



**Policy Update: Ambulatory Surgical Centers (Non-Hospital)
Reimbursement for Corneal Tissue**

Effective with date of service September 1, 2008, in addition to the facility fee for the surgery, Louisiana Medicaid will reimburse the ASC for corneal tissue (currently HCPCS code V2785) used in corneal transplant procedures. It is the Department's intent that corneal tissue be reimbursed only when a valid facility fee for the related surgical procedure has been paid to the ASC on the same date of service for the same recipient. As in all circumstances, providers are expected to maintain appropriate records documenting the services billed to Medicaid.

Only those corneal tissue claims for date of service September 1, 2008 and after will be considered for this payment methodology. ASC providers that performed corneal transplants and were paid the facility fee for corneal transplant surgery may now submit claims for the corneal tissue, if applicable, for DOS September 1, 2008 forward. However, to prevent inadvertent denials in the future, the ASC should bill for both the surgery and the corneal tissue on the same claim. This situation is an exception to current published Non-Hospital ASC policy stating "There should only be one line item per claim form."

July 20, 2009