The Centers for Medicare & Medicaid Services (CMS) has sent Amerigroup* Community Care updates to the 2016 physician fee schedule. As per CMS, the amended physician fee schedule is retroactive to January 1, 2016. Prior claims will only be adjusted upon request.

This serves as notification for the retroactive updates implemented within our claims payment systems.

If you have further questions on this update we have attached the MLN Matters released by CMS on these updates. You may also call us at 1-866-805-4589.

*In New Mexico, Amerigroup Community Care of New Mexico, Inc. In Texas, Amerigroup members in the Medicaid Rural Service Area are served by Amerigroup Insurance Company; all other Amerigroup members are served by Amerigroup Texas, Inc. In Washington, Amerigroup Washington, Inc.

Amerivantage is a DSNP plan with a Medicare contract and a contract with the State Medicaid program. In New Mexico: Amerivantage is an HMO with a Medicare contract. Enrollment in Amerivantage depends on contract renewal.
Quarterly Update to the Medicare Physician Fee Schedule Database (MPFSDB) - April Calendar Year (CY) 2016 Update

Provider Types Affected

This MLN Matters® Article is intended for physicians, other providers, and suppliers who submit claims to Medicare Administrative Contractors (MACs) for services provided to Medicare beneficiaries.

Provider Action Needed

Change Request (CR) 9531 amends payment files that were issued to your MAC based upon the CY 2016 Medicare Physician Fee Schedule (MPFS) Final Rule published in the Federal Register on November 16, 2015. These payment files are to be effective for services furnished between January 1, 2016, and December 31, 2016. Please make sure your billing staff is aware of these changes.

Background

Section 1848(c)(4) of the Social Security Act authorizes the Secretary to establish ancillary policies necessary to implement relative values for physicians’ services.

MACs will not search their files to either retract payment for claims already paid or to retroactively pay claims, however, they will adjust claims that you bring to their attention.

The key changes for the April update that are effective as of January 1, 2016 are as follows:

- CPT/HCPCS code G0464 is assigned a procedure status of I;
- Code 10030 is assigned Global period days of 000;
- Code 77014 is assigned a PC/TC Indicator of 1; and
- Code 80055 is assigned a procedure status of X.

Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2014 American Medical Association. All rights reserved.
Other changes that are effective for services performed on or after April 1, 2016 are as follows:

- Code G9678 is assigned a procedure status of X;
- G9481 (Remote E/M new pt 10mins) has a PE RVU = 0, all other MPFS indicators/values = code 99201;
- G9482 (Remote E/M new pt 20mins) has a PE RVU = 0, all other MPFS indicators/values = 99202;
- G9483 (Remote E/M new pt 30mins) has a PE RVU = 0, all other MPFS indicators/values = 99203;
- G9484 (Remote E/M new pt 45mins) has a PE RVU = 0, all other MPFS indicators/values = 99204;
- G9485 (Remote E/M new pt 60mins) has a PE RVU = 0, all other MPFS indicators/values = 99205;
- G9486 (Remote E/M est. pt 10mins) has a PE RVU = 0, all other MPFS indicators/values = 99212;
- G9487 (Remote E/M est. pt 15mins) has a PE RVU = 0, all other MPFS indicators/values = 99213;
- G9488 (Remote E/M est. pt 25mins) has a PE RVU = 0, all other MPFS indicators/values = 99214;
- G9489 (Remote E/M est. pt 40mins) has a PE RVU = 0, all other MPFS indicators/values = 99215; and
- G9490 (Joint replac mod home visit) with all MPFS indicators & RVUs = those of G9187.

Codes G9481-G9490 are new and are assigned Type of Service of 1. See the MLN Matters article MM9533 at https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/Downloads/MM9533.pdf for further details of these new codes.

**Additional Information**


If you have any questions, please contact your MAC at their toll-free number. That number is available at http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNMattersArticles/index.html under - How Does It Work.

**Disclaimer**

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents. CPT only copyright 2014 American Medical Association. All rights reserved.