



Medicaid Billing in Family Practice Clinics

Women's Health and Family Planning Conference 2011

Our Story at Weld County

- Getting started
- Ups and downs
- Working together



Teamwork

The staff that works together,
is successful together




Circle of Communication

- You're on the same team
 - Clinical staff – provide the services
 - Billing staff – bill for the services
 - Front office staff – get client information
- Meet and review
- Motivate



Billing Medicaid

Go for it!



Medicaid

Another type of insurance

- Regular Medicaid – children and pregnant women.
- Presumptive Eligibility – temporary Medicaid coverage while application is being processed.
- Emergency Medicaid- undocumented aliens – usually for pregnancy.
- Family Planning Waiver – adult coverage for family planning services

Does Medicaid cover it?

- Services performed in your clinic
 - Bill Medicaid
- Lab work –
 - When done in your clinic – bill Medicaid
 - Lab work sent to a lab – the Lab bills Medicaid
- Pharmacy – Prescriptions
 - Pharmacists can bill Medicaid.
- Need help? Ask.
- Denials



Coding For Better Reimbursement

Simply “What” and “Why”

Coding on Medicaid claims

- CPT codes
- HCPCS codes
- ICD9 codes
- Modifiers
- Place of service
- NPI and Medicaid provider numbers
- NDC numbers

CPT and HCPCS Codes

- Describe “what” was done in the visit
- EM codes
 - Nurse Practitioners
 - RN’s – 99401-99402
- Preventive medicine codes
- Supply codes
- Lab work – lab done in clinic - bill Medicaid
 - Lab work sent to a lab – the lab bills Medicaid.

Commonly used FP CPT Codes

- 99201 – 99401 – New patient EM
- 99211 – 99214 – Established patient EM
- 99384 – 99386 – New Preventive Medicine (age specific)
- 99394 – 99396 – Established Preventive Medicine (age specific)
- 99401 – 99402 – Preventive Medicine Counseling – RN's
- 88142 – Pap smear
- 87210 – Wet prep
- 81002 – UA
- 81025 – Pregnancy Test
- 85018 – HGB – finger stick
- 85025 – CBC w/diff
- 87491 – Chlamydia
- 87591 – Gonorrhea
- S4993 – Oral contraceptives
- A4267 - Condoms
- J1055 – Depo provera
- J7303 – Nuva ring
- J7307 - Implanon
- J7302 – IUD Mirena
- J7300 – IUD Paragard
- 36415 - Venipuncture

ICD-9 Codes

- Diagnosis – describes “why” services were done. Be specific.
- More than one diagnosis accepted
- V codes – do’s and don’ts
- Symptoms code vs. screening code
- Labs – use symptom or other diagnosis code.
- Diagnosis code with designated CPT code on claim.

Commonly used ICD-9 Codes

- V25.9 – Unspecified contraceptive method
- V25.09 – Other – family planning advice
- V26.41 – Procreative counseling & advice using natural family planning
- V74.5 – Venereal disease – screening for STI's
- V25.42 – Intrauterine contraceptive device
- V25.11 – Insertion of intrauterine contraceptive device
- V25.12 – Removal of intrauterine contraceptive device
- V25.5 – Insertion of implantable subdermal contraceptive
- V72.40 – Pregnancy examination or test – pregnancy unconfirmed
- 626.0 – Amenorrhea
- 623.8 – vaginal bleeding
- V01.6 – STI exposure
- 611.72 – Breast pain
- V82.9 – Screening unspecified – use with symptom diagnosis – not alone
- 112.1 - Candidiasis
- 626.4 – irregular menstrual bleeding
- 616.10 – Vaginitis, bacterial
- 611.72 – Breast mass or lump

Modifiers and Place of Service Codes

- Modifiers – makes CPT code more specific. For Medicaid “FP” is used to classify claim as a family planning claim.
- Place of service (POS) – be specific
 - 71 – Public Health Agency
 - 12 – Home visit

NPI and Medicaid Provider Numbers

- NPI – National Provider Identification number
– required for all providers and facilities.
- Website: <https://nppes.cms.hhs.gov>
- Medicaid Provider number
 - Billing – facility or clinic
 - Supervising Physician
 - Rendering Provider

NDC numbers

- Required on Medicaid claims
 - IUD's
 - Implanon's
 - Nuva rings
- NDC list: <http://www.colorado.gov/hcpf>
 - Providers
 - Provider Services
 - Billing Manuals – HCPCS/NDC Crosswalk for Billing
- CLIA # – required on claim form if lab work done in clinic.

Medicaid - Web Portal

- How to tips
 - Claims
 - Provider reports
 - Users
 - Timely filing – 120 days
 - Denials

References

- Medicaid Web Portal – Provider Services - <http://www.colorado.gov/hcpf>
- Little Billing Book
 - Colorado Medical Assistance Program Fiscal Agent
- NPI # – www.nppes.com.hhs.gov
- CLIA #: Provider Bulletin – February 2011
 - Bulletin – B1100296



Questions?

Thanks for attending

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