



Unlisted Surgical Procedures and Services for Facilities Payment Policy

Policy

Fallon Community Health Plan (FCHP) reimburses for unlisted surgical procedures and services that are preauthorized. This policy applies to the payment of unlisted surgical procedures and services rendered in hospital facilities and ambulatory surgery centers (ASC). The purpose of this policy is to ensure the appropriate use and reimbursement of unlisted surgical procedure codes.

Definitions

An unlisted surgical procedure code provides the means of reporting procedures or services that do not have established CPT/HCPCS code.

Benefits application

Commercial

- FCHP Direct Care/FCHP Select Care
- Commonwealth Care
- Companion Care
- FCHP MassHealth
- Major Medical
- Fallon Preferred Care

Senior Plan

- Fallon Senior Plan™
- Fallon Senior Plan Preferred
- Summit ElderCare®

Reimbursement

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

Since unlisted surgical procedure codes do not describe a specific procedure or service, claims must be submitted with supporting documentation.

Referral/notification/preauthorization requirements

FCHP preauthorization is required for unlisted surgical procedures for covered services. If preauthorization is not obtained, the claim will be denied with the disposition "Reject Not Authorized Vendor Liable".

Billing/coding guidelines

Facilities bill services using the UB-04 claim form or ANSI 837I 4010.

Unlisted codes require review of procedural documentation. Claims must be submitted with this supporting documentation.

Do not append modifiers to unlisted surgical procedure or service codes.

Unit value should always be 1 (one).

Place of service

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

Policy history

Origination date:	09/14/05
Previous revision date(s):	01/01/06
Connection date & details:	05/01/09 – Updated billing/coding guidelines section to more accurately explain the process for reviewing supporting documentation.

This payment policy has been developed to provide information regarding general billing, coding and documentation guidelines for FCHP. Even though this payment policy may indicate that a particular service or supply is considered covered, specific provider contract terms and/or member individual benefit plans may apply and this policy is not a guarantee of payment. FCHP reserves the right to apply this payment policy to all FCHP companies and subsidiaries.