



# **SoonerCare** Provider Reimbursement Notice

OKC Metro Area (405) 522-6205 / Statewide Toll-Free (800) 522-0114

## Inpatient “Never” Events Outpatient Additional Dx Codes for Observation & Suggestions for APC Table Additions

OHCA PRN 2010-02

October 26, 2009

### **Hospital Administrators**

This letter is to update you on the new policy regarding “Never” events, the status of the annual DRG rebasing project, expansion of payable diagnosis codes for observation, coding changes to allow PET / MRIs to bypass the PA requirement in the emergency department (ED), and to request for information regarding additional codes for the APC table.

#### **INPATIENT UPDATES**

##### **“Never” Events**

Effective January 15, 2009, the Centers for Medicare and Medicaid Services (CMS) established three new National Coverage Determinations that nationally “non-cover” three surgical errors. The three surgical errors are: (1) wrong surgical or other invasive procedures performed on a patient, (2) surgical or other invasive procedures performed on the wrong body part; and (3) surgical or other invasive procedures performed on the wrong patient. OHCA will be adopting the same policy position effective February 1, 2010. Please be on the lookout for a “Dear Provider” letter containing more details regarding this change. Additional information from Medicare can be found on the CMS website at:

<http://www.cms.hhs.gov/MLN MattersArticles/downloads/MM6405.pdf>.

##### **Hospital Base Rates and MS-DRG Grouper**

For inpatient hospital services paid under the Diagnosis Related Group (DRG) system we plan to mail out letters detailing each facility’s base rate by November 2, 2009. Additionally, we will make the updated DRG weights available on our public website at

[www.okhca.org/providers/types/drg](http://www.okhca.org/providers/types/drg) prior to implementation on **January 1, 2010**.

OHCA will implement MS-DRG V27 for discharges on or after January 1, 2010. As we do every year we will update in January to the DRG grouper Medicare adopts the prior October (MS-DRG V27).

#### **OUTPATIENT UPDATES**

##### **Observation Diagnosis Codes**

As noted in [Provider Reimbursement Notice \(PRN\) 2009-04](#), OHCA was reviewing additional diagnosis codes for inclusion in our payable list for observation. The review has been completed and effective November 1, 2009 we have added additional codes – codes specific to pediatric cases – to the approved list of payable observation diagnosis codes. The list of payable codes can be found at our public website at [Observation Diagnosis Codes eff Nov 2009](#).

### **PET / MRIs in ED**

In the [Spring 2008 Provider Update](#) you were notified that you no longer needed prior authorization (PA) for PET / MRIs performed in the emergency department (ED). Unfortunately we have been unable to complete system coding changes to make this a reality. We believe the only way we can program the system to process correctly is by use of the **Point of Origin for Admission or Visit code (UB-04 FL 15 – formerly the Source of Admission code)**. Providers will need to indicate in this field that the point of origin for the visit is the ED. If PET / MRIs performed in the ED are not coded with the correct point of origin they will continue to deny for a PA. Please notify me immediately if there are any concerns regarding this change.

### **Request for coverage of codes – APC table**

We have begun the annual review process for inclusion of codes in the APC table. Since we do not yet have a formal process in place to request coverage of codes if you have a code you would like considered for inclusion, please let us know. We have received several requests from providers during the year for specific codes so if you have previously placed a request you do not need to contact us; we have your request and it will be reviewed.

### **Outpatient Hospital Supplemental Payment**

Please be advised that the outpatient hospital supplemental payments were only to be temporary; the goal was to pay increased rates through the system. We believe that with the addition of services and coverage of new codes (both observation diagnosis codes and APC procedure codes) we could attain our goal this state fiscal year (SFY10). Please keep this in mind when budgeting.

If you have any questions or require additional information please contact me by email at [Kelly.Botten@okhca.org](mailto:Kelly.Botten@okhca.org) or by phone at (405) 522-7108.

Thank you for your continued service to Oklahoma's *SoonerCare* members.