



*Helping People Lead
Healthier Lives*

June 2003





NOTE IMPORTANT CHANGES IN BILLING

Dear APS Provider


Effective July 1, 2003 APS will institute the use of HIPAA compliant billing code sets. These approved codes include ICD-9-CM, CPT, HCPCS, CPT/HCPCS Modifiers, Place of Service, Type of Bill, and Revenue Codes.

ALL claims should be submitted using the guidelines below:

Professional Services (usually submitted on CMS 1500)

-  **Do not use DSM IV** on claims submissions, **use ICD-9-CM** codes (Sixth Edition, effective 10/01/02-09/30/03)
-  Use current CPT® 2003 codes (AMA Fourth Edition, effective 01/01/03) to bill for professional services
-  Submit on original CMS 1500 form
-  Use 2-digit year in date field, as the date field on CMS 1500 is not designed for 4-digit submission

Facility/Program Services (usually submitted on UB -92)

-  Use the industry standard HIPAA compliant coding recommendations, found at the CMS internet site, www.cms.hhs.gov. (These are in addition to the ICD-9-CM and CPT codes).

If you have any questions, please feel free to contact Provider Relations at 877-490-6854.

Sincerely,

A handwritten signature in cursive script that reads "Pamela Surgent".

Pamela Surgent, RN
Director Provider Operations