



Reimbursement Policy	
Subject: Multiple Delivery Services	
Policy Number: G-06044	Policy Section: Surgery
Last Approval Date: 04/29/2022	Effective Date: 04/29/2022

**** Visit our provider website for the most current version of the reimbursement policies. If you are using a printed version of this policy, please verify the information by going to <https://www.bluecrossnc.com/providers/blue-medicare-providers/healthy-blue-medicare>. ****

Disclaimer

These reimbursement policies serve as a guide to assist you in accurate claims submissions and to outline the basis for reimbursement if Blue Cross and Blue Shield of North Carolina (Blue Cross NC) Medicare Advantage covered the service for the Healthy Blue + MedicareSM (HMO-POS D-SNP) member's 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 Current Procedure Terminology[®] (CPT) codes, Healthcare Common Procedure Coding System (HCPCS) codes, and/or revenue codes. These codes denote the services and/or procedures performed and, when billed, must be fully supported in the medical record and/or office notes. Unless otherwise noted within the policy, our reimbursement policies apply to both participating and non-participating professional providers and facilities.

If appropriate coding/billing guidelines or current reimbursement policies are not followed, Blue Cross NC Medicare Advantage may:

- Reject or deny the claim.
- Recover and/or recoup claim payment.
- Adjust the reimbursement to reflect the appropriate services and/or procedures performed.

<https://www.bluecrossnc.com/providers/networks-programs/blue-medicare/healthy-blue-medicare>

Blue Cross and Blue Shield of North Carolina Senior Health, DBA Blue Cross and Blue Shield of North Carolina, is an HMO-POS D-SNP plan with a Medicare contract and a NC State Medicaid Agency Contract (SMAC). Enrollment in Blue Cross and Blue Shield of North Carolina Senior Health depends upon contract renewal.

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These reimbursement policies may be superseded by mandates in provider, state, federal, or Centers for Medicare & Medicaid Services (CMS) contracts and/or requirements. Blue Cross NC Medicare Advantage strives to minimize delays in policy implementation. If there is a delay, we reserve the right to recoup and/or recover claims payment to the effective date in accordance with the policy. We reserve the right to review and revise these policies when necessary. When there is an update, we will publish the most current policy to the website.

Policy

Blue Cross NC Medicare Advantage allows reimbursement for multiple births by a same- delivery or combined-delivery method unless provider, state, federal, or CMS contracts and/or requirements indicate otherwise. For vaginal or cesarean deliveries involved in multiple births and performed using a same-delivery or combined-delivery method, professional reimbursement is based on the following rules:

- Vaginal Deliveries — Vaginal deliveries involved in multiple births should be billed with Modifier 51. Multiple procedure guidelines will apply.
- Cesarean Deliveries — Cesarean deliveries involved in multiple births should be billed with Modifier 22. Multiple procedure guidelines will not apply.

Related Coding

Standard Correct Coding applies

Policy History

04/29/2022	Biennial review approved and effective: updated policy template, no language changes
01/01/2021	Initial approval and effective date

References and Research Materials

This policy has been developed through consideration of the following:

- CMS
- Department of Health and Human Services, DHB Contract
- State contract
- Blue Cross NC Medicare Advantage contract(s)

Definitions

General Reimbursement Policy Definitions

Related Policies and Materials

Assistant at Surgery (Modifier 80/81/82/AS)

Distinct Procedural Services (Modifiers 59, XE, XP, XS, XU)

Maternity Services

Modifier 22: Increased Procedural Service
Modifier 25: Significant, Separately Identifiable Evaluation and Management Service by the Same Physician on the Same Day of the Procedure or Other Service
Modifier Usage
Multiple and Bilateral Surgery: Professional and Facility Reimbursement
Professional Anesthesia Services

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