



# Follow-Up Care Rendered in an Emergency Room Site of Service

Policy Number: ADMINISTRATIVE 260.6 T0

Effective Date: July 1, 2022

⇒ Instructions for Use

Table of Contents	Page	Related Policies
<u>Purpose</u>	1	None
<u>Definitions</u>	1	
Policy	1	
Procedures and Responsibilities	1	
Applicable Codes	2	
<u>References</u>	2	
Policy History/Revision Information	2	
Instructions for Use	2	

## Purpose

The purpose of this policy is to communicate Oxford's non-coverage of follow-up care when rendered in an emergency room (ER) site of service/setting.

#### **Definitions**

Emergency Medical Treatment and Labor Act (EMTALA): Federal labor law requires that if a patient is determined to have an Emergency Medical Condition then the Emergency Room Staff must screen and stabilize the patient, if possible, before asking about insurance.

### **Policy**

Follow-up care provided in an emergency room (ER) site of service is not a covered benefit.

### **Procedures and Responsibilities**

Prior to a network provider/facility rendering follow-up care to any Oxford Member in an ER site of service/setting, the provider/facility must inform the Oxford Member that follow-up care provided in an ER site of service/setting is not a covered benefit under their Oxford plan. Additionally, the Oxford Member must be informed that they will be held financially responsible for the cost of all follow-up and/or routine medical care they choose to receive in an ER site of service/setting rather than from their Primary Care Provider.

As a reminder, in-network providers may seek and collect payment from an Oxford Member for non-covered services only if the provider obtained the Member's written consent, in advance of rendering the services, to be financially responsible for the total cost of the non-covered services.

Out-of-Network providers may bill Members directly for the entire cost of non-covered services, without first obtaining written consent.

### **Applicable Codes**

The following list(s) of procedure and/or diagnosis codes is provided for reference purposes only and may not be all inclusive. Listing of a code in this policy does not imply that the service described by the code is a covered or non-covered health service. Benefit coverage for health services is determined by the member specific benefit plan document and applicable laws that may require coverage for a specific service. The inclusion of a code does not imply any right to reimbursement or guarantee claim payment. Other Policies may apply.

Revenue Code	Description	
450	Emergency room – general	
451	451 Emergency room – EMTALA emergency medical screening services	
452	ER beyond EMTALA screening	
459	Emergency room – other emergency room	

#### ICD-10 Diagnosis Codes

Follow-Up Care Rendered in an Emergency Room Site of Service: ICD-10 Diagnosis Code List

#### References

Oxford Certificates of Coverage.

# **Policy History/Revision Information**

Date	Summary of Changes	
07/01/2022	•	Routine review; no change to policy guidelines
	•	Archived previous policy version ADMINISTRATIVE 260.5 TO

## **Instructions for Use**

The services described in Oxford policies are subject to the terms, conditions and limitations of the member's contract or certificate. 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.