

Provider Memorandum

Reminder: Dialysis Billing

Molina Healthcare of Illinois (Molina) requires providers to meet claims submission standards to facilitate payment of dialysis claims. To help ensure correct claims submission, dialysis providers should follow the guidelines for outpatient and end-stage renal disease patients below.

Dialysis Claims Guidelines

- Dialysis claims may be submitted as a series claim with up to 31 Dates of Service (DOS) on a single claim.
- The rate is all inclusive, except for services provided by the physician.
 - This includes dialysis, equipment, supplies and routine monitoring tests.
 - Non-routine lab tests must be run by an independent lab; they cannot be billed by dialysis provider.
- The drugs listed below can be billed as an additional charge.
 - They must be billed with revenue code 0636, HCPC code, National Drug Code (NDC), UD modifier indicating 340B-reimbursed drug, and the number of units given.
 - A \$12 dispensing fee will be applied in addition to acquisition cost of the drug.
 - When billing Epogen, which can be billed with revenue code 0634 or 0635, value code 68 must be included to qualify for the \$12 dispensing fee.

HCPCS Code	Drug
J0636	Calcitriol (Calcijex)
J0690	Cefazolin Sodium
J0694	Cefoxitin Sodium
J0882	Aranesp
J1270	Doxercalciferol (Hectoral)
J1580	Gentamicin Sulfate
J1750	Iron Dextran
J1756	Venofer
J2501	Paricalcitol (Zemlar)
J2916	Sodium Ferric Gluconate Complex in Sucrose (Ferlecit)
J2997	Cathflo Activase
J3260	Tobramycin Sulfate
J3370	Vancomycin
J3430	Vitamin K/Aquamephyton
Q0139	Ferumoxylol
Q4081	Epoetin Alfa (Epogen)

- Dialysis centers are responsible for teaching, professional assistance and providing/maintaining equipment and supplies at no additional charge.

Additional dialysis claims requirements include:

- Fields 18-28 Condition Code is required to identify place of service (71-72 and 74-76 are recognized).
- Fields 39-41 Value Code 80 is always required to indicate the number of covered days. Value Code 68 is required to indicate number of units for Epogen (Q4081).
- Field 43 Revenue Description:
 - Report the N4 qualifier in the first two positions, left- justified
 - Followed immediately by the 11-character National Drug Code (NDC), in the 5-4-2 format (no hyphens)
 - Immediately following the last digit of the NDC (no delimiter) the Unit of Measurement Qualifier. The Unit of Measurement Qualifier codes are as follows:
 - F2 – International Unit • GR – Gram • ML – Milliliter • UN – Unit
 - Immediately following the Unit of Measurement Qualifier, the unit quantity with a floating decimal for fractional units limited to three digits (to the right of the decimal)
 - Any spaces unused for the quantity are left blank
- Field 46 Service Units should not be combined for multiple dates of service. Each service date should be a separate line item.

Questions? We have answers!

Providers who have questions, concerns or would like additional training, including how to use the Molina Provider Portal, may contact their provider network managers or email the Network Management Department, MHILProviderNetworkManagement@MolinaHealthcare.com.

For help identifying your provider network manager, visit Molina's Service Area page at www.MolinaHealthcare.com.