



*A message to  
Business Office Managers*

**Memo 12-08**

**TO:** AmeriHealth participating outpatient diabetic education programs in Pennsylvania and Delaware

**FROM:** Linda Paterson  
Senior Director, Network Field Services

**DATE:** October 20, 2008

**SUBJECT:** **Billing requirements for outpatient diabetic education**

As you are aware, diabetic education is a benefit covered by AmeriHealth in the treatment of diabetes through education and counseling. We are sending this bulletin to clarify billing requirements related to outpatient diabetic education.

- **AmeriHealth in Pennsylvania.** A primary care physician (PCP) referral is required for HMO members. Members with Point-of-Service (POS) coverage may exercise their self-referral option, in which case no PCP referral is required. However, POS members are responsible for obtaining patient care management precertification.
- **AmeriHealth in Delaware.** A primary care physician (PCP) referral is required for HMO members. Members with Point-of-Service (POS) coverage may exercise their self-referral option, in which case no PCP referral is required. However, POS members are responsible for obtaining patient care management precertification. There are no precertification requirements for PPO or CMM members, although a physician's order/prescription is required.

As a reminder, when billing for diabetic education, the revenue code 942, the HCPCS code, the number of units, and a diabetic diagnosis must be included on the UB-04. For correct billing and reimbursement purposes, one unit is equal to one session. A unit/session is defined as one of the following:

- an initial baseline assessment;
- an individual session, which is to be a minimum of one hour in duration;
- a group session, which is to be a minimum of two hours in duration.

If you have any questions regarding this bulletin, please contact your Network Coordinator.