

Reimbursement Policy Provider Newsletter Article

Policy Update

Emergency Department: Leveling of Evaluation and Management Services

Effective January 15, 2021, Amerigroup classifies with an Evaluation and Management (E&M) code level the intensity/complexity of emergency department (ED) interventions a facility uses to furnish all services indicated on the claim. E&M services will be reimbursed based on this classification. Facilities must use appropriate *HIPAA* compliant codes for all services rendered during the ED encounter. If the E&M code level submitted is higher than the E&M code level supported on the claim, we reserve the right to perform one of the following:

- Deny the claim and request resubmission at the appropriate level or request the provider submit documentation supporting the level billed.
- Adjust reimbursement to reflect the lower ED E&M classification.
- Recover and/or recoup monies previously paid on the claim in excess of the E&M code level supported.

Providers who believe their medical record documentation supports reimbursement for the originally submitted level for the E&M service will be able to follow the dispute resolution process in accordance with the terms of their contract. Claims disputes require a statement providing the reason the intensity/complexity would require a different level of reimbursement, and the medical records which should clearly document the facility interventions performed and referenced in that statement.

For additional information, please review the Emergency Department: Leveling of Evaluation and Management Services reimbursement policy at <https://providers.amerigroup.com>. Under Quick Tools, select Reimbursement Policies > Medicaid.

<https://providers.amerigroup.com>