From: PAM BRANNAN
To: OIC Rules Coordinator

Subject: HB 1651

Date: Thursday, July 7, 2022 5:09:43 PM

External Email

Good afternoon,

I was a part of review of this law initially. What I would like to see is additional billing guidelines for insurance carriers to follow as this may become where physicians are fighting or having to rebill claims if it is not specific. For instance, on a HCFA-1500 a separate bill generated for the implantation or immediate post-partum contraception devices utilizing approved CPT codes and diagnosis codes, the physician could use a different place of service code other than 25 Birthing Center so that the claim doesn't reject out as a global service. There is place of service code 99 Other place of service that could be directly tied to this bill for ease of reimbursement. Insurance carriers will have to write specific edits for the claims to go through which can be a large task and this may be a simpler solution for everyone. I hope this information is helpful. I did medical billing and coding for over 38 years so I know how difficult it can be to separate these services for payment with the insurance carriers.

If you need additional information, please do not hesitate to contact me.

Thank you for all you do.

From: Brannan, Pam (OIC)
To: OIC Rules Coordinator

Subject: HB 1651

Date: Monday, June 13, 2022 8:16:49 AM

Attachments: image001.png

Good morning,

I was a part of review of this law initially. What I would like to see is additional billing guidelines for insurance carriers to follow as this may become where physicians are fighting or having to rebill claims if it is not specific. For instance, on a HCFA-1500 a separate bill generated for the implantation or immediate post-partum contraception devices utilizing approved CPT codes and diagnosis codes, the physician could use a different place of service code other than 25 Birthing Center so that the claim doesn't reject out as a global service. There is place of service code 99 Other place of service that could be directly tied to this bill for ease of reimbursement. Insurance carriers will have to write specific edits for the claims to go through which can be a large task and this may be a simpler solution for everyone. I hope this information is helpful. I did medical billing and coding for over 38 years so I know how difficult it can be to separate these services for payment with the insurance carriers.

If you need additional information, please do not hesitate to contact me. Thank you for all you do.

Pam Brannan, MCM Market Conduct Examiner

Company Supervision

Company Supervision Washington State Office of the Insurance Commissioner 800.562.6900 | 360-725-7215

pam.brannan@oic.wa.gov

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