



neonatal and pediatric critical care services

description of procedure/service

This policy applies to the payment for Pediatric or NICU services provided by physicians and hospital facilities for the care of critically ill newborns or managing continuing intensive care of the very low birth weight infant. NICU services involve high complexity decision making to manage, monitor and treat critically ill or very low birth weight neonates 30 days of age or less. The purpose is to ensure that sufficient clinical criteria have been met to assure medical appropriateness of the inpatient NICU stay.

Newborns readmitted to the NICU within 31 days of the original discharge with the same or related condition will not receive additional payment if contracted for DRG or case rate payments.

policy

Fallon Community Health Plan reimburses for Pediatric or NICU services when they are determined to be medically necessary and when they meet the medical criteria and guidelines indicated below.

benefits application

- FCHP Direct Care/FCHP Select Care
- FCHP Independent Care
- FCHP Flex Care Direct/Select
- Fallon Senior Plan™
- FCHP MassHealth
- Major Medical
- Bill at Home/Direct Enrollment
- Fallon Preferred Care

coverage and reimbursement criteria

Direct physician supervision indicates that the physician must have face-to-face contact with the neonate and be readily available to assist if necessary. The physician is not required to provide 24-hour in-house coverage, but does need to be physically present at some time during that 24-hour period to examine the neonate and review the care with the health care team. Since the neonatal and pediatric critical care codes are global 24-hour codes, the appropriate code should be reported only once per day, per patient, even if the physician provides services to the neonate multiple times during a single day.

Reimbursement is as indicated in the contract.

preauthorization guidelines

Preauthorization is not required, but notification is required for all admissions.

billing/coding guidelines

Providers must bill the **ICD-9-CM diagnosis codes** to the highest level of specificity that supports medical necessity.

Level II: Low birth weight neonates who are not sick but require frequent feeding, and neonates who require more hours of nursing. (Revenue Code 0172).

Level III: Sick neonates, who do not require intensive care, but require 6-12 hours of nursing each day. (Revenue Code 0173)

Level IV: Constant nursing and continuous cardiopulmonary and other support for severely ill neonates. (Revenue Code 0174).

Hospitals bill the appropriate Revenue Codes using the **UB-92 or ANSI 8371 4010**.

nicu revenue codes:

0172 Newborn – Level II

0173 Newborn - Level III

0174 Newborn - Level IV

0179 Other nursery

pediatric revenue codes

0203 – Pediatric ICU

Physicians bill professional physician services using the **CMS-1500** claim form or **ANSI 837P 4010**.

pediatric critical care cpt codes:

99293 - Initial inpatient pediatric critical care, per day for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age.

99294 - Subsequent inpatient pediatric critical care, per day, for the evaluation and management of a critically ill infant or young child, 29 days through 24 months of age.

neonatal critical care cpt codes:

99295 - Initial inpatient neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less.

99296 - Subsequent inpatient neonatal critical care, per day, for the evaluation and management of a critically ill neonate, 28 days of age or less.

99298 - Subsequent intensive care, per day, for the evaluation and management of the recovering very low birth weight infant (present body weight less than 1500 grams).

99299 - Subsequent intensive care, per day, for the evaluation and management of the recovering low birth weight infant (present body weight of 1500-2500 grams).

99300- Subsequent intensive care; per day, for the evaluation and management of the recovering infant (present baby weight of 2500-5000 grams).

place of service

This policy applies to inpatient services.

policy implementation

Policy number: ADM0038
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