

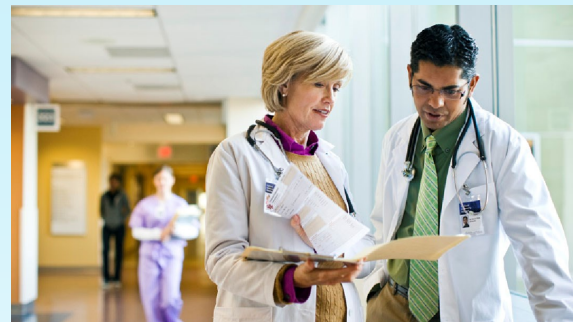
IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT201570 SEPTEMBER 29, 2015

October 2015 quarterly HCPCS code updates announced

The Indiana Health Coverage Programs (IHCP) has reviewed the Healthcare Common Procedure Coding System (HCPCS) code updates effective October 1, 2015, per the Centers for Medicare & Medicaid Services (CMS), to determine coverage and billing guidelines.

- Table 1 provides a list of the new codes contained in the quarterly update, along with code descriptions, program coverage determinations, prior authorization requirements, National Drug Code (NDC) requirements, and any special billing instructions. Covered codes may be billed for dates of service (DOS) on or after October 1, 2015. These codes have been added to the IndianaAIM claims processing system; coverage, billing, and reimbursement information has been posted to the [Code Sets](#) page and [Fee Schedule](#) at indianamedicaid.com. The standard global billing procedures and edits apply.



- [Table 2](#) identifies the newly covered codes from Table 1 for which separate reimbursement is allowed under revenue code 636 – *Drugs requiring detailed coding for separate reimbursement in an outpatient setting*. For reimbursement consideration, providers may bill these procedure codes and the revenue code together, as appropriate, for DOS on or after October 1, 2015.

The October 2015 HCPCS code updates are also available for download from the [CMS website](#) at cms.gov.

Table 1 – Quarterly update of new HCPCS codes, effective for DOS on or after October 1, 2015

Procedure code	Description	Program coverage	Prior authorization required	NDC required	Special billing instructions
C9456	Injection, Isavuconazonium sulfate, 1 mg	Covered for all programs	No	Yes	See Table 2
C9457	Injection, sulfur hexafluoride lipid microsphere, per ml	Noncovered for all programs	N/A	N/A	N/A
C9743	Injection/implantation of bulking or spacer material (any type) with or without image guidance (not to be used if a more specific code applies)	Covered for all programs	No	No	No
Q9979	Injection, Alemtuzumab, 1 mg	Covered for all programs	No	Yes	See Table 2

Table 2 – Newly covered codes for which separate reimbursement is allowed under revenue code 636

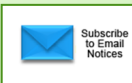
Procedure code	Description
C9456	Injection, Isavuconazonium sulfate, 1 mg
Q9979	Injection, Alemtuzumab, 1 mg

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