

## Commercial Reimbursement Policy

Subject: **Emergency Room Transfers -Facility**

Policy Number: **C-20006**

Policy Section: **Facilities**

Last Approval Date: **12/09/2020**

Effective Date: **07/01/2021**

### Disclaimer

*These policies serve as a guide to assist you in accurate claims submissions and to outline the basis for reimbursement if the service is covered by a member's Anthem Blue Cross (Anthem) benefit plan. The determination that a service, procedure, item, etc., is covered under a member's benefit plan is not a determination that you will be reimbursed. Services must meet authorization and medical necessity guidelines appropriate to the procedure and diagnosis as well as to the member's state of residence. You must follow proper billing and submission guidelines. You are required to use industry standard, compliant codes on all claim submissions. Services should be billed with Current Procedure Terminology (CPT) codes, Healthcare Common Procedure Coding System (HCPCS) codes and/or Revenue codes. The codes denote the services and/or procedures performed. The billed code(s) are required to be fully supported in the medical record and/or office notes. Our policies apply to both participating and non-participating professionals and facilities as indicated.*

*If appropriate coding/billing guidelines or current reimbursement policies are not followed, Anthem may:*

- *Reject or deny the claim*
- *Recover and/or recoup claim payment*

*These policies may be superseded by provider or state contract language, or state, federal requirements or mandates. We strive to minimize delays in policy implementation. If there is a delay, we reserve the right to recoup and/or recover claims payment to the effective date, in accordance with the policy. Anthem reserves the right to review and revise these policies periodically when necessary. When there is an update, we will publish the most current policy to the website.*

### Policy

Anthem allows reimbursement for one emergency room visit when a member is transferred between outpatient facilities operating under the same agreement, have the same tax identification number (TIN), or is under common ownership. Anthem considers these transfers to be a single episode of care. The transferring facility will not be eligible for separate reimbursement.

### Related Coding

Code	Description	Comments
99281	Emergency department visit for the evaluation and management, level 1	
99282	Emergency department visit for the evaluation and management, level 2	
99283	Emergency department visit for the evaluation and management, level 3	
99284	Emergency department visit for the evaluation and management, level 4	
99285	Emergency department visit for the evaluation and management, level 5	

## Policy History

12/09/2020	New policy approved 12/09/2020 and effective 07/01/2021
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## References and Research Materials

This policy has been developed through consideration of the following:

- Emergency Medical Treatment and Labor Act (EMTALA)
- American College of Emergency Physicians (ACEP)

## Definitions

Episode of Care	A single episode of care refers to continuous care or a series of intervals of brief separations from care to a member by a provider or facility for the same specific medical problem or condition.
Emergency Services	A medical condition manifesting itself by acute symptoms of recent onset and sufficient severity (including severe pain) such that a prudent layperson, who possesses an average knowledge of health and medicine, could reasonably expect the absence of immediate medical care could result in (a) placing the health of an individual in serious jeopardy, (b) serious impairment to bodily function, (c) serious dysfunction of any bodily organ or part, (d) serious disfigurement, or (e) in the case of a pregnant woman, serious jeopardy to the health of the woman or her unborn child.
General Reimbursement Policy Definitions	

## Related Policies and Materials

None
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### Use of Reimbursement Policy

This policy is subject to federal and state laws, to the extent applicable, as well as the terms, conditions, and limitations of a member's benefits on the date of service. Reimbursement Policy is constantly evolving and we reserve the right to review and update these policies periodically.

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