Listed 2011 CPT, HCPCS and CDT Codes Available for Billing

The following 2011 Current Procedural Terminology (CPT), Healthcare Common Procedure Coding System (HCPCS) and Current Dental Terminology (CDT) codes have been updated in the Medicaid Management Information System (MMIS):

11045, 11046, 11047, 22551, 22552, 29914, 29915, 29916, 31295, 31296, 31297, 31634, 33620, 33621, 33622, 37220, 37221, 37222, 37223, 37224, 37225, 37226, 37227, 37228, 37229, 37230, 37231, 37232, 37233, 37234, 37235, 38900, 43283, 43327, 43328, 43332, 43334, 43335, 43336, 43337, 43338, 43753, 43754, 43755, 43756, 49327, 49412, 49418, 53860, 57156, 61781, 61782, 61783, 64566, 64568, 64569, 64570, 64611, 65778, 65779, 66174, 66175, 74176, 74177, 74178, 76881, 76882, 80104, 82930, 83861, 84112, 85598, 86481, 86902, 87501, 87502, 87503, 87906, 88120, 88121, 88177, 88363, 90460, 90461, 90654, 90867, 90868, 90869, 91013, 91117, 92132, 92133, 92134, 92227, 92228, 93451, 93452, 93453, 93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461, 93462, 93463, 93464, 93563, 93564, 93565, 93566, 93567, 93568, 95800, 95801, 96446, 99224, 99225, 99226, A7020, D1352, D3354, D5992, D5993, D7251, D7295, E1831, E2622, E2623, E2624, E2625, G0432, G0433, G0434, G0435, G0440, G0441, J0171, J0558, J0561, J0597, J0638, J0775, J1290, J1559, J1599, J1786, J1826, J2358, J2426, J3095, J3262, J3357, J3385, J7686, J8562, J9302, J9307, J9315, J9351, L3674, L4631, L5961, L8693.

Effective immediately, the 2011 codes listed above can be billed with dates of service on/after Jan. 1, 2011.

Claims submitted with dates of service on/after Jan. 1, 2011, and denied because the 2011 codes were not in MMIS, will be reprocessed. Providers will be notified when the affected claims are reprocessed.

For any physician/outpatient-facility administered drugs listed above, NDC and NDC quantity must be billed by provider types 12, 14, 17, 20, 21, 22, 24, 25, 27, 29, 36, 45, 64, 72, 74 and 77. For details, see the National Drug Code (NDC) Billing Reference.