

CHAPTER 13
 ADDENDUM C

PAYMENT STATUS INDICATORS FOR HOSPITAL OPPS

Note: This reimbursement system is tentatively scheduled to become effective on February 1, 2007.

INDICATOR	ITEM/CODE/SERVICE	OPPS PAYMENT STATUS
A	Services furnished to a hospital outpatient that are paid under a fee schedule or payment system other than OPPS, e.g.: <ul style="list-style-type: none"> • Ambulance Services • Clinical Diagnostic Laboratory Services • Non-Implantable Prosthetic and Orthotic Devices • EPO for ESRD Patients • Physical, Occupational, and Speech Therapy • Routine Dialysis Services for ESRD Patients Provided in a Certified Dialysis Unit of a Hospital • Diagnostic Mammography • Screening Mammography 	Not paid under OPPS. Paid by Intermediaries under a fee schedule or payment system other than OPPS.
B	Codes that are not recognized by OPPS.	Not paid under OPPS.
C	Inpatient Procedures	Not paid under OPPS. Admit patient. Bill as inpatient.
E	Items, Codes, and Services: <ul style="list-style-type: none"> • That are not covered by TRICARE. 	Not paid under OPPS.
F	Corneal Tissue Acquisition; Certain CRNA Services and Hepatitis B Vaccines	Not paid under OPPS. Paid on allowable charge basis.
G	Pass-through Drugs, Biologicals	Paid in Separate APCs under OPPS.
H	(1) Pass-through Device Categories; (2) Brachytherapy Sources (3) Radiopharmaceutical Agents	(1) Separate cost-based pass-through payment; Not subject to cost-share/co-payment. (2) Separate cost-based non-pass-through payment. (3) Separate cost-based non-pass-through payment.
K	Non-Pass-Through Drugs, Biologicals	Paid under OPPS; Separate APC payment.

TRICARE REIMBURSEMENT MANUAL 6010.55-M, AUGUST 1, 2002

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INDICATOR	ITEM/CODE/SERVICE	OPPS PAYMENT STATUS
N	Items and Services packaged into APC Rates	Paid under OPPTS; Payment is packaged into payment for other services, including outliers, therefore, there is no separate APC payment.
P	Partial Hospitalization	Paid under OPPTS; Per diem APC payment.
Q	Services Either Separately Payable or Packaged	Paid under OPPTS; Packaged or separately payable depending on the specific circumstances of the HCPCS billing. OCE logic will be applied in determining if the services will be packaged or separately payable.
S	Significant Procedure, Not Discounted when Multiple	Paid under OPPTS; Separate APC payment.
T	Significant Procedure, Multiple Reduction Applies	Paid under OPPTS; Separate APC payment.
V	Clinic or Emergency Department Visit	Paid under OPPTS; Separate APC payment.
W	Invalid HCPCS or Invalid Revenue Code with blank HCPCS	Not paid under OPPTS.
X	Ancillary Services	Paid under OPPTS; Separate APC payment.
Z	Invalid Revenue Code with blank HCPCS and no other SI assigned.	Not paid under OPPTS.

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