



BANNER PAGE

BR200628

JULY 11, 2006

All Providers

Vaccines for Children

Effective July 17, 2006, the Indiana State Department of Health (ISDH) announces that the vaccine for Hepatitis A pediatric/adolescent dosage will be available through the Vaccines for Children program. Therefore, for dates of service on or after July 17, 2006, reimbursement for Health Care Procedure Coding System (HCPCS) codes 90633 – *Hepatitis A vaccine, pediatric/adolescent dosage – 2-dose schedule, for intramuscular use* and 90634 – *Hepatitis A vaccine, pediatric/adolescent dosage – 3-dose schedule, for intramuscular use*, is the lesser of the \$8 administration fee or the billed amount.

July 2006, Quarterly HCPCS Codes Update

The purpose of this article is to notify providers of the coverage determinations for the July 2006, quarterly updates to the HCPCS codes.

Note: Non-covered, as it appears in the following tables, indicates that the Indiana Health Coverage Programs (IHCP) does not cover the service described in the code. Non-reimbursable indicates that the service described in the code is either billable under another code or is part of global billing.

New HCPCS Codes (Table 1): The new codes are identified in Table 1 by procedure code, description, prior authorization (PA) requirements, allowed modifiers, and program coverage status. Providers may bill these codes for effective dates of service on or after July 1, 2006. The standard global billing procedures and edits apply when using the new codes. The July 2006, Quarterly HCPCS Codes may be accessed at <http://www.cms.hhs.gov/HCPCSReleaseCodeSets>.

HCPCS codes K0734 through K0737 are new codes to report adjustable skin protection and positioning seat cushions currently reported with HCPCS code K0108 and modifier U1, U2, U3, or U4. The IHCP created the procedure code to modifier combinations in order to mirror Medicare policy for the use of HCPCS code K0108 for adjustable seat cushions as published in provider banner [BR200536](#). Adjustable cushions are purchase-only items by the IHCP, and providers must attach the NU modifier when billing to the IHCP. Pricing established for adjustable and positioning seat cushions as published in [BR200536](#) is applied to HCPCS codes K0734 through K0737, effective for dates of service on or after September 1, 2006. Providers are allowed to report procedure code K0108 and modifier U1, U2, U3, or U4 for skin protection and positioning seat cushions for dates of service through August 31, 2006.

Contact Information: Providers should direct questions about this article to Customer Assistance at (317) 655-3240 in the Indianapolis local area, or at 1-800-577-1278.

Table 1 – New July 2006, Quarterly HCPCS Codes, Effective for Dates of Service On or After July 1, 2006

Procedure Code	Description	PA Requirements	Modifiers	Program Coverage
C9229	Injection, ibandronate sodium, per 1 mg	Not Applicable for All Programs		Non-Reimbursable for All Programs
C9230	Injection, abatacept, per 10 mg	Not Applicable for All Programs		Non-Reimbursable for All Programs
K0733	Power wheelchair accessory, 12 to 24 amp hour sealed lead acid battery, each (e.g., gel cell, absorbed glassmat)	Yes for All Programs	NU, RR	Covered for All Programs
K0734	Skin protection wheelchair seat cushion, adjustable, width less than 22 inches, any depth	Yes for All Programs	NU	Covered for All Programs Effective 09/01/2006

(Continued)

Table 1 – New July 2006, Quarterly HCPCS Codes, Effective for Dates of Service On or After July 1, 2006

Procedure Code	Description	PA Requirements	Modifiers	Program Coverage
K0735	Skin protection wheelchair seat cushion, adjustable, width 22 inches or greater, any depth	Yes for All Programs	NU	Covered for All Programs Effective 09/01/2006
K0736	Skin protection and positioning wheelchair seat cushion, adjustable, width less than 22 inches, any depth	Yes for All Programs	NU	Covered for All Programs Effective 09/01/2006
K0737	Skin protection and positioning wheelchair seat cushion, adjustable, width 22 inches or greater, any depth	Yes for All Programs	NU	Covered for All Programs Effective 09/01/2006

National Provider Identifier Information

An NPI Web page is now part of the IHCP Web site at <http://www.indianamedicaid.com/ihcp/ProviderServices/npi.asp>. This page contains information about the *IHCP NPI Implementation Plan*, instructions for obtaining an NPI, links to other resources on the Web, and informational documents such as the *NPI Fact Sheet*.

All Pharmacy and Prescribing Providers

OTC Drug Formulary Addition

As referenced in bulletin [BR200614](#), Magonate liquid is added to the Over-the-Counter (OTC) Drug Formulary, and the following rate of 0.04125 is assigned to this product. This rate is effective on July 1, 2006.

All Waiver Providers

Waiver Re-enrollment

During a recent review of provider enrollment files, the IHCP determined that many waiver providers have not completed the *IHCP Provider Enrollment Application*.

The IHCP must maintain a completed *IHCP Provider Enrollment Application* and *Provider Agreement* for all providers in order to meet federal disclosure requirements. Therefore, the IHCP must re-enroll waiver providers that do not have a completed *IHCP Provider Enrollment Application* on file in order to remain in compliance with federal requirements.

Beginning August 1, 2006, the IHCP will send a letter and an *IHCP Provider Enrollment Application* packet to all affected waiver providers. The letter contains detailed instructions on how to complete the application and re-enroll.

Providers must complete the *IHCP Provider Enrollment Application* and return it to EDS within 45 days of the date of the letter.

To obtain additional copies of the *IHCP Provider Enrollment Application* or to obtain additional information, visit the IHCP Web site at www.indianamedicaid.com or contact the Provider Enrollment line at 1-877-707-5750.

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