



Illinois Narrative Record Guidelines

Developed by the Provider Affairs Operations/Education/Communications Department

Effective July 1, 2004, additional information can be entered in the Narrative Record Field for Electronic Media Claims (EMC). The system will only read the first 80 bytes of data, allowing for the submission of information in a narrative format for each line of service.

Use the narrative field to:

- Provide additional data for **selected procedures**
- Send information pertinent to the adjudication of a claim (i.e. description)

Note: Common abbreviations are acceptable whenever possible. However, please do not use any special characters.

The following table contains categories of codes and specific guidelines for use in the Narrative Record field:

*Documentation that the DME medical certification or certificate of medical necessity (CMN) is on file with the provider is acceptable if received electronically on the Narrative Record. If this documentation is present we will not request a copy of the CMN. However, if medical policy requires other additional information such as a letter of medical necessity or sleep study results (for CPAP), we may request this additional information from the provider.

Category	Code/Description:	Documentation Guidelines (80 byte maximum)
Not Otherwise Classified (NOC) X-Ray Current Procedural Terminology (CPT) Codes & Descriptions	76496 - fluoroscopic procedure 76497 - computed tomography 76498 - magnetic resonance procedure 76499 - diagnostic radiographic procedure 76999 - ultrasound procedure 77299 - therapeutic radiology clinical treatment planning 77399 - medical radiation physics, dosimetry, and treatment devices and special services 77499 - therapeutic radiology treatment management 77799 - clinical brachytherapy 78199 - hematopoietic, reticuloendothelial and lymphatic procedure, diagnostic nuclear medicine 78299 - gastrointestinal procedure, diagnostic nuclear medicine 78399 - musculoskeletal procedure, diagnostic nuclear medicine 78499 - cardiovascular procedure, diagnostic nuclear medicine 78599 - respiratory procedure, diagnostic nuclear medicine 78699 - nervous system procedure, diagnostic nuclear medicine 78799 - genitourinary procedure, diagnostic nuclear medicine 78999 - misc. procedure, diagnostic nuclear medicine 79999 - radiopharmaceutical therapeutic procedure	When billing under any 'NOC code, except for a surgical code, information that can be accommodated in the Narrative Record will be accepted.

Category	Code/Description:	Documentation Guidelines (80 byte maximum)
99070	Supplies and materials (except spectacles) provided by the physician.	Provide description of service or supplies used
Unlisted Durable Medical Equipment (DME) HCFA Common Procedure Code (HCPC) Codes	E1399 - DME, misc. E1699 - Dialysis equipment, not otherwise classified E2599 - Accessory for speech generating device, not otherwise classified. (Medical certification applies)	Any information that may assist in processing the claim that can be accommodated in the Narrative Record will be accepted.
Documentation that DME Medical Certification is on file with provider*	DME; except oxygen equipment and related oxygen supplies and accessories	Note whether M.D. certification is on file.
Other (K0108 and A4649)	K0108 - Other wheelchair accessories A4649 - NOC med/surgical supplies	Any information that may assist in processing the claim that can be accommodated in the Narrative record will be accepted.
Multiple Modifiers	When billing with Modifier 99	Use all applicable modifiers in order of importance.