

# IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT202345 MAY 16, 2023

*Note: This bulletin has been corrected. Procedure code E0697 has been changed to E0677.*

*A reference to Surgical Services Codes was added, along with a note in Table 3 regarding L8678.*

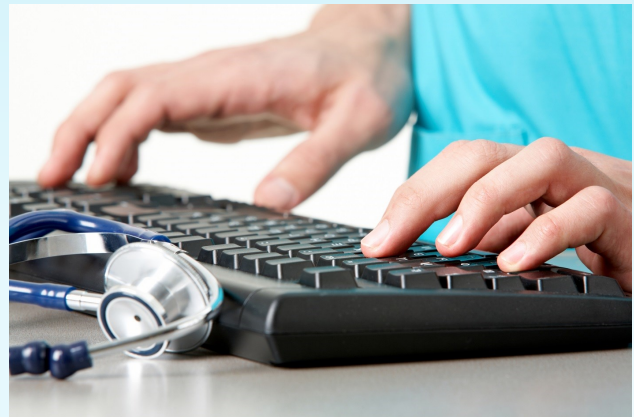
## Updates to the coverage and billing information for the 2023 April quarterly HCPCS code update

The Indiana Health Coverage Programs (IHCP) previously announced coverage and billing information for new codes for the quarterly Healthcare Common Procedure Coding System (HCPCS) updates in *IHCP Bulletin BT202328*. This bulletin serves as notice of additional updates to the April quarterly 2023 HCPCS codes.

*BT202328* listed several codes with pricing pending. Professional and outpatient pricing has been updated in the Core Medicaid Management Information System (*CoreMMIS*). Providers may view current pricing on the Professional Fee Schedule and Outpatient Fee Schedule, accessible from the [IHCP Fee Schedules](#) page at [in.gov/medicaid/providers](https://in.gov/medicaid/providers).

The following tables include additional information for the quarterly 2023 HCPCS update, effective immediately and retroactive to dates of service (DOS) on and after April 1, 2023:

- [Table 1](#): Procedure codes linked to revenue code 274
- [Table 2](#): Procedure codes with professional pricing added
- [Table 3](#): Procedure codes with outpatient pricing added
- [Table 4](#): Procedure code with prior authorization (PA) removed



Updates will be made to the *Revenue Codes With Special Procedure Code Linkages* and *Surgical Services Codes*, accessible from the [Code Sets](#) page at [in.gov/medicaid/providers](https://in.gov/medicaid/providers).

The standard global billing procedures and edits apply to the new codes unless special billing guidance is otherwise noted. Reimbursement, PA and billing information apply to services delivered under the fee-for-service (FFS) delivery system. Questions about FFS reimbursement, PA and billing should be directed to Gainwell Technologies at 800-457-4584.

Individual managed care entities (MCEs) establish and publish reimbursement, PA and billing information within the managed care delivery system. Questions about managed care reimbursement, PA and billing should be directed to the MCE with which the member is enrolled.

*Table 1 – Procedure codes linked to revenue code 274*

Procedure code	Description
A4341	Indwelling intraurethral drainage device with valve, patient inserted, replacement only, each
A4342	Accessories for patient inserted indwelling intraurethral drainage device with valve, replacement only, each
A6590	External urinary catheters; disposable, with wicking material, for use with suction pump, per month
A6591	External urinary catheter; non-disposable, for use with suction pump, per month

*Table 2 – Procedure codes with professional pricing added*

Procedure code	Description
A4341	Indwelling intraurethral drainage device with valve, patient inserted, replacement only, each
A4342	Accessories for patient inserted indwelling intraurethral drainage device with valve, replacement only, each
A6590	External urinary catheters; disposable, with wicking material, for use with suction pump, per month
A6591	External urinary catheter; non-disposable, for use with suction pump, per month
E0677	Non-pneumatic sequential compression garment, trunk
L8678	Electrical stimulator supplies (external) for use with implantable neurostimulator, per month

*Table 3 – Procedure codes with outpatient pricing added*

Procedure code	Description
A4341	Indwelling intraurethral drainage device with valve, patient inserted, replacement only, each
A4342	Accessories for patient inserted indwelling intraurethral drainage device with valve, replacement only, each
A6590	External urinary catheters; disposable, with wicking material, for use with suction pump, per month
A6591	External urinary catheter; non-disposable, for use with suction pump, per month
E0677	Non-pneumatic sequential compression garment, trunk
L8678*	Electrical stimulator supplies (external) for use with implantable neurostimulator, per month

\* L8678 is an implantable durable medical equipment (DME) code that is reimbursable in addition to the outpatient institutional claim when billed separately on a professional claim.

*Table 4 – Procedure code with PA removed*

Procedure code	Description
A2020	AC5 Advanced Wound System (AC5)

## QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

## COPIES OF THIS PUBLICATION

If you need additional copies of this publication, please download them from the [IHCP Bulletins](#) page of the IHCP provider website at [in.gov/medicaid/providers](https://in.gov/medicaid/providers).

## SIGN UP FOR IHCP EMAIL NOTIFICATIONS

To receive email notices of IHCP publications, subscribe by clicking the blue subscription envelope or sign up from the [IHCP provider website](#) at [in.gov/medicaid/providers](https://in.gov/medicaid/providers).

