

## ARIZONA SPECIFIC CODES GUIDELINES

Information regarding publications incorporated by reference is found in the Introduction Section of the Fee Schedule.

The following Commission guidelines are in addition to the CPT® guidelines and represent additional guidance from the Commission relative to services uniquely utilized in Workers' Compensation in Arizona. To the extent that a conflict may exist between an incorporated portion of the CPT® and a code, guideline, identifier, or modifier unique to Arizona, then the Arizona code, guideline, identifier, or modifier shall control. Codes that are unique to Arizona are preceded by an AZ identifier and numbered in the following format: AZxxx.

- A. PEER TO PEER CONSULTATION: Healthcare providers may bill for Peer-to-Peer consultations by using Arizona state specific codes AZ001 and AZ002. Determination of the proper code is based on time spent in discussion and review.

AZ001 Peer-to-Peer interprofessional telephone consultations between treating physician or healthcare provider and Peer Reviewer; 5-10 minutes of medical consultative discussion and review.

AZ002 Peer-to-Peer interprofessional telephone consultations between treating physician or healthcare provider and Peer Reviewer; 11-30 minutes of medical consultative discussion and review.

- B. NURSE CASE MANAGER MEETING: Healthcare providers may bill for meeting with a nurse case manager (NCM) by using Arizona state specific codes AZ003 and AZ004. Determination of the proper code is based on the patient's presence during the meeting.

AZ003 Meeting with NCM with patient.

AZ003 may be billed if time is spent discussing a patient's treatment plan or other related information with the NCM when the patient is present. This should not be billed if there is no interaction with the NCM who is present during the time that a service, which is billed using a separate CPT® code, is performed. The documentation must include:

- The name of the NCM.
- The name of the organization the NCM is representing.
- The purpose of the interaction.

AZ004 Meeting with NCM without patient.

AZ004 may be billed if time is spent discussing a patient's treatment plan or other related information with the NCM when the patient is not present. The documentation must include:

- The name of the NCM.
- The name of the organization the NCM is representing.
- The purpose of the interaction.

It is not appropriate for the payer on a per billing basis to require a healthcare provider to provide unnecessarily detailed documentation to justify payment. A healthcare provider is required to comply with A.R.S. § 23-1062.01 when submitting a bill.

C. SPECIAL REPORTS: Healthcare providers may bill for completion of workers' compensation insurance forms by using Arizona state specific code AZ005 when the request is submitted by the Commission, the payer or third-party administrator of the payer, or the Special Fund of the Commission, and limited to one billing of code AZ005 per thirty (30) day period. The applicable form must be attached to the billing.

AZ005 Completion of workers' compensation insurance forms (i.e., return-to-work status, work restrictions, supportive care restrictions) which are requested or required either by the Commission, the applicable payer (insurance, self-insured employer, or the Special Fund of the Commission), or a third-party administrator of the applicable payer, not to exceed more than one billing in a thirty (30) day period. The applicable form must be attached to the billing.

D. TRAVEL REIMBURSEMENT: Healthcare providers may bill for collection and handling performed outside of a physician's office or laboratory.

AZ026 Mileage charge for collection and handling service performed outside of the physician's office or laboratory, within a radius of seven (7) miles.

AZ027 Mileage charge for collection and handling service performed outside of the physician's office or laboratory, per mile over seven (7) miles.

AZ028 When more than one patient is seen, apportion the mileage charge among the total number of patients.

AZ030 Mileage round trip: each mile in excess of eight (8) miles of travel by physician.

AZ031 Within large metropolitan areas, a travel time basis may be appropriate. Code AZ031 would apply to Arizona's major metropolitan areas, to include Phoenix, Tucson, Flagstaff, Kingman, and Yuma. This code would only be used when travel times are 45 minutes or more.

E. EXPERT TESTIMONY: Medical testimony by personal appearance or deposition of a physician is reported using Arizona specific code AZ099. Reimbursement for time spent providing testimony at a hearing is described in Section I of the Introduction Section of the Fee Schedule.