

# PROVIDER BULLETIN

No. 08-27

June 27, 2008

To: Nebraska Medicaid Ambulatory Surgical Center Providers

From: Vivianne M. Chaumont, Director   
Division of Medicaid and Long-Term Care

RE: Ambulatory Surgery Center Rates Effective: July 1, 2008

PLEASE SHARE THIS INFORMATION WITH ADMINISTRATIVE, CLINICAL, AND  
BILLING STAFF

The Nebraska Medicaid Maximum Allowable Ambulatory Surgical Center Group Rates effective for dates of service on or after July 1, 2008 are listed below. The revised ASC payment rates for fiscal year 2009 reflect a 1.4 percent increase for dates of service beginning July 1, 2008:

<u>ASC Group</u>	<u>Rate (Effective July 1, 2008)</u>
1	\$338
2	\$452
3	\$517
4	\$639
5	\$727
6	\$835 (\$685+\$150 for IOLs)
7	\$1,009
8	\$985 (\$835+\$150 for IOLs)
9	\$1358

- IOL=Intraocular Lens Allowance

Please call Margaret Booth at 402-471-9380 if you have any questions regarding this bulletin. The list of **Medicaid** approved procedures for an ASC is available on the Department of Health and Human Services (DHHS) Medicaid web site at <http://www.dhhs.ne.gov/reg/t471.htm> in Appendix 409.