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# **DHA UBO Webinar: CY2022 Outpatient Rates**

Presented by: Mr. Alex Ames, DHA UBO Support

July 2022

# Agenda

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- 1) DHA UBO Rate Structures
- 2) DHA UBO Outpatient Rates
  - CY2022 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) Summary

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# CY22 OP Rates Effective Date

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- CY22 Outpatient rates have been approved with an effective date of **August 1, 2022**.
- Codes or rates released after approval will be reviewed on a quarterly basis with an effective date set by the DoD DHA UBO Program Office.

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# DHA UBO Rate Structures

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# DHA UBO Rate Structures Cont.

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- Widely used billing rate structures intended to recover costs in the military fixed facilities.
  - Full or Third-Party Collections (TPC).
  - Interagency.
  - 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.

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# UBO Rate Structures:

## Full or Third-Party Collection (TPC) Rates

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- 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.

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# UBO Rate Structures: Interagency Billing Rates

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- 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.

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# UBO Rate Structures:

## International Military Education & Training Rates

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- 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.*

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# UBO Rate Structures: The PATCAT Table

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

DHA PATCAT Table v9.0													
Code	Subcat	Pat Cat Summary	NAS Author	Ipnt Indiv	Ipnt Agency	Opnt Indiv	Opnt Agency	Sponsor	Family Member	Civ Emergency	Deceased Sponsor	OCONUS GMS	Prohibit DEERS
A00		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	RETIRED	FMR	NC	NC	NC	YES	NO	NO	NO	NO	NO
A25		DEPENDENT/RETIREE	FAM MBR OF RETIRED	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	RETIRED	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO

Link: [Patient Categories | Health.mil](https://www.health.mil/patient-categories)

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# Outpatient Rate Package

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# Outpatient Rates Overview

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- CY 2022 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.

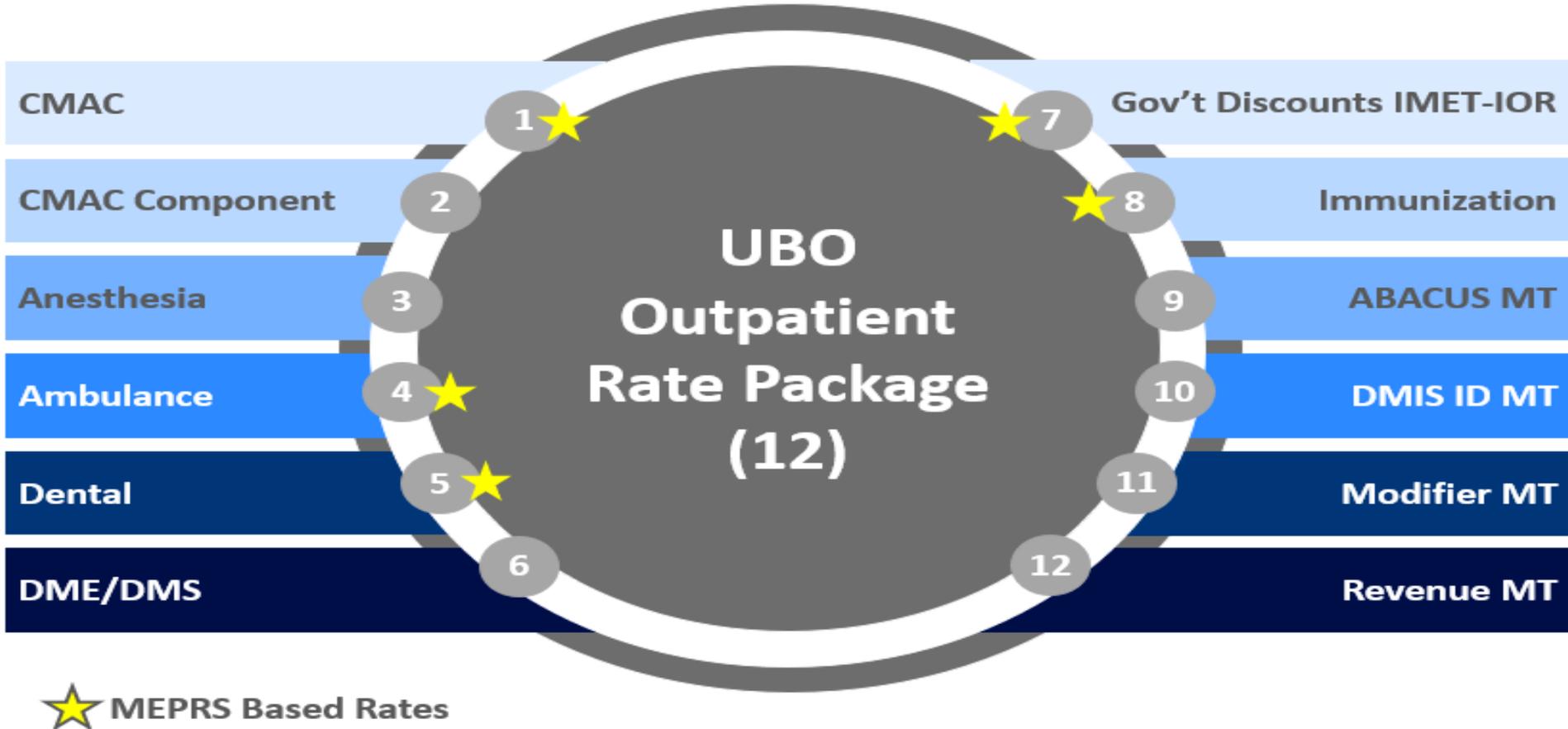
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# Rate Package Components



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# CMAC & CMAC Component Rates

## • Overview

- Primary rate table, formatted and sorted for UBO.
- Based on what TRICARE allows.
- Categorized by CMAC localities.

## • 2022 Highlights

- Certain CMAC codes are not available for separate reimbursement.
  - ✓ ED Rates
  - ✓ Observation
  - ✓ Moderate Sedation
- 0.07% Overall Average Percent Increase from CY21
- CY22 new codes became effective **January 1, 2022**. The rest of the file for CY22 will have an effective date of **August 1, 2022**.

<u>CPT Code</u>	<u>Description</u>
99024	Post Operative Follow-Up Visit
G0379	Dir Admit for OBS
99241	IP Consult Code
99242	IP Consult Code
99243	IP Consult Code
99244	IP Consult Code
99245	IP Consult Code
99251	OP Consult Code
99252	OP Consult Code
99253	OP Consult Code
99254	OP Consult Code
99255	OP Consult Code

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# CMAC & CMAC Component Rates: Overview

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## 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.

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# CMAC & CMAC Component Rates: TRICARE Localities

There are 114 Active TRICARE Localities for CY21

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

The screenshot shows the Health.mil website interface. The main navigation bar includes links for Contact Us, FAQs, Gallery, and TRICARE. The breadcrumb trail indicates the path: MHS Home > Military Health Topics > Business Support > Rates and Reimbursement > CMAC Rates > Locality To ZIP. The left sidebar contains a 'Business Support' menu with categories like Data Quality Management, Medical Logistics, HIPAA Transactions, and Rates and Reimbursement. The main content area features the 'Locality To ZIP' tool, which includes a search form with a dropdown menu set to '314 COLORADO' and a 'Submit' button. Below the form, a table titled 'Results: CMAC Procedure Pricing' displays a list of zip codes associated with the locality code 314.

Results: CMAC Procedure Pricing																																																																																																																						
Locality Code: 314																																																																																																																						
Locality Name: COLORADO																																																																																																																						
80001	80002	80003	80004	80005	80006	80007	80010	80011	80012	80013	80014	80015	80016	80017	80018	80019	80020	80021	80022	80023	80024	80025	80026	80027	80028	80030	80031	80033	80034	80035	80036	80037	80038																																																																																					
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	80131	80132	80133	80134	80135	80136	80137	80138	80150	80151	80154	80155	80160	80161	80162	80163	80165	80166	80201	80202	80203	80204	80205	80206	80207	80208	80209	80210	80211	80212	80214	80215	80216	80217	80218	80219	80220	80221	80222	80223	80224	80225	80226	80227	80228	80229	80230	80231	80232	80233	80234	80235	80236	80237	80238	80239	80241	80243	80244	80246	80247	80248	80249	80250	80251	80252	80254	80255	80256	80257	80259	80260	80261	80262	80263	80264	80265	80266	80270	80271	80272	80274	80275	80279	80280

Link: [Locality To ZIP | Health.mil](https://www.health.mil/locality-to-zip)

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# CMAC & CMAC Component Rates: ED

- 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	2021	2022	Percent Change
99281	\$72.60	\$74.08	2.04%
99282	\$131.59	\$134.15	1.95%
99283	\$231.60	\$236.35	2.05%
99284	\$363.74	\$371.52	2.14%
99285	\$522.12	\$533.27	2.14%

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# CMAC & CMAC Component Rates: CMAC

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- 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.

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# Anesthesia Rates

- Overview
  - Flat Rate Calculation.
  - Applied TRICARE Reimbursement Formula.
  - (Average Time Units + Base Units) x National Average Conversion Factor.
  - 2022 Total Codes: 276.
  
- 2022 Highlights
  - Overall Decrease of **-.01%**

CPT Code	2022 Rate	Short Descriptor
00100	\$313.08	ANESTH, SALIVARY GLAND
00102	\$249.04	ANESTH, REPAIR OF CLEFT LIP
00103	\$202.90	ANESTH, BLEPHAROPLASTY
00104	\$111.69	ANESTH, ELECTROSHOCK
00120	\$271.68	ANESTH, EAR SURGERY
00124	\$150.07	ANESTH, EAR EXAM
00126	\$136.70	ANESTH, TYMPANOTOMY
00140	\$198.80	ANESTH, PROCEDURES ON EYE
00142	\$135.84	ANESTH, LENS SURGERY
00144	\$254.22	ANESTH, CORNEAL TRANSPLANT
00145	\$255.30	ANESTH, VITRECTOMY
00147	\$170.99	ANESTH, IRIDECTOMY
00148	\$156.11	ANESTH, EYE EXAM
00160	\$235.68	ANES,NOSE/ACC SINUS;NOS
00162	\$443.75	ANES,NOSE/ACC SINUS;RADICL SRG
00164	\$191.69	ANESTH, BIOPSY OF NOSE
00170	\$226.19	ANESTH, PROCEDURE ON MOUTH
00172	\$411.84	ANESTH, CLEFT PALATE REPAIR
00174	\$334.86	ANES,EXC RETROPHARYNGEAL TUMOR
00176	\$776.03	ANES,INTRAORAL;RADICAL SURGERY
00190	\$307.26	ANESTH, FACIAL BONE SURGERY
00192	\$385.75	ANESTH, FACIAL BONE SURGERY

Flat Rate  
Calculation

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# Ambulance Rates

- Overview
  - 2021 Full Rate: \$276.77
  - 2022 Full Rate: \$285.18
- 2022 Highlights
  - Overall Increase of +3.04%

Ambulance Codes Assigned a Rate		
A0426	A0428	A0433
A0427	A0429	A0999

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# Dental Rates

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- Overview

- The updated Defense Health Agency CY22 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) \*CDM will not include W codes
  - ✓ W Codes are DoD Specific but non-billable. They replaced Dental A-codes so as not to cause confusion with standard HCPCS A-codes.

- 2022 Highlights

- Overall increase of **+11.68%**.
- Added 16 new codes, 16 revised codes, 6 deleted codes.
- 825 total Dental codes.

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# Durable Medical Equipment & Supplies DME/DMS Rates

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

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# Government Discounts IMET-IOR Rates

- Overview
  - International Military Education & Training (IMET).
  - Interagency Outpatient Rates (IOR).
- 2022 Highlights

Type of Discount	Discounted Services Except Ambulance and Dental	Ambulance Services	Dental Services	Applicable PATCAT
IMET	0.6097	0.6097	0.4119	Misc.
IOR	0.9365	0.9365	0.9453	Misc.
IOR	0.9365	0.9365	0.9453	K611
IOR	0.8	0.8	0.8	K612

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# Immunization Rates

- Overview

- 1<sup>st</sup> Priority – CMAC TRICARE Provided Rates (Released Quarterly).
- 2<sup>nd</sup> Priority – Purchased Care Allowable Amounts (Previous Fiscal Year).
- 3<sup>rd</sup> Priority – MEPRS Based Flat Rate.
  - ✓ 2021 Flat Rate: \$69.09
  - ✓ 2022 Flat Rate: \$71.19 (Increased by 3.04%).

- 2022 Highlights

- 18 New Codes, 4 Deleted Codes.
- 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.

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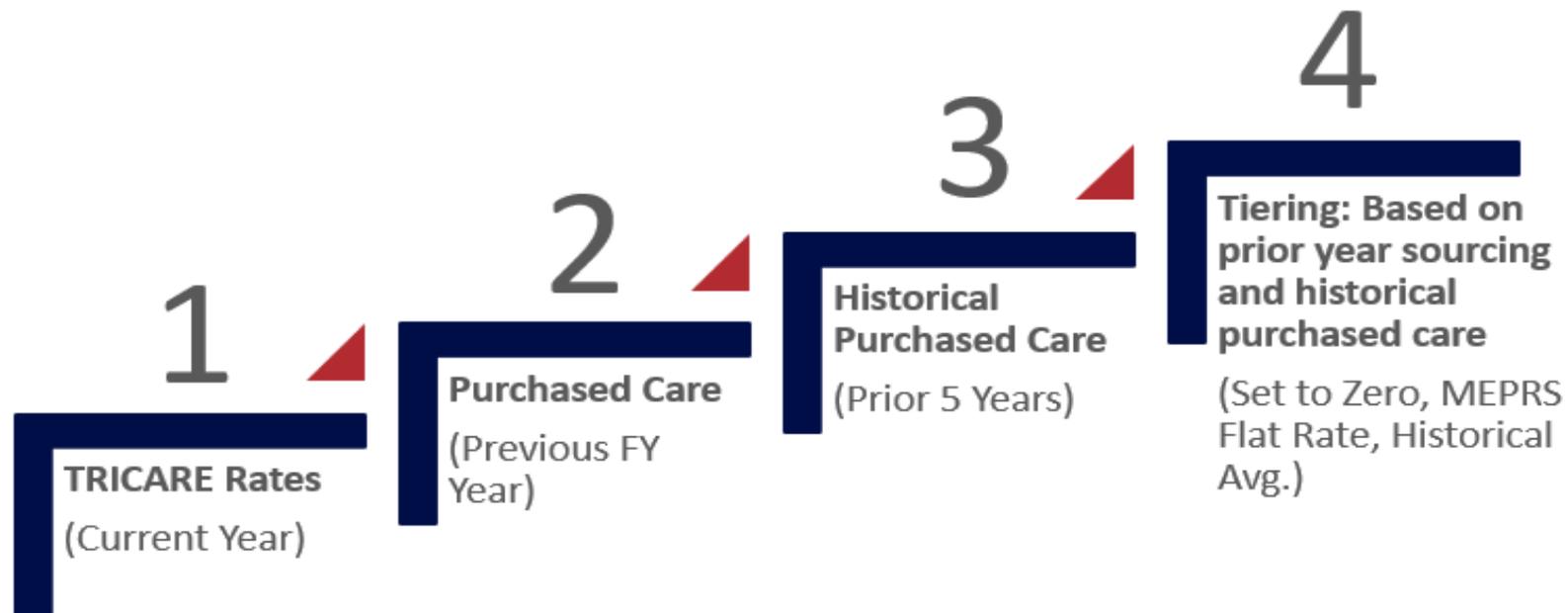


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# Immunization Rates Cont.

- 2022 Process by Sourcing Priority
- Historical Purchased Care Pull for Outlier Rates +/-30% variance.



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# Mapping Tables Overview

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- **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.

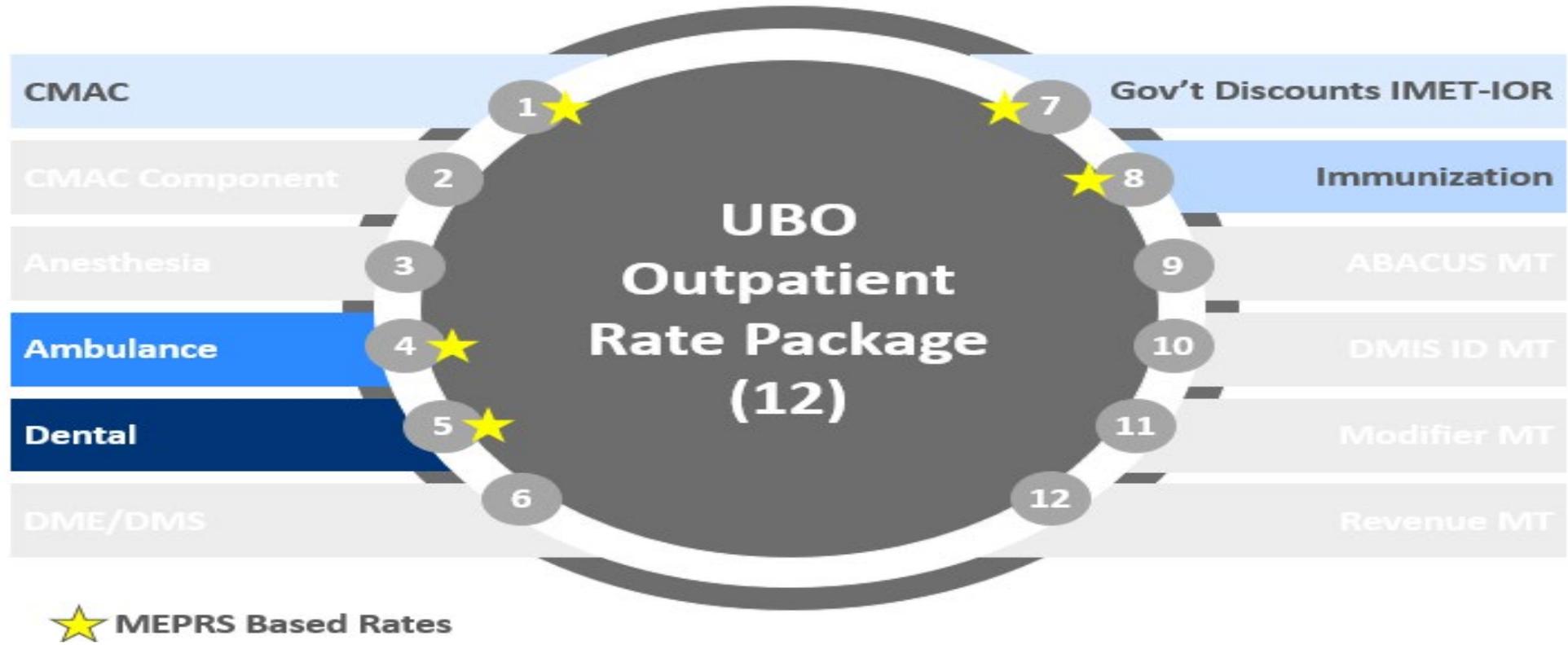
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# Rate Package Components – MEPRS Based Rates



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# MEPRS Based Rates

## 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
- CY22 Development Cycle
  - MEPRS data was not mature during the CY22 outpatient rates development cycle, thus, codes adjusted with MEPRS data were developed using an alternative method.
    - ✓ Alternative Method: O&M Inflation Factor (+3.04%) was used as the CY22 annual adjustment in place of MEPRS per PO decision.

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# Computation & Burdening Factors

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- 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.

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# CY22 Outpatient Rate Summary

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- 2022 Outpatient Rate package is effective **August 1, 2022**.
  - 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.

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# Service Rate Requests

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# Service Rate Requests: Overview

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- Service Rate Requests:
  - No requests for a rate assignment in CY22.
- 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.

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# Service Rate Requests Cont.

## 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.
  - 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 cycle OOC update.

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# DHA UBO Inpatient Rates

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# Adjusted Standardized Amounts (ASA) Inpatient Rates

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- Inpatient rates - Billing inpatient medical services at MTFs.
  - Each inpatient MTF has an Adjusted Standardized Amount (ASA).
- Effective rates for CY 2022 Inpatient Billing Rates.
  - Rates are effective **January 1, 2022**, until superseded.

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# MAC Rates

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# Medical Affirmative Claims (MAC) Rates

- 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.

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# MAC Rates: Determining Rate Files

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## 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.

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# MAC Rates:

## Determining Which Rate File to Use: Outpatient

### Outpatient MAC Rates

MAC Claims --- Date of Service	Rate File to Use
Pending Publication	CY 22 Outpatient Rates
February 23, 2021 - ** Will remain in effect until further notice	CY 20 Outpatient Rates
January 24, 2018 - February 22, 2021	CY 17 Outpatient Rates
March 4, 2016 - January 23, 2018	CY 15 Outpatient Rates
November 18, 2014 - March 3, 2016	CY 14 Outpatient Rates
October 22, 2013 - November 17, 2014	CY 13 Outpatient Rates
November 19, 2012 - October 21, 2013	CY 12 Outpatient Rates
November 21, 2011 - November 18, 2012	CY 11 Outpatient Rates
March 21, 2011 - November 20, 2011	CY 10 Outpatient Rates
December 15, 2009 - March 20, 2011	CY 09 Outpatient Rates

Link: [Medical Affirmative Claims | Health.mil](#)

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# MAC Rates:

## Determining Which Rate File to Use: Inpatient

### Inpatient MAC Rates

MAC Claims --- Date of Service	Rate File to Use
Pending Publication	CY 22 ASA Inpatient Rates
February 23, 2021 - ** Will remain in effect until further notice	FY 20 ASA Inpatient Rates
January 24, 2018 - February 22, 2021	FY 18 ASA Inpatient Rates
September 16, 2015 - January 23, 2018	FY 15 ASA Inpatient Rates
June 12, 2014 - September 15, 2015	FY 14 ASA Inpatient Rates
April 11, 2013 - June 11, 2014	FY 13 ASA Inpatient Rates
March 21, 2011 - April 10, 2013	FY 11 ASA Inpatient Rates
May 5, 2010 - March 20, 2011	FY 10 ASA Inpatient Rates
January 15, 2009 - May 4, 2010	FY 09 ASA Inpatient Rates

Link: [Medical Affirmative Claims | Health.mil](#)

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# Covid-19 Updates and CY 22 Impacts

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# COVID-19 CY22 Updates and Impacts

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- COVID-19 Updates:
  - TRICARE updates pricing to accommodate additional lab tests and related codes throughout the year as they are released, these rates will be released out of cycle as needed.
  - Vaccine guidance regarding billable encounters is based on FY Budget Guidance in which the administration of the vaccine is billable for certain categories of patients, but not the vaccine solution itself
    - ✓ Vaccine admin code range: 0001A – 0113A
    - ✓ Vaccine immunization code range: 91300 - 91311
  - The most up-to-date billing guidance for COVID-19 related care can be found on [Launchpad](#)

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# Billing Tips and Reminders

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# Billing Tips and Reminders: Updates

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## 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

- Proper PATCAT assignment drives applicable rate structure and code assignment.

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# Billing Tips and Reminders:

## Health Plan and Policy Billing Guidelines

- 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

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# Billing Tips and Reminders:

## Inpatient Special Circumstance Rates

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- **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).

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# Health.mil & Launchpad Navigation

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# Health.mil & Launchpad

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## 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.

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# Health.mil Website

**Health.mil**  
The official website of the Military Health System

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MHS Home > Military Health Topics > Business Support > Uniform Business Office [Need larger text?](#)

**Business Support**

- Data Quality Management Control Program**
- Medical Logistics**
- HIPAA Transactions, Code Sets & Identifiers**
  - Transactions
  - Code Sets
  - Identifiers
- Rates and Reimbursement**
- Uniform Business Office**
  - Armed Forces Billing and Collection Utilization Solution
  - Billing
  - Health Insurance Portability and Accountability Act
  - Medical Coding Program Office
  - UBO Rates Overview

**Uniform Business Office (UBO)**

The Army, Navy, Air Force, and National Capital Region Medical Directorate (NCR MD) establish and operate UBO offices at Defense Health Program (DHP) fixed military treatment facilities (MTFs) 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 the U.S. Public Health Service.
- 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, 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 process improvements to support MTF operations and management activities.

**Contact Us**

For questions or comments, please contact the UBO Help Desk:

- [Send an Email Message](#)
- Call 1-202-741-1532 and leave a message

We will return your phone message within one business day.

Link: [Uniform Business Office \(UBO\) | Health.mil](#)

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# Health.mil Website: UBO Rates Overview

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## UBO Rates 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. Outpatient rates are the charges for professional and institutional health care services provided in 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 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.

The Assistant Secretary of Defense for Health Affairs (ASD/HA) approved the implementation of [CY 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
- Ambulatory services
- Inpatient cosmetic surgery services

These rates were released in accordance with [U.S.C. Title 10](#), and will remain in effect until further notice.

The ASD/HA also approved the [FY 2018 Inpatient Billing Rates](#) for direct care received at MTFs 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).

UBO rates are published online in accordance with [Executive Order 13410](#) (August 2006) to promote health care transparency relating to quality and cost.

**Contact Us**

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Link: [UBO Rates Overview | Health.mil](https://www.health.mil/uborates)

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# Health.mil Website Cont.

MHS Home > Military Health Topics > Business Support > Uniform Business Office > UBO Rates Overview > MHS UBO Rates [Need larger text?](#)

**Business Support**

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    - UBO Standard Insurance Table

**MHS UBO Rates**

MHS rates are used to determine charges for medical and dental services.

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).

**Ambulance Rates**

Select Download:

**Anesthesia Rates**

Select Download:

**CMAC Rates**

These files contain all localities and are compressed in a .zip file format. Please download the entire file before attempting to open.

Select Download:

**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.

Link: [MHS UBO Rates | Health.mil](#)

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# Launchpad

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- **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.

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# Launch Pad

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## DHA Uniform Business Office

### Military Health System UBO Rates 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. 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 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.

The Assistant Secretary of Defense for Health Affairs (ASD/HA) approved the implementation of [REVISED CY 2016 Outpatient Medical, Dental, and Cosmetic Procedure Reimbursement Rates](#) for direct care received at military treatment facilities (MTFs) as on November 1, 2016. These rates are used to determine:

- Charges for medical and dental services provided on an outpatient basis
- Ambulatory services
- Inpatient cosmetic surgery services

These rates were released in accordance with [U.S.C. Title 10](#), and will remain in effect until further notice.

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 rates are used to determine charges for inpatient professional and institutional health care services provided in MTFs under the Defense Health Program (DHP).

UBO rates are published online in accordance with [Executive Order 13410](#) (August 2006) to promote health care transparency relating to quality and cost.

**Mapping Tables**  
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 also specify the billing form for each procedure and provide appropriate revenue centers and modifiers for each procedure. The major mapping files include:

Calendar Year (CY)	Mapping Tables
2016	<ul style="list-style-type: none"> <li>DMIS ID to CMAC Locality Table</li> <li>Revenue Mapping Table</li> <li>ABACUS Mapping Table</li> <li>Modifier Mapping Table</li> </ul>

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- Call [1-202-741-1532](tel:1-202-741-1532) and leave a message

We will return your phone message within one business day.









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

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# Webinar Summary

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- **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.

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# Questions?



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