

Coding Policy Policy and Procedure		
SUBJECT: Coding Policy 01.0: Coding Policy Development	DEPARTMENT: Health Care Services	
ORIGINAL EFFECTIVE DATE: 03/1990	DATE(S) REVIEWED/REVISED: 03/90-01/08, 01/09, 01/10, 01/11, 01/12, 01/13, 01/14, 01/15, 01/16, 01/17, 01/18, 01/19, 08/19, 01/20, 01/21, 01/22	
APPROVED BY: Coding Policy Review Committee	NUMBER: MC 01.0	PAGE: 1 of 2

SCOPE:

Providence Health Plan, Providence Health Assurance, Providence Plan Partners, and Ayin Health Solutions as applicable (referred to individually as “Company” and collectively as “Companies”).

APPLIES TO:

Health Plan Providers
All Lines of Business
All Service Areas

POLICY:

Coding policies establish coding and billing standards that support uniform and consistent reimbursement of health care services. Coding policies are derived from standards developed by Company directives; Providence Health Plan Medical Director procedure-specific policies (previously known as Edit Reviews); Centers for Medicare and Medicaid Services (CMS) Billing and Coding Policies; Medicare’s Resource Based Relative Value System (RBRVS); National Correct Coding Initiative Policy Manual; American Medical Association coding guidelines for CPT codes; World Health Organization coding guidelines for ICD-10-CM codes; clinically derived edits from Optum Clinical Edit Software (CES); and coding guidelines from medical specialty associations. Coding policies may contain fee information but do not establish contracted rates.

PROCEDURE:

Coding policies are reviewed annually by the Coding Policy Review Committee. The following factors are included in the development of coding policies:

- Compliance with government programs
- Customer service
- Clinical appropriateness
- Overall cost versus benefit
- Impact on provider community
- Operational ease of administration
- Compatibility with payment systems

Coding policies are developed with input from the following departments:

- Health Care Services/Medical Management
- Medical Directors
- Provider Relations
- Provider Contracting
- Operations
- Systems Administration
- Finance

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- Regulatory Compliance and Government Affairs [ad hoc]

Coding policies are finalized and approved by Coding Policy Review Committee (CPRC), which reports to Medical Expense Management Committee (MEMC).

Coding policy changes are communicated to providers through *Coding Policy Alerts* on ProvLink, special communications, and/or through the contracting process. Coding policies are published on the Providence Health Plan ProvLink website.

REFERENCE:

American Medical Association (AMA) Coding Guidelines
Centers for Medicare Services (CMS) Resource Based Relative Value System (RBRVS)
CMS Billing and Coding Guidelines
State and Federal Regulations
Health Insurance Portability and Accountability Act (HIPAA)
Providence Health Plan Clinical Edits
National Correct Coding Initiative Policy Manual
National Correct Coding Initiative Edits