Payment Policy | Concurrent Care

EFFECTIVE DATE: 03/01/2004
POLICY LAST UPDATED: 03/19/2013

OVERVIEW
This policy documents requirements associated with concurrent care services.

PRIOR AUTHORIZATION
Not applicable.

POLICY STATEMENT
Inpatient medical care visits are covered.

Concurrent inpatient medical care is the provision of medical visits to the same member by more than one physician on the same day. If the visits are not required due to different expertise, then the care is considered duplicative, and not separately reimbursed.

- The multiple providers involved in the patient's care must be of different specialties, or in the case of physicians of the same specialty, they must have different sub-specialties or expertise.
- Cross coverage by a physician (same or like specialty) in the same or covering group practice as the attending physician is not considered concurrent care, and will be considered one visit for reimbursement purposes.
- All other rules regarding the global surgical period apply.

MEDICAL CRITERIA
Not applicable.

BACKGROUND
Concurrent medical visits occur when the attending physician requests the services of another physician for a consultation, and that physician, of a different specialty, or in the case of the same specialty, a different sub-specialty, continues to manage, or advise in the management of, the patient along with the attending. Concurrent care exists when more than one physician renders services during a period of time. The reasonable and necessary services of each physician rendering concurrent care are covered if each physician is required to play an active role in the patient's treatment. This occurs, for example, because of the existence of more than one medical condition requiring diverse specialized medical services.

COVERAGE
Not applicable.

CODING
Correct coding requires multiple physicians of the same group or covering group who are filling the role of a single physician providing more than one visit per day to report only one hospital visit code per day (i.e. providing coverage or multiple visits, but are not providing services requiring different expertise).

99231, 99232, 99233, 99307, 99308, 99309, 99310

RELATED POLICIES
Not applicable.

PUBLISHED

Provider Update	Jun 2013
Provider Update	May 2008
Policy Update	Jun 2007

REFERENCES

http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R147BP.pdf

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