

Medically Unlikely Edits (MUE's)

March 25, 2016

CMS developed Medically Unlikely Edits (MUEs) to reduce the paid claims error rate for Part B claims. They represent an upper limit that unquestionably requires further documentation to support. The ideal MUE is the maximum unit of service for a code on the majority of medical claims. MUE is part of the National Correct Coding Initiative (NCCI) to address coding methodologies. The NCCI policies are based on coding conventions by nationally recognized organizations and are updated annually or quarterly.

MUEs differ from the National Correct Coding Initiative (NCCI) edits. The NCCI edits identify which procedures and services are bundled and should not be billed together. MUEs limit the number of times a service or procedure can be reported by a physician on the same date of service to an individual patient. MUEs apply not only to services and procedures, but also to durable medical equipment and drugs. Please note that not all HCPCS/CPT codes have an MUE. CMS developed the MUE program to reduce the error rate for Part B coding and to control improper payments. The edits are based on anatomic considerations. MUE was implemented January 1, 2007 and is utilized to adjudicate claims at Carriers, Fiscal Intermediaries, and DME MACs.

Below is the link to MUEs effective as of April 2016:

http://nyspma.org/aws/NYSPMA/asset_manager/get_file/123248