

Arthroscopic, Endoscopic, and other Non-Endoscopic Scope Procedures Payment Policy

MVP Health Care® (MVP) is currently updating and renaming the Endoscopy payment policy effective January 1, 2021. The policy will be expanded to include Arthroscopic and Non-GI Scope procedures in addition to Endoscopy procedures. When multiple Arthroscopy, Endoscopy, and other Non-GI Scope procedures within the same code family are performed on the same date of service, the procedure with the highest RVU will be reimbursed according to the MVP Provider fee schedule. The reimbursement of additional procedures will follow the Medicare reimbursement methodology by reducing payment for secondary procedures within the same CPT code family. This reimbursement rule follows Medicare methodology and applies to all product lines. This reimbursement rule does not apply to procedures in different code families. However, other reimbursement rules such as multiple procedure reimbursement reduction may apply.

Additional code families that will be added to the renamed policy include:

- Shoulder Arthroscopy
- Elbow Arthroscopy
- Wrist Arthroscopy
- Knee Arthroscopy
- Laryngoscopy w/operating microscope
- Bronchoscope/wash
- Esophagoscopy flexible brush
- Diagnostic laparoscopy
- Cystoscopy
- Cystourethroscopy & or Pyeloscopy
- Hysteroscopy diagnostic separate procedure

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Questions? Contact your MVP Professional Relations Representative or call the MVP Customer Care Center for Provider Services at 1-800-684-9286.

