



OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE  
HEALTH AFFAIRS

16401 EAST CENTRETECH PARKWAY  
AURORA, COLORADO 80011-9066

TRICARE  
MANAGEMENT ACTIVITY

PCSIB

CHANGE 79  
7950.1-M  
MARCH 11, 2010

**PUBLICATIONS SYSTEM CHANGE TRANSMITTAL  
FOR  
TRICARE SYSTEMS MANUAL (TSM), AUGUST 2002**

The TRICARE Management Activity has authorized the following addition(s)/revision(s).

**CHANGE TITLE:** OUTPATIENT PROSPECTIVE PAYMENT SYSTEM (OPPS) TECHNICAL  
CHANGES, FEBRUARY 2010

**CONREQ:** 14925

**PAGE CHANGE(S):** See page 2.

**SUMMARY OF CHANGE(S):** This changes contains OPPS changes to include Active Duty Service Member (ADSM) inpatient procedures performed on an outpatient basis, changes to the observation stay policy, and the addition of new modifiers.

**EFFECTIVE DATE:** May 1, 2009, unless otherwise indicated.

**IMPLEMENTATION DATE:** Upon direction of the Contracting Officer.

This change is made in conjunction with Aug 2002 TOM, Change No. 94, Aug 2002 TPM, Change No. 119, and Aug 2002 TRM, Change No. 79.

**Jack Arendale**  
Chief, Purchased Care Systems  
Integration Branch

**ATTACHMENT(S):** 4 PAGES  
**DISTRIBUTION:** 7950.1-M

**CHANGE 79**  
**7950.1-M**  
**MARCH 11, 2010**

**REMOVE PAGE(S)**

**CHAPTER 2**

Section 2.7, pages 29 and 30

Addendum O, pages 9 and 10

**INSERT PAGE(S)**

Section 2.7, pages 29 and 30

Addendum O, pages 9 and 10

**TRICARE SYSTEMS MANUAL 7950.1-M, AUGUST 1, 2002**

CHAPTER 2, SECTION 2.7

DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

**DATA ELEMENT DEFINITION**

**ELEMENT NAME: PROCEDURE CODE MODIFIER**

**RECORDS/LOCATOR NUMBERS**

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Non-Institutional	2-165	4/Up to 99	No

**PRIMARY PICTURE (FORMAT)** Four occurrences of two (2) alphanumeric characters per line item for non-institutional.

**DEFINITION** Two digit code which provides the means by which the health care professional can indicate that a service or procedure that has been performed has been altered by some specific circumstance but not changed in its definition or code. (Refer to Physician's Current Procedure Terminology<sup>1</sup> (CPT-4), or HCPCS National Level II Medicare Codes.)

**CODE/VALUE SPECIFICATIONS** Must be 21-27, 32, 47, 50-59, 62, 63, 66, 73-82, 90-92, 99, 0A-0P, 0Z, 1A-1J, 1P, 1Z, 2A-2T, 2Z, 3A-3I, 3K, 3P, 3Z, 4A-4O, 4Z, 5A-5O, 5Z, 6A-6F, 6Z, 7A-7F, 7Z, 8A-8C, 8P, 8Z, 9A-9D, 9L-9Q, 9Z, A1-A9, AA, AD-AK, AM, AP-AX, BA, BL, BO-BR, BU, CA-CG, CR, DE, DG-DJ, DN, DP, DR, DS, DX, E1-E4, EA-EE, EG-EJ, EM, EN, EP, ER-ET, EX, EY, F1-F9, FA-FC, FP, G1-G9, GA-GT, GV-GZ, H9, HA-HZ, ID, IE, IG-IJ, IN, IR, IS, IX, J1-J4, JA-JE, JG-JJ, JN, JP, JR, JS, JW, JX, K0-K4, KA-KZ, LC, LD, LL, LR-LT, M2, MR, MS, ND, NE, NG-NJ, NN, NP, NR-NU, NX, P1-P6, PA-PE, PG, PI, PJ, PL, PN, PP, PR, PS, PX, Q0-Q9, QA-QH, QJ-QZ, RA-RE, RG-RJ, RN, RP-RT, RX, SA-SN, SQ-SY, T1-T9, TA, TC-TK, TL-TN, TP-TW, U1-U9, UA-UH, UJ-UK, UN, UP-US, V5-V9, VP, XD, XE, XG-XJ, XN, XR, XS, or blank.

**ALGORITHM** N/A

**SUBORDINATE AND/OR GROUP ELEMENTS**

SUBORDINATE	GROUP
N/A	N/A

**NOTES AND SPECIAL INSTRUCTIONS:**

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**NOTE:** Can report from zero to four codes. Left justify and blank fill. Do not duplicate. Each occurrence consists of two characters left justify and blank fill to right.

TRICARE SYSTEMS MANUAL 7950.1-M, AUGUST 1, 2002

CHAPTER 2, SECTION 2.7

DATA REQUIREMENTS - INSTITUTIONAL/NON-INSTITUTIONAL RECORD DATA ELEMENTS (P)

DATA ELEMENT DEFINITION

ELEMENT NAME: PROCESSING INFORMATION

RECORDS/LOCATOR NUMBERS

RECORD NAME	LOCATOR#	OCCURRENCES	REQUIRED
Institutional	1-155	1	Yes

PRIMARY PICTURE (FORMAT) Group

DEFINITION Field containing multiple elements that describe processing related to the TED record.

CODE/VALUE SPECIFICATIONS N/A

ALGORITHM N/A

SUBORDINATE AND/OR GROUP ELEMENTS

SUBORDINATE	GROUP
OVERWRITE CODE	N/A
TYPE OF SUBMISSION	
CA/NAS NUMBER	
CA/NAS REASON FOR ISSUANCE	
CA/NAS EXCEPTION REASON	
SPECIAL PROCESSING CODE	
PRICING RATE CODE	
HEALTH CARE DELIVERY PROGRAM SPECIAL ENTITLEMENT CODE	

NOTES AND SPECIAL INSTRUCTIONS:

N/A

**TRICARE SYSTEMS MANUAL 7950.1-M, AUGUST 1, 2002**

CHAPTER 2, ADDENDUM O

UB-04/UB-92 CONVERSION TABLE - TO BE USED FOR REPORTING NON-INSTITUTIONAL TED RECORDS

REVENUE CODE	DESCRIPTION	VALUE IF APPROPRIATE CPT*/HCPCS CODE IS NOT AVAILABLE
<b>068X</b>	<b>Trauma Response</b>	
0681	Level I	99499
0682	Level II	
0683	Level III	
0684	Level IV	
0689	Other Trauma Response	
<b>069X</b>	<b>RESERVED</b>	
<b>070X</b>	<b>Cast Room</b>	
0700	General Classification	99420
0709	Other Cast Room (Terminated 10/01/2007)	
<b>071X</b>	<b>Recovery Room</b>	
0710	General Classification	99420
0719	Other Recovery Room (Terminated 10/01/2007)	
<b>072X</b>	<b>Labor Room/Delivery</b>	
0720	General Classification	99420
0721	Labor	
0722	Delivery	99499
0723	Circumcision	
0724	Birthing Center	
0729	Other Labor Room/Delivery	
<b>073X</b>	<b>EKG/ECG (Electrocardiogram)</b>	
0730	General Classification	99499
0731	Holter Monitor	
0732	Telemetry	
0739	Other EKG/ECG	
<b>074X</b>	<b>EEG (Electroencephalogram)</b>	
0740	General Classification	99499
0749	Other EEG (Terminated 10/01/2007)	
<b>075X</b>	<b>Gastro-intestinal Services</b>	
0750	General Classification	99499
0759	Other Gastro-intestinal (Terminated 10/01/2007)	
<b>076X</b>	<b>Treatment or Observation Room</b>	
0760	General Classification	99499
0761	Treatment Room	
0762	Observation Room	99234
0769	Other Treatment Room/Observation Room	99499
<b>077X</b>	<b>Preventive Care Services</b>	
0770	General Classification	99420
0771	Vaccine Administration	
0779	Other (Terminated 10/01/2007)	
<b>078X</b>	<b>Telemedicine</b>	
0780	General Classification	99499
0789	Other Telemedicine (Terminated 10/01/2007)	

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\*\* Must use appropriate CPT/HCPCS Codes.

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CHAPTER 2, ADDENDUM O

UB-04/UB-92 CONVERSION TABLE - TO BE USED FOR REPORTING NON-INSTITUTIONAL TED RECORDS

REVENUE CODE	DESCRIPTION	VALUE IF APPROPRIATE CPT*/HCPCS CODE IS NOT AVAILABLE
<b>079X</b>	<b>Lithotripsy</b>	
0790	General Classification	99499
0799	Other Lithotripsy (Terminated 10/01/2007)	
<b>080X</b>	<b>Inpatient Renal Dialysis</b>	
0800	General Classification	99499
0801	Inpatient Hemodialysis	
0802	Inpatient Peritoneal (non-CAPD)	
0803	Inpatient Continuous Ambulatory Peritoneal Dialysis (CAPD)	
0804	Inpatient Continuous Cycling Peritoneal Dialysis	
0809	Other Inpatient Dialysis	
<b>081X</b>	<b>Acquisition of Body Components</b>	
0810	General Classification	C9899
0811	Living Donor	
0812	Cadaver Donor	
0813	Unknown Donor	
0814	Unsuccessful Organ Search - Donor Bank Charges	
0815	Cadaver Donor - Heart (Terminated 10/01/2000)	
0816	Other Heart Acquisition (Terminated 10/01/2000)	
0817	Donor - Liver (Terminated 10/01/2000)	
0819	Other Donor	
<b>082X</b>	<b>Hemodialysis - Outpatient or Home</b>	
0820	General Classification	99499
0821	Hemodialysis/Composite or Other Rate	
0822	Home Supplies	
0823	Home Equipment	
0824	Maintenance/100%	
0825	Support Services	
0829	Other Outpatient Hemodialysis	
<b>083X</b>	<b>Peritoneal Dialysis - Outpatient or Home</b>	
0830	General Classification	99499
0831	Peritoneal/Composite or Other Rate	
0832	Home Supplies	
0833	Home Equipment	
0834	Maintenance/100%	
0835	Support Services	
0839	Other Outpatient Peritoneal Dialysis	

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