

Payment Integrity and Recovery Program
Concept Number: 009
Concept Name: 009 Overlapping Room and Board with Other Institutional Services
Date: 01/01/2022
Claim Type: Institutional
Line(s) of Business: Medicaid, MMP/Duals
<p>Description:</p> <p>The Overlapping Room and Board with Other Institutional Services Payment Integrity and Recovery Program addresses reimbursement of institutional services. Accommodation revenue codes for room and board indicate a member is admitted to a facility and receiving services at that facility. Other institutional services provided to the member during an admission should be included on the same claim. Member should not be receiving outpatient and inpatient services at the same time.</p> <p>When a member is in a Long-Term Care facility and receiving hospice services, only the hospice services should be reimbursed by Molina. A claim billed by the Long-Term Care facility for the same dates of service as the hospice services would be inappropriate.</p> <p>There are exceptions to this rule. Emergency Room or observation services can be billed separately from the inpatient claim on the date of admission per IL HFS. Additionally, leave of absence and bed hold situations for Long-Term Care facilities may result in overlapping institutional claims. These situations are billable.</p> <p>Molina will recover reimbursement for any claims previously reimbursed for dates of services that inappropriately overlap already reimbursed institutional services. Molina is currently working to improve claims systems logic to deny reimbursement for current and future claims.</p>
<p>Example Scenarios:</p> <p>Claim A is bill type 11X for inpatient admission dates of service 12/01/21–12/10/21. Claim B is bill type 81X for hospice services dates of service 12/01/21–12/15/21. Member would not be receiving inpatient services at the same time as non-hospital-based hospice services. The latter claim is not reimbursable for the overlapping services.</p> <p>Claim A is bill type 21X for Long-Term Care dates of service 12/01/21–12/31/21 with five leave-of-absence revenue code units. Claim B is bill type 11X for inpatient admission dates of service 12/01/21–12/05/21. Both claims are reimbursable, as the Long-Term Care claim appropriately reported the days the member was not at the facility.</p> <p>Claim A is bill type 11X for inpatient admission dates of service 12/01/21–12/10/21. Claim B is bill type 13X for outpatient services for date of service 12/05/21. Claim B is not reimbursable because all services the member is receiving while inpatient should be reported on the inpatient claim.</p>
<p>References:</p> <p>Standard institutional claims processing.</p> <p>https://www2.illinois.gov/hfs/MedicalProviders/Handbooks/Pages/Chapter200.aspx</p>