

## IMPORTANT INFORMATION

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## To All Indiana Medicaid Providers:

• Several recent articles notified providers of coverage for the drugs Synvisc and Hyalgan. Providers were directed to bill for these drugs using the Health Care Finance Administration's (HCFAs) Common Procedure Coding System (HCPCS) code J3490, unlisted drug. It has recently come to our attention that specific HCPCS codes were created in 1999 for these drugs. Therefore, providers should submit charges for Synvisc and Hyalgan using the HCPCS codes in Table 1.1:

CodeDescriptionRateJ7315Sodium hyaluronate, 20 mg, for intra-articular injection<br/>(Hyalgan)\$135.10

Table 1.1 – HCPC Codes for Synvisc and Hyalgan

Hylan G-F, 16 mg for intra-articular injection (Synvisc)

## To All Indiana Medicaid Anesthesia Providers:

J7320

• Effective August 31, 1998, pricing logic for anesthesia was updated according to guidelines stipulated in Bulletin E95-21. This bulletin stated that when billing epidural anesthesia services for a cesarean delivery, providers should use the Current Procedural Terminology (CPT) 4 procedure code that best describes the service provided plus the modifier AA. As of August 31, 1998, procedure codes 59514 and 59515 began reimbursing one unit of time for each 15-minute block of time billed in the first hour of service, and one unit of service for every subsequent 60-minute block of time billed.

During the week of February 16, 1999, EDS systematically mass adjusted claims for epidural anesthesia services associated with a cesarean delivery to reflect the reimbursement methodology described in Bulletin E95-21. The OMPP has now determined that reimbursement for epidural services associated with a cesarean delivery, procedure codes 59514 and 59515, should be reimbursed as one unit of time for each 15-minute block of time billed for the entire length of service.

On July 26, 1999, EDS began to systematically mass adjust claims that were billed with procedure codes 59514 and 59515 with the AA modifier for epidural anesthesia services relating to cesarean deliveries. Claims affected by this mass adjustment project will be reflected on Remittance Advice Statements beginning August 10, 1999.

## To All Indiana Medicaid Pharmacy Providers and Prescribers:

The Indiana Medicaid Drug Utilization Review (DUR) Board now has information
on the Indiana Medicaid Web site related to current activities. Users can access
information about the board, legal statutes, meeting agendas, minutes from DUR
Board meetings, and past newsletters. The DUR Board information can be
accessed at <a href="https://www.indianamedicaid.com">www.indianamedicaid.com</a>, then select DUR Board from the list of
options.