Medicare Non-Covered Services: Charts Introduction

Page updated: May 2021

Medicare non-covered services are categorized into two charts, *Medicare Non-Covered Services: CPT® Codes* and *Medicare Non-Covered Services: HCPCS Codes*, that appear in the appropriate Part 2 manual. Codes in these charts are arranged in alphabetical order by service "description." Refer to the appropriate sections of this manual to ensure that the service billed is covered by Medi-Cal.

Note: For instructions about billing Medicare non-covered services listed in these sections, refer to "Billing for Medicare Non-Covered, Exhausted or Denied Services, or Medicare Non-Eligible Recipients" in the Medicare/Medi-Cal crossover claims section of the appropriate Part 2 manual.

Codes Excluded From List

Codes <u>not listed</u> on these charts must first be billed to Medicare. In these cases, an *Explanation of Medicare Benefits/Medicare Remittance Notice* (EOMB/MRN) must be attached to the claim when billing Medi-Cal.

These procedures apply only to recipients who have both Medi-Cal and Medicare eligibility. Claims also must meet all other Medi-Cal billing and coverage requirements before benefits can be paid.

Facility Charges and Services: Dental Oral Surgery

Facility charges and services essential to dental oral surgery are covered by Medi-Cal. Facilities include hospital outpatient clinics, surgical centers or other non-dental facilities. Indicate in the *Remarks* area of the claim that services were essential to the Medicare non-covered dental treatment.

Note: Medi-Cal does not pay for dental oral surgeon services performed by a non-physician dental oral surgeon. for dental oral surgeon oral surgeon oral surgeon oral surgeon. for dental oral surgeon oral surgeon oral surgeon oral surgeon oral surgeon oral surgeon. for dental oral surgeon oral surgeon oral surgeon oral surgeon oral surgeon oral surgeon. for dental oral surgeon oral surgeon oral surgeon oral surgeon oral surgeon. for dental oral surgeon oral surgeon oral surgeon oral surgeon oral surgeon oral surgeon. for dental oral surgeon oral surgeon oral surgeon oral surgeon. for dental oral surgeon oral surgeon oral surgeon oral surgeon. for dental oral surgeon oral surgeon oral surgeon oral surgeon. for dental oral surgeon oral surgeon oral surgeon oral surgeon. for dental oral surgeon oral surgeon oral surgeon. for dental oral surgeon oral surgeon oral surgeon oral surgeon. for dental oral surgeon oral surg

Medicare Procedures: Medi-Cal Code Correlation List

Medicare/Medi-Cal crossover correlation codes appear on Medi-Cal *Remittance Advice Details* (RAD) only and identify services that have crossed over from Medicare to Medi-Cal. These codes are not valid for direct billing to Medi-Cal. For a listing of these codes, refer to the *Medicare Procedures: Medi-Cal Code Correlation List* section in the appropriate Part 2 manual.

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«Legend»

«Symbols used in the document above are explained in the following table.»

Symbol	Description
**	This is a change mark symbol. It is used to indicate where on the page the most recent change begins.
>>	This is a change mark symbol. It is used to indicate where on the page the most recent change ends.