ASC Groupers

Purpose

This policy is intended to ensure correct provider reimbursement and serves only as a general resource regarding Molina Healthcare's reimbursement policy for the services described in this policy. It is not intended to address every aspect of a reimbursement situation, nor is it intended to impact care decisions. This policy was developed using nationally accepted industry standards and coding principles. In a conflict, federal and state guidelines, as applicable, and the member's benefit plan document supersede the information in this policy. Also, to the extent of conflicts between this policy and the provider contract language, the Provider contract language will prevail. Coverage may be mandated by applicable legal requirements of a State, the Federal government or the Centers for Medicare and Medicaid Services (CMS). References included were accurate at the time of policy approval. If there is a state exception, please refer to the state exception table listed below.

Policy Overview

Ambulatory Surgery Grouper

Paid as Surgical when billed with Revenue Codes 360 or 490.

In addition to the above, if surgical services are billed with revenue codes other than those listed above and the claim contains charges for anesthesia and/or recovery room, claim will be priced according to surgical contracted rates unless otherwise negotiated.

To review a list of codes, per CMS, please review the reference link below.

Please Note: ALL Claims for ASC services should be billed with a CMS 1500 form.

Supplemental Information

Definitions

State Exceptions

State	Exception

Documentation History

Type	Date	Action

Initial Creation Date	4/2018	Original Policy Effective Date
Revised Date	3/2019	Reformatted and reorganized policy, transferred content to new template with new Reimbursement Policy Number Revised Effective 1/1/2019; updated to include 2019Groupers
Revised Date	12/2019	Updated to include 2020 Groupers
Revised Date	9/2020	Updated to include new codes effective 7/1/2020: C9759, C9760, C9764, C9765, C9766 & C9767
Revised Date	10/2020	Updated to include new codes effective 10/1/2020: C9761 & C9769
Revised Date	1/2021	Updated to include new codes effective 1/01/2021: 32408, 33741, 33745, 33746, 33995, 33997, 55880, 57465, C1062, C9770, C9772, C9773, C9774 & C9775. Updated to indicate Deleted Codes Effective 1/01/2021: 19324, 19366, 32405, 58293, 69605 & 0396T
Revised Date	4/2021	Reviewed; no updates with the CMS Code List updates effective 4/01/2021
Revised Date	7/2021	Updated to include new code effective 7/01/2021: C9778
Revised Date	9/2021	Updated to include new codes effective 7/01/2021: 0652T, 0653T & 0654T
Revised Date	9/30/2021	Updated to include new codes effective 10/01/2021: C9779 & C9780
Revised Date	12/20/2021	Updated to include new codes effective 1/01/2022: 0671T, 0699T, 42975, 43497, 61736, 61737, 63052, 63053, 64582, 64583, 64584, 64628, 64629, 66989, 66991, 68841, 69716, 69719, 69726 & 69727 Updated to indicate deleted codes effective
Revised Date	3/25/2022	Updated to include new codes effective 4/01/2022: C9782 and C9783 Updated groupers for following Jan 2022 codes effective 4/01/2022: 0671T, 0699T, 42975, 43497, 61736, 61737, 64582, 64583, 64584, 64628, 66989, 66991, 68841, 69716, 69719, 69726 and 69727
Revised Date	6/28/2022	Updated to include new codes effective 7/01/2022: G0308, G0309 Updated groupers for following codes effective 7/01/2022: C9780 and C9781
Revised Date	12/27/2022	Updated to include new codes effective 1/01/2023: 15778, 15853, 15854, 22860, 30469, 33900, 33901, 33902, 33903, 33904, 36836, 36837, 43290, 43291, 49591, 49592, 49593, 49594, 49595, 49596, 49613, 49614, 49615, 49616, 49617, 49618, 49621, 49622, 49623, 55867, 69728, 69729, 69730, C7500, C7501, C7502, C7503, C7504, C7505, C7506, C7507, C7508, C7509, C7510, C7511, C7512, C7513, C7514, C7515, C7530, C7531, C7532, C7534, C7535, C7537, C7538, C7539, C7540,

		C7541, C7542, C7543, C7544, C7545, C7546, C7547, C7548, C7549, C7550, C7551, C7554 and C7555 19 Codes updated with new Code Description effective 1/01/2023 27 codes updated – Deleted Effective 1/01/2023: 0312T, 0313T, 0314T, 0315T, 0316T, 0317T, 15850, 49560, 49561, 49565, 49566, 49568, 49570, 49572, 49580, 49582, 49585, 49587, 49590, 49652, 49653, 49654, 49655, 49656, 49657, G0308 and G0309
Revised Date	6/20/2023	Updated to include new codes effective 7/01/2023: C9784 and C9785 Updated to include Cardiac Cath codes effective 7/01/2023: 93451, 93452, 93453, 93454, 93455, 93456, 93457, 93458, 93459, 93460, 93461, 93462, 93463, 93464, 93503,
Revised Date	9/21/2023	Updated to include new code effective 10/1/2023: C9789
Revised Date	12/2023	Reformatted and reorganized policy, transferred content to new template with new Reimbursement Policy Number
Revised Date	1/2024	Updates with **effective date 1/1/2024:** Updated grouper assignment for CPT code 43774 from ‘7’ to ‘6’ in the ASC Grouper table Added new codes: 22836, 22837, 22838, 27278, 31242, 31243, 33276, 33277, 33278, 33279, 33280, 33281, 33287, 33288, 52284, 58580, 61889, 61891, 61892, 64596, 64597, 64598, 67516, C7556 and C7557 Updated to include the following codes: 27090, 27091, 27120, 27125, and 27488 Updated to include “T” codes: 0054T, 0055T, 0100T, & 0184T Updated to indicate deleted codes: 0404T & C9770
Revised Date	3/25/2024	Updated to include new codes **effective 1/1/2024**: C9796 and C9797 o Per CMS update, effective date of 4/1/2024 was retroactively changed to 1/1/2024
Revised Date	7/1/2024	Updated groupers for the following codes **effective 7/01/2024**: 31242, 31243, 33276, 33278, 33279, 33280, 33281, 33287, 33288, 58580, 61891, 64596, 64597, 64598
Revised Date	10/1/2024	Reviewed; no updates with the CMS Code List updates effective 10/1/2024
Revised Date	1/2025	Updates with **effective date 1/1/2025:** Added new codes: 15011, 15012, 15013, 15014, 15015, 15016, 15017, 15018, 25448, 38225, 38226, 38227, 38228, 49186, 49187, 49188, 49189, 49190, 51721, 53865, 53866, 55881, 55882, 60660, 60661, 61715, 64466, 64467, 64468, 64469, 64473, 64474, 66683, C7562, C7563, C7564, C7565, C8003 Updated to indicate *deleted codes* **effective 1/01/2025**: 15819, 49203, 49204, 49205, 51030, 54438, C7558, C9769
Revised Date	4/8/2025	Transferred policy content to individual company-branded template. No changes to policy title or policy number.

Revised Date	7/25/2025	Reviewed; no updates with the CMS Code List updates effective 7/1/2025
Revised Date	10/13/2025	Policy criteria are *not applicable* to Exchange and Medicare Advantage Plans for dates of service on or after **January 1, 2026**. Reviewed; no updates with the AMA/CMS Quarterly Code List updates effective 10/1/2025.
Revised Date	1/12/2026	Linked CMS ASC Surgery codes and removed pages of codes.
Revised Date	5/11/2026	Adding hyperlink for supporting revenue codes. Updated template.

References

References This policy was developed using:

- CMS
- State Medicaid Regulatory Guidance
- State Contracts

Reference	Link
CMS	ASC Payment Rates
Noridian	Revenue Codes

***CODING DISCLAIMER**. Codes listed in this policy are for reference purposes only and may not be all-inclusive. Deleted codes and codes which are not effective at the time the service is rendered may not be eligible for reimbursement. Listing of a service or device code in this policy does guarantee coverage. Coverage is determined by the benefit document. Molina adheres to Current Procedural Terminology (CPT®), a registered trademark of the American Medical Association (AMA). All CPT codes and descriptions are copyrighted by the AMA; this information is included for informational purposes only. Providers and facilities are expected to utilize industry standard coding practices for all submissions. When improper billing and coding is not followed, Molina has the right to reject/deny the claim and recover claim payment(s). Due to changing industry practices, Molina reserves the right to revise this policy as needed.*