

**Montana Medicaid – Fee Schedule
Home Infusion Therapy
August 1, 2011**

Definitions:

Modifier – When a modifier is present, this indicates system may have different reimbursement or code edits for that procedure code/modifier combination.

SH = Second concurrently administered therapy. Allowable amount is 80% of base fee.

SJ = Third or more concurrently administered therapy. Allowable amount is 75% of base fee.

Space: Indicates modifiers are not applicable to these codes.

Description – Procedure code description. You must refer to the appropriate official CPT-4 or HCPCS coding manual for complete definitions in order to assure correct coding.

Effective – This is the first date of service for which the listed fee is applicable.

Method – Source of fee determination

Fee Sched: Medicaid fee for listed code

Medicare: Medicare-prevailing fee for listed code

By Report (BR): Equals a percentage of billed charges; percentage depends on provider type and service/supply

PA – Prior Authorization

Y: Prior authorization is required

Space: Prior authorization is not required

CPT codes, descriptors, and other data only are copyright 1999 American Medical Association (or such other date of publication of CPT). All Rights Reserved. Applicable FARS/DFARS Apply.

**Montana Medicaid – Fee Schedule
Home Infusion Therapy
August 1, 2011**

Proc	Description	Effective	Method	Fee	Fee with Modifier SH	Fee with Modifier SJ	PA
S5498	HIT SIMPLE CATH CARE	08/01/2011	Fee Schedule	\$11.05			
S5501	HIT COMPLEX CATH CARE	08/01/2011	Fee Schedule	\$16.57			
S5502	HIT INTERIM CATH CARE	08/01/2011	Fee Schedule	\$16.57			
S9326	HIT CONT PAIN PER DIEM	08/01/2011	Fee Schedule	\$105.48	\$84.38	\$79.11	Y
S9327	HIT INT PAIN PER DIEM	08/01/2011	Fee Schedule	\$105.48	\$84.38	\$79.11	Y
S9328	HIT PAIN IMP PUMP DIEM	08/01/2011	Fee Schedule	\$120.54	\$96.43	\$90.41	Y
S9330	HIT CONT CHEM DIEM	08/01/2011	Fee Schedule	\$150.68	\$120.54	\$113.00	Y
S9331	HIT INTERMIT CHEMO DIEM	08/01/2011	Fee Schedule	\$150.68	\$120.54	\$113.00	Y
S9336	HIT CONT ANTICOAG DIEM	08/01/2011	Fee Schedule	\$105.48	\$84.38	\$79.11	Y
S9338	HIT IMMUNOTHERAPY DIEM	08/01/2011	Fee Schedule	\$76.84	\$61.48	\$57.63	Y
S9346	HIT ALPHA-1-PROTEINAS DIEM	08/01/2011	Fee Schedule	\$125.57	\$100.45	\$94.17	Y
S9347	HIT LONGTERM INFUSION DIEM	08/01/2011	Fee Schedule	\$125.57	\$100.45	\$94.17	
S9348	HIT SYMPATHOMIM DIEM	08/01/2011	Fee Schedule	\$115.52	\$92.41	\$86.64	Y
S9349	HIT TOCOLYSIS DIEM	08/01/2011	Fee Schedule	\$125.57	\$100.45	\$94.17	
S9351	HIT CONT ANTIEMETIC DIEM	08/01/2011	Fee Schedule	\$125.57	\$100.45	\$94.17	Y
S9355	HIT CHELATION DIEM	08/01/2011	Fee Schedule	\$125.57	\$100.45	\$94.17	Y
S9359	HIT ANTI-TNF PER DIEM	08/01/2011	Fee Schedule	\$106.48	\$85.18	\$79.86	Y
S9363	HIT ANTI-SPASMOTIC DIEM	08/01/2011	Fee Schedule	\$125.57	\$100.45	\$94.17	Y
S9365	HIT TPN 1 LITER DIEM	08/01/2011	Fee Schedule	\$253.95	\$202.88	\$190.20	Y
S9366	HIT TPN 2 LITER DIEM	08/01/2011	Fee Schedule	\$276.53	\$221.22	\$207.40	Y
S9367	HIT TPN 3 LITER DIEM	08/01/2011	Fee Schedule	\$271.00	\$216.80	\$203.25	Y
S9368	HIT TPN OVER 3L DIEM	08/01/2011	Fee Schedule	\$320.19	\$256.15	\$240.14	Y
S9374	HIT HYDRA 1 LITER DIEM	08/01/2011	Fee Schedule	\$37.57	\$30.06	\$28.18	
S9375	HIT HYDRA 2 LITER DIEM	08/01/2011	Fee Schedule	\$44.20	\$35.36	\$33.15	
S9376	HIT HYDRA 3 LITER DIEM	08/01/2011	Fee Schedule	\$50.97	\$40.67	\$38.12	
S9377	HIT HYDRA OVER 3L DIEM	08/01/2011	Fee Schedule	\$66.30	\$53.04	\$49.73	
S9379	HIT NOC PER DIEM	04/01/2004	By Report	\$0.00	\$0.00	\$0.00	Y
S9490	HIT CORTICOSTERIOD PER DIEM	08/01/2011	Fee Schedule	\$125.74	\$100.45	\$94.17	
S9497	HIT ANTIBIOTIC Q3H DIEM	08/01/2011	Fee Schedule	\$150.68	\$120.54	\$113.00	Y
S9500	HIT ANTIBIOTIC Q24H DIEM	08/01/2011	Fee Schedule	\$125.74	\$100.45	\$94.17	Y
S9501	HIT ANTIBIOTIC Q12H DIEM	08/01/2011	Fee Schedule	\$140.63	\$112.50	\$105.48	Y
S9502	HIT ANTIBIOTIC Q8H DIEM	08/01/2011	Fee Schedule	\$140.63	\$112.50	\$105.48	Y
S9503	HIT ANTIBIOTIC Q6H DIEM	08/01/2011	Fee Schedule	\$150.68	\$120.54	\$113.00	Y
S9504	HIT ANTIBIOTIC Q4H DIEM	08/01/2011	Fee Schedule	\$150.68	\$120.54	\$113.00	Y

Please see first page for a complete description of information contained in the fee schedules.