

Division of Public Health  
PHNPDU/LTAT

Tracking Sheet for Revisions to Coding & Billing Guidance Document Part II

Date	Name & location of section w/ revisions	Who made changes	Notes/Comments:
6/21/16	Completed document posted to DPH website		
7/21/16	pp 19-20 Immunization: section on Immunization Administration replaced with new text	KB	As per State CH consultant 7/15/16
	Pg 31 Changed wording to clarify preference of the TB branch when screening under non-mandated conditions	KB	As per TB Branch
	Pg 34 Maternity/OB Billing: wording change to reflect correct billing practices for miscarriage/termination of pregnancy	KB	As per WHB discussion, 7/7/16
	Pg 43 Family Planning: changed to include full text of memo from Belinda Pettiford regarding charging for 340b drugs	KB	As per WHB discussion, 7/7/16
	Pg 44 Added notation to reference information on page 54	KB	In consultation with WHB
	Pg 50 Family Planning: - changed to correct diagnosis code (from 042 to Z11.4)	KB	As per WHB discussion, 7/7/16
	Pg 54 Family Planning: revised to reflect notation regarding use of FP and TJ modifiers	KB	In consultation with WHB
11/14/16	Throughout the document- the terms physician, clinician, mid-level, provider have been replaced with Advanced Practice Practitioner	KB	DPH/PHNPDU/LTAT
	Health Check Program Links have been updated to reflect the most recent HCPG (October 2016)	KB	DPH/PHNPDU/LTAT
	Pg 4 Added Medicaid repayment instructions	KB	DPH/PHNPDU/LTAT
	pp 8, 32, 38, 45, 54, 61 Reference of Exception for billing E&M and Preventive visit same day for Child Health	KB	As per Health Check Program Guide 10-16
	Pg 9 Added statement regarding billing T1002 to third party payers	KB	DPH/PHNPDU/LTAT
	Pg 13 Statement added, may not deny services due to inability/unwillingness to pay	KB	As per WHB
	Pg 16 Use of CH for all child health services, billable and reportable. No longer using HC	KB	DPH/PHNPDU/LTAT
	Pg 17-18 May now bill E&M and Preventive service same day for Child Health only	KB	As per Health Check Program Guide 10-16
	Pg 22 Dental Screenings at Health Check visit	KB	As per Health Check Program Guide 10-16

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	Pg 23 Billing for hearing screening after WCC	KB	Child Health Section
	Pg 23 Additional Health Check Billing Guidance	KB	As per Health Check Program Guide 10-16
	pp 23, 52 How to bill when CH and FP services intersect	KB	As per Health Check Program Guide 10-16
	Pg 24 Removal of statement on billing Health Check and E&M same day (replaced by statement on pg 17)	KB	As per Health Check Program Guide 10-16
	Pg 25 Latest Health Check Program Guide published in October 2016 (note name change)	KB	As per Health Check Program Guide 10-16
	pp 26, 74 Use of SL modifier to report state supplied vaccines	KB	6/28/16 Memo from Steven Garner to LHDs
	Pg 27 Location of Immunization billing guidance in HCPG	KB	As per Health Check Program Guide 10-16
	pp 35, 74 Use of OB modifier to report \$0 charge maternal health office visits	KB	6/28/16 Memo from Steven Garner to LHDs
	pp 35, 66, 75 Notation regarding "X" modifiers has been revised	KB	DPH/PHNPDU/LTAT
	Pg 44 Revised CPT code for Liletta	KB	WHB Fall 2016 Newsletter
	Pg 51 Reminder to use FP modifier when billing Medicaid for Family Planning services. Contact insurance companies for their procedure	KB	DPH/PHNPDU/LTAT
	pp 53, 63 Notation about not using FP modifier on Health Choice claims	KB	DPH/PHNPDU/LTAT
	Pg 54 Reference on where to find billing guidance for when CH and FP intersect	KB	As per Health Check Program Guide 10-16
	Pg 59 Correction to HIV screening ICD-10 code	KB	As per WHB
	Pg 60 Removed notation about using FP modifier for Health Choice	KB	As per Health Check Program Guide 10-16
	Pg 68 NCSPLH requiring NPIs on all requisitions	KB	NCSPLH memo 8/18/16
	Pg 80 Addition of Flat Fee, Interperiodic and Periodic to Glossary of terms	KB	DPH/PHNPDU/LTAT