



**Hospital Handbook Transmittal Letter (HHTL) 3352-19-03**

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**TO: All Hospital Providers  
Directors, County Departments of Job and Family Services**

**FROM: Maureen Corcoran, Director**

**SUBJECT: Hospital Coverage Updates Effective January 1, 2019 and February 1, 2019**

**Summary**

This Hospital Handbook Transmittal Letter (HHTL) provides information regarding changes effective January 1, 2019 and February 1, 2019.

**Hospital Inpatient Services**

**Rule 5160-2-65** entitled Inpatient hospital reimbursement, sets forth the payment policies for inpatient hospital services.

**Changes effective February 1, 2019**

The Department implemented the new 2019 ICD-10 diagnosis and procedure codes for inpatient hospital reimbursement, effective October 1, 2018. Upon review of the codes, it was determined that some zooplastic tissue procedures do not need prior authorization. Therefore, a number of zooplastic procedure codes were removed from the list of inpatient procedures that require prior authorization, effective for dates of discharge on or after February 1, 2019. The list of inpatient procedures that require prior authorization has been updated on the Department's website: <http://www.medicaid.ohio.gov/> > Providers > Fee Schedules and Rates > "I Agree" > Inpatient Hospital Services.

Two diagnosis status codes (Z98.51 and Z98.52) that are used to report previous tubal ligations or vasectomies are being removed from the Diagnosis Codes Not Covered List; thereby adding full coverage and not requiring a sterilization form with submission of these codes.

To facilitate proper coding of Electroconvulsive therapy, ODM is opening Revenue Code 0901 to the Inpatient Hospital and Mental Health Hospital contracts.

**Hospital Outpatient Services**

**Rule 5160-2-75** entitled Outpatient hospital reimbursement, describes the outpatient payment policies for hospitals that are subject to EAPG prospective payment.

#### Changes effective January 1, 2019

Some lab procedure codes have been added to the Outpatient Hospital Behavioral Health (OPHBH) benefit plan, to accommodate freestanding psychiatric facilities that have laboratories, effective for dates of service on or after January 1, 2019. The updated OPHBH covered codes list was published to reflect these changes on the Department's website:

<http://www.medicaid.ohio.gov/> > Providers > Fee Schedules and Rates > "I Agree" > Outpatient Hospital Behavioral Health Services.

On January 8, 2019, the Centers for Medicare & Medicaid Services (CMS) issued Corrections to the 2019 Current Procedural Terminology (CPT) and Healthcare Common Procedure Coding System (HCPCS) updates. As a result, the Enhanced Ambulatory Patient Groups (EAPG) covered codes list for outpatient hospitals and ambulatory surgical centers was updated to reflect new or revised codes in the CPT/HCPCS correction notice.

#### Changes effective February 1, 2019

At the urging of stakeholders, ODM is adding coverage to Health and Behavior Assessment/Intervention codes (CPT codes 96150-96154), as these codes were covered prior to EAPG implementation and would not generally result in separate payment. The Methadone Administration code (H0020) is being added to the OPH contract, as is coverage to atherectomy code 0266T, due to the procedure's removal from the Medicare Inpatient Only list. These changes are effective February 1, 2019. The updated covered codes list was published on the Department's website: <http://www.medicaid.ohio.gov/> > Providers > Fee Schedules and Rates > "I Agree" > Outpatient Hospital Services.

Due to input from stakeholders and in accordance with proper coding guidelines, ODM removed the age restriction from the OPH contract for vaccine administration codes 90471 and 90472. The professional contracts and VFC/VFO edits and audits will remain unchanged, because they use the age restrictions for vaccine-related reimbursement policies.

ODM added coverage to Electroconvulsive Therapy, CPT code 90870, to the OPHBH fee schedule (this code was already covered in OPH), so it is available to all hospitals. To facilitate proper coding, ODM is opening Revenue Code 0901 to the OPH and OPHBH contracts. This change is reflected in the Hospital Billing Guidelines published on the Department's website: <http://www.medicaid.ohio.gov/> > Resources > Publications > ODM Guidance > Provider Billing Instructions.

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### **Access to Rules and Related Material**

Information about the services and programs of the Department may be accessed through the Department's main webpage: <http://www.medicaid.ohio.gov> .

- Stakeholders who want to receive notification when the Department original or final files a rule package may visit JCARR's RuleWatch at [www.rulewatchohio.gov](http://www.rulewatchohio.gov) where an account can be created to be notified of rule actions by rule number or department.
- Stakeholders can subscribe to receive notification when a clearance or BIA is posted for public comment on the Ohio Business Gateway here:  
<https://www.apps.das.ohio.gov/RegReform/enotify/subscription.aspx>

Information about hospital payment policies may be accessed through the Department main web page (<http://medicaid.ohio.gov> > Providers > Fee Schedule and Rates >Click "I Agree").

### **Additional Information**

Questions pertaining to this letter should be addressed to:

hospital\_policy@medicaid.ohio.gov

or

Ohio Department of Medicaid

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