

## Chapter 13

# Outpatient Prospective Payment System (OPPS)-Ambulatory Payment Classification (APC)

Revision:

| Section/Addendum | Subject/Addendum Title   |
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| 1                | General  |
| 2                | Billing And Coding Of Services Under Ambulatory Payment Classifications (APC) Groups   |
| Figure 13.2-1    | PHP As Of CY 2015  |
| Figure 13.2-2    | Reporting Of Partial Hospitalization Services Spanning Two Or More Dates - HIPAA 837 Format  |
| Figure 13.2-3    | Reporting Of Partial Hospitalization Services Spanning Two Or More Dates - CMS 1450 Format   |
| 3                | Prospective Payment Methodology  |
| Figure 13.3-1    | Discounting Formulas For Bilateral Procedures  |
| Figure 13.3-2    | Application of Discounting Formulas  |
| Figure 13.3-3    | Devices For Which The FB Modifier Must Be Reported With The Procedure When Furnished Without Cost Or At Full Credit For A Replacement Device |
| Figure 13.3-4    | Adjustments To APCs In Cases Of Devices Reported Without Cost Or For Which Full Credit Is Received For CY 2009                               |
| Figure 13.3-5    | Proportional Payment For "T" Line Items  |
| 4                | Claims Submission And Processing Requirements  |
| 5                | Medical Review And Allowable Charge Review Under the Outpatient Prospective Payment System (OPPS)  |
| A                | Development Schedule For TRICARE Outpatient Code Editor (OCE)/Ambulatory Payment Classification (APC) Quarterly Update                       |
| B                | Outpatient Prospective Payment System (OPPS) Outpatient Code Editor (OCE) Notification Process For Quarterly Updates                         |
| C                | Approval Of OPPS - Outpatient Code Editor (OCE)/APC And No Government Pay List (NGPL) Quarterly Update Process                               |

