



Information Bulletin for Primary Care Network Providers

January 2007



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Notice: Current PCN Manual On-Line

The current Utah Primary Care Network Provider Manual is available on-line. There is a link to the PCN Manual on the Medicaid Provider's web site: <http://health.utah.gov/medicaid/provhtml/provider.html> The link is at the bottom of the Provider's web page. Providers can obtain a copy of an updated page, or the entire PCN Manual, on the web site or by contacting Medicaid Information. The revision date of each page is at the top of the page. A change is typically marked in the left margin of the page with a vertical line.

This bulletin is available in editions for people with disabilities.

**Call Medicaid Information:
538-6155 or toll free 1-800-662-9651**

**PCN web site: <http://health.utah.gov/pcn>
PCN Information**

- Salt Lake City area, call 538-6155.
- In Utah, Idaho, Wyoming, Colorado, New Mexico, Arizona and Nevada, call toll-free 1-800-662-9651.
- From other states, call 1-801-538-6155.

**Medicaid web site: <http://health.utah.gov/medicaid>
Requesting a publication?**

- Send a Publication Request Form.
- by FAX: 1-801-536-0476
 - by mail to: Division Of Health Care Financing
Box 143106, Salt Lake City UT 84114-3106

07 - 28 Dental Code Change

Code D1205, Topical application of fluoride (including prophylaxis), adult, is discontinued. Code D1203, Topical application of fluoride (prophylaxis not included), adult, is open and allows two applications per calendar year.

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07 - 29 Changes in Pharmacy Coverage

1. Coverage for Implanon will be governed by the same criteria used for Norplant. It will not be a covered benefit.

2. Medicaid will not cover Vitamin B-12.

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07 - 30 Hospital ER-Only Diagnoses

Hospital ER-Only Diagnoses list additions/changes effective October 1, 2006

320-322	Bacterial Meningitis
323	Encephalitis, Myelitis, and Encephalomyelitis
324-326	Intracranial and intraspinal abscess
338.11	Acute pain due to trauma
341.2-341.21	Acute transverse myelitis
518.7	Transfusion related acute lung injury
518.81	Acute respiratory failure
519.11	Acute bronchospasm
608.2- 608.24	Torsion of testis
649.3-649.34	Coagulation defects
770.87	Respiratory arrest of newborn
770.88	Hypoxemia of newborn
779.85	Cardiac arrest of newborn
780.31	Febrile convulsions
780.32	Complex febrile convulsions
958.91-958.99	Traumatic Compartment Syndrome
995.0	Other anaphylactic shock
995.1	Angioneurotic edema
995.21	Arthus phenomenon
995.23	Unspecified adverse effect of insulin
995.27	Other drug allergy
995.29	Unspecified adverse effect of other drug, medicinal, and biological substance properly administered
995.4	Shock due to anesthesia
995.50-995.59	Child maltreatment syndrome
995.61-995.69	Anaphylactic shock due to adverse food reaction
995.81-995.83	Other specified adverse effects, adult maltreatment
995.91-995.94	Systemic inflammatory response syndrome

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07 - 31 Coding Highlights**Covered Codes Effective January 1, 2007**

- 77051 Computer-aided detection (computer algorithm analysis of digital image data for...)
Note: Either standard mammography or digital mammography may be completed, payment will only be made for the base code (77055, 77056, 77057)
- 77052 Computer-aided detection (computer algorithm analysis of digital image data for...)
Note: Either standard mammography or digital mammography may be completed, payment will only be made for the base code (77055, 77056, 77057)
- 77055 Mammography, unilateral
- 77056 Mammography, bilateral
- 77057 Screening mammography; bilateral (2-view film study of each breast)
- 82107 Alpha-fetoprotein (AFP); AFP-L3 fraction isoform and total AFP (including ratio)
- 83698 Lipoprotein-associated phospholipase A2, (LP-PLA2)
- 86788 Antibody; west nile virus, IgM
- 86789 Antibody; west nile virus
- 87498 Infectious agent detection by nucleic acid (DNA or RNA); enterovirus, amplified probe...
- 87641 Infectious agent detection by nucleic acid (DNA or RNA); Staphylococcus aureus, methicillin...

Laboratory Issue

Please note that the following code is limited to one payment per service. This edit follows the American Society of Microbiology Guidelines.

- 87621 Infectious agent detection by nucleic acid; papilloma virus, human, amplified probe technique

25 Modifier

According to CPT guidelines, the 25 modifier is intended to indicate significant additional evaluation and management service beyond the evaluation and management service included in a procedure when the physician thinks significant separately identifiable evaluation and management service was done beyond the procedure billed. The physician is responsible for reviewing documentation to submit claims which warrant an E&M service in addition to the service provided in another procedure.

Medicaid has provided a period of time to evaluate the 25 modifier and has faced an overwhelming number of claims with incorrect coding. Additional information to educate providers was given through provider training in August and September and in the October MIB article (06-101). Claims are being submitted with the 25 modifier when the evaluation and management service was the only code submitted, submitted with a minor procedure such as drawing blood or giving a vaccine which does not include an E&M service, and submitted when the services are only those included in the procedure. The majority of claims would process through the system without the 25 modifier. NOTE: Only one E&M service is paid on a date of service. Since the adult preventive health code pays the highest amount, it will automatically be paid when submitted with another E&M service. Do not place the 25 modifier on a second E&M service.

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