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PAYMENT POLICY ID NUMBER: 23-080

Original Effective Date: 12/01/2023

Revised: 08/08/2024

# **Outpatient Facility Alternate Procedure Code Reimbursement**

THIS PAYMENT POLICY IS NOT AN AUTHORIZATION, CERTIFICATION, EXPLANATION OF BENEFITS, OR A GUARANTEE OF PAYMENT, NOR DOES IT SUBSTITUTE FOR OR CONSTITUTE MEDICAL ADVICE. ALL MEDICAL DECISIONS ARE SOLELY THE RESPONSIBILITY OF THE PATIENT AND PHYSICIAN. BENEFITS ARE DETERMINED BY THE GROUP CONTRACT, MEMBER BENEFIT BOOKLET, AND/OR INDIVIDUAL SUBSCRIBER CERTIFICATE IN EFFECT AT THE TIME SERVICES WERE RENDERED. THIS PAYMENT POLICY APPLIES TO ALL LINES OF BUSINESS AND PROVIDERS OF SERVICE. IT DOES NOT ADDRESS ALL POTENTIAL ISSUES RELATED TO PAYMENT FOR SERVICES PROVIDED TO BCBSF MEMBERS AS LEGISLATIVE MANDATES, PROVIDER CONTRACT DOCUMENTS OR THE MEMBER'S BENEFIT COVERAGE MAY SUPERSEDE THIS POLICY.

## **DESCRIPTION:**

This policy applies to Florida Blue Commercial business and is specifically for short term acute care hospitals and long-term care hospitals. This policy applies to outpatient claims and provides billing reimbursement guidelines for revenue codes requiring alternate procedure codes.

### **REIMBURSEMENT INFORMATION:**

Per National Uniform Billing Committee, outpatient UB-04 claims must be billed with both a revenue code and a CPT or Healthcare Common Procedure Coding System (HCPCS) code.

Absence of a CPT or HCPCS code for any revenue code not listed on this policy may affect claim payment or result in a claim denial.

This policy applies to outpatient claims for the following hospital/facility types and bill types:

- Acute Care Hospitals, including Children's Hospitals and Cancer Hospitals (13X, 14X)
- Critical Access Hospitals (85X)
- Long Term Care Hospital (13X)

## **BILLING AND CODING:**

Outpatient facility claims may be denied when received without the corresponding appropriate HCPCS/CPT codes.

If multiple CPT or HCPCS are necessary to reflect multiple, distinct, or independent visits with the same revenue code, repeat the revenue code as required and its applicable date of service.

This list of revenue codes requiring HCPCS/CPT codes is based on those that impact commercial reimbursement programs. It will not match completely with rules in the UB-04 Data Specifications Manual or Medicare's rules for their outpatient prospective payment system billing requirements.

Revenue codes REQUIRING HCPCS/CPT codes are listed in the ATTACHMENTS Section

#### ATTACHMENTS:

Listing of codes REQUIRING a HCPCS/CPT code: Revenue Codes Requiring Alternate Procedure Codes 8-3-23.

### **REFERENCES:**

- 1. Florida Blue's Manual for Physicians and Providers
- 2. Centers for Medicare and Medicaid Services, Medicare Claims Processing Manual, Chapter 4 Part B Hospital
- 3. National Uniform Billing Committee Official UB-04 Data Specifications Manual only available via a subscription.

## **GUIDELINE UPDATE INFORMATION:**

08/11/2023	New Policy – effective 12/1/2023
08/08/2023	Annual review, no changes

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