

Notice 13-43

Provider

Effective for dates of service on and after July 1, 2013, unless otherwise specified, the Medicaid Program of the Health Care Authority (agency) will revise the Ambulatory Surgery Center (ASC) Fee Schedule incorporating the Year 2013 Current Procedural Terminology (CPT[®]) 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.
- 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.

The Year 2013 ASC Fee Schedule reflects the changes included in this provider notice.

The agency requires that ASCs 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 Fee Schedule Updates

Effective for dates of service on and after July 1, 2013, the agency will incorporate the Year 2013 updates for CPT[®] codes into the <u>ASC Fee Schedule</u>.

Fee Schedule Additions

Effective for dates of service on and after July 1, 2013, the agency will add the following CPT[®] codes to the ASC Fee Schedule:

CPT Code	Brief Description	Group
0238T	Trluml perip athrc iliac art	9
32554	Aspirate pleura w/o imaging	1
32555	Aspirate pleura w/ imaging	1
32556	Insert cath pleura w/o image	1
32557	Insert cath pleura w/ image	1
37197	Remove intrvas foreign body	3
37205	Transcath iv stent percut	9
37224	Fem/popl revas w/tla	4
37225	Fem/popl revas w/ather	9
37226	Fem/popl revasc w/stent	9
37228	Tib/per revasc w/tla	4
37229	Tib/per revasc w/ather	9
37230	Tib/per revasc w/stent	9
37232	Tib/per revasc add-on	4
37233	Tibper revasc w/ather add-on	9
37234	Revsc opn/prq tib/pero stent	4
37235	Tib/per revasc stmt & ather	4
37761	Ligate leg veins open	3
52287	Cystoscopy chemodenervation	2
58541	Lsh uterus 250g or less	7
58542	Lsh w/t/o ut 250g or less	7
58570	Tlh uterus 250 g or less	5
58571	Tlh w/t/o 250 g or less	5

63001	Removal of spinal lamina	3
63003	Removal of spinal lamina	3
63005	Removal of spinal lamina	3
G0458	LDR pros brachy comp rat	7

Effective for dates of service on and after July 1, 2013, the agency will add the following CPT[®] codes to the ASC Fee Schedule as *noncovered*:

CPT Code	Brief Description
0232T	Njx platelet plasma
0274T	Perq lamot/lam crv/thrc
0275T	Perq lamot/lam lumbar
0303T	Icar ischm mntrng sys eltrd
0307T	Rmvl icar ischm mntrng dvice
0308T	Insj ocular telescope prosth
0313T	Laps rmvl nstim array vagus
0314T	Laps rmvl vgl arry & pls gen
0315T	Rmvl vagus nerve pls gen
0320T	Insert subq defib electrode
0322T	Rmvl subq defib pls gen
0325T	Repos subq defib eltrd &/gen
31647	Bronchial valve init insert
31648	Bronchial valve remov init
31649	Bronchial valve remov addl
31651	Bronchial valve addl insert
37206	Transcath iv stent/perc addl
37211	Thrombolytic art therapy
37212	Thrombolytic venous therapy
43206	Esoph optical endomicroscopy
43252	Uppr gi opticl endomicrscopy
C9735	Anoscopy, submucosal inj

Spinal Injections

Effective for dates on and after October 1, 2013, the agency will require prior authorization (PA) for spinal injections through Qualis Health. For information on specific procedure codes see <u>Provider Notice 13-39</u>.

For information about PA for spinal injections, visit Qualis Health.

For web-based utilization review, visit Qualis iExchange.

Thank you.

BC-AL Provider Publications Team Medicaid Program Health Care Authority

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