

## **BREAST RECONSTRUCTION FREE FLAP PROCEDURE**

This notification applies to the following networks: *Commercial HMO, POS, PPO and Medicare Advantage*

A listing of all networks can be found on the provider website at <https://wa-provider.kaiserpermanente.org/communications/letters>

**Effective April 1, 2023**, Kaiser Foundation Health Plan of Washington and Kaiser Foundation Health Plan of Washington Options, Inc. (Kaiser Permanente) will not reimburse services for breast reconstruction free flap procedure when billed with HCPCS codes S2066; S2067 and S2068 unless otherwise specified by the specific contract terms. These HCPCS codes are reimbursable under CPT code 19364.

Payment Policy <https://wa-provider.kaiserpermanente.org/static/pdf/provider/billing-claims/breast-reconstruction.pdf>

Questions: Contact Provider Assistance Unit at 1-888-767-4670, Monday through Friday, 8 a.m. to 5 p.m.

**Kaiser Foundation Health Plan of Washington**  
**Kaiser Foundation Health Plan of Washington Options, Inc.**

<CONTRACT MANAGER NAME>

Provider Communications, RCB-C2W-02

PO Box 34262, Seattle, WA 98124-1262



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