

Understanding NCCI Edits



The National Correct Coding Initiative (NCCI) is a program developed by the Center for Medicare and Medicaid Services (CMS) to ensure that CPT codes are used correctly when more than one service is provided on the same day. There are two types of edits: procedure to procedure (PTP) and medically unlikely (MUE) edits. PTP edits indicate when two codes cannot be billed together on the same day. MUE edits indicate the number of units that can be billed on the same day. NCCI edit changes are released quarterly. NCCI edits are specific to Medicare and Medicaid, but most payers either follow NCCI edits or have their own similar edit system.

PTP Edits

PTP edits indicate if two codes can be billed together. The edits indicate whether the pair is never allowed at the same time or if in certain circumstances, the modifier 59 may be appropriate.

Here is an example of some of the NCCI edits for right heart catheterization.

Column 1 code	Column 2 code	Modifier 59 Allowed
93451	93318	Yes
93451	93355	No
93451	93462	Yes
93451	93503	Yes
93451	93561	No
93451	93562	No
93451	93563	Yes
93451	93564	Yes
93451	93565	Yes
93451	93598	No

It is important to remember that modifier 59 allowed does not automatically mean the two procedures should be payable together. Using modifier 59 is only appropriate when the second procedure is performed at a separate anatomical location, during a separate encounter, or when a diagnostic procedure leads to a therapeutic procedure on the same date of service.

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MUE Edits

MUE edits indicate the number of times a code can be billed in one day.

Here is an example of the MUE edits for percutaneous coronary interventions.

CPT Code	Number of Units
92920	3
92921	6
92924	2
92925	6
92928	3
92929	2
92933	2
92934	2
92937	2
92938	2

Billing a CPT code with more units than the MUE will result in a denied claim.

For more information on the modifier 59, please review the Using Modifiers for Reimbursement video on the [SCAI Practice Management webpage](#).

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