

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS

BR201032

AUGUST 10, 2010



Changes to CPT Code 31254 – *Nasal endoscopy*

Effective September 23, 2010, the Indiana Health Coverage Programs (IHCP) will make reimbursement changes to Current Procedural Terminology (CPT^{®1}) code 31254 – *Nasal endoscopy, surgical with entmoidectomy, partial*. Currently, this procedure code is reimbursing \$788.84 for claims billed on the CMS-1500 medical claim form. HP Enterprise Services will adopt the 2010 Relative Value Units (RVUs) from the Centers for Medicare & Medicaid Services (CMS) Web site for this procedure code, which will change the pricing from max fee to resource-based relative value scale (RBRVS) and reimburse this procedure code at \$205.46.

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Claims billed for HCPCS code J7321 to be mass adjusted

Claims that were billed for Healthcare Common Procedure Coding System (HCPCS) code J7321 – *Hyaluronan or derivative, hyalgan or supartz, for intra-articular injection, per dose* were paid at an incorrect rate of \$225.38 from May 1, 2010, to July 31, 2010. The correct rate for this time period is \$136.50. Incorrectly paid claims will be mass adjusted and appear on or after the August 10, 2010, Remittance Advice (RA). These claims will be identified with a “56” as the first two digits of the claim’s ICN (internal control number).

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Coverage of CPT codes for Vaccines for Children

The Indiana Health Coverage Programs (IHCP), through Vaccines for Children (VFC), now provides coverage for the following vaccines.

IHCP coverage of VFC vaccines

CPT code and description	Effective date	Limits and restrictions
90650 – Human Papilloma virus (HPV) vaccine, types 16, 18, bivalent, 3-dose schedule, for intramuscular use	October 1, 2009	Females, ages 10-20 years
90670 – Pneumococcal conjugate vaccine, 13 valent, for intramuscular use	February 1, 2010	None



Providers are reminded of the appropriate vaccine and vaccine administration billing practices for all vaccinations.

Vaccines that are part of the Vaccines for Children (VFC) program and are received free by the provider as part of VFC: The provider may bill the appropriate CPT vaccine procedure code and the lesser of the usual and customary administration fee or \$8. A separate CPT administration code should not be billed for a VFC-administered vaccine.

Vaccines that are typically part of the VFC program but have been purchased or supplied out of private stock: Providers may bill for both the vaccine and its administration (using CPT code 96372, 96373, or 96374). However, if an evaluation and management (E/M) service code is billed with the same date of service as an office-administered immunization, providers should not bill the vaccine administration code separately. Reimbursement for the administration is included in the E/M code-allowed amount. Separate reimbursement is allowed only when the administration of the drug is the only service billed by the practitioner.

Vaccines that are not part of the VFC program: Providers may bill for both the vaccine and its administration (using CPT code 96372, 96373, or 96374). However, if an E/M service code is billed with the same date of service as an office-administered immunization, providers should not bill the vaccine administration code separately. Reimbursement for the administration is included in the E/M code-allowed amount. Separate reimbursement is allowed when the administration of the drug is the only service billed by the practitioner. In addition, if more than one vaccine is administered on the same date of service and no E/M code is billed, providers may bill an administration fee for each injection.

Claims should be submitted to the appropriate delivery system – HP or a managed care organization (MCO) – for each member, regardless of the source of the vaccine stock. Claims are eligible for postpayment review, and therefore, providers must maintain documentation and invoices related to private stock when substituting for VFC vaccine.

Rural health clinic (RHC) and Federally Qualified Health Center (FQHC) rates include payment for the vaccine and administration fee, and cannot be billed separately on claims submitted to HP. RHCs and FQHCs must separately verify the billing policy for each MCO to which they submit claims.



The screenshot shows the Indiana Medicaid for Providers website. The header includes the IHCP logo and navigation links: About Indiana Medicaid, Become a Provider, General Provider Services, Provider-Specific Information, News, Bulletins, and Banners, and QUICK LINKS. The main content area is titled "ARCHIVED NEWS" and lists several news items:

- [New Pharmacy Services Help Desk Hours](#)
06/15/2010 - Attention Pharmacy Providers and Prescribing Practitioners
- [Proposed Rate for IEPs](#)
05/25/2010 - Attention, School Corporations: Proposed Rate for IEPs
- [Specialty Workshops](#)
05/25/2010 - IHCP offering specialty workshops for home health, hospice, and dental providers.
- [IHCP Workshops](#)
05/25/2010 - Second quarter IHCP provider workshops ongoing.

A sidebar on the left contains a "QUICK LINKS" menu with items like Claims Billing, Electronic Data Interchange, FAQs, Fee Schedule, Forms, Manuals, Pharmacy Services, Prior Authorization, Provider Search, Providers Needed, Preferred Drug List, Presumptive Eligibility, Provider Education, Provider Enrollment, Site Map, and Web Interchange.

Check the [Archived News](#) section of the new IHCP provider Web site

When articles are removed from the News and Announcements section of the Web site's home page, they are moved to the Archived News section. Archived news topics come up when you use the "Search" box in the upper-right corner of the home page – a way to find information you know you've seen, but cannot remember where.

THIRD-QUARTER WORKSHOPS

The IHCP is again offering quarterly provider workshops free of charge. For more information, go to <http://www.indianamedicaid.com>. Click on **Provider Services**, then **Education Opportunities**. You may also [register for the seminar online](#).

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