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Facility message

Title: **Claim Payment Policy: Evaluation and Management Services Billed with Treatment Room Revenue Codes**

Posting date: **September 29, 2022**

This notice provides guidelines when billing treatment room services in conjunction with Evaluation and Management services. **Effective December 1, 2022**, Blue Cross Complete **doesn't reimburse** facility E&M services billed in conjunction with treatment room service revenue codes, as these E&M services don't represent the specific treatment or procedure performed.

Example of treatment room revenue codes that would make an E&M code non-reimbursable:

Revenue code	Code description
0760	Specialty services general
0761	Specialty services treatment room
0769	Other specialty services

Treatment room and specialty room services are outpatient services, furnished on hospital premises that require the use of a bed and periodic monitoring for a brief amount of time in order to carry out minor procedures and allow the patient to recover. The use of the treatment room is an *expected* part of the minor procedures, unlike major procedures that would require use of an operating room.

Note: Prior to submitting claims, providers should reference the most up-to-date and professional coding resources when seeking reimbursement for covered services.

These guidelines are intended to be used in conjunction with the independent and professional medical judgement of a qualified health care professional and don't constitute the practice of medicine or medical advice.

Questions

We appreciate your ongoing commitment to delivering high-quality health care to our members. If you have questions, contact your Blue Cross Complete provider account executive or call Blue Cross Complete Provider Inquiry at **1-888-312-5713**.

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