

Bulletin Number: MSA 09-27

Distribution: Practitioners, Federally Qualified Health Centers, Rural Health Clinics, Tribal Health Centers, Hospitals, Local Health Departments, Medicaid Health Plans and Mental Health and Substance Abuse

Issued: June 1, 2009

Subject: New Healthcare Common Procedure Coding System (HCPCS) Procedure Code Coverage and an Adjustment to the Fee Screen for Essure Hysteroscopic Sterilization provided in the Office Setting

Effective: July 1, 2009

Programs Affected: Adult Benefits Waiver (ABW), Children's Special Health Care Services (CSHCS), Medicaid, Maternity Outpatient Medical Services (MOMS), and Plan First!

This bulletin notifies providers of the HCPCS code change and fee screen adjustment that will be implemented by the Michigan Department of Community Health (MDCH) for dates of service on and after July 1, 2009. Please note that this notice is distributed to a broad range of providers and not all codes listed will apply to your scope of practice and/or beneficiary program coverage.

Listed below is the new HCPCS procedure code covered by MDCH. The coding information provided is based on the most recent file from the Centers for Medicare & Medicaid Services (CMS). Refer to the CMS website at www.cms.hhs.gov >> Medicaid >> HCPCS Codes for State Medicaid >> Alpha-Numeric HCPCS Quarterly Update >> Other Codes, effective July 2009 for full descriptions of the new code. Information regarding the fee screens and coverage parameters for this new code will be located in the appropriate databases available on the MDCH website at www.michigan.gov/medicaidproviders >> Billing and Reimbursement >> Provider Specific Information.

New 2009 HCPCS Procedure Code Covered By MDCH

Q2023 Injection, Factor VIII (Antihemophilic Factor, Recombinant), per I.U. (Plan First! excluded)

Fee Screen Adjustment for 58565 Essure Hysteroscopic Sterilization Procedure in the Office Setting

The fee screen for procedure code 58565 provided in the non-facility setting is increased to \$1,875.00 for dates of service on and after July 1, 2009. This fee screen may be subject to mandated fee screen adjustments. (CSHCS and MOMS excluded)

Public Comment

The public comment portion of the policy promulgation process is being conducted concurrently with the implementation of the change noted in this bulletin. Any interested party wishing to comment on the change may do so by submitting comments in writing to:

Carla Patrick-Fagan, Program Policy Analyst
Michigan Department of Community Health
Medical Services Administration
P.O. Box 30479
Lansing, Michigan 48909-7979
Phone: (517) 241-9170
Or
E-mail: patrickfaganc@michigan.gov

If responding by e-mail, please include "3rd Quarter HCPCS" in the subject line.

Manual Maintenance

Retain this bulletin until the information has been incorporated into the Michigan Medicaid Provider Manual.

Questions

Any questions regarding this bulletin should be directed to Provider Inquiry, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231, or e-mail at ProviderSupport@michigan.gov. When you submit an e-mail, be sure to include your name, affiliation, and phone number so you may be contacted if necessary. Providers may phone toll-free 1-800-292-2550.

Approved


Stephen Fitton, Acting Director
Medical Services Administration