

ONCE IN A LIFETIME PROCEDURES POLICY

Policy Number: ADMINISTRATIVE 233.10 TO

Effective Date: May 1, 2018

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Related Policies

- Refer to the [Reimbursement Guidelines](#) section of the policy

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 products and all network and non-network physicians 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

The Once in a Lifetime Procedures Policy identifies procedures that because of the *Current Procedural Terminology (CPT®)* code description and/or human anatomy can be performed by a physician(s) or other health care professional(s) only once in a patient's lifetime.

REIMBURSEMENT GUIDELINES

Oxford will reimburse certain procedures only once during a patient's lifetime. Once in a Lifetime Procedures are not limited to a single CPT code, but may be represented by Code Families, which are a group of CPT codes that describe

the same or similar type of service. Under this policy, Oxford provides reimbursement for only one procedure from a designated Code Family during a patient's lifetime.

For example, there are four separate appendectomy CPT codes that can be used, based upon the particular circumstance, to report the removal of the appendix. The four codes, listed below, make up the Code Family that describes the removal of an appendix.

CPT Code	Description
Appendectomy Code Family	
44950	Appendectomy
44955	Appendectomy; when done for indicated purpose at time of other major procedure (not as separate procedure) (List separately in addition to code for primary procedure)
44960	Appendectomy; for ruptured appendix with abscess or generalized peritonitis
44970	Laparoscopy, surgical, appendectomy

When any single or multiple physician or other health care professional reports a code from the Once in a Lifetime Procedures list, that code or any code from the same Code Family will be reimbursed only once during a patient's lifetime. In the appendectomy example, a single code from the Appendectomy Code Family will be reimbursed only once during a patient's lifetime, because each person has only one appendix and can have only one appendectomy during his or her lifetime.

Refer to the [Attachments](#) section for a complete list of Once in a Lifetime Procedures, listed by CPT code and Code Family.

Modifiers

There may be situations that require the code(s) for a Once in a Lifetime Procedure to be submitted more than once during a patient's lifetime. In such cases, more than one Once in a Lifetime Procedure, whether the same code or a different code from the same Code Family will be considered separately for reimbursement if reported with one of the following modifiers:

Modifier	Description
53	Discontinued procedure
55	Postoperative management only
56	Preoperative management only
58	Staged or related procedure or service by the same physician or Other Qualified Health Care Professional

For additional information related to the percentage of the allowable fee to be paid when one of these modifiers is appended to a claim for a subsequent procedure, please refer to the *Discontinued Procedure* policy, *Split Surgical Package* policy, and/or *Global Days* policy.

DEFINITIONS

Code Family: A group of CPT codes that describe the same or similar type of service.

Once in a Lifetime Procedure: A procedure that can be performed by a physician(s) or other health care professional(s) only once in a patient's lifetime.

QUESTIONS AND ANSWERS

1	Q:	Would there ever be an instance where a CPT code for a Once in a Lifetime Procedure may be reported more than once?
	A:	Yes, there are instances where a CPT code for a Once in a Lifetime Procedure may be reported more than once. Modifiers may be used to indicate a procedure or service has been altered in some way, but not changed in its actual code description. For example, by definition, modifier 53 (Discontinued Procedure) is to be used when a procedure is terminated for unforeseeable circumstances. Per coding guidelines, the procedure code would be initially reported with modifier 53 appended to the CPT code to indicate the discontinued procedure and then at a later time, the CPT code would be submitted again when (if) the procedure took place in its entirety.

2	Q:	How is a Once in a Lifetime Procedure reimbursed when reported by two different physicians on different dates of service?
	A:	When any physician or other health care professional reports a code from the Once in a Lifetime Procedures policy list on multiple dates of service excluding the same date of service, the code will be reimbursed only once. Oxford follows a "first in, first out" claim payment methodology in determining which claim will be considered for reimbursement when duplicate claims are received.
3	Q:	What if two different physicians each report the same procedure on the same date of service for the same patient from the Once in a Lifetime Procedures list?
	A:	The Once in a Lifetime procedure codes are subject to duplicate billing when reported by the same or different providers.

ATTACHMENTS

Once in a Lifetime Procedures Policy List

Codes for procedures that are reimbursed once per member lifetime



Once in a Lifetime
Procedures List

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. [2018R0116A]

American Medical Association. Current Procedural Terminology (CPT®) and associated publications and services.

Centers for Medicare and Medicaid Services (CMS) Recover Audit Contractors (RAC).

Department of Health Care Services, Medi-Cal.

POLICY HISTORY/REVISION INFORMATION

Date	Action/Description
10/01/2018	<ul style="list-style-type: none"> Reformatted references to related Reimbursement Policies
05/01/2018	<ul style="list-style-type: none"> Updated policy application guidelines; added language to clarify this policy applies to: <ul style="list-style-type: none"> Services reported using the 1500 Health Insurance Claim Form (a/k/a CMS-1500) or its electronic equivalent or its successor form All products Updated list of applicable modifier codes; revised description for 58 Reformatted <i>Once in a Lifetime Procedures Policy List</i> (attachment file listing codes for procedures that are reimbursed once per member lifetime); transferred content to embedded Excel file format Archived previous policy version ADMINISTRATIVE 233.9 TO