

## **Retroactive Reimbursement Rate Change for Cochlear Device Procedure Code L8614**

Information posted June 29, 2016

Effective June 28, 2016, for dates of service on or after April 1, 2015, the reimbursement rate will change for Cochlear Device procedure code L8614 for the Children with Special Health Care Needs (CSHCN) Services Program.

The rate for cochlear device procedure code L8614 will change from \$18,182.12 back to \$23,380.00.

Affected claims with dates of service from April 1, 2015, through June 28, 2016, will be reprocessed. Providers may receive additional payment, which will be reflected on future Remittance and Status (R&S) Reports.

For more information, call the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.