

All Providers

Outpatient Claims Reprocessing – Revenue Code 636, HCPCS P9045 – P9047

The Indiana Health Coverage Programs (IHCP) is performing a systematic reprocessing of outpatient claims billed with revenue code 636 and Healthcare Common Procedure Coding System (HCPCS) codes P9045 – P9047 that previously denied for edit 0520 – Invalid revenue code/procedure code combination, with dates of service on or after January 1, 2005. The reprocessed claims will appear on the remittance advice (RA) dated June 5, 2007. Providers who have claims for this revenue code and procedure code combination that have not been submitted for processing, should submit their claims for payment consideration. Providers who have claims for this revenue code and procedure code combination that are past the one-year filing limit, can submit a copy of this banner page article as documentation to waive the filing limit.

Clinical Lab Mass Adjustment

Banner page <u>BR200540</u> included a list of lab procedure codes subject to a mass adjustment. Some of the claims included in the mass adjustment were incorrectly priced according to the lab fee instead of the max fee.

The IHCP identified the claims that priced incorrectly. A mass adjustment will be initiated to correct the pricing on the affected claims and the mass adjusted claims will appear on the RA beginning June 19, 2007.

Unit and Age Limitations on Inpatient Neonatal and Pediatric Critical Care Services

The Surveillance and Utilization Review (SUR) Department identified potential utilization concerns related to providers inappropriately billing multiple units of Current Procedural Terminology (CPT[®]) codes related to inpatient neonatal and pediatric critical care services. This article clarifies the IHCP policy regarding these codes. The following list identifies each code and the appropriate age and unit limitations:

- CPT Code 99298, Subsequent intensive care, per day, for the evaluation and management of the recovering very low birth weight infant (present body weight less than 1500 grams). This CPT code is limited to one unit per day.
- CPT Code 99300, Subsequent intensive care, per day, for the evaluation and management of the recovering infant (present body weight less than 2501-5000 grams). This CPT code is limited to one unit per day.
- CPT Code 99295, Initial neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less. This CPT code has an age limit of 0-1 years of age. This CPT code is limited to one unit per day.
- CPT Code 99296, Subsequent inpatient neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less. This code has an age limit of 0-1 years of age. This CPT code is limited to one unit per day.
- CPT Code 99293, Initial inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 25 months of age. This code has an age limit of 0-2 years of age. This CPT code is limited to one unit per day.
- CPT Code 99294, Subsequent inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 25 months of age. This code has an age limit of 0-2 years of age. This CPT code is limited to one unit per day.

SUR is advising all providers to review and ensure appropriate billing of units for this range of services. To recoup overpayments, the SUR Department is conducting a review of these claims. If a provider identifies overpayments related

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to such errors, the provider should file an adjustment or contact the SUR Department at (317) 347-4500 in the Indianapolis local area, or toll-free at (800) 457-4515 to arrange for repayment of inappropriate reimbursement.

Providers rendering services under the risk-based managed care (RBMC) program should also follow IHCP policy and CPT coding guidelines with regard to billing these procedure codes. Claims billed with multiple units on the same day for members enrolled in the RBMC program may be subject to recoupment by the managed care organizations (MCOs).

To All Federally Qualified Health Centers and Rural Health Clinics

Effective **January 1, 2006**, the following CPT[®] and HCPCS codes **were added** as valid Federally Qualified Health Center (FQHC)/Rural Health Clinic (RHC) encounter codes:

16025	16030	64650	64653	80195	90772	90773	90774	90849	90853	90862	
92626	92627	92630	92633	96101	96116	96118	96401	96402	96409	96411	
96413	96415	96416	96417	99300	99304	99305	99306	99307	99308	99309	
99310	99318	99324	99325	99326	99327	99328	99334	99335	99336	99337	
D5110	D5120	D5130	D5140	D5211	D5212	D5213					

Effective **January 1, 2006**, the following CPT and HCPCS codes **are no longer valid** FQHC/RHC encounters and will be removed from the list of valid encounter codes: 16010, 90782, 90784, 99271, 99272, 99273, 99274, 99275, 99301, 99302, 99303, 99311, 99312, and 99313.

Effective January 1, 2007, the following CPT and HCPCS codes were added as valid FQHC/RHC encounter codes:										
56442	70554	70555	72291	72292	76776	77002	77003	77011	77012	77031
77032	77051	77052	77053	77054	77055	77056	77057	77058	77059	77071
77072	77073	77074	77075	77076	77077	92025	99363	99364	D0145	D0273
D1555	D9120	L1001	S0180							

Effective **January 1, 2007**, the following CPT and HCPCS codes **are no longer valid** FQHC/RHC encounters and will be removed from the list of valid encounter codes: 94656, 94657, D1201, and D1205.

The valid FQHC/RHC encounter code list is reviewed periodically to account for new and end-dated CPT and HCPCS codes and is available on the Myers and Stauffer Web site at <u>www.mslcindy.com</u>. Please direct questions about the information in this article to Tim Guerrant at Myers and Stauffer, LC, at (317) 846-9521.

Contact Information

If you have questions about the articles published in this banner page, please contact Customer Assistance at (317) 655-3240 in the Indianapolis local area, or toll-free at 1-800-577-1278, unless otherwise noted.

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