

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS BR201345 NOVEMBER 12, 2013



CPT code 37210 assigned an ambulatory surgical center pricing indicator

The Indiana Health Coverage Programs (IHCP) has assigned Current Procedural Terminology (CPT®¹) code 37210 – *Uterine fibroid embolization (UFE), embolization of the uterine arteries to treat uterine fibroids* an ambulatory surgical center (ASC) pricing indicator of “M.” The IHCP will reimburse providers billing claims for CPT code 37210 as an outpatient service retroactive to dates of service on or after January 1, 2012.

Effective December 12, 2013, providers may submit claims for CPT code 37210 for dates of service on or after January 1, 2012, for reimbursement consideration. Claims beyond the one-year filing limit must include a copy of this banner page as an attachment to the claim.

The [Fee Schedule](#) at indianamedicaid.com will be updated to reflect this change. The ASC rates can be found on the Fee Schedule under “ASC Codes.”

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CPT code 33983 assigned base RVUs

Effective December 12, 2013, the IHCP has adopted relative value units (RVUs) for Current Procedural Terminology (CPT) code 33983 – *Replacement of ventricular assist device pump(s); Implantable intracorporeal, single ventricle, with cardiopulmonary bypass*. The updated pricing is reflected on the [Fee Schedule](#) at indianamedicaid.com.

CPT 33983 remains an inpatient-only procedure and is not reimbursable in the outpatient setting.

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NDC code no longer required for CPT 95913

Effective December 12, 2013, a National Drug Code (NDC) is no longer required when billing for Current Procedural Terminology (CPT) code 95913 – *Nerve Conduction Study – 13 or more studies*. This change is effective for dates of service on or after January 1, 2013.

Claims for dates of service on or after January 1, 2013, previously denied for explanation of benefits (EOB) 0217 – *NDC missing*, may be resubmitted for reimbursement consideration. Claims beyond the one-year filing limit must include a copy of this banner page as an attachment to the claim.

PA requirements revised for orthodontic services

The Indiana Health Coverage Programs (IHCP) covers orthodontic procedures for members younger than 21 years of age. All orthodontic services require prior authorization (PA). Effective for dates of service on or after October 11, 2013, dental PA requests for orthodontic services no longer require a signed statement from a member of a hospital-based craniofacial team to certify the correct craniofacial diagnosis and malocclusion. All other PA criteria for orthodontic services remain unchanged. See [IHCP Provider Manual Chapter 8](#) for additional information. For PA questions, please contact ADVANTAGE Health SolutionsSM at 1-800-269-5720.

Nursing Facility Satisfaction Survey Webinars held in November

The Family and Social Services Administration (FSSA) cordially invites you to participate in an informational webinar regarding the reports generated from the Nursing Facility Satisfaction Surveys conducted earlier this year. The webinars are hosted by Press Ganey, the vendor that performed the resident, family member/friend, and employee satisfaction surveys. The final webinar will be conducted on Friday, November 15, 2013, at 9:30 a.m. Eastern Time.

To best accommodate all participants, registration for the webinar is required. Press Ganey will send each nursing facility an email with registration instructions. Please contact Julia Seres with Press Ganey at Julia.seres@pressganey.com or (312) 610-5202 if you do not receive an email invitation and wish to participate. Press Ganey began emailing facility-specific reports November 4, 2013. During the webinar, you will receive information about the survey outcomes and the reports you will receive.

If you have any questions, please contact Karen Filler with the FSSA Division of Aging at (317) 232-4651.

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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