

ASC Questions

- 1. There are Medicare products (ex Trillium and CareSource) which are not Managed care but they are not fee-for-service either. How should these be recorded?** *They will be fee for service and payer name will be Trillium.*
- 2. What if we bill global charges?** *Put the total charge for the first procedure and then record a zero charge for the following procedures.*
- 3. If we schedule someone for a procedure but for some reason the procedure was not able to take place, we still create a bill and use a modifier. If we reschedule the patient and complete the procedure later, it looks like we did two procedures. Do nothing different. Submit both cases.**
- 4. Cosmetics are elective surgeries and do not have a diagnosis code. There are diagnosis codes for cosmetic procedures. If a procedure has a corresponding CPT code then they need to submit it.**
- 5. What if the case is terminated, do we still count it?** *If there is a procedure code then it needs to be reported. We are asking for count of cases, not procedures.*
- 6. What do we do if there are two types of payments?** *You have to determine the primary payer source.*
- 7. What if we have a case that has procedures that do not have qualifying CPT codes?** *If you have at least one qualifying CPT code for that case, then all procedures need to be listed, even if they themselves are not qualifying CPTs.*
- 8. What are blank fills?** *Blank fills are spaces.*
- 9. What do we do if we do not use the required when available field?** *It should be blank filled.*
- 10. If a person has a sex change then how do we report the sex?** *The biological sex should be reported.*
- 11. In reporting charity, does that mean 100% charity as in writing off the full patient balance or just any adjustment even if it is not the full charge?** *If charity is the primary payer then it should be recorded as such. If some other payer is the primary payer then it should be reported as such.*
- 12. If all we have is appointment time and not admission time, do you want us to report this or not?** *Report it however you have it.*

13. Data element 194 refers to accident employment related and refers to 10C on the HCFA, but when we look at the HCFA, box 10C states “other accident”. Wouldn’t employment accident be 10A? 10A refers to condition employment related. 10C is where we are pulling accident employment related.