

August 24, 2011

# Montana Health Care Programs Notice Durable Medical Equipment

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**Effective September 1, 2011**

## **Billing of Miscellaneous Code B9998**

Enteral supplies included in the daily kits have been being paid in error under the B9998 code. **Effective September 1, 2011**, the supplies listed below that are included in the daily kits but billed with B9998 will be denied. Providers should review supplies being billed with the miscellaneous code and bill according to the following guidelines.

### **Medicare Coding Guidelines**

The codes for enteral feeding supplies (B4034–B4036) include all supplies, other than the feeding tube itself, required for the administration of enteral nutrients to the patient for one day.

Codes B4034–B4036 describes a daily supply fee rather than a specifically defined “kit.” Some items are changed daily; others may be used for multiple days. Items included in these codes are not limited to prepackaged kits bundled by manufacturers or distributors.

These supplies include, but are not limited to, feeding bag/container, flushing solution bag/container, administration set tubing, extension tubing, feeding/flushing syringes, gastrostomy tube holder, dressings (any type) used for gastrostomy tube site, tape (to secure tube or dressings), Y connector, adapter, gastric pressure relief valve, declogging device, etc.

These items must not be separately billed using the miscellaneous code (B9998) or by using specific codes for dressings or tape. The use of individual items may differ from patient-to-patient and from day-to-day.

Only one unit of service may be billed for any one day. Units of service in excess of one per day will be rejected as incorrect coding. Medicare criteria is available at [www.noridianmedicare.com](http://www.noridianmedicare.com).

Coding assistance is available from [www.dmepdac.com](http://www.dmepdac.com) or by calling 1-877-735-1326.

## **Contact Information**

If you have questions about this provider notice, contact Fran O'Hara, DME Program Officer, at (406) 444-5296.

For claims questions or additional information, contact Provider Relations:

**Provider Relations toll-free in- and out-of-state: 1-800-624-3958**

**Helena: (406) 442-1837**

**E-mail: [MTPRHelpdesk@ACS-inc.com](mailto:MTPRHelpdesk@ACS-inc.com)**

Visit the Provider Information website:

**<http://medicaidprovider.hhs.mt.gov>**