



Date: 11/8/06

Medi-Cal

Provider Notice: #0069

Subject: Pancreas Transplant Procedures Assigned Billing Codes

Effective retroactively for dates of service on or after 1/1/05, pancreas transplants are a Medi-Cal benefit. Billing procedures have been established for pancreas procurement, pancreas transplant and removal of transplanted pancreatic allograft.

A. Inpatient Facility Providers

Inpatient providers should bill pancreas transplants using the following combination of national revenue codes and ICD-9 procedure codes:

- Revenue code 201 (intensive care, surgical) or revenue code 203 (intensive care, pediatric)
- ICD-9 procedure code 52.80 (pancreatic transplant, not otherwise specified)

Note: A PHC approved TAR is required for all inpatient services.

B. Procurement

Inpatient facility providers procuring a pancreas may bill for the donor pancreatectomy using CPT-4 code 48550 (donor pancreatectomy, with preparation and maintenance of allograft from cadaver donor, with or without duodenal segment for transplantation). Providers should bill using a separate claim and the Outpatient provider number. A PHC approved TAR is required for these procedures and an invoice from an Organ Procurement Organization (OPO) must be attached to the claim.

C. Physician Services

Physician services for the pancreas transplant should be billed using CPT-4 code 48554 (transplantation of pancreatic allograft). A PHC approved inpatient TAR is required.

D. Removal of Transplanted Pancreatic Allograft

Providers may bill for the removal of a transplanted pancreas with CPT-4 code 48556 (removal of a transplanted pancreatic allograft). A PHC approved inpatient TAR is required.