

To:
Pharmacies
Blood Banks
Dispensing
Physicians
HMOs and Other
Managed Care
Programs
Software Vendors

Addition of the diagnosis code field to the Electronic Media Claims format

Effective December 1, 1999, the Electronic Media Claims (EMC) format will accept values in the diagnosis code field.

The addition of the diagnosis code is specific to Medicaid pharmacy claim submissions only. Electronic pharmacy claim submissions for the Health Insurance Risk Sharing Plan (HIRSP) are not affected. Use of the diagnosis code field is optional for providers billing Medicaid claims through Electronic Media Claims (EMC). Providers and billing services choosing to use the diagnosis field are required to test with Wisconsin Medicaid's EMC department prior to submitting claims.

Providers and billing services choosing not to make EMC format modifications should submit claims for diagnosis-restricted drugs on paper claim forms or through real-time Point of Sale (POS), which provides real-time claim adjudication.

Diagnosis code

The Pharmacy Claim Type 10 (CT 10) EMC record layouts are revised to include entry of an *International Classification of Diseases, 9th Revision, Clinical Modification* (ICD-9-CM) diagnosis code. This allows pharmacy providers and billing services to submit claims for drugs that have diagnosis restrictions.

- The diagnosis code field "DIAG" is an alphanumeric, left-justified, right-zero-filled field located in positions 70-74 of the claim header. Use this field when submitting a

diagnosis-restricted drug by entering the applicable ICD-9-CM code.

- As with all EMC fields, the diagnosis code field must be filled without a decimal point.
- Only one diagnosis code can be submitted per claim.

Required Point of Sale or paper claim submission

The following claims must be submitted through real-time POS or on paper claim forms:

- Pharmaceutical Care (PC) services.
- Compound drugs.
- Diagnosis-restricted drugs, if software changes are not made to add the diagnosis code field.

The current Pharmacy (CT 10) record layouts manual, including the diagnosis code field, was made available in March 1999 and is dated March 2, 1999. If you have not received the current edition, or if you have any questions regarding the formats, please contact the EMC department at (608) 221-4746, ext. 3037 or 3041.

This Update applies to fee-for-service Medicaid providers only. If you are a Medicaid HMO network provider, contact your managed care organization for more information about their billing procedures. Wisconsin Medicaid HMOs are required to provide at least the same benefits provided under fee-for service arrangements.

The *Wisconsin Medicaid Update* is the first source for provider information including Medicaid policy and billing information.

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

For provider questions, call Provider Services at (800) 947-9627 or (608) 221-9883 or visit our web site at: www.dhfs.state.wi.us/medicaid/