

Fact Sheet

National Correct Coding Initiative

The National Correct Coding Initiative (NCCI) is a Centers for Medicare & Medicaid Services (CMS) program that consists of coding policies and edits that identify procedures and services performed for the same beneficiary by the same provider on the same date of service. This program has been in existence for Medicare since 1996 and for Medicaid since 2010.

COMPONENTS OF THE MANDATE

There are two main components of the CMS mandate:

- NCCI – procedure-to-procedure edits for practitioners, ambulatory surgical centers, outpatient hospital services and durable medical equipment that define pairs of HCPCS/CPT codes that should not be reported together.
- Medically Unlikely Edits (MUE) – these are units of service edits for practitioners, ambulatory surgical centers, outpatient hospital services, and durable medical equipment. This component defines for each HCPCS or CPT code the number of units of service that is unlikely to be correct (e.g., claims for excision of more than one appendix or more than one hysterectomy).

PURPOSE OF THE MANDATE

The purpose of the mandated edits is to prevent improper payments when a provider submits incorrect code combinations or to avoid payments of units in excess of what is medically unlikely.

All information pertaining to the NCCI mandate is published on the CMS website. The comprehensive list of codes can be downloaded by type of provider or service from the CMS [Medicaid National Correct Coding Initiative webpage](#).

WHAT IF I HAVE QUESTIONS?

Please contact NCTracks call center at 800-688-6696 or the appropriate Managed Care [health plan](#) with any specific claims related questions.

