

Reimbursement Policy

Subject: **Multiple Delivery Services**

Policy Number: **G-06044**

Policy Section: **Surgery**

Last Approval Date: **04/29/2022**

Effective Date: **04/29/2022**

**** Visit our provider website for the most version of our reimbursement policies. If you are using a printed version of this policy, please verify the information by going to <https://provider.healthybluemo.com>. ****

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 Healthy Blue 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 CPT® codes, HCPCS codes, and/or revenue codes. The codes denote the services and/or procedures performed. The billed codes are required to be fully supported in the medical record and/or office notes. Unless otherwise noted within the policy, our policies apply to both participating and nonparticipating providers and facilities.

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

- Reject or deny the claim.
- Recover and/or recoup claim payment.
- Adjust the reimbursement to reflect the appropriate services and/or procedures performed.

These policies may be superseded by mandates in provider or state contracts, or state, federal, or CMS requirements. System logic or set up may prevent the loading of policies into the claims platforms in the same manner as described; however, Healthy Blue strives to minimize these variations.

Healthy Blue reserves the right to review and revise its policies periodically when necessary. When there is an update, we will publish the most current policy to our provider website.

Policy

Healthy Blue allows reimbursement for multiple births by a same-delivery or combined-delivery method unless provider, state, federal, or CMS contracts and/or requirements indicate otherwise. For vaginal or cesarean deliveries involved in multiple births and performed using a same-delivery or combined-delivery method, professional reimbursement is 100% of the applicable fee schedule. Multiple procedure guidelines do not apply.

<https://provider.healthybluemo.com>

Healthy Blue is a Medicaid product offered by Missouri Care, Inc., a MO HealthNet Managed Care health plan contracting with the Missouri Department of Social Services. Healthy Blue is administered statewide by Missouri Care, Inc. and administered in the Kansas City service region by Missouri Care, Inc. in cooperation with Blue Cross and Blue Shield of Kansas City. Missouri Care, Inc. and Blue Cross and Blue Shield of Kansas City are both independent licensees of the Blue Cross and Blue Shield Association.
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Related Coding

Standard Correct Coding Applies

Policy History

04/29/2022	Biennial review approved and effective: updated policy template, no language changes
01/01/2021	Initial approval and effective date

References and Research Materials

This policy has been developed through consideration of the following:

- CMS
- State Medicaid
- State contracts

Definitions

General Reimbursement Policy Definitions

Related Policies and Materials

Assistant at Surgery (Modifier 80/81/82/AS)

Distinct Procedural Services (Modifiers 59, XE, XP, XS, XU)

Maternity Services

Modifier 22: Increased Procedural Service

Modifier 25: Significant, Separately Identifiable Evaluation and Management Service by the Same Physician on the Same Day of the Procedure or Other Service

Modifier Usage

Multiple and Bilateral Surgery: Professional and Facility Reimbursement

Professional Anesthesia Services