

REFERRAL Provider Covered Procedures



Only the procedures listed below are covered under Every Woman Counts (EWC) for Referral Providers. Requirements and information, including eligibility, are listed in can-detect, the EWC section of the Medi-Cal Provider Manual. Providers must have an appropriate ICD-9-CM code(s) specified as the first or second diagnosis code on the claim to be eligible for payment. For the list of appropriate CPT specific ICD-9-CM codes please refer to: http://files.medi-cal.ca.gov/pubdocs/publications/masters-mtp/part2/candetect_m00o03.doc

<p>Breast Screening and Diagnostic Procedure Codes</p> <ul style="list-style-type: none"> <input type="checkbox"/> 00400 – Anesthesia, integumentary system, anterior trunk <input type="checkbox"/> 10021 – Fine needle aspiration; without imaging guidance <input type="checkbox"/> 10022 – Fine needle aspiration; with imaging guidance <input type="checkbox"/> 19000 – Puncture aspiration of cyst of breast <input type="checkbox"/> 19001 – Each add cyst (with 19000) <input type="checkbox"/> 19100 – Needle Core biopsy (without imaging guidance) <input type="checkbox"/> 19102 – Needle Core biopsy (with imaging guidance) <input type="checkbox"/> 19103 – Needle Core, auto vacuum. assist or rotating biopsy device (image guided) <input type="checkbox"/> 19120 – Excisional Biopsy, open <input type="checkbox"/> 19125 – Excision of lesion , identified by preop plcmt of radiomarker single lesion <input type="checkbox"/> 19126 – Each additional lesion (with 19125) <input type="checkbox"/> 19290 – Preop plcmt of needle localization wire <input type="checkbox"/> 19291 – Each add lesion; (with 19290) <input type="checkbox"/> 19295 – Image guided placement , localization clip (with 19102 or 19103) <input type="checkbox"/> 76098 – X-ray Exam, surg specimen <input type="checkbox"/> 76645 – Ultrasound, (uni/bilateral) <input type="checkbox"/> 76942 – US guidance for needle plcmt; imaging, superv & interpret <input type="checkbox"/> 77031 – Stereotactic localization for bx or needle plcmt; superv & interpret <input type="checkbox"/> 77032 – Mammography guidance for needle plcmt; superv & interpret <input type="checkbox"/> 77055 – Mammography; unilateral <input type="checkbox"/> 77056 – Mammography; bilateral <input type="checkbox"/> 77057 – Screening mammogram; bilateral <input type="checkbox"/> 88173 – Interp/report for eval of FNA <input type="checkbox"/> 88305 – Level IV Surg path exam <input type="checkbox"/> 88307 – Level V Surg path exam <input type="checkbox"/> 88360 – Morphometric analysis, tumor immunochemistry; manual <input type="checkbox"/> G0202 – Screening mammography, direct digital image, bilateral, all views (paid at 77057 rate) <input type="checkbox"/> G0204 – Diagnostic mammography, direct digital image, bilateral, all views (paid at 77056 rate) <input type="checkbox"/> G0206 – Diagnostic mammography, direct digital image, unilateral, all views (paid at 77055 rate) 	<p>Cervical Codes</p> <ul style="list-style-type: none"> <input type="checkbox"/> 57452 – Colposcopy <input type="checkbox"/> 57454 – Colposcopy w/bx of cervix and ECC <input type="checkbox"/> 57455 – Colposcopy w/bx of cervix <input type="checkbox"/> 57456 – Colposcopy w/ECC <input type="checkbox"/> 57500 – Biopsy of cervix <input type="checkbox"/> 57505 – Endocervical curettage (with 58100) <input type="checkbox"/> 58100 – Endometrial sampling (with 57505) <input type="checkbox"/> 58110 – Endometrial sampling with colposcopy <input type="checkbox"/> 87621 – HPV, human, amplified probe <input type="checkbox"/> 88141 – Pap, physician interpretation <input type="checkbox"/> 88142 – Pap, liquid based (LBP); man scrng <input type="checkbox"/> 88164 – Pap, conv. slides; manual scrn <input type="checkbox"/> 88174 – LBP, auto screen <input type="checkbox"/> 88175 – LBP, auto screen w/man rescrn. 	<p>Breast or Cervical Codes</p> <ul style="list-style-type: none"> <input type="checkbox"/> 99211 – OV; est pt 5 min <input type="checkbox"/> 99241 – Consult; new or est pt 15 min <input type="checkbox"/> 99242 – Consult; new or est pt 30 min <input type="checkbox"/> 99243 – Consult; new or est pt 40 min <input type="checkbox"/> 99070 – Supplies/material, not inc w/OV <input type="checkbox"/> A4217 – Admin irri. sol, each 1000 ml <input type="checkbox"/> X7700 – Admin IV, initial, up to 1000ml <input type="checkbox"/> X7702 – Admin IV, each add 1000 ml <input type="checkbox"/> Z7500 – Exam or Tx Rm use <input type="checkbox"/> Z7506 – OR or Cysto Rm use, first hour <input type="checkbox"/> Z7508 – OR or Cysto Rm use, 1st sub half hr <input type="checkbox"/> Z7510 – OR or Cysto Rm use, 2nd sub half hr <input type="checkbox"/> Z7512 – Recovery Rm use <input type="checkbox"/> Z7514 – Rm/Brd gen nurs care, less than 24 hr <input type="checkbox"/> Z7610 – Misc. drugs and medical supply
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Common Modifiers

<p>Pathology / Radiology Procedure Modifier (70000 - 80000 Range)</p> <p>26 – Professional Component TC – Technical Component ZS – Global</p>	<p>Surgical Procedure Modifiers (10000 – 69999)</p> <p>AG – Primary Surgeon/Procedure 51 – Multiple surg procedure 99 – Multiple Mod (e.g. AG+51) UA – Surgical supplies w/no anesthesia or other than general anesthesia, provided in conjunction with a surgical procedure code. UB – Surgical supplies w/general anesthesia, provided in conjunction with a surgical procedure code.</p>
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Modifier Required. For a complete list of approved Medi-Cal modifiers, refer to Part 2 of your Medi-Cal Provider manual. Surgical trays and supplies can be billed with the same surgical procedure code and either modifier UA or UB.

Thank you for accepting this referral of a woman enrolled in EWC. Here is some information about the program:

- Women enroll for twelve months; then they can recertify (if eligible).
- Program covered cancer screening and diagnostic services are FREE.
- Claim must be submitted with the woman's 14-digit ID number (Recipient ID#).
- Payment for program-covered services is at Medi-Cal rates.
- The program prohibits balance billing of women.
- All services and findings must be reported to the Primary Care Provider.

Here is the contact information for this woman's Primary Care Provider:

Name:	Phone:	Fax:
Address:	Attention:	