

DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

Val

ACTION REFERRAL

| | |
|----------------------------|--|
| TO <i>Myers / Gross</i> | DATE <i>B2 - we need to get the letter and we need to be on the way to</i> 11-7-08 |
|----------------------------|--|

| DIRECTOR'S USE ONLY | | ACTION REQUESTED | |
|--|--|--|---|
| 1. LOG NUMBER <i>001256</i> | <input checked="" type="checkbox"/> Prepare reply for the Director's signature DATE DUE <i>11-17-08</i> | <input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ | <input type="checkbox"/> FOIA DATE DUE _____ |
| 2. DATE SIGNED BY DIRECTOR <i>cc: Mr. Fortner, Dr. Burton, Depo</i> | <input type="checkbox"/> Necessary Action <i>Cleared 11/24/08 see attached Note</i> | | |

| APPROVALS (Only when prepared for director's signature) | APPROVE | * DISAPPROVE (Note reason for disapproval and return to preparer.) | COMMENT |
|--|--------------------|---|---------|
| 1. <i>Salvatore Williams</i> | <i>HR-08</i> | | |
| 2. <i>William Green</i> | <i>OK 11/19/08</i> | | |
| 3. <i>empowered by Dr. J. [unclear]</i> | <i>[unclear]</i> | | |
| 4. | | | |

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Dept. of Health & Human Services
NOV 12 2008

Bruce.

Per EM?

Dr Burton lets

make this N/A

and close-

gru!

Jan
11/24

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American Academy of Pediatrics

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Tampa, FL

October 23, 2008
Dear Medicaid and SCHIP Directors:
On behalf of the over 60,000 members of the American Academy of Pediatrics (AAP), I would like to bring your attention to the fact that starting January 1, 2009, there will be significant revisions to the neonatal and pediatric inpatient evaluation and management (E/M) CPT codes.

These revisions were proposed by the AAP and implemented by the American Medical Association in an effort to allow sufficient room in the CPT nomenclature for potential expansion. The revised codes also allow for consecutive placement of codes within the family of neonatal and pediatric CPT codes.

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In order to facilitate implementation of the revised code numbers enclosed please find a comprehensive list of the changes to the neonatal and pediatric inpatient E/M codes for 2009.

I urge you to update your software system to allow recognition of the revised code numbers starting January 1, 2009. Should you have any questions, please contact the Division of Health Care Finance and Quality Improvement at dhcfdqi@aap.org.

Sincerely,

David T. Tayloe, Jr, MD, FAAP
President

DTT/lat

Log: Myers
cc: EF, Dr B,
Deps.
"Mia, Myra"

None

Newborn Care

- ~~99431(X1)~~ 99460 Initial hospital or birthing center care, per day, for the evaluation and management of the normal newborn infant
- ~~99432(X2)~~ 99461 Initial care, per day, for the evaluation and management of the normal newborn infant seen in other than hospital or birthing center
- ~~99433(X3)~~ 99462 Subsequent hospital care, per day, for the evaluation and management of a normal newborn
- ~~99435(X4)~~ 99463 Initial hospital or birthing center care, per day, for the evaluation and management of the normal newborn infant admitted and discharged on the same date
- ~~99436(X5)~~ 99464 Attendance at delivery (when requested by the delivering physician) and initial stabilization of newborn
- ~~99440(X6)~~ 99465 ~~Delivery/birthing room Newborn~~ resuscitation: provision of positive pressure ventilation and/or chest compressions in the presence of acute inadequate ventilation and/or cardiac output

Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services

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- 99477 Initial hospital care, per day, for the evaluation and management of the neonate, 28 days of age or less, who requires intensive observation, frequent interventions, and other intensive care services
- ~~99298(X8)~~ 99478 **Subsequent intensive care**, per day, for the evaluation and management of the recovering very low birth weight infant (present body weight less than 1500 grams)
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- ~~99289(X11)~~ 99466 **Critical care** services delivered by a physician, face-to-face, during an interfacility transport of critically ill or critically injured pediatric patient, 24 months of age or less; first 30-74 minutes of hands on care during transport

99290(X12) 99467 each additional 30 minutes (List separately in addition to
code for primary service)

Inpatient Neonatal and Pediatric Critical Care

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evaluation and management of a critically ill neonate, 28 days of age or
less

99296(X14) 99469 **Subsequent inpatient neonatal critical care**, per day,
for the evaluation and management of a critically ill neonate, 28 days of
age or less

99293(X15) 99471 **Initial inpatient pediatric critical care**, per day, for the
evaluation and management of a critically ill infant or young child, 29 days
through 24 months of age

99294(X16) 99472 **Subsequent inpatient pediatric critical care**, per day,
for the evaluation and management of a critically ill infant or young child,
29 days through 24 months of age

993XX(+) 99475 **Initial inpatient pediatric critical care**, per day, for the
evaluation and management of a critically ill infant or young child, ~~2-5~~
~~years 25 months through 71 months~~ of age

1993XX(2) 99476 **Subsequent inpatient pediatric critical care**, per day,
for the evaluation and management of a critically ill infant or young child,
~~2-5 years 25 months through 71 months~~ of age

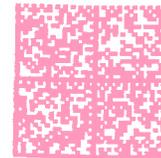
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Sincerely,

A handwritten signature in blue ink that reads "David T. Tayloe, Jr.".

David T. Tayloe, Jr, MD, FAAP
President

DTT/lat

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Inpatient Neonatal and Pediatric Critical Care

99295(X13) 99463 **Initial inpatient neonatal critical care**, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less

99296(X14) 99469 **Subsequent inpatient neonatal critical care**, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less

99298(X15) 99471 **Initial inpatient pediatric critical care**, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age

99294(X16) 99472 **Subsequent inpatient pediatric critical care**, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age

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A993XX(2) 99476 **Subsequent inpatient pediatric critical care**, per day, for the evaluation and management of a critically ill infant or young child, 2-5 years 25 months through 71 months of age

American Academy of Pediatrics

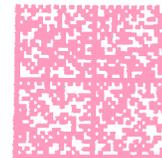


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**DEPARTMENT OF HEALTH AND HUMAN SERVICES
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ACTION REFERRAL

| | |
|-----------------|------------------------|
| TO <u>McDon</u> | DATE <u>11-7-08</u> |
|-----------------|------------------------|

| | |
|--|--|
| DIRECTOR'S USE ONLY | ACTION REQUESTED |
| 1. LOG NUMBER <u>301256</u> | <input checked="" type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____ |
| 2. DATE SIGNED BY DIRECTOR <u>cc: Mr. Farkner, Dr. Burton, Depp</u> | <input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ |
| | <input type="checkbox"/> FOIA DATE DUE _____ |
| | <input checked="" type="checkbox"/> Necessary Action |

*Change to MR on McDon send
add to list. date 11/19/08*

| APPROVALS (Only when prepared for director's signature) | APPROVE | * DISAPPROVE (Note reason for disapproval and return to preparer.) | COMMENT |
|--|---------|---|---------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |

Brenda,
Dr B. says
we don't need to
respond - please
keep us abreast
of any
action.

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Felicity

Since this is a response
letter from Dave Taylor,
I don't think we need
to reply - I to him
directly? Do you agree?

~~Do you agree?~~

~~Val + I met~~

perhaps we should
code + meet + logists
should be OK
on part they will
have notes

Dave Taylor will be
at the CRCHA meeting
in January + I'll
+ can talk to him
there

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~~993XX(1)~~ **99475** Initial inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, ~~25~~ years 25 months through 71 months of age

~~19993XX(2)~~ **99476** Subsequent inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, ~~2-5~~ years 25 months through 71 months of age

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President

DTT/mat

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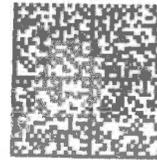


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Alicia Jacobs, Deputy Director
Medicaid Eligibility and Beneficiary Services
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**DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR**

ACTION REFERRAL

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| TO <i>Moynis</i> | DATE <i>11-7-08</i> |
|----------------------------|-------------------------------|

| | |
|--|--|
| DIRECTOR'S USE ONLY | ACTION REQUESTED |
| 1. LOG NUMBER <i>100256</i> | <input checked="" type="checkbox"/> Prepare reply for the Director's signature DATE DUE <i>11-17-08</i> |
| 2. DATE SIGNED BY DIRECTOR <i>cc: Mr. Falkner, Dr. Burton, Depp</i> | <input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____ <input type="checkbox"/> Necessary Action |

| APPROVALS <small>(Only when prepared for director's signature)</small> | APPROVE | * DISAPPROVE <small>(Note reason for disapproval and return to preparer.)</small> | COMMENT |
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Berkeley, CA

District X
John S. Curran, MD, FAAP
Tampa, FL

October 23, 2008
Dear Medicaid and SCHIP Directors:

On behalf of the over 60,000 members of the American Academy of Pediatrics (AAP), I would like to bring your attention to the fact that starting January 1, 2009, there will be significant revisions to the neonatal and pediatric inpatient evaluation and management (E/M) CPT codes.

These revisions were proposed by the AAP and implemented by the American Medical Association in an effort to allow sufficient room in the CPT nomenclature for potential expansion. The revised codes also allow for consecutive placement of codes within the family of neonatal and pediatric CPT codes.

Given that the Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires that "the version of the medical data code sets specified in the implementation specifications must be the version that is valid at the time the health care is furnished," all covered entities must recognize the revised code numbers starting January 1, 2009.

In order to facilitate implementation of the revised code numbers enclosed please find a comprehensive list of the changes to the neonatal and pediatric inpatient E/M codes for 2009.

I urge you to update your software system to allow recognition of the revised code numbers starting January 1, 2009. Should you have any questions, please contact the Division of Health Care Finance and Quality Improvement at dhcfdq@aap.org.

Sincerely,

David T. Tayloe, Jr, MD, FAAP
President

DTT/lat

Newborn Care

- ~~99431(X1)~~ **99460** Initial hospital or birthing center care, per day, for the evaluation and management of the normal newborn infant
- ~~99432(X2)~~ **99461** Initial care, per day, for the evaluation and management of the normal newborn infant seen in other than hospital or birthing center
- ~~99433(X3)~~ **99462** Subsequent hospital care, per day, for the evaluation and management of a normal newborn
- ~~99435(X4)~~ **99463** Initial hospital or birthing center care, per day, for the evaluation and management of the normal newborn infant admitted and discharged on the same date
- ~~99436(X5)~~ **99464** Attendance at delivery (when requested by the delivering physician) and initial stabilization of newborn
- ~~99440(X6)~~ **99465** ~~Delivery/Birthing room Newborn~~ resuscitation: provision of positive pressure ventilation and/or chest compressions in the presence of acute inadequate ventilation and/or cardiac output

Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services

Initial and Continuing Intensive Care Services

- ~~99477~~ Initial hospital care, per day, for the evaluation and management of the neonate, 28 days of age or less, who requires intensive observation, frequent interventions, and other intensive care services
- ~~99298(X8)~~ **99478** **Subsequent intensive care**, per day, for the evaluation and management of the recovering very low birth weight infant (present body weight less than 1500 grams)
- ~~99299(X9)~~ **99479** **Subsequent intensive care**, per day, for the evaluation and management of the recovering low birth weight infant (present body weight of 1500-2500 grams)
- ~~99300(X10)~~ ~~99480~~ **Subsequent intensive care**, per day, for the evaluation and management of the recovering infant (present body weight of 2501-5000 grams)

Pediatric Critical Care Patient Transport

- ~~99289(X11)~~ **99466** **Critical care** services delivered by a physician, face-to-face, during an interfacility transport of critically ill or critically injured pediatric patient, 24 months of age or less; first 30-74 minutes of hands on care during transport

~~99299(X12)~~ **99467** each additional 30 minutes (List separately in addition to code for primary service)

Inpatient Neonatal and Pediatric Critical Care

~~99295(X13)~~ **99468** **Initial inpatient neonatal critical care**, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less

~~99296(X14)~~ **99469** **Subsequent inpatient neonatal critical care**, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less

~~99293(X15)~~ **99471** **Initial inpatient pediatric critical care**, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age

~~99294(X16)~~ **99472** **Subsequent inpatient pediatric critical care**, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age

~~993XX(1)~~ **99475** **Initial inpatient pediatric critical care**, per day, for the evaluation and management of a critically ill infant or young child, ~~25~~ **years 25 months through 71 months** of age

~~993XX(2)~~ **99476** **Subsequent inpatient pediatric critical care**, per day, for the evaluation and management of a critically ill infant or young child, ~~25~~ **years 25 months through 71 months** of age

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Department of Health & Human Services
OFFICE OF THE DIRECTOR

October 23, 2008

Dear Medicaid and SCHIP Directors:

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These revisions were proposed by the AAP and implemented by the American Medical Association in an effort to allow sufficient room in the CPT nomenclature for potential expansion. The revised codes also allow for consecutive placement of codes within the family of neonatal and pediatric CPT codes.

Given that the Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires that "the version of the medical data code sets specified in the implementation specifications must be the version that is valid at the time the health care is furnished," all covered entities must recognize the revised code numbers starting January 1, 2009.

In order to facilitate implementation of the revised code numbers enclosed please find a comprehensive list of the changes to the neonatal and pediatric inpatient E/M codes for 2009.

I urge you to update your software system to allow recognition of the revised code numbers starting January 1, 2009. Should you have any questions, please contact the Division of Health Care Finance and Quality Improvement at dhcfqji@aap.org.

Sincerely,

A handwritten signature in blue ink that reads "David T. Tayloe, Jr.".

David T. Tayloe, Jr, MD, FAAP
President

DTT/lat

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Berkeley, CA

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John S. Curran, MD, FAAP
Tampa, FL

Newborn Care

- ~~99431(X1)~~ **99460** Initial hospital or birthing center care, per day, for the evaluation and management of the normal newborn infant
- ~~99432(X2)~~ **99461** Initial care, per day, for the evaluation and management of the normal newborn infant seen in other than hospital or birthing center
- ~~99433(X3)~~ **99462** Subsequent hospital care, per day, for the evaluation and management of a normal newborn
- ~~99435(X4)~~ **99463** Initial hospital or birthing center care, per day, for the evaluation and management of the normal newborn infant admitted and discharged on the same date
- ~~99436(X5)~~ **99464** Attendance at delivery (when requested by the delivering physician) and initial stabilization of newborn
- ~~99440(X6)~~ **99465** ~~Delivery/birthing room Newborn~~ resuscitation: provision of positive pressure ventilation and/or chest compressions in the presence of acute inadequate ventilation and/or cardiac output

Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services

Initial and Continuing Intensive Care Services

- 99477** Initial hospital care, per day, for the evaluation and management of the neonate, 28 days of age or less, who requires intensive observation, frequent interventions, and other intensive care services
- ~~99298(X8)~~ **99478** **Subsequent intensive care**, per day, for the evaluation and management of the recovering very low birth weight infant (present body weight less than 1500 grams)
- ~~99299(X9)~~ **99479** **Subsequent intensive care**, per day, for the evaluation and management of the recovering low birth weight infant (present body weight of 1500-2500 grams)
- ~~99300(X10)~~ **99480** **Subsequent intensive care**, per day, for the evaluation and management of the recovering infant (present body weight of 2501-5000 grams)

Pediatric Critical Care Patient Transport

- ~~99289(X11)~~ **99466** **Critical care** services delivered by a physician, face-to-face, during an interfacility transport of critically ill or critically injured pediatric patient, 24 months of age or less; first 30-74 minutes of hands on care during transport

~~99290(X12)~~ 99467 each additional 30 minutes (List separately in addition to code for primary service)

Inpatient Neonatal and Pediatric Critical Care

~~99295(X13)~~ 99468 **Initial inpatient neonatal critical care**, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less

~~99296(X14)~~ 99469 **Subsequent inpatient neonatal critical care**, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less

~~99293(X15)~~ 99471 **Initial inpatient pediatric critical care**, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age

~~99294(X16)~~ 99472 **Subsequent inpatient pediatric critical care**, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age

~~993XX(1)~~ 99475 **Initial inpatient pediatric critical care**, per day, for the evaluation and management of a critically ill infant or young child, ~~25~~ **years 25 months through 71 months** of age

~~1993XX(2)~~ 99476 **Subsequent inpatient pediatric critical care**, per day, for the evaluation and management of a critically ill infant or young child, ~~2-5 years 25 months through 71 months~~ of age

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**DEPARTMENT OF HEALTH AND HUMAN SERVICES
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ACTION REFERRAL

| | |
|--------------------|------------------------|
| TO <i>Myers</i> | DATE <i>11-7-08</i> |
|--------------------|------------------------|

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|---|--|
| DIRECTOR'S USE ONLY | ACTION REQUESTED |
| 1. LOG NUMBER <i>301256</i> | <input checked="" type="checkbox"/> Prepare reply for the Director's signature DATE DUE <i>11-17-08</i> |
| 2. DATE SIGNED BY DIRECTOR <i>cc: Mr. Farkner, Dr. Burston, Depo</i> | <input type="checkbox"/> Prepare reply for appropriate signature DATE DUE _____ <input type="checkbox"/> FOIA DATE DUE _____ <input type="checkbox"/> Necessary Action |

| APPROVALS <small>(Only when prepared for director's signature)</small> | APPROVE | * DISAPPROVE <small>(Note reason for disapproval and return to preparer.)</small> | COMMENT |
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Sincerely,

David T. Tayloe, Jr, MD, FAAP
President

DTT/lat

Newborn Care

- ~~99431(X1)~~ 99460 Initial hospital or birthing center care, per day, for the evaluation and management of the normal newborn infant
- ~~99432(X2)~~ 99461 Initial care, per day, for the evaluation and management of the normal newborn infant seen in other than hospital or birthing center
- ~~99433(X3)~~ 99462 Subsequent hospital care, per day, for the evaluation and management of a normal newborn
- ~~99435(X4)~~ 99463 Initial hospital or birthing center care, per day, for the evaluation and management of the normal newborn infant admitted and discharged on the same date
- ~~99436(X5)~~ 99464 Attendance at delivery (when requested by the delivering physician) and initial stabilization of newborn
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Inpatient Neonatal Intensive Care Services and Pediatric and Neonatal Critical Care Services

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- ~~99298(X8)~~ 99478 Subsequent intensive care, per day, for the evaluation and management of the recovering very low birth weight infant (present body weight less than 1500 grams)
- ~~99299(X9)~~ 99479 Subsequent intensive care, per day, for the evaluation and management of the recovering low birth weight infant (present body weight of 1500-2500 grams)
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Pediatric Critical Care Patient Transport

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Inpatient Neonatal and Pediatric Critical Care

~~99295(X13)~~ 99468 Initial inpatient neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less

~~99296(X14)~~ 99469 Subsequent inpatient neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less

~~99298(X15)~~ 99471 Initial inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age

~~99294(X16)~~ 99472 Subsequent inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age

~~993XX(1)~~ 99475 Initial inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, ~~25~~ years 25 months through 71 months of age

~~993XX(2)~~ 99476 Subsequent inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, ~~25~~ years 25 months through 71 months of age

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Sincerely,

A handwritten signature in black ink that reads "David T. Tayloe, Jr." with a stylized flourish at the end.

David T. Tayloe, Jr, MD, FAAP
President

DTT/lat

Newborn Care

- ~~99434(X1)~~ **99460** Initial hospital or birthing center care, per day, for the evaluation and management of the normal newborn infant
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