

## **UPDATED STERILIZATION CODES EFFECTIVE JUNE 1, 2020**

Effective June 1, 2020 Aetna Better Health of Pennsylvania will change the way sterilization related CPT and HCPCS codes are reviewed and paid. These codes will no longer be managed through the prior authorization process. They will be managed by submission of the following:

- A. A copy of a signed Consent for Sterilization Form at the time of claim submission for members age 21 and older , OR for hysterectomy, a completed Hysterectomy Necessity Form, OR;
- B. Documentation of the following:
  - a. The procedure was performed on a member who is sterile as the result of conditions such as (not an all-inclusive list);
    - a prior surgery
    - menopause
    - prior tubal ligation
    - pituitary or ovarian dysfunction
    - pelvic inflammatory disease
    - endometriosis or congenital sterility, OR;
  - b.The procedure was performed in a life-threatening emergency in which a physician determines that prior acknowledgment was not possible

## **Codes eligible for this process:**

Code	Code Description
55250	Vasectomy, unilateral or bilateral (separate procedure), including postoperative semen
	examination(s)
58150	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or
	without removal of ovary(s);
58152	Total abdominal hysterectomy (corpus and cervix), with or without removal of tube(s), with or
	without removal of ovary(s); with colpo-urethrocystopexy (eg, Marshall-Marchetti-Krantz, Burch)
58180	Supracervical abdominal hysterectomy (subtotal hysterectomy), with or without removal of
	tube(s), with or without removal of ovary(s)
58200	Total abdominal hysterectomy, including partial vaginectomy, with para-aortic and pelvic lymph
	node sampling, with or without removal of tube(s), with or without removal of ovary(s)
58210	Radical abdominal hysterectomy, with bilateral total pelvic lymphadenectomy and para-aortic
	lymph node sampling (biopsy), with or without removal of tube(s), with or without removal of
	ovary(s)
58240	Pelvic exenteration for gynecologic malignancy, with total abdominal hysterectomy or
	cervicectomy, with or without removal of tube(s), with or without removal of ovary(s), with

	removal of bladder and ureteral transplantations, and/or abdominoperineal resection of rectum
	and colon and colostomy, or any combination thereof
58260	Vaginal hysterectomy, for uterus 250 g or less;
58262	Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s)
58263	Vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s), and/or ovary(s), with repair of enterocele
58267	Vaginal hysterectomy, for uterus 250 g or less; with colpo-urethrocystopexy (Marshall-Marchetti- Krantz type, Pereyra type) with or without endoscopic control
58270	Vaginal hysterectomy, for uterus 250 g or less; with repair of enterocele
58275	Vaginal hysterectomy, with total or partial vaginectomy;
58280	Vaginal hysterectomy, with total or partial vaginectomy; with repair of enterocele
58285	Vaginal hysterectomy, radical (Schauta type operation)
58290	Vaginal hysterectomy, for uterus greater than 250 g;
58291	Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)
58292	Vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s), with repair of enterocele
58293	Vaginal hysterectomy, for uterus greater than 250 g; with colpo-urethrocystopexy (Marshall-
	Marchetti-Krantz type, Pereyra type) with or without endoscopic control
58294	Vaginal hysterectomy, for uterus greater than 250 g; with repair of enterocele
58340	Catheterization and introduction of saline or contrast material for saline infusion
	sonohysterography (SIS) or hysterosalpingography
58541	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less;
58542	Laparoscopy, surgical, supracervical hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)
58543	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g;
58544	Laparoscopy, surgical, supracervical hysterectomy, for uterus greater than 250 g; with removal of
	tube(s) and/or ovary(s)
58545	Laparoscopy, surgical, myomectomy, excision; 1 to 4 intramural myomas with total weight of 250 g or less and/or removal of surface myomas
58546	Laparoscopy, surgical, myomectomy, excision; 5 or more intramural myomas and/or intramural myomas with total weight greater than 250 g
58548	Laparoscopy, surgical, with radical hysterectomy, with bilateral total pelvic lymphadenectomy
	and para-aortic lymph node sampling (biopsy), with removal of tube(s) and ovary(s), if performed
58550	Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less;
58552	Laparoscopy, surgical, with vaginal hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)
58553	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g;
58555	Laparoscopy, surgical, with vaginal hysterectomy, for uterus greater than 250 g; with removal of tube(s) and/or ovary(s)
58559	Hysteroscopy, surgical; with lysis of intrauterine adhesions (any method)
58565	Hysteroscopy, surgical; with bilateral fallopian tube cannulation to induce occlusion by placement of permanent implants
58570	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less;
58571	Laparoscopy, surgical, with total hysterectomy, for uterus 250 g or less; with removal of tube(s) and/or ovary(s)
58572	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g;
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58573	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g; with removal of
	tube(s) and/or ovary(s)
58575	Laparoscopy, surgical, total hysterectomy for resection of malignancy (tumor debulking), with
	omentectomy including salpingo-oophorectomy, unilateral or bilateral, when performed
58600	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral
58605	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, postpartum,
	unilateral or bilateral, during same hospitalization (separate procedure)
58611	Ligation or transection of fallopian tube(s) when done at the time of cesarean delivery or intra-
	abdominal surgery (not a separate procedure) (List separately in addition to code for primary
	procedure)
58615	Occlusion of fallopian tube(s) by device (eg, band, clip, Falope ring) vaginal or suprapubic
	approach
58661	Laparoscopy, surgical; with removal of adnexal structures (partial or total oophorectomy and/or
E9670	salpingectomy)
58670	Laparoscopy, surgical; with fulguration of oviducts (with or without transection)
58671 58700	Laparoscopy, surgical; with occlusion of oviducts by device (eg, band, clip, or Falope ring) Salpingectomy, complete or partial, unilateral or bilateral (separate procedure)
58720	Laparoscopy, surgical, with total hysterectomy, for uterus greater than 250 g; Lysis of adhesions (salpingolysis, ovariolysis)
58740 58940	Oophorectomy, partial or total, unilateral or bilateral;
58940	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-
26920	oophorectomy and omentectomy;
58951	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-
26921	oophorectomy and omentectomy; with total abdominal hysterectomy, pelvic and limited para-
	aortic lymphadenectomy
58952	Resection (initial) of ovarian, tubal or primary peritoneal malignancy with bilateral salpingo-
30332	oophorectomy and omentectomy; with radical dissection for debulking (ie, radical excision or
	destruction, intra-abdominal or retroperitoneal tumors)
58953	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical
	dissection for debulking;
58954	Bilateral salpingo-oophorectomy with omentectomy, total abdominal hysterectomy and radical
	dissection for debulking; with pelvic lymphadenectomy and limited para-aortic
	lymphadenectomy
58956	Bilateral salpingo-oophorectomy with total omentectomy, total abdominal hysterectomy for
	malignancy
58957	Resection (tumor debulking) of recurrent ovarian, tubal, primary peritoneal, uterine malignancy
	(intra-abdominal, retroperitoneal tumors), with omentectomy, if performed.

## **Questions?**

If you have any questions about this update, please call Provider Relations at **1-866-638-1232.**