

Anthem Blue Cross and Blue Shield Central Region Clinical Claim Edit

Subject: IV Supplies with Home Infusion Therapy	
Edit# 201	Effective: 12/20/2002 – 12/31/2099

Coverage is subject to the terms, conditions, and limitations of an individual member’s programs or products and the edit criteria listed below. Please compare the claim's date of adjudication to the range of the edit in question. Prior versions, if any, can be found below.

Description

CODE	RULE	CODE
A4206	Incidental	S5497
A4207		S5498
A4208		S5501
A4209		S5502
A4212		S9061
A4213		S9325
A4214		S9326
A4215		S9327
A4221		S9328
A4222		S9329
A4245		S9330
A4246		S9331
A4247		S9335
A4454		S9336
A4455		S9338
E0776		S9339
E0781		S9340
S1015		S9341
S1016		S9342
S9810		S9343
	S9345	
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	S9353	

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		S9542
		S9558
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		S9560
		S9562
		S9590

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Rationale

Anthem Central Region bundles A4206-S9810 as incidental to home therapy services S5497 - S9590. Based on the 2002 HCPCS Level II Expert Manual, in the text of all home infusion therapy codes, it states: "All necessary supplies are included in the home therapy service codes." Therefore, if these supplies are submitted with any of the home therapy services --only the home therapy services reimburse.

Reference

1. Ingenix, Inc. Temporary National Codes {Non-Medicare} S0009-S9999. HCPCS Level II Expert; 2002:S-Codes 147, 149-152.

Claim Edit History

12/20/2002	Adopted
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