


Physicians' Billing Office		
SECTION:	ADJUSTMENTS	POLICY NUMBER: A101
POLICY TITLE:	"UNBILLABLE" SERVICES AND ITEMS	PAGE: 1 of 3
APPROVALS: FPG B&F Committee 10/26/2009	PBO:	ISSUED: 09/08/2009 EFFECTIVE: 07/01/2010
SUPERSEDES: N/A		

PURPOSE:


1. To promote and ensure **compliance** with governmental and private payor correct coding and reimbursement guidelines, industry standard coding conventions and other applicable national and local policies.
2. To improve the **efficiency** of billing and collections processes.
3. To maximize **reimbursement** for services by proper application of HCPCS modifiers, where use of such modifiers is warranted per correct documentation and coding guidelines.
4. To maintain a fair and balanced **provider compensation** model based on billable and reimbursable services only.
5. To deliver a better **patient experience** by providing more accurate billing services.
6. To safeguard UCLA FPG accounts receivable from artificial inflation of charges leading to increased Days Revenue Outstanding (DRO), lower Gross/Net Collection Rates, and other critical revenue cycle indicators.

POLICY:

1. It is the policy of FPG PBO to bill for services and items consistent with industry standard coding and billing practices, and in compliance with governmental and private payor correct coding and reimbursement guidelines.
2. 'Bundled' and 'Global' services and items are considered unbillable and "economically valueless" and will not be billed to governmental health insurance carriers, which utilize Correct Coding Initiative (CCI) as a claim adjudication editing tool.

PBO will apply the above rule to additional private payors as they adopt CCI as a primary claim adjudication editing tool.

3. These unbillable services and items will not be reported to the provider compensation plan, unless proper provider documentation supports special exclusions to the applicable rules.
4. When such exclusions are defensible by proper documentation, services will be billed and collected per PBO collection guidelines.

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SUPERSEDES: N/A		

POLICY CROSS REFERENCES:

N/A

APPLICABILITY:

This policy applies only to FPG PBO Customers.

MONITORING / ACCOUNTABILITY:

Each PBO billing unit must conduct frequent, regularly scheduled quality reviews to ensure adherence with this policy. Immediate corrective actions must be taken as necessary. These may include:

- a) Training and re-training of staff;
- b) Disciplinary actions;
- c) Escalating non-compliance to PBO director.

COGNIZANT OFFICE:

For interpretations of this policy, resolution of problems and special situations, contact:

Grace Barba
 Director of Physician Billing Office
gbarba@mednet.ucla.edu

POLICY AUTHORITY:

UCLA Faculty Practice Group


REVISION HISTORY:

Original Policy issued: 09/08/2009

Revisions: None

REFERENCES:

- Medicare National Correct Coding Sourcebook (2008 Version 14.3)

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SUPERSEDES: N/A		

- Medicare Claims Processing Manual (January 2009)
- Part B Answer Book (October 2008)®
- American Medical Association's Current Procedural Terminology®