

ACT 22 OVERVIEW OF HOSPITAL BILLED CHARGES February 2023

HOSPITAL SERVICES	HOSPITAL CATEGORY INPATIENT/OUTPATIENT	BILLED CHARGES	INPATIENT ADMISSION CRITERIA	REIMBURSEMENT FEES
AMBULANCE (Both Ground and Air)	OUTPATIENT	Billed as OUTPATIENT	Ambulance transports do not meet inpatient admission criteria	Medicare Rates
SURGERY	Considered OUTPATIENT <u>UNLESS</u> SURGERY required during inpatient hospital stay or admitted as inpatient following surgery	Billed as OUTPATIENT	Same day surgery does not meet inpatient admission criteria	Medicare Rates
EMERGENCY ROOM	OUTPATIENT	Billed as EMERGENCY ROOM only	Emergency Room ONLY does not meet inpatient admission criteria	Medicare Rates
OBSERVATION AND OVERNIGHT ER VISITS	OUTPATIENT - Includes extended hours or overnight stay in ER and/or hours in an OBSERVATION BED. There are no hour limits to these charges. <i>Two-midnight rule does not apply.</i>	Billed as OUTPATIENT	Emergency Room and Observation does not meet inpatient admission criteria	Medicare Rates
EMERGENCY ROOM AND ADMISSION AS INPATIENT	INPATIENT	Emergency Room and Inpatient Charges are billed NO SEPARATION OF CHARGES	Must meet inpatient admission criteria when billing DHS. PSR obtained by hospital - PSR Authorization # must be included on hospital claim	Medicaid APR-DRG Rates
INPATIENT	INPATIENT	All charges including Room Charges are on billed claim	If inmate has other benefits in place: Provider would need to adhere to Private Primary Health Insurance guidelines for admission. If not, must meet inpatient admission criteria when billing DHS	IF PRIVATE PRIMARY HEALTH INSURANCE- Hospital bills insurance IF MEDICARE - Hospital must bill Medicare for DENIAL, then submit claim and denial to DHS FFS IF MA HMO - DHS MCO department disenrolls inmate's MA HMO coverage for incarceration period. Process can take up to 60 days.
INPATIENT	INPATIENT	All charges including Room Charges are on billed claim	DHS denies PSR request because Admission did not meet "MEDICAL NECESSITY" Criteria	Hospital can bill for Ancillary charges only as OUTPATIENT Medicare Rates Reimbursement
TRANSFERRED FROM HOSPITAL TO HOSPITAL	HOSP 1: OUTPATIENT/ER only HOSP 2: INPATIENT	Hosp 1: Billed as OUTPATIENT Hosp 2: All charges including Room Charges are on billed claim	Hosp 1: Does not meet inpatient admission criteria Hosp 2: Must meet inpatient admission criteria when billing DHS	Hosp 1: Medicare Rates Hosp 2: Medicaid APR-DRG Rates
TRANSFERRED FROM HOSPITAL TO HOSPITAL	HOSP 1: INPATIENT HOSP 2: INPATIENT	Hosp 1 & Hosp 2 billed separately: All charges including Room Charges are on respective billed claims	Hosp 1: Must meet inpatient admission criteria when billing DHS Hosp 2: Must meet inpatient admission criteria when billing DHS	Hosp 1: Medicaid APR-DRG Rates Hosp 2: Medicaid APR-DRG Rates
Cost Management Plus, Inc. PIMCC Administrator - ACT 22 Liaison			DHS: Department of Human Services FFS: Fee-For-Service	APR-DRG: All Patient Refined-Diagnosis Related Group PSR: Place of Service Review program