



### Medically Unlikely Edits Used to Limit Treatment in Violation of MHPAEA

The purpose of Medically Unlikely Edits (MUEs) is to limit fraud, not to limit medically necessary treatment. Since the MUEs were published for the 2019 CPT I billing codes, insurers/health plans routinely deny medically necessary treatment on the basis that it exceeds the MUE for the billing code. This is a violation of MHPAEA's prohibition on quantitative treatment limitations. If a provider secures an authorization for treatment that exceeds the MUE, the insurer/health plan computerized claims systems automatically deny the claims, unless they have a modifier. As a result, claims are not paid without appealing the denial. For a medium-sized provider, this can amount to hundreds of hours of administrative time, which is unsustainable. As providers encounter this, they feel forced to limit medically necessary treatment based on the MUEs, which prevents them from providing treatment based on generally accepted standards of care.

CPT Code	Units Per Day	Notes
97151	32 for Medicaid	Only Medicare MUE of 8 is recognized by payors, although Medicaid has published the update to 32 units here: <a href="https://www.medicaid.gov/medicaid/program-integrity/ncci/edit-files/index.html">https://www.medicaid.gov/medicaid/program-integrity/ncci/edit-files/index.html</a>
97152	8	Steering Committee has received requests to increase this MUE.
97153	32	
97154	12	Steering Committee has requested this be increased to 16.
97155	24	Steering Committee has requested this be increased to 32.
97156	16	
97157	16	
97158	16	
0362T	8	
0373T	32	