

		Reimbursement Policy
Subject: Inpatient Readmissions		
Effective Date: 07/01/18	Committee Approval Obtained: 01/26/18	Section: Facilities
<p>*****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 https://providers.amerigroup.com/TX.*****</p>		
<p>These policies serve as a guide to assist you in accurate claims submissions and to outline the basis for reimbursement by Amerigroup STAR+PLUS MMP (Medicare-Medicaid Plan) if the service is covered under the Amerigroup STAR+PLUS MMP 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.</p> <p>If appropriate coding/billing guidelines or current reimbursement policies are not followed, Amerigroup STAR+PLUS MMP may:</p> <ul style="list-style-type: none"> • Reject or deny the claim. • Recover and/or recoup claim payment. <p>Amerigroup STAR+PLUS MMP reimbursement policies for Amerigroup STAR+PLUS MMP 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 These policies may be superseded by mandates in provider, state, federal or CMS contracts and/or requirements.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, Amerigroup STAR+PLUS MMP strives to minimize these variations.</p> <p>Amerigroup STAR+PLUS MMP 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.</p>		
Policy	<p>Amerigroup STAR+PLUS MMP does not allow separate reimbursement for claims that have been identified as a readmission to the same or different hospital for the same, similar or related condition, unless provider, federal or CMS contracts and/or requirements indicate otherwise. In compliance with federal mandates, Amerigroup STAR+PLUS MMP uses the following standards:</p> <ul style="list-style-type: none"> • Readmission up to 30-days from discharge 	

	<ul style="list-style-type: none"> • Same diagnosis or diagnoses that fall into the same grouping <p>Amerigroup STAR+PLUS MMP will utilize clinical criteria and/or licensed clinical medical review for readmissions from day 2 to day 30 in order to determine if the second admission is for:</p> <ul style="list-style-type: none"> • The same or closely related condition or procedure as the prior discharge. • An infection or other complication of care. • A condition or procedure indicative of a failed surgical intervention. • An acute decompensation of a coexisting chronic disease. • A need that could have reasonably been prevented by the provision of appropriate care consistent with accepted standards in the prior discharge or during the post discharge follow up period. • An issue caused by a premature discharge from the same facility. • A reason that is medically unnecessary. <p>Readmissions occurring on the same day for symptoms related to, or for evaluation and management of, the prior stay’s medical condition are considered part of the original admission and should be combined. Amerigroup STAR+PLUS MMP considers a readmission to the same or different hospital for the same, similar or related condition on the same date of service to be a continuation of initial treatment. Amerigroup STAR+PLUS MMP defines same day as services rendered within a 24-hour period (from time of discharge to time of readmission) for participating providers.</p> <p>Amerigroup STAR+PLUS MMP reserves the right to recoup and/or recover monies previously paid on a claim that falls within the guidelines of a readmission for a same, similar or related condition as defined above.</p> <p>Exclusions</p> <ul style="list-style-type: none"> • Admissions for the medical treatment of cancer, primary psychiatric disease and rehabilitation care • Planned readmissions • Patient transfers from one acute care hospital to another • Patient discharged from the hospital against medical advice <p>This policy only affects those facilities reimbursed for inpatient services by a diagnosis-related group methodology.</p>
<p>Exemptions</p>	<ul style="list-style-type: none"> • Amerigroup Community Care in Texas and Amerigroup Insurance Company in accordance with Texas Medical Assistance (Medicaid) uses the following readmissions standards: <ul style="list-style-type: none"> ○ Readmission up to 30 days from discharge

	<ul style="list-style-type: none"> ○ Same or closely related diagnosis, or for a condition identified during the previous admission
History	<ul style="list-style-type: none"> ● Initial review approved 01/26/18 and effective 07/01/18
References and Research Materials	<p>This policy has been developed through consideration of the following:</p> <ul style="list-style-type: none"> ● CMS ● Texas Health and Human Services Commission (HHSC) ● Amerigroup STAR+PLUS MMP contract with HHSC
Definitions	<ul style="list-style-type: none"> ● General Reimbursement Policy Definitions
Related Policies	<ul style="list-style-type: none"> ● Claims Requiring Additional Documentation ● Claims Submission — Required Information for Facilities ● Claims Submission — Required Information for Professional Providers ● Documentation Standards for Episodes of Care ● Global Surgical Package
Related Materials	<ul style="list-style-type: none"> ● None