

IHCP *banner page*

IHCP to change revenue code required for billing with procedure codes U0001-U0004

Effective January 29, 2021, the Indiana Health Coverage Programs (IHCP) will update the claim-processing system (CoreMMIS) to link the Healthcare Common Procedure Coding System (HCPCS) codes in Table 1 to revenue code 306 – *Laboratory-Bacteriology and Microbiology*. These procedure codes are related to coronavirus disease 2019 (COVID-19) diagnostic testing and were first announced in *IHCP Bulletins* [BT202027](#) and [BT202057](#).

Additionally, the IHCP manually linked the procedure codes in Table 1 to revenue code 306, effective retroactively to the dates shown in Table 1. The linkages apply to fee-for-service (FFS) institutional claims for the procedure codes in Table 1, with dates of service (DOS) on or after the linkage dates shown.

Table 1 – Procedure codes manually linked to revenue code 306, with retroactive effective dates

Procedure code	Description	Retroactive effective date of linkage to revenue code 306
U0001	CDC 2019 novel coronavirus (2019-ncov) real-time rt-pcr diagnostic panel	February 4, 2020
U0002	Non-CDC laboratory tests for SARS-CoV2/2019-nCoV (COVID-19)	February 4, 2020
U0003	Infectious agent detection by nucleic acid (DNA or RNA); severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (Coronavirus disease [COVID-19]), amplified probe technique, making use of high throughput technologies as described by CMS-2020-01-R	April 14, 2020
U0004	2019-nCoV Coronavirus, SARSCoV-2/2019-nCoV (COVID-19), any technique, multiple types or subtypes (includes all targets), non-CDC, making use of high throughput technologies as described by CMS-2020-01-R	April 14, 2020

FFS institutional claims for codes U0001 and U0002 with dates of service (DOS) from February 4, 2020, through January 29, 2021, and claims for codes U0003 and U0004 with DOS from April 14, 2020, through January 29, 2021, may have denied before the codes were manually linked to revenue code 306, with explanation of benefits (EOB) 0520 – *Invalid revenue code and procedure code combination - please verify and resubmit*.

Claims processed during the indicated time frame for the codes in Table 1 that denied for EOB 0520 will be mass reprocessed or mass adjusted, as appropriate. Providers should see reprocessed or adjusted claims on Remittance Advices (RAs) beginning February 3, 2021, with internal control numbers (ICNs)/Claim IDs that begin with 80 (reprocessed denied claims) or 52 (mass replacements non-check related).

continued

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This billing information applies to services delivered under the FFS delivery system. Individual managed care entities (MCEs) establish and publish reimbursement, prior authorization (PA), and billing criteria within the managed care delivery system. Questions about managed care billing should be directed to the MCE with which the member is enrolled.

IHCP announces updates to procedure codes exempt from HAF, mass adjusts claims

Effective January 27, 2021, the Indiana Health Coverage Programs (IHCP) will make revisions to the claim-processing system (CoreMMIS) as outlined in *Bulletin BT202089* regarding procedure codes linked to the following revenue codes:

- Revenue code 274 – *Medical/Surgical Supplies and Devices – Prosthetic/Orthotic Devices*
- Revenue code 636 – *Pharmacy (Extension of 025X) – Drugs Requiring Detailed Coding*



The IHCP announced in *BT202089* that effective August 1, 2020, the IHCP would remove procedure codes linked to revenue codes 274 and 636 from being eligible for Hospital Assessment Fee (HAF) adjustments, for reimbursement of outpatient services. Additionally, the IHCP updated the claim-processing system to remove the 3% rate reduction described in the bulletin. The issue has been corrected and the updates apply retroactively to fee-for-service (FFS) outpatient and outpatient crossover claims with dates of service (DOS) on or after August 1, 2020.

The claim-processing system has been updated and affected FFS outpatient and outpatient crossover claims with DOS on or after August 1, 2020, will be mass adjusted. Providers should see the adjusted claims on Remittance Advices (RAs) beginning February 3, 2021, with internal control numbers (ICNs)/Claim IDs that begin with 52 (mass replacement non-check related).

This billing information applies to services delivered under the FFS delivery system. Individual managed care entities (MCEs) establish and publish reimbursement, prior authorization (PA), and billing criteria within the managed care delivery system. Questions about managed care billing should be directed to the MCE with which the member is enrolled.

IHCP announces effective date for Moderna vaccine HCPCS codes

The Indiana Health Coverage Programs (IHCP) announced Healthcare Common Procedure Coding System (HCPCS) codes for vaccine and vaccine administration for treatment of the coronavirus disease 2019 (COVID-19), in *IHCP Bulletin BT2020129*. The bulletin included a note that the Moderna vaccine had not yet been approved by the U.S. Food and Drug Administration (FDA), but that an update would be announced.

The FDA has approved the procedure codes in [Table 2](#) for the Moderna vaccine. These codes are effective retroactively for claims with dates of service (DOS) on or after December 18, 2020.

For information about billing and reimbursement, see [BT2020129](#).



continued

Table 2 – FDA-approved HCPCS codes for Moderna vaccine, effective for DOS on or after December 18, 2020

Procedure code	Description
0011A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage; first dose
0012A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage; second dose
91301	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (Coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, preservative free, 100 mcg/0.5mL dosage, for intramuscular use

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