



## DIVISION OF MEDICAL SERVICES PROVIDER BULLETIN

Volume 28 Number 5

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September 26, 2005

### PHYSICIANS BULLETIN Procedure Code Additions

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- **PROCEDURE CODES A4641 and A9699**
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#### **PROCEDURE CODE 91110**

Effective for dates of service January 1, 2005 and after, procedure code 91110 (GI tract capsule endoscopy) will be reimbursed \$93.53 for the Professional Component, \$375.89 for the Technical Component, and \$469.42 for the total component.

#### **PROCEDURE CODES A4641 AND A9699**

Effective for dates of service January 1, 2005 and after, procedure code A4641 (Supply of radiopharmaceutical diagnostic imaging agent, not otherwise classified) will replace procedure code 78990 (Provision of Diagnostic Radiopharmaceuticals) and procedure code A9699 (Supply of therapeutic radiopharmaceuticals) will replace procedure code 79900 (Provision of therapeutic radiopharmaceuticals). These codes will be manually priced.

Claims that were submitted using the new procedure codes that denied for dates of service January 1, 2005 and after will be reprocessed by the Division of Medical Services

#### **PROCEDURE CODE 01520**

Effective for dates of service January 1, 2005 and after, procedure code 01520 (Anesthesia for procedures on veins of lower leg, not otherwise specified) will be covered as follows:

<u>Type of Provider</u>	<u>Conversion Factor</u>	<u>Relative Value</u>
General	\$8.20	\$3.00
Supervision of Anesthetists	\$2.50	\$3.00
Certified Registered Nurse Anesthetist (CRNA)	\$5.70	\$3.00

**Provider Bulletins** are available on the DMS Website at <http://www.dss.mo.gov/dms/pages/bulletins.htm>. Bulletins will remain on the Published Bulletin site only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin site.

**Missouri Medicaid News:** Providers and other interested parties are urged to go to the DMS Website at <http://dss.missouri.gov/dms/subscribe/MedNewsSubscribe.htm> to subscribe to the list serve to receive automatic notifications of provider bulletins, provider manual updates, and other official Missouri Medicaid communications via e-mail.

**MC+ Managed Care:** The information contained in this bulletin applies to coverage for:

- MC+ Fee-for-Service
- Medicaid Fee-for-Service
- Services not included in MC+ Managed Care

Questions regarding MC+ Managed Care benefits should be directed to the patient's MC+ Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the red MC+ card or by calling the Interactive Voice Response (IVR) System at 573-635-8908 and using Option One.

**Provider Communications Hotline  
573-751-2896**