

SURGICAL TRAYS AND SUPPLIES

Policy # 14

Implementation Date: 1/1/05

Review Date: 1/7/25

Revision Date: 9/16/14, 3/7/25

Disclaimer:

1. Policies are subject to change without notice.
2. Policies outline coverage determinations for Select Health Commercial, Select Health Medicare (CMS), and Select Health Community Care (Medicaid) plans. Refer to the "Policy" section for more information.

Description

Surgical supplies include, but are not limited to scalpels, syringes, and dressings. Surgical trays may be designed entirely for surgical supplies, or they may contain surgical supplies, and other items (e.g., medicine glass, instruments) necessary to perform a procedure.

COMMERCIAL PLAN POLICY AND CHIP (CHILDREN'S HEALTH INSURANCE PROGRAM)***Surgical Trays***

Surgical trays are considered included in surgical procedures, Evaluation and Management services, and all other procedures or services provided in an office-based setting.

In 2002, the physician practice-expense component of the Resource Based Relative Value Study (RBRVS) became fully implemented and code A4550 was designated as a 'B' status code; 'B' status indicates bundled codes. No separate payment is made for the surgical tray by The Centers for Medicare and Medicaid Services (CMS) as the payment is included in the service and considered 'incident to'.

Because Select Health uses the RBRVS, including the practice-expense portion of the fee schedule as the primary (first) factor in determination of the maximum allowable fee (MAF), the cost of the tray represented by code A4550 and the miscellaneous surgical supply code A4649 are included in the reimbursement for procedures. Therefore, codes A4550 and A4649 will be denied as bundled codes.

Supplies and Materials

Effective January 1, 2005, Select Health requires physicians to report supplies and materials using HCPCS Level II codes rather than Physicians' Current Procedural Terminology (CPT) code 99070. When a miscellaneous, nonspecific code, such as 99070 is reported to Select Health, the nonspecific code may allow duplicate payment, or payment for non-covered services/supplies. Code 99070 will be denied, and physicians will need to report a more specific HCPCS Level II code. If a specific HCPCS Level II code is not available, an unlisted HCPCS Level II code applicable to the section (i.e., A9999 Miscellaneous DME supply or accessory, not otherwise specified, B9999 NOC for parenteral supplies, J9999 NOC, antineoplastic drug) should be reported along with medical documentation or invoices for consideration of payment.

Many surgical supplies are considered included in a physician's service. Please refer to the "incident to" policy (policy #03) for further clarification.

Select Health considers surgical trays and other supplies to be included in the reimbursement for procedures performed in the office setting and are not separately payable.

SELECT HEALTH MEDICARE (CMS)

Select Health Medicare will follow the commercial plan policy.

SELECT HEALTH COMMUNITY CARE (MEDICAID)

Select Health Community Care will follow the commercial plan policy.

Applicable Codes (This is not an all-inclusive list)

Codes	Descriptions
A4550	Surgical Trays
A4649	Surgical supply; miscellaneous
99070	Supplies and materials (except spectacles), provided by the physician or other qualified health care professional over and above those usually included with the office visit or other services rendered (list drugs, trays, supplies, or materials provided)
99072	Additional supplies, materials, and clinical staff time over and above those usually included in an office visit or other nonfacility service(s), when performed during a Public Health Emergency, as defined by law, due to respiratory-transmitted infectious disease

Sources

- Centers for Medicare & Medicaid Services (CMS). (Revised 2024, January 1). Medicare Claims Processing Manual Chapter 12 - Physicians/Nonphysician Practitioners. Retrieved January 14, 2024, from <https://www.cms.gov/files/document/medicare-ncci-policy-manual-2024-chapter-12.pdf>
- CPT® Assistant. (1994, December 1). Special Services and Reports (99000-99090). p. 26. Retrieved September 15, 2014.
- Current Procedural Terminology (CPT®)*, (2024) – American Medical Association.
- ICD-10-CM Coding Guidelines. (2024, April 1). Retrieved January 14, 2024, from https://www.encoderpro.com/epro/rcpDocHandler.do?_a=view&_dk=ICD10_CM_Guidelines

Disclaimer

This document is for informational purposes only and should not be relied on in the diagnosis and care of individual patients. Medical and Coding/Reimbursement policies do not constitute medical advice, plan preauthorization, certification, an explanation of benefits, or a contract. Members should consult with appropriate healthcare providers to obtain needed medical advice, care, and treatment. Benefits and eligibility are determined before medical guidelines and payment guidelines are applied. Benefits are determined by the member's individual benefit plan that is in effect at the time services are rendered.

The codes for treatments and procedures applicable to this policy are included for informational purposes. Inclusion or exclusion of a procedure, diagnosis or device code(s) does not constitute or imply member coverage or provider reimbursement policy. Please refer to the member's contract benefits in effect at the time of service to determine coverage or non-coverage of these services as it applies to an individual member.

Select Health® makes no representations and accepts no liability with respect to the content of any external information cited or relied upon in this policy. Select Health updates its Coverage Policies regularly, and reserves the right to amend these policies without notice to healthcare providers or Select Health members.

Members may contact Customer Service at the phone number listed on their member identification card to discuss their benefits more specifically. Providers with questions about this Coverage Policy may call Select Health Provider Relations at (801) 442-3692.

No part of this publication may be reproduced, stored in a retrieval system or transmitted, in any form or by any means, electronic, mechanical, photocopying, or otherwise, without permission from Select Health.

"Intermountain Healthcare" and its accompanying logo, the marks of "Select Health" and its accompanying marks are protected and registered trademarks of the provider of this Service and or Intermountain Health Care, Inc., IHC Health Services, Inc., and Select Health, Inc. Also, the content of this Service is proprietary and is protected by copyright. You may access the copyrighted content of this Service only for purposes set forth in these Conditions of Use.

© CPT Only – American Medical Association