

## OBSERVATION, FACILITY

File Name: observation  
Origination: 6/2022  
Last Review: 12/2022  
Next Review: 12/2023

### Description

Observation services are defined as the use of a bed and periodic monitoring and/or short term treatment by a hospital's nursing or other staff. These services are used to evaluate a patient's condition to determine the need for possible inpatient admission. Observation care provides a method of evaluation and treatment as an alternative to inpatient hospitalization.

The services may be considered eligible for reimbursement only when provided under a physician's order or under the order of another person who is authorized by state statute and the hospital's by laws to admit patients and order outpatient testing.

The observation services must be patient-specific and not part of a standard operating procedure or facility protocol for a given diagnosis or service.

### Policy

**Blue Cross Blue Shield North Carolina (Blue Cross NC) will reimburse observation services according to the criteria outlined in this policy.**

### Reimbursement Guidelines

Observation services are reported using HCPCS code G0378 (Hospital observation service, per hour) or G0379 (Direct admission of patient for hospital observation care).

Observation services that are the result of direct admission to observation status should be reported as G0379 (Direct admission of patient for hospital observation care). This code should only be used when a patient is admitted directly to observation care after being seen by a physician in the community.

Additional units of G0378 (Hospital observation service, per hour) will be denied when billed greater than 48 units over a 3-day period.

G0379 will be denied when billed with 99291 (Critical care, evaluation and management) for the same date of service.

### Rationale

Blue Cross NC enforces rules and concepts found within the Centers for Medicare and Medicaid Services (CMS) claims processing manual for reimbursement of hospital observation care.

### Billing and Coding

Applicable codes are for reference only and may not be all inclusive. For further information on reimbursement guidelines, please see the Blue Cross NC web site at [www.bcbsnc.com](http://www.bcbsnc.com).

## Related policy

### [Bundling Guidelines](#)

## References

Healthcare Common Procedure Coding System

American Medical Association, *Current Procedural Terminology* (CPT®) [CPT® \(Current Procedural Terminology\) | AMA \(ama-assn.org\)](#)

Centers for Disease Control and Prevention, International Classification of Diseases, 10<sup>th</sup> Revision [ICD- 10 - CM International Classification of Diseases, Tenth Revision, Clinical Modification \(ICD-10-CM\) \(cdc.gov\)](#)

Medicare Manage Care Manual [MCM Chapter 4 \(cms.gov\)](#)

## History

6/1/2022	New policy developed. Medical Director approved. <b>Notification on 3/31/2022 for effective date 6/1/2022.</b> (eel)
12/31/2022	Routine policy review. Minor revisions only. (ckb)

## Application

These reimbursement requirements apply to all commercial, Administrative Services Only (ASO), and Blue Card Inter-Plan Program Host members (other Plans members who seek care from the NC service area). This policy does not apply to Blue Cross NC members who seek care in other states.

This policy relates only to the services or supplies described herein. Please refer to the Member's Benefit Booklet for availability of benefits. Member's benefits may vary according to benefit design; therefore member benefit language should be reviewed before applying the terms of this policy.

## Legal

Reimbursement policy is not an authorization, certification, explanation of benefits or a contract. Benefits and eligibility are determined before medical guidelines and payment guidelines are applied. Benefits are determined by the group contract and subscriber certificate that is in effect at the time services are rendered. This document is solely provided for informational purposes only and is based on research of current medical literature and review of common medical practices in the treatment and diagnosis of disease. Medical practices and knowledge are constantly changing, and Blue Cross NC reserves the right to review and revise its medical and reimbursement policies periodically.

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