



P R O V I D E R B U L L E T I N

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To: All Providers

**Subject: April 1, 2005, Quarterly Update to the Healthcare
Common Procedure Coding System Codes**

Overview

The purpose of this bulletin is to introduce the April 2005 quarterly Healthcare Common Procedure Coding System (HCPCS) code updates that will be added to the IndianaAIM claims processing system April 1, 2005. Table 1 lists the new alpha-numeric codes. Providers will be notified of coverage determinations for these codes in a separate publication released in March. A list of codes that were deleted and the replacement codes that should be used when appropriate, are identified in Table 2. If there are any questions about the contents of this bulletin, providers should contact EDS Customer Assistance at (317) 655-3240 in the Indianapolis local area or 1-800-577-1278.

HIPAA Requirements for Code Set Usage

Provisions of the Health Insurance Portability and Accountability Act (HIPAA) require use of national medical code sets and modifiers that are valid at the time that a service is provided. The American Medical Association (AMA) issues new, deleted, and changed Current Procedural Terminology (CPT®) codes annually, effective January 1, posted in the Medicare Physician Fee Schedule. The Centers for Medicare and Medicaid Services (CMS) publishes the annual and quarterly alpha-numeric codes, posted on the alpha-numeric HCPCS file. The physician fee schedule and alpha-numeric code set-up dates can be found at <http://www.cms.hhs.gov/providers/pufdownload/>.

On April 1, 2005, the new covered HCPCS codes will become available in IndianaAIM for claims processing. The IHCP will deny claims submitted prior to April 1, 2005, with new covered codes. Before April 1, 2005, providers may continue to bill deleted codes for current covered services; after March 31, 2005, providers may no longer bill deleted codes or modifiers.

The national codes in Table 1 will be loaded for claims processing effective April 1, 2005. Coverage determinations and fees will be published in a future Indiana Health Coverage Programs (IHCP) bulletin. Follow-up information will be posted on the IHCP Web site.

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Table 1 – New April 1, 2005, Quarterly HCPCS Codes

HCPCS Code	Description
K0670	Addition to lower extremity prosthesis, endoskeletal knee shin system, microprocessor control feature, stance phase only, includes electronic sensor(s), any type
K0671	Portable oxygen concentrator, rental
S0142	Colistimethate sodium, inhalation solution administered through DME, concentrated form, per mg
S0143	Aztreonam, inhalation solution administered through DME, concentrated form, per gram
S0197	Prenatal vitamins, 30-day supply
S0595	Dispensing new spectacle lenses for patient supplied frame
S0625	Retinal telescreening by digital imaging of multiple different fundus areas to screen for vision-threatening conditions, including imaging, interpretation and report
S3005	Performance measurement, evaluation of patient self assessment, depression
S8434	Interim post-operative orthotic device for upper extremity, custom made
S8940	Equestrian/hippotherapy, per session

Effective April 1, 2005, HCPCS replacement codes in Table 2 must be used. Claims submitted for dates of service after March 31, 2005, with deleted codes will deny.

Table 2 – Deleted April 1, 2005, Quarterly HCPCS Codes

HCPCS Code	Description	Replacement Code	Description
S0016	Injection, amikacin sulfate, 500 mg		This is a non-covered code for the IHCP. No replacement code is necessary.
S0107	Injection, omalizumab, 25 mg	J2357	Injection, omalizumab, 5 mg
S0158	Injection, laronidase, 0.58 mg	J1931	Injection, laronidase, 0.1 mg
S0159	Injection, agalsidase beta, 35 mg	J0180	Injection, agalsidase beta, 1 mg
S8004	Radioimmunopharmaceutical localization of targeted cells; whole body		This is a non-covered code for the IHCP. No replacement code is necessary.

CMS continues to post code updates to the April 1, 2005, HCPCS Quarterly Update. Any additional code updates that are posted for the April 1, 2005, Quarterly Update will be reviewed and providers will be notified of coverage determinations in a future publication(s).

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