

Coding Policy Policy and Procedure		
SUBJECT: Coding Policy 22.0 HCPCS S-Codes and H-Codes	DEPARTMENT: Health Care Services	
ORIGINAL EFFECTIVE DATE: 01/01	DATE(S) REVIEWED/REVISED: 09/18, 01/19, 01/20, 01/21, 06/21, 01/22, 01/23	
APPROVED BY: Coding Policy Review Committee	NUMBER: MC 22.0	PAGE: 1 of 1

SCOPE:

Providence Health Plan, Providence Health Assurance, Providence Plan Partners, and Ayin Health Solutions as applicable (referred to individually as “Company” and collectively as “Companies”).

APPLIES TO:

All Lines of Business

POLICY:

Company does not recognize HCPCS codes beginning with the letter “S” or “H.” If there is no existing CPT code or HCPCS code (other than the S-code or H-code) for the supply or service, the provider may report an unlisted code. Contract exceptions may apply.

PROCEDURE:

HCPCS codes beginning with the letter “S” or the letter “H” are denied as provider responsibility. The message on the Explanation of Payment (EOP) states: “Rebill with alternate code.” If there is no existing CPT code or HCPCS code other than the S-code or H-code, a corrected claim may be submitted with an unlisted code.

REFERENCE:

CMS / Medicare Rules and Regulations
Providence Health Plan Clinical Coding Edits