

Reimbursement Guide Name:	Robotic Assisted Surgical Technique-S2900	Reimbursement Guide #:	RG-104
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Reimbursement Guide Information	
Owner Department:	Payment and Revenue Integrity
Owner:	Code Review Program Manager
Affected Departments:	
Reimbursement Guide Applies To:	All product lines
Electronic Signature/Date:	No Users

Purpose of the Reimbursement Guide

The purpose of this reimbursement policy is to establish clear guidelines for the reimbursement of medical services billed to Health Alliance. This policy aims to ensure that reimbursements are handled consistently, fairly, and in accordance with regulatory standards

Statement of the Reimbursement Guide

Health Alliance considers the service associated with HCPCS code S2900 to be an inherent part of the primary surgical procedure. Therefore, no separate reimbursement will be made for this code.

Procedure

1. **Inclusion in Primary Procedure:**
 - The reimbursement for the service associated with HCPCS code S2900 is included in the reimbursement for the primary surgical procedure.
 - This service is not eligible for separate reimbursement.
2. **Billing Guidelines:**
 - If HCPCS code S2900 is billed on a claim, it will not be reimbursed separately.

References

History

Created Date:	10/16/2024
Effective Date:	1/1/2020
Next Review Date:	10/1/2025
Revision Date:	