

**DEPARTMENT OF SOCIAL SERVICES**

DIVISION OF MEDICAL SERVICES

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**Strong Families - South Dakota's Foundation and Our Future**

January 17, 2019

**ATTENTION: All Providers**

**FROM: South Dakota Medicaid**

**RE: 2019 CPT and HCPC Update**

South Dakota Medicaid updated the fee schedules to reflect the 2019 CPT and HCPC codes revisions. The updated fee schedules are available at: <https://dss.sd.gov/medicaid/providers/feeschedules/dss/>. Covered CPT codes are listed on the fee schedule if the code has an identified rate. CPT codes without a rate are paid a percentage of billed charges per the applicable Administrative Rule of South Dakota. Providers may contact the Medicaid Telephone Service Unit at 1-800-452-7691 for questions on covered CPT codes. See below for specific revisions:

### **Applied Behavioral Analysis (ABA) Therapy**

Eight new CPT codes (97151, 97152, 97153, 97154, 97155, 97156, 97157) for ABA therapy were added to replace the previous ABA therapy codes that were deleted effective December 31, 2018. All codes will require a prior authorization. South Dakota Medicaid has updated the ABA Prior Authorization Form to reflect the new codes. New prior authorizations with the new codes will be issued for currently valid prior authorizations. Please review the Professional Services Billing Manual for additional instructions regarding these CPT codes at: <https://dss.sd.gov/formsandpubs/docs/MEDSRVCS/Professional.pdf>

### **Genetic Testing**

The prior authorization requirement for Cologuard, CPT 81528, and Factor V Testing, CPT 81241, has been removed effective January 1, 2019.

Three CPT codes (81211, 81213 and 81214) for BRCA gene analysis were deleted and replaced with new CPT codes 81163, 81164, 81165, 81166, and 81167. The prior authorization requirements for BRCA have not changed and are available in the Prior Authorization Manual located at: <https://dss.sd.gov/formsandpubs/docs/MEDSRVCS/PriorAuthorizationManual.pdf>

The following new genetic testing codes require prior authorization per the criteria listed in the Prior Authorization Manual: 81173-81174, 81204, 81177, 81178-81183, 81184-81186, 81187, 81188-81190, 81204, 81233, 81234, 81239, 81236-81237, 81271, 81274, 81284-81286, 81289, 81305, 81306, 81312, 81320, 81329, 81336-81337, 81333, 81343, 81344, 81345, 81443 and 81518

### **Durable Medical Equipment, Prosthetics, Orthotics, and Supplies (DMEPOS)**

Six new DME codes require prior authorization: A4563, A5514, L8608, L8698, L8701, L8702.

## **Dialysis**

One new code J3581 was added that will require a prior authorization.

## **Hearing Aids**

Codes for hearing aids, V5170, V5180, V5210, V5220 have been deleted and the following nine codes were added: V5171, V5172, V518, V5211, V5212, V5213, V5214, V5215, V5221.

Questions about covered CPT codes may be directed to the Medicaid Telephone Service Unit: 1-800-452-7691

Sincerely,

South Dakota Medicaid