

# North Carolina Medicaid Special Bulletin

An Information Service of the  
Division of Medical Assistance

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**November 2017**

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**Attention:  
All Providers**

## **Hysterectomy Claim Submission**

*Providers are responsible for informing their billing agency of information in this bulletin.  
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ICD-10 diagnosis code **N93.9 (abnormal uterine and vaginal bleeding, unspecified)** does not indicate medical necessity criteria as required in Clinical Coverage Policy 1E-1, *Hysterectomy*.

Since July 1, 2013, some hysterectomy claims billed without a diagnosis that supports medical necessity have processed in error. The claims have **not** processed through hysterectomy edits, as they did prior to July 1, 2013. Providers must review Clinical Coverage Policy 1E-1, *Hysterectomy*, for specific diagnosis that validate medical necessity for a hysterectomy procedure.

All provider types submitting claims for reimbursement, including any associated services, **will be denied or recouped** if a diagnosis that supports medical necessity is not submitted on the hysterectomy claim.

A provider notification will be posted when claim reprocessing is required.

For more information, providers should refer to the Clinical Coverage Policy 1E-1, *Hysterectomy*, on N.C. Medicaid's [Obstetrics and Gynecology Clinical Coverage Policy web page](#). Providers with questions can contact the CSRA Call Center at 1-800-688-6696 or [NCTracksprovider@nctracks.com](mailto:NCTracksprovider@nctracks.com).

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