IHCP banner page

INDIANA HEALTH COVERAGE PROGRAMS

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IHCP establishes maximum reimbursement for CPT code 96523 in the facility setting

The Indiana Health Coverage Programs (IHCP) has established maximum reimbursement for Current Procedural Terminology (CPT^{©1}) code 96523 – *Irrigation of implanted venous access device for drug delivery in the facility setting*. For dates of service on or after September 1, 2012, the outpatient facility maximum reimbursement for CPT code 96523 will be \$42.66 when billed with nonflat-rate revenue codes. Consistent with the current UB Editor, CPT code 96523 has been linked to the following nonflat-rate revenue codes: 335, 940, and 949.

The IHCP flat-rate revenue code reimbursement methodology remains unchanged, and, thus, reimbursement for 96523, when billed with appropriate flat-rate revenue codes, will continue to reimburse at the flat-rate amount. Additionally, for

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 Medicare Payer ID update
- CPT code 31899 ASC pricing indicator

dates of service on or after September 1, 2012, reimbursement for CPT code 96523 will be limited to one unit. The <u>Fee Schedule</u> on indianamedicaid.com will be updated to reflect this change.

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IHCP system upgrade reflects Medicare Payer ID update

The Indiana Health Coverage Programs (IHCP) has performed a system upgrade to reflect the updated Medicare Payer IDs, which include new payer IDs for Indiana.

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Indiana Medicare Payer ID updates

Part A

■ Effective for claims submitted on or after July 23, 2012, Payer ID 01801 – Wisconsin Physician Service (WPS) will replace Payer ID 00130 - National Government Services (NGS). In transition, Payer ID 00130 will continue to be accepted on electronic institutional claim submissions through August 22, 2012. Claims submitted with payer ID 00130 on or after August 23, 2012, will be rejected.



Part B

■ Effective for claims submitted on or after August 20, 2012, Payer ID 01802 – Wisconsin Physician Service (WPS) will replace Payer ID 00630 - National Government Services (NGS). Electronic professional claims submitted with payer ID 01802 on or after August 21, 2012, will be rejected.

CPT code 31899 ambulatory surgical center pricing indicator assigned

The Indiana Health Coverage Programs (IHCP) has assigned Current Procedural Terminology (CPT) code 31899 – Unlisted procedure, trachea, bronchi an ambulatory surgical center (ASC) pricing indicator of "4." Effective for dates of service on or after September 1, 2012, the IHCP will reimburse providers billing claims for CPT code 31899 as an outpatient service. The Fee Schedule on indianamedicaid.com will be updated to reflect this change. The ASC rates can be found on the Fee Schedule under "ASC Codes."

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at (317) 655-3240 in the Indianapolis local area or toll-free at 1-800-577-1278.

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