

PROVIDER BULLETIN

PROVIDER INFORMATION



July 1, 2014

Update to Attachment B: Definition of outpatient health services categories

Included with your 2014 Institutional Provider Service Agreement (Agreement) with Blue Cross and Blue Shield of Minnesota (Blue Cross) is a document entitled “Blue Cross and Blue Shield of Minnesota: Attachment B: Definition of Outpatient Health Service Categories.”

As stipulated in that document, we are notifying you of new codes that have been added and to which outpatient health service category codes have been assigned along with one previously published change. Specifically, the Agreement states: “Provider Bulletins will inform providers when new codes are released by the Centers for Medicare & Medicaid Services (CMS) and the American Medical Association (AMA) during the 2014 calendar year. New codes will be added to the pertinent categories as updates are published and received. Any CPT or HCPCS codes that have not been assigned to a specific category will be attributed to the Non-emergency services Category VIII.”

Please note that not all hospitals are affected by this change. To verify if your hospital is affected, refer to your Institutional Provider Service Agreement with Blue Cross.

The following HCPCS codes are effective July 1, 2014.

Added codes

HCPCS	Code Description	2014 Attachment B
0006M	Oncology (hepatic), mRNA expression levels of 161 genes, utilizing fresh hepatocellular carcinoma tumor tissue, with alpha-fetoprotein level, algorithm reported as a risk classifier	Microscopic Lab
0007M	Oncology (gastrointestinal neuroendocrine tumors), real-time PCR expression analysis of 51 genes, utilizing whole peripheral blood, algorithm reported as a nomogram of tumor disease index	Microscopic Lab
0008M	Oncology (breast), mRNA analysis of 58 genes using hybrid capture, on formalin-fixed paraffin-embedded (FFPE) tissue, prognostic algorithm reported as a risk score	Microscopic Lab
0347T	Placement of interstitial device(s) in bone for radiostereometric analysis (RSA)	Scheduled Surgery 5
0356T	Insertion of drug-eluting implant (including punctal dilation and implant removal when performed) into lacrimal canaliculus, each	Scheduled Surgery 6

Code deleted from Attachment B

HCPCS	Code Description	2014 Attachment B
0341T	Quantitative pupillometry with interpretation and report, unilateral or bilateral	Microscopic Lab

Coding requirements reminder

All coding and reimbursement is subject to changes, updates, or other requirements of coding rules and guidelines. All codes are subject to federal HIPAA rules, and in the case of medical code sets (for example, HCPCS, CPT, ICD-9-CM), only valid codes for the date of service may be submitted or accepted.

Questions?

If you have questions, please contact provider services at **(651) 662-5200** or **1-800-262-0820**.

HCPCS stands for Health Care Procedure Coding System

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