

**Guide to Edits included in the New York Medicaid Program 29-I Health Facility BILLING GUIDANCE -  
Version 2021-April 2021**

Update Made	Updated Text	Location
Update <b>Office Visit</b> Unit Limit, <b>rate code 4594</b>	Updated Unit Limit to 12 units per day, now consistent with <b>Appendix C: Other Limited Health-Related Services Rate Coding Table</b>	Pg. 22
Updated Allowable Procedure Codes for <b>rate code 4593</b> , and updated rate code description to <b>Psychiatric/Psychological diagnostic examination</b>	Added procedure codes: <b>96136, 96137, 96130, 96131</b>	Pg. 23
Update Office Visit Rate code 4595 adding billable Procedure code <b>99417</b>	Added procedure code: <b>99417</b>	Pg. 26
Update to Section 4.17	Updated dates and guidance to <b>4.17 PHARMACY/DURABLE MEDICAL EQUIPMENT (DME)/SUPPLIES</b> as a result of the State Fiscal Year (SFY) 2021 Enacted Budget transitioned the Medicaid pharmacy benefit from Managed Care to fee for service. <b>Per the SFY 2022 Enacted Budget, this transition of the Medicaid pharmacy benefit from Medicaid Managed Care to the Fee-for-Service (FFS) Program has been delayed by two years, until April 1, 2023.</b>	Pg. 31
Update <b>Appendix C: Other Limited Health-Related Services Rate Coding Table</b> with Procedure codes <b>96136, 96137, 96130, 96131</b>	Updated procedure codes <b>96136, 96137, 96130, 96131</b> under Psychiatric/Psychological diagnostic examination	Pg. 46