

Allison Knight, Assistant Manager  
DMAP Policy and Planning Section

**Authorized Signature**

**Number:** DMAP-IM-06-198

**Issue Date:** 11/13/2006

**Topic:** Medical Benefits

**Subject:** PN: EPIV policy, code and fee updates for 1/1/07

**Applies to (check all that apply):**

- |  |  |
|--|--|
| <input type="checkbox"/> All DHS employees             | <input type="checkbox"/> County Mental Health Directors                  |
| <input type="checkbox"/> Area Agencies on Aging        | <input type="checkbox"/> Health Services                                 |
| <input type="checkbox"/> Children, Adults and Families | <input type="checkbox"/> Seniors and People with Disabilities            |
| <input type="checkbox"/> County DD Program Managers    | <input checked="" type="checkbox"/> Other (please specify): DMAP + Plans |

**Message:** DMAP will send providers of Home EPIV services the following letter announcing staff, system and policy changes as well as providing an updated code and fee schedule for January 1, 2007.

*If you have any questions about this information, contact:*

<b>Contact(s):</b>	Kelly Jamison, DMAP EPIV Program Manager		
<b>Phone:</b>	(503) 945-6916	<b>Fax:</b>	(503) 373-7689
<b>E-mail:</b>	<a href="mailto:kelly.jamison@state.or.us">kelly.jamison@state.or.us</a>		



# Oregon

Theodore R. Kulongoski, Governor

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November 13, 2006

**To:** Home EPIV Providers  
**From:** Allison Knight, Assistant Manager  
DMAP Policy and Planning Section



**Subject: January 2007 policy, code and fee schedule changes**

1. Please find a 2007 Home EPIV Code and Fee Schedule attached. As additions or deletions to the national 2007 code sets become available, we will distribute to our EPIV eSubscribers. If you haven't yet signed up for this e-mail notification service, you may do so at <http://www.oregon.gov/DHS/govdelivery.shtml>.
2. The Department has made some policy/procedure changes for January 1, 2007, to reduce provider and DHS staff workloads:
  - The Mic Key kit coding will change. We will delete the brand name Mic Key kit from the Not Otherwise Classified (NOC) rule (OAR 410-149-0260) for B9998. NOC codes require prior authorization (PA). Instead, bill using B4086.
  - Additionally, we have placed system edits to assure that claims for Home EPIV services are paid only when provided in the client's home. To bill for EPIV services in the physician's office, clinic setting, outpatient or inpatient hospital, please consult the appropriate administrative rules that apply to the respective provider setting.
3. DHS is collecting National Provider Identifiers (NPI) and taxonomy codes. In order to ensure a successful transition with no interruptions in service, DMAP must receive your new identifiers by January 15, 2007. We will start using the NPIs for billing and reimbursements on the federal deadline of May 23, 2007. See our Web site <http://www.oregon.gov/DHS/admin/hipaa/NPI/main.shtml> for more NPI and taxonomy information.
4. DHS plans to migrate to our new Medicaid Management Information System (MMIS) during the summer of 2007. We will then have the ability to track and manage a case that includes multiple PAs (e.g., infusion pump, nurse or Home Health visits, EPIV medications). Once DMAP's new EPIV policy analyst comes on board, we will schedule public meetings to discuss the PA case capability and other Home EPIV issues.
5. For Home EPIV providers who are involved with pain management, please note that the Pain Management Commission met November 9, 2006, at the Human Services building, 500 Summer St. NE in Salem.

6. DMAP hired **Kelly Jamison** as the new Medicaid policy analyst assigned to the Home EPIV and Dental programs. Kelly begins November 13, 2006. Contact her at [kelly.jamison@state.or.us](mailto:kelly.jamison@state.or.us) or 503-945-6916.

If you have specific billing questions, please contact Provider Services at 1-800-336-6016 or at their new e-mail address, [DMAP.providerservices@state.or.us](mailto:DMAP.providerservices@state.or.us).

Contact Diana Norton if you have questions about the Pain Management Commission meeting at (503) 945-7009 or [diana.norton@state.or.us](mailto:diana.norton@state.or.us). Their Web site is <<http://www.oregon.gov/DHS/pain>>.

### EPIV Codes and Fee Schedule (1/1/07)

CODE	MODIFIER	FEE	COMMENTS	CODE	MODIFIER	FEE	COMMENTS
99601		\$48.13		B4156		Deleted 12/1/04	Use B4150 or B4158
99602		\$28.88		B4157*		\$1.74	Requires CMN
A4221		\$22.15		B4158*		\$0.61	Requires CMN
A4222		\$43.95		B4159*		\$0.61	Requires CMN
A4305		\$21.63		B4160*		\$0.61	Requires CMN
A4306		\$21.63		B4161*		\$1.74	Requires CMN
B4034		\$5.60		B4162*		\$1.74	Requires CMN
B4035		\$10.67		B4164		\$15.08	
B4036		\$7.31		B4168		\$21.96	
B4081		\$19.78		B4172		\$34.90	
B4082		\$14.73		B4176		\$42.51	
B4083		\$2.25		B4178		\$51.04	
B4086		\$32.66		B4180		\$21.61	
B4102*		NC	Not a Covered OHP Service	B4184		Deleted 1/1/06	Use B4185
				B4185		10.89	New 1/1/06
B4103*		NC	Not a Covered OHP Service	B4186		Deleted 1/1/06	Use B4185
B4104*		NC	Bundled	B4189		\$157.66	
B4149*		NC	Not a Covered OHP Service	B4193		\$203.73	
B4150		\$0.61		B4197		\$248.02	
B4151		Deleted 12/1/04	Use B4150 or B4158	B4199		\$283.42	
B4152		\$0.51		B4216		\$6.85	
B4153		\$1.74		B4220		\$7.10	
B4154		\$1.12		B4222		\$8.75	
B4155		\$0.87		B4224		\$22.19	

CODE	MODIFIER	FEE	COMMENTS	CODE	MODIFIER	FEE	COMMENTS
B5000		\$10.54		S9348		\$78.00	
B5100		\$4.12		S9351		\$100.00	
B5200		\$4.85		S9364		BR	Do not use with S9365-S9368
B9000		\$103.10		S9365		\$105.00	
B9002		\$108.65		S9366		\$131.00	
B9004		\$354.30		S9367		\$135.00	
B9006		\$354.30		S9368		\$135.00	
B9998		BR		S9373		BR	Do not use with S9374-S9377
B9999		BR		S9374		\$40.00	
E0776		\$93.30	Purchase	S9375		\$55.00	
E0776	RR	\$23.62	Rental	S9342		\$19.17	
E0779	RR	\$21.34	Rental	S9376		\$55.00	
E0780	RR	\$15.34	Rental	S9377		\$55.00	
S5035		BR		S9379		BR	
S5036		\$8.23		S9494		BR	Do not use with S9497-S9504
S5497		BR		S9497		\$83.00	
S5498		\$6.00		S9500		\$88.00	
S5501		\$7.20		S9501		\$88.00	
S5520		\$75.71		S9502		\$108.00	
S5521		\$75.71		S9503		\$108.00	
S9325		\$50.00	Do not use S9326, S9327 or S9328	S9504		\$108.00	
S9326		\$41.40		T1001		\$48.13	
S9327		\$41.40					
S9328		\$41.40					
S9329		\$78.00	Do not use with S9330 or S9331				
S9330		\$116.00					
S9331		\$89.00					
S9336		\$78.00					

\* New 01/01/2005

CMN = Certificate of Medical Necessity

BR = by report

Bundled = a service that is included in another service and cannot be billed as a separate service.