



June 6, 2023

Nevada Medicaid Web Announcement 3088

Hysterectomy Procedure Codes Opened for Outpatient Surgery Provider Types

Effective with dates of service on or after June 1, 2023, the hysterectomy procedure codes listed below have been opened for billing by the following additional provider types (PT): 10 (Outpatient Surgery, Hospital based), 12 (Hospital, Outpatient) and 46 (Ambulatory Surgical Centers). All of the following procedure codes require providers to submit the [Nevada Medicaid Hysterectomy Acknowledgement Form \(FA-50\)](#) with the claim. No prior authorization (PA) is required for medically necessary hysterectomy; however, inpatient hospital admission requires PA.

Procedure Code	Procedure Code Description
58541	Laparoscopy surgical, supracervical hysterectomy, for uterus 250g or less
58542	Laparoscopy surgical, supracervical hysterectomy, for uterus 250g or less with removal of tubes and/or ovary
58543	Laparoscopy surgical, supracervical hysterectomy, for uterus greater than 250g
58544	Laparoscopy surgical, supracervical hysterectomy, for uterus greater than 250g with removal of tubes and/or ovary
58570	Laparoscopy, surgical with total hysterectomy, for uterus 250g or less
58571	Laparoscopy, surgical with total hysterectomy, for uterus 250g or less with removal of tubes and/or ovary
58572	Laparoscopy, surgical with total hysterectomy, for uterus greater than 250g
58573	Laparoscopy, surgical with total hysterectomy, for uterus greater than 250g with removal of tubes and/or ovary

In addition to the above procedure codes, procedure code 58548 (Laparoscopic radical hysterectomy, for uterus, cervix, and lymph nodes of pelvis) has been opened for PT 12. This code is not applicable to PTs 10 and 46.

These updates are go-forward changes and no claims will be reprocessed automatically.