

Coding Policy Policy and Procedure		
SUBJECT: Coding Policy 38.0 Outpatient Supplies	DEPARTMENT: Health Care Services	
ORIGINAL EFFECTIVE DATE: 06/01	DATE(S) REVIEWED/REVISED: 03/02-01/09, 01/10, 01/11, 01/12, 01/13, 01/14, 01/15, 01/16, 06/16, 01/17, 01/18, 01/19, 01/20, 01/21, 01/22	
APPROVED BY: Coding Policy Review Committee	NUMBER: MC 38.0	PAGE: 1 of 1

SCOPE:

Providence Health Plan, Providence Health Assurance, Providence Plan Partners, and Ayin Health Solutions as applicable (referred to individually as “Company” and collectively as “Companies”).

APPLIES TO:

Health Plan Providers
All Lines of Business

POLICY:

Supplies or equipment used in conjunction with rehabilitative services, wound care, or take-home supplies are included in payment for the primary service. Additional reimbursement is not provided. The provider/site of service is required to provide the equipment necessary to perform the range of services appropriate for the treatment of rehabilitative conditions.

Company does not pay for convenience kits. All supplies must be itemized.

PROCEDURE:

When billed in conjunction with physical therapy, occupational therapy, or speech therapy, supplies are considered global to the primary service. For facility bills, revenue code 270 will be considered global to revenue codes 42X, 43X or 44X. Prosthetic items are not considered supply items.

Dressing changes for wound care are included in payment for the primary service. This includes dressings following active wound debridement.

Take-home items are not allowed and payment becomes the member's responsibility. Examples are Therabands and exercise balls.

Drugs and supplies billed in a kit, i.e., “convenience kit,” are not paid by Company and will be denied as provider responsibility. A “convenience kit” contains an FDA-approved prescription drug that is packaged with nonprescription drugs or with supplies, such as gloves, gauze, bandages, swab sticks, prep pads, etc. Drugs and supplies must be itemized on the claim and may not be billed as a kit.

REFERENCE:

CMS / Medicare Rules and Regulations
Current Procedural Terminology (CPT)
Providence Health Plan Coding Edits