated, the CLEID will be changed to 13.DELETEPR4, which corresponds to the deleted edit language and example in the Correspondence Language Manual.</td>
<td></td>
</tr>
</tbody>
</table>

The following is an example of a section of an Excel 2007/2010 NCCI PTP MII website edit file:

<table>
<thead>
<tr>
<th></th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td>Column 1 / Column 2 Edits (Includes Mutually Exclusive Edits)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td>Column 1</td>
<td>Column 2</td>
<td>Effective Date</td>
<td>Deletion Date</td>
</tr>
<tr>
<td>3</td>
<td>00100</td>
<td>0251T</td>
<td>20110101</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>00100</td>
<td>0253T</td>
<td>20110101</td>
<td>20110101</td>
<td>9</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>00100</td>
<td>0282T</td>
<td>20110101</td>
<td></td>
<td>1</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>00100</td>
<td>0283T</td>
<td>20110101</td>
<td></td>
<td>1</td>
<td></td>
</tr>
</tbody>
</table>
The NCCI Procedure-to-Procedure (PTP) complete edit files are posted to the CMS Medicaid.gov website in two formats. The specifications for each format and sample screen prints have been included on the following pages. The two formats are:

1. Tab-Delimited ASCII Text
2. Excel 2007/2010

**Tab-Delimited ASCII Text Format**

1. In the NCCI procedure-to-procedure (PTP) Publication edit files in tab-delimited ASCII text format, each edit will have the following format:

2. There will be three separate NCCI PTP Publication edit files. The tab-delimited ASCII text publication files do not indicate a version number, but rather include the date the file becomes effective. Their file names will be:
   a. Practitioner/ASC NCCI PTP edit file: **MCD-PTP-PractitionerServices-Effective_mmddyyyy.txt**
   b. Outpatient Hospital NCCI PTP edit file: **MCD-PTP-OutpatientHospitalServices-Effective_mmddyyyy.txt**
   c. Durable Medical Equipment (DME) NCCI PTP edit file: **MCD-PTP-DMEServices-Effective_mmddyyyy.txt**

   **Note:** Refer to page 7 for details of file naming convention.

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Notes</th>
<th>Type</th>
<th>Delimiter</th>
<th># of Char</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column 1 code</td>
<td>AAAAAA</td>
<td>Alpha-Numeric Text</td>
<td>-</td>
<td>5</td>
</tr>
<tr>
<td>(labeled Col1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Column 2 code</td>
<td>BBBBBB</td>
<td>Alpha-Numeric Text</td>
<td>tab</td>
<td>5</td>
</tr>
<tr>
<td>(labeled Col2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Effective Date</td>
<td>Gregorian – Year (y), Month (m) Day (d) format: yyyyymmdd</td>
<td>Numeric</td>
<td>tab</td>
<td>8</td>
</tr>
</tbody>
</table>
### Medicaid NCCI Edit Design Manual

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Notes</th>
<th>Type</th>
<th>Delimiter</th>
<th># of Char</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deletion Date (labeled DelDt)</td>
<td>Gregorian – Year (y), Month (m) Day (d) format: yyyymmdd Edits with &lt;blank&gt; Deletion Date values are ACTIVE from the date in the Effective Date field.</td>
<td>Numeric</td>
<td>tab</td>
<td>8</td>
</tr>
<tr>
<td>Correct Coding Modifier Indicator (labeled Mod Ind)</td>
<td>Indicated in the example as “I” Valid values = 0, 1, or 9 0 = modifiers not allowed 1 = modifiers allowed 9 = Edit terminated retroactively, edit does not apply</td>
<td>Numeric</td>
<td>tab</td>
<td>1</td>
</tr>
</tbody>
</table>

**Notes:**

1. Files for publication on the CMS website, Medicaid.gov, will not include the CLEID because this information is intended for internal claims processor use only.
2. In addition, publication files will include the following copyright disclaimer notice in the header of the file:


   Current Procedural Terminology (CPT) is copyright 20xx American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use.

   CPT® is a trademark of the American Medical Association."

FYI: The format above (including the quotation “” marks) is how the disclaimer appears when copied and pasted from the tab-delimited ASCII Text file. In the file itself, the disclaimer appears as a single, long string of text, including hidden characters which result in the positioning of spaces and line returns.
The following is an example of a section of a tab-delimited ASCII text NCCI PTP Publication edit file:

![Example of a tab-delimited ASCII text NCCI PTP Publication edit file]

Documents and web postings containing these tab-delimited ASCII text files should include the following notification:

Please note – In tab-delimited text files the records may not align with the column headings or from row to row. This is because of the logic that tells the computer where to place certain values when the data is imported into other applications. For example, on rows for edits that do not have a deletion date, the Correct Coding Modifier Indicator will appear aligned. But, on rows for edits that do have a deletion date, the Correct Coding Modifier Indicator will appear to shift to the right. Even though they appear skewed to the reader’s eye, from a programming standpoint, the Correct Coding Modifier Indicator in both lines will be in the same position.

Also, note – Depending on whether the end-user has checked or unchecked the format – Word Wrap – option, the AMA Copyright and Disclaimer information that appears on line 2 of the above example may appear as either a single line or as a variable number of lines depending on how the user has the window displayed. Again, this is simply a reader’s eye perception. From a programming standpoint, because the AMA Copyright and Disclaimer information is preceded by a quotation mark (“”) and followed by a quotation mark (””), the computer will recognize this header information as a single unit and treat it accordingly.
Excel 2007/2010 Format

(1) In the NCCI procedure-to-procedure (PTP) Publication edit files in Excel 2007/2010 format, each edit will have the following format:

(2) There will be three separate NCCI PTP Publication edit files. The Excel 2007/2010 publication files do not indicate a version number, but rather include the date the file becomes effective. Their file names will be:
   a. Practitioner/ASC NCCI PTP edit file: MCD-PTP-PractitionerServices-Effective_mmddyyyy.xlsx
   b. Outpatient Hospital NCCI PTP edit file: MCD-PTP-OutpatientHospitalServices-Effective_mmddyyyy.xlsx
   c. Durable Medical Equipment Provider Services (DME) NCCI PTP edit file: MCD-PTP-DMEServices-Effective_mmddyyyy.txt

Note: Refer to page 7 for details of file naming convention.

<table>
<thead>
<tr>
<th>Column Name</th>
<th>Notes</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column 1 code (labeled Column 1)</td>
<td>AAAAA</td>
<td>Alpha-Numeric Text</td>
</tr>
<tr>
<td>Column 2 code (labeled Column 2)</td>
<td>BBBBB</td>
<td>Alpha-Numeric Text</td>
</tr>
<tr>
<td>Effective Date</td>
<td>Gregorian – Year (y), Month (m) Day (d) format: yyyyymmdd</td>
<td>Numeric</td>
</tr>
</tbody>
</table>
## Medicaid NCCI Edit Design Manual

<table>
<thead>
<tr>
<th>Column Name</th>
<th>Notes</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Deletion Date</td>
<td>Gregorian – Year (y), Month (m) Day (d) format: yyyymmdd</td>
<td>Numeric</td>
</tr>
<tr>
<td></td>
<td>Edits with &lt;blank&gt; Deletion Date values are ACTIVE from the date in the Effective Date field.</td>
<td></td>
</tr>
<tr>
<td>Correct Coding Modifier Indicator (labeled Modifier Indicator)</td>
<td>Indicated in the example as “I”</td>
<td>Numeric</td>
</tr>
<tr>
<td></td>
<td>Valid values = 0, 1, or 9</td>
<td></td>
</tr>
<tr>
<td></td>
<td>0 = modifiers not allowed</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 = modifiers allowed</td>
<td></td>
</tr>
<tr>
<td></td>
<td>9 = Edit terminated retroactively, edit does not apply</td>
<td></td>
</tr>
</tbody>
</table>

### Notes:

1. Files for publication on the CMS website, Medicaid.gov, will not include the CLEID because this information is intended for internal claims processor use only.
2. In addition, publication files will include the following copyright disclaimer notice in the header of the file:


   *Current Procedural Terminology (CPT) is copyright 20xx American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use.*

   *CPT® is a trademark of the American Medical Association.*

   *NOTE: The format above is copied directly from the Excel format file.*
The following is an example of a section of an Excel 2007/2010 NCCI PTP Publication edit file:

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column 1</td>
<td>Column 2</td>
<td>Effective Date</td>
<td>Deletion Date</td>
<td>Modifier Indicator</td>
</tr>
<tr>
<td>25000</td>
<td>25010</td>
<td>20130401</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25000</td>
<td>25015</td>
<td>20130401</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25000</td>
<td>25020</td>
<td>20130401</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25000</td>
<td>25025</td>
<td>20130401</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25000</td>
<td>25035</td>
<td>20130401</td>
<td>20131231</td>
<td></td>
</tr>
<tr>
<td>25000</td>
<td>25040</td>
<td>20130401</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25000</td>
<td>25044</td>
<td>20130401</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
PUBLICATION FORMATS –NCCI PTP CHANGE REPORT FILES

The NCCI Procedure-to-Procedure (PTP) Change Report files are posted to the CMS Medicaid.gov website in two formats. The specifications for each format and sample screen prints have been included on the following pages. The two formats are:

1. Tab-Delimited ASCII Text
2. Excel 2007/2010

Tab-Delimited ASCII Text Format

(1) In the NCCI procedure-to-procedure (PTP) Publication Change Report files in tab-delimited ASCII text format, each file will have the following format:

(2) There will be nine separate NCCI PTP Publication Change Report files in this format. The tab-delimited ASCII text publication files do not indicate a version number, but rather include the date the file becomes effective.

(3) In this format, there will be separate files for each provider type (PRA/OPH/DME) and for each change type (additions, deletions, CCMI changes). Refer to page 7 for details of the file naming convention and the complete list of file names.

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Notes</th>
<th>Type</th>
<th>Delimiter</th>
<th># of Char</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column 1 code (labeled Col1)</td>
<td>AAAAAA</td>
<td>Alpha-Numeric Text</td>
<td></td>
<td>5</td>
</tr>
<tr>
<td>Column 2 code (labeled Col2)</td>
<td>BBBB BB</td>
<td>Alpha-Numeric Text</td>
<td>tab</td>
<td>5</td>
</tr>
<tr>
<td>Correct Coding Modifier Indicator</td>
<td>Indicated in the example as “I”</td>
<td>Numeric</td>
<td>tab</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Valid values = 0, 1, or 9</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>0 = modifiers not allowed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>1 = modifiers allowed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>9 = Edit terminated retroactively, edit</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>does not apply</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Documents and web postings containing these tab-delimited ASCII text files should include the following notification:

Please note – In tab-delimited text files the records may not align with the column headings or from row to row. This is because of the logic that tells the computer where to place certain values when the data is imported into other applications. For example, on rows for edits that do not have a deletion date, the Correct Coding Modifier Indicator will appear aligned. But, on rows for edits that do have a deletion date, the Correct Coding Modifier Indicator will appear to shift to the right. Even though they appear skewed to the reader’s eye, from a programming standpoint, the Correct Coding Modifier Indicator in both lines will be in the same position.

Also, note – Depending on whether the end-user has checked or unchecked the format – Word Wrap – option, the AMA Copyright and Disclaimer information that appears on line 2 of the above example may appear as either a single line or as a variable number of lines depending on how the user has the window displayed. Again, this is simply a reader’s eye perception. From a programming standpoint, because the AMA Copyright and Disclaimer information is preceded by a quotation mark (‘) and followed by a quotation mark (”), the computer will recognize this header information as a single unit and treat it accordingly.
**Excel 2007/2010 Format**

(1) In the NCCI procedure-to-procedure (PTP) Publication Change Report file in Excel 2007/2010 format, each file will have the following format:

<table>
<thead>
<tr>
<th>Column Name</th>
<th>Notes</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>Column 1 code (labeled Column 1)</td>
<td>AAAAAA</td>
<td>Alpha-Numeric Text</td>
</tr>
<tr>
<td>Column 2 code (labeled Column 2)</td>
<td>BBBBBD</td>
<td>Alpha-Numeric Text</td>
</tr>
</tbody>
</table>

(2) There will be three separate NCCI PTP Publication Change Report files. The Excel 2007/2010 publication files do not indicate a version number, but rather include the date the file becomes effective. Each Excel file will contain three worksheets/tabs to identify additions, deletions, and CCMI changes. The file names will be:
   a. Practitioner/ASC NCCI PTP edit file: **MCD_PTP_PRA_Changes_Eff_mm-dd-yyyy.xlsx**
   b. Outpatient Hospital NCCI PTP edit file: **MCD_PTP_OPH_Changes_Eff_mm-dd-yyyy.xlsx**
   c. Durable Medical Equipment (DME) NCCI PTP edit file: **MCD_PTP_DME_Changes_Eff_mm-dd-yyyy.xlsx**

**Note:** Refer to page 7 for complete details regarding file naming conventions.
<table>
<thead>
<tr>
<th>Column Name</th>
<th>Notes</th>
<th>Type</th>
</tr>
</thead>
</table>
| Correct Coding Modifier Indicator (labeled Modifier Indicator)              | Indicated in the example as “I”  
Valid values = 0, 1, or 9  
0 = modifiers not allowed  
1 = modifiers allowed  
9 = Edit terminated retroactively, edit does not apply                        | Numeric   |

Notes:

(1) In addition, publication files will include the following copyright disclaimer notice in the header of the file:


*Current Procedural Terminology (CPT) is copyright 20xx American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use.*

CPT® is a trademark of the American Medical Association.

*NOTE: The format above is copied directly from the Excel format file.*

The following is an example of a section of an Excel 2007/2010 NCCI PTP Change Report file:
MEDICALLY UNLIKELY EDITS

Edit Characteristics

(1) An MUE is a unit of service (UOS) edit for a HCPCS/CPT code that applies to services performed by the same provider for the same beneficiary on the same date of service.

(2) An MUE is a claim line edit, **NOT** an entire claim edit. That is, the MUE is applied separately to the UOS reported on each line of a claim. It is **NOT** applied to the sum total UOS for a code on the entire claim.

(3) An MUE is **NOT** a date of service edit. It is not applied to the sum of all UOS for a code with the same date of service. It is a claim line edit.

(4) Each edit consists of a HCPCS/CPT code, an MUE value, an effective date, a deletion date, CLEID, and publication indicator.
   (a) HCPCS/CPT code
   (b) The MUE value for the HCPCS/CPT code.
   (c) Effective date – The date that each edit was first implemented. Claims with dates of service “on or after” this date and “on or before” the deletion date, if any, must be subject to the edit.
   (d) Deletion date – The last date that an edit is active. Claims with dates of service “on or before” this date and “on or after” the effective date are subject to the edit. Claims with dates of service after the deletion date are not subject to the edit.
   (e) CLEID – Correspondence Language Example Identification number for correspondence.
   (f) Publication Indicator – This indicator enables a claims processor to determine whether an MUE value is published. If the value is **NOT** published on the CMS website, it is a confidential MUE value and should **NOT** be shared with/released to anyone other than Medicaid Fiscal Agent contractors with a valid need for the MUE value. Medicaid currently does not have any confidential/non-published MUE values. However, confidential / non-published Medicaid MUEs may be implemented at a later date.

(5) The presence of an MUE value for a HCPCS/CPT code does not necessarily indicate that the code is covered by any or all state Medicaid programs.
MEDICALLY UNLIKELY EDITS

Claim Adjudication Rules

(1) Apply edits to services by same provider for same beneficiary on same date of service.
(2) Determine whether the type of claim and the site of service are subject to MUE edits.
   (a) The Practitioner MUE file should be applied to Medicaid claims from:
       - practitioners, in which a unique provider identification number for an individual
         practitioner is associated with each claim line, regardless of the site of service,
         and
       - ambulatory surgical centers.
   (b) The Outpatient Hospital MUE file should be applied to Medicaid claims:
       - from outpatient hospitals and
       - for facility (hospital) emergency department, observation, and hospital laboratory
         services.
   (c) States have the option of applying the Outpatient Hospital MUE file to provider types
       other than those described in (2)(a), (2)(b), or (2)(d) that submit claims in which a unique
       provider number for an individual practitioner is not associated with each claim line.
   (d) Either the Durable Medical Equipment, Practitioner, or Outpatient Hospital MUE file
       should be applied to Medicaid claims for durable medical equipment, prosthetics,
       orthotics, and supplies. Identical edits for these items are present in all three of these
       files.
(3) An MUE is a claim line edit that compares the UOS (unit of service) reported for the
    HCPCS/CPT code on the claim line to the MUE value for that code.
(4) If the UOS on the claim line are less than or equal to the MUE value assigned to the
    HCPCS/CPT code, the UOS pass the MUE.
(5) If the UOS on the claim line is greater than the MUE value assigned to the HCPCS/CPT code,
    the UOS fail the MUE and the entire claim line is denied. That is, no UOS are paid for the
    code reported on that claim line.
(6) Statements (3)-(5) apply to claim lines where the “From” date to the “To” date are the same.
    However, if a code subject to an MUE is reported with a different “From” date and “To” date
    on the claim line, the claims processor should divide the reported units of service by the
    number of days in the date span and round to the nearest whole number. This number is
    compared to the MUE value for the code on the claim line and the rules stated in (4) and (5)
    above are applied substituting this calculated number for the submitted UOS. For example, the
    provider bills a HCPCS/CPT code which has an MUE value of ‘1’. The “From” date listed on
    the claim is 02/01/2012 and the “To” date listed on the claim is 02/10/2012. The submitted
    units of service (UOS) on the claim are 14. The “From” and “To” dates equal 10 day date
    span. The number of units of service (14) should be divided by the number of days in the date
    span (10) to determine the “per day” units of service. In this example, the “per day” units of
    service equal 1.4. Rounding to the nearest whole number makes the “per day” units of service
    equal 1, which should pass the MUE edit. However, a claim with the same “From” and “To”
    dates as that listed above (10 day date span) billed with 20 submitted units of service would
    calculate to equal 2 units of service per day. This number exceeds the MUE value for the code
    and the entire claim line should be denied.
(7) If a claim line is denied (not paid) because of an MUE edit, a denial message should be added
    to the code denial on the provider payment notice. Some recommendations follow:
       (a) Provider Payment Notice Advice alternatives:
There should also be a notice on the provider claim payment advice indicating that a denied service SHOULD NOT be billed to the beneficiary. Providers cannot use any type of “Recipient Waiver of Liability” or “Advanced Beneficiary Notice” to obtain payment from the beneficiary.

Caution: Since an MUE is a claim line edit, not an entire claim edit, the claims processor should NOT sum all units of service for a HCPCS/CPT code on the claim or for the same date of service from prior claims in history with same date of service and compare this number to the MUE value.

Caution: A provider may report the same code on more than one claim line, when appropriate, appending a modifier to the code on the second and additional claim lines. The MUE value for the HCPCS/CPT code should be applied separately to the UOS reported on each claim line.

Caution: Claims processors may consider developing duplicate claim line logic to prevent providers from misusing modifiers to report the same code on more than two lines of a claim. Caution is necessary when developing this type of duplicate logic.

Caution: MUEs should NOT apply to any code reported with modifier 55.

Caution: For surgical procedures for which the code describes a unilateral procedure that can also be performed bilaterally, the MUE value is generally set as “1”. The preferred way for providers to bill a surgical procedure that is performed at a single site on each side of the body is to bill the code on a single claim line with modifier 50 appended to the code and one UOS. Alternatively, the state can instruct providers to bill a bilateral surgical procedure on two claim lines (e.g., one with the RT modifier and one UOS and the other with the LT modifier and one UOS), but this is not the recommended approach.

For radiologic procedures, other non-surgical diagnostic procedures, and durable medical equipment that can be performed or used bilaterally, the MUE value is generally set as “2” to permit the billing of bilateral procedures / items on a single claim line with two UOS. As with surgical procedures, states have the option to instruct providers to report bilateral procedures / items on separate claim lines.

MUEs should not be bypassed by the modifiers that are appended to codes to indicate bilateral procedures.

A state’s Medicaid Management Information System (MMIS) should apply NCCI edits at the appropriate point in the sequence of claim processing edits. Details of the required order of edits are found in the Medicaid NCCI Technical Guidance Document, Sections 7.3 – 7.3.3.
MII WEBSITE FORMATS – MUE COMPLETE EDIT FILES

The NCCI Medically Unlikely Edit (MUE) complete edit files are posted to the MII website in three formats. The specifications for each format and sample screen prints have been included on the following pages. The three formats are:

1. Fixed-Width ASCII Text
2. Tab-Delimited ASCII Text

Fixed-Width ASCII Text Format

(1) In the MUE MII website edit files in fixed-width ASCII format, each edit will have the following format:

```
AAAAANNNDND. EEEEEEEEEYYYYYDDYYYDDDP
```

(2) There will be three separate final MUE MII website edit files:

(a) Practitioner MUE edit file named `MCD-MUE-PRA-vXXXXqX-FX-T.txt` There is one edit file that applies to:
   (i) Practitioner services AND
   (ii) Ambulatory surgical center (ASC) services.

(b) Outpatient Hospital MUE edit file named `MCD-MUE-OPH-vXXXXqX-FX-T.txt` There is one edit file that applies to:
   (i) Outpatient hospital claims including DME billed by the hospital (including critical access hospitals)
   (ii) Hospital Facility emergency department claims (including critical access hospitals)
   (iii) Hospital Facility observation services (including critical access hospitals)
   (iv) Hospital Facility outpatient laboratory services (including critical access hospitals)

(c) Durable Medical Equipment (DME) MUE edit file named `MCD-MUE-DME-vXXXXqX-FX-T.txt`. There is one edit file that applies to:
   (i) DME billed by DME providers
      (a) Does NOT apply to DME billed by practitioners. The MUE file for practitioners contains MUEs for DME billed by a practitioner.
      (b) Does NOT apply to DME billed by hospitals. The MUE file for outpatient hospital services contains MUEs for DME billed by a hospital.

Note: Refer to page 7 for details of file naming convention.
<table>
<thead>
<tr>
<th>Field Name</th>
<th>Notes</th>
<th>Type</th>
<th>Beg. Char.</th>
<th># of Char.</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCPCS/CPT Code (no label)</td>
<td>AAAAA</td>
<td>Alpha-Numeric Text</td>
<td>1</td>
<td>5</td>
</tr>
<tr>
<td><strong>MUE Value</strong> (no label)</td>
<td>NNNNNN formatted with leading zeros (e.g., an MUE of 11 will be written as 00011)</td>
<td>Numeric</td>
<td>6</td>
<td>5</td>
</tr>
<tr>
<td>CLEID (no label)</td>
<td>Correspondence Language Example Identification Number format: DD.EEEEEEEE The first 2 digits correspond to the Standard Policy Statement for the edit. The digits following the “.” correspond to the section of the Medicaid Correspondence Language Manual from which an example can be extracted to incorporate into correspondence such as provider inquiry responses. The last four characters of the CLEID field may contain empty spaces. When an MUE is terminated, the CLEID will be changed to 16.DELETEPR5, which corresponds to the deleted edit language and example in the Correspondence Language manual</td>
<td>Alpha-Numeric Text</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>Effective Date (no label)</td>
<td>Julian date format: yyyyddd</td>
<td>Numeric</td>
<td>23</td>
<td>7</td>
</tr>
<tr>
<td>Deletion Date (no label)</td>
<td>Julian date format: yyyyddd Edits with &lt;blank&gt; Deletion Date values are ACTIVE from the date in the Effective Date field.</td>
<td>Numeric</td>
<td>30</td>
<td>7</td>
</tr>
</tbody>
</table>
### Field Name | Notes | Type | Beg. Char. | # of Char.
---|---|---|---|---
Publication Indicator | P
Valid values = 0 or 1
0 = not published – confidential
Do not share – for use by CMS/CMCS and its contractors ONLY (currently no MCD MUEs have an indicator = 0)
1 = published - ok to share | Numeric | 37 | 1

The following is an example of a section of a fixed-width ASCII text MUE MII website edit file:
Tab-Delimited ASCII Text Format

(1) In the MUE MII website edit files in tab-delimited ASCII text format, each edit will have the following format:

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Notes</th>
<th>Type</th>
<th>Delimited</th>
<th># of Char.</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCPCS/CPT Code</td>
<td>AAAAAA</td>
<td>Alpha-Numeric Text</td>
<td>tab</td>
<td>5</td>
</tr>
<tr>
<td>MUE Value</td>
<td>NNNNN formatted with leading zeros (e.g., an MUE of 11 will be written as 00011)</td>
<td>Numeric</td>
<td>tab</td>
<td>5</td>
</tr>
<tr>
<td>Effective Date</td>
<td>Gregorian – Year (y), Month (m), Day (d) format: yyyymmd</td>
<td>Numeric</td>
<td>tab</td>
<td>8</td>
</tr>
<tr>
<td>Field Name</td>
<td>Notes</td>
<td>Type</td>
<td>Delimited</td>
<td># of Char.</td>
</tr>
<tr>
<td>----------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td>------------------</td>
<td>-----------</td>
<td>------------</td>
</tr>
<tr>
<td>Deletion Date (labeled DelDt)</td>
<td>Gregorian – Year (y), Month (m), Day (d) format: yyyymmdd Edits with &lt;blank&gt; Deletion Date values are ACTIVE from the date in the Effective Date field.</td>
<td>Numeric</td>
<td>tab</td>
<td>8</td>
</tr>
</tbody>
</table>
| Publication Indicator (labeled PubInd) | P
Valid values = 0 or 1
0 = not published – confidential
Do not share – for use by CMS/CMCS and its contractors
ONLY (currently no MCD MUEs have an indicator = 0)
1 = published - ok to share   | Numeric          | tab       | 1          |
| CLEID                            | Correspondence Language Example Identification Number
format:
DD.EEEEEEEEE
The first 2 digits correspond to the Standard Policy Statement for the edit. The digits following the “.” correspond to the section of the Medicaid Correspondence Language Manual from which an example can be extracted to incorporate into correspondence such as provider inquiry responses.
The last four characters of the CLEID field may contain empty spaces.
When an MUE is terminated, the CLEID will be changed to 16.DELETEPR5, which corresponds to the deleted edit language and example in the Correspondence Language Manual. | Alpha-Numeric Text | tab       | 12         |
Documents and web postings containing these tab-delimited ASCII text files should include the following notification:

Please note – In tab-delimited text files, the records may not align with the column headings or from row to row. This is because of the logic that tells the computer where to place certain values when the data is imported into other applications. For example, on rows for edits that do not have a deletion date, the Publication Indicator will appear aligned, but on rows for edits that do not have a deletion date, the Publication Indicator will appear to shift to the right. Even though they appear skewed to the reader’s eye, from a programming standpoint, the Publication Indicator in both lines will be in the same position.

The following is an example of a section of a tab-delimited ASCII text MUE MII website edit file:

<table>
<thead>
<tr>
<th>Code</th>
<th>MUE</th>
<th>EffDt</th>
<th>DelDt</th>
<th>PubInd</th>
<th>CLEID</th>
</tr>
</thead>
<tbody>
<tr>
<td>25210</td>
<td>00002</td>
<td>20101001</td>
<td></td>
<td>1</td>
<td>15.20000</td>
</tr>
<tr>
<td>37205</td>
<td>00001</td>
<td>20101001</td>
<td>20131231</td>
<td>1</td>
<td>16.DELETEPR5</td>
</tr>
<tr>
<td>39047</td>
<td>00120</td>
<td>20140401</td>
<td></td>
<td>1</td>
<td>15.A-V</td>
</tr>
</tbody>
</table>
Excel 2007/2010 Format

(1) In the MUE MII website edit files in Excel 2007/2010 format, each edit will have the following format:

<table>
<thead>
<tr>
<th>Column Name</th>
<th>Notes</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCPCS/CPT Code</td>
<td>AAAAAA</td>
<td>Alpha-Numeric Text</td>
</tr>
<tr>
<td>MUE Value (labeled MUE)</td>
<td>NNNNNN formatted with leading zeros (e.g., an MUE of 11 will be written as 00011)</td>
<td>Numeric</td>
</tr>
<tr>
<td>Effective Date</td>
<td>Gregorian – Year (y), Month (m), Day (d) format: yyyyymmdd</td>
<td>Numeric</td>
</tr>
</tbody>
</table>

(2) There will be three separate final MUE MII website edit files:
   (a) Practitioner MUE edit file named **MCD-MUE-PRA-vXXXXqX-FX-E.xlsx**. There is one edit file that applies to:
       (i) Practitioner services AND
       (ii) Ambulatory surgical center (ASC) services.
   (b) Outpatient Hospital MUE edit file named **MCD-MUE-OPH-vXXXXqX-FX-E.xlsx**. There is one edit file that applies to:
       (i) Outpatient hospital claims including DME billed by the hospital (including critical access hospitals)
       (ii) Hospital Facility emergency department claims (including critical access hospitals)
       (iii) Hospital Facility observation services (including critical access hospitals)
       (iv) Hospital Facility outpatient laboratory services (including critical access hospitals)
   (c) Durable Medical Equipment (DME) MUE edit file named **MCD-MUE-DME-vXXXXqX-FX-E.xlsx**. There is one edit file that applies to:
       (i) MDE billed by DME provider
           (a) Does NOT apply to DME billed by practitioners. The MUE file for practitioners contains MUEs for DME billed by a practitioner.
           (b) Does NOT apply to DME billed by hospitals. The MUE file for outpatient hospital services contains MUEs for DME billed by a hospital.

**Note:** Refer to page 7 for details of file naming convention.
### Column Name | Notes | Type
--- | --- | ---
**Deletion Date** | Gregorian – Year (y), Month (m), Day (d) format: yyyymmdd Edits with <blank> Deletion Date values are ACTIVE from the date in the Effective Date field. | **Numeric**

**Publication Indicator** (labeled PubInd) | P | **Numeric**
Valid values = 0 or 1
0 = not published – confidential
Do not share – for use by CMS/CMCS and its contractors ONLY (currently no MCD MUEs have an indicator = 0)
1 = published - ok to share

**CLEID** | Correspondence Language Example Identification Number format: DD.EEEEEEEEEE The first 2 digits correspond to the Standard Policy Statement for the edit. The digits following the “.” correspond to the section of the Medicaid Correspondence Language Manual from which an example can be extracted to incorporate into correspondence such as provider inquiry responses.
The last four characters of the CLEID field may contain empty spaces.
When an MUE is terminated, the CLEID will be changed to 16.DELETEPR5, which corresponds to the deleted edit language and example in the Correspondence Language Manual. | **Alpha-Numeric Text**
The following is an example of a section of an Excel MUE MII website edit file:

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>F</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 HCPCS\CPT Code</td>
<td>MUE</td>
<td>Effective Date</td>
<td>Deletion Date</td>
<td>Pub Ind 1 = Ok to Publish 0 = Do Not Share</td>
<td>CLE ID</td>
</tr>
<tr>
<td>2 25210</td>
<td>00002</td>
<td>20101001</td>
<td></td>
<td>1</td>
<td>15.20000</td>
</tr>
<tr>
<td>3 37205</td>
<td>00001</td>
<td>20101001</td>
<td>20131231</td>
<td>1</td>
<td>16.DELETEPR5</td>
</tr>
<tr>
<td>4 J9047</td>
<td>00120</td>
<td>20140401</td>
<td></td>
<td>1</td>
<td>15.A-V</td>
</tr>
</tbody>
</table>
The NCCI Medically Unlikely Edit (Edit) complete edit files are posted to the CMS Medicaid.gov website in two formats. The specifications for each format and sample screen prints have been included on the following pages. The two formats are:

1. Tab-Delimited ASCII Text
2. Excel 2007/2010

Tab-Delimited ASCII Text Format

(1) In the MUE Publication edit files in tab-delimited ASCII text format, each edit will have the following format:

(2) There will be three separate MUE Publication edit files:
   (a) Practitioner MUE edit file named MCD-MUE-PractitionerServices-Effective_mmddyyyy.txt
       There is one edit file that applies to:
       (i) Practitioner services AND
       (ii) Ambulatory surgical center (ASC) services.
   (b) Outpatient Hospital MUE edit file named MCD-MUE-OutpatientHospitalServices-
       Effective_mmddyyyy.txt There is one edit file that applies to:
       (i) Outpatient hospital claims including DME billed by the hospital (including critical access hospitals)
       (ii) Hospital Facility emergency department claims (including critical access hospitals)
       (iii) Hospital Facility observation services (including critical access hospitals)
       (iv) Hospital Facility outpatient laboratory services (including critical access hospitals)
   (c) Durable Medical Equipment (DME) MUE edit file named MCD-MUE-DMEServices-
       Effective_mmddyyyy.txt There is one edit file that applies to:
       (i) DME billed by DME providers
           (a) Does NOT apply to DME billed by practitioners. The MUE file for practitioners contains MUEs for DME billed by a practitioner.
           (b) Does NOT apply to DME billed by hospitals. The MUE file for outpatient hospital services contains MUEs for DME billed by a hospital.

Note: Refer to page 7 for details of file naming convention.

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Notes</th>
<th>Type</th>
<th>Delimited</th>
<th># of Char.</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCPCS/CPT Code</td>
<td>AAAAA</td>
<td>Alpha-Numeric Text</td>
<td></td>
<td>5</td>
</tr>
</tbody>
</table>
**Medicaid NCCI Edit Design Manual**

<table>
<thead>
<tr>
<th>Field Name</th>
<th>Notes</th>
<th>Type</th>
<th>Delimited</th>
<th># of Char.</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>MUE Value</strong></td>
<td>NNNNN formatted without leading zeros (e.g., an MUE of 11 will be written as 11)</td>
<td>Numeric</td>
<td>tab</td>
<td>5</td>
</tr>
<tr>
<td>MUE Rationale</td>
<td>VVVVVVVVVVVV</td>
<td>Alpha-Numeric Text</td>
<td>tab</td>
<td>50</td>
</tr>
</tbody>
</table>

**Note:**

1. MUE edit files for publication on the CMS website, Medicaid.gov, contain only the Current Active MUE.
2. MUE edit files for publication on the CMS website, Medicaid.gov, do not include the Effective Date, Deletion Date, or CLEID because this information is intended for internal claims processor use only.
3. In addition, publication edit files will include the following copyright disclaimer notice in the header of the file:


*Current Procedural Terminology* (CPT) is copyright 20xx American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use.

CPT® is a trademark of the American Medical Association.”

*NOTE: The format above (including the quotation “” marks) is how the disclaimer appears when copied and pasted from the tab-delimited ASCII Text file. In the file itself, the disclaimer appears as a single, long string of text, including hidden characters which result in the positioning of spaces and line returns.*
Please note – Depending on whether the end-user has checked or unchecked the format – Word Wrap – option, the AMA Copyright and Disclaimer information that appears on line 1 of the above example may appear as either a single line or as a variable number of lines depending on how the user has the window displayed. This is simply a reader’s eye perception. From a programming standpoint, because the AMA Copyright and Disclaimer information is preceded by a quotation mark (‘‘) and followed by a quotation mark (‘’), the computer will recognize this header information as a single unit and treat it accordingly.
Excel 2007/2010 Format

(1) In the MUE Publication edit files in Excel 2007/2010 format, each edit will have the following format:

<table>
<thead>
<tr>
<th>HCPCS/CPT Code</th>
<th>DME Supplier Services MUE Values</th>
<th>MUE Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>AAAAA</td>
<td>N</td>
<td>VVVVVVVVVVVVVV</td>
</tr>
</tbody>
</table>

(2) There will be three separate MUE Publication edit files:

(a) Practitioner MUE edit file named **MCD-MUE-PractitionerServices-Effective_mmddyyyy.xlsx**

There is one edit file that applies to:

(i) Practitioner services AND
(ii) Ambulatory surgical center (ASC) services.

(b) Outpatient Hospital MUE edit file named **MCD-MUE-OutpatientHospitalServices-Effective_mmddyyyy.xlsx**

There is one edit file that applies to:

(i) Outpatient hospital claims including DME billed by the hospital (including critical access hospitals)
(ii) Hospital Facility emergency department claims (including critical access hospitals)
(iii) Hospital Facility observation services (including critical access hospitals)
(iv) Hospital Facility outpatient laboratory services (including critical access hospitals)

(c) Durable Medical Equipment (DME) MUE edit file named **MCD-MUE-DMEServices-Effective_mmddyyyy.xlsx**

There is one edit file that applies to:

(i) DME billed by DME providers

(a) Does NOT apply to DME billed by practitioners. The MUE file for practitioners contains MUEs for DME billed by a practitioner.
(b) Does NOT apply to DME billed by hospitals. The MUE file for outpatient hospital services contains MUEs for DME billed by a hospital.

Note: Refer to page 7 for details of file naming convention.
### Medicaid NCCI Edit Design Manual

<table>
<thead>
<tr>
<th>Column Name</th>
<th>Notes</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCPCS/CPT Code</td>
<td>AAAAAA</td>
<td>Alpha-Numeric Text</td>
</tr>
<tr>
<td><strong>MUE Value</strong> (labeled MUE)</td>
<td>NNNNNN formatted without leading zeros (e.g., an MUE of 11 will be written as 11)</td>
<td>Numeric</td>
</tr>
<tr>
<td>MUE Rationale</td>
<td>VVVVVVVVVVVVVV</td>
<td>Alpha-Numeric Text</td>
</tr>
</tbody>
</table>

**Note:**

1. MUE edit files for publication on the CMS website, Medicaid.gov, contain only the Current Active MUE.
2. MUE edit files for publication on the CMS website, Medicaid.gov, do not include the Effective Date, Deletion Date, or CLEID because this information is intended for internal claims processor use only.
3. In addition, publication edit files will include the following copyright disclaimer notice in the header of the file:


   *Current Procedural Terminology (CPT) is copyright 20xx American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use.*

   *CPT® is a trademark of the American Medical Association.*

   *NOTE: The format above is copied directly from the Excel format file.*
The following is an example of a section of an Excel 2007/2010 MUE Publication edit file:

<table>
<thead>
<tr>
<th>HCPCS/CPT Code</th>
<th>DME Supplier Services MUE Values</th>
<th>MUE Rationale</th>
</tr>
</thead>
<tbody>
<tr>
<td>92551</td>
<td>1</td>
<td>Nature of Service/Procedure</td>
</tr>
<tr>
<td>92559</td>
<td>1</td>
<td>Nature of Service/Procedure</td>
</tr>
<tr>
<td>92560</td>
<td>1</td>
<td>Nature of Service/Procedure</td>
</tr>
</tbody>
</table>
The NCCI Medically Unlikely Edit (MUE) Change Report files are posted to the CMS Medicaid.gov website in two formats. The specifications for each format and sample screen prints have been included on the following pages. The two formats are:

1. Tab-Delimited ASCII Text
2. Excel 2007/2010

**Tab-Delimited ASCII Text Format**

1. In the Medically Unlikely Edit (MUE) Publication Change Report files in tab-delimited ASCII text format, each file will have the following format:

<table>
<thead>
<tr>
<th>Column Name</th>
<th>Notes</th>
<th>Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>HCPCS/CPT Code</td>
<td>AAAAAA</td>
<td>Alpha-Numeric Text</td>
</tr>
<tr>
<td><strong>MUE Value</strong></td>
<td>NNNNNN formatted without leading zeros (e.g., an MUE of 11 will be written as 11)</td>
<td>Numeric</td>
</tr>
</tbody>
</table>
The following is an example of a section of a tab-delimited ASCII text MUE Change Report file:

Please note – Depending on whether the end-user has checked or unchecked the format – Word Wrap – option, the AMA Copyright and Disclaimer information that appears on line 1 of the above example may appear as either a single line or as a variable number of lines depending on how the user has the window displayed. This is simply a reader’s eye perception. From a programming standpoint, because the AMA Copyright and Disclaimer information is preceded by a quotation mark ("), and followed by a quotation mark ("), the computer will recognize this header information as a single unit and treat it accordingly.
Excel 2007/2010 Format

(1) In the Medically Unlikely Edit (MUE) Change Report Publication file in Excel 2007/2010 format, each file will have the following format:

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Procedural Terminology (CPT) is copyright 2011 American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use.</td>
<td></td>
</tr>
<tr>
<td>CPT® is a trademark of the American Medical Association.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>1</th>
<th>2</th>
<th>3</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>HCPCS/CPT Code</td>
<td>MUE</td>
</tr>
<tr>
<td></td>
<td>AAAAAA</td>
<td>NNNNN</td>
</tr>
</tbody>
</table>

(2) There will be three separate MUE Publication Change Report files. The Excel 2007/2010 publication files do not indicate a version number, but rather include the date the file becomes effective. Their file names will be:

(a) Practitioner/ASC MUE file: MCD_MUE_PRA_Changes_Eff_mm-dd-yyyy.xlsx
(b) Outpatient Hospital MUE file: MCD_MUE_OPH_Changes_Eff_mm-dd-yyyy.xlsx
(c) Durable Medical Equipment (DME) MUE file: MCD_MUE_DME_Changes_Eff_mm-dd-yyyy.xlsx

Note: In the Excel format additions, deletions, and revisions are contained on separate worksheets within the same file.

(3) Refer to page 7 for the complete list of file names.

<table>
<thead>
<tr>
<th>Column Name</th>
<th>Notes</th>
<th>Type</th>
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</thead>
<tbody>
<tr>
<td>HCPCS/CPT Code</td>
<td>AAAAAA</td>
<td>Alpha-Numeric Text</td>
</tr>
<tr>
<td>MUE Value (labeled MUE)</td>
<td>NNNNNN formatted without leading zeros (e.g., an MUE of 11 will be written as 11)</td>
<td>Numeric</td>
</tr>
</tbody>
</table>
The following is an example of a section of an Excel 2007/2010 MUE Change Report file:

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
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<tbody>
<tr>
<td>The edits in this MUE file are active for dates of service January 1, 2014 - March 31, 2014. This file should NOT be used by state Medicaid programs as their edit file.</td>
<td></td>
</tr>
<tr>
<td>Current Procedural Terminology (CPT) is copyright 2013 American Medical Association. All Rights Reserved. No fee schedules, basic units, relative values, or related listings are included in CPT. The AMA assumes no liability for the data contained herein. Applicable FARS/DFARS restrictions apply to government use.</td>
<td></td>
</tr>
<tr>
<td>CPT® is a trademark of the American Medical Association.</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>HCPCS/CPT Code</th>
<th>XXX Services MUE Values</th>
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<tr>
<td>92590</td>
<td>1</td>
</tr>
</tbody>
</table>

Notes:

(1) In addition, publication files will include the following copyright disclaimer notice in the header of the file:


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NOTE: The format above is copied directly from the Excel format file.
<table>
<thead>
<tr>
<th>Policy ID</th>
<th>Standard Policy Statement</th>
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<tbody>
<tr>
<td>1</td>
<td>Standard preparation / monitoring services for anesthesia</td>
</tr>
<tr>
<td>2</td>
<td>HCPCS/CPT procedure code definition</td>
</tr>
<tr>
<td>3</td>
<td><em>CPT Manual</em> or NCCI program instructions</td>
</tr>
<tr>
<td>4</td>
<td>Mutually exclusive procedures</td>
</tr>
<tr>
<td>5</td>
<td>Sequential procedures</td>
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<tr>
<td>6</td>
<td>CPT &quot;separate procedure&quot; definition</td>
</tr>
<tr>
<td>7</td>
<td>More extensive procedure</td>
</tr>
<tr>
<td>8</td>
<td>Reserved for future use</td>
</tr>
<tr>
<td>9</td>
<td>Gender-specific procedures</td>
</tr>
<tr>
<td>10</td>
<td>Standards of medical / surgical practice</td>
</tr>
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<td>11</td>
<td>Anesthesia service included in surgical procedure</td>
</tr>
<tr>
<td>12</td>
<td>Laboratory panel</td>
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<tr>
<td>13</td>
<td>Deleted NCCI PTP edit</td>
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<tr>
<td>14</td>
<td>Misuse of column two code with column one code</td>
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<tr>
<td>15</td>
<td>Medically Unlikely Edit (MUE) (Units of Service)</td>
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<tr>
<td>16</td>
<td>Deleted MUE</td>
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<td>Rationale Code</td>
<td>Rationale</td>
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<td>----------------</td>
<td>----------------------------------</td>
</tr>
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<td>AC</td>
<td>Anatomic Consideration</td>
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<tr>
<td>CD</td>
<td>Code Descriptor / CPT Instruction</td>
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<tr>
<td>DI</td>
<td>Drug Discontinued</td>
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<td>IP</td>
<td>Inpatient Procedure</td>
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<td>Nature of Service / Procedure</td>
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<td>PI</td>
<td>Prescribing Information</td>
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<tr>
<td>SC</td>
<td>Clinical: Society Comment</td>
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