

Distribution: Maternal and Infant Support Services 03-02

Issued: August 1, 2003

Subject: 2003 Procedure Code Updates

Effective: October 1, 2003

Programs Affected: Medicaid

This bulletin is to notify you of the HCPCS (Healthcare Common Procedure Coding System) procedure code changes for 2003 that will be implemented by the Department of Community Health (DCH) for dates of service on and after October 1, 2003.

The attached Procedure Code Appendix lists the HCPCS procedure codes being adopted by DCH for Maternal and Infant Support Services (MSS/ISS). Refer to your 2003 HCPCS or 2003 CPT code books for the full description of the new codes, as well as a full list of deleted codes, added codes, and code description.

Manual Maintenance

Replace the current Maternal and Infant Support Services Procedure Code Appendix with the attached revised Procedure Code Appendix. You may discard this bulletin when manual maintenance is completed.

Questions

Any questions regarding this bulletin should be directed to Provider Support, Department of Community Health, P.O. Box 30731, Lansing, Michigan 48909-8231 or e-mail 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.

Approval



Paul Reinhart
Deputy Director for
Medical Services Administration



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PROCEDURE CODE APPENDIX

When billing for Maternal and Infant Support Services (MSS/ISS), providers must use the unique Medicaid Provider Type 77 identification number assigned to that agency at the time of enrollment in the MSS/ISS program. Providers must use the HCFA 1500 (paper) claim form or ASC X 12N 837, version 4010 (electronic) claim with the appropriate procedure codes indicated below. The information provided in this appendix must be used in conjunction with the information contained in Billing and Reimbursement, Chapter IV of this Manual. When billing for MSS, use the Medicaid ID Number of the pregnant woman. For ISS, use the infant's ID Number.

Tables 1 and 2 below provide a crosswalk of the HCPCS 2003 code changes to be billed for dates of service on and after October 1, 2003. Refer to the HCPCS and CPT coding manual for code definitions. Code reimbursement information may be found on the MDCH website.

Table 1 - Maternal Support Services

Service	HCPCS Code	Comment
MSS assessment in the Office/Clinic	H1000	Replaces Z0001
MSS Professional Visit in Clinic/Office	* 99402	Replaces Z0002
MSS Professional Visit in Home	* 99402	Replaces Z0003
MSS Assessment in Home	H2000	Replaces Z0004
Childbirth Education	S9442	Replaces Z0005
Screening (Health Plan Clients only)	** T1023	Replaces Z0006
Transportation – Bus/van	A0110	Replaces Z0010
Transportation – Taxi	A0100	Replaces Z0011
Transportation – Volunteer Mileage	S0215	Replaces Z0012
Transportation – Other	A0170	Replaces Z0013

* The 99402 code is utilized for all MSS and ISS visits occurring in the home, office or places other than the home. Home visits are reimbursed at a different rate than clinic visits. To receive appropriate reimbursement for visits, it is important that providers include the place of service when billing these codes. Reimbursement for visits will be determined by the place of service code entered on the claim. For purposes of billing, coverage is limited to a 30-minute visit.

**The Medicaid Health Plans may report MSS screens performed on their enrollees using code T1023. This is for health plan encounter reporting. There is no reimbursement for this code.



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Table 2 - Infant Support Services

Service	HCPCS Code	Comment
ISS Assessment in Home	H2000	Replaces Z0020
ISS Professional Visit in Home	* 99402	Replaces Z0021
ISS Professional Visit other than Home	* 99402	Replaces Z0022
ISS Professional Visit for Drug/Alcohol-Exposed Infants	** 96154	Replaces Z0024
Parenting Education	S9444	Replaces Z0025
Transportation – Bus	A0110	Replaces Z0030
Transportation – Taxi	A0100	Replaces Z0031
Transportation – Volunteer Mileage	S0215	Replaces Z0032
Transportation – Other	A0170	Replaces Z0033

* The 99402 code is utilized for all MSS and ISS visits occurring in the home, office or places other than the home. Home visits are reimbursed at a different rate than clinic visits. To receive appropriate reimbursement for visits, it is important that providers include the place of service when billing these codes. Reimbursement for visits will be determined by the place of service code entered on the claim. For purposes of billing, coverage is limited to a 30-minute visit.

**For code 96154, the HCPCS definition identifies one unit as being a 15-minute session. Current policy states that each ISS visit must extend at least 30 minutes in duration to be a billable service. In order to receive full reimbursement for these services, the provider should bill for two units when using this code. Medicaid will reimburse for two units or a total of 30 minutes per code. For purposes of billing, coverage is limited to a 30-minute visit.