

IHCP *banner page*

IHCP to mass adjust or mass reprocess claims for CPT codes 93593–93598

The Indiana Health Coverage Programs (IHCP) has identified a claim-processing issue that affects professional fee-for-service (FFS) claims with dates of service on or after Jan. 1, 2022, for the Current Procedural Terminology (CPT^{®1}) codes in Table 1.

The claim-processing system has been updated to allow modifier 26 – *Professional component* or modifier TC – *Technical component* for these codes, retroactive to **Jan. 1, 2022**. Claims submitted before June 28, 2022, may have denied incorrectly with explanation of benefits (EOB) 4033 – *The modifier used is not compatible with the procedure code billed. Please verify and resubmit.*

Affected claims will be mass adjusted or reprocessed. Providers should see adjusted/reprocessed claims on Remittance Advices (RAs) beginning Aug. 3, 2022, with internal control numbers (ICNs)/Claim IDs that begin with 52 (mass replacements non-check-related) or 80 (reprocessed denied claims).

Table 1 – Procedure codes that may have denied for being billed with modifier 26 or TC

Code	Description
93593	Insertion of catheter into right side of heart for evaluation of congenital heart defect in heart with normal native blood vessel connections, using imaging guidance
93594	Insertion of catheter into right side of heart for evaluation of congenital heart defect in heart with abnormal native blood vessel connections, using imaging guidance
93595	Insertion of catheter into left side of heart for evaluation of congenital heart defect, using imaging guidance
93596	Insertion of catheter into right and left sides of heart for evaluation of congenital heart defect in heart with abnormal native blood vessel connections, using imaging guidance
93597	Insertion of catheter into right and left sides of heart for evaluation of congenital heart defect in heart with normal native blood vessel connections, using imaging guidance
93598	Measurement of output of blood from heart, performed during cardiac catheterization for evaluation of congenital heart defects

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