

IHCP *bulletin*

INDIANA HEALTH COVERAGE PROGRAMS BT202410 JANUARY 30, 2024

IHCP announces retroactive update to HCPCS code J7311

The Indiana Health Coverage Programs (IHCP) performed a review of the Professional Fee Schedule and Outpatient Fee Schedule and is updating the maximum fee rate for Healthcare Common Procedure Coding System (HCPCS) procedure code J7311 – *Injection, fluocinolone acetonide, intravitreal implant (Retisert), 0.01 mg.*

The description of procedure code J7311 was retroactively changed by the Centers for Medicare & Medicaid Services (CMS), which caused an issue with the maximum fee rate. Effective immediately, the IHCP updated the rate to \$338.58 per unit, effective retroactively to dates of service (DOS) on or after **Oct. 1, 2019**. Procedure code J7311 is limited to one unit per DOS.

For prior authorization criteria for Retisert, see the [Vision Services](#) provider reference module.

Questions or concerns can be emailed to IHCP Reimbursement at FSSA.IHCPReimbursement@fssa.in.gov.



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