



Zebu Data Tank™

Content Library

Medical Necessity

- Procedure-diagnosis matching
- Primary-secondary-dependent diagnosis checking
- Limited coverage
- Non-coverage
- Frequency restrictions
- Permissive edits
- Situational coverage
- Date-specific edits, to the diagnosis level
- Policy names, numbers, and URLs
- Age restrictions
- Gender-based coverage
- Medicare National Coverage Determinations (NCD)
- Medicare MAC/FI/Carrier Local Coverage Determinations (LCD)
- Medicare DME Local Coverage Determinations (LCD)
- Medicare MAC/FI/Carrier Local Coverage Articles
- Medicare DME Local Coverage Articles
- Policies for all 50 states plus territories
- Commercial payer policies
- Medicaid policies
- Custom rule sets

Procedural and Diagnostic Coding

CPT/HCPCS/Dental procedure codes

Short, medium and long descriptors

Usage Flags

- Age guidelines
- Gender guidelines
- Addon procedure designations
- Inpatient-designated procedures
- Maternity package designation
- ASC excluded status
- ASC surgical status
- ASC ancillary status
- Unlisted/unspecified designation
- Conscious/moderate sedation designations
- Non-reportable codes

Status Codes

- Facility/Non-Facility/Not Applicable Indicator
- Global Surgery Days
- Multiple Procedure
- Bilateral Surgery
- Co-surgeon
- Team Surgery
- Assistant-at-Surgery
- Pre/Intra/Post-operative allocations
- Endoscopic Base Code
- Diagnostic Imaging Family Indicator
- Professional/Technical Component Indicators



ICD-9/ICD-10 procedure and diagnosis codes

Short and long descriptors

Usage flags

- Primary/secondary diagnosis alerts
- Truncated/incomplete diagnosis indicator
- Age guidelines
- Gender guidelines
- Present on Admission (POA) exempt designations

Encounter Coding

- ABC procedure codes
- CPT/HCPCS modifiers
- Physical Status modifiers
- Ambulance modifiers
- Berenson-Eggers Type of Service (BETOS) codes
- Place of service (POS) codes
- Revenue codes
- CMS-1450 codesets
- National Provider Identifier (NPI) numbers
- Taxonomy codes
- Ambulatory Payment Classification (APC)
- Diagnosis Related Group (DRG)
- Major Diagnostic Category (MDC)
- DRG Grouper (Primary ICD-9/ICD-10 based)

Coding Support

- Coding hierarchies
- Keyword indices
- Coding guidelines
- Search term crosswalks
- Coding terminology search/crosswalk app

Reimbursement Tools

- RVUs (relative value units)
- Medicare Physician Fee Schedule (MPFS/RBRVS)
- Clinical laboratory fee schedule
- PEN (parenteral/enteral nutrition) fee schedule
- DMEPOS fee schedule
- Ambulance fee schedule
- ASC (ambulatory surgical center) fee schedule
- Anesthesia fee schedule
- Part B drug fee schedule
- Custom fee schedules
- Multi-procedure discounts
- Place of service reimbursement adjustments
- Modifier-based reimbursement adjustments
- National Association of Insurance Commissioners (NAIC) codes



Reference and Help Files

Medicare manuals
CMS-1500 formats and instructions
CMS-1500 help files and utilities
CMS-1500 billing manual content

Crosswalks

ICD-9 to ICD-10
ICD-10 to ICD-9
ICD-9 to DRG and MDC
ICD-10 to DRG and MDC
DRG to ICD-9
DRG to ICD-10
CPT/HCPCS to modifier
CPT/HCPCS to APC
CPT/HCPCS to POS
CPT/HCPCS to Revenue Code
CPT/HCPCS to STC
Anesthesia to Surgery
Add-on procedure to base procedures
Device to Procedure
Procedure to Device

Correct Coding

Correct Coding Initiative (CCI) edits

Medicare practitioner
Medicare OCE (Outpatient Code Editor)
Medicaid practitioner and ASC
Medicaid outpatient hospital

Medically Unlikely Edits (MUE)

Medicare practitioner
Medicare outpatient
Medicare DME
Medicaid practitioner and ASC
Medicaid outpatient
Medicaid DME

Diagnosis & Procedure Usage

Non-reportable code designations
Age restrictions
Gender restrictions
Maternity designations
Inpatient only designations
ASC excluded, ASC surgical, and ASC ancillary designations
Unlisted/unspecified code designations
Add-on code designations
Truncated/non-billable code designations
Primary/secondary only code designations
Conscious/moderate sedation designations
Present on Admission (POA) exempt designations



Pharmaceutical Codes

NDC (National Drug Codes)

Drug name

Dosage

Administration route(s)

Active ingredient(s)

FDA approval number

OTC/Rx designation

Manufacturer

Package information

DEA schedule

Effective/termination dates (where available)

Associated CPT/HCPCS codes (where available)

Drug classifications

Brand name to ingredient mappings

Provider Credentialing

Opt-Out Physicians

Medicare Exclusions/Debarment

OIG (Office of Inspector General) Exclusions

GSA (General Services Administration) Exclusions

State Medicaid Exclusions/Debarment

SDN (Specially Designated Nationals)

NPDB (National Practitioner Database)

Disciplinary records (NPDB and state boards)

License status

SSDI (Social Security Death Index)

NPPES (National Plan and Provider Enumeration System)

NPI (National Provider Identification)

Caregiver Registrations for Non-Licensed Occupations (varies by state)

Claim Processing Codes

Claim adjustment reason codes (CARC)

Remittance advice remark codes (RARC)

Claim status codes

Claim status category codes

NCPDP reject codes

ZIP Codes and International tables

US ZIP code validation (5-digit)

US ZIP +4 code validation (9-digit)

US state abbreviations

Canadian province abbreviations

Canadian ZIP code validation

Country codes (2 and 3 character)

Currency codes (monetary units)

