

Once-Per-Lifetime Procedures

Reimbursement Policy ID: RPC.0020.7700

Recent review date: 11/2022

Next review date: 11/2023

AmeriHealth Caritas Ohio claim payment policies and the resulting edits are based on guidelines from established industry sources such as the Centers for Medicare and Medicaid Services (CMS), the American Medical Association (AMA), state regulatory agencies, and medical specialty professional societies. In making claim payment determinations, the health plan also uses coding terminology and methodologies that are based on accepted industry standards, including the Healthcare Common Procedure Coding System (HCPCS), Current Procedural Terminology (CPT[®]), the International Statistical Classification of Diseases and Related Health Problems, 10th Revision (ICD-10); and the National Uniform Billing Code (NUBC).

Other factors affecting reimbursement may supplement, modify, or in some cases supersede medical/claim payment policy. These factors may include but are not limited to: legislative or regulatory mandates, a provider's contract, and/or a member's eligibility to receive covered health care services.

Policy Overview

This policy describes limitations on payment for once-per-lifetime procedures by providers contracted with AmeriHealth Caritas Ohio.

Certain procedures can be performed on a patient only once in the patient's lifetime, due to either a limitation of the benefit or the type of procedure and the anatomy on which the procedure is being performed. Accordingly, reimbursement for these procedures is limited to once in a patient's lifetime. Providers must submit clean claims, using appropriate CPT/HCPCS codes and their modifiers, consistent with Ohio Department of Medicaid (ODM) billing and other guidelines. Services must be medically necessary.

Exceptions

See Reimbursement Policy RPC.0019.7700 for discontinued procedures.

Coding

AmeriHealth Caritas Ohio has edits to prevent payment of once-per-lifetime procedures that were previously reported as completed. For example, if a claim with "appendectomy" in its code description was previously billed as completed, any subsequent claims with "appendectomy" in its code description will be denied.

An associated modifier may indicate for a once-per-lifetime procedure:

- If a bilateral or unilateral procedure was performed. See Reimbursement Policy RPC.0006.7700 on Bilateral Procedures.

- If co-surgeons and/or an assistant-at-surgery were involved in a surgical case. See also Reimbursement Policies RPC.0005.7700 and RPC.0004.7700 on Co-Surgeons and Assistant Surgeon, respectively.
- If surgical procedures were staged or if certain components of the global surgical package were split among different providers. See Reimbursement Policy RPC.0012.7700 on Global Surgical Package.

Please refer to CPT/HCPS manuals for complete descriptions of procedure codes and modifiers. Please refer to ODM billing resources for fee schedules and billing guidelines.

Definitions

Once-Per-Lifetime Procedure

A procedure or service that can be performed only once in a patient's lifetime, due to either a limitation of the benefits or the type of procedure and the anatomy on which the procedure is being performed.

Different Providers

Physicians or other qualified health care professionals who are not from the same group practice, not under the same specialty, and not under the same Tax Identification Number (TIN) are considered different providers.

Applicable Claim Types

Line of Business	Facility	Professional
Medicare	No	No
Medicaid	Yes	Yes
ACA Exchange	No	No

Edit Sources

- I. *Current Procedural Terminology (CPT®)*, *Healthcare Common Procedure Coding System (HCPCS)*, *International Statistical Classification of Diseases and Related Health Problems, 10th Revision, Clinical Modification (ICD-10-CM)*, and associated publications and services.
- II. Ohio Administrative Code 5160-4-22 *Surgical Services*: <https://codes.ohio.gov/ohio-administrative-code/rule-5160-4-22>
- III. Ohio Department of Medicaid (ODM) fee schedules and billing guidelines: <https://medicaid.ohio.gov/resources-for-providers/billing/billing>

Attachments

N/A

Policy History

11/15/2022	AmeriHealth Caritas Implementation
11/15/2022	Reimbursement Policy Committee Approval