

## Outpatient hospital ambulatory surgery billing reminder

**Background:** In accordance with Louisiana Medicaid guidelines regarding outpatient hospital surgery billing, please refer to the *Fee Schedule* and *Provider Manual* for guidelines, appropriate codes and rates:

- <https://www.lamedicaid.com/provweb1/providermanuals/manuals/Hosp/Hosp.pdf>
- [https://www.lamedicaid.com/provweb1/fee\\_schedules/OutPatAmbSur\\_Fee.htm](https://www.lamedicaid.com/provweb1/fee_schedules/OutPatAmbSur_Fee.htm)

Under Louisiana Medicaid, hospital facilities must bill all outpatient surgery charges for surgery codes listed on the *Louisiana Medicaid Outpatient Hospital Ambulatory Surgery Fee Schedule* with **Revenue Code 0490 (Ambulatory Surgery Care)**.

All other services performed associated with the surgery (for example, laboratory, radiology, observation, recovery, etc.) must be billed on the same claim. The only revenue code that will be allowed for payment is 0490, and the surgery is reimbursed the flat rate for the surgical code (case rate).

All other ancillary services will not be separately reimbursed as they are included under the surgical flat rate. Only the primary or highest surgical procedure performed on the same date of service will be allowed. There is no multiple surgery applied for outpatient hospital claims for those surgeries on the *Louisiana Medicaid Outpatient Hospital Ambulatory Surgery Fee Schedule*.

### Billing reminders

As a reminder, please bill as follows:

- Bill the surgery and ancillary services on the same claim.
- The unit field should reflect 1 for the surgery code.
- Revenue code 0490 must be billed with the applicable CPT<sup>®</sup>/HCPCS surgical code listed on the *Louisiana Medicaid Outpatient Hospital Ambulatory Surgery Fee Schedule*.
- Do not bill any other revenue code for any surgery that is listed on the *Louisiana Medicaid Outpatient Hospital Ambulatory Surgery Fee Schedule*.
  - Revenue codes for treatment room, operating room, etc. should not be used to bill these surgeries.

As these specified surgery codes are reimbursed a flat rate (case rate), claims may be denied if:

- The surgical CPT/HCPCS code is listed on the *Outpatient Hospital Ambulatory Surgery Fee Schedule*, and revenue code 0490 is not billed.
- The surgical CPT/HCPCS code is greater than one unit.
- Multiple surgery modifiers are billed.

### What if I need assistance?

If you have questions about this communication or need assistance with any other item, contact your local Provider Relations representative or call Provider Services at **1-844-521-6942**.

<https://providers.healthybluelo.com>

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