

April 30, 2003

Montana Medicaid Notice

Physician, Mid-Level Practitioner, Ambulatory Surgical Center, and Hospital Providers

Gastric Bypass Surgeries and Circumcisions

As announced in the Provider Bulletin dated January 10, 2003, Montana Medicaid will not reimburse providers for gastric bypass surgeries for dates of service after February 1, 2003. Gastric bypass surgeries are no longer a Medicaid covered service effective February 1, 2003.

Also effective February 1, 2003, routine circumcisions are no longer a Medicaid covered service. All medically necessary circumcisions will require prior authorization in order to receive reimbursement. The criteria are as follows:

- The one absolute indication for circumcision is scarring of the opening of the foreskin making it non-retractable (pathological phimosis). This is unusual before 5 years of age. The occurrence of phimosis must be treated with non-surgical methods i.e., topical steroids before circumcision is indicated.
- **Documented** recurrent, troublesome episodes of infection beneath the foreskin (balanoposthitis) that does not respond to other non-invasive treatments and/or sufficient hygiene.
- Urinary obstruction
- Urinary tract infections

To receive prior authorization, please contact SURS by mail phone or fax:

Surveillance/Utilization Review

P.O. Box 202953

Helena, MT 59620-02953

(406) 444-0190 or (406) 444-1441 Phone

(406) 444-0778 Fax

Current fee schedules and the *Physician Related Services* manual replacement pages with updated circumcision criteria are posted on the Provider Information website.

Contact Information

For more information, visit the Provider Information website:

<http://www.mtmedicaid.org>

For claims questions or additional information, contact Provider Relations:

Provider Relations in Helena and out-of-state: (406) 442-1837

In-state toll-free: 1-800-624-3958