

TO: Physicians

SUBJECT: Billing Instructions for Ligation or Transection of Fallopian Tube(s) When Done at the Time of Cesarean Section or Intra-abdominal Surgery (HCPCS 58611)

EFFECTIVE: Immediately

PURPOSE: To clarify coverage policy regarding tubal ligations or transection of fallopian tube(s) when performed at the time of a cesarean section or during intra-abdominal surgery (not a separate procedure).

ACTION: A physician who performs a ligation or transection of fallopian tube(s) at the time of obstetrical delivery (cesarean section) or intra-abdominal surgery (not a separate procedure) may now bill separately using HCPCS 58611 in addition to the appropriate procedure code for the primary obstetrical or abdominal surgery procedure. This also includes those obstetrical procedure codes used by HealthStart identified providers.

Multiple surgery pricing is not applicable to this situation.

Garden State Health Plan policy and procedures concerning prior authorization of services remain in effect.

For further information or questions regarding this Newsletter, please contact the Division of Medical Assistance and Health Services, Office of Medical Affairs and Provider Relations, at (609) 588-2751.

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