



MISSOURI
DIVISION OF MEDICAL SERVICES

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AMBULATORY SURGICAL CENTER (ASC) BULLETIN

Provider Bulletin News: Due to budget constraints, paper copies of bulletins will no longer be distributed by DMS. Bulletins are now available only at the DMS Website. http://www.dss.mo.gov/dms/pages/bulletins.htm Please note new website address.

Bulletins will remain on this site only until incorporated into the provider manuals as appropriate, then deleted.

Missouri Medicaid News: Missouri Medicaid providers may sign-up to receive automatic notifications of all bulletins and other official Missouri Medicaid communications via e-mail. Providers and other interested parties are urged to go to the DMS website to subscribe to the e-mail list.

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MC+ MANAGED CARE

The information contained in this bulletin applies to coverage by the MC+ fee-for-service and Medicaid fee-for-service programs. The MC+ fee-for-service and Medicaid fee-for-service programs also provide coverage for those services carved out of the MC+ Managed Care benefit for MC+ Managed Care enrollees. Questions regarding services included in the MC+ Managed Care benefit should be directed to the enrollee's MC+ Managed Care health plan. Please check the patient's eligibility status prior to delivering a service.

2004 HEALTH CARE PROCEDURE CODING SYSTEM (HCPCS) UPDATE

Missouri Medicaid will begin accepting the 2004 versions of the Current Procedural Terminology (CPT) and Health Care Procedure Coding System (HCPCS) on February 1, 2004. Providers may begin billing the 2004 CPT or HCPCS codes with appropriate modifiers for dates of service beginning February 1, 2004 and after. Claims submitted for dates of service prior to February 1, 2004 must be billed with the old CPT or HCPCS codes and modifiers.

Copies of the 2004 versions of the CPT and HCPCS books may be purchased from your local medical bookstore.

AMBULATORY SURGICAL CENTER (ASC) ADDITIONS AND DELETIONS

The following list contains additions to and deletions from the current list of Medicaid covered Ambulatory Surgical Center (ASC) codes as a result of changes in the Current Procedural Terminology (CPT) for 2004. The additions and deletions are effective for services performed on or after February 1, 2004.

CPT Codes Deleted from the ASC List	Modifier
36488	
36489	
36490	
36491	
36530	
36531	
36532	
36533	
36533	50
36534	
36534	50
36535	
36535	50

Replaced By These New CPT Codes	Modifier	Medicaid ASC Facility Fee
36555		\$340.00
36556		\$340.00
36557		\$455.00
36558		\$455.00
36560		\$520.00
36561		\$520.00
36563		\$520.00
36565		\$520.00
36565	50	\$780.00
36566		\$520.00
36566	50	\$780.00
36568		\$340.00
36568	50	\$510.00
36569		\$340.00
36570		\$520.00
36571		\$520.00
36575		\$455.00
36576		\$455.00
36578		\$455.00
36580		\$340.00

Replaced By These New CPT Codes	Modifier	Medicaid ASC Facility Fee
36581		\$455.00
36582		\$520.00
36583		\$520.00
36584		\$340.00
36585		\$520.00
36589		\$340.00
36590		\$340.00

Provider Communications

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