

CY21 DHA UBO Outpatient Rates

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Session 1: 27 July 2021 @ 0800-0900 ET Session 2: 29 July 2021 @ 1400-1500 ET

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Understand & Become Familiar With:

- 1) DHA UBO Rate Structures
- 2) DHA UBO Outpatient Rates
 - -CY2021 Effective Date
 - -Rate Components (12)
- 3) Service Rate Requests
- 4) DHA UBO Inpatient Rates
- 5) MAC Rates
- 6) COVID-19 Impacts and Updates
- 7) Billing Tips and Reminders
- 8) Health.mil and Launchpad Navigation
- 9) DHA UBO Helpdesk Q&A
- 10) Summary



- Final Approval of the CY21 OP Rates Policy Package has not yet been approved at the time of this presentation.
- OP billing on hold in ABACUS until the updated rates are approved, files are loaded in ABACUS and ready to be used for dates of service after July 1, 2021 when the final approval is received.
- Leave claims in place in the Patient Billing screen of ABACUS, errors should read "Rate not Found."
- Upon approval ABACUS will reprocess these stopped claims due to the missing rates and new rates applied to the process for billing retroactive to July 1, 2021.



DHA UBO Rate Structures



Widely used billing rate structures intended to recover costs in the military fixed facilities.

- 1) Full or Third Party Collections (TPC).
- 2) Interagency.
- 3) International Military Education & Training (IMET).
- The DHA UBO Program Office recommends billing rates for contractors and foreign nationals supporting deployed forces.
- Patient Category (PATCAT) assignment drives the assignment of the applicable rate structure.



1) Full or Third Party Collection (TPC) Rates

- Full / TPC Billing rates are used synonymously.
 - Recover the full cost of healthcare services provided.
 - Normally the highest DHA UBO rate.
- TPC Rates are used for billing commercial third-party payers and pay patients.
 - Exception: OCONUS DoD Civilians and Cosmetic Procedures.
- Most DHA UBO Ambulatory/Professional TPC rates match TRICARE Reimbursement (CMAC rates).
- Inpatient TPC rates are indexed to TRICARE annual percent growth.
- TPC rates are based on average Medical Expense & Performance Reporting System (MEPRS) unit costs with adjustments for costs not included in MEPRS data.
 - Dental, Ambulance, Ambulatory Procedure Visit (APV), specific Injectables.



2) Interagency Rates

- Interagency rates are TPC rates discounted to remove several cost factors for health care services.
- Durable medical equipment and pharmaceuticals are not discounted.
- Interagency Rates do not include:
 - Asset Use Charge: Use of assets (facilities and/or equipment) to recoup depreciation and interest on investment.
 - Government Share of Unfunded Retirement (GSUR) Costs: Cover the cost of the unfunded civilian retirement, post retirement health benefits and life insurance.



3) International Military Education & Training Rates

- The IMET Program provides training on a grant basis to students from allied and friendly nations.
 - Authority for the IMET program is found in Chapter 5, Part II, Foreign Assistance Act of 1961.
 - Funding is appropriated from the International Affairs budget of the Department of State.
 - Not all foreign national patients participate in the IMET program.

• IMET Rates do not include:

- Asset Use Charge and GSUR Costs.
- Military Personnel Cost.



Patient category (PATCAT) assignment determines billing, who should be billed and under which rate structure

DHA P	ATCAT Table											
v7.0												
Code	Subcat	Pat Cat Summary	Innt Indiv	Innt Agency	Opnt Indiv	Oppt Agency	Sponsor	Family Member	Civ Emergency	Deceased Sponsor	OCONUS GMS	Prohibit DEERS
A00	Caboat	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	YES	NO	NO
A11	1	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A11	2	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A12	1	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A12	2	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A12	3	ACTIVE DUTY	FRR	NC	FOR	NC	YES	NO	NO	NO	NO	NO
A13		ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A14		ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A15	1	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A15	2	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A15	3	ACTIVE DUTY	FRR	NC	FOR	NC	YES	NO	NO	NO	NO	NO
A21		ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A22	1	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A22	2	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A22	3	ACTIVE DUTY	FRR	NC	FOR	NC	YES	NO	NO	NO	NO	NO
A23	1	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A23	2	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A23	3	ACTIVE DUTY	FRR	NC	FOR	NC	YES	NO	NO	NO	NO	NO
A24		ACTIVE DUTY	FMR	NC	NC	NC	YES	NO	NO	NO	NO	NO
A25		DEPENDENT/RETIREE	FMR	NC	NC	NC	NO	YES	NO	NO	NO	NO
A26		ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	YES
A27	1	ACTIVE DUTY	FMR	NC	NC	NC	YES	NO	NO	NO	NO	YES
A27	2	DEPENDENT/RETIREE	FMR	NC	NC	NC	NO	YES	NO	NO	NO	YES
A28	1	DEPENDENT/RETIREE	FRR	NC	FOR	NC	NO	YES	NO	NO	NO	YES
A28	2	DEPENDENT/RETIREE	FMR	NC	NC	NC	NO	YES	NO	NO	NO	YES
A29	1	CIVILIAN	FRR	NC	FOR	NC	NO	YES	NO	NO	NO	YES
A29	2	CIVILIAN	FMR	NC	NC	NC	NO	YES	NO	NO	NO	YES
A30	1	DEPENDENT/RETIREE	FRR	NC	FOR	NC	NO	YES	NO	NO	NO	YES
A30	2	DEPENDENT/RETIREE	FMR	NC	NC	NC	NO	YES	NO	NO	NO	YES
A31	1	DEPENDENT/RETIREE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A31	2	DEPENDENT/RETIREE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A32	1	DEPENDENT/RETIREE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A32	2	DEPENDENT/RETIREE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A33	1	DEPENDENT/RETIREE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A33	2	DEPENDENT/RETIREE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO
A36		ACTIVE DUTY	FMR	NC	NC	NC	YES	NO	NO	NO	NO	NO
A37		DEPENDENT/RETIREE	FMR	NC	NC	NC	NO	YES	NO	NO	NO	NO

Source https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/Patient-Categories



Outpatient Rate Package

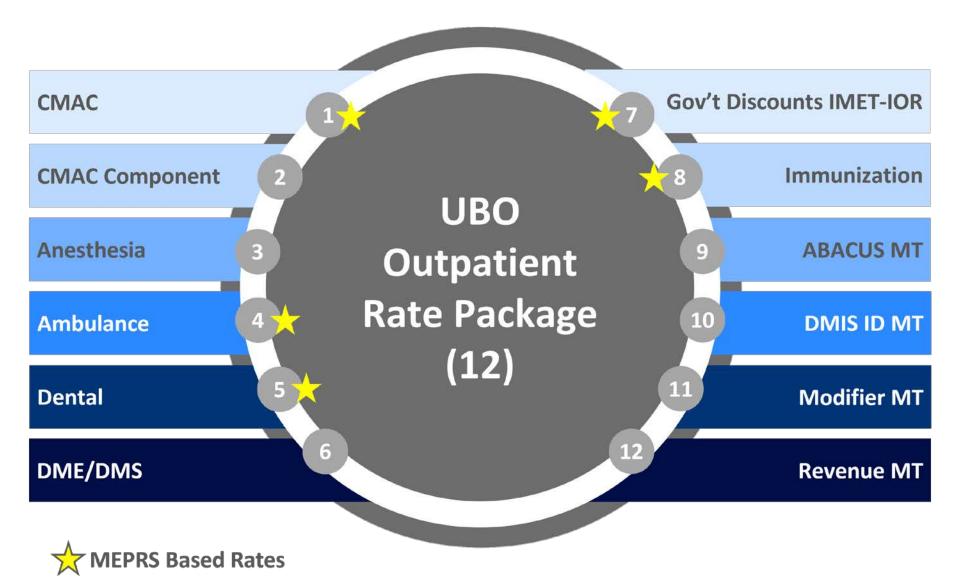




Outpatient Rates Overview:

- CY 2021 Outpatient Rates developed to accommodate Military Health Systems billing systems and solutions.
- Outpatient rates are developed by the DHA UBO for each outpatient encounter, service, procedure, or supply provided at a MTF.
- UBO CHAMPUS Maximum Allowable Charge (CMAC) rates are developed for reimbursement in the purchased care community.
- Purchased Care System data used to calculate the average allowable amounts. Some procedures require special handling and rates are based on purchased care data or Ambulatory Payment Classification (APC) charges.
- Medical Expense & Performance Reporting System (MEPRS) data is used to calculate the average MTF operational expenses.







Overview	Codes Se	et To Zero
Overview	98966	Tele. Assess
 Primary rate table, formatted and sorted for UBO. 	98967	Tele. Assess
 Based on what TRICARE allows. 	98968	Tele. Assess
 Categorized by CMAC localities. 	98969	Online Serv.
	99441	Telemed
	99442	Telemed
2021 Uishlishta	99443	Telemed.
2021 Highlights	99024	Post. Op.
 Certain CMAC codes are not available for separate 	G0379	Admit
reimbursement.	99241	IP Consult
 ED Rates 	99242	IP Consult
 Observation 	99243	IP Consult
 Moderate Sedation 	99244	IP Consult
 – 0.18% Overall Average Percent Increase from CY20 	99245	IP Consult
C C	99251	OP Consult
 CY21 New codes did not become effective until Apple 12, 2021, the uset of the file will be used. 	99252	OP Consult
April 1, 2021, the rest of the file will have an	99253	OP Consult
effective date for CY21of <u>July 1st, 2021</u> .	99254	OP Consult
	99255	OP Consult

2021 Highlights ۲

- Certain CMAC codes a reimbursement.
 - ED Rates
 - Observation

- Moderate Sedation
- 0.18% Overall Average
- CY21 New codes did n April 1, 2021, the rest effective date for CY21



TRICARE Localities Overview

- TRICARE localities are designated within the range of 301-424
- TRICARE localities are defined with the same geographic boundaries as Medicare localities.
- TRICARE localities apply to the CHAMPUS Maximum Allowable Charges, or CMAC reimbursable rates.
- TRICARE localities also are assigned to individual Military Treatment Facilities (MTFs) and DMIS ID locations.
- After the "national" average CMAC level has been determined (Locality 300), rates are calculated for the remaining 114 localities.



There are 114 Active TRICARE Localities for CY21

A single locality assignment often includes many zip codes and military treatment facilities.

Healt The official web	Contact Us FAQs Gallery TRICARE						
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MHS Home > Military Health Topics > Busin	ness Support > Rates and Reimbursement > CMAC Rates > Locality To ZIP Need larger text?						
Business Support	Locality To ZIP						
Data Quality Management Control Program	Use the tool below to list ZIP Codes associated with a Locality Code.						
Medical Logistics	Search the Database						
HIPAA Transactions, Code Sets & Identifiers	* Denotes Required Field						
Transactions	Select Locality Code:*						
Code Sets	314 COLORADO						
 Identifiers 							
Rates and Reimbursement	Results: CMAC Procedure Pricing						
Age and Gender Restrictions	Locality Code: 314						
State Vaccine Program	Locality Name: COLORADO						
Ambulatory Surgery Rates	80001 80002 80003 80004 80005 80006 80007 80010 80011 80012 80013 80014 80015 80016 80017 80018 80019						
Anesthesia Rates	80020 80021 80022 80023 80024 80025 80025 80027 80028 80030 80031 80033 80034 80035 80036 80037 80038						
Applied Behavior Analysis Maximum Allowed Amounts	80040 80041 80042 80044 80045 80046 80047 80101 80102 80103 80104 80105 80106 80107 80108 80109 80110 80111 80112 80113 80116 80117 80118 80120 80121 80122 80123 80124 80125 80126 80127 80128 80129 80130 90131 80132 80133 80134 80135 80136 80137 80138 80120 80151 80156 80151 80156 80151 80152 80153 80155						
Blend Rate Method for Radiology for Cancer and Children's Hospitals	80131 80132 80133 80136 80137 80138 80150 80151 80154 80155 80160 80161 80162 80163 80165 80166 80201 80202 80203 80204 80205 80206 80207 80209 80210 80211 80212 80215 80216 80217 80218 80219 80220 80221 80222 80224 80225 80226 80227 80228 80231 80232 80233 80234						
Bundled Codes	80235 80236 80237 80238 80239 80241 80243 80244 80246 80247 80248 80249 80250 80251 80252 80254 80255						

Link: <u>https://health.mil/Military-Health-Topics/Business-Support/Rates-and-Reimbursement/CMAC-Rates/Locality-To-ZIP</u>



- Emergency Department (ED)
- Evaluation & Management Codes (99281-99285)
 - Used for Hospital level (1-5) ED encounter.
 - System limitations: unable to bill both professional and institutional charges for same service.
 - Only represents the institutional charge for the ED E&M service.
 - Mapped to the UB 04/837I.

CPT [®] Code	2020	2021	Percent Change
99281	\$59.18	\$72.60	22.68%
99282	\$108.77	\$131.59	20.98%
99283	\$189.84	\$231.60	22.00%
99284	\$299.02	\$363.74	21.64%
99285	\$525.30	\$522.12	-0.61%



- CMAC Component
 - TRICARE assigns code components with Professional (PC) and Technical (TC) components.
 - Technical Components (TC) are based on applied Ambulatory Payment Classification (APC) charges.
 - Professional Components (PC) are charges provided by the regular CMAC rates.
 - Not available for separate reimbursement considered part of the "global procedure."
 - Global Rate computed by combining TC and PC rates.



- Flat Rate Calculation.
- Applied TRICARE
 Reimbursement Formula.
- (Average Time Units + Base Units) x National Average Conversion Factor.
- 2021 Total Codes: 272.
- 2021 Highlights
 - Overall Decrease of -2.89%

DHA UBO CY21 Anesthesia Rate Table								
CPT Code	2021 Rate	Short Descriptor						
00100		ANESTH, SALIVARY GLAND						
00102		ANESTH, REPAIR OF CLEFT LIP						
00103		ANESTH, BLEPHAROPLASTY						
00104		ANESTH, ELECTROSHOCK						
00120		ANESTH, EAR SURGERY						
00124		ANESTH, EAR EXAM						
00126		ANESTH, TYMPANOTOMY						
00140		ANESTH, PROCEDURES ON EYE						
00142		ANESTH, LENS SURGERY						
00144	\$254.19	ANESTH, CORNEAL TRANSPLANT	Flat Data					
00145		NESTH, VITRECTOMY	Flat Rate					
00147		ANESTH, IRIDECTOMY	Calculation					
00148		ANESTH, EYE EXAM						
00160		ANES,NOSE/ACC SINUS;NOS						
00162		ANES,NOSE/ACC SINUS;RADICL SR	G					
00164		ANESTH, BIOPSY OF NOSE						
00170		ANESTH, PROCEDURE ON MOUTH						
00172	\$411.80	ANESTH, CLEFT PALATE REPAIR						
00174	\$334.83	ANES,EXC RETROPHARYNGEAL TUMOR						
00176	\$775.94	ANES,INTRAORAL;RADICAL SURGERY						
00190	\$307.23	NESTH, FACIAL BONE SURGERY						
00192	\$385.71	ANESTH, FACIAL BONE SURGERY						



- 2020 Full Rate: \$260.86.
- 2021 Full Rate: \$276.77

• 2021 Highlights

Overall Increase of +2.79%

Ambulance Codes Assigned a Rate				
A0426	A0428	A0433		
A0427	A0429	A0999		



- The updated Defense Health Agency CY21 Guidelines for Dental Procedure Codes, Surgical Procedure Codes, and Dental Weighted Values serves to define each dental procedure performed in military treatment facilities.
- Contains "D" Codes (i.e. D0411).
- Contains "W" Codes (i.e. W0141)
 - W Codes are DoD Specific but non-billable. They replaced Dental A-codes so as not to cause confusion with standard HCPCS A-codes.

• 2021 Highlights

- Overall increase of +6.23%.
- Added 28 new codes, 22 revised codes, 4 deleted codes.
- 818 total Dental codes.



- Overview
 - Expenses allocated for equipment and supplies.
 - Based On:
 - CMS Durable Medical Equipment, Prosthetics/Orthotics, and Supplies (DMEPOS) Fee Schedule.
 - Purchased Care Data.

- International Military Education & Training (IMET).
- Interagency Outpatient Rates (IOR).
- 2021 Highlights

Type of Discount	Discounted Services Except Ambulance and Dental	Ambulance Services	Dental Services	Applicable PATCAT
IMET	0.6173	0.6173	0.4366	Misc.
IOR	0.9428	0.9428	0.9495	Misc.
IOR	0.9428	0.9428	0.9495	K611
IOR	0.8000	0.8000	0.8000	K612

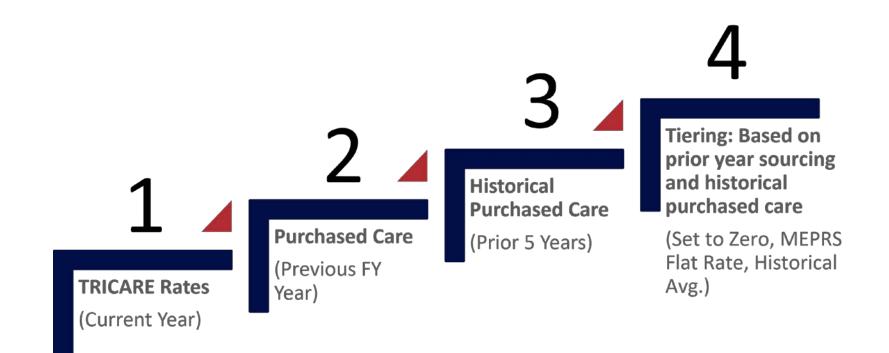


- Overview
 - 1st Priority CMAC TRICARE Provided Rates (Released Quarterly).
 - 2nd Priority Purchased Care Allowable Amounts (Previous Fiscal Year).
 - 3rd Priority MEPRS Based Flat Rate.
 - 2020 Flat Rate: \$67.21
 - 2021 Flat Rate: \$69.09 (Increased by 2.80%).
- 2021 Highlights
 - 28 New Codes, 1 Deleted Code.
 - Sourcing priority process addition to phase very low percentage usage codes:
 - 1. TRICARE Rate
 - 2. Purchased Care Prior Year
 - 3. Historical 5 Year Purchased care average for increase/decrease greater than 30%
 - 4. For codes assigned a flat rate in prior year, and no PSC data prior year, assign MEPRS flat rate.
 - 5. For codes set to zero per historical zero prior year without PSC data prior year, set to zero.

6. Remaining codes without prior year PSC data utilize a tiering system to make a rate determination based on prior year historical purchased care. 23



- 2021 Process by Sourcing Priority
- Historical Purchased Care Pull for Outlier Rates +/-30% variance.





ABACUS Mapping Table

- Contains specific code ranges that maps to various applicable modifiers, claim forms and indicates which rate table to find the charge.
 - CPT[®]/HCPCS driven.

DMIS ID Mapping Table

• The Defense Medical Information System Identifier (DMIS ID) Mapping Table is used as a way of standardizing both medical and military facility identification and cost/workload classification.

Revenue Mapping Table

• Identifies the CPT[®]/HCPCS procedure, supply, drug code, description and available revenue centers.

- Revenue center code informs the payer where the procedure was performed.

Modifier Mapping Table

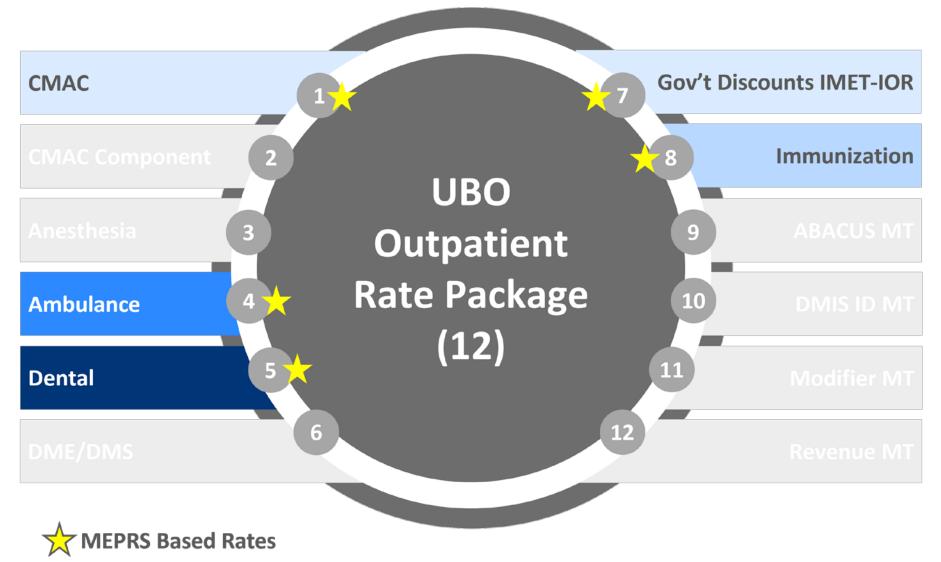
- Contains a list of modifiers that can be attached to specific ranges of codes and which rate table to find the charge in.
 - Modifier driven to identify applicable code ranges.
 - Released with the annual CPT[®]/HCPCS codes update.



• CY 2021 in the ABACUS Mapping Table to accommodate Inherently Bilateral codes

- Modifier -50 has historically been allowably mapped to all codes within applicable code ranges although several inherently bilateral codes fall within these ranges.
- It is important to note that if an inherently bilateral code has modifier -50 included it will lead to further coding issues for any ancillary codes that are not filtered through CCE for coders to review and correct.
- Logic in the mapping table uses a multiplier to increase the rate for codes appended with a -50 mod.
- Codes that are inherently bilateral (their procedure description implies performing the procedure to both sides of the body) should not be appended with a -50 mod, as the rate already accounts for the procedure for left and right in the same operative session.
- Change split new Radiology ranges to negate the -50 mod multiplier when used on inherently bilateral Rad codes.







Medical Expense Program Reporting System (MEPRS) Based Rates

- Annual adjustment for the following rates:
 - CMAC Ambulatory Procedure Visit (APV)
 - Ambulance
 - Dental
 - Immunization (Specific)
 - Government Discounts IMET-IOR
- CY21 Development Cycle
 - MEPRS data was again not mature during the CY21 outpatient rates development cycle, thus, codes adjusted with MEPRS data were developed using an alternative method.
 - Alternative Method: O&M Inflation Factor (+2.79%) was used as the CY21 annual adjustment in place of MEPRS per PO decision.



Computation & Burdening Factors

- Factors and percentages used as adjustments/plus ups in the Outpatient rate development process.
- Six (6) Main Factors
 - Asset Use Recoup depreciation and interest costs.
 - GSUR Costs Retirement health benefits and life insurance.
 - Military Pay Military pay raise percentage from the annual presidential budget.
 - Civilian Pay Civilian pay raise percentage from the annual presidential budget.
 - DMDC Factor Military medical personnel salary expenses.
 - Defense Health Plan Growth Annual budget growth percentage.



CY21 Outpatient Rates Summary

- 2021 Outpatient Rate package is **NOT YET** effective.
 - DHA UBO rates are developed to accommodate Military Health Systems billing systems and solutions.
 - Outpatient rates are developed by the DHA UBO for each outpatient encounter, service, procedure, or supply provided at a MTF.
- Formatted and sorted specifically for DHA UBO.
- Comprised of 12 rate components.
 - Four (4) of which are Mapping Tables.



Service Rate Requests

3



Service Rate Requests

No requests for a rate assignment in CY21.

Assigning Rates per Service Requests:

- Rates assigned if TRICARE provided a rate.
- Rates assigned according to Ambulatory Payment Classification (APC) charges or Purchased Care allowable amounts.
- Rates not assigned for:
 - Case management codes.
 - Codes on the Government No Pay list.
 - Non-billable codes.



Process for Requesting Rates for Procedure Codes

- 1) Service/MTF/billing office identifies the CPT[®]/HCPCS procedure code that is not included in the DHA UBO rates file.
- 2) Draft a written explanation telling why the code(s) should be applied a charge, the date(s) of service, the number of times and specific details of when/how the code is being used are all helpful.
- 3) Submit request with justification to Service/NCR MD Program Manager.
- 4) Service/NCR MD Program Manager forwards the written explanation and/or supporting documentation to the DHA UBO Helpdesk with a request for pricing.

 $\hfill\square$ Use "DHA UBO Special Price Request" in the subject line.

- 5) The pricing request will be forwarded to the appropriate SME for verification.
 - □ If confirmed that there is no DHA UBO current rate, a recommendation for an Out-of-Cycle (OOC) rate update may be considered.
 - □ SME determines the recommended rate structure and charge to apply, if any.
 - □ SME submits the recommended charge and supporting justification/documentation (including no charge if insufficient justification and documentation) to the PO for review and approval.
- 6) Upon PO approval, charges are updated and submitted to be included in the next rates 33 cycle OOC update.

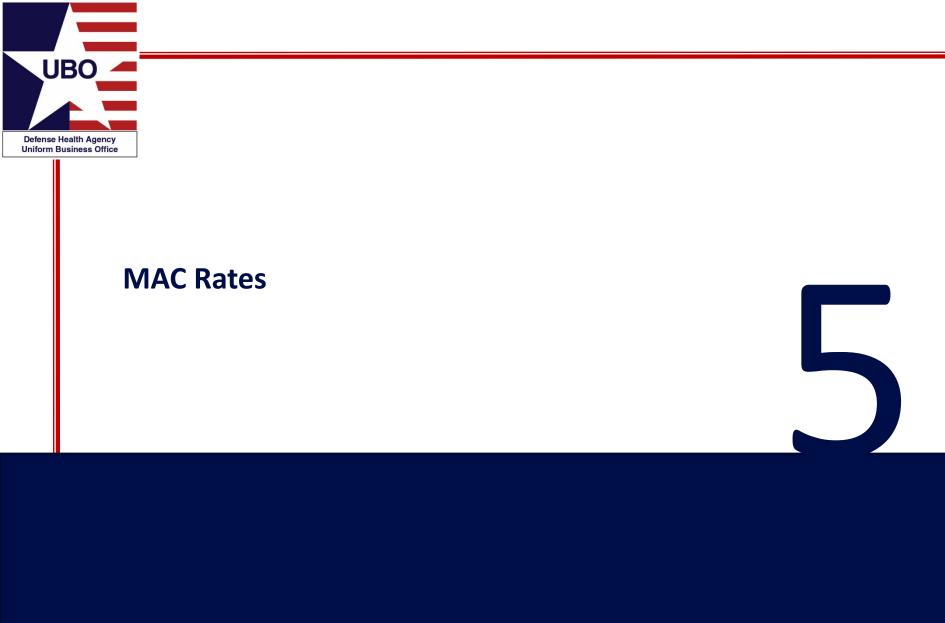


DHA UBO Inpatient Rates

4



- Inpatient rates Billing inpatient medical services at MTFs.
 - Each inpatient MTF has an Adjusted Standardized Amount (ASA).
- Effective rates for FY 2021 Inpatient Billing Rates.
 - October 1, 2020 until superseded historically, moving to a calendar year effective date in 2022, January 1 aligns with TRICARE





- MAC rates Same as DHA UBO Inpatient Adjusted Standardized Amounts (ASAs) and Outpatient rates but for liability insurance.
 - Automobile.
 - Homeowners and renters.
 - General casualty.
 - Medical malpractice.
 - Workers' compensation.
- Approved by Office of Management and Budget (OMB) and published in the Federal Register (FR).
- Based on date(s) of service.
- Pharmacy rates do not require OMB approval.
- MAC collections are reported on a monthly basis.



Determining Which Rate File to Use for MAC Claims

- Determine Date(s) of Service.
- Find CMAC locality according to DMIS ID.
- Look up CPT[®]/HCPCS code for rate.
- Refer to UBO website to determine which file to use.
- Follow Service/NCR MD specific guidelines for filing MAC claims.



Outpatient MAC Rates

MAC Claims Date of Service	Rate File to Use
February 23, 2021 – ** Will remain in effect until further notice	CY20 Outpatient Rates
January 24, 2018 – February 22, 2021	CY17 Outpatient Rates
March 3, 2016 – January 23, 2018	CY15 Outpatient Rates
November 18, 2014 – March 3, 2016	CY14 Outpatient Rates
October 22,2013 – November 17, 2014	CY13 Outpatient Rates
November 19, 2012 – October 21,2013	CY12 Outpatient Rates
November 21, 2011 – November 18, 2012	CY11 Outpatient Rates
March 21, 2011 – November 20, 2011	CY10 Outpatient Rates
December 15, 2009 – March 20, 2011	CY09 Outpatient Rates

Link: <u>https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/Billing/Medical-Affirmative-Claims</u>



Inpatient MAC Rates

MAC Claims Date of Service	Rate File to Use
Pending Publication	FY21 ASA Inpatient Rates
February 23, 2021 – ** Will remain in effect until further notice	FY20 ASA Inpatient Rates
January 24, 2018 – February 22, 2021	FY18 ASA Inpatient Rates
September 16, 2015 – January 23, 2018	FY15 ASA Inpatient Rates
June 12, 2014 – September 15, 2015	FY14 ASA Inpatient Rates
April 11, 2013 – June 11, 2014	FY13 ASA Inpatient Rates
March 21, 2011 – April 10, 2013	FY11 ASA Inpatient Rates
May 5, 2010 – March 20, 2011	FY10 ASA Inpatient Rates
January 15, 2009 – May 4, 2010	FY09 ASA Inpatient Rates

Link: <u>https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/Billing/Medical-Affirmative-Claims</u>



COVID-19 Updates and CY21 Impacts





- COVID-19 Updates:
 - TRICARE has updated pricing to accommodate additional lab tests and related codes throughout the year, more codes to be included in the CY21 files
 - Vaccine guidance regarding billable encounters is still forthcoming, a hold is placed now for administration and injection of the vaccine, includes the following codes:
 - 91300, 0001A, 0002A, 91301, 0011A, 0012A, 91302, 0021A, 0022A, 91303, 0031A
 - MHS has updated code tables once in March to accommodate code updates from CMS and AMA for COVID-19 procedures and diagnosis
 - Resulting in two different rate updates from DHA UBO, and two different sets of files
 - First update April 1, 2021: included all new CMAC codes, and additional COVID-19 vaccine and admin codes
 - Second update April 15, 2021: included revised CMAC COVID-19 rates



Billing Tips & Reminders





Industry Updates

- Centers for Medicare & Medicaid Services (CMS) updates CPT[®]/HCPCS codes on a quarterly basis.
- The American Medical Association (AMA) updates CPT[®]/HCPCS codes annually, effective 1 January.
- TRICARE updates CPT[®]/HCPCS codes annually.

DHA UBO Updates

- DHA UBO Outpatient rates: New CY21 CMAC codes were approved prior to standard annual effective date, were assigned a rate in this year's process effective April 1, 2021. Remaining CY21 package still to be effective July 1, 2021 once approved.
 - Can only bill if there is a DHA UBO rate associated with an effective code so this allowed billing for new CPT[®]/HCPCS codes from the CMAC file.
 - DHA UBO rates cannot be applied retroactively.
- Proper PATCAT assignment drives applicable rate structure and code assignment.



- Claim formats that are used in the MHS are based on encounter services provided, payer requirements, and Service and NCR MD billing policies.
- Government may not collect more than the total charge from any one source or combination of sources.
- If total payment exceeds the billed amount, MTF must refund the overage.

Institutional - Hospital charges

Professional - Provider charges

Health Plan/Policy	Institutional	Bill format	Professional	Bill format	Cost Recovery Program
Private insurance	Yes	8371/UB-04	Yes	837/CMS1500	TPC, MSA, MAC
Employer Group Health Plan	Yes	8371/UB-04	Yes	837/CMS1500	TPC, MSA, MAC
High Deductible Health Plan (HDHP)	Yes	8371/UB-04	Yes	837/CMS1500	N/A
Health Savings Account (HSA)	No	N/A	No	N/A	N/A
Health Reimbursement Account (HRA)	No	N/A	No	N/A	N/A
Flexible Spending Account (FSA)	No	N/A	No	N/A	N/A
Association or Organization Health Plan	Yes	8371/UB-04	Yes	837/CMS1500	MAC
No fault automobile insurance	Yes	8371/UB-04	Yes	837/CMS1500	MAC
Third party automobile liability	Yes	8371/UB-04	Yes	837/CMS1500	MSA
Medicare Supplemental Plan	Yes	8371/UB-04	Yes	837/CMS1500	MSA
Workers' Compensation Plan (non-federal employee)	Yes	8371/UB-04	Yes	837/CMS1500	MSA
Workers' Compensation Plan (federal employee)	No	DD7/DD7A	No	DD7/DD7A	MSA
Workers' Compensation Plan (DoD employee)	No	N/A	No	N/A	N/A
TRICARE Supplement	No	N/A	No	N/A	N/A
Income (wage) Supplement	Yes	N/A	No	N/A	N/A
Other/Special Coverage Group	Yes	8371/UB-04	Yes	837P/CMS1500	TPC, MSA, MAC
None (pay patient)	Yes	Invoice/receipt	Yes	Invoice/receipt	TPC, MAC



Inpatient Special Circumstance Rates

- **Family Member Rate** (FMR): Inpatient per diem rate charged to active duty family members not enrolled in TRICARE Prime and all retiree family members whose care is not reimbursed by a third party payer.
 - Does not apply to:
 - Beneficiaries with OHI.
- Food Service Charge at Appropriated Fund Dining Facilities or Standard Rate (Subsistence SR): charges cover the basic cost of food.
 - Does not apply to:
 - Active duty or Retired Personnel.
 - Patients whose OHI covers any portion of the IP encounter or any other amount paid by a third party payer to the MTF.
 - Inpatient cadets and midshipmen.
 - MTF dining hall charges must be applied to any individual in a non-inpatient status (e.g., OBS or APV).



Health.Mil & Launchpad Navigation





Accessing UBO Information Online

- DHA UBO information is maintained on Health.mil and Launchpad.
 - Health.mil is a public site.
 - Launchpad is a CAC user restricted access.



Health.mil Website

Healt The official we	h.mil	Search
About the MHS 🧿 Top	oics 🧿 Training 🧿 Policies 🧿 Reference Center 🧿 News & Gallery 🧉	lama 👀
MHS Home > Military Health Topics > Bus	iness Support > Uniform Business Office	Need larger text?
Business Support	Uniform Business Office (UBO)	Contact Us
Data Quality Management Control Program	The Army, Navy, Air Force, and National Capital Region Medical Directorate (NCR MD) establish and operate UBO offices at Defense	For questions or comments, please contact the UBO Help Desk:
Medical Logistics	Health Program (DHP) fixed military treatment facilities (MTFs)	Send an Email Message
HIPAA Transactions, Code Sets & Identifiers • Transactions • Code Sets • Identifiers	 throughout the world that administer Third Party Collections (TPC), Medical Services Account (MSA), and Medical Affirmative Claim (MAC) Programs: MSA activities involve the first-payer billing of individuals and other Government Agencies for services rendered in MTFs to include, but not limited to, the U.S. Coast Guard, the National Oceanic and Atmospheric Administration, and 	 Call 1-202-741-1532 and leave a message We will return your phone message within one business day.
Rates and Reimbursement	the U.S. Public Health Service.	
Uniform Business Office Armed Forces Billing and Collection Utilization Solution ● Billing Health Insurance Portability and Accountability Act	 TPC activities involve billing third-party payers on behalf of non-active duty dependents for treatment provided in MTFs. MAC activities involve billing all areas of liability insurance, such as automobile, products, premises and general casualty, homeowner's and renter's insurance, medical malpractice (by civilian providers), and workers' compensation (other than Federal employees). These efforts are coordinated by the Chartered UBO Advisory Working Group, composed of the DHA, 	
Medical Coding Program Office	Army, Navy, Air Force, and NCR MD Program Officers, who meet quarterly to review and recommend effective processes to identify, review, validate, and prioritize functional changes and business	

Link: http://www.health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office



Health.mil Website

ins nome > military health topics > Bu	siness Support > Uniform Business Office > UBO Rates Overview	Need larger text?
Business Support	UBO Rates Overview	Contact Us
Data Quality Management Control Program Medical Logistics	The UBO billing rates are based on TRICARE allowable charges and are used to determine charges for outpatient, inpatient, dental, cosmetic surgery, and pharmacy services. Outpatient rates are the charges for professional and institutional health care services provided bin MTFs. Inpatient rates are	For questions or comments, please contact the UBO Help Desk: • <u>Send an Email Message</u>
HIPAA Transactions, Code Sets & Identifiers Transactions Code Sets Identifiers	used when billing for inpatient medical services at MTFs. Each MTF providing inpatient care has its own applied Adjusted Standardized Amount (ASA). Pharmacy rates are based on TRICARE allowable charges, average wholesale price, or prime vendor program prices listed for the national drug codes and are used to set pharmacy rates for pharmaceuticals and approved drugs. UBO rates differ slightly from the standard TRICARE rates. UBO rates are specifically formatted for military billing systems, and include charges for additional services not reimbursed by TRICARE.	 Call 1-202-741-1532 and leave a message We will return your phone message within one business day.
Rates and Reimbursement	The Assistant Secretary of Defense for Health Affairs (ASD/HA) approved the implementation of CY	
Uniform Business Office Armed Forces Billing and Collection Utilization Solution	 2017 Outpatient Medical Dental and Cosmetic Procedure Reimbursement Rates for direct care received at military treatment facilities (MTFs) as on July 1, 2017. These rates are used to determine: Charges for medical and dental services provided on an outpatient basis 	
Billing	Ambulatory services	
Health Insurance Portability and Accountability Act Medical Coding Program Office	 Inpatient cosmetic surgery services These rates were released in accordance with <u>U.S.C. Title 10</u>, and will remain in effect until further notice. 	
UBO Rates Overview	The ASD/HA also approved the FY 2018 Inpatient Billing Rates for direct care received at MTFs	
MHS UBO Rates Patient Categories Performance Measurements	effective October 1, 2017, and will remain in effect until further notice. These rates are used to determine charges for inpatient professional and institutional health care services provided in MTFs under the Defense Health Program (DHP).	
Policy and Guidance UBO Standard Insurance Table	UBO rates are published online in accordance with <u>Executive Order 13410</u> (August 2006) to promote health care transparency relating to quality and cost.	

Link: <u>https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/UBO-Rates-Overview</u>



Health.mil Website

About the MHS 🧿 To	pics 📀 Training 📀 Policies 📀 Reference Center 📀 News & Gallery 📀 ㅣ am a 📀
MHS Home > Military Health Topics > Bu	siness Support > Uniform Business Office > UBO Rates Overview > MHS UBO Rates Need larger text?
Business Support	MHS UBO Rates
Data Quality Management Control Program	MHS rates are used to determine charges for medical and dental services.
Medical Logistics	The MHS Rates are available to the authorized UBO Service Representative users with a Government Common Access Card by accessing the MHS UBO Site located on the MHS Secure Site LaunchPad (CAC authentication required).
HIPAA Transactions, Code Sets & Identifiers Transactions	Ambulance Rates
Code SetsIdentifiers	Select Download: Select Download
Rates and Reimbursement	Anesthesia Rates
Uniform Business Office Armed Forces Billing and Collection Utilization Solution	Select Download: Select Download
 Billing Health Insurance Portability and Accountability Act 	CMAC Rates These files contain all localities and are compressed in a .zip file format. Please download the entire file before attempting to open.
Medical Coding Program Office © UBO Rates Overview	Select Download: Select + Download
MHS UBO Rates	
Patient Categories Performance Measurements Policy and Guidance	CMAC Locality DMIS ID Mapping Tables CMAC Rates are adjusted for the locality of the providing military treatment facility (MTF). The following tables provide the key to determining which CMAC locality is appropriate for each MTF.
UBO Standard Insurance Table	

Link: <u>https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/UBO-Rates-Overview/MHS-UBO-Rates</u>



- DHA UBO Launchpad Website (https://info.health.mil/bus/brm/ubo/Pages/ubon.aspx)
 - Access restricted to CAC holders.
 - Note*** Users without a CAC may still request files using the DHA UBO Helpdesk.
- The following information is available on Launchpad:
 - Rates (Outpatient, Inpatient, MAC, Pharmacy, Deployed Forces, VA-DoD).
 - Pricing Calculators (VA-DoD, Cosmetic Surgery Estimator, Pharmacy).
 - Institutional and Professional Charges for Health Plan and Policy Billing Guidelines.
 - PATCAT Table.
 - Publications.
 - Archived Webinars (Past 5 years).
 - UBO Manual, DoD Policies, User Guide.
 - Compliance Toolkit including template.



Launchpad

↑ Loggle Left Side Menu					
Site Nav	DHA Uniform Business Office				
UBO Home	Military Health System UBO Rates Overview				
About Us					
UBO Core Functions					
Systems Overview	The UBO billing rates are based on TRICARE allowable charges and are used to determine charges for outpatient, inpatient, dental, cosmetic surgery, and pharmacy services.	Contact Us			
ABACUS	Outpatient rates are the charges for professional and institutional health care services provided bin MTFs. Inpatient rates are used when billing for inpatient medical services at MTFs. Each MTF providing inpatient care has its own applied Adjusted Standardized Amount (ASA). Pharmacy rates are based on TRICARE allowable charges, average wholesale	For questions or comments, please contact the UBO Help Desk:			
Billing Overview	price, or prime vendor program prices listed for the national drug codes and are used to set pharmacy rates for pharmaceuticals and approved drugs.	Send an Email Message			
Health Plan and Policy Billing Guidelines	UBO rates differ slightly from the standard TRICARE rates. UBO rates are specifically formatted for military billing systems, and include charges for additional services not	Call <u>1-202-741-1532</u> and leave a message We will return your phone message within one business day.			
Third Party Collection	reimbursed by TRICARE.	We will return your phone message			
Medical Services Account	The Assistant Secretary of Defense for Health Affairs (ASD/HA) approved the implementation of REVISED CY 2016 Outpatient Medical, Dental, and Cosmetic Procedure				
Rates Overview	Reimbursement Rates for direct care received at military treatment facilities (MTFs) as on November 1, 2016. These rates are used to determine:	<u>۲</u>			
MHS UBO Rates	Charges for medical and dental services provided on an outpatient basis				
Patient Categories	Ambulatory services Inpatient cosmetic surgery services				
Reference File and Tables	These rates were released in accordance with U.S.C. Title 10, and will remain in effect until further notice.	FEED BACK			
MHS Standard Insurance Table	The ASD/HA also approved the FY 2017 Inpatient Billing Rates for direct care received at MTFs effective October 1, 2016, and will remain in effect until further notice. These				
Performance Measures	rates are used to determine charges for inpatient professional and institutional health care services provided in MTFs under the Defense Health Program (DHP).				
Policy and Guidance	UBO rates are published online in accordance with Executive Order 13410 (August 2006) to promote health care transparency relating to quality and cost.				
Access Management	Mapping Tables				
Learning Center	UBO billing systems use rate files in conjunction with several mapping tables that directs the billing systems to the appropriate rate file for any given procedure. These mapping tables that directs the billing systems to the appropriate rate file for any given procedure.				
Learning Center Archives					
UBO Archived Files	Calendar Year (CY) Mapping Tables				
Medical Affirmative Claims	OMIS ID to CMAC Locality Table				
wedical Ammauve claims	Revenue Mapping Table ABACUS Mapping Table				
Site POC	Modifier Mapping Table				

Link: <u>https://info.health.mil/bus/brm/ubo/Pages/ubon.aspx</u>



DHA UBO Helpdesk Q&A





- 1) "I'm trying to locate CPT XXXX or HCPCS XXXX, but cannot seem to find this code, or no rate is attached. Please assist."
 - DHA UBO Helpdesk Response: There is not currently a rate assigned to code XXXX. Please submit the below justification information for a rate request:
 - Date of service
 - Number of times used
 - Specific details of when/how the code is being used
 - Any further written justification of why a rate should be assigned



- 2) Where are the TRICARE CMAC rates? I do not see them on the UBO Web site.
 - DHA UBO Helpdesk Response: TRICARE CMAC rates are available on the Health.mil Web site under the "Rates and Reimbursement" (http://www.health.mil/Military-Health-Topics/Business-Support/Rates-and-<u>Reimbursement</u>) section. These rates are used to recover the cost of healthcare services provided by MTFs that abides by DoD/VA Resource Sharing agreements. These rates are different than the DHA UBO CMAC rates which are based on TRICARE CMAC rates, but are formatted for military billing systems and include charges for additional services not reimbursed by TRICARE.
- 3) Where can I find MAC billing rates from previous years?
 - DHA UBO Helpdesk Response: MAC rates are same as DHA UBO Inpatient Adjusted Standardized Amounts (ASA) and Outpatient rates, but must first be approved by Office of Management and Budget (OMB) and published in the Federal Register (FR)
 - You can find the appropriate MAC rates under "UBO Archived Rates" on the DHA UBO Launchpad. Select the appropriate rate file according to the date(s) of service for MAC billing.





Webinar Summary

- 2021 OP Rates Package pending final policy approval, July 1, 2021 was still the proposed effective date for billing for all care with a date of service after this date
- COVID-19 OOC Updates
- MAC Billing
 - Updated rates used for MAC billing are the same as those included in the OP, IP and Rx rate packages.
 However, these rates (except Rx) must be approved by the OMB and published in the Federal Register before they can be used for MAC purposes. Effective rate based on date(s) of service.
- Rate Requests for Procedures
 - Rates determined based on Service/ NCR-MD requests, necessity, and PO approval.
 - Submit code with justification to the UBO Helpdesk via your Service Program Manager.
 - Requests reviewed, approved by UBO, and included in next cycle update or may constitute an out of cycle update.
- Follow Policy Billing Guidelines to ensure proper billing.
 - MHS claims based on services provided, payer requirements, and Service/NCR-MD billing policies.
 - PATCAT assignment drives correct billing and identifies the appropriate rate structure.
- DHA UBO information is maintained on Health.mil and Launchpad.
 - Health.mil is a public site.
 - LaunchPad CAC user restricted access.

Questions



Questions?

