



April 10, 2020

Web Announcement 2166

Attention Provider Type 74 (Nurse Midwife):

Claims for Denied Codes Have Been Reprocessed

Claims submitted by provider type 74 (Nurse Midwife) for the procedure codes listed below that denied because the codes were not available for PT 74 to bill have been automatically reprocessed. The impacted claims had dates of service on or after April 1, 2018, through November 26, 2019. No claims with dates of service after November 26, 2019, and before December 16, 2019, were impacted by the claim reprocessing effort. Results of the reprocessed claims appear on remittance advices dated April 10, 2020.

Effective with claims processed on or after December 16, 2019, the following procedure codes have been reinstated for PT 74 to bill for these services:

Procedure Code	Procedure Code Description
11981	Insertion, non-biodegradable drug delivery implant
11982	Removal, non-biodegradable drug delivery implant
11983	Removal and insertion, non-biodegradable drug delivery implant
56405	Incision and drainage of vulva or perineal abscess
56420	Incision and drainage of Bartholin's gland abscess
56605	Biopsy of vulva or perineum; one lesion
58100	Endometrial sampling (biopsy)
58300	IUD insertion of intrauterine device (IUD)
58301	Removal of IUD

Effective with claims processed on or after December 16, 2019, the following preventive services procedure codes have been opened for PT 74 to bill for these services:

Procedure Code	Procedure Code Description
99384	Initial comprehensive preventive medicine adolescent (age 12 to 17 years)
99385	Initial comprehensive preventive medicine 18-39 years
99386	Initial comprehensive preventive medicine 40-64 years
99387	Initial comprehensive preventive medicine 65 years and older
99394	Periodic comprehensive preventive medicine adolescent (age 12 to 17 years)
99395	Periodic comprehensive preventive medicine 18-39 years
99396	Periodic comprehensive preventive medicine 40-64 years
99397	Periodic comprehensive preventive medicine 65 years and older

Please note: When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.