



PROVIDER BULLETIN
#03-2016

TO: Participating hospitals and select ambulatory surgical centers that provide covered services to AmeriHealth Pennsylvania members

FROM: Daniel Brown
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DATE: February 9, 2016

SUBJECT: Revenue code requirements

All AmeriHealth Pennsylvania members were successfully migrated to the new operating platform. As a result, for dates of service on or after October 1, 2015, Correlation Edits are no longer applied to Hospital Outpatient claims. However, the following procedure code and revenue code combination requirements still apply:

- When billing one of the revenue codes listed below, a corresponding Healthcare Common Procedure Coding System (HCPCS) or Current Procedural Terminology (CPT®) code must be reported on the claim line.

Revenue code series	Revenue codes
02xx	0250-0256, 0258-0261, 0269, 0274-0275, 0278, 0280, 0289-0294, 0299
03xx	0300-0312, 0314, 0319-0324, 0329-0333, 0335, 0339-0344, 0349-0352, 0359-0362, 0367, 0369, 0374, 0380-0387, 0389-0381, 0399
04xx	0400-0404, 0409-0410, 0412-0413, 0419-0424, 0429-0434, 0439-0444, 0449-0452, 0456, 0459-0460, 0469-0472, 0479-0483, 0489-0490, 0499
05xx	0510-0517, 0519, 0530-0531, 0539
06xx	0610-0612, 0614-0616, 0618-0619, 0621-0623, 0631-0637
07xx	0700, 0720-0723, 0729-0732, 0739-0740, 0750, 0760-0762, 0769, 0771, 0790
08xx	0820-0825, 0829-0835, 0839-0845, 0849-0855, 0859-0861, 0880-0881, 0889
09xx	0901, 0903, 0914-0918, 0920-0925, 0929, 0940-0949, 0951-0952

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We encourage you to share this information with appropriate members of your staff.

- Surgical and emergency room/department (ER) reporting requirements:
 - For hospitals contracted under the Hospital Outpatient Surgery Fee Schedule, global surgical reimbursement requires surgical procedures be reported with one of the following surgical revenue codes: 0360, 0361, 0362, 0367, 0369, 0481, 0490, or 0499. **Only services listed on the attached Surgical Procedure Code list should be reported with one of the surgical revenue codes above.** Surgical procedures listed on the surgical fee schedule are assigned a surgical category, which determines the level of reimbursement. Surgical procedures not listed on the Outpatient Fee Schedule are individually reviewed for payment consideration.
 - Reimbursement rates for emergency services are inclusive of all services provided to the member during the visit. Emergency visits should be reported with revenue code 0450, 0451, 0452, 0456 or 0459.
 - Reimbursement for surgical services when billed with ER services is as follows:
 - If an ER visit includes surgery performed in a fully equipped and staffed operating room, the facility will receive the fee schedule reimbursement for both the ER visit and the surgery. In this circumstance, the surgery should be billed using an appropriate surgery revenue code with the applicable HCPCS/CPT code.
 - When surgical services are performed in the ER and not a fully equipped operating room, the surgical services are included in the reimbursement for the ER visit. In this circumstance, the surgery should be billed using an appropriate ER revenue code with the applicable HCPCS/CPT code.
- For hospitals contracted under the Hospital Outpatient Surgery Fee Schedule, specific implantable devices are eligible for additional reimbursement. Bill the implant using revenue code 0275 or 0278, as appropriate.
- For hospitals that have contracted outpatient diabetic education programs, when billing for diabetic education, providers must use revenue code 0942 and include an appropriate HCPCS and/or CPT code.

Note: Specific contracted revenue code requirements or carve outs as specified in your Hospital Agreement continue to apply.

For a copy of the *Surgical Procedure Code List*,
please contact your Network Coordinator.