AHCCCS
Arizona Health Care Cost Containment System

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Encounter Manual

The 2015 Encounter Manual can be found on the AHCCCS website: http://www.azahcccs.gov/commercial/ContractorResources/encounters/EncounterManual.aspx

Encounter Processing Schedule

The Current Encounter Processing Schedule for Oct - Dec 2015 and Jan - March 2016 can be found on the AHCCCS website: http://www.azahcccs.gov/commercial/ContractorResources/encounters/encounters.aspx#Encounter_Processing_Schedules

Reinsurance News

Regarding: **– Locked out of Reinsurance system**

The Reinsurance Databases will be closed for Online Updates from **the first Wednesday of the month, starting at 5pm until the following Wednesday morning.**

With the implementation of the new AFIS/BREAZ process, ADOA has implemented an extended timeline to allow sufficient time to QC/balance payments for all Agencies.

Encounters:

For Encounters "**no online voids can be done during this time**".

Coverage Code

Effective for dates of service on or after January 1, 2015 the coverage code for the HCPCS code listed below has been changed to 01 (Covered Service/Code Available):

Code	Description
A9276	Sensor; invasive (e.g. subcutaneous), disposable, for use with interstitial continuous glucose moni-
A9277	Transmitter; external, for use with interstitial continuous glucose monitoring system
A9278	Receiver (monitor); external, for use with interstitial continuous glucose monitoring system

Limits and Frequency

The limit and frequency has been changed for the following HCPCS Codes on RF113 Screen:

Code	Description	Procedure Daily Maximum	Frequency
A9276	Sensor; invasive (e.g., sugcutaneous), disposable, for use with interstitial continuous glucose monitoring system, one unit = 1 day supply	1	1 day
A9277	Transmitter; external, for use with interstitial continuous glucose monitoring system	1	6 month
A9278	Receiver (monitor); external, for use with interstitial continuous glucose monitoring system	1	3 years

Modifiers

- Effective for dates of service on or after January 1, 2013 the modifier 78 (Return to O.R. for related procedure post-op) for the CPT code 37211 (Insertion of catheter into artery for drug infusion for blood clot including radiological supervision and interpretation).

- Effective for dates of service on or after January 1, 2010 (Note the date has been retro) the modifier AS (PA SVCS for Assistant) has been added to the CPT code 43282 (Repair of hernia of muscle at esophagus and stomach with implantation of mesh using an endoscope).

- Effective for dates of service on or after January 1, 2012 the modifier 59 (Distinct procedural service) has been added to the CPT code 81408 (Molecular pathology procedure level 9) on the Reference screen RF121.

- Effective for dates of service on or after January 1, 2014 the modifier EP (EPSDT Services/Amb trip ECF) has been added to the CPT codes 99213 (Established patient office or other outpatient visit, typically 15 minutes) and 99214 (Established patient office or other outpatient, visit typically 25 minutes).

- Effective for dates of service on or after January 1, 2014 the modifier 22 (Unusual procedural service) has been added to the CPT code 52356 (Crushing of stone in urinary duct (ureter) with stent using an endoscope)).

- The modifier 80, end date has been changed to 99/99/9999 for the CPT code 58356 (Destruction Of Lining Of Uterus Using Ultrasound Guidance) for PT 19 (Registered Nurse Practitioner) on the RF618 reference screen.

- Effective for dates of service on or after January 1, 2014 the following modifiers have been added to the CPT Codes below on the Reference screen RF121.

Code	**Description**	**Modifier**			
		51 (Multiple procedures)	52 (Reduced Services)	A1 (Principal Physician of Record)	PT (Colorectal cancer screening test)
45378	Diagnostic examination of large bowel using				**X**
92521	Evaluation of Speech Fluency		**X**		
92522	Evaluation of speech sound production		**X**		
93531	Insertion of catheter into right and left heart chambers for evaluation of congenital abnor-	**X**			
99233	Subsequent Hospital Inpatient Care, Typically			**X**	

- Effective for dates of service on or after April 1, 2015 the HCPCS code E0471 (Respiratory assist device; bi-level pressure capabioity) can now report the modifier KX (Requirements specified).

- Effective for dates of service on or after January 1, 2015 the modifier SZ (Habilitative Services) has been added to the CPT codes:
    - 97110-Therapeutic exercise to develop strength, endurance, range of motion, and flexibility, each 15 minutes
    - 97112-Therapeutic procedure to re-educate brain-to-nerve-to-muscle function, each 15 minutes
    - 97140-Manual (physical) therapy techniques to 1 or more regions, each 15 minutes
- Effective for dates of service on or after January 1, 2015 the modifier PO (Services, procedures and/or surgeries furnished at off-campus provider-based outpatient departments) has been added to the reference table RF114 (Procedure Modifier).
- Effective for dates of service on or after January 1, 2015 the modifier Q6 (Locum Tenens) to HCPCS code J9035 (Injection, Bevacizumab, 10 mg).
- Effective for dates of service on or after January 1, 2014 the modifier AS (PA Services for Assistant) has been added to the CPT code 11008 (Removal of infected artificial material or mesh from abdomen).

Procedure Daily Maximum

The procedure daily maximum has been changed for the following HCPCS codes:

		Procedure Daily Maximum			
Code	**Description**	**000003**	**000010**	**000099**	**000999**
B4102	Enteral formula, for adults, used to replace fluids and electro-		**X**		
B4103	Enteral formula, for pediatrics, used to replace fluids and		**X**		
B4149	Enteral formula, manufactured blenderized natural foods with intact nutrients includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding tube, 100 calories = 1 unit			**X**	**X**
B4150*	Enteral formula, nutritionally complete with intact nutrients, includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding			**X**	
B4152*	Enteral formula, nutritionally complete, calorically dense (equal to or greater than 1.5 kcal/ml) with intact nutrients, includes proteins, fats, carbohydrates, vitamins and minerals, may include fiber, administered through an enteral feeding			**X**	
B4153*	Enteral formula, nutritionally complete, hydrolyzed proteins (amino acids and peptide chain), includes fats, carbohydrates, vitamins and minerals, may include fiber, administered			**X**	
B4154*	Enteral formula, nutritionally complete, for special metabolic needs, excludes inherited disease of metabolism, includes altered composition of proteins, fats, carbohydrates, vitamins and/or minerals, may include fiber, administered			**X**	**X**
B4155*	Enteral formula, nutritionally incomplete/modular nutrients, includes specific nutrients, carbohydrates (e.g. glucose polymers), proteins/amino acids (e.g. glutamine, arginine), fat (e.g. medium chain triglycerides) or combination, adminis-			**X**	**X**
Q9961	High osmolar contrast material, 250-299 mg/ml iodine concentration, per ml				**X**
Q9962	High osmolar contrast material, 300-349 mg/ml iodine concentration, per ml				**X**
Q9963	High osmolar contrast material, 350-399 mg/ml iodine concentration, per ml				**X**
Q9964	High osmolar contrast material, 400 or greater mg/ml iodine concentration, per ml				**X**
Q9965	Low osmolar contrast material, 100-199 mg/ml iodine concentration, per ml				**X**
Q9966	Low osmolar contrast material, 200-299 mg/ml iodine concentration, per ml				**X**
Q9967	Low osmolar contrast material, 300-399 mg/ml iodine concentration, per ml				**X**
Q9968	Injection, non-radioactive, non-contrast, visualization adjunct (e.g., methylene blue, isosulfan blue), 1 mg				**X**
87798	Infectious Agent Detection By Nucleic Acid (DNA Or RNA)	**X**			

Note* the limit and frequency have been removed from these codes on RF113 and RF127.

Place of Service (POS)

- Effective for dates of service on or after January 1, 2015 the following HCPCS codes can be reported with the POS 11 (Office):

Code	Descriptions
A4606	Oxygen probe for use with oximeter device, replacement
A4620	Variable concentration mask
A4649	Surgical supply; miscellaneous
A4660	Sphygmomanometer/blood pressure apparatus with cuff and stethoscope
A4670	Automatic blood pressure monitor
E0445	Oximeter device for measuring blood oxygen levels non-invasively
E0485	Oral device/appliance used to reduce upper airway collapsibility, adjustable or non-adjustable, prefabricated,
E0600	Respiratory suction pump, home model, portable or stationary, electric
E0780	Ambulatory infusion pump, mechanical, reusable, for infusion less than 8 hours
E1353	Regulator
E1354	Oxygen accessory, wheeled cart for portable cylinder or portable
E1399	Durable medical equipment, miscellaneous
R0076	Transportation of portable EKG to facility or location, per patient
99188	Application of topical fluoride

- Effective for dates of service on or after January 1, 2014 the POS 11 (Office) has been added to the HCPCS code A4290 (Sacral Nerve Stimulation Test Lead, Each).

- Effective for dates of service on or after January 1, 2014 the POS 22 (Outpatient Hospital) can be reported with the HCPCS code J7324 (Hyaluronan or derivative, orthovisc, for intra-articular injection, per dose).

- Effective for dates of service on or after January 1, 2014 the POS 11 (Office) has been added to the HCPCS code A4290 (Sacral nerve stimulation test lead, each).

- Effective for the specified dates of service the POS 11 (Office) has been added to the following CPT and HCPCS codes with various begin dates.

CODES	DEFINITION	BEGIN DATE
36830	Connection of tube graft to vein and artery for dialysis	1/1/2015
93041	Rhythm ECG, 1-3 leads	10/1/1982
99070	IV tubing	10/1/1982
A4207	Syringe w/needle	3/1/1989
A4213	Syringe w/needle	3/1/1989
A4222	Infusion supplies	1/1/1997
A4615	Nasal cannula for oxygen	10/1/1982
A4616	Oxygen tubing per foot	10/1/1982
A4628	Yankauer suction	1/1/1996
J1094	Decadron	1/1/2003
J1885	Torado/Ketorolac	1/1/1993
J2001	Lidocaine	1/1/2004
J2250	Versed/Midazolam	1/1/1996
J2370	Ephedrine	3/1/1989
J2405	Zofran/Ondansetrol	1/1/1993
J2550	phenergan	3/1/1989
J3010	Fentenyl	3/1/1989
J3490	Unclassified Drugs	3/1/1989
J7030	Normal saline	3/1/1989
J7120	Ringers lactate	3/1/1989

Laboratory Indicator

Effective for dates of service October 1, 2015 the laboratory indicator W (CLIA Waived) has been removed on RF113 for the following CPT codes:

Code	Description
81002	Urinalysis, Manual Test
81025	Urine Pregnancy Test
82270	Stool Analysis For Blood To Screen For Colon Tumors
82272	Stool Analysis For Blood
82962	Blood Glucose (Sugar) Test Performed By Hand-Held Instrument
83026	Hemoglobin Level
84830	Ovulation Tests
85013	Red Blood Cell Hemoglobin Concentration
85651	Red Blood Cell Sedimentation Rate, To Detect Inflammation

Provider Type (PT)

- Effective for dates of service on or after January 1, 2015 the PT 12 (Certified Registered Nurse Anesthetist) can now report the CPT codes:
  64488 Injections of local anesthetic for pain control and abdominal wall analgesia on both sides) and
  64489 Continuous infusions of local anesthetic for pain control and abdominal wall analgesia on both sides).

- Effective for dates of service on or after October 1, 2015 the PT 54 (Dental Hygienist) can report the following codes:

Code	Description
D4341	Periodontal Scaling And Root Planing - Four Or More Teeth Per Quadrant
D4342	Periodontal Scaling And Root Planing - One To Three Teeth, Per Quadrant
D4355	Full Mouth Debridement To Enable Comprehensive Evaluation And Diagnosis
D4910	Periodontal Maintenance
D9210	Local Anesthesia Not In Conjunction With Operative Or Surgical Procedures

- Effective for dates of service on or after January 1, 2015 the PT 19 (Registered Nurse Practitioner) can report the CPT code 64450 (Injection of anesthetic agent, other peripheral nerve or branch).

- The HCPCS code L0112 (Cranial cervical orthosis, congenital torticollis type, with or without soft interface material, adjustable range of motion joint, custom fabricated) has been **removed** from the reference screen RF618 for the provider type 10 (Podiatrist).

- Effective for dates of service on or after January 1, 2014 the PT 19 (Registered Nurse Practitioner) can reported the CPT code 27786 (Closed treatment of broken ankle). The CPT code 95992 (Repositioning maneuvers for treatment of vertigo, per day) can also be reported.

- Effective for dates of service on or after January 1, 2015 the HCPCS code J1439 (Injection, Ferric Carboxymaltose, 1mg) and J3121 (Injection, testosterone enanthate, 1 mg) can now be reported by the following PT's. 08 (MD-Physician); 18 (Physician's Assistant); 19 (Registered Nurse Practitioner) and 31 (DO-Physician Osteopath)

- Effective for dates of service on or after January 1, 2015 the PT 08 (MD-Physician); and 31 (DO-Physician Osteopath) can report the following HCPCS codes:

  J0153 (Injection, adenosine, 1 mg (not to be used to report any adenosine phosphate compounds)
  J1071 (Injection, testosterone cypionate, 1mg).
  J7327 (Hyaluronan or derivative, monovisc, for intra-articular injection, per dose).

- Effective for dates of service October 1, 2015 the provider type 54 (Dental Hygienist) can report the following HCPCS codes:

  D4341 Periodontal scaling and root planing - four or more teeth per quadrant
  D4342 Periodontal scaling and root planing - one to three teeth, per quadrant
  D4355 Full mouth debridement to enable comprehensive evaluation and diagnosis
  D4910 Periodontal maintenance
  D9210 Local anesthesia not in conjunction with operative or surgical procedures

- Effective for dates of service on or after January 1, 2015 the PT 19 (Registered Nurse Practitioner) can now report the CPT code 45172 (Removal of rectal muscle growth) with modifier AS (PA SVCS FOR Assistant/At Surgery).