

Provider Bulletin

Reference: B0800250 July 2008



Di

Did you know...?

If you need to find a specialty provider for a Medicaid client, Medicaid Provider lists are located in two places. (1) On the website under References http://www.chcpf.state.co.us/HCPF/refmat/Reference Include.asp and (2) Through the Web Portal Medicaid Provider Lookup option on the main menu. You can search by Specialty, County, City and Zip.

When looking for something specific on the Department's website, use the Google feature on the home page to save time and effort.

If you use a clearinghouse to submit your claims, it is your responsibility to follow-up and check your Accept/Reject reports to verify that Medicaid has received your claims.

Rate Increases

Effective July 1, 2008, the following fee-for-service rate increases will be implemented as mandated by the passage of House Bill 08-1375:

Evaluation and Management Visits

The maximum allowable reimbursement for all Evaluation and Management (E/M) CPT codes has been raised to 90% of the equivalent Medicare rate. A list of all affected codes and corresponding rates can be found on page A-1 of this bulletin.

Dental Services

The maximum allowable reimbursement for dental codes has been raised to 52% of commercial rates (American Dental Association median). A list of all affected codes and corresponding rates can be found on page A-2 of this bulletin. Providers should continue to refer to the December 2006 Bulletin (Reference Number B0600221) for the appropriate codes and procedures that require prior authorization.

Vision Services

The maximum allowable reimbursement for vision services has been increased by 33.45 %. A list of all affected codes and corresponding rates can be found on page A-5 of this bulletin.

Outpatient Substance Abuse Treatment and Special Connections

The maximum allowable reimbursement for individual and group substance abuse therapy has been increased. A list of all affected codes and corresponding rates can be found on page A-5 of this bulletin.

Radiology Conversion Factor

The previous radiology conversion factor of \$6.72 has been increased to \$7.91.

Prenatal Plus Program

The Department of Health Care Policy and Financing and the Department of Public Health and Environment are currently developing a reimbursement structure to employ the program's rate increase. Stay tuned for new updates and information.

In this issue:

III tilis issue.
Rate Increases1
Evaluation and Management Visits. 1
Dental Services1
Vision Services1
Outpatient Substance Abuse
Treatment & Special Connections 1
Radiology Conversion Factor1
Prenatal Plus Program1
Online Fee Schedule Reminder2
HCBS Providers2
Medication Reminders2
Pharmacy Providers3
Pharmacy Claim Form3
Pharmacy PAR Form 3
PDL Update3
Suggested Soma Tapering3
PDL Clarification4
PDL Clarification
Correction4
Electronic Rendering Provider
Application 4
Holiday Processing for Independence
Day4
Day
Direct Deposit5
Electronic Bulletin Notification5
July & August 2008 Provider Billing Workshops 5
VVOIK3110P3
Denver Workshop Calendar7
Evaluation & Management, Dental,
Vision, Outpatient and Special
Connections Rate TablesA-1–A-5



Denver Club Building 518 17th Street, 4th floor Denver, Colorado 80202

ACS Contacts

Billing and Bulletin Questions 303-534-0146 1-800-237-0757

Claims and PARs Submission P.O. Box 30 Denver, CO 80201

Correspondence, Inquires, and Adjustments
P.O. Box 90

Denver, CO 80201

Enrollment, Changes, Signature authorization and Claim Requisitions P.O. Box 1100

Denver, CO 80201

Questions regarding these rate increases should be directed to:

E/M Visits	Teresa Knaack	303-866-3064
Dental Services	Marcy Bonnett	303-866-3604
Vision Services	Cindi Terra	303-866-5459
Outpatient Substance Abuse	Jenny Nickerson	303-866-3936
Special Connections	Ginger Burton	303-866-2693
Radiology	Teresa Knaack	303-866-3064
Prenatal Plus Program	Ginger Burton	303-866-2693

Reminder: The Colorado Medicaid fee schedule is available free of charge on the Department's website at http://www.chcpf.state.co.us/HCPF/refmat/Reference_Include.asp. An updated fee schedule reflecting these rate increases will be posted on the Department's website at the end of July 2008.

Home and Community Based Services (HCBS) Providers

Based on an audit recommendation by the Centers for Medicare and Medicaid Services (CMS), the Department has made claim processing and policy changes to further identify claims billed for Medication Reminders from those billed as Electronic Monitoring/Personal Emergency Response Systems (PERS).



The changes affect how claims are processed for Medication Reminders for clients enrolled in the Home and Community Based Elderly, Blind, and Disabled and Persons Living with Mental Illness waivers.

The Single Entry Point (SEP) case managers will be revising PARs to reflect the change in codes effective **August 1, 2008**. The following information clarifies the definition and the correct procedure codes and modifiers for billing Medication Reminders under the HCBS-EBD and MI waivers beginning **August 1, 2008**:

Medication Reminders

Medication reminders are devices, controls, or appliances which enable an individual at high risk of institutionalization to increase their abilities to perform activities of daily living, such as medication administration. Medication Reminders shall include devices or items that remind or signal the client to take prescribed medications. Medication Reminders may include other devices necessary for the proper functioning of such items, and may also include durable and non-durable medical equipment not available as a State plan benefit.



HCBS-EBD		
Description	Procedure Mod	
Medication Reminder	S5185	U1
Medication Reminder – Install/Purchase	T2029	U1

HCBS MI			
Description	Procedure Mod		
Medication Reminder	S5185	UA	
Medication Reminder – Install/Purchase	T2029	UA	

Please continue to bill for Medication Reminders for clients enrolled in the HCBS-Persons Living with Aids (PLWA) waiver using the codes for **Electronic Monitoring/Personal Emergency Response System, S5160 and S5161- Modifier U2.** You will be notified when the system has been updated to include the specific Medication Reminder codes for HCBS-PLWA.

For additional information, please contact Laurie Jensen at 303-866-5942.

Pharmacy Providers

Pharmacy Claim Form



Effective July 1, 2008, the Universal Claim Form (UCF) will no longer be accepted for paper pharmacy claims. Providers must submit paper claims on the Pharmacy Claim Form (PCF). The PCF is available at no charge on the Department's website at http://www.chcpf.state.co.us/HCPF/Pharmacy/nwBill.asp.

Pharmacy Prior Authorization Form

The Department has developed a universal pharmacy prior authorization form to be used for all pharmacy prior authorization requests. The Pharmacy Prior Authorization Request Form is available on the Department's website at http://www.chcpf.state.co.us/HCPF/Pharmacy/nwPAList.asp.

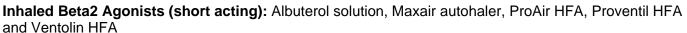
Effective July 1, 2008, providers will be required to use the new form for all fax requests. Prior authorization requests for all medications except for Atypical Antipsychotics and Fentanyl containing products may still be requested by calling the Help Desk at 1-800-365-4944.

PDL Update

Effective July 1, 2008, the following medications will be preferred agents on the Medicaid Preferred Drug List and will be covered without a prior authorization:

Angiotensin Receptor Blockers: Atacand, Avapro, Benicar, Cozaar, Diovan and Micardis **Angiotensin Receptor Blocker Combinations:** Atacand-HCT, Avalide, Benicar-HCT, Hyzaar, Diovan-HCT and Micardis-HCT

Anticholinergic Inhalants and Combinations: Generic albuterol/ipratropium solution, Atrovent HFA, Combivent Inhaler, generic ipratropium solution and Spiriva Handihaler



Inhaled Beta2 Agonists (long acting): These agents are non-preferred and will require a prior authorization.

Inhaled Corticosteroids: Flovent HFA, Flovent diskus, Pulmicort respules, Pulmicort flexhaler, Pulmicort turbuhaler and Qvar inhaler. (Inhaled corticosteroid combinations will be covered when an asthma or COPD diagnosis code is written on the prescription and entered into the Point-of-Sale computer system. Otherwise, a prior authorization will be required.)

Long Acting Oral Opioids: Kadian, methadone and morphine ER

Newer Generation Antihistamines: Generic OTC loratadine and cetirizine (Antihistamine/decongestant combinations will require a prior authorization).

Renin Inhibitors and Renin Inhibitor Combinations: These agents are non-preferred and will require a prior authorization.

Skeletal Muscle Relaxants: Baclofen, cyclobenzaprine, dantrolene, methocarbamol and tizanidine

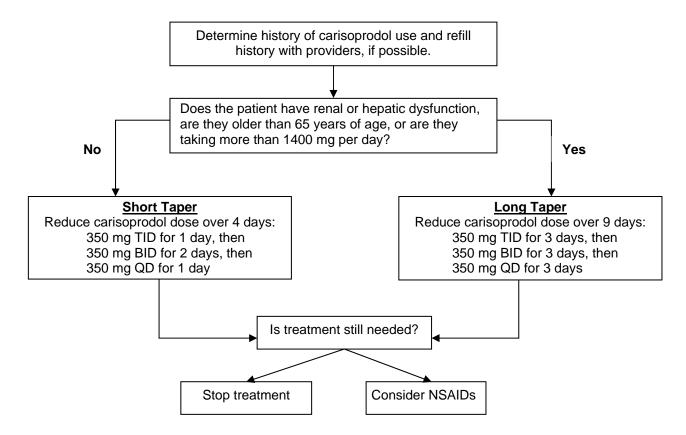
★ The complete **Preferred Drug List (PDL)** and prior authorization criteria for non-preferred drugs are posted on the PDL webpage at http://www.chcpf.state.co.us/HCPF/Pharmacy/nwDList.asp

Suggested Soma (carisoprodol) Tapering



Effective July 1, 2008, Soma (carisoprodol), Soma Compound (carisoprodol/aspirin), and Soma Compound with Codeine (carisoprodol/aspirin/codeine) will be non-preferred products and will require a prior authorization. Due to potential withdrawal symptoms, such as body aches, increased perspiration, anxiety and insomnia, tapering is recommended when discontinuing high doses of carisoprodol. Please consider a tapering schedule for clients discontinuing use of carisoprodol. An example of a tapering schedule is listed below.

The following tapering schedule was developed by the Department of Veteran Affairs, Portland Oregon in connection with Oregon State University College of Pharmacy, Department of Drug Use Research and Management. Published in the Oregon DUR Board Newsletter. 2002: 4:1. 28 Dec. 2005. http://pharmacy.oregonstate.edu/drug_policy/news/4_8/4_8.pdf.



PDL Clarification

The June 2008 Provider Bulletin (B0800249) stated that loratedine (generic Claritin) and cetirizine (generic Zyrtec) would be covered without a prior authorization. The bulletin should have specified that this benefit is for regular Medicaid clients only. Dual eligible clients will still require a prior authorization for most over-the-counter medications including loratedine and cetirizine. A prior authorization will be approved for dual eligible clients who have failed therapy with the preferred product in their Part D plan.



Alternative Care Facility (ACF) Rate Correction

The new daily rate for the ACF benefit was incorrectly listed in the June 2008 Provider Bulletin (B0800249) as \$49.02. The correct new daily rate is \$49.01. The bulletin has been corrected and is available at http://www.chcpf.state.co.us/ACS/Pdf_Bin/B0800249.pdf. Please make a note of this correction.

We apologize for any inconvenience this may have caused.

Revised Provider Enrollment Applications

Both the regular and rendering provider applications have been revised. The new revision date for both is June 2008. Effective September 1, 2008, applications that do not have the June 2008 revision date will not be processed for enrollment. The revised applications are located on the Provider Services website at http://www.chcpf.state.co.us/ACS/Enrollment/new providers.asp





An electronic Rendering Provider Application will be available online in mid-July. Rendering providers will be able to complete the application online, print it and mail it to ACS Provider Enrollment. The link to the electronic Rendering Provider Application will be posted on the Provider Services Home page

http://www.chcpf.state.co.us/ACS/Provider Services/provider services.asp.

Holiday Processing for Independence Day

Receipt of warrants or EFTs will be delayed by one or two days due to the Independence Day holiday on Friday, July 4, 2008.

Go Green and Enjoy the Benefits of Direct Deposit

Did you know that providers who receive payments through Electronic Funds Transfer (EFT) receive their payments up to a week sooner than those receiving paper checks (warrants)? EFT eliminates payment delays due to inclement weather or post office mishaps.



Don't worry, the payment transfer process is one way – from us to you; the agreement you sign does not allow us to withdraw funds from your account.

Begin receiving payments via EFT today! Complete the form located in the Provider Services Forms section of the Department's website at http://www.chcpf.state.co.us/ACS/Provider Services/Forms/Forms.asp

Need to update your bank account information? Using the same form noted above, simply indicate "Change" in the top-right corner and complete the form as directed.

Please allow 30 days to process your EFT request.

- > You will receive paper warrants until EFT has been established or your update request has been processed.
- After 30 days, check with your bank to verify that EFT has been setup.

Please contact the Department at 303-866-4372 with any EFT questions.

Electronic Bulletin Notification



Like the new look of our Provider Bulletin? Sign up for electronic notification and never miss an issue! Our electronic notification contains a link to the latest bulletin and allows providers to receive important information up to a week sooner than those receiving bulletins via mail. The Department will soon require all providers to receive electronic bulletin notifications, but why wait? Signing up is easy!

Medical Assistance Program enrolled providers who are not receiving electronic notifications can complete and submit their information through the "(MMIS) Provider Data Maintenance" option via the Web Portal. Providers may also complete and submit the Publication Preferences form in the Provider Services Forms section at http://www.chcpf.state.co.us/ACS/Provider_Services/Forms/Forms.asp.

Please fax or mail the completed form to the fiscal agent at the fax number or address on the form. The Medical Assistance Program will not be responsible for undeliverable notifications due to incorrect email addresses.

Please Remember: Providers may have only one email address on file with the fiscal agent.

July and August 2008 Provider Billing Workshops

Provider billing workshops include both Medical Assistance Program billing instructions and a review of Medical Assistance Program billing procedures.

The July and August 2008 workshop calendar is included with this bulletin and will be posted on the website. Additional schedules will also be included in future 2008 bulletins.

Who Should Attend?

New and experienced receptionists, front desk personnel, admission personnel, office managers, billing services, and other billers should attend the appropriate workshops.

Do I need Reservations?

Yes, reservations are necessary for *all workshops*.

Email reservations to: workshop.reservations@acs-inc.com

Or Call Medical Assistance Program Provider Services to make reservations at:1-800-237-0757 or 303-534-0146

Press "5" to make your workshop reservation. You must leave the following information:

- Medical Assistance Program provider billing number
- The number of people attending and their names
- ➤ The date and time of the workshop
- ➤ Contact name, address and phone number

Without all of the requested information, your reservation will not be processed successfully. Your confirmation will be mailed to you within one (1) week of making your reservation.

If you do not receive a confirmation within one (1) week, please contact Provider Services and talk to a Provider Relations Representative.



All Workshops held in Denver are located at:

ACS
Denver Club Building
518 17th Street, 4th floor
Denver, Colorado 80202

Beginning Billing Class Description

This class is for new billers, billers who would like a refresher, and billers who would like to network with other billers about the Colorado Medical Assistance Program. Currently, the class covers in-depth information on resources, eligibility, timely filing, reconciling remittance statements, and paper claim completion for the UB-04 and the CO1500. *This class does not cover any specialty billing information*. The fiscal agent provides specialty training in their Denver office during April and October each year and statewide during May and September each year. *The classes do not include any hands-on computer training*.

Enrollment Application Workshop Description

This workshop focuses on the importance of correctly completing the Colorado Medical Assistance Program Provider Enrollment Application. Newly enrolling providers, persons with the responsibility for enrolling providers within their groups, association representatives, and anyone who wants to better understand the Colorado Medical Assistance Program enrollment requirements should attend.

Driving directions to ACS, Denver Club Building, 518 17th Street, 4th floor, Denver, CO:

Take I-25 toward Denver

Take exit 210A to merge onto W Colfax Ave (40 E), 1.1 miles

Turn left at Kalamath St, 456 ft.

Continue on Stout St, 0.6 miles

Turn **right** at **17th St**, 0.2 miles

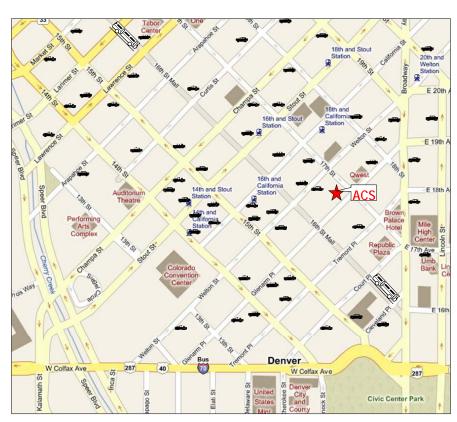
ACS is located in the Denver Club Building, on the west side of Glenarm Place at 17th Street (Glenarm is a two-way street).

Parking:

Parking is not provided by ACS and is limited in the Downtown Denver area. Providers attending workshops are urged to carpool and arrive early to secure parking or use public transportation.

= Free MallRide: MallRide stops are located at every intersection between RTD's Civic Center Station and Union Station.

= Commercial parking lots: Lots are available throughout the downtown area. The daily rates range from about \$5 to \$20.



July 2008 Denver Workshop Calendar						
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15 Beginning Billing Professional 9:00 am – 3:00 pm	16	17 Beginning Billing Institutional 9:00 am – 3:00 pm	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

August 2008 Denver Workshop Calendar						
					1	2
3	4	5	6	7	8	9
10	11	Beginning Billing Professional 9:00 am – 3:00 pm		Beginning Billing Institutional 9:00 am – 3:00 pm	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						



Please direct questions about Medical Assistance Program billing or the information in this bulletin to Medical Assistance Program Provider Services at:

303-534-0146 or 1-800-237-0757 (Toll free Colorado) and please remember to check the Provider Services section of The Department's website at: http://www.chcpf.state.co.us/ACS/Provider_Services/provider_services.asp



July 1, 2008 Rate Increases

Evaluation and Management Visits – New Rates Effective 7/1/08

	Lvaidation al
Code	New Rate
99201	32.34
99202	55.50
99203	83.27
99204	123.79
99205	155.43
99211	17.78
99212	33.38
99213	53.62
99214	80.56
99215	108.75
99217	57.76
99218	54.32
99219	89.26
99220	125.58
99221	75.82
99284	96.74
99285	144.23
99289	193.90
99290	104.52
99291	224.17
99292	99.82
99293	656.71
99294	322.22
99295	756.84
99296	469.14
99298	114.66
99222	104.36
99223	153.47
99231	31.61
99232	56.56
99348	68.04
99349	99.32
99350	139.08
99354	79.88
99355	78.60
99356	72.74
99357	73.00
99360	58.24

Code	New Rate
99363	96.67
99364	33.25
99381	80.55
99233	81.06
99234	108.86
99235	143.58
99236	178.64
99238	57.85
99239	83.05
99241	42.81
99242	79.38
99243	108.95
99244	159.80
99245	197.06
99251	40.68
99252	64.68
99253	96.71
99254	139.75
99255	172.23
99281	17.30
99282	32.54
99283	52.33
99299	104.10
99300	102.51
99304	68.15
99305	94.72
99306	121.27
99307	33.68
99308	51.77
99309	69.08
99310	101.14
99315	50.29
99316	65.66
99318	71.23
99324	47.57
99325	68.99
99326	111.92
99327	145.26

Code	New Rate
99328	171.72
99334	47.66
99335	73.19
99336	103.77
99337	148.68
99341	50.01
99342	68.99
99343	109.17
99344	142.86
99345	171.72
99347	45.25
99382	87.07
99383	85.70
99384	93.24
99385	93.24
99386	109.01
99387	118.60
99391	69.02
99392	77.31
99393	71.30
99394	78.16
99395	78.84
99396	86.38
99397	96.32
99401	31.54
99402	53.13
99403	74.39
99404	95.29
99411	2.38
99412	16.45
99431	62.55
99432	73.14
99433	35.50
99435	80.75
99436	80.58
99440	118.92
99477	287.14

<u> Dental Services – New Rates Effective 7/1/08</u>

Code New Rate D0120 20.80 D0140 31.20 D0145 29.64 D0150 35.88 D0160 65.00 D0170 28.60 D0180 39.00 D0210 53.04 D0220 12.48 D0230 10.40 D0240 18.20 D0250 26.00 D0260 21.32 D0272 19.24 D0274 27.04 D0277 40.04 D0320 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08	
D0140 31.20 D0145 29.64 D0150 35.88 D0160 65.00 D0170 28.60 D0180 39.00 D0210 53.04 D0220 12.48 D0230 10.40 D0240 18.20 D0250 26.00 D0260 21.32 D0272 19.24 D0274 27.04 D0290 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08	
D0145 29.64 D0150 35.88 D0160 65.00 D0170 28.60 D0180 39.00 D0210 53.04 D0220 12.48 D0230 10.40 D0240 18.20 D0250 26.00 D0260 21.32 D0272 19.24 D0274 27.04 D0290 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08	
D0150 35.88 D0160 65.00 D0170 28.60 D0180 39.00 D0210 53.04 D0220 12.48 D0230 10.40 D0240 18.20 D0250 26.00 D0260 21.32 D0272 19.24 D0274 27.04 D0290 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08	
D0160 65.00 D0170 28.60 D0180 39.00 D0210 53.04 D0220 12.48 D0230 10.40 D0240 18.20 D0250 26.00 D0260 21.32 D0272 19.24 D0274 27.04 D0290 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08	
D0170 28.60 D0180 39.00 D0210 53.04 D0220 12.48 D0230 10.40 D0240 18.20 D0250 26.00 D0260 21.32 D0272 19.24 D0274 27.04 D0277 40.04 D0290 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08	
D0180 39.00 D0210 53.04 D0220 12.48 D0230 10.40 D0240 18.20 D0250 26.00 D0260 21.32 D0270 11.96 D0272 19.24 D0274 27.04 D0290 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08)
D0210 53.04 D0220 12.48 D0230 10.40 D0240 18.20 D0250 26.00 D0260 21.32 D0270 11.96 D0272 19.24 D0274 27.04 D0277 40.04 D0290 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08))))
D0220 12.48 D0230 10.40 D0240 18.20 D0250 26.00 D0260 21.32 D0270 11.96 D0272 19.24 D0274 27.04 D0277 40.04 D0290 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08))))
D0230 10.40 D0240 18.20 D0250 26.00 D0260 21.32 D0270 11.96 D0272 19.24 D0274 27.04 D0277 40.04 D0290 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08)
D0240 18.20 D0250 26.00 D0260 21.32 D0270 11.96 D0272 19.24 D0274 27.04 D0277 40.04 D0290 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08)
D0250 26.00 D0260 21.32 D0270 11.96 D0272 19.24 D0274 27.04 D0277 40.04 D0290 52.52 D0310 129.48 D0321 89.96 D0330 47.84 D0340 54.08)
D0260 21.32 D0270 11.96 D0272 19.24 D0274 27.04 D0277 40.04 D0290 52.52 D0310 129.48 D0321 89.96 D0322 205.40 D0330 47.84 D0340 54.08)
D0270 11.96 D0272 19.24 D0274 27.04 D0277 40.04 D0290 52.52 D0310 129.48 D0321 89.96 D0322 205.40 D0330 47.84 D0340 54.08	_
D0272 19.24 D0274 27.04 D0277 40.04 D0290 52.52 D0310 129.48 D0321 89.96 D0322 205.40 D0330 47.84 D0340 54.08	١ ١
D0274 27.04 D0277 40.04 D0290 52.52 D0310 129.48 D0321 89.96 D0322 205.40 D0330 47.84 D0340 54.08	
D0277 40.04 D0290 52.52 D0310 129.48 D0321 89.96 D0322 205.40 D0330 47.84 D0340 54.08	
D0290 52.52 D0310 129.48 D0321 89.96 D0322 205.40 D0330 47.84 D0340 54.08	
D0310 129.48 D0321 89.96 D0322 205.40 D0330 47.84 D0340 54.08	_
D0321 89.96 D0322 205.40 D0330 47.84 D0340 54.08	_
D0322 205.40 D0330 47.84 D0340 54.08	
D0330 47.84 D0340 54.08	_
D0340 54.08	
	_
1 D02E0 1 00.40	
D0350 29.12	_
D0415 70.20	
D0425 39.00)
D0460 24.44	_
D0470 44.20)
D0999 15.46	
D1110 38.20)
D1120 28.60)
D1203 15.60)
D1204 15.60)
D1330 22.36	;
D1351 23.40)
D1510 134.68	}
D1515 186.68	}
D1520 166.92)
D1525 209.04	ŀ
D1550 33.80)
D1555 33.80)
D2140 56.16	;
D2150 71.76	.
D2160 84.76	,
D2161 100.88	

VICCS INC	W Nates Ellet
Code	New Rate
D2330	67.08
D2331	83.20
D2332	98.80
D2335	123.76
D2391	71.76
D2392	93.60
D2393	120.64
D2394	139.36
D2751	426.40
D2791	414.96
D2910	45.24
D2920	46.28
D2930	116.48
D2931	134.68
D2932	145.60
D2933	150.28
D2934	159.64
D2940	47.84
D2950	117.00
D2951	28.60
D2952	179.40
D2953	122.72
D2954	142.48
D2955	122.72
D2957	69.16
D2980	118.04
D2999	By Review
D3110	34.32
D3120	34.32
D3220	80.60
D3221	98.09
D3230	111.80
D3240	129.48
D3310	301.60
D3320	357.24
D3330	430.04
D3332	172.64
D3333	119.60
D3346	346.84
D3347	400.40
D3348	473.72
D3351	172.43
D3352	106.08
D3353	215.80
D3410	277.16

Code	New Rate
D3421	312.52
D3425	364.00
D3426	149.76
D3430	114.40
D3450	227.15
D3460	564.20
D3470	338.00
D3910	86.84
D3920	192.92
D3950	105.04
D3999	By Review
D4210	260.00
D4211	99.32
D4245	359.32
D4249	314.08
D4260	442.00
D4261	364.00
D4263	274.56
D4266	362.96
D4267	424.32
D4268	346.32
D4270	347.36
D4271	370.24
D4273	442.00
D4274	288.60
D4320	212.16
D4321	192.40
D4341	105.56
D4355	78.00
D4381	73.31
D4999	By Review
D5110	676.00
D5120	677.04
D5130	737.88
D5140	738.40
D5211	507.00
D5212	509.60
D5213	728.00
D5214	728.00
D5410	38.48
D5411	38.48
D5421	38.48
D5422	38.48
D5520	76.96
D5610	87.88

<u>Dental Services – New Rates Effective 7/1/08 (continued)</u>

	<u>Dental Se</u>
Code	New Rate
D5620	123.76
D5630	112.32
D5640	78.00
D5660	117.00
D5710	244.40
D5711	245.44
D5720	234.52
D5721	234.52
D5730	156.00
D5731	156.00
D5740	153.92
D5741	155.48
D5750	197.60
D5751	198.64
D5760	196.04
D5761	196.04
D5810	345.28
D5811	345.80
D5820	286.00
D5821	286.00
D5850	85.28
D5850 D5851	85.28
D7250	127.92
D7260	
	328.12
D5860	834.60
D5861	832.00
D5862	286.00
D5867	137.80
D5875	153.92
D5899	By Review
D5911	By Review
D5912	By Review
D5913	By Review
D5914	By Review
D5915	By Review
D5916	By Review
D5919	By Review
D5922	By Review
D5923	By Review
D5924	By Review
D5925	By Review
D5926	By Review
D5927	By Review
D5928	By Review
D5929	By Review
20020	Dy Review

– New Rat	es Effective 7
Code	New Rate
D5931	By Review
D5932	1,109.19
D5933	By Review
D5934	By Review
D5935	By Review
D5936	By Review
D5937	268.32
D5951	348.00
D5952	378.43
D5953	By Review
D5954	By Review
D5955	By Review
D5958	By Review
D5959	By Review
D5960	By Review
D5982	176.80
D5983	By Review
D5984	By Review
D5985	By Review
D5986	82.68
D5987	By Review
D5988	581.25
D7261	411.74
D7270	227.76
D5999	By Review
D6010	858.00
D6040	3,499.60
D6050	2,402.92
D6055	1,168.44
D6056	312.00
D6057	401.44
D6060	532.48
D6063	520.00
D6070	520.00
D6073	520.00
D6078	1,928.16
D6079	1,478.36
D6080	117.00
D6090	312.00
D6092	67.60
D6093	73.84
D6095	310.44
D6100	327.60
D6190	By Review
D6199	By Review
	,

Code	New Rate
D6211	417.04
D6241	429.00
D6545	322.40
D6751	426.40
D6791	418.60
D6920	417.04
D6930	69.68
D6940	176.80
D6950	272.48
D6970	185.12
D6972	144.56
D6973	119.08
D6975	303.68
D6976	119.60
D6977	76.44
D6980	161.20
D7140	68.12
D7210	117.00
D7220	132.60
D7230	169.52
D7240	208.00
D7241	247.00
D7272	371.33
D7280	199.68
D7283	224.12
D7285	161.72
D7286	128.96
D7288	83.33
D7290	200.20
D7291	126.88
D7310	120.12
D7320	176.80
D7340	412.88
D7350	837.72
D7410	165.36
D7411	244.92
D7412	613.75
D7413	275.60
D7414	413.40
D7415	507.00
D7440	228.80
D7441	411.84
D7450	202.28
D7451	265.20
D7460	210.60

<u>Dental Services – New Rates Effective 7/1/08 (continued)</u>

Code	New Rate
D7461	298.48
D7465	160.16
D7471	260.00
D7472	307.32
D7473	299.52
D7485	276.64
D7490	3,484.00
D7510	94.64
D7511	274.00
D7520	161.72
D7530	146.12
D7540	301.57
D7550	214.76
D7560	471.12
D7610	1,771.12
D7620	1,401.92
D7630	1,772.68
D7640	1,368.64
D7650	1,593.80
D7660	1,311.44
D7670	561.08
D7671	744.00
D7680	2,656.16
D7710	1,846.52
D7720	1,380.08
D7730	1,956.24
D7740	1,473.68
D7750	1,683.76
D7760	1,951.56
D7770	1,100.32
D7771	1,054.00
D7780	3,290.04
D7810	1,734.72
D7820	234.00
D7830	311.48
D7840	2,184.00
D7850	3,400.00

Code	New Rate
D7852	2,304.64
D7854	2,275.52
D7856	1,439.36
D7858	By Review
D7860	By Review
D7865	By Review
D7870	167.44
D7871	By Review
D7872	By Review
D7873	By Review
D7874	By Review
D7875	By Review
D7876	By Review
D7877	By Review
D7880	457.40
D7899	By Review
D7910	122.72
D7911	230.33
D7912	369.33
D7920	991.12
D7940	1,501.24
D7941	3,859.96
D7943	3,552.64
D7945	4,500.00
D7946	3,436.68
D7947	3,576.56
D7948	4,076.28
D7949	4,589.52
D7950	1,307.46
D7951	1,153.36
D7955	2,213.43
D7960	184.60
D7963	208.00
D7970	208.00
D7971	97.24
D7972	302.64
D7980	402.50

Code	New Rate
D7981	By Review
D7982	698.88
D7983	508.04
D7990	526.24
D7995	By Review
D7996	By Review
D7997	118.04
D7999	By Review
D8040	1,652.00
D8050	892.58
D8060	1,115.40
D8070	2,478.00
D8080	2,787.75
D8090	3,097.50
D8210	364.00
D8220	416.00
D8660	130.00
D8691	160.00
D8692	137.28
D8693	99.32
D8999	By Review
D9110	49.40
D9220	185.85
D9221	65.52
D9230	29.12
D9241	157.04
D9242	61.36
D9248	130.00
D9310	49.40
D9410	91.00
D9420	104.00
D9911	32.24
D9940	247.52
D9951	72.28
D9971	68.64
D9999	By Review

<u>Vision Services – New Rates Effective 7/1/08</u>

Code	New Rate
V2020	23.85
V2100	15.57
V2101	15.57
V2102	15.57
V2103	15.57
V2104	19.60
V2105	23.67
V2106	27.41
V2107	19.60
V2108	23.67
V2109	27.41
V2110	31.43
V2111	23.67
V2112	27.41
V2113	31.43
V2114	35.51
V2115	72.56
V2116	0.00
V2118	72.54
V2121	64.52
V2199	0.00
V2200	29.28

Code	New Rate
V2201	29.28
V2202	29.28
V2203	29.28
V2204	33.31
V2205	37.37
V2206	41.12
V2207	33.31
V2208	37.37
V2209	41.12
V2210	45.16
V2211	37.37
V2212	41.12
V2213	45.16
V2214	49.20
V2215	78.80
V2218	92.79
V2219	78.79
V2220	78.79
V2221	78.80
V2300	36.75
V2301	42.65
V2302	84.07

Code	New Rate
V2303	40.78
V2304	43.28
V2305	47.33
V2306	47.33
V2307	46.72
V2308	51.36
V2309	55.44
V2310	68.51
V2311	51.36
V2312	54.49
V2313	58.53
V2314	58.53
V2315	92.48
V2318	92.48
V2319	92.48
V2320	92.48
V2321	92.48
V2340	0.00
V2410	72.56
V2430	78.80
V2784	4.66

Outpatient Substance Abuse Treatment and Special Connections - New Rates Effective 7/1/08

Outpatient Substance Abuse Treatment

Code	Modifier	New Rate
H0004	HF	14.00 per 15 min
H0005	HF	30.00 per session

Special Connections

Code	Modifier	New Rate
H0004	HD	14.00 per 15 min
H0004	HD + HQ	3.75 per 15 min