

To:
Federally Qualified
Health Centers
Nurse
Practitioners
Pharmacies
Physician
Assistants
Physician Clinics
Physicians
Rural Health
Clinics
HMOs and Other
Managed Care
Programs

New Claim Submission Requirements for Synagis® (palivizumab)

Effective immediately, pharmacy providers may submit claims for partial quantities of Synagis® (palivizumab) through the real-time pharmacy Point-of-Sale system or on the Noncompound Drug Claim form, HCF 13072 (Rev. 06/03). For example, when 120 milligrams of Synagis® are dispensed, providers are required to indicate “1.2” in Element 15 of the Noncompound Drug Claim form. Providers may no longer indicate a quantity of “2” in Element 15.

For providers who submit claims on the 837 Health Care Claim: Professional (837P) transaction or CMS 1500 claim form, if a partial amount is administered, providers are required to continue to indicate the partial amount instead of the whole amount. As a reminder, providers who submit claims for Synagis® using the 837P transaction or CMS 1500 claim form are required to indicate *Current Procedural Terminology* code 90378 (Respiratory syncytial virus immune globulin [RSV-IgIM], for intramuscular use, 50 mg, each).

For More Information

Providers may refer to the August 2004 *Wisconsin Medicaid and BadgerCare Update* (2004-66), titled “Billing Requirements for Synagis® (palivizumab),” for additional information.

Information Regarding Medicaid HMOs

This *Update* contains Medicaid fee-for-service policy and applies to providers of services to recipients on fee-for-service Medicaid only. For Medicaid HMO or managed care policy, contact the appropriate managed care organization. Wisconsin Medicaid HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *Wisconsin Medicaid and BadgerCare Update* is the first source of program policy and billing information for providers.

Although the *Update* refers to Medicaid recipients, all information applies to BadgerCare recipients also.

Wisconsin Medicaid and BadgerCare are administered by the Division of Health Care Financing, Wisconsin Department of Health and Family Services, P.O. Box 309, Madison, WI 53701-0309.

For questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our Web site at dhfs.wisconsin.gov/medicaid/.

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