

	MEDICAL ASSISTANCE BULLETIN COMMONWEALTH OF PENNSYLVANIA * DEPARTMENT OF PUBLIC WELFARE		
	NUMBER: 14-06-04	ISSUE DATE: January 27, 2006	EFFECTIVE DATE: February 1, 2006
SUBJECT: Medical Assistance Program Fee Schedule Procedure Code Changes for Podiatry Services		BY:  James L. Hardy, Acting Deputy Secretary Office of Medical Assistance Programs	

PURPOSE:

The purposes of this bulletin are to notify podiatrists:

1. That national procedure codes will replace local procedure codes for dates of service on or after February 1, 2006;
2. That national procedure codes and local procedure codes for physical therapy services are being end-dated for podiatrists effective February 1, 2006; and
3. That modifiers must be used with specific national procedure codes as specified below.

SCOPE:

This bulletin applies to all podiatrists who render services to Medical Assistance (M A) recipients in the fee-for-service delivery system. Podiatrists rendering services under the managed care delivery system should address any coding or rate-related questions to the appropriate managed care organization.

BACKGROUND/DISCUSSION:

Regulations issued by the United States Department of Health and Human Services under the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act (HIPAA), 42 U.S.C. §§ 1320d-1320d-8 require the Department to use national procedure codes and eliminate local procedure codes. 45 C.F.R. § 162.1000. The Department is therefore adopting national procedure codes for podiatry services for dates of service on or after February 1, 2006, as set forth below.

In addition, local and national procedure codes for physical therapy (PT) services are being end-dated for podiatrists. Podiatrists are precluded from billing for PT services as set forth in regulation at 55 Pa.Code §1143.58(a)(11) (relating to noncompensable services and items). As such, effective February 1, 2006, the Department is removing the ability of podiatrists to receive M A Program payment for PT services.

<p>COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:</p> <p>The appropriate toll-free number for your provider type.</p> <p style="text-align: center;">Visit the Office of Medical Assistance Programs website at www.dpw.state.pa.us/omap.</p>

PROCEDURE:

The attached spreadsheet cross walks the local to national procedure codes by identifying the local procedure codes currently used for podiatry services that are being end-dated and the national procedure codes and modifiers that are replacing them.

Effective with dates of service on or after February 1, 2006, the local procedure codes currently used for podiatry services that will be end-dated and replaced with national procedure codes are as follows:

| Procedure Code |
|----------------|----------------|----------------|----------------|----------------|
| X1101 | X1102 | X1166 | X1167 | X1172 |
| X1177 | X1720 | | | |

Some of the local procedure codes that are being end-dated are being cross walked to national procedure codes and the corresponding fees already on the M A Program Fee Schedule. Some of the national procedure code fees are higher and some are lower than the fees corresponding with the local procedure codes.

Local procedure code W9715 is being end-dated for podiatrists and is not being replaced with a national procedure code. In addition, the national procedure codes set forth below are being end-dated for podiatrists. The regulation at 55 Pa.Code §1143.58(a)(11) (relating to noncompensable services and items) precludes payment for physical therapy services provided by podiatrists in the M A Program. Some podiatrists have inappropriately been submitting claims using these procedure codes.

| Procedure Code |
|----------------|----------------|----------------|----------------|----------------|
| 97001 | 97002 | 97010 | 97012 | 97014 |
| 97016 | 97018 | 97020 | 97022 | 97024 |
| 97026 | 97028 | 97032 | 97033 | 97034 |
| 97035 | 97036 | 97112 | 97116 | 97124 |
| 97140 | | | | |

Effective for dates of service on or after February 1, 2006, the Department is adding the following national procedure code to the M A Program Fee Schedule. This national procedure code is replacing the specific end-dated procedure code set forth below:

National Procedure Code	M A Fee	End-Dated Local Procedure Code
17004	\$132.38	X1720

The other end-dated local procedure codes are being replaced with national procedure codes already on the M A Program Fee Schedule.

The S U modifier associated with national procedure code 11720 is being end-dated because there have been no claims submitted using this procedure code and modifier combination since January 1, 2002.

With the implementation of the ACCESS Plus Program, podiatrists are reminded that pricing modifier U7 is required to be billed with the following national procedure codes to ensure the appropriate payment rate.

National Procedure Code	National Procedure Code	National Procedure Code	National Procedure Code
99202	99203	99204	99205
99212	99213	99214	99215
99347	99348	99349	

Podiatrists who render services to M A recipients in the fee-for-service delivery system are directed to refer to the attached Podiatry Services Local to National Procedure Code Cross Walk to determine the appropriate national code and modifier(s), as applicable, to use in place of the local procedure codes for dates of service on or after February 1, 2006. Columns one through four provide information related to the end-dated Local Procedure Code, former MAMIS Provider Type, former MAMIS Type of Service, and Local Code Description. Columns five through fifteen provide information on the National Procedure Code, PROMISe™ Provider Type and PROMISe™ Provider Specialty eligible to bill the procedure code, PROMISe™ Place of Service, required Pricing Modifier and Informational Modifier, National Procedure Code Definition, M A Unit of Service, M A Fee and Comments. Failure to use the appropriate national procedure code and modifier(s) combination will result in inappropriate claim payment or claim denial.

Services rendered on or after February 1, 2006, must be billed using the national procedure code and applicable modifiers.

Attachments

Podiatry Services Local to National Procedure Code Cross Walk