



Medical Coding Resources

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In This Issue

- 2021 CPT HCPCS Codes
- Dental Changes for 2021
- 2021 E/M Changes
- COVID-19 U0005
- COVID-19 Vaccine Administration

Medical Coding Webpage

Dental Teledentistry

Dental Code Limits and Prior Authorization Update

COVID-19 Administration Bill Guidelines

AHCCCS Medical Coding Updates Form

AHCCCS FAQ COVID-19

Contact Us

codingpolicyquestions@azahcccs.gov

CPT-HCPCS 2021 Codes

The new codes for January 1, 2021 are in our system with an effective date of 1/1/2021.

The following 2021 new codes are **not covered**.

0227U-0239U PLA labs

0620T-0638T Emerging Technology 2021

The following codes are for Medicare Primary members only and not covered if the member has AHCCCS coverage only.

99439 Chronic care management services with the following required elements: multiple (two or more) chronic conditions expected to last at least 12 months, or until the death of the patient, chronic conditions place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline, comprehensive care plan established, implemented, revised, or monitored; each additional 20 minutes of clinical staff time directed by a physician or other qualified health care professional, per calendar month (List separately in addition to code for primary procedure)

G0088 Professional services, initial visit, for the administration of anti-infective, pain management, chelation, pulmonary hypertension, inotropic, or other intravenous infusion drug or biological (excluding chemotherapy or other highly complex drug or biological) for each infusion drug administration calendar day in the individual's home, each 15 minutes

G0089 Professional services, initial visit, for the administration of subcutaneous immunotherapy or other subcutaneous infusion drug or biological for each infusion drug administration calendar day in the individual's home, each 15 minutes

G0090 Professional services, initial visit, for the administration of intravenous chemotherapy or other highly complex infusion drug or biological for each infusion drug administration calendar day in the individual's home, each 15 minutes

G2214 Initial or subsequent psychiatric collaborative care management, first 30 minutes in a month of behavioral health care manager activities, in consultation with a psychiatric consultant, and directed by the treating physician or other qualified health care professional

G2215 Take-home supply of nasal naloxone (provision of the services by a medicare-enrolled opioid treatment program); list separately in addition to code for primary procedure

G2216 Take-home supply of injectable naloxone (provision of the services by a medicare-enrolled opioid treatment program); list separately in addition to code for primary procedure

G2250 Remote assessment of recorded video and/or images submitted by an established patient (e.g., store and forward), including interpretation with follow-up with the patient within 24 business hours, not originating from a related service provided within the previous 7 days nor leading to a service or procedure within the next 24 hours or soonest available appointment

G2251 Brief communication technology-based service, e.g. virtual check-in, by a qualified health care professional who cannot report evaluation and management services, provided to an established patient, not originating from a related service provided within the previous 7 days nor leading to a service or procedure within the next 24 hours or soonest available appointment; 5-10 minutes of clinical discussion

G2252 Brief communication technology-based service, e.g. virtual check-in, by a physician or other qualified health care professional who can report evaluation and management services, provided to an established patient, not originating from a related e/m service provided within the previous 7 days nor leading to an e/m service or procedure within the next 24 hours or soonest available appointment; 11-20 minutes of medical discussion

M1145 Most favored nation (mfn) model drug add-on amount, per dose, (do not bill with line items that have the jw modifier)

DENTAL Changes for 2021

The following new Dental codes are **not covered**:

D0709 Intraoral - complete series of radiographic images - image capture only

D5995 Periodontal medicament carrier with peripheral seal - laboratory processed - maxillary

D5996 Periodontal medicament carrier with peripheral seal - laboratory processed - mandibular

D6191 Semi-precision abutment - placement

D6192 Semi-precision attachment - placement

D7993 Surgical placement of craniofacial implant - extra oral

D7994 Surgical placement: zygomatic implant

Also, the **Prior Authorization** criteria that were waived during the PHE will be reinstated on 1/1/2021. Please visit the Medical Coding Resources page under Dental more information.

[COVID-19 Emergency Teledentistry Updated](#)

[Dental Code Limits Updated](#)

2021 E/M Changes

Effective 1/1/2021 the E/M code 99201 was deleted by the AMA and will no longer be active for use.

CPT 99417 Prolonged office or other outpatient evaluation and management service(s) beyond the minimum required time of the primary procedure which has been selected using total time, requiring total time with or without direct patient contact beyond the usual service, on the date of the primary service, each 15 minutes of total time (**List separately in addition to codes 99205, 99215 for office or other outpatient Evaluation and Management services**)

There are many changes regarding the E/M visit codes for 99202-99215 that you can find in the CPT book related to these changes. You may also locate some of these changes on the American Medical Association webpage, if you do not have the 2021 CPT book.

COVID-19 U0005

U0005 will be effective and covered for services 1/1/2021.

U0005 Infectious agent detection by nucleic acid (dna or rna); severe acute respiratory syndrome coronavirus 2 (sars-cov-2) (coronavirus disease [covid-19]), amplified probe technique, cdc or non-cdc, making use of high throughput technologies, completed within 2 calendar days from date of specimen collection (**list separately in addition to either hcpcs code u0003 or u0004**) as described by cms-2020-01-r2

Make sure you read all our COVID-19 guidance found on the Medical Coding Resources page under the COVID-19 Drop down box. These documents have additional coding/billing criteria related to modifiers and condition codes that are in place during the PHE.

COVID-19 Vaccine Administration

You can find specific billing guidance for the COVID-19 vaccine and administration codes on the Medical Coding Resources webpage and the Main AHCCCS FAQ. (links below)

[COVID-19 Vaccine Administration Bill Guidelines](#)

[AHCCCS FAQ](#)
