

Note: This is for MAC and Direct customers

Hot topics

Annual ICD-10 code changes – Installed the 2022 Annual ICD-10 Diagnosis & Procedure Code updates. Refer to the accompanying report for a complete listing of the new and modified codes.

Quarterly HCPCS changes – Quarterly HCPCS code updates together with regular CMS mandates.



Enclosed materials

- Pre-built PC-ACE 5.6 upgrade file named PCACEUP.EXE and replacement SETUP.EXE file for any new providers
- This newsletter

CMS mandated changes

12774 – Remittance Advice Remark Code (RARC), Claims Adjustment Reason Code (CARC), Medicare Remit Easy Print (MREP) and PC Print Update

- Added the following Claim Adjustment Reason code (CARC)- (effective 08/01/2022):

P32-Payment adjusted due to Apportionment.

12775 - Implement Operating Rules - Phase III Electronic Remittance Advice (ERA) Electronic Funds Transfer (EFT): Committee on Operating Rules for Information Exchange (CORE) 360 Uniform Use of Claim Adjustment Reason Codes (CARC), Remittance Advice Remark Codes (RARC) and Claim Adjustment Group Code (CAGC) Rule - Update from Council for Affordable Quality Healthcare (CAQH) CORE

- Added core 360 CARC's codes 304 and 305

12778 – Claim Status Category and Claim Status Codes Update

- Added the following Claim Status Codes- (effective 08/01/2022):

798-Claim predetermination/estimation could not be completed in real time. Claim requires manual review upon submission. Do not resubmit.

799-Resubmit a replacement claim, not a new claim.

12869- Quarterly Update to the Medicare Physician Fee Schedule Database (MPFSDB) - October 2022 Update

- Added the following HCPCS Codes effective (10/01/2022):

G0310 IMMUNIZE COUNSEL 5-15 MIN
G0311 IMMUNIZE COUNSEL 16-30 MINS
G0312 IMMUNIZE COUNS < 21YR 5-15 M
G0313 IMMUNIZE COUNS < 21YR 6-30 M
G0314 COUNSEL IMMUNE <21 16-30 M
G0315 COUNSEL IMMUNE <21 5-15 M
A9602 FLUORODOPA F-18 DIAG PER MCI
A9607 LUTETIUM LU 177 VIPIVOTIDE
A9800 GALLIUM LOCAMETZ 1 MILLICURI
J1302 INJ, SUTIMLIMAB-JOME, 10 MG
J1932 INJ, LANREOTIDE, (CIPLA) 1MG
J2777 INJ, FARICIMAB-SVOA, 0.1MG
J9274 INJ, TEBENTAFUSP-TEBN, 1 MCG
J9298 INJ NIVOL RELATLIMAB 3MG/1MG
Q2056 CILTACABTAGENE CAR-POS T
Q5125 INJ, RELEUKO 1 MCG

- Modified description of following HCPCS code:

Q4128 FLEXHD/ALLOPATCHHD/SQ CM

12870- Quarterly Update for Clinical Laboratory Fee Schedule (CLFS) and Laboratory Services Subject to Reasonable Charge Payment

- Added the following CPT Codes effective (10/01/2022):

0332U ONC PAN TUM GEN PRFLG 8 DNA
0333U ONC LVR SURVEILANC HCCCFDNA
0334U ONC SLD ORGN TGSA DNA 84/+
0335U RARE DS WHL GEN SEQ FETAL
0336U RARE DS WHL GEN SEQ BLD/SLV
0337U ONC PLSM CELL DO&MYELOMAID
0338U ONC SLD TUM CRCG TUM CLSLCT

0339U ONC PRST8 MRNA HOXC6 &DLX1
0340U ONC PAN CA ALYS MRD PLASMA
0341U FTL ANEUP DNA SEQ CMPRALYS
0342U ONC PNCRTC CA MULT IA ECLIA
0343U ONC PRST8 XOM ALY 442SNCRNA
0344U HEP NAFLD SEMIQ EVL 28 LIPID
0345U PSYC GENOM ALYS PNL 15 GEN
0346U BETA AMYL A β 40&A β 42 LC-MS/MS
0347U RX METAB/PCX DNA 16 GENALYS
0348U RX METAB/PCX DNA 25 GENALYS
0349U RX METAB/PCX DNA 27 GE RXIA
0350U RX METAB/PCX DNA 27 GENALYS
0351U NFCT DS BCT/VIRAL TRAIL IP10
0352U NFCT DS BV&VAGINITIS AMPPRB
0353U IADNA CHLMYD&GONORR AMPPRB
0354U HPV HI RSK QUAL MRNA E6/E7
87593 ORTHOPOXVIRUS AMP PRBEACH

12840 – Updates are Being Made to Chapter 1 of the Medicare Claims Processing Manual to Include Newly Created and Utilized Payer Only Codes

- Added the following condition codes:

ZA – NO POSITIVE COVID-19 TEST RESULT IN M/R

ZB – EXPANDED ACCESS APPROVAL

ZC – CLINICAL TRIAL OF A DIFFERENT PRODUCT

- Added the following value codes:

Q0 – PIONEER ACCOUNTABLE CARE ORGANIZATION (ACO) NON-MODEL PAYMENT OR NEXT GENERATION ACO NONMODEL PAYMENT

Q1 – PIONEER ACO MODEL PAYMENT AMOUNT INCLUDING REDUCTION OR NG ACO PAYMENT AMOUNT INCLUDING REDUCTION

Q2 – HOSPICE CLAIM PAID FROM PART B TRUST FUND

Q3 – PRIOR AUTHORIZATION 25% PENALTY

Q4 – PA RURAL MODEL EXCLUSION - PHYSICIAN SERVICE CLAIM REIMBURSEMENT

Q5 – EHR

Q6 – PQRS

Q7 – ISLET ISOLATION ADD-ON PAYMENT AMOUNT

Q8 – TRANSITIONAL DRUG ADD-ON PAYMENT ADJUSTMENT

Q9 - MEDICARE PERFORMANCE ADJUSTMENT (MPA)

QA – PHP PARTIAL WEEK INPUT

QB – ESRD TREATMENT CHOICES (ETC) MODEL: HOME DIALYSIS PAYMENT ADJUSTMENT (HDP) TOTAL BONUS PAID.

QC – OCM+ ADJUSTMENT

QD – DEVICE CREDIT

QE – ET3 MODEL – ET3 15% BONUS PAYMENT

QF – HHA - LATE-SUB-PENALTY-AMT

QG – ESRD – TOTAL TPNIES AMOUNT

QH – ESRD - TPNIES CAPITAL RELATED ASSETS (CRA)

QI – FQHC MDPCP DEMO

QJ – ETC MODEL FACILITY PPA

QK – MARYLAND WAIVER KIDNEY ACQUISITION PAYMENT

QM – MIPS ADJUSTMENT AMOUNT

QN – FIRST APC PASS-THROUGH DEVICE OFFSET

QO – SECOND APC PASS-THROUGH DEVICE OFFSET

QP – THIRD APC PASS-THROUGH DEVICE OFFSET

QQ – TERMINATED PROCEDURE WITH DEVICE OFFSET

QR – FIRST APC PASS-THROUGH DRUG OR BIOLOGICAL OFFSET

QS – SECOND APC PASS-THROUGH DRUG OR BIOLOGICAL OFFSET

QT – THIRD APC PASS-THROUGH DRUG OR BIOLOGICAL OFFSET

QU – DEVICE CREDIT WITH DEVICE OFFSET

QV – VALUE-BASED PURCHASING ADJUSTMENT AMOUNT

QW – PHP PARTIAL WEEK OUTPUT

Z9 – COVID-19 PHE END DATE

Installing the upgrade

Perform a full PC-ACE database backup before installing the upgrade. To install the upgrade, run the attached PCACEUP.EXE file using Windows Explorer or equivalent and follow the simple upgrade wizard steps. When prompted, enter the upgrade password provided by your software supplier. For networked instructions, it is recommended (but not required) that the update be run from the server's console.

IMPORTANT: The recommended database backup is for safety purposes only and should NOT be restored after successfully installing the update. The update program preserves all existing claims and reference file settings

