



<b>ISSUE DATE</b> June 24, 2013	<b>EFFECTIVE DATE</b> June 24, 2013	<b>NUMBER</b> 99-13-07
<b>SUBJECT</b>  2013 HCPCS Updates and Other Procedure Code Changes		<b>BY</b>   Vincent D. Gordon, Deputy Secretary Office of Medical Assistance Programs

**PURPOSE:**

The purpose of this bulletin is to announce changes to the Medical Assistance (MA) Program Fee Schedule as a result of implementing the 2013 Healthcare Common Procedure Coding System (HCPCS) procedure codes updates. In addition, the Department of Public Welfare (Department) is adding and end-dating other procedure codes. These changes are effective for dates of service on and after June 24, 2013.

**SCOPE:**

This bulletin applies to all providers enrolled in the MA Program who render services to recipients enrolled in the MA Fee-for-Service (FFS) delivery system. Providers rendering services under the MA managed care delivery system should address any coding or billing questions to the appropriate managed care organization (MCO).

**BACKGROUND:**

The Department is adding and end-dating procedure codes as a result of implementing the 2013 HCPCS updates published by the Centers for Medicare and Medicaid Services (CMS). The Department is also adding and end-dating other procedure codes.

**DISCUSSION:**

**Fee Schedule Revisions**

The following procedure codes are being added to the MA Program Fee Schedule as a result of the 2013 HCPCS updates:

<b>Procedure Codes and Modifiers</b>				
22586	22586 (80)	23473 (RT)	23473 (LT)	23473 (50)
23473 (80)(RT)	23473 (80)(LT)	23473 (80)(50)	23474 (RT)	23474 (LT)
23474 (50)	23474 (80)(RT)	23474 (80)(LT)	23474 (80)(50)	24370 (RT)

**COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:**

The appropriate toll free number for your provider type

Visit the Office of Medical Assistance Programs Web site at  
<http://www.dpw.state.pa.us/provider/healthcaremedicalassistance/index.htm>

24370 (LT)	24370 (50)	24370 (80)(RT)	24370 (80)(LT)	24370 (80)(50)
24370 (SG)	24371 (RT)	24371 (LT)	24371 (50)	24371 (80)(RT)
24371 (80)(LT)	24371 (80)(50)	24371 (SG)	32554 (RT)	32554 (LT)
32554 (50)	32554 (SG)	32555 (RT)	32555 (LT)	32555 (50)
32555 (SG)	32556 (RT)	32556 (LT)	32556 (50)	32556 (SG)
32557 (RT)	32557(LT)	32557(50)	32557(SG)	32701
32701 (SG)	36221	36221 (SG)	36222 (RT)	36222 (LT)
36222 (50)	36222 (SG)	36223 (RT)	36223 (LT)	36223 (50)
36223 (SG)	36224 (RT)	36224 (LT)	36224 (50)	36224 (SG)
36225 (RT)	36225 (LT)	36225 (50)	36225 (SG)	36226 (RT)
36226 (LT)	36226 (50)	36226 (SG)	36227	36228
37197	37197 (SG)	37211	37211 (SG)	37212
37212 (SG)	37213	37214	38243	38243 (SG)
52287	52287 (SG)	64615	64615 (SG)	78012
78012 (TC)	78012 (26)	78013	78013 (TC)	78013 (26)
78014	78014 (TC)	78014 (26)	78071	78071 (TC)
78071 (26)	78072 (26)	82777	86711	86828
86829	86830	86831	86832	86833
86834	86835	87631	87632	87633
87910	87912	90672	90686	90791
90792	90792(HB)	90832	90832 (HB)	90834
90834 (HB)	90837	90837 (HB)	92920	92920 (SG)
92921	92924	92924 (SG)	92925	92928
92928 (SG)	92929	92933	92933 (SG)	92934
92937	92937 (SG)	92938	92941	92941 (SG)
92943	92943 (SG)	92944	93653	93653 (SG)
93654	93654 (SG)	93655	93656	93656 (SG)
93657	95017	95018	95076	95079
95782	95782 (TC)	95782 (26)	95783	95783 (TC)
95783 (26)	95907	95907 (TC)	95907 (26)	95908
95908 (TC)	95908 (26)	95909	95909 (TC)	95909 (26)
95910	95910 (TC)	95910 (26)	95911	95911 (TC)
95911 (26)	95912	95912 (TC)	95912 (26)	95913
95913 (TC)	95913 (26)	95924	95924 (TC)	95924 (26)
A4435	D1208	G0458	G0458 (SG)	J0890

The following procedure codes are being added to the MA Program Fee Schedule as a result of significant program exception requests:

Procedure Codes and Modifiers				
49041	49041 (SG)	92583	92986	92986 (SG)
J0886				

The following procedure codes are being end-dated from the MA Program Fee Schedule either as a result of the 2013 HCPCS updates or because they were previously end-dated by CMS:

Procedure Codes					
31656	31715	32420	32421	32422	37201
37203	37209	43234	65805	71040	71060
75650	75660	75662	75665	75671	75676
75680	75685	75900	75961	78000	78001
78003	78006	78007	78010	78011	83890
83891	83892	83893	83894	83896	83897
83898	83900	83901	83903	83904	83905
83906	83907	83908	83909	83912	83913
88384	88385	88386	90718	90801	90802
90804	90805	90806	90807	90808	90809
90810	90811	90812	90813	90814	90815
90816	90817	90818	90819	90821	90822
90862	92980	92981	92982	92984	92995
92996	93651	93652	95010	95015	95075
95900	95903	95904	95934	95936	D1203
E1065	G0290	G0291	Q4055	S3818	S3819
S3820	S3822	S3823			

Additionally, the Department is end-dating the following procedure code because it is an operative technique and integral to the surgical procedure; therefore, it is not eligible for separate payment:

Procedure Code	Procedure Description
69990	Microsurgical techniques, requiring use of operating microscope (list separately in addition to code for primary procedure)

No new authorizations will be issued for this procedure code on and after June 24, 2013. For the above procedure code that had a prior authorization issued before June 24, 2013, providers should submit claims using the end-dated procedure code, as set forth in the authorization issued by the Department. The Department will accept claims with the end-dated procedure code until June 24, 2014, for those services that were previously prior authorized.

*Prior Authorization Requirements*

The following procedure codes being added to the MA Program Fee Schedule are considered advanced radiology services and will require prior authorization as described in MA Bulletin 99-08-08 (Prior Authorization of Advanced Radiologic Imaging Services) which may be viewed online at: <http://services.dpw.state.pa.us/olddpw/bulletinsearch.aspx?BulletinId=4377>

<b>Procedure Code</b>	<b>Procedure Description</b>
78071	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT)
78072	Parathyroid planar imaging (including subtraction, when performed); with tomographic (SPECT), and concurrently acquired computed tomography (CT) for anatomical localization

*Updates to Procedure Codes Currently on the MA Program Fee Schedule*

The Department will be adding pricing/informational modifiers (UB), (U7) and ((UB)(HB)) to the following procedure codes currently on the MA Program Fee Schedule:

<b>Procedure Codes</b>	
99201	99211

**Service Limits**

The MA Program has established service limits for some of these procedure codes. If needed, a waiver of the limit may be requested through the 1150 Administrative Waiver (Program Exception) process.

**Managed Care Delivery System**

MA MCOs are not required to impose the service limits that apply in the MA FFS delivery system, although they are permitted to do so. MA MCOs may not impose service limits that are more restrictive than the service limits established in the MA FFS delivery system. An MA MCO that chooses to establish service limits must notify their network providers and members of the limits before implementing the limits.

**PROCEDURE:**

Attached is the list of “2013 HCPCS and Other Procedure Code Updates, effective June 24, 2013”. Included in this document are the procedure codes, procedure code descriptions, procedure code modifiers, prior authorization requirements, and limits for the procedure codes discussed in this MA Bulletin. The procedure codes that require prior authorization are identified by a "Yes" under the "Prior Authorization Required" heading.

In addition to the information listed above, the attachment includes the number of post-operative days associated with newly added surgical services. MA regulations at 55 Pa.Code § 1150.54, related to surgical services, states that the fee for inpatient and outpatient surgical procedures includes post-operative inpatient, outpatient office and home visits provided by the practitioner who performed the procedure for the number of postoperative days specified in the MA Program Fee Schedule.

The MA Program Fee Schedule will be updated to reflect these changes. Providers may access the on-line version of the fee schedule at the Department's website at: <http://www.dpw.state.pa.us/publications/forproviders/schedules/mafeeschedules/index.htm> .

**ATTACHMENTS:**

[2013 HCPCS and Other Procedure Code Updates, Effective June 24, 2013](#)