



Date: 5/8/19

Medi-Cal

Important Provider Notice: #349

Subject: 20% Rate Reduction on Certain Codes When Performed in Outpatient Location-Reminder

Just a reminder – Codes designated with an asterisk (*) below may be subject to a 20% rate reduction when performed in an outpatient location place of service 22.

<u>Code</u>	<u>Service</u>	<u>Conversion Factor</u>	
		<u>By Age of Recipient †</u>	
		<u>0 – 17 years</u>	<u>18+ years</u>
Evaluation and Management (E&M), Medicine			
See <i>Table 1</i> , on a following page.....	Primary Care I.....	\$10.91 *	\$10.00 *
See <i>Table 2</i> , on a following page.....	Primary Care II.....	10.91 *	10.00 *
Primary Care I & II services with Place of Service "23" (CMS-1500) or facility type "14" with admit type "1" (UB-04).....	Primary Care I and II in ER.....	12.42	12.42
99281 – 99285 and most other codes with Place of Service "23" (CMS-1500) or facility type "14" with admit type "1" (UB-04).....	Other Medicine in ER	1.04	1.04
99381 – 99384, 99391 – 99394	Well Child Visits	1.21	N/A
Z0100 – Z0108, Z0301 – Z0314 , Z1032 and most other Medicine, E&M codes.....	Other Medicine, E&M	0.82 *	0.82 *
S0265.....	Other Medicine	1.00	1.00

<u>Code</u>	<u>Conversion Factor Service</u>	<u>All Ages †</u>
Surgery		
58600, 58605, 58611, 58615	Tubal Sterilizations	\$55.74
56405 – 58999 (except tubal sterilizations)	GYN Surgery	50.67 *
59000 – 59350, 59870, 59871, 59899	Other OB	50.67 *
59400, 59409, 59414, 59610, 59612	OB (vaginal delivery)	120.15
59510, 59514, 59525, 59618, 59622	OB (cesarean section)	82.16
59812 – 59830, 59841, 59852, 59857	Abortion	37.23
59840 (regardless of Place of Service)	Abortion	26.35 *
59850, 59851, 59855, 59856 (regardless of Place of Service)	Abortion	34.46
Other surgery codes with Place of Service "23" (CMS-1500) or facility type "14" with admit type "1" (UB-04)	Emergency Room	46.95
10000 – 55999, 60000 – 69999	Other Surgery	37.23 *

* Procedures performed in a hospital outpatient department (Place of Service "22" on the CMS-1500 claim and facility type "13" on the UB-04 claim) are subject to 20 percent reduction of the maximum allowable where appropriate.

Primary Care Procedure Codes

90951 – 90966	99201 – 99205	99291	99341 – 99345
90967 – 90970	99211 – 99215	99292	99347 – 99351
91105	99221 – 99223	99304 – 99309	99429
94772	99231 – 99233	99315	99460 – 99462
95115	99238	99316	99464
96110	99239	99334 – 99336	99465

Table 1. Procedures Considered "Primary Care I" for Reimbursement.

91100	94642 – 94645	95056	96116
92551 – 92553	94660 – 94668	95060	96360
92555	95004	95065	99360
92556	95017	95070	96361
92587	95018	95071	99241 – 99245
92950	95024	95076	99251 – 99255
94002	95028	95079	99354 – 99357
94003	95044	95180	
94640	95052	95199	

Table 2. Procedures Considered "Primary Care II" for Reimbursement.

Additional information regarding this rate reduction, please see the Medi-Cal website at www.medi-cal.ca.gov.