



STATE OF OKLAHOMA  
OKLAHOMA HEALTH CARE AUTHORITY

OHCA 2009-25

June 26, 2009

**To: Providers of renal dialysis services**  
**Re: Utilization of new CPT dialysis codes and the deletion of old CPT dialysis codes**

Dear Provider,

As of January 1, 2009, new CPT codes were implemented replacing the temporary HCPCS G codes previously used to submit claims for physician oversight of dialysis services. This letter is to inform providers that since January 1, 2009, OHCA has recognized and has been providing reimbursement for claims that are submitted using these new CPT codes. Claims for services provided since January 1, 2009 and not yet submitted should be submitted now and will be recognized retroactively to January 1, 2009. Proper utilization of these new codes and applicable documentation requirements is outlined below.

The proper CPT codes for submitting inpatient services claims for hemodialysis are 90935 or 90937 and for peritoneal dialysis the proper codes are 90945 or 90947. Only one unit of each code is to be submitted per day and is only reimbursable if the services provided are consistent with the CPT description of services for that particular code. It should be noted, as outlined in the CPT manual, that providers should not submit a claim for an additional E&M service for the same date of dialysis services unless that E&M service is for a separately identifiable service unrelated to the dialysis procedure or renal failure which cannot be rendered during the dialysis services. If providers do submit a claim for both an E&M service and dialysis services on the same date, they should use the modifier 25 and attach clinical documentation to support the medical necessity of both services and the documentation to support that the E&M service is a separately identifiable service and unrelated to the dialysis procedure or renal failure and cannot be rendered during the dialysis services.

As per CPT instructions, codes 90935 and 90937 are also to be used when submitting claims for outpatient non-ESRD dialysis services. For such non-ESRD outpatient services, clinical documentation supporting the diagnosis for which services were rendered must be sent as an attachment with the claim when submitted for reimbursement.

For submitting claims for ESRD-related dialysis services provided in an outpatient setting, providers should utilize codes 90951-90970 as described and outlined in the CPT manual.

For questions or more information regarding the utilization of new CPT dialysis codes, please call the Provider Services unit at 1-877-823-4529, option 2.

Thank you for your continued service to Oklahoma's SoonerCare members.

Sincerely,

A handwritten signature in purple ink that reads "Lynn V. Mitchell, M.D., MPH".

Lynn Mitchell, M.D., MPH  
State Medicaid Director