

Automated Medical Payments

# Medicaid Bulletin

Colorado Title XIX

**Fiscal Agent** 



600 Seventeenth Street Suite 600 North Denver, CO 80202

Medicaid Provider Services 303-534-0146 1-800-237-0757

### **Mailing Addresses**

Claims & PARs
P.O. Box 30
Denver, CO 80201-0030

Correspondence, Inquiries & Adjustments P.O Box 90 Denver, CO 80201-0090

Provider enrollment, Provider information, Changes, Signature authorization, and Claim requisitions P.O. Box 1100 Denver, CO 80201-1100

## Medicaid Fiscal Agent Information on the Internet

coloradomedicaid.consultec-inc.com

Medicaid bulletins contain important policy and billing information and should be shared promptly with billing staff.

Bulletins supplement information in the Medicaid Provider Manual and should be retained with the provider manual for reference. Retain all bulletins until published notification advises that the information is obsolete or reproduced in subsequent bulletins or provider manual updates.

Please direct questions about bulletins and billing information to Medicaid Provider Services.

Distribution: Practitioners, Public Health Clinics, & Outpatient Hospitals

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### Synagis vaccine

**P**alivizumab (Synagis) vaccine for Respiratory Syncytial Virus (RSV) is a benefit of the Colorado Medicaid program when billed for infants age 2 years and under.

Synagis vaccine is considered a benefit when billed with one of the following diagnoses, indicating immaturity and related chronic lung disease:

- > 765.0 Extreme immaturity; or
- > 765.1 Other preterm infants;

#### and

➤ 770.7 Chronic respiratory disease arising in the perinatal period.

Providers must use HCPCS code **90378** to bill Synagis vaccine.

90378 Respiratory Syncytial virus immune globulin (RSV-IGIM), for intramuscular use, 50mg each

Bill one unit per 50mg vial; limit 4 units per day. Outpatient hospitals should bill with the appropriate revenue code. Providers must discontinue using the local code X1565 (published in bulletin B9802323) for this service. Procedure code X1565 is no longer valid for billing the Colorado Medicaid program.

If child does not meet the profile described above, please contact the fiscal agent's prior authorization line at:

303-534-0279 or 1-800-237-7647 for PAR information.