



PARAMOUNT

ADVANTAGE | ELITE | HMO
INDIVIDUAL MARKETPLACE |
PROMEDICA MEDICARE
PLAN | PPO

After Hours and Weekend Care Policy

Policy Number: PG0426

Last Review: 10/09/2018

GUIDELINES

This policy does not certify benefits or authorization of benefits, which is designated by each individual policyholder contract. Paramount applies coding edits to all medical claims through coding logic software to evaluate the accuracy and adherence to accepted national standards. This guideline is solely for explaining correct procedure reporting and does not imply coverage and reimbursement.

SCOPE

Professional

Facility

DESCRIPTION

After hours and weekend care is provided by a primary care provider outside of regular posted office hours to treat a patient's urgent illness or condition. These services are rendered between 5:00 p.m. and 8:00 a.m. on weekdays, and anytime on weekends. This policy outlines when after hours and weekend care codes are considered for separate reimbursement.

POLICY

After hours and weekend care (99050 & 99051) will be separately reimbursed when billed with office visit codes 99201-99205, 99211-99215 for Advantage.

After hours and weekend care (99050 & 99051) are never separately reimbursed for HMO, PPO, Individual Marketplace, Elite/ProMedica Medicare Plan.

Codes 99053, 99056, 99058 or 99060 are never separately reimbursed for all product lines.

COVERAGE CRITERIA

Advantage

CPT code 99050 is reported when services are provided in the office at times other than regularly scheduled office hours or days when the office is normally closed. The Health Plan refers to this time as "After Hours," and defines "After Hours" as services rendered between 5:00 p.m. and 8:00 a.m. on weekdays, and anytime on weekends and holidays when the office is usually closed.

CPT code 99050 is eligible for separate reimbursement, in addition to the basic covered service, if the basic service provided meets all of the criteria described below:

- It is reported with an office setting place of service;
- It is rendered at a time other than the practice's regularly scheduled and/or posted office hours; and
- The basic service time is based on arrival time, not actual time services commence.

CPT code 99050 is not eligible for separate reimbursement when it is reported with a preventive diagnosis and/or a preventive service.

CPT code 99051 is reported when services are provided in the office during regularly scheduled evening, weekend, or holiday office hours. CPT code 99051 is eligible for separate reimbursement, in addition to the basic covered service, if the basic service provided meets all of the criteria described below:

- It is reported with an office setting place of service; and
- The basic service time for evening hours is based on arrival time, not actual time the service commenced.

Paramount will reimburse for after hours (99050 & 99051) to participating primary care providers when reported with basic services in one of the following CMS non-facility place of service (POS) designations only:

- 11 – Physician Office
- 19 - Off Campus Outpatient Hospital
- 22 - On Campus Outpatient Hospital
- 49 – Independent Clinic
- 50 – Federally Qualified Health Center
- 71 – State or Local Public Health Clinic
- 72 – Rural Health Clinic

Paramount does not cover charges for after hours (99050 & 99051) for services provided at the request of the member for the member’s convenience.

Codes 99053, 99056, 99058 and 99060 are not separately reimbursable and are considered as included in the allowance of other services per The Ohio Department of Medicaid guidelines.

HMO, PPO, Individual Marketplace, Elite/ProMedica Medicare Plan

The Centers for Medicare and Medicaid Services (CMS) considers reimbursement for Current Procedural Terminology (CPT) codes 99050, 99051, 99053, 99056, 99058 and 99060 to be bundled into payment for other services not specified. These codes have a Status Indicator of “B” in the National Physician Fee Schedule (NPFPS).

Consistent with CMS, Paramount considers these codes not eligible for reimbursement.

CODING/BILLING INFORMATION

The appearance of a code in this section does not necessarily indicate coverage. Codes that are covered may have selection criteria that must be met. Payment for supplies may be included in payment for other services rendered.

CPT CODES	
99050	Services provided in the office at times other than regularly scheduled office hours, or days when the office is normally closed (e.g., holidays, Saturday and Sunday) in addition to basic service.
99051	Service(s) provided in the office during regularly scheduled evening, weekend, or holiday office hours, in addition to basic service
99053	Service(s) provided between 10:00 PM and 8:00 AM at 24-hour facility, in addition to basic service
99056	Service(s) typically provided in the office, provided out of the office at request of patient, in addition to basic service
99058	Service(s) provided on an emergency basis in the office, which disrupts other scheduled office services, in addition to basic service
99060	Service(s) provided on an emergency basis, out of the office, which disrupts other scheduled office services, in addition to basic service

REVISION HISTORY EXPLANATION

ORIGINAL EFFECTIVE DATE: 03/13/2018

03/13/18: Codes 99050 & 99051 will separately reimburse when billed with office visit codes 99201-99205, 99211-99215 for Advantage per ODM guidelines. Codes 99050 & 99051 will not separately reimburse for HMO, PPO, Individual Marketplace, & Elite per CMS guidelines. Codes 99053, 99056, 99058 or 99060 will not separately reimburse for all product lines per CMS & ODM guidelines. Policy created to reflect most current clinical evidence per Medical Policy Steering Committee.

10/09/18: Clarified when codes 99050 & 99051 will be separately reimbursed for Advantage. Policy reviewed and updated to reflect most current clinical evidence per Medical Policy Steering Committee.

12/28/2020: Medical policy placed on the new Paramount Medical policy format

REFERENCES/RESOURCES

Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services

Ohio Department of Medicaid

American Medical Association, *Current Procedural Terminology (CPT®)* and associated publications and services

Centers for Medicare and Medicaid Services, Healthcare Common Procedure Coding System, HCPCS Release and Code Sets

Industry Standard Review

Hayes, Inc.