



unlisted surgical procedures and services for facilities

description of procedure/service

This policy applies to the payment of unlisted surgical procedures and services rendered in hospital facilities and Ambulatory Surgery Center (ASC). An unlisted surgical procedure code provides the means of reporting procedures or services that do not have established CPT/HCPCS code. The purpose of this policy is to ensure the appropriate use and reimbursement of unlisted surgical procedure codes.

policy

Fallon Community Health Plan (FCHP) reimburses for unlisted surgical procedures and services that are preauthorized.

benefits application

- FCHP Direct Care/FCHP Select Care
- FCHP Independent Care
- FCHP Flex Care Direct/Select
- Fallon Senior Plan™
- FCHP MassHealth
- Major Medical
- Bill at Home/Direct Enrollment
- Fallon Preferred Care

coverage and reimbursement criteria

Fallon Community Health Plan (FCHP) reimburses medically necessary and preauthorized unlisted surgical procedures and services.

pre-authorization requirements

Plan Preauthorization is required for unlisted surgical procedures and services. If pre-authorization is not obtained, the claim will be denied with the disposition "Reject Not Authorized, Vendor Liable".

billing/coding guidelines

- If the physician bills an assigned code and the outpatient facility bills an unlisted code the facility claim will be rejected "Reject Incorrect Bill" with comments indicating the correct code.
- Do not append modifiers to unlisted surgical procedure or service codes.
- Unit value should always be 1 (one).

Facilities bill services using the UB-92 claim form or ANSI 837I 4010.

place of service

This policy applies to services rendered in hospital facilities and ambulatory surgery centers

policy implementation

Policy number: ADM0044
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