



State of New Mexico  
Medical Assistance Program Manual  
**Supplement**



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**TO:** PHYSICIANS, CERTIFIED NURSE PRACTITIONERS, PHYSICIANS ASSISTANTS, HOME AND COMMUNITY-BASED SERVICES WAIVER PROVIDERS

**FROM:** CAROLYN INGRAM, DIRECTOR, AND MEDICAL ASSISTANCE DIVISION

**THROUGH:** SARAH BARTH, BUREAU CHIEF, LONG-TERM SERVICES AND SUPPORT BUREAU

**BY:** TALLIE TOLEN, HCBS STAFF MANAGER, LONG-TERM SERVICES AND SUPPORT BUREAU

**SUBJECT: BILLING FOR ANNUAL PHYSICAL HEALTH EXAMINATIONS FOR ADULTS APPLYING FOR OR RECEIVING HOME AND COMMUNITY-BASED SERVICES THROUGH ONE OF THE FOLLOWING WAIVER PROGRAMS: ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS); DEVELOPMENTAL DISABILITIES (DD); MEDICALLY FRAGILE (MF); MI VIA**

This supplement is to inform Medicaid providers of the new procedure code for new or annual physical health examinations for adults 21 years of age and older that are applying for or receiving Home and Community-Based services through one of the following waiver programs: Acquired Immunodeficiency Syndrome; Developmental Disabilities; Medically Fragile; or Mi Via. Effective immediately, Medicaid providers will be required to bill with procedure code 99455.

The following are instructions for submitting claims:

- If the individual is enrolled in a Medicaid Managed Care (MCO) Organization or in Fee-for-Service (FFS) Medicaid, the claim must be submitted to the Medicaid fiscal Agent, Affiliated Computer Services (ACS).
- The claim must be submitted using procedure code 99455 and diagnosis code V70.5.

- If the client is not eligible for full Medicaid benefits at the time of the physical exam, the provider performing the physical health exam must have the client or client's representative obtain a Medical Services Authorization ISD-309 form from their local Income Support Division (ISD) office. The ISD-309 form must be attached to the claim and sent to ACS.

Questions regarding this supplement should be directed to Tallie Tolen, HCBS Waivers Staff Manager, Long-Term Services and Support Bureau (505) 827-3176.