

Handout – MSP Billing Code Table for 1/30/2025 Webinar Claim Examples

Code	Instruction – Reporting code(s) as applicable
Condition codes (CCs)	<p>CC 02 = Condition is employment related</p> <p>CC 06 = ESRD patient in 1st 30 months of eligibility or entitlement covered by EGHP</p> <p>CC 77 = Primary payer paid in full (paid full charges or amount you are accepting, per contract or obligation under law, as full payment toward Medicare-covered charges). No MSP payment due.</p>
Occurrence codes (OCs) and dates	<p>OC 01 and DOA or injury = primary payer is medical-payment coverage</p> <p>OC 02 and DOA or injury = primary payer is no-fault/no-fault set aside</p> <p>OC 03 and DOA or injury = primary payer is liability insurance/liability set aside</p> <p>OC 04 and DOA or injury = primary payer is WC/WC set aside</p> <p>OC 33 and 1st day of coordination period for ESRD patient covered by EGHP</p>
MSP value codes (VCs) and amount	<p>Represents MSP provision and amount primary payer paid toward Medicare-covered charges.</p> <p>VC 12 = Working aged beneficiary (65 or older, has Part A) or spouse with EGHP, employer size 20 or more employees</p> <p>VC 13 = ESRD patient (any age) with EGHP in 30-month coordination period</p> <p>VC 14 = no-fault/no-fault set aside (auto & other types such as PIP, med-pay)</p> <p>VC 15 = WC/WC set aside</p> <p>VC 16 = PHS or other Federal agency</p> <p>VC 41 = Federal Black Lung program</p> <p>VC 43 = Disabled beneficiary (under 65, has Part A) or family member employed with LGHP, employer size 100 or more employees</p> <p>VC 47 = Liability insurance/liability set aside</p>