Claim Informational Updates

See our website https://www.icarehealthplan.org/Claims/Claims-Processing.htm for updates on the following topic:

» Corrected Claim Process
And here: https://www.icarehealthplan.org/Education/Resources.htm under Claims Education

» Diagnosis Specificity
» SNF Guide
  » Review M8 Disclaimer information

EVV Reminder - KX Modifiers for Live-in Caregivers

The Prior Authorization process verifies if a worker is live-in care giver which does not require EVV data. However, that documentation does not transfer to the claims processing system. **The KX Modifier is required on the claim** to identify the live-in care giver. KX should be in Box 44 of the
UB04 form, following the CPT. If the KX modifier is not submitted to bypass EVV requirements the claim will deny.

**EDI 276/277: Claim Status Inquiry and Response**

Use the **Claim Status Inquiry (276)** transaction to inquire about the status of a claim after it has been sent to a payer, whether submitted on paper or electronically.

The **Claim Status Response (277)** transaction is used to respond to a request inquiry about the status of a claim after it has been sent to a payer, whether submitted on paper or electronically.

Getting Started: contact SSI Claimsnet at Helpdesk_Dallas@ssigroup.com or call 800-356-0092.

**EVV: Home Health Care Services (HHCS)**

As a reminder, Federally mandated 21st Century Cures Act requires EVV for Medicaid-covered personal care services (PCS) and HHCS. States that do not implement EVV risk losing Medicaid funding.

DHS decided to create two phases for the EVV HHCS timeline:

» Soft launch by January 1, 2024 • Hard launch in 2024—date TBD

**HHCS Codes for Therapy Requiring EVV**

» 92507 - Treatment of speech, language, voice, communication, and/or auditory processing disorder; individual [per visit]
» 97139 - Unlisted therapeutic procedure (specify) [per visit]
» 97799 - Unlisted physical medicine/rehabilitation service or procedure [per visit]

**HHCS Codes for Nursing Requiring EVV**

» 99504 - Home visit for mechanical ventilation care [per hour]
» 99600 - Unlisted home visit service or procedure [per visit]
» S9123 - Nursing care; in the home; by registered nurse, per hour
» S9124 - Nursing care; in the home; by licensed practical nurse, per hour
» T1001 - Nursing assessment/evaluation [per visit]
» Home health aide or certified nurse assistant, per visit
» T1502 - Administration of oral, intramuscular and/or subcutaneous medication by health care agency/professional, per visit

**PCS Code for RN Supervisory Visit Requiring EVV**

» 99509 - Home visit for assistance with activities of daily living and personal care (per visit)

Visit DHS for information on Forums and Key Conversations. [https://www.dhs.wisconsin.gov/evv/index.htm](https://www.dhs.wisconsin.gov/evv/index.htm)

Also, remember to update your contact information with DHS for important updates and reminders.
Prior Authorization List/Procedure Specific Listing Updated for 10/1/2023

The Prior Authorization Department will release an updated version of its Prior Authorization Procedure Specific Listing later this week with an effective date of 10/1/2023. The listing will be available in PDF or Excel format on this web page of the iCare web site.

Effective 10/1/2023, the following codes will require PA:

**Procedures:**
22860, 43290, 43291

**Pathology and laboratory:**
81441, 81456, 84433

**Med/Surg-Misc Supplies and Devices:**
A4239, C1747, C1826, C1827, C9150, C9151, C9784, C9785, E2103

**Medicare Only:**
J0613, J1449, Q5127, Q5128, Q5129, Q5130, Q5131, 97810, 97811, 97813, 97814, 20560, 20561

**Proprietary Laboratory Analyses:**

**Category III Codes:**

**Q Codes (Temporary Codes)**
Q4262, Q4263, Q4264, Q4265, Q4266, Q4267, Q4268, Q4269, Q4270, Q4271, Q4272, Q4273, Q4274, Q4275, Q4276, Q4277, Q4278, Q4280, Q4281, Q4282, Q4283, Q4284