Cholecystectomy (laparoscopic)

We provide coverage for this procedure for adult members who meet medical necessity criteria. Submit authorization requests through the e-referral system.

The submitter will receive a prompt to complete a questionnaire to determine the appropriateness of the requested service. The questions are listed below.

If all questions are answered, e-referral will either approve or pend the case. If the case pends and we cannot authorize it, we will contact the provider for additional clinical information. Authorization is not a guarantee of payment.

Payment is based on established claim edits. We will retrospectively monitor compliance with this authorization requirement.

Applicable procedure codes: *47562, *47563, *47564

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See below for the questions you'll encounter in the e-referral system.

Does the patient have acute CALCULOUS CHOLECYSTITIS and ALL of the following (A-D)?

A. IMAGING results of the absence of gallstones or sludge on ultrasound.
B. ADDITIONAL IMAGING findings of EITHER gallbladder wall thickening or pericholecystic fluid on ultrasound OR nonvisualization/ recognition of the gallbladder by HIDA scan or MRI.
C. FINDINGS of EITHER a temperature >100.4 F (38.0 C) OR an elevated WBC or C-reactive protein.
D. ONE of the following SYMPTOMS: Biliary colic; pain in the upper abdomen or back; nausea or vomiting; intolerance to food; OR right upper quadrant tenderness by physical exam.

Possible answers: ☐ Yes  ☐ No  ☐ No imaging performed  ☐ N/A
<table>
<thead>
<tr>
<th>Question</th>
<th>Possible answers</th>
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<tr>
<td>Does the patient have ACUTE CHOLECYSTITIS with ALL of the following (A-D)? A. IMAGING results of EITHER gallstones or sludge with gallbladder wall thickening or pericholecystic fluid on ultrasound OR nonvisualization / recognition of the gallbladder by HIDA scan or positive MRI. B. FINDINGS of EITHER a temperature &gt;100.4 F (38.0 C); OR an elevated WBC or C-reactive protein. C. ONE of the following SYMPTOMS: Biliary colic; pain in the upper abdomen or back; OR nausea or vomiting D. EITHER positive Murphy’s sign (right upper quadrant tenderness by physical exam) OR positive sonographic Murphy’s sign (right upper quadrant tenderness to sonographic probe palpation)</td>
<td>□ Yes □ No □ No imaging performed □ N/A</td>
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<tr>
<td>Does the patient have BILIARY COLIC with recurrent pain in upper abdomen or back AND EITHER gallstones or sludge on imaging OR gallbladder wall thickening by imaging?</td>
<td>□ Yes □ No □ No imaging performed □ N/A</td>
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<tr>
<td>Does the patient have SUSPECTED CHRONIC CHOLECYSTITIS with recurrent pain in upper abdomen or back AND EITHER gallstones or sludge on imaging OR gallbladder wall thickening by imaging?</td>
<td>□ Yes □ No □ No imaging performed □ N/A</td>
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<tr>
<td>Does the patient have a POLYP in the gallbladder (NOT a pedunculated or polypoid polyp) and ONE of the following (A-D)? A. POLYP IS AT LEAST &lt;10 mm in size. B. Polyp is growing in size identified on serial imaging. C. Sessile polyp. D. Polyp with pain upper abdomen or back.</td>
<td>□ Yes □ No □ No imaging performed □ N/A</td>
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<tr>
<td>Does the patient have EITHER of the following (A-C)? A. Calcified gallbladder wall WITHOUT metastases on X-ray or imaging. B. Gallbladder mucosal wall thickening on ultrasound WITHOUT metastases on imaging. C. Suspected gallbladder cancer.</td>
<td>□ Yes □ No □ No imaging performed □ N/A</td>
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Preview questionnaire:
Cholecystectomy (laparoscopic)
For BCN HMO℠ (commercial) and BCN Advantage℠ members
Effective May 1, 2020

Possible answers:
☐ Yes  ☐ No  ☐ No imaging performed  ☐ N/A

Q: Does the patient have suspected GALLBLADDER CANCER by imaging and BOTH of the following (A-B)? A. Liver function tests are normal. B. No metastases by imaging.

Possible answers:
☐ Yes  ☐ No  ☐ No imaging performed  ☐ N/A

Q: Does the patient have GALLSTONE PANCREATITIS AND either of the following (A or B)? A. Common bile duct stones OR dilated common bile duct identified by imaging AND an intraoperative cholangiogram is planned. B. Plans for Postendoscopic retrograde cholangiopancreatography (ERCP) AND EITHER stone extraction OR sphincterotomy.

Possible answers:
☐ Yes, A  ☐ Yes, B  ☐ No  ☐ No imaging performed  ☐ N/A

Q: Does the patient have suspected biliary dyskinesia WITH ALL the following (A-C)? A. Recurrent pain in the upper abdomen or back after eating. B. Absence of gallstones OR sludge by ultrasound. C. Gallbladder ejection fraction 35 percent or less or at least 80 percent by CCK-HIDA scan.

Possible answers:
☐ Yes  ☐ No  ☐ No imaging performed  ☐ N/A

Q: Does the patient have ascending cholangitis and EITHER of the following (A-B)? A. Common bile duct stones OR dilated common bile duct identified by imaging and intraoperative cholangiogram planned. B. Plans for postendoscopic retrograde cholangiopancreatography (ERCP) imaging AND sphincterotomy OR stone extraction.

Possible answers:
☐ Yes  ☐ No  ☐ No imaging performed  ☐ N/A