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NEWS FOR FACILITY PROVIDERS ONLY (HIPAA 837I Claim Submitters)

CLARIFICATION OF REIMBURSEMENT FOR NEW PROCEDURE CODE 37197

Effective Jan. 1, 2013, new procedure code 37197 replaced the deleted procedure codes 37203 and 75961. The reimbursement rate for this replacement code combines the rates for the two previously deleted codes. Highmark's systems have been updated to reflect this new rate and reimbursement for the new procedure 37197 will be made subject to the member's benefits and eligibility.

Code Definitions:

- **37197** (effective 1/1/13) -- Transcatheter retrieval, percutaneous, of intravascular foreign body (e.g., fractured venous or arterial catheter), includes radiological supervision and interpretation, and imaging guidance (ultrasound or fluoroscopy), when performed
- **37203** (deleted 12/31/12) -- Transcatheter retrieval, percutaneous, of intravascular foreign body (e.g., fractured venous or arterial catheter)
- **75961** (deleted 12/31/12) -- Transcatheter retrieval, percutaneous, of intravascular foreign body (e.g., fractured venous or aterial catheter), radiological supervision and interpretation

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