Inpatient Non-Reimbursable Charge/Unbundling Policy

The purpose of this policy is to document charges considered to be non-reimbursable/unbundled or not allowed to be billed separately. This policy is not intended to impact care decisions or medical practice of providers/facilities. Health care providers (facilities, physicians, and other health care professionals) are expected to exercise independent medical judgement in providing care to patients.

This policy is effective October 1, 2018.

Providers are responsible for accurately and completely documenting services provided to Members. Claims should be coded and submitted in accordance with industry standard coding guidelines and BlueCross BlueShield of South Carolina and BlueChoice HealthPlan policies.

Claims with charges that have been unbundled from another billed service and/or charges considered to not be separately reimbursed will be adjusted to remove these charges and the claim adjusted accordingly.

Benefit determinations will be based upon the applicable Benefit Contract Language.

Non-Reimbursable/Unbundled Charges

Non-Reimbursable/Unbundled Charges means billed charges for hospital services, supplies, equipment and/or items for which Plan will not reimburse Institution based on Plan's determination that such charges constitute unbundled, fragmented or otherwise duplicative charges which should reasonably be included in another charge which Institution has billed to Plan for the same Member on the same day.

Non-Reimbursable/Unbundled Charges include all facility general administrative costs (Table 1), including routine and/or reusable equipment, supplies, and/or items, used multiple times for multiple patients, and/or routine items/supplies that are disposable and which Institution must price and include in Institution's overall accommodation or facility fees for inpatient room and board, nursery, intensive and non-intensive specialty units, emergency room, operating room, recovery room, labor and/or delivery room, anesthesia, radiology, laboratory and other charges (Tables 2 and 3). These Institution general administrative costs are non-reimbursable if billed separately and apart from an inpatient room and board, specialty unit or other overall facility charge.

The following illustrative tables include, but are not limited to, those kinds of facility general and administrative costs and charges, including routine disposable and reusable equipment, supplies and items, which may not be separately billed by Institution for separate reimbursement from Plan:

| Table 1: General and Administrative Costs | | |
|---|---|--|
| Personnel and additional staff | Oxygen transport fees | |
| Non-specific hospital nursing teams. Specific nursing teams performing services related to wound care, advanced IV access lines, ostomy care, etc. may be allowed. | Pharmacy fees of any kind, including "mixing fees", phone calls, pharmacy drug consults, and any pharmacy related charges outside the cost of the medication. | |
| Call back time for physicians or staff | Stand by charges for physicians or staff | |
| Hospital emergency code alerts, rapid alert teams, code teams, etc. | Stat charges | |
| Any administration fees performed by hospital nurses, i.e., TPN, blood transfusion, medication, chemotherapy, IV fluid administration, etc. | Supplemental feedings or nutrition such as Ensure, Isocal, etc. | |
| Any nursing care service within the scope of normal nursing practice, i.e. admission, assessment, discharge, etc. | Technician time of any kind, i.e. respiratory, xray, lab, nursing, etc. | |
| Isolation care and/or Universal Precautions | Maintenance of hospital equipment | |
| Any form of incremental nursing care. | Assistance by hospital staff for any bedside procedures performed by physicians or other qualified healthcare personnel regardless of patient location. | |
| Management and/or participation in cardiac arrest event and/or performance of CPR (cardiopulmonary resuscitation) by hospital staff. | Insertion, discontinuation, and/or maintenance of IVs, nasogastric tubes, foley catheters, etc. performed by hospital nurses. | |
| Respiratory services performed by hospital nurses, i.e., incentive spirometry, nebulizer treatments, suctioning, trach care, etc. | Monitoring and maintenance of peripheral or central IV lines and sites, including site care, dressing changes and flushes. | |
| Patient monitoring of any kind. | Patient transportation fees | |
| Set up and take down of any equipment. | Patient and family Education and Counseling, including diabetic education, smoking cessation, lactation, CPR | |
| Oximetry (unless performed on a non-monitored unit by respiratory therapy) | Any charge for the performance of a bedside procedure. | |

Routine and/or Reusable Equipment is used in the provision of services to multiple patients and has an extended life or is considered a fixed asset of the provider, clinic, or facility. This equipment or the use of this equipment may not be separately billed. Services provided with this equipment may be billed as appropriate (e.g. x-rays, dialysis) and in accordance with correct coding and billing guidelines (e.g., no unbundling of oximetry checks). If specific procedure codes do not exist, in most cases the services provided by that equipment are included in a larger, related service, and are not eligible for separate reimbursement (e.g., thermometer). "Equipment used multiple times for multiple patients is not separately billable or reimbursable. Likewise, routine disposable supplies should be included in the charges for the applicable room charge or procedure and not billed separately.

| Table 2: Routine and/or Reusable Equipment | | |
|--|---|--|
| Air Gas Machines | IVAC | |
| Anesthesia Machine Monitors | Medication Nebulizers | |
| Bed Rails | Microscopes | |
| Bed Scales | Monitors (any kind) | |
| Blood Pressure Equipment, including Cuffs | Non Invasive Monitors | |
| Bovie Equipment | O2 Analyzers | |
| Cameras | Oxygen Flowmeters | |
| Cardiac Monitors | PCA Pumps | |
| Carts & Boxes | Pneumatic Pumps | |
| Cast Carts | Rental Equipment, including specialty beds (unless determined | |
| | to be medically necessary) | |
| Cautery Machines | Respirators | |
| C02 Monitors | Scopes | |
| Compressors | Sitz Bath Portable | |
| CPM Machines | Smoke Evacuators | |
| Crash Carts | Suction Machines | |
| Defibrillators (excludes implantables) | Suctioning Equipment, including Wall Units | |
| Doppler Equipment | Telemetry | |
| EKG/ECG Equipment | Toilet Seat Lifters | |
| Electrosurgical Units | Traction Equipment | |
| Heat Lamps | Trapeze Bars | |
| Heating/Cooling Pad Machines | Vapor Machines | |
| Incubators | Ventilators | |
| Infusion Pumps | Vital Signs Monitor – Sentron, etc. | |
| IV Pumps | Pill crusher | |
| Fluid/blood warming Equipment | Suction Hardware and Hardware Accessories | |
| Wound VAC Equipment (excluding supplies) | Cell Saver Equipment (excluding supplies) | |
| Oximeter | Bed alarm/sensor | |
| Balloon pump | Saline Slush Machine | |
| Feeding pump | Brain monitoring equipment | |
| EMG/EEG machines/monitors | | |

| Table 3: Routine Disposable and/or Reusable Supplies and Items | | |
|--|--|--|
| Adhesive Tapes | Restraints (any kind), including belts and vests | |
| Air Fresheners | Room Deodorizers | |
| Band Aids | Routine Supplies and Floor stock, such as any gloves, tape, gowns, drapes, masks, etc. | |
| Chux/incontinence pads | Rubbing Alcohol | |
| Diapers (any kind/size) | Scrub Brushes | |
| Educational Materials, i.e. Books, Tapes, etc. | Stethoscopes | |
| Electrodes | Suction Hardware and Accessories | |
| Heating Pads | Swab Sticks/oral swabs | |
| Any instruments that can be sterilized and re-used. | Thermometers & Probes | |
| Manometers | Tongue Depressors | |
| Monitor Electrodes | Tourniquets | |
| Monitor Leads | Towels& Linens (in any setting) | |
| Oxisensors (reusable); disposable oxisensors are included in the room and board of specialty units | Video Cameras | |
| Photographs | Video photography | |
| Ambu bags of any kind | Warming/cooling blankets | |
| Supplies for vital sign equipment | Any type of blood pressure cuff | |
| Supplies associated with monitoring equipment | Supplies related to isolation care; universal precautions | |
| IV arm boards | Pen light/flash light | |
| Walkers/wheelchairs/canes/crutches not specific to a patient | | |

A. Room and Board or Room Care Charges

- 1. Room Charge Definition: A Room and Board or Room Care Charge for a semi-private, private, or 3+ bed room shall include the room, dietary services, all nursing care, personnel, and routine disposable and/or reusable equipment, supplies and/or items, appropriate for that setting.
- 2. The following illustrative list includes, but is not limited to, those services, supplies, equipment and/or items which are included within the overall Room and Board or Room Care Charge, and are not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Room and Board or Room Care Charge:
 - Furniture (including bed, mattress, sheets, pillow, admission kits, rubbing alcohol, air freshener, band-aids, barrier towel, batteries, bedpan/urinal, betadine ointment, betadine skin cleanser, betadine swab sticks, any blood pressure cuff, soap, commode, cotton pads/balls, emesis basin, eye cup, eye droppers, fracture pack, gloves (all), gowns (all types), graduates, iodine scrub, linens (except sterile for burn cases), lubricant tube, manometer, masks (all types), medicine dropper, Phisohex, pitcher, prep blades, prep sheets, restock charges, scrub brush, stethoscope, adhesive tape, therapeutic bath, thermometer (all types), tongue depressors, wash basin, ointments/skin barrier (except prescription ointments ordered by a physician), Hydrogen Peroxide, any type of chux and diapers, wash cloths (paper & cloth), nutritional supplements (such as Ensure, Vivonex, Promed and all other name brands), arm boards, and protectors (knee, heel and elbow). Immobilizers or other braces that are taken home with the patient are separately billable.
 - Any and all nursing care provided in this setting is included in the Room and Board or Room Care Charge.
- 3. The following list includes those charges which are Non-Covered under a Member's Benefit Contract, and are thus payable solely by the Member, not Plan:
 - Powder, combs, denture cups, deodorant (room and personal), dermassage, hair care items, lotion, menses belts and pads (when not related to diagnosis), mouthwash, razor (personal), shaving cream, slippers, telephone, television, tissues, toothbrush, toothpaste, hair dryer, bath comfort items, water carafes, lip balm and personal wipes.

B. Nursery Room or Nursery Rooming In Related Charges

- 1. Room Charge Definition: A Nursery or "Rooming In" Charge shall include the room, dietary services, all nursing care, personnel, and routine disposable and/or reusable equipment, supplies and/or items, appropriate for that setting.
- 2. The following illustrative list includes, but is not limited to, those services, supplies, equipment and/or items which are included within the overall Nursery or "Rooming In" Charge, and are not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Nursery Room charge:
 - Bassinet, blankets, clothing, hats, footwear, diapers, baby formula, breast milk, baby bottle, body lotions, cord care supplies, powder, ID bracelets, soaps, linen, bulb syringe, Vaseline, soft net cleansers, undershirts, Bili Blanket and vests and masks, Baby Bendy, pacifiers and eye protectors; diaper cream (unless specifically ordered by a physician).
 - Any and all nursing care provided in this setting is included in the Room and Board or Room Care Charge.
 - Car seat testing and newborn hearing screening in this setting are included in the Room and Board or Room Care Charge.

C. Intensive Specialty Unit or Room Charges

- 1. Intensive Specialty Unit Room Charge Definition: A Specialty Unit or Room Charge shall include the room, dietary services, all nursing care, personnel, and routine disposable and/or reusable equipment, supplies and/or items, appropriate for that setting, as described below, and which shall include, at a minimum, the following settings: any Intensive Care unit, including but not limited to Surgical, Medical, Neonatal, Pediatric, Cardiovascular/Cardiothoracic, Trauma, and Neuro; Cardiac Care, Burn, Open Heart, etc.
- 2. The following illustrative list includes, but is not limited to, those services, supplies, equipment and/or items which are included within the overall Specialty Unit or Room Charge, and are not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Specialty Unit or Room Charge:
 - Monitoring or suctioning equipment/supplies of any kind; monitor pads, oximetry and related supplies (oxisensors), oxygen and supplies, telemetry, telemetry pouch, special warming/cooling blankets or beds, incubator and isolette, heat lamp, continuous blood pressure or arterial oxygenation equipment, any blood pressure cuff, Ambu Bag, pressure bags, resuscitation masks, crash cart, evaluations or social services required for the setting.
 - If post-operative surgical or procedural recovery services are performed in any critical care room setting other than the post-anesthesia recovery room, the critical care daily room charge will cover recovery service charges.
 - Any and all nursing care provided in this setting is included in the Room and Board or Room Care Charge.

D. Non-intensive Specialty Unit Room Charges

- Non-intensive Specialty Unit Room Charge Definition: A Non-intensive Specialty Unit Room Charge shall
 include the room, dietary services, all nursing care, personnel, and routine and/or reusable/disposable
 equipment, supplies, and/or items appropriate for that setting, as defined below, and which shall include, at
 a minimum, the following settings: Progressive Care, Step Down Care, Psychiatric Care, and
 Chemical/Alcohol Dependency Care, etc.
- 2. The following list defines those services, supplies, equipment and/or items which are included within the overall Non-intensive Specialty Unit Room Charge, and are not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Non-intensive Specialty Unit Room Charge:
 - a. Monitoring equipment/supplies of any kind; telemetry, any blood pressure cuff, crash cart, evaluations or social services required for the setting.
 - b. Any and all nursing care provided in this setting is included in the Room and Board or Room Care Charge.

E. Emergency Room Charges

- 1. Emergency Room Charge Definition: An Emergency Room Charge shall include all nursing care, personnel, and routine disposable and/or reusable equipment, supplies and/or items, appropriate for that setting.
- 2. The following illustrative list includes, but is not limited to, those services, supplies, equipment and/or items which are included within the overall Emergency Room Charge, and are not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Emergency Room Charge:
 - Monitoring equipment/supplies of any kind; any blood pressure cuff, crash cart, Ambu bag, oxygen and supplies, evaluations or social services required for the setting, IV start procedures and injections, administration fees.
 - IV/IM fluids/meds administered in the ER and/or procedures performed in the ER by a nurse, are not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Emergency Room Charge.
 - Any and all nursing care provided in this setting is included in the Room and Board or Room Care Charge.

F. Operating Room Charges

- 1. Operating Room Charge Definition. The Operating Room Charge shall include all nursing care, personnel, and routine disposable and/or reusable equipment, supplies and/or items, appropriate for that setting.
- 2. The following illustrative list includes, but is not limited to, those services, supplies, equipment and/or items which are included within the overall Operating Room Charge, and are not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Operating Room Charge:
 - a. Operating table, basin stands, buckets, mayo stands, tables, monitors, cautery machines and bovie machines, suction machine, suction liners, and related supplies; indirect expenses (i.e., orderlies, workroom technicians, repairs, sterilization or equipment, workroom supplies, floor stock, printing supplies, malpractice insurance, etc.), mayo covers, bovie pad and cord, needle count pad, all irrigation solutions (will allow additives separately), oxygen supplies and oxygen, , blankets (any kind), warming covers (any kind), gowns, gloves, masks, drapes (any kind), instruments (big and small), basins (all sizes, all kinds), anti-fog devices (FRED), additional staff charges, Ambu Bag, and crash cart.
 - b. Instruments included in a surgical pack and also billed individually are not separately reimbursable. This does not preclude billing for additional individual items that are medically necessary. For example, if the surgical pack includes one scalpel, but an additional scalpel is required to complete the surgery it is allowable to bill for the additional scalpel.
 - c. Any and all nursing care provided in this setting is included in the Room and Board or Room Care Charge, including surgical prep for procedures

G. Anesthesia Charges

- 1. Anesthesia Charge Definition: An Anesthesia Charge shall include all non-physician personnel, nursing care, inhalation anesthetic gases, and routine disposable and/or reusable equipment, supplies and/or items, appropriate for performing anesthesia services.
- 2. The following illustrative list includes, but is not limited to, those services, supplies, equipment and/or items which are included within the overall Anesthesia Charge, and are not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Anesthesia Charge:
 - Airway, breathing circuit, endotracheal tube, LTA kit, face mask; anesthesia machine, oxygen supplies and oxygen, tubing, skin prep, eye suction ointment, needles, syringes, tongue blades, suction machine, bottle, liner and related supplies, suction catheter, any equipment, monitor or supplies (if not included in the Operating Room Charges), personnel charges, printing supplies, instrument repair, sterilization, blood pressure monitor, esophageal stethoscope, and all thermometers.
 - An Anesthesia Charge includes any inhalational anesthetic, including but not limited to the following, Ethrane, Suprane, Sevoflurane, Isoflurane, Methoxyflurane, Halthane, Fluroxene, Nitrous Oxide, and diethyl ether.
 - A separate anesthesia supply charge is not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Anesthesia Charge.
 - A separate emergency anesthesia charge is not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Anesthesia Charge.

H. Recovery Room Charges

- 1. Recovery Room Charge Definition: A Recovery Room Charge shall include all nursing care, personnel, and routine disposable and/or reusable equipment, supplies and/or items, appropriate for that setting.
- 2. The following illustrative list includes, but is not limited to, those services, supplies, equipment and/or items which are included within the overall Recovery Room Charge, and are not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Recovery Room Charge:
 - Airways, masks, face tents, monitors and accessories, oxygen and supplies, oxygen delivery
 equipment, suction equipment, blankets (any kind), warming covers (any kind), additional
 personnel charges, and call back time.
 - Any and all nursing care provided in this setting is included in the Room and Board or Room Care Charge, including surgical prep for procedures
 - If post-operative surgical or procedural recovery services are performed in any critical care room setting other than the post-anesthesia recovery room, the critical care daily room charge will cover recovery service charges.

I. Labor and Delivery Room Charges

- 1. Labor and/or Delivery Room Charge Definition: A Labor and Delivery Room Charge shall include all nursing care, personnel, and routine disposable and/or reusable equipment, supplies and/or items, appropriate for that setting.
- 2. The following illustrative list includes, but is not limited to, those services, supplies, equipment and/or items which are included within the overall Labor and/or Delivery Charge, and are not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Labor and/or Delivery Charge:
 - a. Blood pressure cuff, thermometer, monitors of any kind, oxygen supplies and oxygen, betadine solution, 4 x 4 pads, ink pads, gloves of any kind, lubricant, amnihook, cord clamp, drapes, sutures, name bands, foot printer, suction bulbs, all instruments, gowns, irrigation solutions, OB pack, Ambu Bag and crash cart.
 - b. Any and all nursing care provided in this setting is included in the Room and Board or Room Care Charge, including surgical prep for procedures

J. Blood Charges

1. Blood Charge Definition: A Blood Charge shall include the blood itself, all blood products, any related nursing care, including administration, personnel, all routine disposable and/or reusable equipment, supplies and/or items, and fees necessary to obtain, handle, process, store, test and/or otherwise administer the blood to a patient.

K. Laboratory Charges

- 1. Laboratory Charge Definition: A Laboratory Charge shall include all nursing care, personnel, and all routine disposable and/or reusable equipment, supplies and/or items, and fees necessary to complete the laboratory procedure.
- 2. The following illustrative list includes, but is not limited to, those services, supplies, equipment and/or items which are included within the overall Laboratory Charge, and are not reimbursable if unbundled, fragmented or otherwise billed separately and apart from the Laboratory Charge:
 - a. All disposable supplies, including but not limited to, laboratory and/or collection devices, stat and call back charges, any venipuncture performed by nursing staff (excluding bedside glucoses); arterial punctures (unless performed by respiratory); personnel associated with the collection of a specimen, any charges for performing a study, or other indirect expenses.

A venipuncture performed by laboratory personnel, not nursing staff, is reimbursable as a Covered Service.

L. Radiology Charges

- 1. Radiology Charge Definition: A Radiology Charge shall include all nursing care, personnel, and all routine disposable and/or reusable equipment, supplies and/or items, and fees necessary to complete the radiology procedure, as defined below.
- The following illustrative list includes, but is not limited to, those services, supplies, equipment and/or
 items which are included within the overall Radiology Charge, and are not reimbursable if unbundled,
 fragmented or otherwise billed separately and apart from the Radiology Charge: call back time, stat
 charges, scout and routine films or photographs.

IV and oral contrast are allowed separately.

M. Cardio Vascular Charges

Cardio Vascular Charge Definition: A Cardio Vascular Charge shall include all nursing care, personnel, all
routine disposable and/or reusable equipment, supplies and/or items, and fees necessary to complete
the cardio vascular procedure, including but not limited to, a charge for an EKG, treadmill, testing,
catheterization, echocardiogram, and fetal or adult cardiac monitoring of any kind. Cardiopulmonary
resuscitation is not separately billable.

N. Respiratory Therapy Charges

- 1. Respiratory Therapy Charge Definition: A Respiratory Therapy Charge shall include all nursing care, all respiratory technician time, personnel, all routine disposable and/or reusable equipment, supplies and/or items, fees necessary to complete the respiratory therapy procedure or service, and includes the following kinds oxygen or breathing treatments: aerosol, IPPB, incentive spirometry, ultrasonic nebulizer, and/or percussion or postural drainage treatment.
 - A ventilator hourly/daily charge includes the following components: ventilator machine, P.E.E.P. (Positive End Expiratory Pressure), the IMV circuit, the breathing circuit, technician time, water, an Ambu Bag, any ventilator related disposable supplies.
 - A ventilator hourly/daily charge includes the following respiratory technician services: manual ventilation charges during any in hospital transport; intubation and/or extubation charges and related supplies; respiratory assessment; endotracheal tube care, etc.
 - An oxygen hourly/daily charge includes the following components: all oxygen distribution or delivery supplies or equipment, such as a flow meter, a humidifier, a croupette; the oxygen itself, water, respiratory therapy technician time, delivery device and all other disposable supplies, nasal cannula, nasal catheter, any kind of mask, tent or hood, isolette, and T-piece.
 - An oxygen hourly/daily charge is not reimbursed separately from a ventilator hourly/daily charge.
 - When more than one level of respiratory/ventilation support occurs on the same date of service within the same 24 hour period of time, only the highest level of respiratory support will be allowed.