

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT2024144 SEPTEMBER 17, 2024

PA criteria added for Spravato (esketamine) visit codes G2082 and G2083; billing rules to be enforced

Effective Oct. 17, 2024, the Indiana Health Coverage Programs (IHCP) will require prior authorization (PA) for Healthcare Common Procedure Coding System (HCPCS) codes G2082 and G2083.

Coverage of HCPCS codes G2082 and G2083 – for the provision of Spravato (esketamine) for nasal self-administration along with up to two hours of post-administration observation – was announced in *IHCP Banner Page* [BR202320](#).

For dates of service (DOS) on or after Oct. 17, 2024, these codes will be subject to the same PA criteria as apply to esketamine nasal spray HCPCS code S0013 (as announced in *IHCP Bulletin* [BT202109](#)): the member must be at least 18 years of age and taking an oral antidepressant (see Table 1).



This change will be reflected in the next regular update to the Professional Fee Schedule and Outpatient Fee Schedule, accessible from the [IHCP Fee Schedules](#) page at in.gov/medicaid/providers.

Table 1 – PA requirements and billing guidance for esketamine procedure codes

Procedure code	Description	PA required (Criteria)	Billing guidance
G2082	Office or other outpatient visit for the evaluation and management of an established patient that requires the supervision of a physician or other qualified health care professional and provision of up to 56 mg of esketamine nasal self-administration, includes 2 hours post-administration observation	Yes, for DOS on or after Oct. 17, 2024 (18 years of age or older and taking an oral antidepressant)	Do not bill with an E/M visit code or with S0013.*
G2083	Office or other outpatient visit for the evaluation and management of an established patient that requires the supervision of a physician or other qualified health care professional and provision of greater than 56 mg esketamine nasal self-administration, includes 2 hours post-administration observation	Yes, for DOS on or after Oct. 17, 2024 (18 years of age or older and taking an oral antidepressant)	Do not bill with an E/M visit code or with S0013.*
S0013	Esketamine, nasal spray, 1 mg	Yes (18 years of age or older and taking an oral antidepressant)	Bill with appropriate E/M visit code.** Do not bill with G2082 or G2083.*

*Procedure codes G2082 and G2083 incorporate both the provision of the drug and associated professional services.

**If a practitioner's time spent with a patient for an esketamine encounter exceeds the time stated in the standard E/M codes, the add-on code for prolonged service with or without direct patient contact may apply. See the *Prolonged Office or Other Outpatient E/M Services* section of the [Evaluation and Management Services](#) module for details.

Billing requirements to be enforced

In addition to adding PA criteria for G2082 or G2083, the IHCP reminds providers that it is not appropriate to bill HCPCS codes G2082 or G2083 in conjunction with S0013, because the provision of esketamine is included in the reimbursement for G2082 or G2083 (see [Table 1](#)). Any claims submitted with either G2082 or G2083 *and* S0013 for the same date of service will be denied as medically unnecessary. The IHCP will begin enforcing this national billing guidance **effective immediately** upon release of this bulletin.

Additionally, a separate evaluation and management (E/M) visit code should not be billed in conjunction with G2082 or G2083. However, E/M visit codes may be billed, as appropriate, with procedure code S0013.

For more information

PA questions regarding the fee-for-service (FFS) medical benefit should be directed to Acentra Health Customer Service at 866-725-9991. Questions about professional or institutional billing and reimbursement for FFS medical benefit should be directed to Gainwell Technologies at 800-457-4584 or your [Provider Relations consultant](#).

Questions regarding managed care benefits (for members in the Healthy Indiana Plan [HIP], Hoosier Care Connect, Hoosier Healthwise and Indiana PathWays for Aging programs) should be referred to the managed care entity (MCE) with which the member is enrolled.

QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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