IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

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Outpatient reimbursement information updated for select annual 2022 HCPCS codes

The Indiana Health Coverage Programs (IHCP) previously announced coverage and billing information for new codes for the annual Healthcare Common Procedure Coding System (HCPCS) updates in *IHCP Bulletin <u>BT2021113</u>*. These codes were previously listed on Table 3 – *Pricing for newly covered procedure codes that are manually priced* with pricing to be determined for outpatient claims.

The procedure codes listed in Table 1 may be reported to the IHCP on outpatient claims for dates of service (DOS) on or after Jan. 1, 2022.



The Outpatient Fee Schedule will be updated to reflect this information. This fee schedule can be accessed from the IHCP Fee Schedules page at in.gov/medicaid/providers.

Table 1 – Procedure codes with outpatient pricing added, effective retroactively for DOS on or after Jan. 1, 2022

Procedure code	Description	Amount reimbursed when billed on an outpatient claim
53451	Insertion of adjustable balloon continence device on both sides of urethra using imaging guidance	Max fee or ambulatory surgical center (ASC) rate
53452	Insertion of adjustable balloon continence device on one side of urethra using imaging guidance	Max fee or ASC rate
53453	Removal of adjustable balloon continence device from beside urethra	ASC rate
53454	Adjustment of fluid volume in adjustable balloon continence device beside urethra	ASC rate
0671T	Insertion of drainage device into drainage tissue within eye (trabecular meshwork)	ASC rate
0673T	Laser destruction of benign growth of thyroid using imaging guidance	Max fee or ASC rate
0674T	Insertion of permanent implantable synchronized diaphragmatic stimulation system for augmentation of heart function, including an implantable pulse generator and diaphragmatic leads, using a laparoscope	90% of billed charges
0675T	Insertion of first lead of permanent implantable synchronized diaphragmatic stimulation system for augmentation of heart function, with connection to existing pulse generator, using a laparoscope	90% of billed charges
0676T	Insertion of additional lead of permanent implantable synchronized diaphragmatic stimulation system for augmentation of heart function, with connection to existing pulse generator, using a laparoscope	90% of billed charges
0677T	Repositioning of first lead of permanent implantable synchronized diaphragmatic stimulation system for augmentation of heart function, with connection to existing pulse generator, using a laparoscope	90% of billed charges
0699T	Injection of medication into posterior chamber of eye	ASC rate

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