

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS

BT201223

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B-Bundled Codes not separately reimbursed

Effective for dates of service on or after August 1, 2012, the Indiana Health Coverage Programs (IHCP) will not separately reimburse certain Current Procedural Terminology (CPT^{®1}) and Healthcare Common Procedure Coding System (HCPCS) codes with a designated status of "B" (indicating a bundled procedure) by the Centers for Medicare & Medicaid Services' (CMS') National Physician Fee Schedule (NPFS) Relative Value File. B-Bundled Codes are not reimbursable services, regardless of whether they are billed alone or in conjunction with other services on the same date. The codes included in this policy, for which separate reimbursement will not be made, can be found in the table on the next page.

Per the public use file that accompanies the NPFS Relative Value File, a status indicator of "B" means the following:

"Payment for covered services are always bundled into payment for other services not specified. If [Relative Value Units] RVUs are shown, they are not used for Medicare payment. If these services are covered, payment for them is subsumed by the payment for the services to which they are incident. (An example is a telephone call from a hospital nurse regarding care of a patient)."

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B-Bundled Codes no longer reimbursed by the IHCP for dates of service on or after August 1, 2012

Procedure code	Description
A4262	Temporary tear duct plug
A4263	Permanent tear duct plug
A4300	Cath Impl Vasc access portal
A4550	Surgical Trays
G0269	Occlusive device in vein art
Q3031	Collagen skin test
15850	Removal of sutures
20930	Sp bone autograft morsel add-on
20936	Sp bone autograft local add-on
22841	Insert spine fixation device
36000	Place needle in vein
38204	BI donor search management
92354	Special spectacles fitting – low vision aid
92355	Special spectacles fitting – with compound lens system
92358	Eye prosthesis service
92371	Repair & adjust spectacles
92351	Spontaneous nystagmus study
92532	Positional nystagmus test
92533	Caloric vestibular test
92534	Optokinetic nystagmus test
92605	Ex for nonspeech device rx
92606	Non-speech device service
92618	Ex for nonspeech dev rx add
93740	Temperature gradient studies
93770	Measure venous pressure
94005	Home vent mgmt supervision
94150	Vital Capacity test
94150 26	Vital Capacity test
94150 TC	Vital Capacity test
96040	Genetic counseling 30 min
97010	Hot or Cold Packs therapy
97602	Wound(s) care non-selective
99051	Med serv eve/wkend/holiday
99070	Special supplies
99091	Collect/review data from pt
99288	Direct Advanced Life Support
99363	Anticoag mgmt init
99364	Anticoag mgmt subseq

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QUESTIONS?

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