



Provider

Notice 12-110

Effective for dates of service on and after January 1, 2013, the Medicaid Program of the Health Care Authority (Agency) will revise the *Ambulatory Surgery Center (ASC) Fee Schedule* with the following updates:

- Conclude the ASC Pilot Project;
- Return the pilot project codes to the appropriate payment groups.
- Add and delete selected dental codes.

Overview

All policies previously published remain the same unless specifically identified as changed in this provider notice.

The Agency will continue to cover only the following services in an ASC:

- Services that cannot safely and routinely be performed in a physician's office; and
- Services that can safely be performed outside of the hospital setting.

The Agency continues to use the Year 2007 Medicare Fee Schedule Database (MFSDB) ASC groups for procedure codes allowed by the Agency in 2007, and has assigned ASC groups to procedure codes for subsequent years, including the new codes for 2013.

This provider notice reflects the changes included in the Year 2013 *ASC Fee Schedule*.

The Agency requires ASCs to bill one claim for all services per client, per date of service.

Any corrections to a final paid or partially paid bill must be billed as an adjustment.

Bill the Agency your usual and customary charge.

ASC Pilot Project

The ASC pilot project began January 1, 2012 and was slated to last one year. Effective January 1, 2013 the pilot project is ended. The 91 procedure codes which were part of the pilot will revert back to paying via the payment groups they had before the pilot began. The January 2013 ASC fee schedule will reflect this. The table below also shows the codes and the groups associated with the codes.

ASC Fee Schedule Updates

Effective for dates of service on and after January 1, 2013, the Agency will update the ASC Fee Schedule and pay the following CPT codes by the group method:

Procedure Code	Brief Description	Group
20670	Removal of support implant	1
20680	Removal of support implant	3
26607	Treat metacarpal fracture	2
26608	Treat metacarpal fracture	4
26615	Treat metacarpal fracture	4
26645	Treat thumb fracture	1
26650	Treat thumb fracture	2
26665	Treat thumb fracture	4
26676	Pin hand dislocation	2
26685	Treat hand dislocation	3
26686	Treat hand dislocation	3
26727	Treat finger fracture, each	7
26735	Treat finger fracture, each	4
26746	Treat finger fracture, each	5
26756	Pin finger fracture, each	2
26765	Treat finger fracture, each	4
36556	Insert non-tunnel cv cath	1
36557	Insert tunneled cv cath	2
36558	Insert tunneled cv cath	2
36560	Insert tunneled cv cath	3
36561	Insert tunneled cv cath	3
36563	Insert tunneled cv cath	3

36566	Insert tunneled cv cath	3
36568	Insert tunneled cv cath	1
36569	Insert tunneled cv cath	1
36571	Insert tunneled cv cath	3
38510	Biopsy/removal, lymph nodes	2
38525	Biopsy/removal, lymph nodes	2
42820	Remove tonsils and adenoids	3
42821	Remove tonsils and adenoids	5
42825	Removal of tonsils	4
42826	Removal of tonsils	4
42830	Removal of adenoids	4
42831	Removal of adenoids	4
42835	Removal of adenoids	4
42836	Removal of adenoids	4
42870	Excision of lingual tonsil	3
47562	Laparoscopic cholecystectomy	5
47563	Laparo cholecystectomy/graph	5
49320	Diag laparo separate proc	3
49321	Laparoscopy, biopsy	4
49322	Laparoscopy, aspiration	4
49324	Lap insertion perm ip cath	3
49325	Lap revision perm ip cath	3
49495	Rpr ing hernia baby, reduc	4
49500	Rpr ing hernia, init, reduce	4
49501	Rpr ing hernia, init blocked	9

49505	Rpr i/hern init reduc>5 yr	4
49507	Rpr i/hern init block>5 yr	9
49520	Rerepair ing hernia, reduce	7
49521	Rerepair ing hernia, blocked	9
49525	Repair ing hernia, sliding	4
49550	Rpr fem hernia, init, reduce	5
49553	Rpr fem hernia, init blocked	9
49560	Rpr ventral hern init, reduc	4
49561	Rpr ventral hern init, block	9
49565	Rerepair ventrl hern, reduce	4
49566	Rerepair ventrl hern, block	9
49568	Hernia repair w/mesh	7
49570	Rpr epigastric hern, reduce	4
49572	Rpr epigastric hern, blocked	9
49580	Rpr umbil hern, reduc <5 yr	4
49585	Rpr umbil hern, reduc > 5 yr	4
49590	Repair spigelian hernia	3
49650	Laparo hernia repair initial	4
49651	Laparo hernia repair recur	7
49652	Lap vent/abd hernia repair	7
49653	Lap vent/abd hern proc comp	7
49654	Lap inc hernia repair	7
49655	Lap inc hern repair comp	7
49656	Lap inc hernia repair recur	7
49657	Lap inc hern recur comp	7
50590	Fragmenting of kidney stone	8
52320	Cystoscopy and treatment	5
52325	Cystoscopy, stone removal	4
52327	Cystoscopy, inject material	2
52330	Cystoscopy and treatment	2
52332	Cystoscopy and treatment	2
52341	Cysto w/ureter stricture tx	3
52344	Cysto/uretero, stone remove	3
52351	Cystouretero & or pyeloscope	3
52352	Cystouretero w/stone remove	4

52353	Cystouretero w/lithotripsy	4
52354	Cystouretero w/biopsy	4
54150	Circumcision	1
54161	Circumcision	2
58670	Laparoscopy, tubal cautery	3
58671	Laparoscopy, tubal block	3
58673	Laparoscopy, salpingostomy	#
59870	Evacuate mole of uterus	5
64590	Implant neuroreceiver	2

Effective for dates of service on and after January 1, 2013, the Agency will update the ASC Fee Schedule with the following added codes:

Procedure Code	Brief Description	Group	Auth
D1208	Topical app fluoride	2	L/DENT
D2929	Prefab porc/ceram crown pri	2	L/DENT

Effective for dates of service on and after January 1, 2013, the Agency will update the ASC Fee Schedule with the following deleted codes:

Procedure Code	Brief Description
D1203	Topical fluor w/o prophy chi
D1204	Topical fluor w/o prophy adu

You may view the Agency *ASC Fee Schedules* online at:
<http://hrsa.dshs.wa.gov/RBRVS/Index.html>.

Thank you.

BC:AL
 Provider Publications Team
 Medicaid Program
 Health Care Authority

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