

IHCP *banner page*

INDIANA HEALTH COVERAGE PROGRAMS

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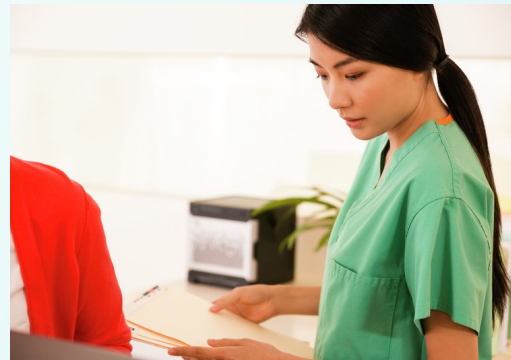
DECEMBER 13, 2022

IHCP identifies issue with telehealth professional claim denials for select procedure codes

The Indiana Health Coverage Programs (IHCP) identified a claims processing issue that affects select fee-for-service (FFS) claims for telehealth, as listed in [Table 1](#). Professional FFS claims submitted before Nov. 23, 2022, with dates of service (DOS) on or after July 21, 2022, may have denied incorrectly with explanation of benefits (EOB) 3428 – *Telemedicine service requires place of service 02 or 10 and modifier 93 or 95*.

As noted in *IHCP Bulletin* [BT202297](#), the procedure codes in [Table 1](#) delivered as virtual telehealth:

- Require an appropriate place of service (POS) code:
 - 02 – Telehealth provided other than in patient's home
 - 10 – Telehealth provided in the patient's home
- Do not require the following modifiers:
 - 93 – Synchronous telemedicine service rendered via telephone or other real-time interactive audio-only telecommunications system
 - 95 – Synchronous telemedicine service rendered via real-time interactive audio and video telecommunications system



The claim-processing system has been corrected and claims will be mass adjusted or reprocessed. Providers should see adjusted/reprocessed claims on Remittance Advices (RAs) beginning Dec. 28, 2022, with internal control numbers (ICNs)/Claim IDs that begin with 52 (mass replacements non-check related) or 80 (reprocessed denied claims).

continued

MORE IN THIS ISSUE

- [IHCP to adjust claims for COVID-19 booster vaccines and administration codes 0124A, 0134A, 91312 and 91313](#)
- [IHCP to adjust claims for Moderna and Pfizer COVID bivalent codes 0144A, 0154A, 91314 and 91315](#)
- [IHCP to adjust claims for Novavax COVID booster code 0044A](#)

Table 1 – Procedure codes for telehealth services that may have denied inappropriately with DOS on or after July 21, 2022

Procedure codes	Description
A9279	Monitoring feature/device, stand-alone or integrated, any type, includes all accessories, components and electronics, not otherwise classified
H0020	Alcohol and/or drug services; methadone administration and/or service (provision of the drug by a licensed program)
T1016	Case management, each 15 minutes
T2022	Case management, per month

IHCP to adjust claims for COVID-19 booster vaccines and administration codes 0124A, 0134A, 91312 and 91313

The Indiana Health Coverage Programs (IHCP) retroactively added coverage for new Pfizer and Moderna bivalent booster vaccines and administration for the prevention of coronavirus disease 2019 (COVID-19) as announced in *IHCP Bulletin [BT2022101](#)*.

The COVID codes listed in Table 2 were effective on Aug. 31, 2022. Claims submitted between Aug. 31, 2022, and Nov. 9, 2022, may have denied incorrectly with explanation of benefits (EOB) 4046 – *This date of service is prior to the procedure code effective date*.

The claim-processing system has been corrected and claims will be mass adjusted or reprocessed. Providers should see adjusted or reprocessed claims on Remittance Advices (RAs) beginning Dec. 21, 2022, with internal control numbers (ICNs)/Claim IDs with 52 (mass replacements non-check related) or 80 (reprocessed denied claims).

Table 2 – Newly covered COVID vaccine administration codes, effective Aug. 31, 2022

Procedure codes	Description
0124A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, bivalent spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation, booster dose
0134A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, bivalent, preservative free, 50 mcg/0.5 mL dosage, booster dose
91312	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, bivalent spike protein, preservative free, 30 mcg/0.3 mL dosage, tris-sucrose formulation, for intramuscular use
91313	Severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA-LNP, spike protein, bivalent, preservative free, 50 mcg/0.5 mL dosage, for intramuscular use

continued

IHCP to adjust claims for Moderna and Pfizer COVID bivalent codes 0144A, 0154A, 91314 and 91315

The Indiana Health Coverage Programs (IHCP) retroactively added coverage for new Pfizer and Moderna bivalent codes for the prevention of coronavirus disease 2019 (COVID-19) as announced in *IHCP Bulletin* [BT2022106](#).

The COVID codes listed in Table 3 were effective on Oct. 12, 2022. Claims submitted between Oct. 12, 2022, and Nov. 22, 2022, may have denied incorrectly with explanation of benefits (EOB) 4046 – *This date of service is prior to the procedure code effective date*.

The claim-processing system has been corrected and claims will be mass adjusted or reprocessed. Providers should see adjusted/reprocessed claims on Remittance Advices (RAs) beginning Jan. 18, 2023, with internal control numbers (ICNs)/Claim IDs with 52 (mass replacements non-check related) or 80 (reprocessed denied claims).

Table 3 – COVID-19 vaccine and administration codes, effective Oct. 12, 2022

Procedure codes	Description
0144A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA LNP, spike protein, bivalent, preservative free, 25 mcg/0.25 mL dosage, booster dose
0154A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARS CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA LNP, bivalent spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation, booster dose
91314	Severe acute respiratory syndrome coronavirus 2 (SARS CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA LNP, spike protein, bivalent, preservative free, 25 mcg/0.25 mL dosage, for intramuscular use
91315	Severe acute respiratory syndrome coronavirus 2 (SARS CoV-2) (coronavirus disease [COVID-19]) vaccine, mRNA LNP, bivalent spike protein, preservative free, 10 mcg/0.2 mL dosage, diluent reconstituted, tris-sucrose formulation, for intramuscular use

IHCP to adjust claims for Novavax COVID booster code 0044A

The Indiana Health Coverage Programs (IHCP) retroactively added coverage for new Pfizer and Moderna bivalent booster administration for the prevention of coronavirus disease 2019 (COVID-19) as announced in *IHCP Bulletin* [BT2022105](#).

The COVID codes listed in [Table 4](#) were effective on Oct. 19, 2022. Claims submitted between Oct. 19, 2022, and Nov. 22, 2022, may have denied incorrectly with explanation of benefits (EOB) 4046 – *This date of service is prior to the procedure code effective date*.

The claim-processing system has been corrected and claims will be mass adjusted or reprocessed. Providers should see adjusted or reprocessed claims on Remittance Advices (RAs) beginning Jan. 18, 2023, with internal control numbers (ICNs)/Claim IDs with 52 (mass replacements non-check related) or 80 (reprocessed denied claims).

continued

Table 4 –COVID vaccine administration code, effective Oct. 19, 2022

Procedure code	Description
0044A	Immunization administration by intramuscular injection of severe acute respiratory syndrome coronavirus 2 (SARSCoV-2) (coronavirus disease [COVID-19]) vaccine, recombinant spike protein nanoparticle, saponin-based adjuvant, preservative free, 5 mcg/0.5 mL dosage, booster dose

QUESTIONS?

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