Optum

Medical code, billing and fee data files

Designed for easy implementation with payer and EMR systems



The success of your organization depends heavily on your information systems. However, your systems are only as good as the data that go into them. Keeping these systems up to date with accurate coding, billing and fee data is essential to profitability. Trust Optum to provide you with reliable, precise code and fee data.

Optum supplies you with rigorously reviewed data, valuable proprietary information and frequent updates to maximize your system's capabilities. We offer an array of data file solutions to choose from, including solutions that bring you updated codes throughout the year. Optum offers a host of add-on data elements to enhance your coding systems.

- Optum, a leading data provider for payer and EMR systems, offers an expansive portfolio of medical code and fee data to help keep your systems current.
- Multiple delivery options are available, including secure data transfer (SFTP).

ITEM	DESCRIPTION
CORE CODING DATA	
	ICD-10 Base Data File contains Optum proprietary descriptions, 35 byte and 48 byte. Also included is the CMS full description. Flags displaying the code as complete or incomplete and status (new, changed, deleted) are also provided.
ICD-10	Available add-on* data: • Change Detail File – Change types and effective dates
ICD-9-CM Vols. 1 and 3 also available	 Optum Inpatient Indicators – Age, sex, validity, HIV, HAC, CC, coverage and more Optum Outpatient Indicators – Age, sex, validity, HCC and more Code History – Description, add date, termination date, validity change date ICD-10 Category File – Description, category, sub-categories
	*Add-on data is sold separately and must be purchased with the base data file.
Current Procedure Codes with RVUs	Optum Current Procedural Codes with RVUs Subscription Data File is complete with clinically reviewed and abbreviated code sets and proprietary add-on information. You'll have access to essential coding and reimbursement data for the CPT [®] code set in an updateable, easy-to-use format.
Current Procedure Codes with RVUs and Consumer Friendly Descriptors	The Current Procedural Codes with RVUs and Consumer Friendly Descriptors adds the translation of the CPT [®] long descriptor into lay terms to our standard Current Procedural Codes with RVUs subscription file.
	 Available add-on* data: Change Detail File – Change types, effective dates, replacement code crosswalk Code History – Description, add date, termination date, validity change date Modifiers Crosswalk Physician – CPT® to modifier crosswalk, modifiers and descriptions Modifiers Crosswalk Facility – CPT® to modifier crosswalk, modifiers and descriptions Medicare Physician Fee Schedule – Complete MPFS fee schedule RVUs Optum CPT® Indicators – Age, sex, non-covered, unlisted, modifier exempt and more Age Range Edits – Beginning age, ending age Medically unlikely edits – Maximum daily frequency, provider, facility Current Procedure Codes Category File – Description, category, sub-categories APC/APC Crosswalk File – APC lists, CPT® code, APC, payments and status
	*Add-on data is sold separately and must be purchased with the base data file.
HCPCS Level II	HCPCS Subscription Data File is complete with clinically reviewed and abbreviated code sets and proprietary add-on information. You'll have access to essential coding and reimbursement data for the HCPCS code set in an updateable, easy-to-use format. Available add-on* data:
	 Change Detail File – Change types, effective dates, replacement code crosswalk Code History – Description, add date, termination date, validity change date Modifiers Crosswalk Physician – CPT® to modifier crosswalk, modifiers and descriptions Modifiers Crosswalk Facility – CPT® to modifier crosswalk, modifiers and descriptions Age Range Edits – Beginning age, ending age National Average Payments – Medicare national average fees Optum HCPCS Indicators – Age, sex, quantity, coverage, Medicare reference HCPCS Category File – Description, category, sub-categories
	*Add-on data is sold separately and must be purchased with the base data file.
HCPCS Dental	HCPCS Dental Data File is complete with clinically reviewed and abbreviated code sets.
	HCPCS Level II alphanumeric codes that begin with the letter D and are used to report dental services and procedures. Current Dental Terminology (CDT) codes will be used to identify all dental procedures.
DRG ICD-10	DRG Subscription Data File is complete with clinically reviewed and abbreviated code sets and proprietary add-on information. You'll have access to essential coding and reimbursement data for the DRG code set in an updateable, easy-to-use format.
	 Available add-on* data: DRG to ICD-10-CM Crosswalk – Diagnosis related group to ICD-10-CM ICD-10-CM to MDC Crosswalk – ICD-10-CM to major diagnostic category
	*Add-on data is sold separately and must be purchased with the base data file.

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ITEM	DESCRIPTION
CROSS CODING DATA	
Cross Coder Data Files**	Cross Coder Data Files simplify and speed coding for services. The Cross Coder Data Files provide essential links from CPT [®] codes to the appropriate ICD-10-CM and HCPCS Level II codes.
	**Requires subscription to CPT [®] data file.
Cross Coder Data Files for CPT® to ICD-10**	Cross Coder: CPT [®] to ICD-10-PCS Crosswalk Data File. This data file contains all crosswalks available between CPT [®] and ICD-10-PCS.
	**Requires subscription to CPT [®] data file.
Cross Coder Data Files for ICD-10-PCS to CPT®**	Cross Coder: ICD-10-PCS to CPT [®] Crosswalk Data File. This data file contains all crosswalks available between ICD-10-PCS and CPT [®] .
	**Requires subscription to CPT® data file.
Revenue Code Crosswalk**	Revenue Code Crosswalk is a quarterly updateable data file that can help you meet billing or reimbursement requirements and achieve accurate chargemaster setup, billing and claims processing. Access a year's worth of code changes and updates, all valid CPT [®] and HCPCS Level II codes and the corresponding revenue codes that are appropriate for the type of bill.
	The Revenue Code Crosswalk is delivered in two files:
	 Revenue Code Crosswalk provides Medicare-based crosswalk from CPT® and HCPCS codes to revenue codes by TOB Revenue Code Crosswalk Plus provides all-payer based crosswalk from CPT® and HCPCS codes to revenue codes by TOB
	 Available add-on* data: Change Detail File – New crosswalks, deleted crosswalks and crosswalks with changes
	*Add-on data is sold separately and must be purchased with the base data file. **Requires subscription to CPT® data file. (Items 7824, 7825)
BILLING DATA	
Revenue Codes	Revenue Codes Data File is an updateable data file that can help you meet billing requirements and achieve accurate chargemaster setup, billing and claims processing. Access a year's worth of code changes and updates, all valid CPT® and HCPCS Level II codes and the corresponding revenue codes that are appropriate for the type of bill.
UB-04 (NUBC) UB-04 EPIC Version	The UB-04 (NUBC) Data File is a dependable source of electronic medical billing content. It includes the complete UB-04 code set, including each of 81 form locators (FLs), all revenue codes and descriptions, and other billing code sets, such as type-of-bill codes; condition, occurrence and value codes; admission source and patient status codes, and more. This data file
	may be used to power medical coding, billing, reimbursement and other decision support tools.
NCCI Edits	The National Correct Coding Initiative Edits Data File provides the complete Official National Correct Coding Initiative (NCCI) edits for robust unbundling data every quarter.
Hospital Outpatient NCCI	Official Facility Outpatient Correct Coding Initiative edits provide robust unbundling data every quarter. The Hospital OPPS NCCI Edits Data File helps to keep current with frequent changes to unbundling edits.
Medical Necessity (LCD & NCD) Carrier/Contractor specific	The Medical Necessity Data File allows you to check procedures for Medicare coverage instructions and medical necessity edits. Available in standard and MEDITECH formats.
FEE ANALYZER DATA (Not a	vailable for payer organizations)
Customized Fee Analyzer	Customized Fee Analyzer provides physicians with percentiles of physician charge data for their geographic area and the CPT [®] codes most frequently used in their specialty. Data from the FAIR Health database of over 2.5 billion current claims.
HCPCS Fee Analyzer	HCPCS Fee Analyzer is a customized report that includes four percentiles of national charge data as well as locality-specific Medicare allowables for HCPCS codes. Data from the FAIR Health database of over 2.5 billion current claims.
Dental Customized Fee Analyzer	Dental Customized Fee Analyzer provides dentists and oral surgeons with a customized report for a specific geographic area and the CPT [®] and CDT codes most frequently used in a dental and/or OMS practice. Data from the FAIR Health database of over 1 billion current claims.
RELATIVE VALUES	
Essential RBRVS	The Essential RBRVS gives you all the codes valued by CMS, as well as relative values for many codes not valued for Medicare. The RBRVS for the Medicare physician fee schedule (MPFS) is used to set physician fees by Medicare and many commercial payers. However, the RBRVS does not provide a complete schedule. Codes not valued for Medicare, within the MPFS, are referred to as gap codes. The Essential RBRVS provides Medicare values and gap values to enable you to develop a more complete fee schedule.
Relative Values for Physicians	Relative Values for Physicians is a complete relative value system established by national surveys of physicians in all specialties conducted by Relative Value Studies, Inc.

ITEM	DESCRIPTION
	Relative Values for Dentists is a relative value system established by national surveys of physicians and dentists conducted by Relative Value Studies, Inc.
Relative Values for Dentists	 Available add-on* data/content: Relative Values for Dentists, CPT[®] code data file - values from the Relative Values for Physicians product applicable to dental Relative Values for Dentists e-book - includes CPT[®] and CDT codes applicable to dental
	*Add-on data is sold separately and must be purchased with the base data file.
RVSI's Complete RBRVS	The Complete RBRVS – An RBRVS fee schedule with gap values created by Relative Value Studies, Inc. The Medicare physician fee schedule (MPFS) is used to set physician fees for Medicare and many commercial fee schedules. However, the RBRVS does not provide a complete schedule. Medicare does not pay for certain services – these services usually are not assigned relative value units (RVUs) by CMS. Codes not valued by Medicare, within the MPFS, are referred to as gap codes. The Complete RBRVS Updateable Data File gives you all the codes valued by CMS, with gap values developed by Relative Value Studies, Inc.
WORKERS' COMPENSATION	I
Workers' Compensation Fee Schedules	Optum is the exclusive publisher of the official Workers' Compensation Fee Schedule for several states. Health care professionals and payers need to reference this information to determine correct reimbursements. Although specific data varies state by state, these comprehensive references generally include state-specific rules and guidelines, fees or RVUs, CPT [®] codes and applicable state-specific codes for services rendered.
	State Fee Schedule Plus module is also available, a database of current state fee schedule data arrayed in a consistent format.
MEDICARE PRICING	
	Optum Medicare Professional Fee Data Files allow you to access Medicare fee schedules released by CMS.
	The available Medicare Professional Fee Data Files include:
Medicare Professional Fee Data	 National RBRVS Medicare Values Locality-Specific Relative Values Locality-Specific Medicare Physician Fees Clinical Lab Fee Schedule Medicare Average Anesthesia Fees by Locality Medicare Physhology and Clinical Social Worker Fees Medicare ASC Rates ZIP Code to Medicare Locality Crosswalk National Medicare Physician Fee Schedule (MPFS) Medicare Anesthesia Relative Values and Conversion Factors Medicare Average Anesthesia Fees by Locality Medicare ANDUlance Fees Medicare ASC Rates ZIP Code to Medicare Locality Crosswalk National Medicare Anesthesia Relative Values and Conversion Factors Medicare Anesthesia Fees Dy Locality Medicare Ambulance Fees Optum Proprietary Gap Values for RBRVS Anesthesia Base Units for Surgical CPT® Codes Medicare Single Drug Pricer Drug Pricing Files Medicare Place of Service Codes
Medicare Carrier Pricing Data	Optum Medicare Carrier Pricing Data provides easy access to carrier set prices, items and services listed in consistent data formats. The Medicare Carrier Pricing data provides a single source for researching prices from multiple carrier websites. Includes Carrier Priced Codes where available.
CUSTOM DATA	
Custom Data Services	Optum can create custom data to your specifications and will work with you to create a custom extract to your unique specifications.
ICD-10 for TriZetto® QicLink™	ICD-10 for TriZetto [®] QicLink [™] contains ICD-10 code set descriptions and specifically formatted for TriZetto [®] QicLink [™] .



Contact your sales representative or call **1-800-464-3649, option 1,** to purchase.

Browse all online coding tools and resources at **optumcoding.com/data.**

optumcoding.com



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