



Indianapolis Medical Management  
7330 Shadeland Station, Ste 200  
Indianapolis, IN 46256

## IMM INSIGHT

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- ❖ FTC EXTENDS ENFORCEMENT DEADLINE FOR IDENTITY THEFT RED FLAGS RULE
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### NEW HIPAA REQUIREMENT: PRIVACY BREACH NOTIFICATION

The growing concern over confidentiality of an individual's personal information has resulted in a new HIPAA requirement for providing patients with notification in the event of a breach or unauthorized disclosure of Protected Health Information (PHI). **“A breach is defined as an unauthorized acquisition, access, use, or disclosure of unsecured PHI by a member of the practice's workforce, person working under the authority of the practice, or a business associate of the practice.”**

Upon discovery of a breach a practice is required to make notification to the patient(s) as soon as it is reasonable but no longer than 60 calendar days after the discovery of the breach. Notification must be provided to all patients involved in a confirmed breach. The notification must include the following elements:

- A brief description of what happened, including the date of the breach and the date of discovery of the breach
- A description of the types of unsecured PHI that were involved in the breach. For example, name, social security number, date of birth, home address, diagnosis, etc.
- Any steps an individual should take to protect themselves from potential harm resulting from the breach
- A brief description of what the practice is doing to investigate the breach, to limit harm to individual(s), and protect against any further breaches
- Provide contact information for the individual(s) if they want to ask questions or learn additional information about the breach

A practice is required to provide notification to the media (print or broadcast) for a breach that involves 500 or more patients. Notices to the media do not replace the notices to the individuals. A practice is required to notify the Department of Health and Human Services (DHHS) of all confirmed breaches immediately if it involves 500 or more individuals. In addition a practice must maintain an annual log of all confirmed breaches. A copy of the log must be submitted to HHS no later than 60 calendar days after the end of each calendar year using the HHS website ([www.hhs.gov](http://www.hhs.gov)). Copies of the annual privacy breach log must be maintained for a minimum of 6 years.

Business associates of a practice could also experience a privacy breach. If this occurs, the business associate is required to immediately notify the practice. Upon notification of a breach by the business associate, the practice will then begin the entire notification process outlined above. There is a **new amendment to the business associate agreement** to ensure that the language regarding the breach notification requirements is included in the agreement. If you have any questions about the amendment please ask your business consultant or your clinical/ regulatory consultant.

The new privacy breach notification requirements went into effect **September 23, 2009**. The Department of Health and Human Services has decided not to impose any sanctions until the end of the grace period which will end on February 22, 2010. Please be aware that practices are still expected to fulfill the requirements (conduct an investigation, make appropriate notifications, impose workforce sanctions and maintain documentation) should you discover a breach of unsecured PHI.

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## NEW HIPAA REQUIREMENT: PRIVACY BREACH NOTIFICATION (CONTINUED)...

**All employees are required to complete a training course on the new privacy breach requirements. Community Health Network will be offering this course through MyLearning starting on December 1, 2009.**

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## FTC EXTENDS ENFORCEMENT DEADLINE FOR IDENTITY THEFT RED FLAGS RULE

At the request of Members of Congress, the Federal Trade Commission is delaying enforcement of the "Red Flags" Rule until June 1, 2010, for financial institutions and creditors subject to enforcement by the FTC.

However, IMM and Community Health Network will continue with our current compliance efforts effective immediately.

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## H1N1 FLU VACCINATION CODING AND BILLING – MULTIPLE CARRIERS

### American Medical Association:

On September 29, 2009, the American Medical Association, in consultation with the Department of Health and Human Services, issued coding guidance for billing of the H1N1 vaccinations.

- 90663 should be used to report the H1N1 flu vaccination product (if purchased).
- 90470 should be used to report the administration and counseling of the H1N1 flu vaccine.

Please note, these are not to be confused with the billing and coding guidelines released by the Centers for Medicare and Medicaid that were effective beginning September, 1, 2009.

- G9142 is to be used to report the H1N1 vaccination product (if purchased) and
- G9141 is to be used to report the administration and counseling of the H1N1 flu vaccine.

For additional information, go to:

<http://www.cms.hhs.gov/MLN MattersArticles/downloads/se0920.pdf>

<http://www.ahanews.com>

[AMA Web site](#)

### ANTHEM:

Anthem has advised that the new CPT code 90470 should be used to bill the administration of the H1N1 vaccine. In addition, you will need to bill CPT Code 90663 for the actual vaccine with a charge of \$0.01 (1 cent for administrative purposes).

For administration of both the H1N1 vaccine and the seasonal flu vaccine, Anthem recommends the following guidelines:

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## H1N1 FLU VACCINATION CODING AND BILLING – MULTIPLE CARRIERS (CONTINUED) ...

- 90470 for the H1N1 vaccine administration, and in addition 90466, 90468, 90472, or 90474 for the seasonal flu vaccine administration.

For further information, Anthem recommends you contact your local network management representative.

### **CIGNA:**

CIGNA will reimburse health care professionals and facilities for the administration of the H1N1 vaccine to all individuals covered under a fully-insured CIGNA medical benefit plan. The U.S. government is making the vaccine available at no cost to you; therefore CIGNA will only provide coverage for the administration of the vaccine. Self-funded CIGNA plans coverage is determined by the employer and therefore may not provide coverage for the H1N1 vaccination.

CIGNA coverage for H1N1 vaccine administration will not be subject to plan deductibles, co-pay or coinsurance. Certain self-insured benefit plans administered by CIGNA may not adhere to this coverage policy.

### **Billing Guidelines:**

Code(s) **G9141** or **90470** are used to promote prompt payment as these codes will not be subject to co-pay or deductible and coinsurance. You may bill with either **G9141** or **90470** to submit for H1N1 vaccine administration reimbursement as both codes will be processed in the same manner. Facilities should use revenue code 771 with G9141 or 90470 when submitting claims for the H1N1 vaccine administration.

### **H1N1 Only:**

1. HCPCS Code G9141 - Influenza A (H1N1) administration **OR** CPT Code 90470 – H1N1 administration
2. ICD-9 Code - V04.81 – need for prophylactic vaccination and inoculation, influenza

### **H1N1 and Seasonal Flu Vaccine:**

When both the seasonal influenza vaccine and the H1N1 vaccine are administered to the same individual on the same date of service:

1. Bill Procedure Code: G9141 - Influenza A (H1N1) administration **OR** 90470 – H1N1 administration.
2. ICD-9 Code V04.81 – Need for prophylactic vaccination and inoculation, influenza.
3. Bill the appropriate seasonal flu vaccine: 90655, 90656, 90657, 90658 or 90660.
4. Bill the appropriate administration code: 90466, 90468, 90472 or 90474.

CIGNA will not reimburse for CPT code 90663 or HCPCS code G9142, which both represent the H1N1 vaccine product.

**Roster Billers:** Mass immunizer roster billers may submit claims for the administration of the H1N1 vaccine using the roster billing format. The above-mentioned billing guidelines must be followed and the roster must contain, at a minimum, the following information:



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## H1N1 FLU VACCINATION CODING AND BILLING – MULTIPLE CARRIERS (CONTINUED) ...

- Patient's name and address;
- Patient's date of birth, sex and CIGNA identification number;
- Date of service;
- Provider name and Tax Identification Number; and
- Patient or guardian signature.

**Additional Information:** CIGNA also provides coverage for antiviral therapy (Tamiflu® (oseltamir) and Relenza® (zanamivir)) for individuals covered under a CIGNA Prescription Drug Plan, according to CDC guidelines. CIGNA has no pre-certification requirement for these antiviral drugs, but quantity limits and tiered co-payments/coinsurance may apply.

Follow the current recommendations of the CDC ACIP for H1N1 vaccine administration. Refer to the CDC and Prevention website for the most current information on the H1N1 virus.

In addition, helpful information for your patients, including "H1N1 Virus: What You Should Know," is available on [www.cigna.com](http://www.cigna.com).

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## CLARIFICATION OF THE USE OF MODIFIERS WHEN BILLING "WRONG SURGERY ON A PATIENT"

From CMS MM SE0927

### Provider Types Affected

This article clarifies the correct use of certain HCPCS modifiers. To briefly clarify, please note that:

- Modifier PC is used to identify Wrong Surgery on Patient. The modifier PC is to be appended, where appropriate, to all claim lines related to a surgical error.
- Modifier 26 is used to identify the professional component of a service or a procedure.

Some providers or their billing services may be incorrectly using the HCPCS modifier PC to indicate the Professional Component for certain services not related to surgical error when the modifier 26 should have been used. You need to be aware that the use of the PC modifier on Medicare claims will result in the claim being denied.

### What You Need to Do

- Please be sure that you and your billing personnel/services prepare claims submitted to Medicare with the correct codes in order for the claims to process correctly.

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### SUBMIT YOUR QUESTIONS FOR THE NEXT NEWSLETTER

Do you have questions we can help with? Please submit questions to be answered in a future IMM Insight Newsletter – contact us at <http://imm.ecommunity.com/>.

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### SOME HEALTHCARE RECOGNITION DATES FOR NOVEMBER

COPD Awareness Month  
Diabetes Month, American  
Epilepsy Awareness Month, National  
Hospice Month, National  
Lung Cancer Awareness Month  
Marrow Awareness Month, National  
Prematurity Awareness Day (3rd Tuesday)