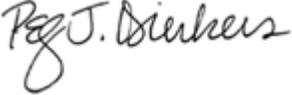


	<b>MEDICAL ASSISTANCE BULLETIN</b> <b>COMMONWEALTH OF PENNSYLVANIA * DEPARTMENT OF PUBLIC WELFARE</b>	
	<b>SUBJECT</b> Changes in Terminology in Medical Assistance Program Fee Schedule for Type of Service/Procedure Code AG/W1855	<b>BY</b>  <b>Peg J. Dierkers, Ph.D.</b> Deputy Secretary for Medical Assistance Programs
<b>NUMBER:</b>	28-00-01	
<b>ISSUE DATE:</b>	March 13, 2000	
<b>EFFECTIVE DATE:</b>	September 1, 1999	

**PURPOSE:**

To notify providers of a pen and ink change to the Medical Assistance (MA) Program Fee Schedule.

**SCOPE:**

This bulletin applies to all Outpatient Drug and Alcohol Clinics enrolled in the MA Program.

**BACKGROUND:**

The MA Program issued a new provider specific fee schedule to all enrolled Outpatient Drug and Alcohol Clinics in September 1999. The terminology printed in the fee schedule for type of service/procedure code AG/W1855 is incorrect.

**PROCEDURE:**

Providers should make a pen and ink change in the MA Program Fee Schedule. The terminology for Procedure Code W1855 should read as follows: "Methadone Maintenance Comprehensive services-includes transportation/1 per week."

Any provider who received incorrect payment due to incorrect terminology in the Fee Schedule should complete a claim adjustment to correct the erroneous payment.

**COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:**

Bureau of Fee-for-Service Programs  
 Provider Inquiry Unit  
 1-800-537-8861 or 1-800-932-0938

Visit the Office of Medical Assistance Programs website at [www.dpw.state.pa.us/omap](http://www.dpw.state.pa.us/omap).