From: Independence comm.ibx@comm.ibx.com>

Subject: Independence Announcement – Adherence to Industry Standard Billing guidelines



from Provider Communications

## **PROVIDER BULLETIN**

#08-2021

**TO:** Participating facilities

**FROM:** Payment Integrity & Audit

**DATE:** April 9, 2021

SUBJECT: Adherence to industry standard billing guidelines – Facility

routine supplies, services, and equipment

Please remember that routine services, supplies, and/or equipment/items should not be separately billed to Independence Blue Cross or to our members and are not eligible for separate reimbursement.

Correct coding and coding definitions for facilities apply to inpatient and outpatient claims in all circumstances. Whenever a charge or code is billed, which includes another service, item, or supply, whether by code definition or code or billing guideline, the included service or supply is not eligible for separate reimbursement.

## Guidelines

The following guidelines may assist in identifying items, supplies, and services that are ineligible for separate reimbursement and should not be billed separately. This is not an all-inclusive list.

- Any supplies, items, and services that are necessary or otherwise integral to the provision of a specific service and/or the delivery of services in a specific location.
- Items and supplies that may be purchased over the counter, unless otherwise specified.
- All reusable items, supplies, and equipment that are provided to all patients during an inpatient or outpatient admission.
- All reusable items, supplies, and equipment, such as pulse oximeter, blood pressure cuffs, bedside table, etc., that are provided to all patients in a given (Inpatient/Outpatient) treatment area or unit.
- All reusable items, supplies, and equipment that are provided to all patients receiving the same service.

Please review examples located <u>here</u>. As stated above, these lists are not all-inclusive.

Itemized bills and/or medical records may be requested via a pre- or post-payment audit request to validate billing and coding compliance.

Reference: <u>CMS Provider Reimbursement Manual, Determination of Cost of Services to Beneficiaries, Chapter 22</u>

If you have additional questions about this bulletin, please contact us at <a href="mailto:claimeditquestions@ibx.com">claimeditquestions@ibx.com</a>.

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