

HEALTH

AC Financial Services / Reference Guide

For Services referred to:

Orthopedic Surgery

Supplement for MediCal Payors

All superscript numbers (Example: Description¹) correspond to important notes at the bottom of each page.

This guide has three sections: Page 1: Referrals for: Diagnosis Specific Visits and Non-Fracture/Dislocation Visits Page 2: All Fracture/Dislocation Referrals

Referrals for: Diagnosis Specific Visits				
Condition/Diagnosis:	Required Codes:			
Congenital Talipes Equinovarus (Club Foot)	Visit Codes 99241-99245 or 99201-99205 29355x2, 27605x2, 29450x6, 29345x2, 29345x2, 29405x2, 29405x2 77071, 77072, 77073, 73551-73660			
(Toe Walker)	Visit Codes 99241-99245 or 99201-99205 29450x6, 29345x2, 29345x2, 29405x2, 29405x2 77071, 77072, 77073, 73551-73660			
Genu Valgum (Knocked Knee)	Visit Codes 99241-99245 or 99201-99205 77071, 77072, 77073, 73551-73660			
Syndactyly- (Upper Extremity) Webbed Fingers	Visit Codes 99241-99245 or 99201-99205 77071, 77072, 73000-73140			
Syndactyly- (Lower Extremity) Webbed Toes	Visit Codes 99241-99245 or 99201-99205 77071, 77072, 73551-73660			
Metatarsus Adductus (Toes Pointed Inward)	Visit Codes 99241-99245 or 99201-99205 29355x2, 29450x6, 29345x2 77071, 77072, 77073, 73551-73660			
Vertical Talus (Rocker Bottom Flat Foot)	al Talus Visit Codes 99241-99245 or 99201-99205			
Plantar Fasciitis/ Flat Foot/ Foot Deformity	Visit Codes 99241-99245 or 99201-99205 29355x2, 29450x6, 29345x2 77071, 77072, 77073, (73551-73660)x3			

Referrals for: Non-Fracture/Dislocation Visits Select codes from each section: Non-Fracture/Dislocation Visits Select codes from each section: Nisit Codes Required X-Ray/Radiology codes				
Visit Code(s):				
New Patient/Initial Visit Code(s):		Established Patient/Follow Up Code(s):		
99241-99245 or 99201-9	99205	99211-99215		
Required Radiology Codes				
Bone/Body Region(s):		Radiology Code(s) *ranges are all-inclusive:		
Scapula & Clavic	le *73000-73050			
	· · · · · · · · · · · · · · · · · · ·	200-72220, *72040-72052		
Pelvic Girdle (Hip/Pelvi		00-72220, *73501-73525		
Upper Extremiti	es *73000-73140(range	e x3) ¹ , 77071, 77072		
Lower Extremiti	es *73551-73660, 7707	1, 77072, 77073		
Leg Length Discrepance	cy *72170-72190, *735	01-73660, 77072, 77073, 72200-72220		

Important Notes:

• Patients coming from another facility need to hand carry any previous X-Rays and have Radiology codes authorized for time of service.

• Always range new patients for visit and radiology codes.

1. All New Patients - Upper Extremity X-rays, request entire range x3 to meet current standard of practice.

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l superscript numbers (Exar	nple: Description ¹) c	orrespond to important notes at the bottom of each page.
	R	eferrals for: Fracture/Dislocation Visits
•	Visit Cadaa	Selected codes from each section:
Visit Codes		
		ng & Splinting Codes
3	Required X-Ray/	
		Visit Codes
	nt/Initial Visit Cod 9245 or 99201-992	
		blinting Codes encompassed) to be used only with fracture diagnoses
Troccuu	(Custing & S	which is the one of the set of th
Bone(s)	Procedures	
Scapula	23570	
Clavicle	23500	
Phalanges	26720, 26725, 2908	36, 29130, 29085
Metacarpals	29075, 29125, 2660	0, 26605
Carpals	25600, 25630, 2560	05, 29075 , 29125 , 29065 , 29105
Radius Radius/Ulna	25500, 25560, 2560)5, 25660, 29065, 29075, 29105, 29125
Ulna	25530, 25535, 2560	00, 29065 , 29075 , 29105, 29125
Humerus	24500, 24505, 2453	30, 29058 , 29065 , 29075 , 2910 5
Elbow	24530, 24670, 290	
Metatarsals & Phalanges	29425, 28470, L32	50, L3265, 29405
Femur (Adult)	29345, 29355, 2940)5
Femur (Peds)	27238, 27240, 2940	5
Patella	27530, 29345, 293	55, 29405
Tibia	27750, 29345, 293	55, 29405
Fibula	27780, 29345, 29355, 29405, 29425	
Tarsals	29405, 29425, 27760, 29405	
Ankle (post-op only)	29425, 29355, 293	
		Required Radiology Codes
Bone/Body Reg		Radiology Code(s) *ranges are all-inclusive:
	capula & Clavicle ne (Back & Neck)	*73000-73050 *72010-72120, *72200-72220, *72040-72052
1	irdle (Hip/Pelvis)	72010-72120, *72200-72220, *72040-72032
		$*73000-73140(range x3)^2$, 77071, 77072
		*73551-73660, 77071, 77072, 77073

Important Notes:

- All codes are applicable for new patients. Bolded codes are required for 1st Post-Op Appointments.
- Patients coming from another facility need to hand carry any previous X-Rays and have Radiology codes authorized for time of service.
- Always range new patients for visit and radiology codes.
- 2. All New Patients- Upper Extremity X-rays, request entire range x3 to meet current standard of practice.



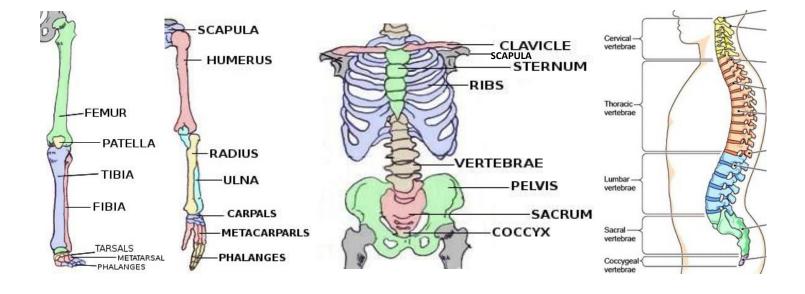
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For the following,	Clinic
	Surgery, ENT (Dr. Ardeshirpour, ENT Facial Plastic Surgery)
Jaw Fractures	Surgery, Oral Surgery
	Dentistry - Oral & Maxillofacial Surgery
Osteoporosis	Osteoporosis
Rheumatology	Rheumatology
Pigeon Chest/Pectus Excavatum/ Pectus Carinatum	Surgery, Pediatrics
Rib Fractures	PCP





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Additional Internal Reference Information:

- No auth is required for Pre-op or Post Op appointments unless x-ray or casting codes are needed. X-rays and/or other radiology tests ordered for a post op visit are not covered under the global period and an authorization must be obtained for the additional tests (except for LLU Managed Care Plans, X-Rays are covered under the global period). If an x-ray or casting is needed, send CRM to clinic to have referral shell dropped (look into chart on last note to see if x-ray is required). Log CRM as: Other/Referral Coordinator
- For all HMO's for the first Post-Op visit, always send a CRM to clinic if there is no referral shell to verify that no additional codes are needed. Log CRM as: Other/Referral Coordinator
- If X-ray and/or radiology procedures are redirected in network by payor please notify clinic ASAP so they can inform the patient.
- If a referral has been assigned to or is in process by either Gabby Tellez or Tasa Cash please do not process the referral. The clinic will be responsible for obtaining the authorization. Please continue to complete all registration fields and mark the "Auth required" field in LLEAP as "clinic responsible.



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Some Medical Groups do not approve ranged odes so here are all codes in between the ranged codes that would need to be approved.

Upper Extremities (73000-73140)x3, 77071, 77072

<u>Adult & Peds:</u> 73000 x3, 73010 x3, 73020 x3, 73030 x3, 73040 x3, 73050 x3, 73060 x3, 73070 x3, 73080 x3, 73085 x3, 73090 x3, 73092 x3, 73100 x3, 73110 x3, 73115 x3, 73120 x3, 73130 x3, 73140 x3, 77071, 77072

Lower Extremities (73551-73660)

73551, 73552, 73560, 73562, 73564, 73565, 73580, 73590, 73592, 73600, 73610, 73615, 73620, 73630, 73650, 73660, 77071, 77072, 77073

Scapula & Clavicle (73000-73050)

73000, 73010, 73020, 73030, 73040, 73050

Spine- Back & Neck (72082-72120) (72200-72220) (72040-72052)

72082, 72083, 72084, 72100, 72110, 72114, 72120, 72200, 72202, 72220, 72040, 72050, 72052

Pelvic Girdle- Hip/Pelvis 72170, 72190 (72200-72220) (73501-73525)

72170, 72190, 72200, 72202, 72220, 73501, 73510, 73520, 73525

Leg Length Discrepancy (72170-72190) (73500-73660) 77072, 77073 (72200-72220)

72170, 72190, 73500, 73510, 73520, 73525, 73530, 73540, 73560, 73562, 73564, 73565, 73580, 73590, 73592, 73600, 73610, 73615, 73620, 73630, 73650, 73660, 77072, 77073, 72200, 72202, 72220