

Medical Coverage Policy

Member Cost Sharing

 □ Device/Equipment □ Drug □ Medical □ Surgery □ Test ○ Other 			
Effective Date:	11/15/2011	Policy Last Updated:	11/15/2011
 □ Prospective review is recommended/required. Please check the member agreement for preauthorization guidelines. □ Prospective review is not required. 			
	view is not require	ca.	
POLICY			
Description: This reimbursement pol	icy was written to docu	ment member cost sharing paymer	nt.
Medical Criteria: Not applicable.			
Policy:			

Fixed Dollar:

Copayments

- Fixed dollar deductibles and copayments are deducted from BCBSRI's inpatient or outpatient allowance; and
- Billed to the member by the hospital, up to the hospital's allowance amount.

Percentage coinsurance:

• Percentage coinsurance for inpatient or outpatient services are applied to the lower of BCBSRI's payment allowance(s) or covered charges and billed to the member by Hospital.

After reduction of allowance by the appropriate copayments, deductibles and coinsurance, the balance is paid to the Hospital by BCBSRI; and Hospital may only bill the member the amount of the applicable copayments, deductibles and coinsurance.

Non-Covered Services

Non-covered services are defined as services and supplies excluded from coverage or subject to a limitation of coverage by a member's benefit plan. This includes nonemergency services obtained by member outside of any applicable limited provider network without prior authorization of BCBSRI.

- Covered Health Services may be updated at any time to maintain compliance with federal or state laws or regulations, or any reason at the discretion of BCBSRI; and
- · Compensation as a result of any such change or amendment will not be adjusted; and
- A minimum of thirty (30) days' advance notice on material changes to those covered health services likely to be performed by a hospital will be provided; and
- If member is provided non-covered health services, then a representative of the hospital, must, prior to the provision of such services inform member in writing:

- 1. of the type of service(s) to be provided; and
- 2. that the services are not covered by BCBSRI and
- 3. that the Member is personally responsible for the payment of such service(s).
- When a member with full semiprivate coverage occupies a private room, the hospital may bill
 a member the private room differential only when the member requests a private room and
 acknowledges in advance in writing the obligation to pay such differential. The hospital
 agrees not to bill a member the private room differential if:
 - 1. A private room is medically necessary; or
 - 2. The member is placed in a private room because of convenience to the hospital.

Any such writing must be signed by the member or member's legal guardian prior to the time that hospital renders the non-covered health services. Member is then responsible for payment of such services, and BCBSRI will not reimburse any portion of these non-covered services. If the provider fails to have member sign the notice of non coverage prior to the services being rendered, the member is held harmless for these non covered services.

Also Known As:

Not applicable

Related Topics:

Not applicable

Published:

Provider Update, January 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.