



STATE OF TENNESSEE
BUREAU OF HEALTH SERVICES
DEPARTMENT OF HEALTH
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Date: Wednesday, February 20, 2002
To: PTBMIS Codes Manual Update Group
From: Gary Self
Subject: PTBMIS Codes Manual Update

Please note the attached changes to PTBMIS Codes Manual:

Item	REMOVE	ADD
1	Table of Contents, pages 2 - 5	Table of Contents, pages 2 - 5
2	Section 070 – Communicable Disease in its entirety (pages 1 - 22)	Section 070 – Communicable Disease in its entirety (pages 1 – 27)
3	Section 085 – EPSD&T, Pages 3 - 4	Section 085 – EPSD&T, Pages 3 – 4

Item 2 makes several changes to the Communicable Disease Section including the new sections **70-104** and **70-108** relating to Testing of High Risk Groups. Please see the Change Pages for this section for a complete list.

Item 3 adds the **NS – No Show** Disposition Code for the **EPREFUS** code to the manual.

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SECTION 70 - COMMUNICABLE DISEASE

Epidemiology Services Definitions

99348A - Attempted Home Visit/Off-site:

Performed by Public Health Nurse or Public Health Representative. This code is used to document an unsuccessful contact investigation attempt. A confidential note may be left for the patient to call representative. Example: Hep A, Meningitis, need to contact pt. within 24-48 hours.

78059 - No medical record, 30 min. incs. - Field Service:

Performed by the Public Health Nurse or Public Health Representative providing the following services: Audit of school/day care immunization records, review of medical records, conduct mass education or mass screening. No individual medical record is opened yet.

3560 - Has medical record, 30 min. incs. - Field Service:

Performed by the Public Health Nurse or Public Health Representative. Contact investigation initiated, intelligence gathering field visit.

99350H - Home/Off-site:

Service provided by Public Health Nurse or Public Health Representative. Contact investigation initiated, initial interview or re-interview may occur and lab work collected. Appropriate referrals are made, counseling/education and additional information gathered. Approximately 30 - 45 min.

Office Visit - (Billing Third Party) - 99201-99205 New Pt., or 99211-99215 Est. Pt. Office visit:

See CPT book for appropriate Evaluation and Management Code definitions if billing private insurance. Remember key components of history, examination and medical decision making must be met and documented accordingly.

3734 Recheck Office/Home/Off-Site (Billing State STD Program):

Performed by Public Health Nurse or Public Health Representative for follow-up visit.

70.010 - Epidemiology

Last Change Date: 02/20/2002

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
New Patient	99201 - 99205	EI	As Approp Pvt. Pay - 6 OR Pvt. Ins - (5XXX) OR TNCare - (AXXX)	Follow-Up Exam OR	V679	1
Established Patient	99211 - 99215			Complaint Without Diagnosis Made	V655	
Lab(s) Completed						
Venipuncture (If Done)	36415					
Lab Handling (If Outside Lab)	99000					
Drugs - Use Pharmacy Module						
Related Functions						
Vaccines Given (See Vaccine/Imm Section For List Of Vaccine Codes)						
Counseling (DO NOT CODE COUNSELING AND A VISIT)	99401 - 99404					
Recheck Visit	3734					
***Home Visit / Off Site Visit	99350H					
Attempted Home Visit	99348A					

70.010 Epidemiology - Continued on Next Page

70.010 - Epidemiology (Continued)

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
COMMENTS:						
Code Counseling (99401-99404) if service provided is counseling only. Do not code counseling if a visit has been coded. Third party pay sources may be billed for services provided to patients under the EI Program WITH SIGNED CONSENT FROM THE PATIENT. DO NOT use EI for Pediculosis or Scabies. DO NOT generate an encounter for telephone contacts.						
<u>Other Diagnosis Codes that may be used for EI.</u>						
	<u>Case</u>	<u>Contact</u>			<u>Case</u>	<u>Contact</u>
Hepatitis A	0701	V017	RMSF		0820	V018
Hepatitis B	07030	V017	Rabies		071	V015
Meningitis	3229 or 0360 or 3200*	V018	Rubella		0569	V014
Measles (Rubeola)	0559	V017	Salmonella		0039	V018
Mumps	0729	V017				
TennCare Advocacy	99401T	TO	6	Same as primary diagnosis for the encounter		1
	99402T			OR Unspecified administrative purpose	V689	
COMMENTS:						
Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.						

* Descriptions:

3229 - Unspecified

0360 - Meningococcal

3200 - Haemophilus

70.020 - Epidemiology - Field Services

Last Change Date: 02/20/2002

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
Field Service (Audit, Mass Screening, Surveillance Contact, Mass Education)		EI	6	As Appropriate OR		# 30 Min Incs
"C" Registration (Community Service) (Has NO Medical Record)	78059			Health Related Issue	V654	
"L" Registration (Long) (Has Medical Record)	3560					
COMMENTS: Use code 3560 if your PTBMIS record has a "L", long registration, or 78059 if the record has a "C", community service, registration. For either type of registration write the number of participants in the mile column on the encounter form. (The person keying the encounter will key the number of participants in the <u>MILE column on the EN screen.</u>)						
TennCare Advocacy	99401T	TO	6	Same As Primary Diagnosis For The Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	
COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.						
COMMENTS: <u>Other Diagnosis Codes that may be used for EI.</u>						
	<u>Case</u>	<u>Contact</u>		<u>Case</u>	<u>Contact</u>	
Hepatitis A	0701	V017	RMSF	0820	V018	
Hepatitis B	07030	V017	Rabies	071	V015	
Meningitis	3229 or 0360 or 3200*	V018	Rubella	0569	V014	
Measles (Rubeola)	0559	V017	Salmonella	0039	V018	
Mumps	0729	V017				

* Descriptions:

3229 - Unspecified

0360 - Meningococcal

3200 - Haemophilus

70.030 - AIDS Prevention - HIV Counseling and Testing

Last Change Date: 04/01/2001

NOTE:

The population served is anyone who presents to acquire detailed information regarding HIV prevention. This can take place in health department setting, school classrooms, or even public places such as a health fair. Services can include client centered counseling, education, partner notification services, and general information sharing regarding HIV prevention.

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
Counseling	99401 - 99404	AP	6	Contact With Or Exposure To Venereal Disease	V016	1
Lab(s)						
Antibody, HIV-1	86701					
Venipuncture (If Done)	36415					
Lab Handling (If Outside Lab)	99000					

COMMENTS:

Counseling Codes 99401-99404 with the AP Program and Reimbursement Code 6 can be used in conjunction with other program office visits. This is an exception to the rule of not coding a visit plus counseling and is necessary due to Relative Value and the need to draw down AP funds. There is no charge to the patient with the AP Program Code. **RULE OF THUMB: DISCUSSION WITH PATIENT AND FILLING OUT THE "BUBBLE SHEET" (AIDS COUNSELING AND TESTING DATA SHEET) EQUALS CODING THE APPROPRIATE COUNSELING CODE (99401-99404) ON AN ENCOUNTER FORM.** If a patient presents for ST (See ST Section for codes) and also requests HIV testing, code the HIV test and HIV counseling to the AP Program and the ST services provided to ST. Code only one (1) lab handling fee. Do not code counseling for giving negative HIV results to patient over the telephone.

TennCare Advocacy	99401T	TO	6	Primary Diagnosis For The Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	

COMMENTS:

Advocacy may be coded as appropriate. Refer to [TennCare Section](#) to identify activities and services related to TennCare.

70.040 - AIDS Prevention - Return Visit for Test Results

Last Change Date: 04/01/2001

NOTE:

The population served is anyone who presents to acquire detailed information regarding HIV prevention. This can take place in health department setting, school classrooms, or even public places such as a health fair. Services can include client centered counseling, education, partner notification services, and general information sharing regarding HIV prevention.

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
Counseling	99401 - 99404	AP	6	Contact With Or Exposure To Venereal Disease	V016	1
<p>COMMENTS: Counseling Codes 99401-99404 with the AP Program and Reimbursement Code 6 can be used in conjunction with other program office visits. This is an exception to the rule of not coding a visit plus counseling and is necessary due to Relative Value and the need to draw down AP funds. There is no charge to the patient with the AP Program Code. RULE OF THUMB: DISCUSSION WITH PATIENT AND FILLING OUT THE "BUBBLE SHEET" (AIDS COUNSELING AND TESTING DATA SHEET) EQUALS CODING THE APPROPRIATE COUNSELING CODE (99401-99404) ON AN ENCOUNTER FORM. If a patient presents for ST (See ST Section for codes) and also requests HIV testing, code the HIV test and HIV counseling to the AP Program and the ST services provided to St. Code only one (1) lab handling fee. Do not code counseling for giving negative HIV results to patient over the telephone.</p>						
TennCare Advocacy	99401T	TO	6	Primary Diagnosis For The Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	
<p>COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.</p>						

70.050 - AIDS Prevention - Field Service

Last Change Date: 04/01/2001

NOTE:

The population served is anyone who presents to acquire detailed information regarding HIV prevention. This can take place in health department setting, school classrooms, or even public places such as a health fair. Services can include counseling, education, and general information sharing regarding HIV prevention.

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
<u>Field Services (Audit, Contact, Mass Screening, Mass Education)</u>		AP	6	Contact With Or Exposure To Venereal Disease OR	V016	# 30 min incs
"C" Registration (Community Service) (Has NO Medical Record)	78059			Health Related Issues	V654	
"L" Registration (Long) (Has Medical Record)	3560					
COMMENTS: Use code 3560 if your PTBMIS record has a "L", long registration, or 78059 if the record has a "C", community service, registration. For either type of registration write the number of participants in the mile column on the encounter form. (The person keying the encounter will key the number of participants in the <u>MILE column on the EN screen.</u>)						
TennCare Advocacy	99401T	TO	6	Primary Diagnosis For The Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	
COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.						

70.060 - AIDS Ryan White - Dental

Last Change Date: 04/01/2001

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
Diagnostics	D0120 - D0330	AR	Ryan White - (5RWB)	As Approp	As Approp	1
Preventive	D1110 - D1351					
Restorative	D2110 - D2954					
Endodontic	D3110 - D3430					
Periodontic	D4210 - D4341					
Removable Prosthetics	D5110 - D5761					
Fixed Prosthetics	D6210 - D6930					
Surgical	D7110 - D7960					
Palliative	D9110					
Dental Consultation	30066					
COMMENTS: Clinical dental services are individual care programs provided in fixed facilities affiliated with the health department.						
TennCare Advocacy	99401T	TO	6	Primary Diagnosis For The Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	
COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.						

70.070 - AIDS Ryan White - Medical

Last Change Date: 04/01/2001

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY			
Office Visit, Time Specific		AR	5RWB	HIV OR	07953	1			
New Patient	99201 - 99205			AIDS	042	2 (If 2 Hours)			
Established Patient	99211 - 99215								
Home Nursing Assessment									
Initial Visit	99341								
Subsequent Visit	99347								
Nutrition Services									
Initial Visit, Office or Home	99404								
Other Office or Home Visit	99403								
Lab(s) Completed									
Venipuncture (if done)	36415								
Lab Handling (if outside lab)	99000								
Related Functions									
Drugs - Use Pharmacy Module									
<p>COMMENTS: This section is for a visit for evaluation & management of HIV positive patients. The patient must be a Tennessee resident, must be clinically tested as HIV positive and <u>not</u> have any third party coverage that will provide for the specific service needed. AR Program Code should not be used on encounters generated during HIV clinics <u>unless</u> the patient meets Ryan White eligibility criteria. Use ST Program Code for HIV clinics when patient does not qualify for Ryan White. An Other Visit and a Nutrition Counseling Visit may be coded during the same office visit based on Ryan White Program Guidelines. See AIDS Support Fee Schedule for description of services. Providers should use Code 99347 for subsequent home visits to provide care coordination after billable visits are exhausted to capture RVU's</p>									

70.070 - AIDS Ryan White - Medical (Continued on Next Page)

70.070 - AIDS Ryan White - Medical (Continued)

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
TennCare Advocacy	99401T	TO	6	Primary Diagnosis For The Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	
<p>COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.</p>						

STD Services Definitions

99348A -- Attempted Home Visit/Off-site:

Performed by Public Health Nurse or Public Health Representative. This code is used to document an unsuccessful contact investigation attempt. A confidential note may be left for the patient to call representative.

78059 -- No medical record, 30 minute increments - Field Service:

Performed by the Public Health Nurse or Public Health Representative providing mass education or mass screening. No individual medical record is opened yet.

Lab Monitoring/Surveillance: Performed by the Public Health Representative to private labs to educate and troubleshoot any problems in the reporting of STD positive results.

3560 -- Has medical record, 30 minute increments - Field Service:

Performed by the Public Health Nurse or Public Health Representative. Contact investigation initiated, intelligence gathering field visit.

99350H - Home/Off-site:

Service provided by Public Health Nurse or Public Health Representative. Contact investigation initiated, initial interview or re-interview may occur. Appropriate referrals are made, counseling/education and additional information gathered. Approximately 30 to 45 min. Arranging for or providing transportation. May collect lab work. **(if interview, re-interview, counseling/education provided and/or elicitation of contacts the time may increase 30-120 minutes).**

Office Visit - 99201-99205, New Patient, or 99211-99215, Established Patient, Office visit:

See CPT book for appropriate Evaluation and Management Code definitions if billing private insurance. Remember key components of history, examination and medical decision making must be met and documented accordingly.

3734 Recheck Office/Home/Off-Site (Billing State STD Program)

Performed by Public Health Nurse or Public Health Representative for follow-up visit. Example: Follow-up blood work to see if therapy effective.

70.080 - STD - STD Visits (Treatment, Follow-up, Contact, Counseling)

Last Change Date: 04/01/2001

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
<u>Other Visit, Time Specific</u>		ST	As Approp Pvt Pay: 6 Pvt Ins: (5XXX) TNCare: - (AXXX)	As Appropriate For Reportable STDs		
New Patient	99201 - 99205			AIDS	042	1
Established Patient	99211 - 99215			Chlamydia	07998	
Lab(s) completed				Gonorrhea	0980	
Venipuncture (if done)	36415			HIV	07953	
Lab handling (if outside lab)	99000			STD Contact / Exposure	V016	
Drugs dispensed - use Pharmacy Module				Syphilis, Late	0970	
Related Functions				Syphilis, Latent	0971	
Counseling (ONLY IF VISIT NOT CODED -- see comments for exceptions)	99401 - 99404			Syphilis, Primary	0912	
Recheck Visit	3734			6	Syphilis, Secondary	0919

70.080 - STD - STD VISITS (Continued on Next Page)

70.080 - STD - STD VISITS (Continued)

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
***Home / Off-Site Visit	99350H	ST	As Approp	Venereal Disease, Unspecified	0999	1
Attempted Home Visit	99348A					

COMMENTS:

Use ST Program Code for HIV clinic when patient does not meet Ryan White eligibility criteria. Use AR (AIDS Ryan White) Program Code for HIV clinic only if patient qualifies for Ryan White.

Code treatment for Reportable Sexually Transmitted Diseases only using ST Program Code. For non-reportable disease (i.e., Condyloma) visits/treatment, use CH/WH/MH. Do not code counseling in addition to an Other or Preventive Visit since counseling is considered part of the visit.

The highest level provider should code the visit. **EXCEPTION: If patient requests HIV testing in addition to the ST visit, the person who completes the "bubble sheet" (AIDS Counseling and Testing Data Sheet) should code the appropriate counseling code using AP (AIDS Prevention) as the program code for the counseling and the HIV test and Reimbursement Code 6 (Private Pay).** Do not code condoms dispensed. Third party pay sources may be billed for services provided to patients under the ST Program **WITH SIGNED CONSENT FROM THE PATIENT.**

For Field Visits to contacts, use the source case record to establish the encounter. If source case has no record, open one. When the contact presents to clinic, open record on contact.

TennCare Advocacy	99401T	TO	6	Primary Diagnosis		1
	99402T			Unspecified Administrative Purpose		

COMMENTS:

Advocacy may be coded as appropriate. Refer to [TennCare Section](#) to identify activities and services related to TennCare.

70.090 - STD - Field Service

Last Change Date: 04/01/2001

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
<u>Field Service (Audit, Mass Screening, Contact, Mass Education)</u>		ST	6	As Approp OR	As Approp	# 30 Min Incs
"C" Registration (Community Service) (Has NO Medical Record)	78059			Health Related Issues	V654	
"L" Registration (Long) (Has Medical Record)	3560					
<p>COMMENTS: Use ST Program Code for HIV clinic when patient does not meet Ryan White eligibility criteria. Use AR (AIDS Ryan White) Program Code for HIV clinic <u>only if patient qualifies for Ryan White.</u></p> <p>Code treatment for <u>Reportable Sexually Transmitted Diseases</u> only using ST Program Code. For non-reportable disease (i.e., Condyloma) visits/treatment, use CH/WH/MH. Do not code counseling in addition to an Other or Preventive Visit since counseling is considered part of the visit</p> <p>The highest level provider should code the visit. EXCEPTION: If patient requests HIV testing in addition to the ST visit, the person who completes the "bubble sheet" (AIDS Counseling and Testing Data Sheet) should code the appropriate counseling code using AP (AIDS Prevention) as the program code for the counseling and the HIV test and Reimbursement Code 6 (Private Pay). Do not code condoms dispensed. Third party pay sources may be billed for services provided to patients under the ST Program WITH SIGNED CONSENT FROM THE PATIENT.</p> <p>For Field Visits to contacts, use the <u>source case</u> record to establish the encounter. If source case has no record, open one. When the contact presents to clinic, open record on contact.</p>						
TennCare Advocacy	99401T	TO	6	Primary Diagnosis OR		1
	99402T			Unspecified Administrative Purpose	V689	
<p>COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.</p>						

70.100 - STD - Screening Visits (Patient Requests Testing for STD--No Known Contact)

Last Change Date: 04/01/2001

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
Preventive Visit, Age Specific		ST	As Approp	As Approp	As Approp	1
New Patient	99381 - 99397					
Established Patient	99391 - 99397					
Lab(s) Completed						
Venipuncture (If Done)	36415					
Lab Handling (If Outside Lab)	99000					
<p>COMMENTS:</p> <p>Use ST Program Code for HIV clinic when patient does not meet Ryan White eligibility criteria. Use AR (AIDS Ryan White) Program Code for HIV clinic <u>only if patient qualifies for Ryan White.</u></p> <p>Code treatment for Reportable Sexually Transmitted Diseases only using ST Program Code. For non-reportable disease (i.e., Condyloma) visits/treatment, use CH/WH/MH. Do not code counseling in addition to an Other or Preventive Visit since counseling is considered part of the visit</p> <p>The highest level provider should code the visit. EXCEPTION: If patient requests HIV testing in addition to the ST visit, the person who completes the "bubble sheet" (AIDS Counseling and Testing Data Sheet) should code the appropriate counseling code using AP (AIDS Prevention) as the program code for the counseling and the HIV test and Reimbursement Code 6 (Private Pay). Do not code condoms dispensed. Third party pay sources may be billed for services provided to patients under the ST Program WITH SIGNED CONSENT FROM THE PATIENT.</p> <p>For Field Visits to contacts, use the <u>source case</u> record to establish the encounter. If source case has no record, open one. When the contact presents to clinic, open record on contact.</p>						
TennCare Advocacy	99401T	TO	6	Primary diagnosis OR		1
	99402T			Unspecified Administrative Purpose	V689	
<p>COMMENTS:</p> <p>Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.</p>						

TBC Definitions

Last Change Date: 02/20/2002

78059 - Community Site Educational Counseling Visit:

Code for preventive education and counseling of individual community or business leaders or groups of clients. This preventive and educational effort may be performed by a Public Health Nurse or by other trained TB personnel and the time spent can be documented using this code, in 30-minute time increments.

78059TP - Total Population At Site:

Code to capture the total population of each community site where TB screening and preventive education with Tuberculin Testing occurs; list in PTBMIS total number of persons in the group regardless of whether they are individually contacted.

78059SP - Total Screened Population At Site:

78059SP Occurs in community site. Code for individual TB screening utilizing TB/LTBI Risk Assessment Tool; list the total number of persons screened using the TB/LTBI risk assessment tool at community site in community PTBMIS record.

TBS - TB Screening:

Occurs in the health department clinic setting. Code for individual TB screening utilizing TB/LTBI risk assessment tool.

78059HR - High-Risk Among Screened Population:

Code for individuals identified as high-risk among those screened using the TB/LTBI risk assessment tool.

86580H - TB Skin Test (High-Risk):

Office / off-site - individual placement of TST using single TST procedure on high-risk patients (includes reading).

86580L - TB Skin Test (Low-Risk):

Office / off-site - individual placement of TST using single TST procedure on low-risk patients (includes reading).

86580T - TB Skin Test - Two Step

Office / off-site - Individual placement of TST using two-step TST procedure. (Using baseline TST for persons who will have serial skin testing, such as health care providers, correctional facility employees and inmates) (includes reading).

99347H - Directly Observed Therapy *ONLY* -- Office / Off-Site

Performed by Public Health Nurse or Trained health department personnel. Limited contact with client to give DOT without other evaluation or management. May be used at health department as well as off site (including at community site or client's home).

99350H - Contact Investigation, Follow-Up Visit For Patients Receiving Treatment For TB/LTBI - Home / Off-Site

Performed by Public Health Nurse or Trained TB Personnel. Contact investigation initiated, initial interview and lab work collected and TB skin test may be administered. May use for monthly follow-up visit, which includes interval history, drug monitoring, biochemical monitoring, and screening co-existing disease. Appropriate referrals are made, test results may be reviewed, counseling/education and additional information gathered. DOT may occur at this visit. Arranging for or providing transportation to clinic for further evaluation.

99348A - Attempted Home/Off-Site Visit (RVUs Will Be Used):

Performed by Public Health Nurse or Trained TB Personnel. This code used to document an attempted visit for contact investigation, DOT, follow-up lab work where patient was not contacted.

TBC Definitions - Continued on Next Page

TBC Definitions - Continued

3560 - Has medical record, 30 minute increments - Field Service:

Performed by the Public Health Nurse or Public Health Representative. Contact investigation initiated, intelligence gathering field visit.

Office Visit - 99201-99205, New Patient, or 99211-99215, Established Patient, Office visit:

See CPT book for appropriate Evaluation and Management Code definitions if billing private insurance. Remember key components of history, examination and medical decision making must be met and documented accordingly. May include DOT.

3734 Recheck Office/Home/Off-Site

Performed by Public Health Nurse or Public Health Representative for follow-up visit. **Example:** Follow-up blood work or sputum collection to see if therapy effective.

70.104 - TB Testing of High Risk Groups

Last Change Date: 02/20/2002

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
<u>Community Service Encounter</u>		TB	6	Unspecified Admin Purpose	V689	# 30 Min Incs
Community Site Educational Counseling Visit	78059					# In Population
Total Population At Site	78059TP					# Screened
Total Screened Population At Site	78059SP					# Identified As High Risk
High-Risk Among Screened Population	78059HR					
<u>Individual Encounter</u>				TB Skin Test	V741	1
*TB Skin Test (High-Risk)	86580H					
*TB Skin Test (Low-Risk)	86580L					
COMMENTS: *These procedures should be recorded on individual encounters and linked in the note field to the screening site.						
TennCare Advocacy	99401T	TO	6	Same As Primary Diagnosis OR		1
	99402T			Unspecified Administrative Purpose	V689	
COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.						

70.108 - TB Screening For Individuals Health Department Clinic Setting

Last Change Date: 02/20/2002

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
TB Screening	TBS	TB	6	Unspecified Admin Purpose	V689	1
TB Skin Test (High-Risk Patients)	86580H			TB Skin Test	V741	
TB Skin Test (Low-Risk Patients)	86580L	*TB **MH, WH, or CH				
<p>COMMENTS: Use of TB/LTBI Risk Assessment Tool to determine whether a patient is at high or low risk of TB infection. High-risk clients will be counseled and offered a TB skin test. Low-risk clients will only be given further counseling or testing if they request it.</p> <p>*For a low-risk patient employed by a community site where employees were tested, code the skin test to TB program. **For all other low-risk patients, code the skin test, if given, to the appropriate program code MH, WH, or CH.</p> <p>This process can stand-alone or be done in addition to any other service for which the patient presents.</p>						
TennCare Advocacy	99401T	TO	6	Same As Primary Diagnosis OR		1
	99402T			Unspecified Administrative Purpose	V689	
<p>COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.</p>						

70.110 - TBC - TBC Treatment

Last Change Date: 02/20/2002

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
New Patient	99201 - 99205	TB	As Approp Pvt Pay - 6 OR Pvt Ins - (5XXX) OR TNCare - (AXXX)	TB Active - Pulmonary* OR	01000 - 01896	1
Established Patient	99211 - 99215			TB Skin Test Positive OR	7955	
Labs Completed				Positive skin test, <u>NOT</u> a case, taking INH OR	7955	
Venipuncture (If Done)	36415			TB Contact with negative Skin test taking INH	V011	
Lab Handling (If Outside Lab)	99000					
X-Ray - See x-ray Sect of Codes List						
DOT Only	99347H					
***Home Visit / Off-site	99350H					
Attempted Home Visit	99348A					
Drugs - Use Pharmacy Module						
COMMENTS: Prior authorization needed if not TennCare PCP. Any visit may include DOT. If only DOT is done off-site, use code 99347H						
TennCare Advocacy	99401T	TO	6	Same as primary diagnosis OR		1
	99402T			Unspecified Administrative Purpose	V689	
COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.						

*If not pulmonary check ICD-9 codes.

***For home visit change visit setting on encounter to "02 for "home".

70.120 - TBC - TB Contact for Skin Testing

Last Change Date: 02/20/2002

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
Other Visit - New or established patient	99201 - 99215	TB	Pvt Pay - 6 OR Pvt Ins - (5XXX) OR TNCare - (AXXX)	TB Contact	V011	1
TB Skin Test (PPD)	86580					
TB Test - 2nd Step	86580T					
Counseling	99401 - 99404					
Anergy Panel						
Mumps	86586					
Candida	86485					
<p>Comments: Results of TB Skin Test should be posted to the Lab System using the DLR command with test codes 86580. Do not code Counseling if an Other Visit has been coded. Counseling is considered part of the visit. The highest level provider should code the visit. Code Counseling if service provided is counseling only. Third party pay sources may be billed for services provided to patients under the TB Program WITH SIGNED CONSENT FROM THE PATIENT. Refer to program guidelines for specific information.</p>						
TennCare Advocacy	99401T	TO	6	Same as primary diagnosis OR		1
	99402T			Unspecified Administrative Purpose	V689	
<p>COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.</p>						

70.130 - TBC - Field Services

Last Change Date: 04/01/2001

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
Field Service, (Audit, Mass Screening, Contact, Mass Education)		TB	As Approp	As Approp	As Approp	# 30 Min Incs
"C" Registration (Community Service) (Has NO Medical Record)	78059					
"L" Registration (Long) (Has Medical Record)	3560					
<p>COMMENTS: For Field Visits to contacts, use the <u>source case</u> record to establish the encounter. If source case has no record, open one. When the contact presents to clinic, open record on the contact.</p> <p>Use code 3560 if your PTBMIS record has a "L", long registration, or 78059 if the record has a "C", community services, registration. For either type of registration, write the number of participants in the mile column on the encounter form. (The person keying the encounter will key the number of participants in the <u>MILE</u> column on the <u>EN screen.</u>) Only codes beginning with 78,000 can be posted to a PTBMIS record with a "C" registration. For mass TB skin testing (i.e., due to employees having contact to a TB case) register the business or industry using a "L", long registration, so that TB skin tests can be posted to the record. Show number of skin tests given/read in QTY column.</p> <p>Targeted TB Skin Testing for Foreign Born should be coded to Program Code 'TB' and Reimbursement (Payor) '6'.</p>						
TennCare Advocacy	99401T	TO	6	Same As Primary Diagnosis OR		1
	99402T			Unspecified Administrative Purpose	V689	
<p>COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.</p>						

SECTION 70c - COMMUNICABLE DISEASE - CHANGES

70.010c - Epidemiology Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE																								
02/20/2002	1	<p>In the COMMENTS Section REPLACE:</p> <table style="width: 100%; border: none;"> <thead> <tr> <th style="width: 60%;"></th> <th style="text-align: center;"><u>Case</u></th> <th style="text-align: center;"><u>Contact</u></th> </tr> </thead> <tbody> <tr> <td>Hepatitis A</td> <td style="text-align: center;">0701</td> <td style="text-align: center;">V018</td> </tr> <tr> <td>Hepatitis B</td> <td style="text-align: center;">07030</td> <td style="text-align: center;">V018</td> </tr> <tr> <td>Meningitis</td> <td style="text-align: center;">3229 or 0360</td> <td style="text-align: center;">V019</td> </tr> </tbody> </table> <p>With:</p> <table style="width: 100%; border: none;"> <thead> <tr> <th style="width: 60%;"></th> <th style="text-align: center;"><u>Case</u></th> <th style="text-align: center;"><u>Contact</u></th> </tr> </thead> <tbody> <tr> <td>Hepatitis A</td> <td style="text-align: center;">0701</td> <td style="text-align: center;">V017</td> </tr> <tr> <td>Hepatitis B</td> <td style="text-align: center;">07030</td> <td style="text-align: center;">V017</td> </tr> <tr> <td>Meningitis</td> <td style="text-align: center;">3229 or 0360 or 3200</td> <td style="text-align: center;">V018</td> </tr> </tbody> </table>		<u>Case</u>	<u>Contact</u>	Hepatitis A	0701	V018	Hepatitis B	07030	V018	Meningitis	3229 or 0360	V019		<u>Case</u>	<u>Contact</u>	Hepatitis A	0701	V017	Hepatitis B	07030	V017	Meningitis	3229 or 0360 or 3200	V018
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Hepatitis A	0701	V017																								
Hepatitis B	07030	V017																								
Meningitis	3229 or 0360 or 3200	V018																								
02/20/2002	2	<p>Add the following after the section for a description of the Meningitis case codes:</p> <p>* Descriptions: 3229 - Unspecified</p> <p style="padding-left: 150px;">0360 -</p> <p style="padding-left: 150px;">Meningococcal</p> <p style="padding-left: 150px;">3200 - Haemophilus</p>																								
04/01/2001	-	No change																								

Section 70 Changes (Continued on Next Page)

Section 70 Changes (Continued)

70.020c - Epidemiology Field Services Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
04/01/2001	-	No change

70.030c - Aids Prevention - HIV Counseling and Testing Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
04/01/2001	-	No change

70.040c - Aids Prevention - Return Visit for Test Results Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
04/01/2001	-	No change

70.050c - Aids Prevention - Field Service Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
04/01/2001	-	No change

70.060c - Aids Ryan White - Dental Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
04/01/2001	-	No change

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Section 70 Changes (Continued)

70.070c - Aids Ryan White - Medical Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
04/01/2001	-	No change

70.080c - STD- STD Visit Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
04/01/2001	-	No change

70.090c - STD- Field Service Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
04/01/2001	-	No change

70.100c - STD- Screening Visit Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
04/01/2001	-	No change

Tuberculin Testing Of High Risk Groups Definitions Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
02/20/2002	-	Added

70.104c - TB Testing Of High Risk Groups Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
02/20/2002	-	New section added

Section 70 Changes (Continued on Next Page)

Section 70 Changes (Continued)

70.108c - TB Screening For Individuals Health Department Clinic Setting Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
02/20/2002	-	New section added

70.110c - TBC - TBC Treatment Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE				
04/01/2001	-	No change				
PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
New Patient	99201 - 99205	TB	As Approp	TB Active - Pulmonary* OR	01100 01000 - 01896	1
Established Patient	99211 - 99215		Pvt Pay - 6 OR	TB Skin Test Positive OR	7955	
Labs Completed			Pvt Ins - (5XXX)	Positive skin test, <u>NOT</u> a case, taking INH OR	7955	
Venipuncture (If Done)	36415		OR	TB Contact with negative Skin test taking INH	V011	
Lab Handling (If Outside Lab)	99000		TNCare - (AXXX)			
X-Ray - See x-ray Sect of Codes List						
DOT Only	99347H					
***Home Visit / Off-site	99350H					
Attempted Home Visit	99348A					
Drugs - Use Pharmacy Module						

Section 70 Changes (Continued on Next Page)

Section 70 Changes (Continued)

70.120c - TBC - TBC Contact for Skin Testing Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE				
02/20/2002	1	Delete the words: <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 60%;">PROCEDURE</th> <th style="width: 40%;">CODE</th> </tr> </thead> <tbody> <tr> <td>Other Visit - New or established patient, Time specific</td> <td>99201 - 99215</td> </tr> </tbody> </table>	PROCEDURE	CODE	Other Visit - New or established patient, Time specific	99201 - 99215
PROCEDURE	CODE					
Other Visit - New or established patient, Time specific	99201 - 99215					
02/20/2002	2	Add following to end of COMMENTS: Section: Refer to program guidelines for specific information.				
04/01/2001	-	No change				

70.130c - TBC Field Service Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
04/01/2001	-	No change

Section 085.010 Continued

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
EPSD&T Exam Refused	*EPREFUS	EP	AXXX	Unspecified Admin Purpose	V689	1
<p>Codes For Refusal Of EPSD&T Screens:</p> <p>RH Reappointed -- Clinic Staff does not have time to provide the screening on this day.</p> <p>RP Reappointed - Parent does not have time for screening on this day</p> <p>AS Appointment with another provider (e.g., the parent may have made an appointment with the PCP)</p> <p>RS Recent screening according to the periodicity schedule</p> <p>NS No Show (failed to keep EPSD&T appointment)</p> <p>OT Other (Record reason in the Medical Record)</p>						
<p>COMMENTS: Use code EPREFUS when an EPSD&T exam is denied or refused. The reason given for refusal should be coded in the Res/Ref (Results) field on the encounter form and keyed in the Disposition field on the PTBMIS encounter screen. Adding a refusal code will provide more complete reporting of EPSD&T results to the Bureau of TennCare.</p>						
TennCare Advocacy	99401T	TO	6	Same as primary diagnosis for the encounter OR		1
	99402T			Unspecified administrative purpose	V689	
<p>COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.</p>						

SECTION 085 - EPSD&T CHANGES

EPSD&T Definition Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
11/02/2001	-	Added section to manual

085.010 - EPSD&T Visit Changes [Back to Top](#) [Back to Visit](#)

DATE	CHANGE #	CHANGE
02/20/2002	1	Added NS - No Show as reason for not performing an EPSD&T screening
2/15/2002	1	Added EPREFUS code to EP procedures.
11/02/2001	-	Added section to manual