



March 2, 2016

Changes to claims submission requirements for outpatient hospital services

Effective January 1, 2016, Anthem Blue Cross and Blue Shield implemented ForwardHealth update number 2016-02, *Changes to claims submission requirements for outpatient hospital services*. The health plan will adopt new Place of Service (POS) code 19 (off-campus outpatient hospital) and revised POS code 22 (on-campus outpatient hospital) for professional claims as well as modifier PO (services, procedures and/or surgeries furnished at off-campus provider-based outpatient departments) on facility claims. For services provided in an off-campus provider-based outpatient clinic, the health plan will reimburse only a professional charge, consistent with state policy.

Professional providers are required to indicate POS 19 on claims submitted for services performed in an off-campus provider-based outpatient clinic. In accordance with Medicaid payment policy for POS 22, the health plan will apply the site-of-service payment differential to services reported with POS 19 for specified codes that are typically office-based. This policy will become effective with claims for dates of service on/after June 15, 2016.

Additionally, modifier PO is required on institutional claims to indicate the facility charge for services provided in off-campus provider-based outpatient clinics. In alignment with state policy, the health plan will not reimburse claims submitted with modifier PO.

If you have questions about this communication, received it in error, or need assistance with any other item, call Provider Services at **1-855-558-1443**.

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