

Medical Coverage Policy



Medical Supply Wastage

Device/Equipment Drug Medical Surgery Test Other

Effective Date:	5/1/2013	Policy Last Updated:	11/06/2012
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Prospective review is recommended/required. Please check the member agreement for preauthorization guidelines.

Prospective review is not required.

Description:

BCBSRI has created a policy to document the reimbursement of prepackaged (i.e., sterile) medical supplies/devices intended for individual use that has been opened but unused due to an unforeseen problem. In the United States, implanted items or supplies made ready for a particular patient but not actually used during the particular procedure are often discarded. This is because these items are deemed contaminated even if there has been no contact at all with the patient. It is the responsibility of the physician or other qualified health professional that the item remains unopened until it has been confirmed the item may be used.

Providers may not bill BCBSRI for medical a supply or device when the item has not been in contact with the patient or the item was opened, contaminated, or the wrong size, but was not used. For example, an intrauterine device (I.U.D) package was opened prior to the attempted insertion of which was unsuccessful due to insufficient dilation of the cervix.

"Open but unused" is defined as devices whose sterility has been breached or compromised or whose sterile package was opened, but the devices have not come in contact with blood or bodily fluids.

Providers may bill for items that been inserted and removed or insertion of a device was attempted but unsuccessful during a procedure.

Medical Criteria:

None

Policy:

Charges for **opened and unused** medical supplies will not be reimbursed. The member is not held liable for these charges. This policy is applicable for all BCBSRI products.

Coding:

Open and unused items shall be appended with the 53 modifier.

One claim shall be filed which will include the procedure and supply used.

Related Topics:

None

Published:

Provider Update, February 2013

Provider Update, September 2012

This medical policy is made available to you for informational purposes only. It is not a guarantee of payment or a substitute for your medical judgment in the treatment of your patients. Benefits and eligibility are determined by the member's subscriber agreement or member certificate and/or the employer agreement, and those documents will supersede the provisions of this medical policy. For information on member-specific benefits, call the provider call center. If you provide services to a member which are determined to not be medically necessary (or in some cases medically necessary services which are non-covered benefits), you may not charge the member for the services unless you have informed the member and they have agreed in writing in advance to continue with the treatment at their own expense. Please refer to your participation agreement(s) for the applicable provisions. This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. BCBSRI reserves the right to review and revise this policy for any reason and at any time, with or without notice.