

Affected Programs: BadgerCare Plus, Medicaid, Wisconsin Chronic Disease Program

To: Ambulatory Surgery Centers, Anesthesiologist Assistants, Certified Registered Nurse Anesthetists, End-Stage Renal Disease Service Providers, Federally Qualified Health Centers, Independent Labs, Nurse Practitioners, Nurse Midwives, Physician Assistants, Physician Clinics, Physicians, Rural Health Clinics, HMOs and Other Managed Care Programs

2009 CPT and HCPCS Procedure Code Changes for Physicians and Related Providers

Effective for dates of service on and after January 1, 2009, ForwardHealth is updating physician and physician-related provider coverage, policies, and limitations of services to reflect the 2009 *Current Procedural Terminology* (CPT) and Healthcare Common Procedure Coding System (HCPCS) code changes. These changes include the following:

- Adding new CPT and HCPCS procedure codes.
- Enddating discontinued procedure codes.
- Implementing revisions to the procedure codes for end-stage renal disease-related services.

Procedure Code Changes

ForwardHealth is updating 2009 *Current Procedural Terminology* (CPT) and Healthcare Common Procedure Coding System (HCPCS) codes for physicians and related providers effective for dates of service (DOS) on and after January 1, 2009. These changes include the following:

- Adding new CPT and HCPCS procedure codes.
- Enddating discontinued procedure codes.
- Implementing revisions to the procedure codes for end-stage renal disease (ESRD)-related services.

Providers should refer to the 2009 CPT and HCPCS books for new procedure codes and deleted procedure codes. These procedure code changes affect the BadgerCare Plus Standard Plan, the BadgerCare Plus Benchmark Plan, the BadgerCare Plus Core Plan for

Childless Adults, Medicaid, and Wisconsin Chronic Disease Program (WCDP).

Added Procedure Codes

Information on coverage, policy, and maximum allowable fees related to the new CPT and HCPCS procedure codes, including the applicable rendering provider types, is available by accessing the interactive maximum allowable fee schedules on the ForwardHealth Portal at www.forwardhealth.wi.gov/. Click the Fee Schedules link in the Providers panel on the Portal, and then click the Interactive Max Fee Search link in the Quicklinks box. Policy information for CPT and HCPCS procedure codes is subject to change; providers should access the interactive fee schedules and the Online Handbook for the most current policy and coverage information.

Certain procedure codes added for January 1, 2009, were incorrectly listed as noncovered procedures in January and February 2009. ForwardHealth may have incorrectly denied claims for these procedure codes submitted during this time. ForwardHealth will automatically reprocess claims with inappropriate denials; reprocessed claims will appear on future Remittance Advices.

Discontinued Procedure Codes

Effective for DOS on and after January 1, 2009, ForwardHealth ended coverage of CPT and HCPCS procedure codes that are discontinued for 2009.

Procedure Code Revisions for End-Stage Renal Disease-Related Services

Effective for DOS on and after January 1, 2009, the following national revisions to procedure codes for ESRD-related services were made:

- Code ranges G0308-G0327 and 90918 -90925 have been discontinued.
- Code range 90951-90970 has been added.

ForwardHealth previously required providers to submit claims for professional ESRD-related services with HCPCS procedure codes G0308-G0327.

Effective for DOS on and after January 1, 2009, providers are required to submit claims for professional ESRD-related services with the following new CPT procedure codes (code range 90951-90970):

- Procedure codes 90951-90962 (replaces procedure codes G0308-G0319) for members who are receiving dialysis treatment somewhere other than in their home.
- Procedure codes 90963-90966 (replaces procedure codes G0320-G0323) for members receiving home dialysis treatment.
- Procedure codes 90967-90970 (replaces procedure codes G0324-G0327) for members receiving home dialysis treatment who are hospitalized during the month.

Policy regarding ESRD-related services is the same under the new procedure codes as it was under the discontinued codes.

Information Regarding Managed Care Organizations

This *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 (MCO). Managed care organizations are required to provide at least the same benefits as those provided under fee-for-service arrangements.

Members enrolled only in WCDP are not enrolled in MCOs.

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

Wisconsin Medicaid, BadgerCare Plus, SeniorCare, and Wisconsin Chronic Disease Program are administered by the Division of Health Care Access and Accountability, Wisconsin Department of Health Services (DHS). The Wisconsin Well Woman Program is administered by the Division of Public Health, Wisconsin DHS.

For questions, call Provider Services at (800) 947-9627 or visit our Web site at www.forwardhealth.wi.gov/.

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