

		Rein	nbursement Policy	
Subject: Reimbursement of Sanctioned and Opt-Out Providers				
Effective Date:	Committee Approva	l Obtained:	Section:	
11/06/20	11/06/20		Administration	
*****The most current version of our reimbursement policies can be found on our provider website.				

\*\*\*\*\*The most current version of our reimbursement policies can be found on our provider website. If you are using a printed version of this policy, please verify the information by going to <a href="https://providers.healthybluela.com">https://providers.healthybluela.com</a>.\*\*\*\*\*

These policies serve as a guide to assist you in accurate claim submissions and to outline the basis for reimbursement by Healthy Blue if the service is covered by a member's Healthy Louisiana 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 code(s) 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.

Healthy Blue reimbursement policies are developed based on nationally accepted industry standards and coding principles. These policies may be superseded by mandates in provider, state, federal or CMS contracts and/or requirements. System logic or setup 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 our policies periodically when necessary. When there is an update, we will publish the most current policy to this site.

there is an apacite, we will publish the most earrent policy to this site.			
	Healthy Blue does not allow reimbursement to providers who are excluded or		
	debarred from participation in state and federal healthcare programs. Claims		
	received for services other than emergency services submitted by sanctioned		
	providers as provided herein will be denied.		
Policy			
ľ	Healthy Blue will allow reimbursement to a sanctioned provider for		
	emergency items or services only if the claim is accompanied by a sworn		
	statement of the person furnishing the items or services specifying:		
	• The nature of the emergency.		

## https://providers.healthybluela.com

	Why the items or services could not have been furnished by a provider eligible to furnish or order such items or services.  Healthy Divergence providers through all applicable state and federal.			
	Healthy Blue screens providers through all applicable state and federal exclusion lists.			
History	<ul> <li>Biennial review approved and effective 11/06/20: no changes to policy language</li> <li>Biennial review approved and effective 10/03/18: Medicare opt-out language removed</li> <li>Effective 09/01/17: policy template updated</li> <li>Biennial review approved 10/03/16: policy template updated</li> <li>Review approved 11/09/15: policy template updated</li> </ul>			
	<ul> <li>Biennial review approved 08/18/14: Medicare opt-out language expanded</li> <li>Biennial review approved 05/21/12 and effective 12/09/12: Opt-out language added</li> <li>Initial approval and effective 10/11/10</li> </ul>			
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	<ul> <li>Claims Requiring Additional Documentation</li> <li>Emergency Services: Nonparticipating Providers and Facilities</li> </ul>			
Related Materials	• None			