Blue Cross® and Blue Shield® of North Carolina (Blue Cross NC) | Healthy Blue + Medicare℠ (HMO-POS D-SNP)

Reimbursement Policy

Sanctioned and Opt-Out Providers

Policy Number: **G-10002**
Policy Section: **Administration**
Last Approval Date: **12/30/2024**
Effective Date: **12/30/2024**

Visit our provider website for the most current version of the reimbursement policies. If you are using a printed version of this policy, please verify the information by going to **https://bluecrossnc.com/providers/networks-programs/blue-medicare/healthy-blue-medicare**.

Disclaimer

These reimbursement policies serve as a guide to assist you in accurate claims submissions and to outline the basis for reimbursement if the service is covered by a member's benefit plan. The determination that a service, procedure, or item is covered under a member's benefit plan is not a determination that you will be reimbursed. Services must also meet authorization and medical necessity guidelines appropriate to the procedure and diagnosis, as well as to the member's state of residence.

Ensure that you use proper billing and submission guidelines, including industry-standard, compliant codes on all claim submissions. Services should be billed with Current Procedure Terminology® (CPT) codes, Healthcare Common Procedure Coding System (HCPCS) codes and/or revenue codes. These codes denote the services and/or procedures performed and when billed, must be fully supported in the medical record and/or office notes. Unless otherwise noted within the policy, our reimbursement policies apply to both participating and non-participating professional providers and facilities.

If appropriate coding/billing guidelines or current reimbursement policies are not followed, we may:

- Reject or deny the claim.

NCBCBS-CR-RP-082625-25-CPN81341 August 2025

- Recover and/or recoup claim payment.
- Adjust the reimbursement to reflect the appropriate services and/or procedures performed.

These reimbursement policies may be superseded by mandates in provider, state, federal, or Centers for Medicare & Medicaid Services (CMS) contracts and/or requirements. We strive to minimize delays in policy implementation. If there is a delay, we reserve the right to recoup and/or recover claims payment to the effective date, in accordance with the policy. We reserve the right to review and revise these policies when necessary. When there is an update, we will publish the most current policy to the website.

Policy

The health plan does not allow reimbursement to providers who are excluded or debarred from participation in state and federal healthcare programs. Claims received for services submitted by sanctioned providers, or one who has opted out from participation in Medicare, as provided herein, will be denied unless provider, state, federal, or CMS contracts and/or requirements indicate otherwise.

Reimbursement to providers who have opted out from participation in Medicare will only be allowed in urgent or emergent situations. Modifier GJ is required on claims for emergency or urgent care services when rendered by an opt-out provider.

Note: Payment may not be made for services furnished by an opt-out physician or practitioner who has signed a private contract with a Medicare beneficiary for emergency or urgent care items.

The health plan screens providers through all applicable state and federal exclusion lists.

Related Coding

Standard correct coding applies

Policy History

- **12/30/2024 —** Review approved and effective: no changes
- **12/27/2022 —** Review approved: removed ‘Reimbursement of’ from title; policy template updated
- **01/01/2021 —** Initial approval and effective

References and Research Materials

This policy has been developed through consideration of the following:

- CMS
- Code of Federal Regulations (CFR)
- Office of Inspector General (OIG)
- Social Security Act

- State contract

Definitions

General Reimbursement Policy Definitions

Related Policies and Materials

- Claims Requiring Additional Documentation
- Emergency Services: Non-Participating Providers and Facilities