WYOMING

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Home Infusion Therapy (HIT)
Billing Guidelines

Guidelines   Home infusion is the administration of medications or nutrition intravenously in a patient's home, office, or a home infusion suite. Home infusion services must be ordered in writing by a physician.

Documentation must identify and describe the services performed including total time of the service. Appeals submitted without this documentation will be rejected.

Payment for HIT Services

Enteral and Parenteral Nutrition Infusions

The HCPCS "S" codes for enteral and parenteral nutrition home infusion services are based on a "per diem" reimbursement methodology (S9341 – S9343, S9364 – S9368). The per diem includes all supplies, care coordination and professional pharmacy services. The per diem code is billed for each day that a patient receives an infusion and services are rendered in person from the provider. Other nursing services and drug products are billed separately from the per diem.

Reimbursement is allowed separately for the following supplies: ambulatory infusion pumps (E0779-E0781). BCBSWY may allow separate reimbursement for other supplies on a case-by-case basis.

Per diems will only be reimbursable when services are rendered in person in the patient's home or in person at a home infusion suite. Provision of medications and remote support alone is not sufficient for a provider to be eligible for per diem reimbursement.

Catheter Care

Bill catheter care per diems (S5497, S5498, S5501, S5502) when provided as a stand-alone therapy. Insertion by a nurse of a PICC line (S5522) or midline (S5523) is coded separately from the other nursing visit codes and per diems. Supplies required from non-routine catheter procedures such as de-clotting supplies (S5517), repair kits (S5518), PICC insertion supplies (S5520) and midline insertion supplies (S5521) are coded separately.

Hydration Therapy

Bill hydration therapy per diems (S9373-S9377) when provided as a stand-alone therapy.

Other Infusion Types

The HCPCS "G" codes for home infusion services are to be used for billing. Billing for "G" codes includes professional services, including nursing services, furnished in accordance with care coordination, patient training and education, remote monitoring, and monitoring services for the provision of home infusion therapy. Infusion pumps, home infusion drugs, other supplies, are to be billed separately. A G code is billed for each day that a patient receives an infusion and services are rendered in person from the provider.

Home infusion therapy (HIT) is billed based upon type: intravenous infusion, subcutaneous infusion, and intravenous chemotherapy or complex drug. Billing for each code type is differentiated based upon "first visit" status. A visit is considered a first visit when it has been at least 60 days since a patient has received *any* home infusion therapy services billed with a G code.

All HIT services require at least one non-oral drug or biological to be billed alongside the G code. This drug determines the type mentioned above.

Code	Desc	
G0068	Administration of Intravenous infusion drug in home	General Visit
G0069	Administration of Subcutaneous infusion drug in home	
G0070	Administration of Intravenous chemotherapy or other complex drug in home	
G0088	Administration of Intravenous infusion drug in home	1st Visit
G0089	Administration of Subcutaneous infusion drug in home	
G0090	Administration of Intravenous chemotherapy or other complex drug in home	

Services billed with G codes will only be reimbursable when services are rendered in person in the patient's home or in person at a home infusion suite. Provision of medications and remote support alone is not sufficient for a provider to be eligible for HIT reimbursement.

Multiple Therapies

If multiple therapies that would be billed using a per diem S code are done on the same date of service, append the following modifiers to the per diem S codes:
- SH – Second concurrently administered infusion therapy
- SJ – Third or more concurrently administered therapy

Only one G code is reimbursable each day. If two or more home infusion drugs or biologicals from two (or more) different payment categories are

administered to an individual concurrently on a single infusion calendar day, one payment.

If both a service billed using a per diem and service billed using a G code are performed on the same day both codes should be submitted. Payment will only be made for the G code.

Other Payment

Providers who do not render in-person infusions and are not eligible to be reimbursed a per diem or "G" code may still be eligible to be reimbursed for compounding services or for supplies as detailed below.

Compounded Drugs

Compounded Sterile Preparation (CSP) means a preparation intended to be sterile that is created by combining, admixing, diluting, pooling, reconstituting, repackaging, or otherwise altering a drug product or bulk drug substance.

BCBSWY will not reimburse for compounding services that are limited to altering a drug product with saline or similar substance.

Drug Compounding should be billed with S9430.

S9430 should be billed per dose of the compounded medication.

Reimbursement for S9430 includes all professional pharmacy services rendered in relation to providing the compounded medication to the patient.

Medical Supplies

Medical supplies that are consumable, expendable, disposable, or non-durable and that are used for treatment of a patient's specific illness, injury, may be reimbursed separately using the appropriate HCPCS code.

Drugs

Drugs should be billed with a HCPCS or CPT code. If a specific code is not available, providers should use J3490, J3590, J7799, or J9999 along with narrative, NDC number, dosage and units supplied. Related NDC codes for compounded products are itemized using the LIN and CTP segments on the 837P claim format. These claims may require manual review.

Claim forms

Home Infusion Therapy (HIT) providers should submit claims for services on HCFA 1500 or 837p. All items and services provided during a single day for a patient should be submitted on a single claim.