

North Carolina State Health Plan

Teachers' and State Employees' Comprehensive Major Medical Plan
and NC HealthChoice

Prolonged Physician Attendance

Policy Number: ME0690

Active policy, not scheduled for routine review.

Definition:

Prolonged physician attendance (prolonged detention) is care rendered a critically ill patient that extends beyond a usual or routine visit.

Coverage:

1. Inpatient visits with extended time provided to a critically ill patient are covered.
2. The length of time spent with the patient must be documented as units on the claim (one hour equals one unit).
3. Claims for prolonged per-hour concurrent or joint care (in lieu of consultation or other medical service classification) should report procedure code 99160 - critical care (prolonged detention), including the diagnostic and therapeutic services and direction of care of the critically ill or multiply injured or comatose patient, requiring prolonged presence of the physician.

Approval Procedures:

Prior approval is not required.

Limitations and Exclusions:

1. Critical care is intended to include interpretation of clinical laboratory values (e.g., blood gases), regulation of ventilation, fluid therapy, drug therapy, cardiopulmonary resuscitation, intubation, cardiac output measurement, management of dialysis, control of gastrointestinal hemorrhage, etc. Separate procedure codes for services performed during prolonged detention cannot be billed in addition to prolonged service codes.
2. Definitive surgical or diagnostic procedures such as Swan-Ganz, CVP, and arterial line catheters are covered separately from critical care, and the time for doing these procedures is to be excluded from prolonged detention time.
3. Claims submitted without documentation of the length of time spent with the patient will be reimbursed as an extended hospital visit and not prolonged attendance.
4. Each day's visit must be billed on a separate line because the units field must be used to denote the length of time spent with the patient, not the number of visits.

Authority:

G.S. 135-40.6(7)a

G.S. 135-40.7(10)

Current Procedural Terminology, 4th edition

Reviewed:

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