



## Post-operative Nasal Debridement Payment Policy

### **Policy**

Fallon Community Health Plan (FCHP) follows federal regulations for global surgical periods when processing postoperative debridement procedures. Therefore, HCPCS code S2342 and CPT code 31237 will not be reimbursed separately following a surgical procedure with a 10-day or 90-day global period.

### **Benefits application**

- FCHP Direct Care/FCHP Select Care
- Commonwealth Care
- Companion Care
- FCHP MassHealth
- Major Medical
- Fallon Preferred Care
- Fallon Senior Plan™
- Fallon Senior Plan Preferred
- Summit ElderCare®
- NaviCare®

### **Reimbursement**

HCPCS code S2342 and CPT code 31237 will not be reimbursed separately following a surgical procedure with a 10-day or 90-day global period.

### **Referral/notification/prior authorization requirements**

Summit ElderCare requires prior authorization for all non-emergency outside services. Please contact the referring Summit ElderCare PACE site for assistance.

NaviCare requires that all non-emergency services be authorized in advance. Please contact an Enrollee Service Representative at (877) 700-6996 for assistance.

PCP referrals are required for all specialty visits for most products. For a description of products and services requiring a PCP referral, please refer to the PCP referral and prior authorization grid located in the Managing Patient Care section of the *Provider Manual* under PCP Referral and Plan Prior Authorization Process.

The ordering physician is required to obtain prior authorization for:

- Unlisted CPT codes
- The applicable codes found on the List of Procedures Requiring Prior Authorization located in the Managing Patient Care section of the *Provider Manual* under PCP Referral and Plan Prior Authorization Process.

## Billing/coding guidelines

### When billing for:

### Submit this code:

The limited removal of secretions, crust, or debris from the middle meatus or middle turbinate using suction, irrigation, or straight forceps requiring topical anesthesia; i.e., debridement after functional endoscopic sinus surgery (FESS).	S2342 – nasal endoscopy for post-operative debridement following functional sinus surgery, nasal, and sinus cavity(s), unilateral or bilateral.
The removal of crust, debris, or divitalized tissue from the ethmoid, maxillary, and frontal sinus cavities requiring topical or general anesthesia and instrumentation; i.e., debridement of the posterior ethmoid cavity, frontal recess or maxillary sinus.	31237 – nasal/sinus endoscopy, surgical with biopsy, polypectomy, or debridement (separate procedure).

## Place of service

This policy applies to services rendered in all settings.

## Policy history

Origination date: March 1, 2011  
Previous revision date(s): N/A  
Connection date & details: January 1, 2011 – new policy

*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.*