

*** BILLING FOR LOW-DENSITY LIPID APHERESIS SERVICES ***

Read this bulletin on-line via NaviNet

MARCH 18, 2008

MS-PROV-2008-001
MSFB-PROV-2008-001

TO: (1) CHIEF FINANCIAL OFFICER
(2) DIRECTOR/MANAGER OF PATIENT ACCOUNTS
(3) BILLING OFFICE STAFF

FROM: MOUNTAIN STATE BLUE CROSS BLUE SHIELD OFFICE OF
PROVIDER CONTRACTING AND REIMBURSEMENT

SUBJECT: BILLING FOR LOW-DENSITY LIPID APHERESIS SERVICES

THIS BULLETIN APPLIES TO THE FOLLOWING PRODUCTS:

<input checked="" type="checkbox"/> Traditional/Indemnity	<input checked="" type="checkbox"/> PPO/POS	<input checked="" type="checkbox"/> FEP
<input checked="" type="checkbox"/> WVSBP	<input checked="" type="checkbox"/> HHIC FreedomBlue PPO	<input checked="" type="checkbox"/> STEEL

PURPOSE

This bulletin provides instructions to providers billing for low-density lipid (LDL) apheresis services for both Mountain State Blue Cross Blue Shield (MSBCBS) Commercial and Highmark Health Insurance Company (HHIC) Medicare Advantage members.

BACKGROUND/OVERVIEW

Most patients with high cholesterol levels can be treated using a combination of diet, exercise and drugs. Some patients who have dangerously high cholesterol, however, do not respond to strong drug treatments.

The term "LDL apheresis" describes a variety of technologies used to remove LDL from a patient's blood plasma on an acute basis. MSBCBS and HHIC cover the service for patients with very specific clinical indications, which are detailed in both MSBCBS Medical Policy S-11 and HHIC Medicare Advantage Medical Policy S-11. Proper documentation of the patient's condition is required and must be available for review.

BILLING INSTRUCTIONS

As explained in Medical Policy S-11, two procedure codes are available for reporting LDL apheresis treatment:

- 36516** Therapeutic apheresis; with extracorporeal selective adsorption or selective filtration and plasma reinfusion
- S2120** Low density lipoprotein (LDL) apheresis using heparin-induced extracorporeal LDL precipitation

Facilities providing this service should select the procedure code corresponding to the technology utilized.

When billing for LDL apheresis services rendered to MSBCBS Commercial or HHIC Medicare Advantage members using either of these methodologies, providers should report ICD-9-CM diagnosis code **272.0** and the appropriate procedure code. No authorization is required for either service, under Commercial or Medicare Advantage coverage.

As always, providers are reminded that MSBCBS and HHIC expects them to utilize the most current, most specific codes available to accurately represent the services and conditions reported on their claims.

TIME FRAME

The billing instructions in this bulletin have been applicable to Medicare Advantage business since May 7, 2007. They apply to Commercial business as well, effective December 3, 2007.

ASSISTANCE

This Bulletin

Questions regarding this bulletin may be directed to the Office of Provider Relations, at **1-304-424-7795** or **1-800-798-7768**, or contact your External Provider Relations Representative.

Inquiries About Eligibility, Benefits, Claim Status or Authorizations

For inquiries about eligibility, benefits, claim status or authorizations, MSBCBS and HHIC encourages providers to use the electronic resources available to them – NaviNet and the applicable HIPAA transactions – prior to placing a telephone call to the Customer Service Center.

NaviNet is a registered trademark of NaviMedix, Inc. NaviMedix Inc. is an independent company that does not provide MSBCBS or HHIC products or services. NaviMedix, Inc. is solely responsible for the products and services that they provide and that are referenced in this bulletin.