

PROVIDER BULLETIN

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2014 HEALTHCARE COMMON PROCEDURE CODING SYSTEM (HCPCS)

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2014 HEALTH CARE PROCEDURE CODING SYSTEM (HCPCS)

With the implementation of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) Standards for Transactions and Code Sets, use of the appropriate medical code sets is required on health care claims.

Effective for dates of service on and after January 1, 2014, the MO HealthNet Division (MHD) will accept the 2014 versions of the Current Procedural Terminology (CPT) and the Health Care Procedure Coding System (HCPCS) medical code sets. Please note that providers will not be able to bill the 2014 versions of the code sets until January 27, 2014 due to time requirements to complete system updates. Providers should reference the appendix of the CPT and HCPCS books for a summary of the additions, deletions and revisions. For dates of service prior to January 1, 2014, claims must be billed with the 2013 version of CPT and HCPCS codes and modifiers.

For MHD coverage information, including fees and restrictions, please reference the MHD Fee Schedule at <http://dss.mo.gov/mhd/providers/pages/cptagree.htm>. Select the provider link; fee schedules; read through the License for Use of Physicians' Current Procedural Terminology and select "accept"; then follow the directions given on the MHD Price List Search. The fee schedule will not be updated until mid-February after the HCPCS system updates are completed.

MOLECULAR PATHOLOGY PROCEDURES (81200-81408)

Effective for dates of service on and after January 1, 2014, some of the Tier 1 and 2 Molecular Pathology procedure codes ranging from 81200-81408 that were previously manually priced have been moved to a [fee schedule](#). Codes that have been assigned a fee will no longer require an invoice for payment. Some codes within this range continue to be manually priced by MHD until a Medicare reimbursement rate is established. Claims for these procedure codes must be submitted with an invoice of cost. This can be done by submitting a

medical or outpatient claim through emomed.com, and completing the Invoice of Cost link at the bottom of the detail screen or by sending a paper claim with the invoice of cost attached.

Provider Bulletins are available on the MO HealthNet Division (MHD) (Formerly the Division of Medical Services) Web site at <http://dss.mo.gov/mhd/providers/pages/bulletins.htm>. Bulletins will remain on the Provider Bulletins page only until incorporated into the [provider manuals](#) as appropriate, then moved to the Archived Bulletin page.

MO HealthNet News: Providers and other interested parties are urged to go to the MHD Web site at <http://dss.mo.gov/mhd/global/pages/mednewssubscribe.htm> to subscribe to the electronic mailing list to receive automatic notifications of provider bulletins, provider manual updates, and other official MO HealthNet communications via E-mail.

MO HealthNet Managed Care: The information contained in this bulletin applies to coverage for:

- MO HealthNet Fee-for-Service
- Services not included in MO HealthNet Managed Care

Questions regarding MO HealthNet Managed Care benefits should be directed to the patient's MO HealthNet Managed Care health plan. Before delivering a service, please check the patient's eligibility status by swiping the MO HealthNet card or by calling the Interactive Voice Response (IVR) System at 573-751-2896 and using Option One for the red or white card.

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