

Distribution: Practitioner 04-13
 (Physicians, Advanced Practice Nurses, Physical Therapists, Medical Clinics,
 FQHCs/RHCs/IHCs, Oral Surgeons, Podiatrists)
 Hospital 04-20
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Subject: January 1, 2005 Procedure Code Updates

Effective: January 1, 2005

Programs Affected: Medicaid, Children's Special Health Care Services

This bulletin is to notify you of the HCPCS (Healthcare Common Procedure Coding System) changes that will be implemented by the Michigan Department of Community Health (MDCH) for dates of service on or after January 1, 2005. Please note that this notice is distributed to a broad range of providers, and not all codes listed may apply to your scope of practice.

Listed below are the HCPCS procedure code changes being adopted by MDCH for Practitioners, Outpatient Hospitals, Independent Laboratories, and Family Planning Clinics. Any new procedure code not listed will not be covered at this time.

Refer to your 2005 CPT and/or HCPCS codebooks and CMS website, www.cms.hhs.gov for the full description of the new codes.

New 2005 HCPCS Procedure Codes Covered By Medicaid Effective 1/1/2005 For Practitioners

00561	31546	36479	46947
11004	31620	36818	47143
11005	31636	37215	47144
11006	31637	37216	47145
11008	31638	43257	47146
19296	32019	43644	47147
19297	32855	43645	48551
19298	32856	43845	48552
27412	33933	44137	50323
27415	33944	44715	50325
29866	34803	44720	50327
29867	36475	44721	50328
29868	36476	45391	50329
31545	36478	45392	50391

52402	91035	G0348	J0180
57267	91037	G0349	J0878
57283	91038	G0350	J1457
58356	91040	G0351	J1931
58565	92625	G0353	J2357
58956	93745	G0354	J2469
63050	93890	G0355	J2794
63051	93892	G0356	J3110
63295	93893	G0357	J3246
66711	95928	G0358	J3396
76077	95929	G0359	J7343
76510	95978	G0360	J7344
76820	95979	G0361	J7674
76821	97597	G0362	J9035
79005	97598	G0363	J9041
79101	G0341	G0364	J9055
79445	G0342	G0365	J9305
90465	G0343	G0366	S0116
90466	G0344	G0367	S2082
90467	G0345	G0368	S2083
90468	G0346	J0128	S2152
91034	G0347	J0135	S2348

Deleted 2004 HCPCS Procedure Codes For Practitioners

35161	79000	79900	S0163
35162	79001	88180	S0165
35582	79020	91032	S2085
50559	79030	91033	S2131
50578	79035	97601	S2255
50959	79100	J3245	
50978	79400	J3395	
78990	79420	S0115	

New 2005 HCPCS Procedure Codes Covered By Medicaid Effective 1/1/2005 For Family Planning Clinics

J7304

New 2005 HCPCS Procedure Codes Covered By Medicaid Effective 1/1/2005 For Independent Laboratories

82045	84166	87807	88189
82656	86064	88184	88360
83009	86335	88185	88367
83630	86379	88187	88368
84163	86587	88188	

Deleted 2004 HCPCS Procedure Codes For Independent Laboratories

88180

Strabismus Surgical Procedures No Longer Require Prior Authorization

Prior authorization (PA) will no longer be required for strabismus surgery for beneficiaries age 21 and over. There remains no PA requirement for this surgery for beneficiaries under age 21. The MDCH will review the utilization of these procedures over the next 6-12 months to determine whether the prior authorization requirement should be re-instituted. Providers are reminded that strabismus surgery must be medically necessary and not performed solely for cosmetic purposes.

Complete listings of covered procedure codes and 2005 fees and coverage parameters (when appropriate) will be posted on the MDCH website when available. The website address is www.michigan.gov/mdch, click on Providers, Information for Medicaid Providers, Provider Specific Information.

Manual Maintenance

This bulletin may be discarded after review.

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 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



Paul Reinhart, Director
Medical Services Administration