

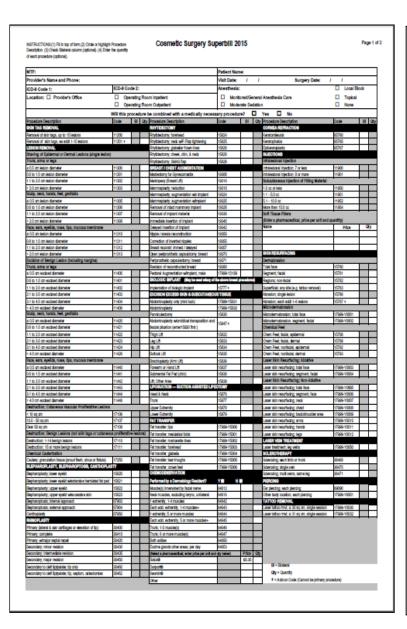
The DHA Elective Cosmetic Surgery Superbill lists CPT*/Procedure codes for all elective cosmetic procedures available in the MHS. The Superbill is completed by you, the provider, and used by MSA staff to enter data into the Cosmetic Surgery Estimator (CSE) to generate a cost estimate. The Superbill is prepared and distributed by the DHA UBO Program Office. Use of alternate Superbills is not authorized.

Your MTF's UBO office will provide you with a supply of new Elective Cosmetic Surgery Superbills to be used in accordance with the CSE v11 (Effective date July 1, 2015).

2015 Elective Cosmetic Surgery Superbill

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		Repair, full thickness; vermilion only	40650		Intermed; 5.1 cm to 7.5 cm	12053	
.eFof wforehead advancement, bone graft & Lefot 2116		Repair, full thickness; a half vertical height	40002		Intermed, 7.6 cm to 12.5 cm	12054	
Record superior internal orbital rim & for forehead 2117		Repair, full thickness; > half vertical height	40054 17009-Y5004		Intermed; 12.6 cm to 20.0 cm	12055	$-\!\!-\!\!\!-$
Record; superior lateral orbital rim & her torehead 2117. Records: bifrontal, superior lateral orbital rim & her torehead 2117.		Lip Augmentation, upper or lower, unpaired ICCLR (in CVC)	17691304	_	Intermed; 20 f on to 30 cm Intermed over 30 cm	12056	-
Record; entire or majority forehead wislografts 2117			17300		Trunk	Tener	
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Recorat; contouring of cranial bones, extracranial 2110		Laser hair removal; (b), fingers, or loss	17999-19020		Complex; 2.6 cm to 7.5 cm	13101	
Recorat, orb wells, rins, foreless, whose grif < 40 sq.cm 2116		Laser heir removal; lip and chin	17999-10021		Complete, se add 5 cm or less	13102+	$\overline{}$
Record of wells, fine, foreless, whose gift 41-75 sq.cm 2110. Record of wells, fine, foreless, whose gift 40 sq.cm 2110.		Laser heir removal; back	17999-10022		Scalp, arms, and for legs	linear I	_
Reconst orbivals, rins, foreived, whose grit > 80 sq.cm 2116 Reconst Midface, not LePort type 2116		Laser hair removal; arms Laser hair removal; underarms	17999-Y0023 17999-Y0024	_	Complex; 1.1 cm to 2.5 cm Complex; 2.6 cm to 7.5 cm	13120	-
Defactory		Lawr hair removal; blich	17999-19025		Complex; ex add 5 cm or less	131224	_
Ostaciomy, mandida, segmental 2119	20	Law his removal legs	17999-10025	_	Forehead, cheeks, chin, mosth, neck, sollar	s, hands, fee	e
Delectorry, wigening/cosus advancement 2119		Laser heir removal; beerd	17999-19007		Complex; 1.1 cm to 2.5 cm	13131	
Ostectomy; segmental (e.g., wassmund, schuchard) 2120		Laser heir removal; ears	17999-Y0026		Complex; 2.6 cm to 7.5 cm	13132	
Deleoplasty; facial bones; augmentation 2120		HAIR TRANSPLANT			Complex; ea add 5 cm or less	13133+	
Deleoplanty; facial bones; reduction 2120	09	Punch transplant; 1-15 hair grafts	15775		Dyelids, nose, ears and/or lips		
uran Smf, bone, male/maxille/rensi augmentation 2121	wa	Wore than 15 punch helt grafts Wicro / mini grafts; 1-500 halm	15776	_	Complex; 1.0 cm or less Complex; 1.1 cm to 2.5 cm	13150	$-\!\!-\!\!\!-\!\!\!\!-$
Set, bons, mandble (incignet) 2121		2013 SUCA OTHER COLUMN	1786-12/12		Complex; 2.6 cm to 7.5 cm	13151	-
Seef, doing management proc green 2123		Trunk, arms, legs			Complex es add 5 cm or less	13153+	_
Seef, ear cartilage to nose or ear 2123		Woundares at 100 agon; first 25 agon	15271		Wound Closure	-	
Arthroplasty			15272+		Superficial wound dehistorical, simple close	12020	
Attropiaty, TMJ, willow load autopt		Wound area is 100 sq cm; first 100 sq cm	15273		Superficial wound dehistornor, wipacking	12021	
Athropiasty, TMJ, wislograft 2124		Wound area is 100 sq.cm; ea addf 100 sq.cm	15774+ bils, hands, fe		2nd closure surg wound; extensive	13150	
Athropiasty, TMJ, wiprosthetic joint replacement 2124	6		15275	•	DOM: AL	09972	
igation of long sight win @ sightworkmont jund 3770	m .	Wound area a 100 sq.cm, tine 25 sq.cm Wound area a 100 sq.cm; ea add 25 sq.cm	15276+	_	Doesel Beaching peranth Doesel Beaching perboth	09973	_
Shori suph veins 3771		Wound area is 100 ag cm; first 100 ag cm	15277	_	Internal Directing per tooth	79974	_
long suph veins; to knee or below 3772		Wound area is 100 agon; ea add 100 agon			Laser Whitering, per treatment	39990	
	99-Y3779	DIOLOGIC IMPLANT			OTHER SUPPLES		No Cty
Stab phiebectomy, one extremity 10-20 stab incisions 3776		filey be used of any of the above side good proces	Acres)		Name:		\Box
Stab phiebedomy, one-extremity XIII-stab Incisions 3776	96	Implantation of biologic Implant	15777 +		Name:		\Box
Other Facial Reconstruction or Revision		PHARMACEURICAL ONLY		Palos City	Name:		\dashv
Recorat, aggranatic arch & gian foss whome 2125 Recorat, orbit wischecomial catedomies 2125		Name: INDUSTRIBUTE LYCHLY	19090	May 100	Name:	-	\dashv
Vertorb orderlomier, estacranial vigraft 2129		Name	0999		D = Distant		——
Periorb oriectonies, echa l'intracerial 2126					Oty - Quently		
		•			+ - Addion Code (Carnol be primary pro	(eubec	

Cosmetic Surgery Superbill Header

INSTRUCTIONS:(1) Fill in top of form.(2) Circle or highlight Description. (3) Check Bilateral column (optional). (4) Enter of each procedure (optional).			Page 1 o
MTF:		Patient Name:	
Provider's Name and Phone:		Visit Date: / / Surgery Date:	1 1
ICD-9 Code 1: 3	ICD-9 Code 2: 4	Anesthesia:	☐ Local Block
Location: Provider's Office	☐ Operating Room Inpatient	☐ Monitored/General Anesthesia Care 8	□ Topical
	☐ Operating Room Outpatient	☐ Moderate Sedation	□ None
	Will this procedure be combined with a medically necess	ary procedure? Yes No	

- 1. **MTF:** Print the name of the MTF where the elective cosmetic surgery procedure(s) selected will be performed.
- 2. **Provider's Name and Phone:** Print your full name and office phone number.
- 3. **ICD-9-CM Code 1:** For all elective cosmetic procedures, the first listed diagnosis code must be from the V50.X series. For example:
 - V50.0 Hair transplant
 - V50.1 Other plastic surgery for unacceptable cosmetic appearance
 - V50.3 Ear piercing
 - V50.8 Other
- 4. **ICD-9-CM Code 2:** Enter a second ICD-9-CM code when applicable.
- 5. **Location:** Select one of the following procedure locations:
 - Provider's Office
 - Operating Room—Inpatient
 - Operating Room—Outpatient
- 6. **Patient Name:** Print the patient's full name.
- 7. Visit Information: Enter the elective cosmetic surgery consultation visit date and surgery date, if known.
 - Enter dates using the format: MM/DD/YYYY.
 - Consultation visit and surgery dates are used by the MSA clerk for post-procedure verification. Surgery cannot be performed without prior payment.
- 8. **Anesthesia:** Select one of the following anesthesia options:
 - Topical
 - Local
 - Moderate Sedation
 - General/Monitored Anesthesia Care
 - None
- Combined with Medically Necessary Procedure: Indicate here whether or not the elective cosmetic
 procedure(s) selected will be performed during the same surgical encounter as a medically necessary
 procedure.

Superbill Columns

	6	
Procedure Description	Code	Bi Qty
SKIN TAG REMOVAL		
Removal of skin tags, up to 15 lesions	11200	
Removal of skin tags, ea addl 1-10 lesions	11201 +	
LESION REMOVAL		
Shaving of Epidermal or Dermal Lesions (single	e lesion)	
Trunk, arms or legs		
≤ 0.5 cm lesion diameter	11300	
0.6 to 1.0 cm lesion diameter	11301	
1.1 to 2.0 cm lesion diameter	11302	
2.0 cm lesion diameter	11303	

Please highlight or circle the procedure(s) selected.

- 10. **Procedure Description:** Abbreviated procedure descriptions based on official American Medical Association (AMA) CPT® descriptions are provided on the Superbill. Your MTF's UBO can provide you with a copy of the Cosmetic Surgery Estimator (CSE) v11.0 Glossary- July 2015 for more detailed procedure descriptions.
- 11. Code: Where applicable, AMA CPT® codes are used to refer to elective cosmetic procedures.
 - However, some elective cosmetic procedures do not have an official CPT® code assigned to them. To generate pricing for these procedures, DHA UBO Y-codes are used to identify these procedures in the CSF
 - DHA UBO Y-codes use the format: 17999-YXXXX.
- 12. Bilateral: Specify, where applicable, whether or not a procedure will be performed bilaterally.
 - ☐ = White boxes indicate procedures that are available for bilateral pricing. Enter an "X" or "✓" in the box provided to indicate a bilateral procedure.
 - Grey boxes indicate that the bilateral option is not available. If multiple quantities are required, enter the number of procedures required in the "Qty" column.
- 13. **Quantity:** Specify, where applicable, the quantity or number of sessions required for each procedure.
 - White boxes indicate procedures that can be priced in multiple quantities or generally require more than 1 session for optimal results. Enter the appropriate quantity or number of sessions in the box provided.
 - Grey boxes indicate procedures that are generally performed with a quantity of 1 and do not require multiple sessions.



Provider's Guide to the Elective Cosmetic Surgery Superbill

CHEMODENERVATION

1 extremity, 1-4 muscles

Trunk; 1-5 muscle(s)

Trunk; 6 or more muscle(s)

Eccrine glands other areas, per day

(Select a pharmaceutical, enter price per unit and qty below)

erformed by a Dermatology Resident?

Neck muscles, excluding larynx, unilateral

Each add. extremity, 5 or more muscles+

Muscle(s) innervated by facial nerve

Each add. extremity, 1-4 muscles+

1 extremity; 5 or more muscles

Υ

64612

64616

64642

64643

64644

64645

64647

64650

64653

N

\$5.35

Instructions for Specific Procedures

Injections of Chemodenervation Agents

- Special pricing is available when a chemodenervation procedure is performed by a Dermatology resident physician. Indicate here whether or not the chemodenervation procedure selected will be performed by a Dermatology resident.
- In the 2014 version of the CSE, codes 64613 (chemodenervation of muscle(s); neck muscle(s) (e.g., for spasmodic torticollis, spasmodic dysphonia) and 64614 (chemodenervation of muscle(s); extremity(s) and/or trunk muscle(s) (e.g., for dystonia, cerebral palsy, multiple sclerosis) were replaced with more specific codes (64616 through 64

scierosis, were replaced with more specific codes (04010 till odg)	DOTONO		40.00	1
64647). Select the appropriate code from the list.	Dysport®		1	
, , , , , , , , , , , , , , , , , , , ,	Xeomin®			
	Other			
Chemodenervation procedures require billing for the professional service as well as the pharmaceutical used. In addition to selecting the	2015 Cosmetic Surgery Supcode for procedure to b			d,
please select the pharmaceutical that will be used and enter the numb	er of units required in t	he "Qty'	,	
column. MSA staff will obtain the price per unit from the pharmacy and	d enter it into the CSE to	o genera	te a	
price estimate. Botox® is priced at \$5.35/unit and the price is prepopul	ated in the Superbill.			

• If a pharmaceutical other than Botox® or Dysport® is used, select "Other" and write in the name of the pharmaceutical that will be used. This information will be included on the cost estimate report provided to the patient.

Subcutaneous Injections of Filling Material

• Subcutaneous injection procedures require billing for the professional service, as well as the pharmaceutical used. Please write the pharmaceutical that will be used and enter the number of units required in the "Qty" column. MSA staff will obtain the price per unit from the pharmacy and enter it into the CSE to generate a price estimate.

Procedure Description	Code	Bi	Qty
INJECTIONS			
Intralesional Injection			
Intralesional Injection; 7 or less	11900		
Intralesional Injection; 8 or more	11901		
Subcutaneous Injection of Filling Mate	rial		
1.0 cc or less	11950		
1.1 - 5.0 cc	11951		
5.1 - 10.0 cc	11952		
More than 10.0 cc	11954		
Soft Tissue Fillers			
Enter a pharmaceutical, price per unit	and quantity)		
Name	Price	(lty
		\neg	

2015 Cosmetic Surgery Superbill (pg.1)



Hair Transplants

- Micro/mini hair grafts (procedure code 17999-Y5775) are priced in blocks of 500 hairs. Enter the quantity based on blocks of 500 hairs.
- For example:
 - 501 hairs would be entered as a quantity of 2
 - 1,001 hairs would be entered as a quantity of 3.

Procedure Description	Code	Bi	Qty
HAIR TRANSPLANT			
Punch transplant; 1-15 hair grafts	15775		
More than 45 punch hair grafts	15770		
Micro / mini grafts; 1-500 hairs	17999-Y5775		

2015 Cosmetic Surgery Superbill (pg.2)

Biologic Implants

• 15777 (implantation of biologic implant) is an add-on code that may be used with any of the skin substitute graft procedures and/or the 14 breast procedures listed below:

Procedure Description	Code	Bi	Qty
BREAST / CHEST AUGMENTATION			
Mastopexy (Breast Lift)	19316		
Mammaplasty; reduction	19318		
Mammaplasty; augmentation w/o implant	19324		
Mammaplasty; augmentation w/implant	19325		
Removal of intact mammary implant	19328		
Removal of implant material	19330		
Immediate insertion of implant	19340		
Delayed insertion of implant	19342		
Nipple / areola reconstruction	19350		
Correction of inverted nipples	19355		
Breast reconstr; immed / delayed	19357		
Open periprosthetic capsulotomy; breast	19370		
Periprosthetic capsulectomy; breast	19371		
Revision of reconstructed breast	19380		
BIOLOGIC IMPLANT (May be used w/any	of the above bre	ast proce	dures)
Implantation of biologic implant	15777 +		

2015 Cosmetic Surgery Superbill (pg.1)

Procedure Description Code Bi Qty SKIN SUBSTITUTE GRAFT Trunk, arms, legs Wound area ≤ 100 sq cm; first 25 sq cm Wound area ≤ 100 sq cm; ea add'l 25 sq cm | 15272 + Wound area ≥ 100 sq cm; first 100 sq cm 15273 Wound area ≥ 100 sg cm; ea add'l 100 sg cm 15274 + Face, scalp, eyelids, mouth, neck, ears, genitalia, hands, feet Wound area ≤ 100 sq cm; first 25 sq cm 15275 Wound area ≤ 100 sq cm; ea add'l 25 sq cm | 15276 + Wound area ≥ 100 sq cm; first 100 sq cm Wound area ≥ 100 sq cm; ea add'l 100 sq cm 15278 + BIOLOGIC IMPLANT (May be used w/ any of the above skin graft procedures) Implantation of biologic implant

2015 Cosmetic Surgery Superbill (pg.2)

Pharmaceutical or Implant/Supply Only

- Please complete this section of the Superbill when a cost estimate for pharmaceuticals, implants, or supplies is required without a corresponding procedure.
- Enter the name and quantity of the item needed in space provided. MSA staff will obtain the price per unit and enter it into the CSE to generate a price estimate.

PHARMACEUTICAL ONLY	-	Price	Qty
Name:	J9999		
IMPLANT/SUPPLY ONLY		Price	Qty
Name:	C9999		

2015 Cosmetic Surgery Superbill (pg.2)



Additional Information

Global Periods

Cosmetic surgery global periods refer to the time frame immediately following surgery during which routine post-operative follow-up care (e.g., replacing stitches or treating infected wounds) is provided without additional charge to the patient. Professional services related to the original procedure should not be re-coded during the global period. Instead, CPT® code 99024 is used for a post operative visit to indicate that an evaluation and management service was performed related to the original procedure. CPT® code 99024 does not generate professional or facility fees for the patient. However, all additional implants, pharmaceuticals, and separately billable supplies utilized during the global period must be billed to the patient at the full reimbursement rate.

Most cosmetic surgeries have a global period of 0, 10, 30, or 90 days. Ninety day global periods are assigned to major surgeries and 10 day global periods are assigned to minor surgeries. Procedures that have a global period of 0 days are not subject to the global period packaging and applicable rates would apply to the procedure for every date of service performed. Laser tattoo removal procedures (17999-Y0030-Y0033) have global periods of 30 days.

Post-operative global periods start the first day following surgery. All post-operative care/services provided are included in the global package if they do not require additional trips to the operating room.

Note: This rule does not apply if the visit is for a problem unrelated to the diagnosis for which the surgery was performed or is for an added course of treatment other than the normal recovery from surgery.

-TRICARE Reimbursement Manual 6010.58-M, Chapter 1, Section 16

Example:

Most chemodenervation procedures have a 10-day global period. There should be no additional professional fee for "touch-ups" performed during this period. However, there is a charge for any additional pharmaceutical used. The Cosmetic Surgery Superbill should be completed to indicate the additional units of pharmaceutical required and MSA staff will generate a cost estimate report for the patient.

Complications from Surgery

Benefits are available for the otherwise covered treatment of complications resulting from a non-covered surgery or treatment <u>only</u> when the complication represents a medical condition separate from the condition that the non-covered treatment or surgery was directed toward, and treatment of the complication is not essentially similar to the non-covered procedure.

A complication may be considered a separate medical condition when it causes a systemic effect, occurs in a different body system from the non-covered treatment, or is an unexpected complication which is untoward based upon prior clinical experience with the procedure.

Exclusions:

- 1. The complication occurs in the same body system or the same anatomical area of the non-covered treatment; and
- 2. The complication is one that commonly occurs.

An example of a complication that commonly occurs is one that occurs often enough that it is ordinarily disclosed during the process of informed consent.



Standard Cosmetic Surgery Process

Step 1: Consultation

The patient will contact you to schedule a consultation. At the consultation, determine if the procedure is medically necessary or elective cosmetic. If the surgery is determined elective cosmetic, complete and provide the patient with a Cosmetic Surgery Superbill 2015. **New to 2015: There is a provider version of the CSE available for use and download. Please contact your MSA representative for information and download instructions.** For CSE assistance, please reference the User Guide available in the CSE using the F5 command.

Step 2: Procedure Estimate and Payment

The patient presents the completed Cosmetic Surgery Superbill to the MSA office. The MSA clerk enters the information from the completed Superbill into the Cosmetic Surgery Estimator and generates an estimated bill of the total cost of the procedure(s) for the patient. If the patient chooses to undergo the procedure(s), he or she must pay for all services, in full, prior to scheduling the procedure(s). In addition to paying for the procedure(s), the patient is required to sign a letter of acknowledgment before the surgery can be scheduled and performed. In the letter of acknowledgment, the patient agrees to pay for any additional fees for services rendered, such as laboratory, radiology, and pharmacy, as well as unforeseen, but necessary, procedures undertaken during the procedure. Upon receipt of the signed letter of acknowledgment, the MSA clerk can notify you that payment has been received.

Step 3: Schedule and Undergo Procedure

The patient presents the receipt provided at the MSA office to the Surgery Clinic. The procedure is scheduled and performed.

Step 4: Post-Procedure

After the procedure is completed, the MSA clerk reviews the documentation of the event to ensure that paid procedures were performed and to determine whether additional or alternate procedures were performed. The patient is responsible for any additional fees incurred. If no additional procedures, services, or supplies were performed or used, no additional bill will be generated.