

# MICROSURGERY POLICY (CES)

**Policy Number:** ADMINISTRATIVE 211.16C T0

**Effective Date:** June 1, 2020

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**Related Policies**

None

## INSTRUCTIONS FOR USE

The services described in Oxford policies are subject to the terms, conditions and limitations of the member's contract or certificate. Unless otherwise stated, Oxford policies do not apply to Medicare Advantage members. Oxford reserves the right, in its sole discretion, to modify policies as necessary without prior written notice unless otherwise required by Oxford's administrative procedures or applicable state law. The term Oxford includes Oxford Health Plans, LLC and all of its subsidiaries as appropriate for these policies.

Certain policies may not be applicable to Self-Funded members and certain insured products. Refer to the member specific benefit plan document or Certificate of Coverage to determine whether coverage is provided or if there are any exclusions or benefit limitations applicable to any of these policies. If there is a difference between any policy and the member specific benefit plan document or Certificate of Coverage, the member specific benefit plan document or Certificate of Coverage will govern.

UnitedHealthcare may also use tools developed by third parties, such as the MCG™ Care Guidelines, to assist us in administering health benefits. The MCG™ Care Guidelines are intended to be used in connection with the independent professional medical judgment of a qualified health care provider and do not constitute the practice of medicine or medical advice.

## APPLICABLE LINES OF BUSINESS/PRODUCTS

This policy applies to Oxford Commercial plan membership.

## APPLICATION

This reimbursement policy applies to services reported using the 1500 Health Insurance Claim Form (a/k/a CMS-1500), or its electronic equivalent or its successor form. This policy applies to all network and non-network providers and other qualified health care professionals, including, but, not limited to, non-network authorized and percent of charge contract physicians and other qualified health care professionals.

## OVERVIEW

Microsurgical Technique is the use of an operating microscope during a surgical procedure. Use of an operating microscope, reported with Current Procedural Terminology (CPT) codes 64727 and 69990, is a reimbursable service in specified instances.

For the purpose of this policy, the Same Individual Physician or Other Qualified Health Care Professional is the same individual rendering health care services reporting the same Federal Tax Identification Number.

## REIMBURSEMENT GUIDELINES

### **CPT Code 64727**

Consistent with the CPT book coding guidelines for CPT code 64727, Oxford will only reimburse CPT code 64727 when submitted with internal neurolysis codes on the list of [Services Allowed with CPT 64727](#).

The Centers for Medicare and Medicaid Services (CMS) Medicare Claims Processing Manual and the Correct Coding Initiative (CCI) state that CPT code 69990 is not to be reported in addition to CPT code 64727.

### **CPT Code 69990**

CMS reimbursement guidelines differ from the CPT book coding guidelines. Oxford follows CMS reimbursement guidelines for reimbursement of 69990 with certain nervous system surgeries.

Oxford will reimburse CPT code 69990 when billed in conjunction with services described in the list of [Services Allowed with CPT 69990](#).

## DEFINITIONS

**Microsurgery:** The use of a microscope during a surgical procedure to perform Microsurgical Technique.

**Microsurgical Technique:** A surgical technique for dissecting tissues under a microscope.

**Same Individual Physician or Other Qualified Health Care Professional:** The same individual rendering health care services reporting the same Federal Tax Identification Number.

## APPLICABLE CODES

The following list(s) of procedure and/or diagnosis codes is provided for reference purposes only and may not be all inclusive. Listing of a code in this policy does not imply that the service described by the code is a covered or non-covered health service. Benefit coverage for health services is determined by the member specific benefit plan document and applicable laws that may require coverage for a specific service. The inclusion of a code does not imply any right to reimbursement or guarantee claim payment. Other Policies may apply.

### Microsurgery CPT Codes

64727	69900									
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### CPT Codes

#### Services Allowed with CPT 64727

64702	64704	64708	64712	64713	64714	64716	64718	64719	64721	64722
64726										

#### Services Allowed with CPT 69990

61304	61305	61312	61313	61314	61315	61316	61320	61321	61322	61323
61330	61333	61340	61343	61345	61450	61458	61460	61500	61501	61510
61512	61514	61516	61517	61518	61519	61520	61521	61522	61524	61526
61530	61531	61533	61534	61535	61536	61537	61538	61539	61540	61541
61543	61544	61545	61546	61550	61552	61556	61557	61558	61559	61563
61564	61566	61567	61570	61571	61575	61576	61580	61581	61582	61583
61584	61585	61586	61590	61591	61592	61595	61596	61597	61598	61600
61601	61605	61606	61607	61608	61611	61613	61615	61616	61618	61619
61623	61624	61626	61630	61635	61640	61641	61642	61645	61650	61651
61680	61682	61684	61686	61690	61692	61697	61698	61700	61702	61703
61705	61708	61710	61711	62010	62100	63081	63082	63085	63086	63087
63088	63090	63091	63101	63102	63103	63170	63172	63173	63180	63182
63185	63190	63191	63194	63195	63196	63197	63198	63199	63200	63250
63251	63252	63265	63266	63267	63268	63270	63271	63272	63273	63275
63276	63277	63278	63280	63281	63282	63283	63285	63286	63287	63290

## CPT Codes

### Services Allowed with CPT 69990

63295	63300	63301	63302	63303	63304	63305	63306	63307	63308	63704
63706	63707	63709	63710	64831	64832	64834	64835	64836	64837	64840
64856	64857	64858	64859	64861	64862	64864	64865	64866	64868	64872
64874	64876	64885	64886	64890	64891	64892	64893	64895	64896	64897
64898	64901	64902	64905	64907						

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## QUESTIONS AND ANSWERS

<b>1</b>	<b>Q:</b>	Why does Oxford choose to follow the Centers for Medicare and Medicaid Services (CMS) guidelines rather than the CPT book guidelines for bundling of code 69990?
	<b>A:</b>	More consistency was found in the CMS bundling rules. For example, CMS consistently considers 69990 included in eye and ear surgical procedures, while CPT varies within these CPT sections.
<b>2</b>	<b>Q:</b>	Why does Oxford include add-on codes in the Services Allowed with CPT 69990 list when CMS National Correct Coding Initiative (NCCI) does not include these add-on codes in the range of services in which CPT code 69990 is allowable?
	<b>A:</b>	CMS guidelines state, "In general, NCCI procedure to procedure edits do not include edits with most add-on codes because edits related to the primary procedure(s) are adequate to prevent inappropriate payment for an add-on coded procedure." Oxford aligns with CMS and allows reimbursement of CPT code 69990 reported with add-on codes when the primary procedure codes are allowable. For example, primary procedure code 61304 (Craniectomy or craniotomy, exploratory; supratentorial) is allowable and, therefore, add-on code 61316 (Incision and subcutaneous placement of cranial bone graft (List separately in addition to code for primary procedure) is also allowable.

## REFERENCES

The foregoing Oxford policy has been adapted from an existing UnitedHealthcare national policy that was researched, developed and approved by UnitedHealthcare Reimbursement Policy Oversight Committee. [2020R0038A]

American Medical Association, Current Procedural Terminology: CPT and associated publications and services.

Centers for Medicare and Medicaid Services (CMS), CMS Manual System and other CMS publications and services.

Centers for Medicare and Medicaid Services, National Correct Coding Initiative (NCCI) publications.

## POLICY HISTORY/REVISION INFORMATION

Date	Action/Description
06/01/2020	<ul style="list-style-type: none"> <li>• Removed code descriptions</li> <li>• Archived previous policy version ADMINISTRATIVE 211.15C T0</li> </ul>