

PROVIDER QUICK TIPS



Limits on Medical-Surgical Consultations During Inpatient Stay

The Department of Human Services (the department) reminds providers that Medical Assistance (MA) payment for inpatient consultation is limited to two consultations provided to the same patient, during the same period of hospitalization as set forth in MA Regulations at 55 Pa.Code §1150.56, and clarified at §1150.56a.

Providers are also reminded that payment for an inpatient consultation includes followup care; therefore, the consultant is not eligible to bill for daily medical care. Only the attending physician may bill for daily medical care.

When billing for inpatient consultations or inpatient visits, it is essential to report the recipient's admission date and discharge date as indicated in the billing guide instructions for your respective media type of claims submission.

Failure to report the correct entry of recipient admission and discharge dates will result in inappropriate payments which are subject to an audit review that could result in claims being recovered in the future. Error Status Code (ESC) 5129 (Limit of two consultations per hospitalization) will post when more than two consultations are billed for the same recipient during the same hospitalization period.

Providers may view 55 Pa.Code §1150.56 and §1150.56a by accessing the following links:

http://www.pacode.com/secure/data/055/chapter1150/s1150.56.html

http://www.pacode.com/secure/data/055/chapter1150/s1150.56a.html

Thank you for your service to our MA Recipients.

We value your participation.

Check the department's website often at: www.dhs.pa.gov



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