



BlueCross BlueShield of Vermont

Independent Licensees of the Blue Cross and Blue Shield Association.

October 15, 2009

Dear Provider:

Blue Cross and Blue Shield of Vermont (BCBSVT) continues to routinely analyze our community fee schedule for Health Care Procedure Coding System (HCPCS) for the categories of drugs administered other than oral method, chemotherapy drugs, select pathology, laboratory and temporary codes.

As a result of this review, effective November 1, 2009 we will be adjusting our community fee schedule for the following HCPCS categories/codes:

Drugs administered other than oral method: All codes within category "J"

Chemotherapy drugs: All codes within category "J9"

Pathology and Laboratory: P9041, P9043, P9045 – P9048

Temporary Codes: Q0163 – Q0181, Q0515, Q2009, Q2017, Q3025

Following the November 1, 2009 implementation date, we will be happy to provide you with a fee schedule of the top 25 codes for your practice. To request, please submit a written request, which should include: provider/practice name, NPI billing number, contact name, phone number, fax number (if available), the fee schedule you are requesting (BCBSVT/TVHP community and/or Catamount Blue) and HCPCS code(s). The following is a sample of what your request should include:

The Family Practice	
Vendor NPI: 123456789	
Contact: Jean Smith, Office Manager	
Phone Number: (999) 999-9999	
Fax Number: (999) 999-8888	
<i>Requesting Community and Catamount Blue fee schedules</i>	
HCPCS Code	Modifier
J9000	
J0120	
P9041	
Q0164	

P.O. Box 186 · Montpelier, VT 05601-0186
Corporate Office 802-223-6131 · FAX Number 802-229-0511

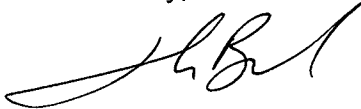
P.O. Box 186 Montpelier, VT 05601-0186 (802) 223-6131 www.bcbsvt.com

All requests should be sent to the **Attention of Provider Relations**; requests can be mailed to: BCBSVT, PO Box 186, Montpelier, VT 05601, e-mailed to providerrelations@bcbsvt.com or faxed to (802) 371-3489.

Future notification regarding changes in these codes will be posted to the bcbsvt.com provider portal under the "News from BCBSVT" area. Direct letters will no longer be sent.

If you have any questions please feel free to contact your Provider Relations Consultant at (888) 449-0443.

Sincerely,

A handwritten signature in black ink, appearing to read "John Bond". The signature is fluid and cursive, with the first name "John" being more prominent than the last name "Bond".

John Bond
Director, Provider Relations