



**STATE OF TENNESSEE
BUREAU OF HEALTH SERVICES
DEPARTMENT OF HEALTH
CORDELL HULL BUILDING
425 5th AVENUE NORTH**

Date: Tuesday, February 27, 2007
To: PTBMIS Codes Manual Update Group
FROM: Theresa Lindsey, Assistant Commissioner
Bureau of Health Services
Subject: PTBMIS Codes Manual Update

The latest changes to the PTBMIS Codes Manual are included in this email. These changes have been approved by the Codes and RVU Validation Committee (CRVC) with my endorsement. Please update your manual with these changes.

The latest changes to the manual are shown as described below:

- This cover memo will attempt to explain the changes to each section in such detail as to allow the user to have an understanding of the change to that section. Please insert this cover memo in the front of your PTBMIS Codes Manual for future reference.
- Actual changes to the manual are shown with shaded text, that is, gray background and black letters. Each time a given page changes, the shaded text from previous changes will be replaced with normal text. The “Last Change Date” at the top of each page indicated the last time this page was revised.
- Within a given section, changed or added words will be denoted by shaded text.
- Deleted lines or row in a table will be replaced with the words ‘Service Deleted’ in shaded text. At the next change of this page, these lines or rows will be deleted from the section.
- These procedures will replace the need for a “Change Page” at the end of each section of the manual. As sections are changed, existing “Change Pages” for those sections will be removed from the manual.

Please refer to the instructions on the following pages for removing old pages and adding new pages to the PTBMIS Codes Manual.

1. Table of Contents		
	Remove pages 1-7	Add pages 1-7
2. Section 20 – Administrative Services		
	Remove page 10	Add page 10
SECTION	EXPLANATION	
20.080	Added additional info to the COMMENTS field.	
3. Section 70 – Communicable Disease		
	Remove pages 12, 13	Add pages 12, 13
SECTION	EXPLANATION	
70.080	Changed Diagnosis to include Non-Reportable STDs and added to COMMENTS.	
4. Section 100 – Family Planning		
	Remove page 14	Add page 14
SECTION	EXPLANATION	
100.100	Added IUDP and IUDM Procedure Codes. Added to COMMENTS.	
5. Section 150 – Nutrition – Non-WIC		
	Remove pages 2, 3, 4, 5, 6	Add pages 2, 3, 4, 5, 6
SECTION	EXPLANATION	
150.010	Changed title and added the word “Preventive” to procedure description. Changed Diagnosis to include “Not Otherwise Specified” and Code V6540.	
150..020	Changed title in include “Registered Dietition Only” and changed procedure descriptions and COMMENTS.	
150.030	Changed Diagnosis descriptions and COMMENTS.	
150.040	Added “0” to diagnosis code V654.	
150.050	Added new page for Patient Self Management Training.	
6. Section 220 – Immunizations		
	Remove pages 7, 8	Add pages 7, 8
SECTION	EXPLANATION	
220.060	Added HPV and HPA vaccines. Added Shingles vaccine to history shots. Added COMMENT regarding Rotavirus Oral or Flu Mist coding.	

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20.080 - Voluntary Acknowledgement of Paternity

Last Change Date: 02/27/2007

(Use Administrative Encounter Form (PH-3309))

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
"L" Registration, (Long) (Has Medical Record)	VAOP	AM	6	Unspecified Administrative Purpose	V689	1
COMMENTS: Encounters should be established using the child's record. If the child does not already have a PTBMIS record, create one using a Long "L" registration. Key the mother's name in the Note field on the EN screen.						

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

Last Change Date: 02/27/2007

PROCEDURE/.	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
<u>Other Visit, Time/.. Specific</u>		ST	As Approp	As Appropriate For Reportable and Non-Reportable STDs		
New Patient/	99201 - 99205		Pvt Pay: 6	AIDS	042	1
Established Patient	99211 - 99215			Chlamydia (unspec.urinary site)	09955	
Lab(s) completed				Gonorrhea (acute genitourinary)**	0980	
Venipuncture (if done)	36415		Pvt Ins: (5XXX)	HIV (asymptomatic infection)	V08	
Lab handling (if outside lab)	99000			TNCare:	STD Contact / Exposure	
Drugs dispensed *- use Pharmacy Module			- (AXXX)	Syphilis, (Early Latent)	0929	
Related Functions				Syphilis, Latent,(Unknown Duration)	0971	
Counseling (ONLY IF VISIT NOT CODED -- see comments for exceptions)	99401 - 99404			Syphilis Primary, (genital)**	0910	
Recheck Visit	3734			6	Syphilis, Secondary	

* If an injection is given, use injection code 90772 which is not a part of the visit is given, also use injection code 90772.

**If non-genital, refer to ICD-9-CM manual for appropriate ICD-9 code.

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					
<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>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 provider who does the HIV testing and counseling 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.</p> <p>Third party pay sources may be billed for clinical services provided to patients under the ST Program WITH SIGNED CONSENT FROM THE PATIENT.</p> <p>For Home/Off-Site 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> <p style="background-color: #e0e0e0;">Code treatment for both reportable and non-reportable sexually transmitted diseases using program code ST.</p>						
TennCare Advocacy	99401T	TO	6	Primary Diagnosis OR	V689	1
	99402T			Unspecified Administrative Purpose		
<p>COMMENTS: Advocacy may be coded as appropriate. Refer to TennCare Section to identify activities and services related to TennCare.</p>						

100.100 - IUD Removal / Insertion

Last Change Date: 02/27/2007

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
Preventive Visit, Established Patient, Age Specific	99393 - 99396	FP	As Approp	IUD Check Or Removal	V2542	1
Removal Of IUD	58301			IUD Insertion	V251	
Insert IUD	58300					
IUD	J7300					
IUD Paragard OR	IUDP					
IUD Mirena	IUDM					
<u>FP Supplemental</u>						
TennCare Advocacy	99401T	TO	6	Primary Diagnosis From Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	
COMMENTS:						
All Rural Regions And Metros Using The Pharmacy Module Also Need To Use This Module To Record The Dispensing Of The IUD(NDC Code). This Will Allow Tracking For Inventory Purposes Only, But Will Not Produce A Charge.						
All Advocacy May Be Coded As Appropriate. Refer To TennCare Section To Identify Activities And Services Related To TennCare.						

150.010 - ~~Nutritional Counseling, High Risk~~ Preventive Counseling (Registered Dietitian or Nurse)

Last Change Date: 02/27/2007

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
<u>Individual Counseling</u>		NU OR As Approp.	Pvt Pay - 6 OR Pvt Ins - (5XXX) OR TNCare - (AXXX)	Medical Diagnosis	V653 V6540	1
15 Minute Preventive Medical nutrition Counseling	99401			OR Dietary Surveillance And Counseling , Not Otherwise Specified		
30 Minute Preventive Medical nutrition Counseling	99402					
45 Minute Preventive Medical nutrition Counseling	99403					
60 Minute Preventive Medical nutrition Counseling	99404					
<u>Group Counseling</u>						
*30 Minutes	99411					
*60 Minutes	99412					
COMMENTS:						
Preventive medical nutrition counseling must be coded by a Registered Dietitian or Nurse only . The patient MUST have a medical diagnosis . Do not code a Preventive or Therapeutic Visit in addition to counseling.						
For group counseling, use group counseling codes (99411 and 99412) on an individual encounter for each participant.						
TennCare Advocacy	99401T	TO	6	May Use Primary Diagnosis For Encounter OR	V689	1
	99402T			Unspecified Administrative Purpose		
COMMENTS:						
Advocacy may be coded as appropriate. See TennCare Section to identify activities and services related to TennCare.						

***CPT 20002007 defines 99411 as Preventive Medicine counseling provided to individuals in a group setting (separate procedure); approximately 30 minutes and 99412 is approximately 60 minutes.**

150.020 - Medical Nutrition Therapy/Registered Dietitian Only ~~Nutrition Education,~~ Nutrition Educators

Last Change Date: 02/27/2007

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
Education Medical Nutrition Therapy, Initial Assessment & Intervention, Individual, Each 15 Min.	97802 97803	NU OR As Approp	Pvt Pay - 6 OR Pvt Ins - (5XXX) OR TNCare - (AXXX)	Medical Diagnosis (As Approp.)	V654	+As Approp.
Group Education Re-Assessment & Intervention, Individual, Each 15 Min.	97803			Counseling, Not Otherwise Specified	V653	
*30 Minutes Group (2 Or More Individuals) Medical Nutrition Therapy, Each 30 Min.	97804			Dietary Surveillance And Counseling		
COMMENTS: *CPT 2005 2007 defines 97804 as Medical Nutrition therapy education/instruction provided to individuals in a group setting (separate procedure); approximately each 30 minutes. Can only be performed by a Registered Dietitian.						
TennCare Advocacy	99401T	TO	6	May Use Primary Diagnosis For Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	
COMMENTS: Advocacy may be coded as appropriate. See TennCare Section to identify activities and services related to TennCare.						

150.030 - Nutrition Education ~~Field Services~~ - ~~Community Nutrition Services~~

Last Change Date: 02/27/2007

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
Field Service (Audit / Contact / Mass Screening / Mass Education		NU	6	Dietary Surveillance general Counseling OR	V653	# 30 Min Incs
"C" Registration (Community Service) (Has NO Medical Record)	78059			Counseling, Not Otherwise Specified health Related Issues OR	V6540	
"L" Registration (Long) (Has Medical Record)	3560			As Approp.	As Approp	
<p>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 groups, write the number of participants in the mile column on the encounter form. The person keying the encounter will key the number or participants in the <u>MILE column on the EN screen.</u> Could be done by Nutrition Educator or Registered Dietitian or Nurse.</p>						
TennCare Advocacy	99401T	TO	6	May Use Primary Diagnosis For Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	
<p>COMMENTS: Advocacy may be coded as appropriate. See TennCare Section to identify activities and services related to TennCare.</p>						

150.040 - Education / Contract Services (To Charge Fee for Service @ \$1.00 Per Unit)

Last Change Date: 02/27/2007

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
Education / Contract Services (\$1.00 Per Unit)		NU	6	General Nutrition OR	V653	# Units
"C" Registration (Community Service) (Has NO Medical Record)	78085			Health Related Issues OR	V6540	
"L" Registration (Long) (Has Medical Record)	10299			As Approp.	As Approp.	
COMMENTS: Code Education/Contract Services \$1.00 per unit <u>in addition</u> to procedure code for the group session when a fee for service needs to be charged. Show number of units in QTY column to equal contracted fee (i.e., \$100.00 contracted fee, show 100 in QTY column).						
TennCare Advocacy	99401T	TO	6	May Use Primary Diagnosis For Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	
COMMENTS: Advocacy may be coded as appropriate. See TennCare Section to identify activities and services related to TennCare.						

150.050 - Patient Self Management Training

Last Change Date: 02/27/2007

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
<u>Education And Training For Self Management</u>		NU OR As Approp.	Pvt Pay - 6 OR Pvt Ins - (5XXX) OR TNCare - (AXXX)	Medical Diagnosis		# Of 30 Min. Incs.
Individual (30 Minutes)	98960					
2-4 Patients (30 Minutes)	98961					
5-8 Patients (30 Minutes)	98962					
COMMENTS: Patient must have a medical diagnosis. These codes are used to report educational and training services <u>prescribed by a physician</u> and provided by a qualified non-physician healthcare professional using an established curriculum and guidelines. (for example: NOT health educators or nutrition educators.)						
TennCare Advocacy	99401T	TO	6	May Use Primary Diagnosis For Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	
COMMENTS: Advocacy may be coded as appropriate. See TennCare Section to identify activities and services related to TennCare.						

220.060 Vaccine Codes - On-Site Clinics

Last Change Date: 02/27/2007

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
"L" Registration (Long) (Has Medical Record)		As Approp	As Approp	As Approp	As Approp	1
VACCINE	CODE	VACCINE	CODE	VACCINE	CODE	
Chicken Pox	CPX	Hepatitis B Immune Globulin	HIG*	Rabies, Pre-Exposure (Group)	PR2	
Chicken Pox - Adult	VVC	Hep A & Hep B, Adult, 3 Dose	HAB	Rabies, Pre-Exposure (Single)	PR5	
DTP - HIB Comb. Vaccine	DHB	HIB & Hepatitis B Comb.	HHB	Rotavirus (Rotateq)	RTA**	
DT - Pediatric	DT	Human Papilloma Virus - Adult	HPA	Strep Pneumonia (PNE Conjugate)	STP	
Diphtheria, Tetanus, Acellular Pertussis	DTA	Human Papilloma Virus	HPV	TDaP (Tetanus, Diphtheria, Acellular Pertussis (Age 7 & Over)	TDP	
		Influenza (Adults)	FLU			
DTaP-Hep.B-IPV Combination Vaccine	DHI	Influenza - Babies (6 Thru 35 Months Of Age)	FLB			
Diphtheria, Tetanus, Acellular Pertussis, PLUS Hemophilus / INFB	DTH	Influenza-Children (3 Thru 18 Years Of Age)	FLC			
Hemophilus / INFB 3 Dose	HI3	Influenza, Intranasal (5 Thru 49) Donated No Charge	FLM			
Hemophilus / INFB 4 Dose	HI4	Influenza, Intranasal (5 Thru 49) With Charge	FLN			
Hepatitis A - Adult (19 & Over)	HAA	Immune Serum Globulin	ISG*			
Hep A - Adult (19 & Over) No Slide	HAX	Lyme Disease	LYM			
Hep A - Adult (19 & Over) No Charge(Outbreak)	HAZ	Meningococcal	MEN			
Hepatitis A - Pediatric/Adolescent (1 Thru 18 - 2 Dose)	HAS	Meningitis Conjugate - Adult	MCV			
Hepatitis B - 19 Yrs & Up	HBO	Meningitis Conjugate	MC4			
Hepatitis B - Newborn Thru 18 Yrs	HBV	Measles, Mumps & Rubella	MMR			
Hepatitis B (Contract)	HBC	Measles, Mumps & Rubella For Adults	MMA			
Hep B - (Dialysis/Imm Suppressed) 3 Dose	HD3	Pneumococcal	PNE			
Hep B - (Dialysis/Imm Suppressed) 4 Dose	HD4	Rabies, Post Exposure	POR			
<p>*Use Administration Code 90772 For These Shots Instead Of 90471 Or 90472.</p> <p>**Use Administration Code 90473 For Rotavirus Oral Vaccine Or Flu Mist If It Is The Only Vaccine Given. However, If Either Is Given In Conjunction With Additional Vaccines Use Code 90473 For The Rotavirus Or Flu Mist Vaccine And 90472 For Any Additional Vaccines Given.</p>						

220.060 VACCINE CODES - ON-SITE CLINICS (Continued on Next Page)

220.060 VACCINE CODES - ON-SITE CLINICS (Continued)

Last Change Date: 02/27/2007

HISTORY ONLY VACCINE	CODE	HISTORY ONLY VACCINE	CODE	HISTORY ONLY VACCINE	CODE
Chicken Pox Disease	CPD	Measles & Rubella	MR	Rotavirus (Rotashield)	RTV
DTaP, HIV, IPV Vaccine Combination	DHV	Measles, Mumps, Rubella, Varicella	MMV	Rubella	RUB
Hep B (Dialysis/Immune Suppressed)	HBD	Mumps	MUM	Zoster (Shingles)	ZOS
Hep B, Adolescent, 2 Dost	HB2	Polio, Oral	OPV		
Measles	MEA	Respiratory Syncytial Virus	RSV		

PROCEDURE	CODE	PROGRAM	RE	DIAGNOSIS	CODE	QTY
TennCare Advocacy	99401T	TO	6	May Use Primary Diagnosis For Encounter OR		1
	99402T			Unspecified Administrative Purpose	V689	

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