

Reimbursement Rate Updates for Procedure Code A9513 Effective June 1, 2019

Information posted August 22, 2019

Note: *Texas Medicaid managed care organizations (MCOs) must provide all medically necessary, Medicaid-covered services to eligible clients. Administrative procedures such as prior authorization, pre-certification, referrals, and claims/encounter data filing may differ from traditional Medicaid (fee-for-service) and from MCO to MCO. Providers should contact the client's specific MCO for details.*

Effective August 15, 2019, for dates of service on or after June 1, 2019, the reimbursement rate for procedure code A9513 Lutetium Lu 177 dotatate (Lutathera®) will be \$293.40.

Affected claims with dates of service from June 1, 2019, through August 15, 2019, if any are identified, will be reprocessed. Providers are not required to appeal the claims unless they are denied for additional reasons after the claims reprocessing is complete.

For more information, call the TMHP Contact Center at 1-800-925-9126.