



February 27, 2017

Announcement 1317

Attention Provider Types 10 and 46:

Bill Corneal Procurement with Code V2785; Letter of Agreement No Longer Required

Update to [Web Announcement 1018](#): Effective with dates of service on or after April 1, 2016, provider types 10 (Outpatient Surgery, Hospital Based) and 46 (Ambulatory Surgery Centers) may bill Corneal Procurement with procedure code V2785 (Corneal tissue processing). The all-inclusive facility procurement rate is \$2,500. To receive the reimbursement rate for Corneal Procurement, the facility is required to obtain a prior authorization (PA) from Medicaid's QIO-like vendor (Hewlett Packard Enterprise) for the Corneal Transplant. Effective with dates of service on or after April 1, 2016, a letter of agreement (LOA) from the Division of Health Care Financing and Policy (DHCFP) is no longer required.

Previously paid claims submitted by provider types 10 and 46 for procedure code V2785 with dates of service on or after April 1, 2016, and before March 6, 2017, will be automatically reprocessed to pay the new rate. A future web announcement will notify providers when the affected claims will be reprocessed.