
CHAPTER 5: PROFESSIONAL SERVICES

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Concurrent Care - Inpatient

Inpatient concurrent care is the provision of services by more than one ~~physician-provider~~ to the same ~~recipient-beneficiary~~ on the same day. ~~Concurrent care services are necessary when a recipient's condition and or diagnosis (es) require the services of more than one physician to assure the recipient receives the appropriate standard of treatment. In all cases, c~~Concurrent care ~~must is~~ only covered when a beneficiary's condition requires the care of more than one provider and be medically necessary, unduplicative, and reasonable the services rendered by each individual provider are medically necessary and not duplicative.

Providers from different specialties/subspecialties, whether from the same group or a different group, shall be reimbursed separately for concurrent care.

Each provider from a different specialty/subspecialty can be reimbursed for one initial hospital visit per admission. In addition, each provider from a different specialty/subspecialty can be reimbursed for a maximum of one subsequent hospital visit per day. In all cases, services rendered must meet Current Procedural Terminology (CPT) guidelines and be medically necessary to be eligible for reimbursement.

Within the same specialty/subspecialty, only one provider can be reimbursed for one initial hospital visit per admission and, subsequently, only one provider can be reimbursed for a maximum of one subsequent hospital visit per day.

Only the provider responsible for discharging the beneficiary shall be reimbursed for hospital discharge services on the discharge day.

The global surgery period policy, and pre- and post-operative procedure code edits, supersede this policy when applicable.

In order to qualify for concurrent care, the recipient must:

- ~~Have a condition(s) or a diagnosis(es) which requires the services of a physician(s) whose specialty/subspecialty is different from that of the primary care physician in the majority of cases, and~~
- ~~Have a condition of such severity and/or complexity that the medical community would consider the rendering of concurrent care to be reasonable and warranted and upheld by peer review.~~

~~Recipients 21 years of age and older are allowed up to three medically necessary inpatient hospital service visits per day from providers of different specialties/subspecialties. Reimbursement is~~

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~~allowed for only one provider per specialty/subspecialty with a maximum of three paid visits per day per recipient for all providers.~~

~~General guidelines:~~

- ~~• Concurrent care for simple outpatient surgical procedures and uncomplicated diagnoses is not covered.~~
- ~~• The recipient's hospital record must be available for review, should it be necessary to substantiate the need for concurrent care.~~
- ~~• If the surgeon's role is assumed by a provider, the global surgery period policy (GSP) and pre and post-op editing supersedes this policy.~~
- ~~• Providers should bill the appropriate subsequent hospital care code when rendering these services in the hospital settings. Only one service from the current CPT listing of 'initial hospital care' procedure code range can be reimbursed per **inpatient stay** to the "admitting" provider. For initial inpatient encounters by physicians other than the admitting physician, subsequent hospital care codes or inpatient consultation codes, if appropriate, are to be used.~~
- ~~• Only one inpatient hospital care service or inpatient consultation is allowed per day by each concurrent care provider as described above. If a recipient must be seen by the same provider more than once daily, the level of code billed for that date should reflect all the services rendered that day.~~
- ~~• Hospital discharge services are included in the three inpatient visit limit per day. An attending provider cannot be reimbursed for an inpatient service and a hospital discharge service on the same date of service. Only one provider shall be reimbursed for the hospital discharge service per inpatient stay.~~

~~**NOTE:** Concurrent care policy does not apply to state-funded foster children.~~