



Reimbursement Policy

Subject: Medical Recalls	
Policy Number: G-06111	Policy Section: Administration
Last Approval Date: 05/22/2024	Effective Date: 05/22/2024

**** 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://www.bluecrossnc.com/providers/blue-medicare-providers/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 Blue Cross and Blue Shield of North Carolina (Blue Cross NC) Medicare Advantage covered the service for the Healthy Blue + MedicareSM (HMO-POS D-SNP) member's benefit plan.

The determination that a service, procedure, item, etc. is covered under a member's benefit plan is not a determination that you will be reimbursed. Services must meet authorization and medical necessity guidelines appropriate to the procedure and diagnosis as well as to the member's state of residence.

You must follow proper billing and submission guidelines. You are required to use 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, Blue Cross NC Medicare Advantage may:

- Reject or deny the claim.
- 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These reimbursement policies may be superseded by mandates in provider, state, federal, or Centers for Medicare & Medicaid Services (CMS) contracts and/or requirements. Blue Cross

<https://www.bluecrossnc.com/providers/networks-programs/blue-medicare/healthy-blue-medicare>

Blue Cross and Blue Shield of North Carolina Senior Health, DBA Blue Cross and Blue Shield of North Carolina, is an HMO-POS D-SNP plan with a Medicare contract and a NC State Medicaid Agency Contract (SMAC). Enrollment in Blue Cross and Blue Shield of North Carolina Senior Health depends upon contract renewal.

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NC Medicare Advantage strives 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

Blue Cross NC Medicare Advantage does not allow reimbursement for repair or replacement of items due to a medical recall unless provider, state, federal, CMS contracts, and/or requirements indicate otherwise. The following are applicable items:

- Durable medical equipment
- Supplies
- Prosthetics
- Orthotics
- Drugs/vaccines
- Implantable devices

Blue Cross NC Medicare Advantage will allow reimbursement of medically necessary procedures to remove and replace recalled or replaced devices or items. Blue Cross NC Medicare Advantage will not be responsible for the full cost of a replaced device or item if an inpatient or outpatient facility is receiving partial or full credit for a device or item due to recall. Payment will be reduced by the amount of the device or item credit.

Blue Cross NC Medicare Advantage will:

- Participate and provide any applicable documentation required in any applicable class action lawsuits due to a medical recall.
- Supply providers with medical recall information for dissemination to applicable members.

In circumstances in which Blue Cross NC Medicare Advantage has reimbursed the provider for repair or replacement of items, or procedures related to items due to a medical recall, Blue Cross NC Medicare Advantage is entitled to recoup or recover fees from the manufacturer and/or distributor, as applicable.

In circumstances in which Blue Cross NC Medicare Advantage has reimbursed the provider the full or partial cost of a replaced device or item and the provider received full or partial credit for the device or item, Blue Cross NC Medicare Advantage is entitled to recoup or recover fees from the provider.

When applicable, providers should bill the appropriate condition code, value code, modifier, and/or diagnosis code to identify a medically recalled item.

Related Coding

Standard correct coding applies

Policy History

05/22/2024	Review approved and effective: added implantable devices under applicable items, added the words <i>or item</i> to policy language
02/10/2022	Review approved: updated References and Research Materials and added Modifier Usage to the related coding section
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) Subpart A - Payments §416.179
- State contract
- U.S. Food and Drug Administration: Medical Device Recalls

Definitions

General Reimbursement Policy Definitions

Related Policies and Materials

Documentation Standards for Episodes of Care

Modifier Usage

Reimbursement for Items Under Warranty