MEMORANDUM 2017-04

To: Directors of Nursing, Nursing Supervisors, Public Health Nurses and DPH Nurse Consultants

From: Phyllis M. Rocco, MPH, BSN, RN
Chief Public Health Nurse

Subject: Billing STD injectable medications and non-vaccine injection codes

Date: October 11, 2017

Rocephin (J0696) or Bicillin (J0561 x 24 units) or any other prescribed injectable medication provided by a RN for a STD treatment only visit may be billed as follows:

1) Bill the medication and the therapeutic injection fee (CPT code 96372). DO NOT bill an E&M code at all unless there is something more significant going on with the patient and it would code higher than a 99211. DO NOT bill a 99211.

Example of exception:
Rocephin Injections provided in conjunction with another, separately identifiable service (e.g., patient presents for annual FP exam but was tested in STD clinic the previous week and needs treatment with Rocephin).

In this example, you will bill the E&M code with a 25 modifier, the therapeutic injection fee and the HCPCS code for the drug.

2) When billing Medicaid you must bill the medication at the acquisition cost and place a UD modifier after the drug. In this case it is permissible to have 2 different charges for the drug; one for Medicaid and one for private insurance.

As with all fees, you must have them approved by the BOH and County Commissioners unless they have waived this requirement for your agency.

If you implement this practice you will at least get to recoup some of your cost in providing the STD treatment only visit.

ERRNs will continue to bill using the T1002 code. If the 15-minute time unit of billing is not met by the ERRN, then the ERRN may bill the service as described in # 1 above.

Remember, the client cannot be charged for the treatment of gonorrhea or syphilis.