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OPHTHALMOLOGY REVISED UNIT VALUES

Subsequent to the Joint Fee Schedule Committee meeting of December 11, 2007 the following fee revisions were approved for inclusion in the Ophthalmology Section of the MSI Physician's Manual effective May 1, 2008. All *eligible* claims with a service date of May 1, 2008 will be identified and a retroactive payment will be calculated and paid in the fall of 2008. A waiting period of 90 days is required before calculating the retro given that physicians have a three-month period to submit claims for payment.

Category	Code	Description	Revised Unit Value
CONS	03.08	Major Consultation	37.6
MASG	21.5A	Excision of lacrimal gland (regions required)	200
MASG	21.71	Dacryocystorhinostomy (DCR) (regions required)	325
MASG	22.13B	Excision of malignant eyelid lesion with reconstruction (regions required)	200
MASG	23.2B	Strabismus repair one or two muscles same or different eye (age modifier required) AG=CH16	180
MASG	23.2B	Strabismus repair one or two muscles same or different eye (age modifier required) AG=ADUT	190
ADON	23.2C	Strabismus repair (additional muscles over two) – plus multiples Age modifier required AG=CH16	50
ADON	23.2C	Strabismus repair (additional muscles over two) – plus multiples Age modifier required AG=ADUT	30
ADON	23.99A	Adjustable suture in addition to strabismus repair (regions required)	100
MASG	25.55	Penetrating keratoplasty (with homograft) (regions required)	345
MASG	27.72	Insertion of intraocular lens prosthesis with cataract extraction, one stage (regions required)	300
MASG	29.21	Removal of ocular contents with implant into scleral shell (regions required)	200

Category	Code	Description	Revised Unit Value
MASG	29.29	Other evisceration of eyeball (regions required)	150
MASG	29.31	Enucleation of eyeball with implant into tenon's capsule with muscles (regions required)	200
MASG	29.49A	Exenteration and skin graft (regions required)	350
MASG	29.94A	Excision of tumor Kronlein Procedure (regions required)	400
MASG	29.94B	Tumor – removal by anterior route (regions required)	300
MASG	29.94C	Tumor – removal by intracranial route (regions required)	300

BILATERAL BILLING OF COCHLEAR IMPLANTS

Health Service Code 32.95B: Cochlear implant – to include mastoidectomy and facial nerve decompression (regions required) has been expanded to allow for bilateral billing. A region of RG=BOTH has been added to the service code.

New Code – ORIF Phalangeal Fractures

Health Service Code 91.32E has been expanded to include phalangeal fractures. The description for this code now reads 'Open reduction and internal fixation using plates and/or screws – phalangeal or metacarpal fractures.'

UPDATED FILES – AVAILABILITY

Updated files reflecting changes are available for download on Friday, June 13, 2008. The files to download are health service (services.dat), health service codes (servdsc.dat) and explanatory codes (explain.dat)