

REIMBURSEMENT POLICY

Injections

Active

Policy Number: General Coding - 038
Policy Title: Injections
Section: General Coding
Effective Date: 01/26/23

Product: Commercial FEP Medicare Advantage Platinum Blue

Description

This policy addresses Blue Cross and Blue Shield of Minnesota's reimbursement for therapeutic and diagnostic injections.

Definitions

Therapeutic or diagnostic injections may be subcutaneous, intramuscular, intra-arterial, or intravenous. These codes do not include injections for allergen immunotherapy or immunizations.

J Code Drugs: HCPCS J codes include drugs that ordinarily cannot be self-administered, chemotherapy drugs, immunosuppressive drugs, inhalation solutions, and other miscellaneous drugs and solutions.

Policy Statement

Injectable Drug

Submit the HCPCS Level II code that best describes the injection given in terms of the drug and dosage. Codes for injections include the charge for the drug only. When the dosage given is greater than that listed, use the units field to specify the appropriate number of units according to code definition found in the HCPCS manual.

For example: *The patient received 8 mg. of haloperidol. The common dosage for haloperidol (J1630) is "up to 5 mg" 2 UOS should be submitted. The dosage is rounded up to the next unit.*

COVID-19 Therapeutic Infusions

Blue Cross will reimburse for the infusion of COVID-19 MAB drugs billed with HCPCS codes Q0249, M0249 and M0250 except in restricted places of service (see page 2).

Administration

Medicare Advantage/Platinum Blue: Follow CMS guidelines.

Commercial:

Choose the appropriate administration code for the route of administration 96372-96377.

It is inappropriate to bill an intravenous injection in addition to an intravenous infusion on the same date of service when an injection is administered through the same line as the infusion. The provider may submit the infusion or the injection, but **not both**.

Administration code(s) should be appropriate to the drug(s) injected. 96372 is not a separately reimbursable service when billed with an office visit.

The administration charge should be submitted separately. Codes 96379 and J3490 are for unlisted therapeutic injections. The NDC (if available) or drug name and dosage must be included on each claim.

Report the NDC (if available) or drug name and dosage starting in the loop 2400/NTE segment narrative field for electronic claims.

Supplies used in conjunction with therapeutic administrations

Syringes, needles, or other supplies (A4206-A4209) used in conjunction with administering any injection, including therapeutic or diagnostic, are considered integral to that administration and will be denied as incidental to the administration.

Surgical Injections

Performed as stand-alone procedures/services, the injections should be submitted with the appropriate CPT code for the administration of the injection. In addition, submit the HCPCS Level II code for the drug. If no specific HCPCS code exists for the drug, submit J3490 with a narrative indicating the NDC (if available) or drug name and dosage.

When surgical injections are performed as part of a surgical procedure, submit the HCPCS Level II code for the drug. The administration of the injection is considered part of the surgical procedure itself and should not be submitted separately.

Appealing Unlisted Drug Allowances

Unlisted drug codes, such as J3490, should **only** be submitted if there is no other code that describes the drug given. All unlisted drugs must be submitted with a narrative and dosage or NDC and are manually priced. There may be times when the invoice cost of the drug may be significantly higher than our allowance. In this case, a provider may submit an appeal for additional reimbursement using the normal appeal process as described in the Provider Policy and Procedure Manual, Chapter 10, Appeals. To facilitate the appeal review, the drug invoice must be submitted with the appeal for consideration. Additional reimbursement will not be considered without the invoice.

Injection Place of Service Restrictions

Blue Cross will not allow professional 837P charges for therapeutic, prophylactic and diagnostic injections when rendered in certain places of service. Professional services (837P) submitted with a facility place of service (such as 21, 22 or 23), will deny as provider liability.

Documentation Submission

Documentation must identify and describe the drug, dosage and reason administered.

Coverage



Eligible services will be subject to the subscriber benefits, Blue Cross fee schedule amount and any coding edits.

The following applies to all claim submissions.

All coding and reimbursement is subject to all terms of the Provider Service Agreement and 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 (HCPCS, CPT, ICD), only codes valid for the date of service may be submitted or accepted. Reimbursement for all Health Services is subject to current Blue Cross Medical Policy criteria, policies found in the Provider Policy and Procedure Manual sections, Reimbursement Policies and all other provisions of the Provider Service Agreement (Agreement).

In the event that any new codes are developed during the course of Provider's Agreement, such new codes will be paid according to the standard or applicable Blue Cross fee schedule until such time as a new agreement is reached and supersedes the Provider's current Agreement.

All payment for codes based on Relative Value Units (RVU) will include a site of service differential and will be calculated using the appropriate facility or non-facility components, based on the site of service identified, as submitted by Provider.

Coding

The following codes are included below for informational purposes only and are subject to change without notice. Inclusion or exclusion of a code does not constitute or imply subscriber coverage or provider reimbursement.

CPT/HCPCS Modifier:	N/A
ICD-10 Diagnosis:	N/A
ICD-10 Procedure:	N/A
CPT/HCPCS:	Refer to <i>Appendix</i>
Revenue Codes:	N/A
Deleted Codes:	N/A

Cross Reference

Cross Reference: General Coding – 005 Unlisted Procedure Code Policy

Policy History	
4/6/2016	Initial Committee Approval Date
1/7/2019	Annual Policy Review Code Update
7/6/2020	Annual Policy Review
1/4/2021	Code Update: Added M0239, M0243, Q0239, Q0243
3/23/2021	Code Update: Added M0245, Q0246
5/27/2021	Code Update: Removed M0239, Q0239
6/29/2021	Code Update: Added M0247, M0248, Q0244, Q0247
9/28/2021	Code Update: Added M0240, M0241, M0249, M0250, Q0240 Removed Q0247
1/25/2022	Annual Policy Review Code Update: Added Q0220, M0220, M0221, J0172, J1952, J2506, J9021, J9061, J9272. Removed J2505
03/22/2022	Code Update: Added Q0221, Q0222, M0222, M0223
04/26/2022	Code Update: Added J0219, J0491, J0879, J9071, J9273, J9359
05/24/2022	Code Update: Removed M0240, M0241, M0243, M0244, M0245, M0246, M0247, M0248, Q0240, Q0243, Q0244, Q0245, Q0247
06/28/2022	Code Update: Added codes J0699, J0739, J0741, J1305, J1306, J1426, J1445, J1448, J1551, J2356, J2406, J2779, J2998, J3299, J7294, J7295, J9247, J9318, J9319, J9331, J9332, J9348 effective 7/1/2022. Removed codes J0693, J7303, J9314, J9315 effective 7/1/2022
08/23/2022	Code Update: Removed Q0222
10/25/2022	Code Update: added J1302, J1932, J2777, J9274, J9298
01/01/2023	Code Update: Added codes J0134, J0136, J0173, J0225, J0283, J0611, J0689, J0701, J0703, J0877, J0891, J0892, J0893, J0898, J0899, J1456, J1574, J1611, J1643, J1954, J2021, J2184, J2247, J2251, J2272, J2281, J2311, J2327, J2401, J2402, J3244, J3371, J3372, J9046, J9048, J9049, J9314, J9393, J9394 Removed codes J2400, J9044
01/26/2023	Code Update: Removed codes Q0220, Q0221, M0220, M0221

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APPENDIX

A4206	A4207	A4208	A4209						
J0120	J0121	J0122	J0129	J0130	J0131	J0132	J0133	J0134	J0135
J0136	J0153	J0171	J0172	J0173	J0178	J0179	J0180	J0185	J0190
J0200	J0202	J0205	J0207	J0210	J0215	J0219	J0220	J0221	J0222
J0223	J0224	J0225	J0248	J0256	J0257	J0270	J0275	J0278	J0280
J0282	J0283	J0285	J0287	J0288	J0289	J0290	J0291	J0295	J0300
J0330	J0348	J0350	J0360	J0364	J0365	J0380	J0390	J0395	J0400
J0401	J0456	J0461	J0470	J0475	J0476	J0480	J0485	J0490	J0491
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J0604	J0606	J0610	J0611	J0620	J0630	J0636	J0637	J0638	J0640
J0641	J0642	J0670	J0689	J0690	J0691	J0692	J0694	J0695	J0696
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J0883	J0884	J0885	J0887	J0888	J0890	J0891	J0892	J0893	J0894
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J9358	J9359	J9360	J9370	J9371	J9390	J9393	J9394	J9395	J9400



J9600 J9999
Q0249
M0249 M0250
96372 96373 96374 96375 96376 96377 96379