

Providers' News

March 2005

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Please Note:

Providers' News contains information pertaining to Arkansas Blue Cross and Blue Shield, a mutual insurance company, its wholly owned subsidiaries, and affiliates. The newsletter does not pertain to Medicare. Medicare policies are outlined in the Medicare Providers' News bulletins. If you have any questions, please feel free to call (501) 378-2307 or (800) 827-4814.

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We're on the Web!

www.ArkansasBlueCross.com
www.HealthAdvantage-hmo.com
www.BlueAdvantageArkansas.com
 and www.fepblue.org

The Providers' News

The Providers' News is a quarterly publication of Arkansas Blue Cross and Blue Shield. Please send your questions or comments about the Providers' News to:

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Special Investigations Unit Fraud Alert — Identity Theft Scam:

(Reprint from December 2003 issue of Providers' News)

A recent Provider Identify Theft Scam has surfaced in Arkansas. Scam artists are posing as Arkansas Blue Cross and Blue Shield representatives and obtaining Social Security Number and Tax Identification Numbers from providers.

In most cases, the scam artists have identified themselves to providers as "Mr. Williams". The scam artists tell providers their claims are being "held up" because their Social Security

Number or Tax Identification Number is needed before the claims could be processed. The scam artists then use the stolen Social Security Number to obtain fraudulent credit cards.

If you receive such a call, please notify Arkansas Blue Cross and Blue Shield's Special Investigations Unit by dialing the fraud hotline at 1-800-FRAUD21 (1-800-372-8321).

Provider Service Number and My BlueLine:

Arkansas Blue Cross and Blue Shield is happy to announce that beginning May 1, 2005 participating providers can call **My BlueLine** at 1-800-827-4814 or 501-378-2307 for eligibility, claim status, and benefit information for members of Arkansas Blue Cross and Blue Shield, Health Advantage, and BlueAdvantage Administrators of Arkansas.

Note: Please continue using the existing telephone numbers for the following:

- Blue Card 1-800-880-0918
- Federal Employees Program (FEP)
501-378-2531 or 1-800-482-6655

Arkansas Blue Cross believes this will be a great enhancement for providers. Providers will no longer have to call multiple phone lines to get information on a member, depending upon whether the member's coverage is with Arkansas Blue Cross, BlueAdvantage, Health Advantage, or Medi-Pak.

If at any point a caller needs to speak with a Customer Service Representative during regular business hours, simply say "Customer Service." At that time, the caller will be given an option of visiting with a Customer Service

Representative with Arkansas Blue Cross, Health Advantage, or BlueAdvantage.

Please note that for BlueAdvantage, there are several phone lines handling self-insured employer groups. Therefore, it may become necessary to direct callers to a phone number on the member's ID card.

Also, Arkansas Blue Cross has streamlined the flow of calls once in the self-service interactive voice response system (**My BlueLine**). Callers will find easier access to get the important information on eligibility and claim status.

Arkansas Blue Cross truly hopes that this self-service option is utilized as much as possible for routine questions and status updates. This will keep Customer Service Representatives available for any questions that cannot be answered through the self-service **My BlueLine**.

Arkansas Blue Cross also wants to remind providers that the same information is available through AHIN with additional detail for member eligibility, member benefits, claim status, and information on BlueCard for out-of-state Blue Plan coverage.

Special Investigations Unit Fraud Alert — Provider Identity Theft Scam Update!

The following press release was issued by the Fayetteville Police Department regarding identity theft scam:

The suspect calls dentists and/or doctors office claiming to be an insurance representative usually with Arkansas Blue Cross and Blue Shield. The suspect states that he/she needs to confirm information on the doctor in order to process a claim, release payment for services, or update information in the doctor's file. Normally, this would be done via mail, not over the phone.

The caller acquires the doctor's birth date, Social Security number, tax ID number, etc. Soon after acquiring the information, calls are made to one or more of the doctor's creditors.

Account/billing information is then changed to another address, and in some cases new cards have been issued.

Needless to say, the credit account is used to make multiple purchases before the charge is detected. In at least three cases (one local), the phone number from which the calls were made was a California number.

If you receive such a call, please notify Arkansas Blue Cross and Blue Shield's Special Investigations Unit by dialing the fraud hotline at **1-800-FRAUD21 (1-800-372-8321)**.



Handwritten Claims Not Acceptable:

As a reminder to all providers, Arkansas Blue Cross and Blue Shield, Health Advantage, and BlueAdvantage Administrators of Arkansas do not accept handwritten claims. If a provider submits a handwritten claim, the claims will be returned to the provider.

For providers who are unable to submit claims electronically, claims should be typed using a **RED** CMS 1500 or a UB 92 claim form. Here are some tips when submitting paper claims:

- Align the form carefully
- Typed or machine-printed
- Black ink
- Upper case (CAPITAL) letters
- Use 10 or 12 pitch (pica) fonts
- Do not mix character fonts
- Last name first, comma, then first name
- No dollar signs or decimals in money fields
- No extraneous data
- No more than 6 lines of service in block 24
- Avoid going over the edge of fields
- Faint printing can cause errors

For information on how to begin submitting claims electronically, contact the Electronic Data Interchange (EDI) Services division of Arkansas Blue Cross at (501) 378-2419, toll free at (866) 582-3247, or via e-mail at EDI@arkbluecross.com.



News About the “Any Willing Provider” Law:

The Arkansas Legislature recently passed an Any Willing Provider (AWP) law, which requires a health insurer to accept into its network of participating providers any doctor or hospital that is willing to meet the terms and conditions for participation established by the health insurer.

No Changes for Now:

Although this AWP law has passed, please be aware that as specified in the law itself, the AWP mandates do not go into effect until the Eighth U.S. Circuit Court of Appeals in St. Louis issues a ruling related to AWP. Therefore, until this Court ruling is handed down, there will be no AWP changes to provider networks during this waiting period.

More Information to Come:

Please be assured that when the Court issues its ruling and Arkansas Blue Cross and Blue Shield knows exactly when and how the AWP law will take effect, Arkansas Blue Cross will communicate fully with members and providers about how the AWP law might impact them.

Once a final court ruling is issued, please watch for newspaper ads and letters mailed directly to affected members, group administrators, and providers.

So nothing changes for now. Stay tuned for more information at some later date, following the Court ruling. Even with the changes that AWP will bring, Arkansas Blue Cross remains dedicated to our commitment to keeping health care as affordable as possible for members.

Providers calling or writing to request participation in any of our networks:

Providers with questions regarding AWP should contact the Network Development Representative in their region. Providers requesting participation in the Arkansas Blue Cross networks should submit their requests in writing, listing the specific networks they wish to join. Requests should be mailed to:

Arkansas Blue Cross and Blue Shield
Provider Network Operations
P.O. Box 2181
Little Rock, AR 72203

Implantable Cardioverter Defibrillator:

Coverage policy for implantable cardioverter defibrillator has been revised. Reimbursement will be made for patients in the following circumstances:

- Cardiac arrest due to VF or VT not due to a transient or reversible cause;
- Spontaneous sustained VT in association with structural heart disease;
- Syncope of undetermined origin with clinically relevant, hemodynamically significant sustained VF or VT induced at electrophysiologic study.
- A single chamber, shock only, ICD device is covered for patients with stable NYHA class II or III congestive failure with an ejection fraction of 30% or less (unless the patient

also meets criteria for bi-ventricular pacing with ventricular resynchronization – see policy # 2002005 in the Coverage Policy).

Patients with ischemic heart disease who have experienced a recent myocardial infarction, must be one month post infarct or 3 months post revascularization (the immediate post myocardial infarction period (30 days) is characterized by electrical instability and myocardial irritability secondary to ischemic injury). Effectiveness of an ICD in that circumstance is unknown and the implantation of the device in this time period would not meet primary coverage criteria and would be considered investigational.

Arkansas State and Public School Retirees with Medicare Primary Coverage:

Health Advantage has approximately 4,500 Arkansas State and Public School retirees and spouses (over age 65) currently enrolled. Arkansas State and Public School retirees with Medicare A and B as their primary coverage do not need a referral from their Primary Care Physician to receive services from a specialist. These members are not subject to the referral processes and network restrictions typically associated with an HMO or POS plan.

Arkansas State and Public School retirees with Medicare A and B as their primary coverage are responsible for the physician co-payment until the member has satisfied the \$110 Part B deductible with Medicare and Health Advantage.

Arkansas State and Public School Retirees enrolled with Arkansas Blue Cross and Blue Shield are responsible for the \$500 annual deductible and may utilize any Medicare approved provider.

Medical Records Requests:

Medical records may be requested to support claim payment and other health care operations. Provider contracts require release of medical records to support claims payment and healthcare operations without a charge to Arkansas Blue Cross and Blue Shield, its affiliates, the applicable payer, or its designated representative.

Provider contracts further require the release of a member's records for:

- Utilization review,
- Quality improvement review,
- Claims processing,
- Payment functions or verifications,

- Retrospective reviews (appeal reviews),
- Fraud and abuse investigations, or
- Other legitimate purposes related to the provider contract and the services for the member.

A covered entity (health provider, health plan, or health care clearinghouse) can share protected health information for treatment, payment, or healthcare operations with another covered entity, with specific exceptions, without an authorization if both covered entities have or had a relationship with the individual. Determination of claim payment falls within the scope of these activities.

Medical Records Request Letters:

Medical record request letters have a bar-code and tracking number unique for each request. When a provider receives a medical records request from Arkansas Blue Cross and Blue Shield or its affiliates, please remember to attach and return the bar-coded letter with the records request.

The bar-coded letter will allow the information sent to be tracked and processed faster.

Since the bar-coded letter is unique for each medical record request, it can not be reused.

Please do not use the bar-coded letter for other patients.

Injectable Drug Allowances:

Arkansas Blue Cross and Blue Shield, Health Advantage, and BlueAdvantage Administrators of Arkansas has paid for injectable drugs based on Average Wholesale Price (AWP) except for certain drugs whose allowed prices have been published in the **Providers' News**.

After June 30, 2005, injectable drug allowances will be based on a percentage of acquisition cost, average sales price, or other pricing information obtained by the Arkansas Blue Cross.

The injectable drug allowances will be effective at the time of publication on AHIN, and the pricing will also be published in the issue of **Providers' News** immediately following their publication on AHIN.



NDC Number on Claims:

When filing electronic claims containing National Drug Codes (NDC) to Arkansas Blue Cross and Blue Shield, Blue Advantage Administrators and Health Advantage, do not include any special characters in the NDC number.

Effective May 1, 2005, electronic claims with NDC numbers containing dashes or any other special characters will be rejected and must be corrected and re-filed.

Provider Network Access for Workers' Comp:

The USABLE Managed Care Organization has been a state certified workers' compensation managed care organization since 1996 and provides access to Arkansas' FirstSource PPO for more than 775,000 Arkansas employees.

These participating Arkansas employers and their insurers provide steerage for injured workers to the Arkansas' FirstSource PPO. When providers treat USABLE MCO members, please remember:

- All referrals for physicians or hospitals should be to Arkansas' FirstSource PPO participating providers.
- Arkansas state workers' compensation rules require that all hospital admissions be pre-certified.



Coverage Policy Update:

Since November 2004, the following policies have been added or revised in the Arkansas Blue Cross and Blue Shield Coverage Policy:

- Apolipoprotein E Genotype or Phenotype in the Management of Cardiovascular Disease
- Chemodenervation (Botulinum Toxin)
- Angioplasty, Carotid Artery, Stenting, Percutaneous
- Transcranial Doppler
- Cryoablation of Renal Tumors
- Radiofrequency Ablation of Renal Tumors
- Immune Globulin, Intravenous
- Sacral Nerve Stimulation for Fecal Incontinence
- End Diastolic Pneumatic Compression Boot as a Treatment of Peripheral Vascular Disease or Lymphedema
- Cord Blood Stem Cells for Unspecified Future Use
- Cord Blood as a Source of Stem Cells for Treatment of Identified (Diagnosed) Disease
- Pegaptanib (Macugen) for Age Related Macular Degeneration
- Bone Mineral Density Testing

For a complete list of all Coverage Policies for Arkansas Blue Cross and Blue Shield, please visit our website at www.ArkansasBlueCross.com.

New Vaccines, Toxoids — CPT Code 90714:

CPT Code 90714 (Tetanus and diphtheria toxoids (Td) adsorbed, preservative free, for use in individuals seven years or older, for intramuscular use) is a new code not found in the 2005 CPT Manual. CPT Code 90714 will become effective July 1, 2005.

To remain HIPAA compliant, Arkansas Blue Cross and Blue Shield and its affiliates will not accept claims for CPT Code 90714 with a date of service prior to July 1, 2005. Claims submitted using the new code with a date of service prior to the effective date will not be accepted.



Wellness Benefits For Arkansas' FirstSource[®] PPO Group:

Since November 2002, Arkansas Blue Cross and Blue Shield has offered Wellness Benefits for Arkansas' FirstSource PPO groups.

Wellness benefits are paid at 100% up to \$500 per calendar year for services provided by in-network PPO providers. Services provided

by an out-of-network provider pays 80% and also applies towards the \$500 maximum.

Effective January 1, 2005, services rendered with one of the following diagnoses will be considered a "Wellness Benefit".

Diagnosis Codes for Wellness Benefits			
V03.3	V20.2	V70	V76.0
V03.5 – V03.89	V25.0 – V25.02	V70.0	V76.1 – V76.44
V04.0 – V04.6	V25.1	V72.3	V76.47
V04.8	V25.4 – V25.5	V72.31	V76.51
V04.81	V45.5 – V45.52	V72.32	V76.52
V05.3 – V05.8	V64.0	V72.5	V77.0 – V77.7
V06.1	V65.4 – V65.49	V72.6	V77.9 – V77.91
V06.3 – V06.5			

Updated Fee Schedule on AHIN:

An updated copy of the Arkansas Blue Cross and Blue Shield Physician fee schedule is available on AHIN. Please replace any previous copies with the update found on AHIN. (<http://abcbs.ahin.net/hdn/default.htm>)

For more information regarding the AHIN workstation, please visit our website at **www.ArkansasBlueCross.com**. Click on the "Provider" link and then click on "AHIN".



Digital Mammography:

Effective February 14, 2005, Arkansas Blue Cross and Blue Shield began covering Digital Mammography. The effective date for Arkansas Blue Cross will be the “date processed”.

For Health Advantage and Blue Advantage, the effective date will be the “date of service”.

The appropriate procedure codes to use to bill for digital mammography are:

Code	Description
G0202	Screening mammography, producing direct digital image, bilateral, all views
G0204	Diagnostic mammography, producing direct digital image, bilateral, all views
G0206	Diagnostic mammography, producing direct digital image, unilateral, all views

Code	Total	Prof	Tech	Total SOS	Prof SOS	Tech SOS
G0202	\$ 133.97	\$ 56.91	\$ 77.06	\$ 0.00	\$ 56.91	\$ 0.00
G0204	\$ 152.35	\$ 70.54	\$ 81.81	\$ 0.00	\$ 81.81	\$ 0.00
G0206	\$ 122.71	\$ 56.91	\$ 65.80	\$ 0.00	\$ 56.91	\$ 0.00

Correct Coding – CT Coronary Angiography:

At this time, there is not a specific CPT code for CT coronary angiography. The following recommendation was made by the American College of Radiology Coding and Nomenclature Committee:

"At this time, examinations designed to evaluate abnormalities of cardiac anatomy, function or vascular supply using computed tomography should be reported using the unlisted CPT code 76497. The Committee on Coding and Nomenclature does not believe the existing CPT codes accurately describe CT and CT angiography of the heart. The ACR is working with the CPT Editorial Panel to develop an appropriate CPT

code for coronary CT angiography, however, until this code become available, coronary CT angiography should be reported using 76497."

Until a code is developed, to report CT angiography of the heart to Arkansas Blue Cross or its affiliates, use CPT code 76497. This is an unlisted computed tomography procedure and will require an accompanying procedure note. Arkansas Blue Cross is working with technology assessment organizations and radiologists to develop coverage policy on CT angiography of the heart. The policy will be published on the Arkansas Blue Cross website soon.

Corrections to the Fee Schedule:

Corrections to the January 31, 2005 RBRVS Update:

The allowance for CPT Code 58974 has been corrected to \$360.00.

The allowance for CPT Code 49659 has been corrected to BR.

Positron Emission Tomography (PET) Scans:

Six new PET scan codes were added to the Arkansas Blue and Blue Cross Fee Schedule effective January 1, 2005, replacing 78810. The new codes include:

Code	Description
78811	Tumor imaging, positron emission tomography (PET); limited area (eg, chest, head/neck)
78812	Tumor imaging, positron emission tomography (PET); skull base to mid-thigh
78813	Tumor imaging, positron emission tomography (PET); whole body
78814	Tumor imaging, positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization; limited area (eg, chest, head/neck)
78815	Tumor imaging, positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization; skull base to mid-thigh
78816	Tumor imaging, positron emission tomography (PET) with concurrently acquired computed tomography (CT) for attenuation correction and anatomical localization; whole body

The HCPCS 'G' codes for PET scans continue to provide more information, which is needed to accurately process claims. Therefore, for services addressed by the 'G' codes, providers should continue to bill PET scans using the 'G' codes. 'G' codes are available for **most** covered PET scans.

Coverage for Cervical Cancer and Mesothelioma was added February, 2005. CPT Codes 78811—78813 will only be covered for a diagnosis of Cervical Cancer or Mesothelioma. CPT Codes 78814 — 78816 are addressed below and will be automatically denied effective July 1, 2005. The HCPCS 'G' codes for PET scans are:

Code	Description
G0210	PET imaging whole body; full- and partial-ring PET scanners only, diagnosis; lung cancer, non-small cell
G0211	PET imaging whole body; full- and partial-ring PET scanners only, initial staging; lung cancer; non-small cell
G0212	PET imaging whole body; full- and partial-ring PET scanners only, restaging; lung cancer; non-small cell
G0213	PET imaging whole body; full- and partial ring PET scanners only, diagnosis; colorectal cancer
G0214	PET imaging whole body; full- and partial-ring PET scanners only, initial staging; colorectal cancer
G0215	PET imaging whole body; full- and partial-ring PET scanners only, initial staging; colorectal cancer
G0216	PET imaging whole body; full- and partial-ring PET scanners only, diagnosis; melanoma
G0217	PET imaging whole body; full- and partial-staging PET scanners only, initial staging; melanoma
G0218	PET imaging whole body; full- and partial-ring PET scanners only, restaging; melanoma
G0219	PET imaging whole body; melanoma for non-covered indications.
G0220	PET imaging whole body; full- and partial-ring PET scanners only, diagnosis; lymphoma
G0221	PET imaging whole body; full- and partial-ring PET scanners only, initial staging; lymphoma

Code	Description
G0222	PET imaging whole body; full- and partial-ring PET scanners only, restaging; lymphoma
G0223	PET imaging whole body or regional; full- and partial-ring PET scanners only, diagnosis; head and neck cancer; excluding thyroid and CNS cancers
G0224	PET imaging whole body or regional; full- and partial-ring PET scanners only, initial staging; head and neck cancer; excluding thyroid and CNS cancers
G0225	PET imaging whole body or regional; full- and partial-ring PET scanners only, restaging; head and neck cancer, excluding thyroid and CNS cancers
G0226	PET imaging whole body; full- and partial-ring PET scanners only, initial staging; esophageal cancer
G0227	PET imaging whole body; full- and partial-ring PET scanners only, initial staging; esophageal cancer
G0228	PET imaging whole body; full- and partial-ring PET scanners only, restaging; esophageal cancer
G0229	PET imaging; metabolic brain imaging for pre-surgical evaluation of refractory seizures; full- and partial-ring PET scanners only
G0230	PET imaging; metabolic assessment for myocardial viability following inconclusive SPECT study; full- and partial-ring PET scanners only
G0231	PET, whole body, for recurrence of colorectal or colorectal metastatic cancer; gamma cameras only
G0232	PET, whole body, for recurrence of colorectal or colorectal metastatic cancer; gamma cameras only
G0233	PET, whole body, for recurrence of colorectal or colorectal metastatic cancer; gamma cameras only
G0234	PET, regional or whole body, for solitary pulmonary nodule following ct or for initial staging of pathologically diagnosed nonsmall cell lung cancer; gamma cameras only
G0252	Pet imaging, full and partial-ring pet scanners only, for initial diagnosis of
G0253	Pet imaging for breast cancer, full and partial-ring pet scanners only,
G0254	Pet imaging for breast cancer, full and partial- ring pet scanners only,
G0296	PET imaging, full and partial ring PET scanner only, for restaging of previously treated thyroid cancer of follicular cell origin following negative I-131 whole body scan
G0330	PET Imaging initial diagnosis cervical
G0331	PET Imaging restaging ovarian
G0336	PET imaging, brain imaging for the differential diagnosis of Alzheimer's

G0219, G0231 — G0234, G0331 and G0336 will remain non-covered. Arkansas Blue Cross is following Medicare's lead in reducing the technical component allowance for all PET scans. The updated allowances will be effective July 1, 2005 and will be available on AHIN.

For CPT Codes 78814 — 78816, that include both a PET and CT scan, please bill the appropriate 'G' code or CPT code for the PET scan **AND** the appropriate CPT code for the CT scan. If a complete CT scan is not specifically ordered and a CT is performed for localization purposes only, it is appropriate to code for the PET scan but not for the CT study. There should not be additional charges for the CT scan if it is done solely for the purposes of anatomical localization. CPT Codes 78814 — 78816 will automatically be denied beginning July 1, 2005.

Fee Schedule Additions:

Effective April 1, 2005, the following codes were added to the Arkansas Blue Cross and Blue Shield fee schedule:

Code	Total	Prof	Tech	Total SOS	Prof SOS	Tech SOS
Q9952	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Q9953	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Q9954	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00

Arkansas Blue Cross Fee Schedule Updates:

Effective January 1, 2005, the following codes were updated in the Arkansas Blue Shield Fee Schedule:

Code	Allowance
J0880	\$ 23.20

Code	Allowance
Q0137	\$ 4.64

Code	Allowance
Q4054	\$ 4.64

Effective January 31, 2005, the non facility allowance for CPT Code 52332 (Cystourethroscopy, with insertion of indwelling ureteral stent) has been updated to \$627.09.

Effective February 9, 2005, the following changes have been made to the Arkansas Blue Cross and Blue Shield Fee Schedule:

Code	Total	Prof	Tech	Total SOS	Prof SOS	Tech SOS
88180	BR	BR	BR	BR	BR	BR
0010T	\$ 660.00			\$ 660.00		

Effective February 23, 2005, the following codes were updated in the Arkansas Blue Cross Fee Schedule:

Code	Allowance
A4232	\$ 5.75

Code	Allowance
A4230	\$ 19.00

Code	Allowance
J2540	\$ 5.08

On March 1, 2005, CPT code 88141 was updated on the Arkansas Blue Cross Fee Schedule:

Code	Total	Prof	Tech	Total SOS	Prof SOS	Tech SOS
88141	\$ 34.98	\$ 34.98	\$ 0.00	\$ 34.98	\$ 34.98	\$ 0.00

Fee Schedule Update – Immunization & Injection Codes:

On February 28, 2005, the following list of immunization and injection codes were updated on the Arkansas Blue Cross Fee Schedule.

HCPCS	Total
90281	\$ 12.81
90283	\$ 0.97
90287	\$ 0.00
90288	\$ 126.00
90291	\$ 0.00
90296	\$ 0.00
90371	\$ 119.55
90375	\$ 65.33
90378	\$ 627.33
90379	\$ 16.06
90384	\$ 110.00
90385	\$ 36.60
90386	\$ 23.67
90396	\$ 122.74
90476	\$ 0.00
90477	\$ 0.00
90581	\$ 0.00
90585	\$ 0.00
90586	\$ 124.64
90632	\$ 65.08
90633	\$ 31.37
90634	\$ 31.37
90636	\$ 92.89
90645	\$ 25.68
90647	\$ 25.68
90648	\$ 25.68
90655	\$ 14.40
90656	\$ 14.40
90657	\$ 10.80
90658	\$ 10.80
90660	\$ 21.00
90676	\$ 121.07
90690	\$ 7.18
90698	\$ 51.41
90701	\$ 0.00
90703	\$ 15.29
90704	\$ 18.75
90705	\$ 14.40
90706	\$ 15.77
90707	\$ 37.85

HCPCS	Total
90710	\$ 0.00
90715	\$ 16.77
90716	\$ 66.56
90718	\$ 10.85
90719	\$ 0.00
90720	\$ 0.00
90723	\$ 79.91
90725	\$ 0.00
90732	\$ 24.51
90734	\$ 61.75
90735	\$ 83.02
A4216	\$ 0.00
A4217	\$ 0.00
A4248	\$ 0.00
A4253	\$ 21.59
G3001	\$ 2,550.00
J0120	\$ 7.50
J0200	\$ 16.87
J0280	\$ 0.44
J0287	BR
J0290	\$ 0.39
J0350	BR
J0360	\$ 15.00
J0390	\$ 0.35
J0395	\$ 168.42
J0475	\$ 189.99
J0520	\$ 0.71
J0560	\$ 0.00
J0570	\$ 0.00
J0580	\$ 0.00
J0610	\$ 0.90
J0670	\$ 1.60
J0690	\$ 0.52
J0696	\$ 9.80
J0710	\$ 0.00
J0725	\$ 1.71
J0740	\$ 802.63
J0800	\$ 98.64
J0850	\$ 708.01

HCPCS	Total
J1000	\$ 0.85
J1051	\$ 5.76
J1055	\$ 56.59
J1094	\$ 0.29
J1100	\$ 0.05
J1110	\$ 33.60
J1165	\$ 0.41
J1200	\$ 0.54
J1260	\$ 4.68
J1320	\$ 0.00
J1325	\$ 20.34
J1330	\$ 0.46
J1435	\$ 0.20
J1441	\$ 281.18
J1450	\$ 40.46
J1452	\$ 210.53
J1600	\$ 11.81
J1630	\$ 3.21
J1642	\$ 0.04
J1644	\$ 0.10
J1700	\$ 0.36
J1710	\$ 1.05
J1745	\$ 58.79
J1756	\$ 0.61
J1790	\$ 1.66
J1800	\$ 10.20
J1810	BR
J1817	\$ 1.06
J1825	\$ 269.06
J1840	\$ 1.16
J1850	\$ 0.17
J1940	\$ 0.10
J1955	\$ 29.16
J1956	\$ 19.39
J2000	\$ 4.00
J2060	\$ 1.66
J2250	\$ 0.32
J2260	\$ 6.00

HCPCS	Total
J2300	\$ 0.79
J2322	\$ 13.31
J2324	\$ 88.33
J2354	\$ 5.52
J2360	\$ 1.60
J2370	\$ 0.82
J2400	\$ 5.39
J2405	\$ 0.13
J2460	\$ 0.93
J2550	\$ 0.43
J2650	\$ 0.22
J2680	\$ 4.80
J2710	\$ 0.41
J2725	\$ 22.92
J2765	\$ 0.84
J2788	\$ 36.60
J2790	\$ 36.60
J2810	\$ 1.14
J2912	\$ 0.01
J2993	\$ 923.28
J3010	\$ 0.32
J3070	\$ 4.21
J3100	\$ 2,147.42
J3105	\$ 15.59
J3140	\$ 0.85
J3150	\$ 0.84
J3230	\$ 0.80
J3250	\$ 1.00
J3260	\$ 1.60
J3302	\$ 0.21
J3310	\$ 3.30
J3350	\$ 29.20
J3360	\$ 0.18
J3400	BR
J3410	\$ 0.30
J3411	\$ 0.14
J3415	\$ 0.22
J3420	\$ 0.05
J3470	\$ 0.00
J3475	\$ 0.05
J3480	\$ 0.02
J3487	\$ 47.97
J3520	\$ 0.50
J7100	\$ 0.00
J7110	\$ 0.00

HCPCS	Total
J7120	\$ 0.00
J7130	\$ 0.00
J7140	\$ 0.00
J7150	\$ 0.00
J7300	\$ 0.00
J7302	\$ 0.00
J7303	\$ 0.00
J7350	\$ 4.62
J7502	\$ 5.23
J7505	\$ 873.69
J7506	\$ 0.02
J7507	\$ 3.80
J7509	\$ 0.36
J7510	\$ 0.02
J7511	\$ 329.51
J7515	\$ 1.38
J7516	\$ 26.40
J7517	\$ 2.96
J7520	\$ 7.77
J7622	\$ 0.01
J7626	\$ 4.74
J7631	\$ 0.11
J7639	\$ 20.15
J7641	\$ 0.01
J7668	\$ 4.90
J7669	\$ 4.90
J7680	\$ 15.59
J7682	\$ 54.45
J8499	\$ 0.00
J8510	\$ 2.30
J8520	\$ 3.78
J8521	\$ 12.60
J8530	\$ 2.03
J8560	\$ 47.64
J8600	\$ 2.63
J8700	\$ 8.36
J8999	\$ 0.00
J9001	\$ 375.11
J9010	\$ 538.40
J9015	\$ 759.47
J9017	\$ 35.05
J9031	\$ 124.64
J9040	\$ 57.91
J9045	\$ 132.07
J9050	\$ 146.42

HCPCS	Total
J9060	\$ 5.46
J9062	\$ 20.21
J9070	\$ 4.86
J9080	\$ 9.73
J9090	\$ 15.17
J9091	\$ 25.94
J9092	\$ 49.15
J9093	\$ 4.86
J9094	\$ 5.78
J9095	\$ 14.44
J9096	\$ 28.88
J9098	\$ 368.89
J9100	\$ 2.40
J9110	\$ 8.82
J9130	\$ 5.82
J9140	\$ 12.38
J9150	\$ 22.12
J9160	\$ 1,268.98
J9165	\$ 0.00
J9170	\$ 316.47
J9178	\$ 26.75
J9181	\$ 0.18
J9182	\$ 1.80
J9200	\$ 78.53
J9201	\$ 121.41
J9202	\$ 208.77
J9206	\$ 132.19
J9208	\$ 68.24
J9209	\$ 18.36
J9215	\$ 8.60
J9216	\$ 307.62
J9217	\$ 278.44
J9218	\$ 14.84
J9219	\$ 2,426.90
J9240	\$ 46.20
J9245	\$ 123.73
J9250	\$ 0.22
J9265	\$ 20.75
J9266	\$ 1,536.33
J9268	\$ 1,969.35
J9280	\$ 25.72
J9290	\$ 72.50
J9291	\$ 155.25
J9293	\$ 338.74
J9300	\$ 2,319.65

HCPCS	Total
J9320	\$ 169.20
J9340	\$ 47.93
J9350	\$ 813.66
J9355	\$ 58.29
J9357	\$ 406.56
J9370	\$ 16.79
J9375	\$ 7.70
J9380	\$ 19.25
J9390	\$ 76.00
J9395	\$ 88.56
J9600	\$ 2,405.40
P9041	\$ 15.31
P9043	\$ 15.31
P9045	\$ 30.63
P9046	\$ 15.31
P9047	\$ 30.63
P9048	\$ 30.63
Q0144	\$ 25.58
Q0163	\$ 0.02
Q0164	\$ 0.38
Q0165	\$ 0.45
Q0166	\$ 47.04
Q0167	\$ 3.45
Q0168	\$ 10.08
Q0169	\$ 0.30
Q0170	\$ 0.31
Q0171	\$ 0.07
Q0172	\$ 0.09
Q0173	\$ 0.24
Q0174	\$ 0.79
Q0175	\$ 0.60
Q0176	\$ 0.62
Q0177	\$ 0.07
Q0178	\$ 0.10
Q0179	\$ 35.90
Q0180	\$ 57.52
Q0187	\$ 1,097.95
Q2001	\$ 35.17
Q2002	\$ 3.55
Q2003	\$ 2.59
Q2004	\$ 28.25
Q2005	\$ 492.19
Q2006	\$ 600.00
Q2007	\$ 76.25
Q2008	\$ 13.28
Q2011	\$ 7.66
Q2012	\$ 173.33

HCPCS	Total
Q2013	\$ 15.00
Q2014	\$ 16.61
Q2017	\$ 277.55
Q2018	\$ 74.29
Q2019	\$ 1,530.32
Q2020	\$ 1,140.00
Q2021	\$ 173.28
Q2022	\$ 0.92
Q3026	\$ 63.24
Q4075	\$ 0.00
S0009	\$ 0.00
S0012	\$ 75.25
S0014	\$ 2.92
S0016	\$ 6.00
S0017	\$ 0.00
S0020	\$ 1.93
S0023	\$ 3.12
S0028	\$ 0.00
S0030	\$ 0.77
S0032	\$ 15.23
S0034	\$ 4.21
S0039	\$ 0.01
S0040	\$ 123.60
S0071	\$ 2.13
S0072	\$ 7.80
S0073	\$ 13.06
S0074	\$ 8.04
S0077	\$ 6.94
S0078	\$ 100.65
S0080	\$ 53.44
S0081	\$ 2.09
S0088	\$ 22.69
S0090	\$ 0.00
S0091	\$ 0.00
S0092	\$ 0.00
S0093	\$ 0.00
S0104	\$ 1.86
S0106	\$ 35.99
S0107	\$ 94.72
S0108	\$ 3.59
S0109	\$ 0.09
S0114	\$ 32.50
S0116	\$ 171.88
S0117	\$ 9.20
S0122	\$ 61.50
S0126	\$ 78.79
S0128	\$ 82.94

HCPCS	Total
S0132	\$ 99.52
S0136	\$ 1.25
S0137	\$ 0.60
S0138	\$ 1.95
S0139	\$ 2.02
S0140	\$ 1.39
S0141	\$ 2.18
S0142	\$ 0.00
S0143	\$ 0.00
S0155	\$ 0.00
S0156	\$ 8.09
S0157	\$ 17.92
S0158	\$ 149.28
S0159	\$ 4,320.00
S0160	\$ 1.95
S0161	\$ 1.21
S0162	\$ 360.15
S0163	\$ 50.88
S0164	\$ 3.79
S0165	\$ 944.40
S0166	\$ 4.68
S0167	\$ 3.25
S0168	\$ 476.00
S0170	\$ 7.87
S0171	\$ 0.37
S0172	\$ 1.72
S0173	\$ 1.90
S0174	\$ 0.00
S0175	\$ 2.08
S0176	\$ 0.99
S0177	\$ 0.00
S0178	\$ 8.69
S0179	\$ 0.65
S0181	\$ 19.20
S0182	\$ 6.96
S0183	\$ 0.85
S0187	\$ 1.49
S0190	\$ 90.00
S0191	\$ 0.86
S0194	\$ 0.00
S0195	\$ 0.00
S0197	\$ 0.00
S5010	\$ 0.00
S5011	\$ 0.00
S5012	\$ 0.00
S5013	\$ 0.00
S5014	\$ 0.00

Providers' News

Arkansas Blue Cross and Blue Shield
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Little Rock, AR 72203

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