This Computes! Archive

97 - Authorization of Outpatient Medical and Surgical Procedures

98 - Authorization of Outpatient Dental Surgical Procedures

102 - Brand Name Drugs

107 - Special Care Center SAR – Referring Physician

114 - Common Provider Billing Errors

129 - Chronic Dialysis Clinic Service Code Group (SCG) 09

135 - Closing and Opening Cases on the Same Day

138 - New Codes for Pressure Support Ventilators and Publication of DME Codes for CCS Clients Only

149 - Update for Botox Type A X7040

150 - CMS Net Instruction for Inter-County Case Transfers

158 - Temporary Physician Approval Process

162 - The Mother and Newborn Connection

171 - Blood Factor Billing Method for Pharmacy Providers

179 - Synagis Instructions for RSV Seasons

192 - Medical Therapy Service Code Group (SCG) 11

230 - Reimbursement of Sexual or Erectile Dysfunction Drugs and Products for Pulmonary Hypertension

233 - Manufacturer Codes for Medical Supplies and Contracted Medical Supplies

250 - Cochlear Implant Replacement Parts and Batteries Updated Instructions

266 - Update on Medical Foods

267 - Provider Billing For Medical Supplies And Low Cost Durable Medical Equipment (DME)

275 - National Drug Codes (NDCs) Not in CMSNet

277 - Retroactive SARs for Drugs Removed from the CCS Restricted Drug List

298 - Hearing Aid Replacement Standard of Care

299 - Authorization of Diagnostic Evaluations for Hearing Loss

310 - Coverage for Experimental and Investigational Drugs

315 - Low-Cost DME Codes SAR/TAR Clarification

319 - Billing for Insulin Syringes

322 - Early and Periodic, Screening, Diagnosis and Treatment (EPSDT) Supplemental in Home Shift/Hourly/ Private Duty Nursing Services

325 - Billing for Heparin Flush Products

328 - New Guidance for Medical Supplies and Low Cost DME

329 - Determining Units and Quantity on SARs

333 - Billing Medical Supply Claims Electronically

342 - Drugs with FUL (Federal Upper Limit)

344 - SARs for Investigational Drugs Under an Investigational New Drug (IND) Application

345 - Provider Contracting for Hemophilia Blood Factor Products

347 - Service Code Group (SCG) 51 Questions and Answers

361 - SARs for Hemophilia Blood Factor Products: Medi-Cal Billing Unit vs. # Vials

362 - Active Pharmaceutical Ingredients (APIs)

363 - EPSDT Check-Box

371 - Corifact (Factor XIII)

372 - Avoid duplicate session sharing issues

379 - When to Use Closure Reason NEG1 or RES3

384 - DME: Rent-to-Own vs Rental Only

395 - Authorization Instructions for the Melody Valve

403 - Hypertonic Saline Solution for Inhalation

411 - Contracted Diabetic Test Strips and Lancets

412 - Folic Acid Containing Products and Specific Oral Amino Acid Products No Longer a Benefit

413 - Multivitamins, Minerals, Single and Multi-ingredient Food Supplements No Longer Payable

416 - Billing for RCP Participation in the CCS Outpatient Special Care Center Team

421 - Use of Z5999 for Medi-Cal Non-Benefit Flagged Items/Products and SAR Coding

424 - Diagnosis Related Group (DRG) Information

426 - Authorization of SARS for CCS and GHPP Inpatient Admissions Under Diagnosis Related Group (DRG) Reimbursement Methodology

427 - The Medical Home Provider and Authorizations to Indian Health Clinics (IHC), Federally Qualified Health Centers (FQHC), and Rural Health Clinics (RHC)

430 - Update on Authorization of SARS for CCS and GHPP Inpatient Admissions Under DRG

432 - Assignment of CCS Aid Codes to Medi-Cal Beneficiaries to Medi-Cal Presumptive Eligibility Aid Codes (PE) 5C and 5D and Medi-Cal Targeted Low Income Children's Program (TLICP) Aid Codes H1, H2, H3, H4, and H5

435 - Specialized Enteral Nutrition Products

438 - Reminder-Indicate "Category" for Use of Z5999 Code

440 - Authorization of SARS under Diagnosis Related Group (DRG) Inpatient Reimbursement Methodology Inpatient Admissions of CCS Medical Beneficiaries Enrolled in a Medi-Cal Managed Care Health Care Plan (HCP)

442 - Authorization of SARs for CCS and GHPP Inpatient Admissions Under the All Patient Refined Diagnosis Related Group (APR-DRG) Reimbursement Methodology at Non-Designated Public Hospitals

446 – Telehealth Codes and Modifiers

467 - Authorization of Diagnostic Services for California Children's Services (CCS) Optional Targeted Low Income Children Program (OTLICP) Medi-Cal Beneficiaries