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[codingpolicyquestions@azahcccs.gov](mailto:codingpolicyquestions@azahcccs.gov)

## October Coding Updates

Effective October 1, 2023, the following updates have been completed:

- ICD-10 CM codes are in the system,
- ICD-10 PCS codes are in the system.
- October quarterly codes changes are in the system, and
- Behavioral Health Diagnosis Code list has been updated and published on the Medical Coding webpage as well as the AHCCCS policy page to reflect the code updates as listed in your ICD-10 coding books. The only changes made to this document was the expansion of the new Social Determinants of Health (SDOH) codes that became effective 10/01/2023. There were no deletions or other additions made. SDOH codes range between Z55 – Z65.

## CHW/CHR

Please review the [AHCCCS web page](#) for all upcoming changes and notifications related to provider types and other specific information. [www.azahcccs.gov/CHW](http://www.azahcccs.gov/CHW)

## Place of Service 27

Effective October 1, 2023, CMS released a new place of service.

Place of service (POS) 27      Outreach Site/ Street

A non-permanent location on the street or found environment, not described by any other POS code, where health professionals provide preventive, screening, diagnostic, and/or treatment services to unsheltered homeless individuals.

POS 27 was added to the following codes:

H0001 Alcohol and/or drug assessment

H0002 Behavioral health screening to determine eligibility for admission to treatment program.

H0006 Alcohol and/or drug services; case management

H0025 Behavioral health prevention education service (delivery of services with target population to affect knowledge attitude and/or behavior).

H0038 Self-help/peer services per 15 minutes.

H2011 Crisis intervention service per 15 minutes.

T1002 RN services, up to 15 minutes.

T1003 LPN/LVN services, up to 15 minutes.

T1015 Clinic visit/encounter all-inclusive.

T1016 Case management each 15 minutes.

96164 Health behavior intervention, group (2 or more patients), face-to-face; initial 30 minutes.

96165 Health behavior intervention, group (2 or more patients), face-to-face; each additional 15 minutes (List separately in addition to code for primary service).

96168 Health behavior intervention, family (with the patient present), face-to-face; each additional 15 minutes (List separately in addition to code for primary service).

99202 Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 15-29 minutes of total time is spent on the date of the encounter.

99203 Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 30-44 minutes of total time is spent on the date of the encounter.

99204 Office or other outpatient visit for the evaluation and management of a new patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 45-59 minutes of total time is spent on the date of the encounter.

99212 Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and straightforward medical decision making. When using time for code selection, 10-19 minutes of total time is spent on the date of the encounter.

99213 Office or other outpatient visits for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and low level of medical decision making. When using time for code selection, 20-29 minutes of total time is spent on the date of the encounter.

99214 Office or other outpatient visit for the evaluation and management of an established patient, which requires a medically appropriate history and/or examination and moderate level of medical decision making. When using time for code selection, 30-39 minutes of total time is spent on the date of the encounter.

## 99188 Age Change

Effective October 1, 2023, AHCCCS updated dental policy, AMPM 431, and one of the updates is to fluoride varnish application by PCP.

CPT 99188 was currently allowed up until the member's second birthday. Effective 10/01/2023, AHCCCS is allowing CPT 99188 up until the member's fifth birthday, per Bright Futures recommendations.

## AHCCCS Policies and Public Comment

Medical Coding has received many questions lately on how to find the new policies and public comments. Regarding this question, please know all policies are published on our website and this link will take you to the AMPM public comments, subscribe for notifications and all AMPM policies and guides for you to preview.

[www.azahcccs.gov/shared/MedicalPolicyManual/](http://www.azahcccs.gov/shared/MedicalPolicyManual/)

## DFSM Claims Clues

Medical coding also receives questions related to where to find the changes made for the FFS population. These changes are published under the title of Claims Clues. Please

remember that all the notices published on claims clues can be found here and this includes the changes made since May 2023.

You can also sign up for notifications on this page so you will not miss any updates. [www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/claimsclues.html](http://www.azahcccs.gov/PlansProviders/RatesAndBilling/FFS/claimsclues.html)

## Telehealth Changes

All telehealth codes are under review. When this review is completed, AHCCCS will publish the updates on the Medical Coding Resources webpage under the drop-down box Reference Extracts.

## Medical Coding Resources Page

If you are not aware, there are many published resources on our Medical Coding Resources page for you to view that may answer your questions. Most of these are updated quarterly and some are updated yearly.

Under the Reference Extracts you can find items related to CPT and HCPCS codes and their daily limits, Telehealth approved codes and modifiers allowed Fee for Service codes that require prior authorization and many more.

Under Coding Related Exhibits and Policy Reference, you will find documents specifically coding related to specific policies. These include the SED and SMI diagnosis list, EPSDT Service Code lists as well as the CTDS School information list.

## Reference Table Update Request

Please remember to use the Reference Table Update Request form found on the Medical Coding Resources page. This is a Word document that must be filled out including the date you wish us to consider. Also, please send the Word document to the email address listed in the instructions.

## Email addresses:

Coding related to table updates should be sent to the Medical Coding Unit our email is [codingpolicyquestions@azahcccs.gov](mailto:codingpolicyquestions@azahcccs.gov).

Rates related questions should be submitted to: [ffsrates@azahcccs.gov](mailto:ffsrates@azahcccs.gov)

FFS Provider Training or billing questions should be submitted to: [providertrainingffs@azahcccs.gov](mailto:providertrainingffs@azahcccs.gov)

AHCCCS policies can be found here:

<https://www.azahcccs.gov/PlansProviders/GuidesManualsPolicies/index.html>

The most common sections are AHCCCS Fee for Service and AHCCCS Medical Policy Manual (AMPM) both located on this policy page.