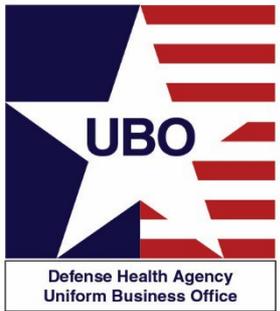




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CY18 DHA UBO Outpatient Rates

Brad Brainard, MBA, MHA
DHA UBO Program Office Contract Support
June 2018

Session 1: 12 June 2018 @ 0800-0900 ET
Session 2: 14 June 2018 @ 1400-1500 ET

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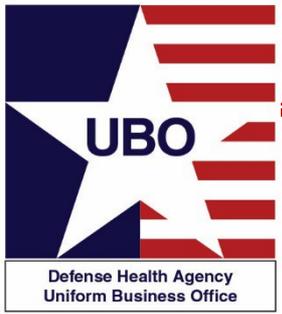
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Understand & Become Familiar With:

- 1) **DHA UBO Rate Structures**
- 2) **DHA UBO Outpatient Rates**
 - CY2018 Effective Date
 - Rate Components (12)
- 3) **Service Rate Requests**
- 4) **DHA UBO Inpatient Rates**
- 5) **MAC Rates**
- 6) **Billing Tips and Reminders**
- 7) **Health.mil and LaunchPad Navigation**
- 8) **DHA UBO Helpdesk Q&A**
- 9) **Summary**



DHA UBO Rate Structures

1

Widely used billing rate structures intended to recover costs in the military fixed facilities.

- 1) Full or Third Party Collections (TPC).
 - 2) Interagency.
 - 3) 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.**

1) Full or Third Party Collection (TPC) Rates

- **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.

2) Interagency Rates

- **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.

3) International Military Education & Training Rates

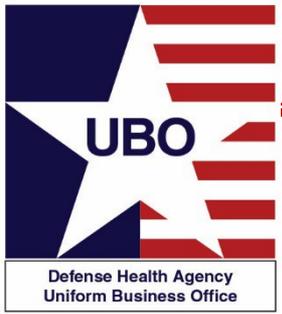
- **The IMET Program provides training on a grant basis to students from allied and friendly nations.**
 - Authority for the IMET program is found in Chapter 5, Part II, Foreign Assistance Act of 1961.
 - Funding is appropriated from the International Affairs budget of the Department of State.
 - Not all foreign national patients participate in the IMET program.
- **IMET Rates do not include:**
 - *Asset Use Charge and GSUR Costs.*
 - *Military Personnel Cost .*



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

DHA PATCAT Table v6.1															
Cod e	Subc at	Name	Short Descr	PATCAT Summary	Ipnt Indiv	Ipnt Agency	Opnt Indiv	Opnt Agency	Spons or	Family Member	Civ Emergenc y	d Sponsor	OCONUS GMS	Prohibit DEERS	
A00		USA DECEASED SPONSOR	USA DEC SPONSOR	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	YES	NO	NO	
A11	1	USA ACTIVE DUTY OFFICER	USA AD (OFF)	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A11	2	USA ACTIVE DUTY ENLISTED	USA AD (ENL)	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A12	1	USA AD RES OFFICER	USA AD RES (OFF)	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A12	2	USA AD RES ENLISTED	USA AD RES (ENL)	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A12	3	USA RES-30 DAYS OR LESS, NOT	USA RES <30, NOT LOD	ACTIVE DUTY	FRR	NC	FOR	NC	YES	NO	NO	NO	NO	NO	
A13		USA AD RECRUIT	USA AD RECRUIT	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A14		USA CADET	USA CADET	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A15	1	USA NG OFFICER	USA NG (OFF)	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A15	2	USA NG ENLISTED	USA NG (ENL)	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A15	3	USA NG-30 DAYS OR LESS, NOT	USA NG <30, NOT LOD	ACTIVE DUTY	FRR	NC	FOR	NC	YES	NO	NO	NO	NO	NO	
A21		USA ROTC	USA ROTC	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A22	1	USA RES INACT DUTY TRG OFF	USA RES INACT (OFF)	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A22	2	USA RES INACT DUTY TRG ENL	USA RES INACT (ENL)	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A22	3	USA RES INACT DUTY TRG - NOT	USA RES INACT NOT LOD	ACTIVE DUTY	FRR	NC	FOR	NC	YES	NO	NO	NO	NO	NO	
A23	1	USA NG INACT DUTY TRG OFF	USA NG INACT (OFF)	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A23	2	USA NG INACT DUTY TRG ENL	USA NG INACT (ENL)	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A23	3	USA NG INACT DUTY TRG - NOT	USA NG INACT NOT LOD	ACTIVE DUTY	FRR	NC	FOR	NC	YES	NO	NO	NO	NO	NO	
A24		USA FRM AD-TAMP	USA FRM AD-TAMP	ACTIVE DUTY	FMR	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A25		USA FAM MBR FAD-TAMP	USA FAM MBR FAD-TAMP	DEPENDENT/RE	FMR	NC	NC	NC	NO	YES	NO	NO	NO	NO	
A26		USA APPLICANT/REGISTRANT	USA APPLICANT	ACTIVE DUTY	NC	NC	NC	NC	YES	NO	NO	NO	NO	YES	
A27	1	USA FRM MEMBER-MATERNIT	USA FRM MBR-MATERNITY	ACTIVE DUTY	FMR	NC	NC	NC	YES	NO	NO	NO	NO	YES	
A27	2	USA SP_OF FRM MBR-MATERA	USA SP_FRM MBR-MTRNT	DEPENDENT/RE	FMR	NC	NC	NC	NO	YES	NO	NO	NO	YES	
A28	1	USA NEWBORN OF FRM SRVC MBR	USA NB FRM MBR	DEPENDENT/RE	FRR	NC	FOR	NC	NO	YES	NO	NO	NO	YES	
A28	2	USA NB OF FRM SRVC MBR - SE	USA NB FRM MBR_SD	DEPENDENT/RE	FMR	NC	NC	NC	NO	YES	NO	NO	NO	YES	
A29	1	USA NEWBORN OF SPONSOR'S	USA NB SPON DAUGHTER	CIVILIAN	FRR	NC	FOR	NC	NO	YES	NO	NO	NO	YES	
A29	2	USA NEWBORN OF SPON DTR -	USA NB SPON DTR_SD	CIVILIAN	FMR	NC	NC	NC	NO	YES	NO	NO	NO	YES	
A30	1	USA NB OF SPOUSE OF FMR SR	USA NB_SP FMR MBR	DEPENDENT/RE	FRR	NC	FOR	NC	NO	YES	NO	NO	NO	YES	
A30	2	USA NB OF SP FMR SRVC MBR	USA NB_SP FMR MBR_SD	DEPENDENT/RE	FMR	NC	NC	NC	NO	YES	NO	NO	NO	YES	
A31	1	USA RET LOS OFFICER	USA RET LOS (OFF)	DEPENDENT/RE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A31	2	USA RET LOS ENLISTED	USA RET LOS (ENL)	DEPENDENT/RE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A32	1	USA RET PDRL OFFICER	USA RET PDRL (OFF)	DEPENDENT/RE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A32	2	USA RET PDRL ENLISTED	USA PDRL (ENL)	DEPENDENT/RE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A33	1	USA RET TDRL OFFICER	USA TDRL (OFF)	DEPENDENT/RE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A33	2	USA RET TDRL ENLISTED	USA RET TDRL (ENL)	DEPENDENT/RE	NC	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A36		USA TRICARE RES SEL/RET RES	USA TRS/TRR-MEMBER	ACTIVE DUTY	FMR	NC	NC	NC	YES	NO	NO	NO	NO	NO	
A37		USA TRICARE RES SEL/RET RES	USA TRS/TRR-FAM MBR	DEPENDENT/RE	FMR	NC	NC	NC	NO	YES	NO	NO	NO	NO	

Source <https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/Patient-Categories>



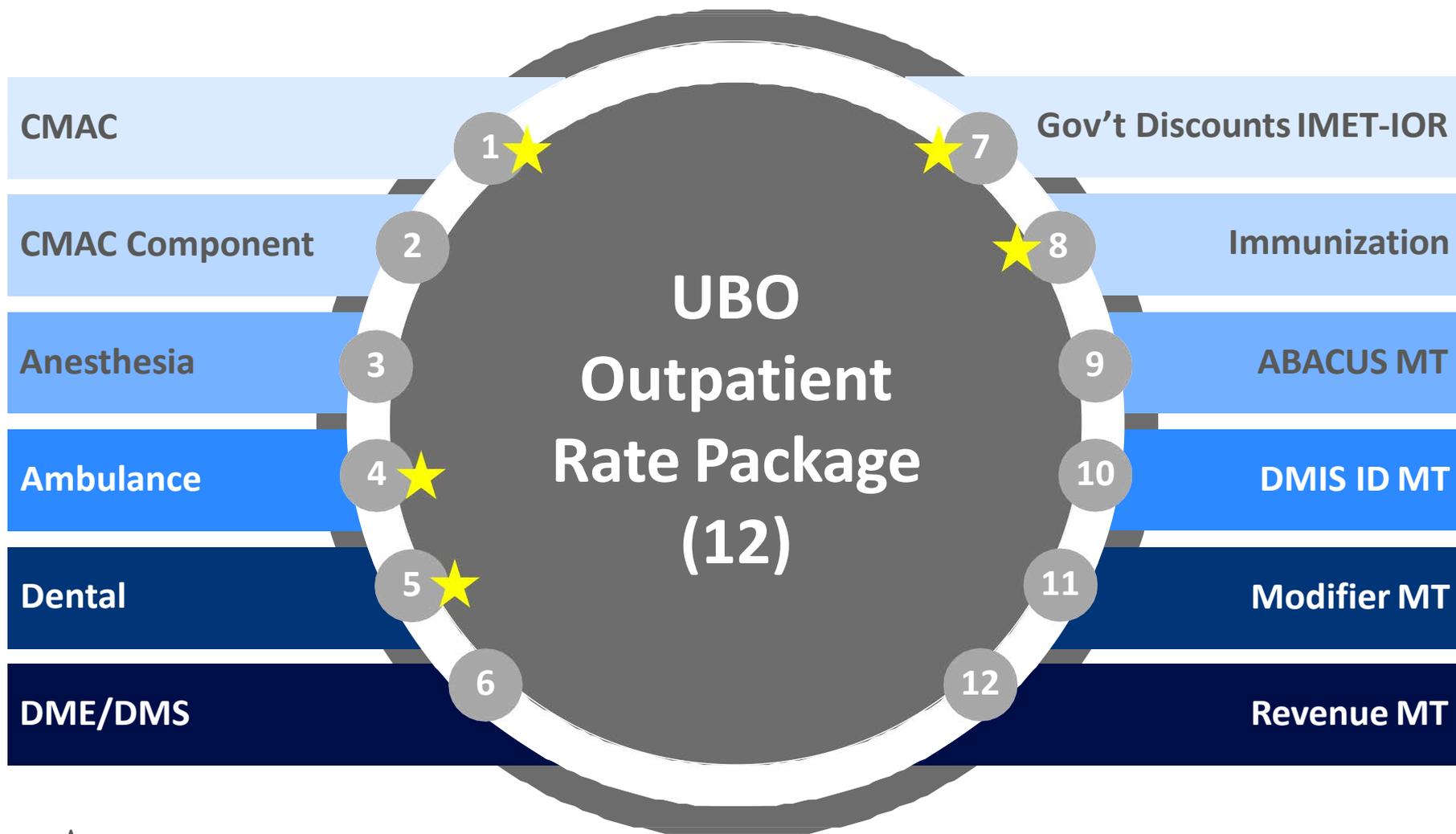
Outpatient Rate Package

2



Outpatient Rates Overview:

- **CY 2018 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 Program Reporting System (MEPRS) data is used to calculate the average MTF operational expenses.**



MEPRS Based Rates



- **Overview**

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

- **2018 Highlights**

- Certain CMAC codes are not available for separate reimbursement.
 - ED Rates
 - Observation
 - Moderate Sedation
- Effective Date for CY18 is July 1st, 2018.

Codes Set To Zero	
99442	Telemed.
99443	Telemed.
99024	Post. Op.
G0379	Admit
99241	IP Consult
99242	IP Consult
99243	IP Consult
99244	IP Consult
99245	IP Consult
99251	OP Consult
99252	OP Consult
99253	OP Consult
99254	OP Consult
99255	OP Consult

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.**

There are 114 Active TRICARE Localities for CY18

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

Health.mil
The official website of the Military Health System

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Business Support

- Data Quality Management Control Program
- Medical Logistics
- HIPAA Transactions, Code Sets & Identifiers
 - Transactions
 - Code Sets
 - Identifiers
- Rates and Reimbursement
 - Age and Gender Restrictions
 - State Vaccine Program
 - Ambulatory Surgery Rates
 - Anesthesia Rates
 - Applied Behavior Analysis Maximum Allowed Amounts
 - Blend Rate Method for Radiology for Cancer and Children's Hospitals
 - Bundled Codes

Locality To ZIP

Use the tool below to list ZIP Codes associated with a Locality Code.

Search the Database

* Denotes Required Field

Select Locality Code:*

314 COLORADO

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	80258	80259	80260	80261	80262	80263	80264	80265	80266	80270	80271	80272	80273	80274	80275
80276	80277	80278	80279	80280	80281	80282	80283	80284	80285	80286	80287	80288	80289	80290	80291	80292

[Link: https://health.mil/Military-Health-Topics/Business-Support/Rates-and-Reimbursement/CMAC-Rates/Locality-To-ZIP](https://health.mil/Military-Health-Topics/Business-Support/Rates-and-Reimbursement/CMAC-Rates/Locality-To-ZIP)

- **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	2017	2018	Percent Change
99281	\$61.37	\$68.66	+11.87%
99282	\$111.47	\$124.65	+11.82%
99283	\$201.25	\$219.10	+8.87%
99284	\$332.41	\$355.53	+6.96%
99285	\$488.74	\$520.85	+6.57%



- **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.

- **Overview**

- Flat Rate Calculation.
- Applied TRICARE Reimbursement Formula.
- (Average Time Units + Base Units) x National Average Conversion Factor.
- 2018 Total Codes: 274.

- **2018 Highlights**

- Overall Increase of **+0.65%**.

CPT Code	2018 Rate	Short Descriptor	
00100	\$ 322.18	ANESTH, SALIVARY GLAND	ANESTHESIA
00102	\$ 256.28	ANESTH, REPAIR OF CLEFT LIP	ANESTHESIA
00103	\$ 208.80	ANESTH, BLEPHAROPLASTY	ANESTHESIA
00104	\$ 114.94	ANESTH, ELECTROSHOCK	ANESTHESIA
00120	\$ 279.58	ANESTH, EAR SURGERY	ANESTHESIA
00124	\$ 154.43	ANESTH, EAR EXAM	ANESTHESIA
00126	\$ 140.68	ANESTH, TYMPANOTOMY	ANESTHESIA
00140	\$ 204.58	ANESTH, PROCEDURES ON EYE	ANESTHESIA
00142	\$ 139.79	ANESTH, LENS SURGERY	ANESTHESIA
00144	\$ 261.60	ANESTH, CORNEAL TRANSPLANT	ANESTHESIA
00145	\$ 262.71	ANESTH, VITRECTOMY	ANESTHESIA
00147	\$ 175.96	ANESTH, IRIDECTOMY	ANESTHESIA
00148	\$ 160.65	ANESTH, EYE EXAM	ANESTHESIA
00160	\$ 242.52	ANES,NOSE/ACC SINUS;NOS	ANESTHESIA
00162	\$ 456.64	ANES,NOSE/ACC SINUS;RADICL SRG	ANESTHESIA
00164	\$ 197.26	ANESTH, BIOPSY OF NOSE	ANESTHESIA
00170	\$ 232.76	ANESTH, PROCEDURE ON MOUTH	ANESTHESIA
00172	\$ 423.80	ANESTH, CLEFT PALATE REPAIR	ANESTHESIA
00174	\$ 344.59	ANES,EXC RETROPHARYNGEAL TUMOR	ANESTH,INT
00176	\$ 798.57	ANES,INTRAORAL;RADICAL SURGERY	ANESTHESIA
00190	\$ 316.19	ANESTH, FACIAL BONE SURGERY	ANESTHESIA
00192	\$ 306.06	ANESTH, FACIAL BONE SURGERY	ANESTHESIA

Flat Rate Calculation

- **Overview**

- 2017 Full Rate: \$248.39.
- 2018 Full Rate: \$255.52.

- **2018 Highlights**

- Overall Increase of **+2.87%**.

- **Overview**

- The updated Defense Health Agency CY18 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. W0402)
 - W Codes are DoD Specific.

- **2018 Highlights**

- Overall increase of **+2.87%**.
- Added 66 “W” Codes.

- **Overview**

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

New CPT Code	Description
K0553	SUP ALLOW,CGM,1MO SUP=1 UN SVC
K0554	REC,DED,USE W TX GLUC CONT MON
L3761	EO,W ADJ POS LCK JT,PREFAB,OTS
L7700	GASK/SEAL,PROS SOCK INS,ANY,EA
L8625	EXT RECHR,BATT,COCHL IMPL,REPL
L8694	AUD OSSEOINT,TRANSDUC/ACT,REPL
Q0477	POWER MOD PAT CABLE, REPL ONLY
E0953	W/C LATERAL THIGH/KNEE SUP
E0954	FOOT BOX, ANY TYPE EACH FOOT

- **Overview**

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

- **2018 Highlights**

- No changes were made between 2017 and 2018.

Type of Discount	Discounted Services Except Ambulance and Dental	Ambulance Services	Dental Services	Applicable PATCAT
IMET	0.6279	0.6278	0.4754	Misc.
IOR	0.9353	0.9353	0.9402	Misc.
IOR	0.9353	0.9353	0.9402	K611
IOR	0.9000	0.9000	0.9000	K612

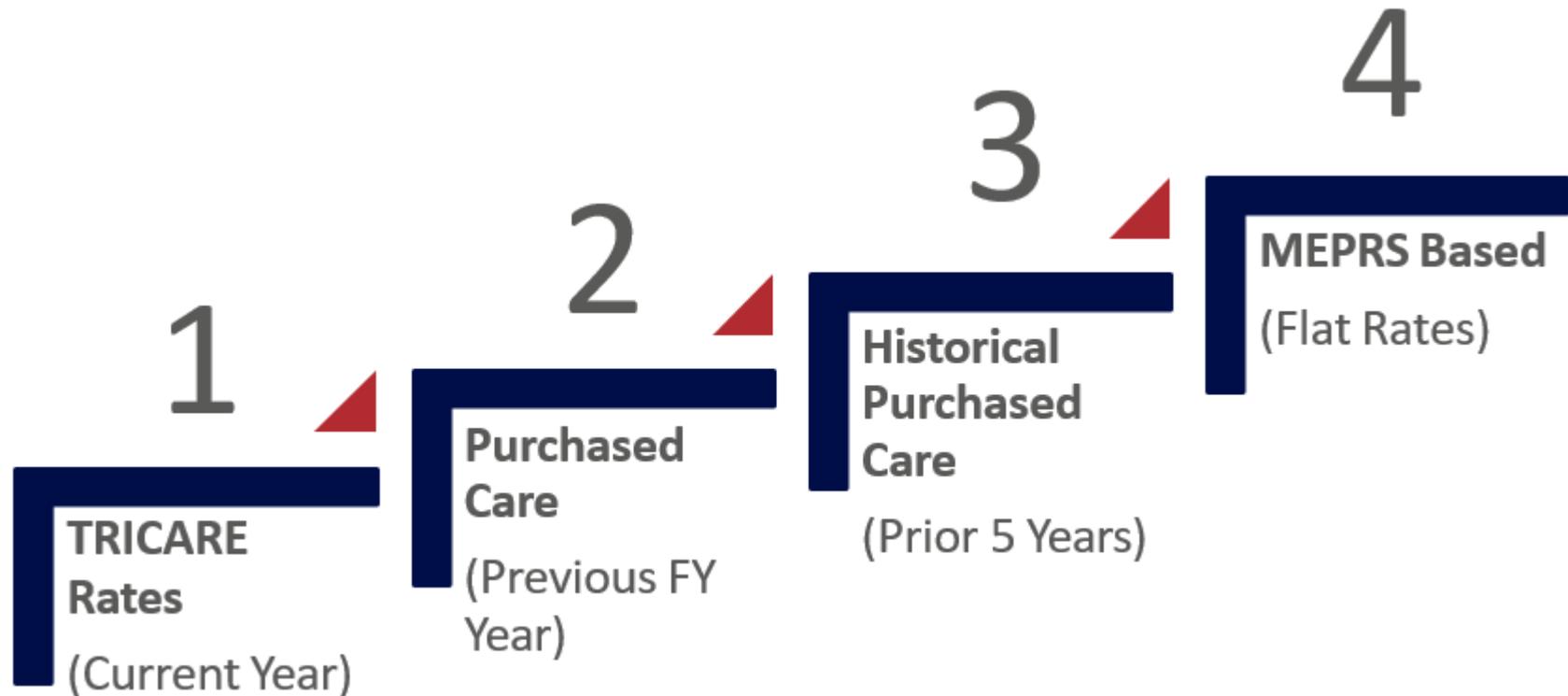
- **Overview**

- **1st Priority – CMAC TRICARE Provided Rates (Released Quarterly).**
- **2nd Priority – Purchased Care Allowable Amounts (Previous Fiscal Year).**
- **3rd Priority – MEPRS Based Flat Rate.**
 - 2017 Flat Rate: \$62.00.
 - 2018 Flat Rate: \$63.78 (Increased by 2.87%).

- **2018 Highlights**

- 14 New Codes, 5 Deleted Codes.
- Sourcing priority process addition.

- 2018 Process by Sourcing Priority
- Historical Purchased Care Pull for Outlier Rates +/-30% variance.



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.

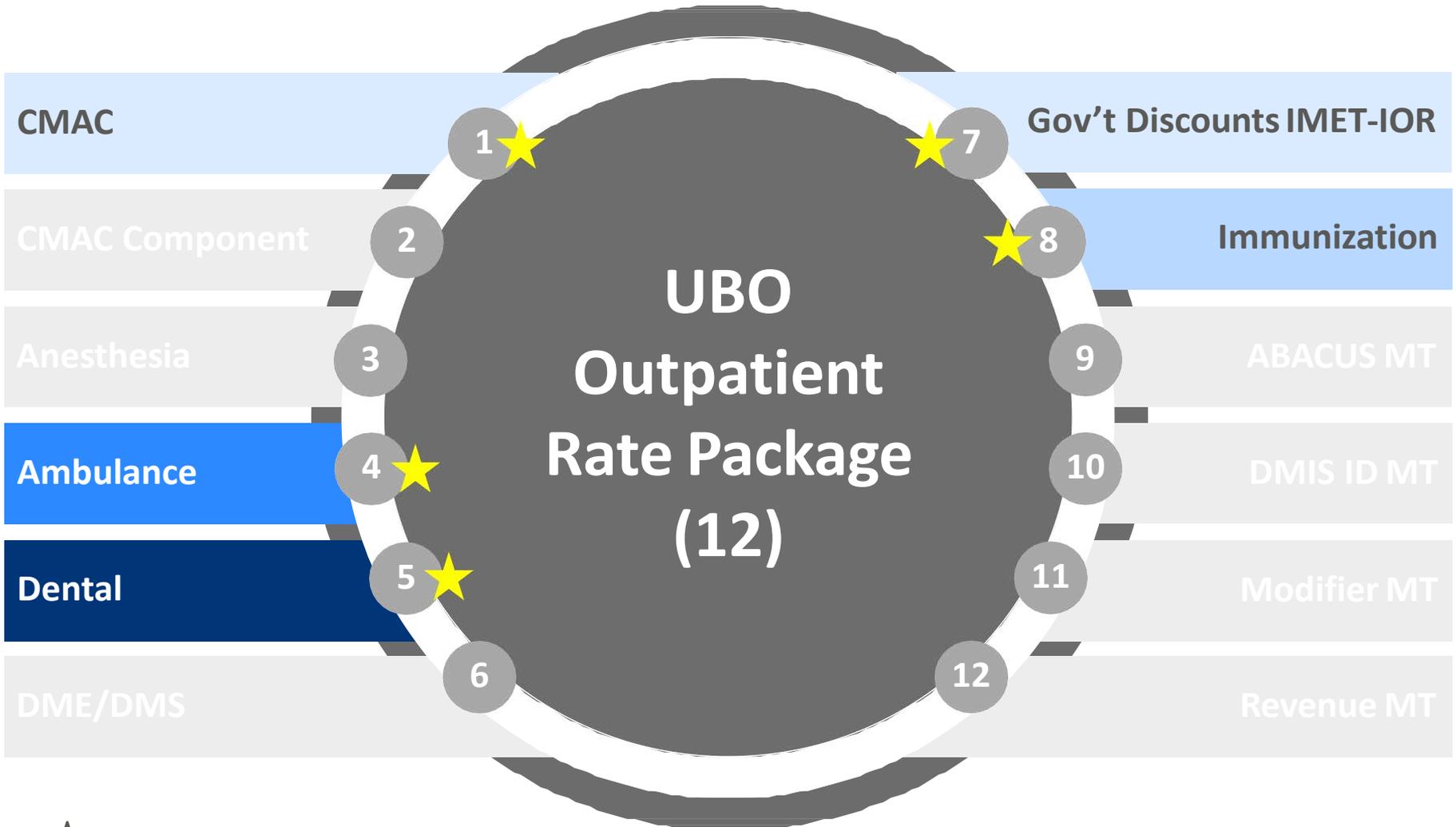
Modifier Mapping Table

- **Contains a list of modifiers that can be attached to specific ranges of codes and which rate table to find the charge.**
 - Modifier driven – to identify applicable code ranges.
 - Released with the annual CPT®/HCPCS codes update.



• CY18 Updated ABACUS Mapping Table Format Snapshot

ABACUS Range Number	Beg Range	End Range	CODE SET	ALPHA GROUP	MODIFIER	DESCRIPTOR	DESCRIPTOR Truncated	RATE TABLE	CLAIM FORM	MULTIPLIER	MODIFIER TYPE	BEG DATE	END DATE	DEFAULT UNITS OF SERVICE	CALC BY UNITS
1	00100	01999	ANESTHESIA	1	X1	Pt Relationship Codes (PRC) - Cont	Pt Relationship Codes (PRC) - Co	ANESTHESIA	CMS 1500	1	I	7/1/2018		1	N
1	00100	01999	ANESTHESIA	1	X2	Pt Relationship Codes (PRC) - Cont	Pt Relationship Codes (PRC) - Co	ANESTHESIA	CMS 1500	1	I	7/1/2018		1	N
1	00100	01999	ANESTHESIA	1	X3	Pt Relationship Codes (PRC) - Epise	Pt Relationship Codes (PRC) - Ep	ANESTHESIA	CMS 1500	1	I	7/1/2018		1	N
1	00100	01999	ANESTHESIA	1	X4	Pt Relationship Codes (PRC) - Epise	Pt Relationship Codes (PRC) - Ep	ANESTHESIA	CMS 1500	1	I	7/1/2018		1	N
1	00100	01999	ANESTHESIA	1	X5	PRC - Only as ordered by another c	PRC - Only as ordered by anothe	ANESTHESIA	CMS 1500	1	I	7/1/2018		1	N
1	00100	01999	ANESTHESIA	1	Q5	Outpt PT svcs, substitute MD/PT, w	Outpt PT svcs, substitute MD/PT	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	Q6	Outpt physical thrpy svcs, substitute	Outpt physical thrpy svcs, substit	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	GE	Resident w/o mentor, PC except/ Am	Resident w/o mentor, PC except/ A	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	SG	ASC facility service/ Ambulance, acc	ASC facility service/ Ambulance, acc	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	SD	Hitek hm infusion tmng(xtr tmd RN)	Hitek hm infusion tmng(xtr tmd RN)	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	SJ	3+/> concurrent infusions/ Ambula	3+/> concurrent infusions/ Ambula	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	00	No Modifier - DO NOT DISPLAY "	No Modifier - DO NOT DISPLAY "	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	22	Increased Procedural Services	Increased Procedural Services	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	23	Unusual anesthesia	Unusual anesthesia	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	32	Mandated services	Mandated services	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	51	multiple procedures	multiple procedures	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	52	Reduced services	Reduced services	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	53	discontinued procedure	discontinued procedure	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	59	distinct procedural service	distinct procedural service	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	99	multiple modifiers	multiple modifiers	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	AA	Anesthesia service performed pers	Anish service perform personally	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	AD	Medical supervision by a physician	Med sup by a Phys, >4 concurre	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	AF	Specialty Physician (Critical Access	Specialty Physician (Critical Acc	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	AG	Primary Physician (Critical Access	Primary Physician (Critical Acces	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	AK	Nonparticipating Physician	Nonparticipating Physician	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	AM	Physician team member	Physician team member	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	AO	Provider declined alt put method	Provider declined alt put method	ANESTHESIA	CMS 1500	1	C	7/1/2014		1	N
1	00100	01999	ANESTHESIA	1	AR	Physician services in a physician se	Physician services in a physician	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	AS	Physician assistant, nurse practitio	PA/NP/cnan nurse spec saves fo	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	AY	Item or service furnished to an ESR	Item or service furnished to an E	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	CB	Separately reimbursable service for	Separately reimbursable service f	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	CC	Procedure code change	Procedure code change	ANESTHESIA	CMS 1500	1	I	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	CG	Policy Criteria applied	Policy Criteria applied	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	CR	Catastrophe/ disaster related	Catastrophe/ disaster related	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	CS	Item or service related, to an illness	Item or service related, to an illne	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	EP	Medicaid EPSDT program svc	Medicaid EPSDT program svc	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N
1	00100	01999	ANESTHESIA	1	ET	Emergency Services	Emergency Services	ANESTHESIA	CMS 1500	1	C	7/1/2011		1	N



 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
- **CY18 Development Cycle**
 - MEPRS data was not mature during the CY18 outpatient rates development cycle, thus, codes adjusted with MEPRS data were developed using an alternative method.
 - Alternative Method: O&M Inflation Factor (+2.87%) was used as the CY18 annual adjustment in place of MEPRS per PO decision.

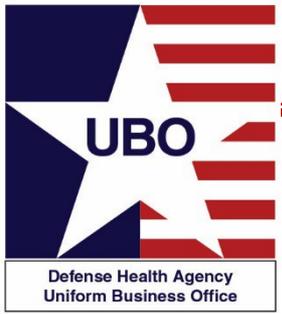
Computation & Burdening Factors

- **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.
- **CY18 Development Cycle**
 - Computation & Burdening factors were not used as direct result of immature MEPRS data.



CY18 Outpatient Rates Summary

- 2018 Outpatient Rate package is effective July 1st, 2018.
 - 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.



Service Rate Requests

3

Service Rate Requests

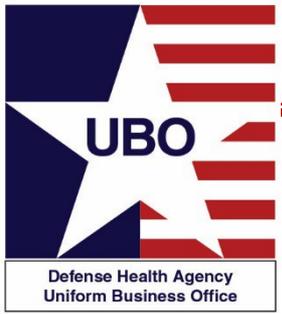
- Army, Air Force, Navy, Coast Guard, NCR MD.
 - No Requests for CY18.

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.
 - Not billable codes.

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.
- 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.

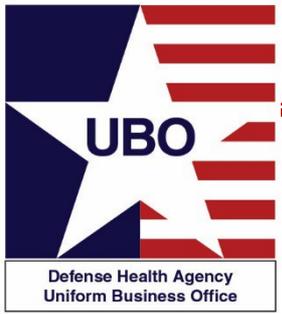


DHA UBO Inpatient Rates

4



- **Inpatient rates - Billing inpatient medical services at MTFs.**
 - Each inpatient MTF has an Adjusted Standardized Amount (ASA).
- **Effective rates for FY 2018 Inpatient Billing Rates.**
 - October 1, 2017 until superseded.



MAC Rates

5



- **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.**



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.**

Outpatient MAC Rates

OUTPATIENT Rates

MAC Claims --- Date of Service	Rate File to Use
January 24, 2018 – ** Will remain in effect until further notice	CY17 Outpatient Rates
March 3, 2016 – January 23, 2018	CY15 Outpatient Rates
November 18, 2014 – March 3, 2016	CY14 Outpatient Rates
October 22, 2013 – November 17, 2014	CY13 Outpatient Rates
November 19, 2012 - October 21, 2013	CY12 Outpatient Rates
November 21, 2011 - November 18, 2012	CY11 Outpatient Rates
March 21, 2011 - November 20, 2011	CY10 Outpatient Rates
December 15, 2009 - March 20, 2011	CY09 Outpatient Rates

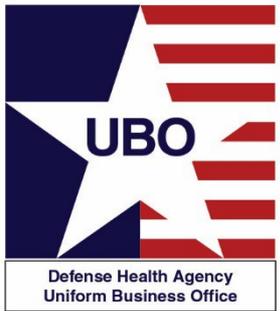
Link: <https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/Billing/Medical-Affirmative-Claims>

Inpatient MAC Rates

INPATIENT Rates

MAC Claims --- Date of Service	Rate File to Use
January 24, 2018 - ** Will remain in effect until further notice	FY18 ASA Inpatient Rates
September 16, 2015 - January 23, 2018	FY15 ASA Inpatient Rates
June 12, 2014 - September 15, 2015	FY14 ASA Inpatient Rates
April 11, 2013 - June 11, 2014	FY13 ASA Inpatient Rates
March 21, 2011 - April 10, 2013	FY11 ASA Inpatient Rates
May 5, 2010 - March 20, 2011	FY10 ASA Inpatient Rates
January 15, 2009 - May 4, 2010	FY09 ASA Inpatient Rates

[Link: https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/Billing/Medical-Affirmative-Claims](https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/Billing/Medical-Affirmative-Claims)



Billing Tips & Reminders

6



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

- DHA UBO Outpatient rates: New codes, not assigned a rate yet.
 - Can only bill if there is a DHA UBO rate associated with an effective code.
 - DHA UBO rates cannot be applied retroactively.
- Proper PATCAT assignment drives applicable rate structure and code assignment.

- 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.

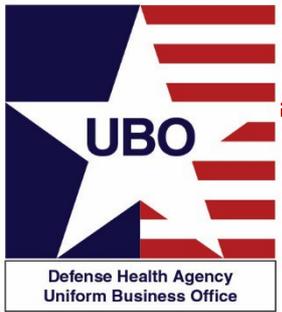
Institutional - Hospital charges

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

Inpatient Special Circumstance Rates

- **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).



Health.Mil & Launchpad Navigation

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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.



Health.mil Website



Health.mil

The official website of the Military Health System

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Medical Logistics

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- ◉ 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 program 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: <http://www.health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office>

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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.

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Link: <https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/UBO-Rates-Overview>

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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: https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/UBO-Rates-Overview/MHS-UBO-Rates](https://health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office/UBO-Rates-Overview/MHS-UBO-Rates)

- **DHA UBO Launchpad Website**
(<https://info.health.mil/bus/brm/ubo/SitePages/Home.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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DHA Uniform Business Office

Military Health System UBO Rates Overview

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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:

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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"> • DMIS ID to CMAC Locality Table • Revenue Mapping Table • ABACUS Mapping Table • Modifier Mapping Table

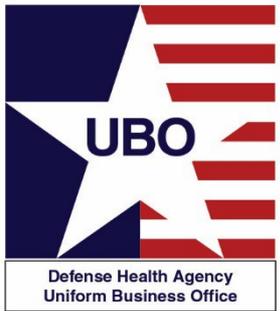
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- [Send an Email Message](#)
- Call [1-202-741-1532](tel:1-202-741-1532) and leave a message

We will return your phone message within one business day.

Link: <https://info.health.mil/bus/brm/ubo/SitePages/Home.aspx>



DHA UBO Helpdesk Q&A

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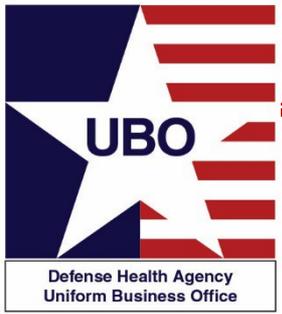
- **1) “I’m trying to locate information on billing an emergency room visit when the patient was admitted as an inpatient/observation.”**
 - **DHA UBO Helpdesk Response:** Policy guidance for Observation services are outlined in the DHA UBO User Guide, Section “Observation Services”. Please refer to the DHA UBO User Guide, which can be found on the DHA UBO Website of [health.mil at http://www.health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office](http://www.health.mil/Military-Health-Topics/Business-Support/Uniform-Business-Office).
 - If you need further assistance, please contact the UBO Helpdesk to request a teleconference with a subject matter expert to go through your particular scenario.

- **2) “How can I find the prices for Case Management codes G9005 and T1016?”**
 - **DHA UBO Helpdesk Response:** The DHA UBO does not have rates assigned for Case Management codes G9005 and T1016. Rates are determined based on Service and NCR MD requests, necessity and PO approval.
 - To request a rate assignment for a code, please submit code with justification to the UBO Helpdesk via your Service or NCR MD Program Manager. The code will be reviewed and potential rate determined based on necessity and PO approval.

- **3) “I am currently working on a MAC Claim and trying to find the pricing for CPT Code 27899. According to the coders, it is a valid code but I cannot find the pricing for this code. Would you be able to assist with finding the pricing or assist me in this matter?”**
 - **DHA UBO Helpdesk Response:** Rates used for MAC billing are the same as those included in the Outpatient, Inpatient and Pharmacy rate packages. However, these rates must be approved by the OMB and published in the Federal Register before they can be used for MAC purposes. You want to make sure that you refer to date of service to determine which OP or IP rate file applies.
 - CPT code 27899 is an unlisted code and there is not a DHA UBO assigned rate for this code. Remember MAC rates are based on Dates of Service.
 - Rates are determined based on Service and NCR MD requests, necessity and PO approval. To request a rate assignment for a code, please submit code with justification to the UBO Helpdesk via your Service Program Manager. The code will be reviewed and potential rate determined based on necessity and PO approval. Any rate requests submitted at this time will be considered for future Outpatient Rate cycles unless granted special approval for an out of cycle update.

- **4) Where are the TRICARE CMAC rates? I do not see them on the UBO Web site.**
 - **DHA UBO Helpdesk Response:** TRICARE CMAC rates are available on the Health.mil Web site under the “Rates and Reimbursement” [\(<http://www.health.mil/Military-Health-Topics/Business-Support/Rates-and-Reimbursement>\)](http://www.health.mil/Military-Health-Topics/Business-Support/Rates-and-Reimbursement) section. These rates are used to recover the cost of healthcare services provided by MTFs that abides by DoD/VA Resource Sharing agreements. These rates are different than the DHA UBO CMAC rates which are based on TRICARE CMAC rates, but are formatted for military billing systems and include charges for additional services not reimbursed by TRICARE.

- **5) Where can I find MAC billing rates from previous years?**
 - **DHA UBO Helpdesk Response:** MAC rates are same as DHA UBO Inpatient Adjusted Standardized Amounts (ASA) and Outpatient rates, but must first be approved by Office of Management and Budget (OMB) and published in the Federal Register (FR)
 - You can find the appropriate MAC rates under “UBO Archived Rates” on the DHA UBO Launchpad. Select the appropriate rate file according to the date(s) of service for MAC billing.



Summary

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Webinar Summary

- **Outpatient rates are developed by the DHA UBO for each outpatient encounter, service, procedure, or supply provided at an MTF.**
 - 12 Components.
- **2018 Overall percent change for Outpatient Rates is .42%.**
- **2018 Outpatient Rate Package effective date: July, 1, 2018**



Webinar Summary

- **Locality Mapping**
 - 114 TRICARE localities.
 - 1 DHA UBO Specific locality (#300).
 - National Average and OCONUS facilities.
- **Table Reformatting**
 - ABACUS Mapping Table
 - Revenue Mapping Table



Webinar Summary

- **MAC Billing**
 - 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.



Webinar Summary

- **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.

Questions?





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