

PEDIATRIC AND NEONATAL CRITICAL AND INTENSIVE CARE SERVICES

Policy Number: ADMINISTRATIVE 250.6 T0

Effective Date: January 1, 2019

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Related Policies

- Refer to the [Questions and Answers](#) section of the policy

INSTRUCTIONS FOR USE

The services described in Oxford policies are subject to the terms, conditions and limitations of the member's contract or certificate. Unless otherwise stated, Oxford policies do not apply to Medicare Advantage members. Oxford reserves the right, in its sole discretion, to modify policies as necessary without prior written notice unless otherwise required by Oxford's administrative procedures or applicable state law. The term Oxford includes Oxford Health Plans, LLC and all of its subsidiaries as appropriate for these policies.

Certain policies may not be applicable to Self-Funded members and certain insured products. Refer to the member specific benefit plan document or Certificate of Coverage to determine whether coverage is provided or if there are any exclusions or benefit limitations applicable to any of these policies. If there is a difference between any policy and the member specific benefit plan document or Certificate of Coverage, the member specific benefit plan document or Certificate of Coverage will govern.

UnitedHealthcare may also use tools developed by third parties, such as the MCG™ Care Guidelines, to assist us in administering health benefits. The MCG™ Care Guidelines are intended to be used in connection with the independent professional medical judgment of a qualified health care provider and do not constitute the practice of medicine or medical advice.

APPLICABLE LINES OF BUSINESS/PRODUCTS

This policy applies to Oxford Commercial plan membership.

APPLICATION

This policy applies to all network and non-network physicians and other qualified health care professionals, including, but not limited to, non-network authorized and percent of charge contract physicians and other qualified health care professionals.

OVERVIEW

This policy addresses the reporting of pediatric and neonatal critical and intensive care services, Current Procedural Terminology (CPT®) codes 99468-99476 and 99477-99480, based on instruction from the American Medical Association (AMA) CPT book.

REIMBURSEMENT GUIDELINES

CPT instruction gives specific direction for the appropriate reporting of pediatric and neonatal critical and intensive care codes 99468-99476 and 99477-99480. This direction applies to situations when pediatric and neonatal critical

and/or intensive care services are performed for the same patient, on the same day, with certain procedure services. CPT direction specifies what codes to report and what codes are considered inclusive in situations where multiple services are performed for the pediatric or neonatal patient requiring critical and/or intensive care. CPT applies these reporting instructions to physicians and/or other health care professionals in the same group.

Oxford follows the AMA guidelines with respect to the reporting of pediatric and neonatal critical and intensive care codes 99468-99476 and 99477-99480. When services considered inclusive are reported on the same day with a pediatric and neonatal critical or intensive care code by the Same Group Physician and/or other Health Care Professional, those services will be considered for separate reimbursement or bundled into 99468-99476 and 99477-99480 in accordance with those edits outlined in the attachment section.

For a complete list of edits, see the [Attachments](#) section of the policy.

Modifiers

CPT direction indicates that certain procedure services are included in, and not reported separately from, pediatric and neonatal critical and intensive care services. CPT does not give direction indicating where it would be appropriate to allow for a modifier override when pediatric and neonatal critical and intensive care codes are reported with a specified procedure code on the same day for the same patient by the Same Group Physician and/or other Health Care Professional. In this circumstance Oxford will follow the CMS National Correct Coding Initiative (NCCI) to determine if a modifier override could be allowed if appropriate.

For a complete list of edits and allowable modifier overrides, see the [Attachments](#) section of the policy.

DEFINITIONS

Same Group Physician and/or other Health Care Professional: All physicians and/or other health care professionals of the same group reporting the same Federal Tax Identification number.

QUESTIONS AND ANSWERS

1	Q:	If pediatric and neonatal critical and/or intensive care services are performed for the same patient on the same day as other evaluation and management (E/M) services, are both of these services reimbursable?
	A:	Pediatric and neonatal critical and/or intensive care services may be subject to additional Oxford reimbursement policies. Refer to Oxford's <i>Same Day/Same Service</i> policy for further details regarding reimbursement of E/M codes billed on the same day by physicians and/or other health care professionals in the same group practice who are of the same specialty.

ATTACHMENTS

Pediatric and Neonatal Critical and Intensive Care Edits

This table identifies edits between CPT codes 99468-99476 and/or 99477-99480 and other E/M and procedure services and where modifiers are allowed when appropriate.



Critical and Intensive Care Edits

REFERENCES

The foregoing Oxford policy has been adapted from an existing UnitedHealthcare national policy that was researched, developed and approved by UnitedHealthcare Payment Policy Oversight Committee. [2017R0126A]

American Medical Association, Current Procedural Terminology (CPT®) and associated publications and services.

Centers for Medicare and Medicaid Services, National Correct Coding Initiative (NCCI) publications.

POLICY HISTORY/REVISION INFORMATION

Date	Action/Description
01/01/2019	<ul style="list-style-type: none"> Updated list of <i>Pediatric and Neonatal Critical and Intensive Care Edits</i> (identifies edits between CPT codes 99468-99476 and/or 99477-99480 and other E/M and procedure services and where modifiers are allowed when appropriate) to reflect

Date	Action/Description
	annual code edits; removed CPT (deny) codes 0188T, 0189T and 99090 <ul style="list-style-type: none">Archived previous policy version ADMINISTRATIVE 250.5 TO