

To: AmeriHealth Caritas Louisiana PCPs, FQHCs, RHCs, and Specialists

Date: April 18, 2018

Subject: Earn More by Using CPT CAT II Codes When Care is Provided to Members with Diabetes or Hypertension

This is a reminder that effective with dates of service for January 1, 2018, AmeriHealth Caritas Louisiana has expanded its list of CPT CAT II codes that are eligible for a supplemental reimbursement. As part of our continued effort to improve outcomes, AmeriHealth Caritas Louisiana is requesting that providers use CPT CAT II codes when care is provided to members with diabetes or hypertension. A supplemental reimbursement will be paid when the following services are rendered and billed in conjunction with a diagnosis of diabetes or hypertension:

CPT CAT II Code	Description	Supplemental Reimbursement	Age Limit	Frequency	Effective Date
3044F*	Most recent HbA1c level less than 7.0%	\$10	18 and over	Once per 90 days	10/1/2015
3045F*	Most recent HbA1c level between 7.0 - 9.0%	\$10	18 and over	Once per 90 days	10/1/2017
3046F*	Most recent HbA1c level greater than 9.0%	\$10	18 and over	Once per 90 days	10/1/2017
3072F*	Low risk for retinopathy (no evidence of retinopathy in the prior year)	\$10	18 and over	Once per year	10/1/2015
3074F	Most recent systolic blood pressure <130 mm Hg	\$5	18 and over	One pair per 90 days	1/1/2018
3075F	Most recent systolic blood pressure 130 - 139 mm Hg	\$5	18 and over	One pair per 90 days	1/1/2018
3077F	Most recent systolic blood pressure >=140 mm Hg	\$5	18 and over	One pair per 90 days	1/1/2018

CPT CAT II Code	Description	Supplemental Reimbursement	Age Limit	Frequency	Effective Date
3078F	Most recent diastolic blood pressure <80 mm Hg	\$5	18 and over	One pair per 90 days	1/1/2018
3079F	Most recent diastolic blood pressure 80-89 mm Hg	\$5	18 and over	One pair per 90 days	1/1/2018
3080F	Most recent diastolic blood pressure >=90 mm Hg	\$5	18 and over	One pair per 90 days	1/1/2018

When billing these codes, providers will need to enter a charge of \$5.00 or \$10.00 to receive the full supplemental reimbursement. Reimbursement will not exceed your billed charges.

- Federally Qualified Health Centers (FQHCs) and Rural Health Clinics (RHCs) that meet criteria are also eligible for this incentive. When the above codes are billed according to the above criteria, the supplemental reimbursement will be paid in addition to the encounter rate.

*Diagnosis of diabetes required.

Questions:

Thank you for your continued support and commitment to the care of our members. If you have questions about this communication, please contact AmeriHealth Caritas Louisiana’s Provider Services department at 1-888-922-0007 or your Provider Network Management Account Executive.