

CHAPTER 5
SECTION 7.1

SURGICAL PATHOLOGY

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I. PROCEDURE CODE RANGE

88304 and 88305

II. DESCRIPTION

These surgical pathology services include accession, examination, and reporting for a specimen which is defined as tissue that is submitted for individual and separate attention, requiring individual examination and pathologic diagnosis. These codes require gross and microscopic examination.

III. POLICY

Procedures 88304 and 88305 are covered services, but normally they must be billed by a pathologist to be cost-shared. If they are billed by the operating surgeon, they will be denied as incidental, since the definitive (microscopic) examination will be performed later, after fixation of the specimen, by the pathologist who will bill separately.

NOTE: TRICARE Claimcheck cannot accommodate this policy and will deny surgical pathology procedures performed by the operating surgeon performed on the same date of service regardless of the specialty. Therefore, only those contractors that use TRICARE Claimcheck are to implement this policy and override TRICARE Claimcheck's denial.

IV. EXCEPTION

Dermatologists (provider specialty 07) are qualified to perform surgical pathology services. Therefore, if a dermatologist bills for both the surgical procedure (e.g., 11100, skin biopsy) as well as the surgical pathology, both procedures can be allowed in full.

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