IHCP bulletin

INDIANA HEALTH COVERAGE PROGRAMS

BT201458 DECEMBER 2, 2014

Pediatric and neonatal critical care covered during interfacility transportation

Effective January 1, 2015, the Indiana Health Coverage Programs (IHCP) will provide coverage for critical care during a pediatric or neonatal interfacility transport. The following restrictions apply:

- Patient must be 24 months of age or younger.
- Patient must be in critical condition, as determined by a physician using the following guidelines:
 - Patient has a critical illness or injury that acutely impairs one or more vital organ systems.
 - Imminent or life-threatening deterioration of the patient's condition is highly probable during transport.
- This service must be rendered by a physician or a neonatal nurse practitioner (NNP).

Coverage applies to all IHCP programs, subject to limitations established for certain benefit packages, for dates of service on or after January 1, 2015. The following reimbursement information applies to services delivered under the fee-for-service (FFS) delivery system:

Pricing: See IHCP Fee Schedule.

Prior authorization: None required.

Billing Guidance: The following Current Procedural Terminology (CPT®1) codes apply:

- 99466 Critical care face-to-face services during an interfacility transport of critically ill or critically injured pediatric patient, 24 months of age or younger; first 30-74 minutes of hands-on care during transport
- 99467 Critical care face-to-face services during an interfacility transport of critically ill or critically injured pediatric patient, 24 months of age or younger; each additional 30 minutes

These changes will be reflected in the next monthly updates to the provider HCP Fee Schedule at indianamedicaid.com.

Individual managed care entities (MCEs) establish and publish reimbursement, prior authorization (PA), and billing criteria within the risk-based managed care (RBMC) delivery system. Questions should be directed to the MCE with which the member is enrolled.

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