

U.S. Department of Homeland Security
500 12th Street, SW
Washington, DC 20536



**U.S. Immigration
and Customs
Enforcement**

August 9, 2024

MEMORANDUM FOR: All Medical Payment Authorization Request Billers

FROM: Dr. Stewart D. Smith, CCHP, FACHE
Assistant Director
ICE Health Service Corps

SUBJECT: Authorization Waiver for Varicella Titer Testing

The U.S. Immigration and Customs Enforcement (ICE) Health Service Corps (IHSC) Claims Management Program (CMP) waives the requirement to submit medical payment authorization requests (MedPARs) for varicella titer claims. Please see below for current International Classification of Diseases, Tenth Revision (ICD-10), and the current procedural terminology (CPT) codes needed to submit reimbursement requests.

Billers may submit reimbursement requests directly to the Department of Veteran Affairs Financial Services Center (VAFSC). The VAFSC will reimburse medical claims in accordance with the new procedure below. Reimbursement for varicella titer testing conducted in the hospital setting still requires a MedPAR.

Please share this memorandum with the medical providers who care for ICE detained noncitizens, medical billing staff, and others within your network, as appropriate.

Background

IHSC issues a MedPAR to approve health care services rendered to detained noncitizens. The CMP requires vendors to have a printed authorization (MedPAR) prior to submitting reimbursement requests to the VAFSC. IHSC waives this requirement for varicella titer testing conducted in on-site laboratories. This change allows IHSC to expedite medical claims processing and reimbursements to medical providers who provide care to noncitizens in ICE custody.

Waiver Procedure

The VAFSC will reimburse claims that contain the correct diagnostic and billing codes listed in this waiver. This waiver reimburses on-site laboratory testing for varicella titer testing. Detention and custodial facilities must continue to provide the detained noncitizens' demographic information for medical providers to submit a medical claim; however, the need for an authorization number is waived.

IHSC Authorization Waiver for Varicella Titer Testing Memorandum

Diagnostic and Billing Codes

To qualify for this waiver, medical claims should include the following codes:

CPT code: 86787

ICD-10 codes:

- Z11.59 Encounter for screening for other viral diseases.
- B01.9 Varicella without complication.

Medical Claims Submissions

Except for the MedPAR, medical providers should follow the usual business process to file medical claims, such as submitting the Centers for Medicare and Medicaid Services (CMS) Health Insurance Claim Form 1500 (837P) or UB04 (8371). IHSC will continue to reimburse medical providers for on-site varicella titer testing at the Medicare allowable rate. Please include both a Healthcare Common Procedure Coding System (HCPCS) and ICD-10 code from the provided list on each claim filed, to receive reimbursement.

The VAFSC implemented a new reimbursement program, Electronic Claims Adjudication Management System (eCAMS) October 1, 2022. **Please leave the following fields blank**, to ensure the system approves your claim. If you enter information in these fields, eCAMS will deny your claim, and you must resubmit for reimbursement.

- CMS-1500 Claim Form, Box 23 (Prior Authorization Number).
- CMS-1450 Claim Form, Box 63 (Treatment Authorization Codes).
- Electronic Data Interchange (EDI) claim submission, REF*G1 section.

Billers must submit all claims within one year (365 days) from the date of service.

Providers should submit their claims by one of the following methods:

- Electronic Data Interchange (EDI) via PNT Data Corp <https://pntdata.com/vafsc/> to Payer ID: VAICE.
- By mail to ICE Health Service Corps VA Financial Services Center, P.O. Box 149345, Austin, TX 78714-9345.

Please visit the Veterans Affairs Financial Services Center (VAFSC) website at <https://www.ihscepp.fsc.va.gov/>, to learn more about how to submit medical claims electronically, or call (860) 257-2030 for more information.

Points of Contact

Direct inquiries regarding electronic claims submission and claims status to the Veterans Affairs Financial Services Center at (800) 479-0523 or VAFSCDIHS@va.gov.

Contact your local IHSC field medical coordinator (FMC), referral coordinator (RC), or the CMP at MedicalClaims@ice.dhs.gov, with any questions or concerns.