

To: Blood Banks, Home Health Agencies, Individual Medical Supply Providers, Medical Equipment Vendors, Nurses in Independent Practice, Nursing Homes, Personal Care Agencies, Pharmacies, HMOs and Other Managed Care Programs

Procedure Code Updates for Disposable Medical Supplies

Effective for dates of service on and after January 1, 2008, BadgerCare Plus is updating disposable medical supplies coverage, policies and limitations to reflect 2008 Healthcare Common Procedure Coding System procedure code changes.

Effective for dates of service (DOS) on and after January 1, 2008, BadgerCare Plus is updating disposable medical supplies (DMS) coverage, policies, and limitations to reflect 2008 Healthcare Common Procedure Coding System (HCPCS) procedure code changes. These changes include the following:

- Adding new HCPCS procedure codes.
- Discontinuing a current HCPCS procedure code.
- Changing HCPCS procedure code descriptions.
- Changing policy for HCPCS procedure codes.

The BadgerCare Plus Standard Plan has adopted these procedure code changes to be consistent with HCPCS guidelines. Providers should use the procedure code that best describes the item dispensed. Providers can refer to the DMS Index for reimbursable procedure codes; the index is posted on the Wisconsin Medicaid Web site at dhfs.wisconsin.gov/medicaid/. Providers are reminded that the DMS Index is updated on a quarterly basis to reflect changes to current procedure codes.

New HCPCS Procedure Codes

The following procedure codes were added with a maximum allowable fee:

- A5083, A7027-A7029.

- B4087, B4088, B4088 with modifier 22, and B4088 with modifier 59.

The new procedure codes are not covered under the BadgerCare Plus Benchmark Plan.

Discontinued HCPCS Procedure Code

Procedure code B4086 has been discontinued effective for DOS on and after January 1, 2008.

Changed Descriptions for HCPCS Procedure Codes

The descriptions have changed for the following procedure codes:

- A4206 (Syringe with needle; sterile 1cc or less, each).
- A5105 (Urinary suspensory with leg bag, with or without tube, each).

Note: Procedure code A4206 is covered under the Benchmark Plan.

Policy Changes for HCPCS Procedure Codes

Procedure code T1999 with modifier U5 replaces procedure code T1999 with modifier U4, which has been discontinued for DOS on and after January 1, 2008.

The following procedure codes contain maximum quantity changes and maximum allowable fee changes.

Maximum Quantity Changes

The quantities have changed for procedure codes A7030, A7032, A7033, A7034, and S8101.

Maximum Allowable Fee Changes

The maximum allowable fees have changed for procedure codes A5063, S8101, and T1999 with modifier U5.

New Requests for Prior Authorization

Effective immediately, providers are required to use the new procedure codes for new prior authorization (PA) requests (with future DOS) received by Wisconsin Medicaid.

Prior Authorizations Currently in Effect

For an approved and modified PA with discontinued procedure codes currently in effect with grant dates before January 1, 2008, and expiration dates on and after January 1, 2008, providers will be required to amend the PA to request a valid procedure code.

Discontinued procedure codes will remain effective for DOS before January 1, 2008. For claims related to PAs with DOS before January 1, 2008, providers are required to use the discontinued procedure codes.

For More Information

Providers with questions regarding procedure code changes in the DMS Index may call Provider Services at (800) 947-9627 or (608) 221-9883.

Information Regarding Managed Care

This *BadgerCare Plus Update* contains fee-for-service policy and applies to services members receive on a fee-for-service basis only. For managed care policy, contact the appropriate managed care organization. BadgerCare Plus HMOs are required to provide at least the same benefits as those provided under fee-for-service arrangements.

The *BadgerCare Plus Update* is the first source of program policy and billing information for providers. All information applies to Medicaid and BadgerCare Plus unless otherwise noted in the *Update*.

Wisconsin Medicaid and BadgerCare Plus are administered by the Division of Health Care Access and Accountability, 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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