

PROVIDER BULLETIN

BT200622

OCTOBER 27, 2006

To: All Providers

Subject: Pacemakers and Corneal Tissue

Overview

The Indiana Health Coverage Programs (IHCP) has determined that certain manually-priced items that are separately reimbursable from the ambulatory surgical center (ASC) rate will be reimbursed at 100 percent of cost. The facility purchasing the item will be required to submit an invoice showing the purchase amount of the item as an attachment to the CMS-1500 claim form or 837P electronic transaction. This article addresses the two services that fall under this new policy.

Pacemakers

Effective December 15, 2006, the IHCP will reimburse the cost of single and dual chamber pacemakers identified in Table 1 in addition to the ASC rate when the implantation is performed in an outpatient surgical setting. The facility purchasing the pacemaker must submit a manufacturer's cost invoice showing the purchase price for the pacemaker as an attachment to the CMS-1500 claim form or 837P electronic transaction. The IHCP will reimburse the provider at 100 percent of the cost invoice for this device.

Table 1 – Pacemaker Reimbursement Allowed Separate from the Outpatient Facility Fee,

Effective for Dates of Service On or After December 15, 2006

Code	Description
C1785	Pacemaker, dual chamber, rate-responsive (implantable)
C1786	Pacemaker, single chamber, rate-responsive (implantable)
C2619	Pacemaker, dual chamber, non-rate-responsive (implantable)
C2620	Pacemaker, single chamber, non-rate-responsive (implantable)
C2621	Pacemaker, other than single or dual chamber (implantable)

Corneal Tissue

Effective December 15, 2006, Healthcare Common Procedure Coding System (HCPCS) code V2785 - Processing, preserving, and transporting corneal tissue, will be reimbursed at 100 percent of the cost invoice.

This article amends reimbursement information provided in provider banner *BR200505* regarding HCPCS code V2785. In that banner article, providers were informed that the IHCP would reimburse

HCPCS code V2785 at 90 percent of the purchase amount indicated on the invoice from the eye bank or organ procurement organization.

ASC providers are not required to obtain a new provider number to report this service on the CMS-1500 claim form or 837P electronic transaction.

Contact Information

Direct any questions regarding this article to Customer Assistance at (317) 655-3240 in the Indianapolis local area, or toll free at 1-(800) 577-1278.

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