

Affected Programs: BadgerCare Plus, Medicaid

To: Ambulatory Surgery Centers, Hospital Providers, Medical Equipment Vendors, Nurse Practitioners, Physician Assistants, Physician Clinics, Physicians, HMOs and Other Managed Care Programs

Clarifications Regarding Coding Requirements for Intrathecal Pump Prior Authorizations

This *ForwardHealth Update* clarifies coding requirements for intrathecal pump prior authorizations. Effective for dates of service on and after April 1, 2014, providers are required to use a modifier when submitting PA requests and subsequent claims for trial doses of either baclofen or opioid pain killers.

Effective for dates of service on and after April 1, 2014, providers are required to use modifier U5 when submitting prior authorization (PA) requests and subsequent claims for trial bolus doses of either baclofen or opioid pain killers using either of the following *Current Procedural Terminology* procedure codes:

- 62310 (Injection[s], of diagnostic or therapeutic substance[s] [including anesthetic, antispasmodic, opioid, steroid, other solution], not including neurolytic substances, including needle or catheter placement, includes contrast for localization when performed, epidural or subarachnoid; cervical or thoracic).
- 62311 (Injection[s], of diagnostic or therapeutic substance[s] [including anesthetic, antispasmodic, opioid, steroid, other solution], not including neurolytic substances, including needle or catheter placement, includes contrast for localization when performed, epidural or subarachnoid; lumbar or sacral [caudal]).

Providers who have had claims deny for lack of PA for epidural injections not related to an intrathecal pump trial may resubmit claims without PA. Epidural injections that

are not performed as trials for intrathecal pump placement should not be submitted with the U5 modifier.

Claims submitted with the U5 modifier will be referenced by ForwardHealth clinicians when the provider seeks authorization for permanent pump implantation.

As a reminder, intrathecal pumps for baclofen and opioid delivery require a trial period be completed prior to the implantation surgery. Trial periods must last a minimum of 24 hours. A separate PA is required for both the trial period and the implantation surgery.

For complete PA approval criteria for intrathecal infusion pump trial periods and implantation surgeries, refer to the Intrathecal Infusion Pumps for Spasticity or Pain topic (topic #16818) of the Prior Authorization Guidelines chapter of the Prior Authorization section of the Physician service area of the Online Handbook.

Information Regarding Managed Care Organizations

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

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 AIDS Drug Assistance Program and the Wisconsin Well Woman Program are 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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