

CODING/REIMBURSEMENT POLICY

SURGICAL TRAYS AND SUPPLIES

Policy # 14

Implementation Date: 1/1/05 Revision Dates: 9/16/14

Disclaimer:

- 1. Policies are subject to change without notice.
- 2. Policies outline coverage determinations for SelectHealth Commercial, SelectHealth Advantage (Medicare), and SelectHealth 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

Surgical Trays

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

The Centers for Medicare and Medicaid Services (CMS) previously paid for surgical trays when certain procedures were provided in a physician's office. The additional allowance was made because the physician practice-expense component of the Medicare Fee Schedule was not fully implemented in the Resource Based Relative Value Study (RBRVS). In 2002, the physician practice-expense component of the 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 CMS as the payment is included in the service and considered 'incident to'.

Because SelectHealth 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 is included in the reimbursement for procedures. Therefore, code A4550 will be denied as a bundled code.

Supplies and Materials

Effective January 1, 2005, SelectHealth 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 SelectHealth, 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 for further clarification.

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

SelectHealth Advantage (Medicare/CMS)

SelectHealth Advantage will follow the commercial plan policy

SelectHealth Community Care (Medicaid)

SelectHealth Community Care will follow the commercial plan policy

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

Codes	Descriptions
A4550	Surgical Trays
99070	Supplies and materials (except spectacles), provided by the physician over and above those usually included with the office visit or other services rendered.

Sources

- 1. Current Procedural Terminology (CPT®), (2014) American Medical Association.
- 2. ICD-9-CM Coding Guidelines. (2013, January 1). Retrieved July 8, 2014, from https://www.encoderpro.com/epro/physicianDoc/pdf/i9v1/i9_quidelines.pdf
- 3. CPT® Assistant. (1994, December 1). Special Services and Reports (99000-99090). pp. 26. Retrieved September 15, 2014.
- Centers for Medicare & Medicaid Services (CMS). (Revised 2014, March 25). Medicare Claims Processing Manual Chapter 12
 Physicians/Nonphysician Practitioners. Retrieved August 27, 2014, from https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c12.pdf

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.

SelectHealth makes no representations and accepts no liability with respect to the content of any external information cited or relied upon in this policy. SelectHealth updates its Coverage Policies regularly, and reserves the right to amend these policies without notice to healthcare providers or SelectHealth members. Claims will be reviewed based on current policy language at time of review.

Members may contact Customer Service at the phone number listed on their member ID Card to discuss their benefits more specifically. Providers with questions about this Coverage Policy may call SelectHealth Provider Relations at 801-442-3692.

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