



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
CHARLES J. KROGMEIER, DIRECTOR

INFORMATIONAL LETTER NO. 956

DATE: October 18, 2010

TO: Iowa Medicaid Providers Billing on CMS 1500 Claim Forms

ISSUED BY: Iowa Department of Human Services, Iowa Medicaid Enterprise

RE: Billing Multiple Units

EFFECTIVE: November 1, 2010

The purpose of this letter is to inform providers that Iowa Medicaid's instruction for billing multiple units has changed.

Billing Multiple Units: On November 1, 2010** our claims processing system will be updated to allow a provider to bill multiple units across multiple lines of the same claim. The CPT book states, "The judicious application of modifiers obviates the necessity for separate procedure listings that may describe modifying circumstances." As such, it would be expected that in most situations, when billing for multiple units of a service, the provider will place the CPT/HCPCS code **on separate claim lines**, appended with an appropriate National Correct Coding Initiative (NCCI) modifier to all subsequent lines on which the code is billed. The modifier should explain why the excess units of service were billed. Modifiers should only be used if the proper criteria is met, NOT to simply bypass an edit. Providers must maintain documentation in the medical record to justify the use of any NCCI associated modifier. In addition, as long as a provider is billing the multiple units across multiple lines of a claim, it is no longer necessary for you to append the 51 modifier to indicate that the Iowa Medicaid maximum unit of a code is being exceeded.

Billing Bilateral Services: Codes with a Medicare Physician Fee Schedule (MPFS) bilateral indicator of "1" or "3" should be billed on one line, with the 50 modifier appended.

Additional information regarding the Medically Unlikely edit can be found at:

http://www.cms.gov/NationalCorrectCodInitEd/08_MUE.asp#TopOfPage. Also, please refer to the WPS Medicare website at: <http://www.wpsmedicare.com/j5macpartb/resources/modifiers/> or the CMS website at: <http://www.cms.hhs.gov/manuals/downloads/clm104c12.pdf> for further information relating to the appropriate use of modifiers.

** Some providers may have adopted this "multiple line billing" method on October 1, 2010 per the IME guidance, but the programming to support this method will not be in place until mid October. As soon as the programming is in place, any claims the IME has denied as duplicate (and submitted with an appropriate NCCI modifier) will be automatically re-submitted by the IME; likely by the end of October.

If you have any questions, please contact the IME Provider Services Unit at 1-800-338-7909 or locally (in Des Moines) at 256-4609, or e-mail at imeproviderservices@dhs.state.ia.us.