
CHAPTER 5: PROFESSIONAL SERVICES

SECTION 5.1: COVERED SERVICES

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After Hours Care on Evenings, Weekends, and Holidays

Louisiana Medicaid's after hours care policy is intended to facilitate beneficiary access to services during non-typical hours, primarily to reduce the inappropriate use of the hospital emergency department. Reimbursement for the evening, weekend, and holiday procedure codes is intended to assist with coverage of the additional administrative costs associated with staffing outside of non-typical hours.

The *Current Procedural Terminology* (CPT) evening, weekend, and holiday codes are reimbursed in addition to the reimbursement for most outpatient evaluation and management (E/M) services, when the services are rendered in settings other than hospital emergency departments during the hours of:

1. Monday through Friday between 5 p.m. and 8 a.m. (when outside of regular office hours);
2. Weekends (12 a.m. Saturday through midnight on Sunday); or
3. State/Governor proclaimed legal holidays (12 a.m. through midnight).

Only one of the evening, weekend, and holiday codes may be submitted by a billing provider per day per beneficiary. Providers should select the evening, weekend, and holiday procedure codes that most accurately reflect the situation on a particular date. These codes are never reported alone, but in addition to another code or codes describing the service related to that beneficiary's visit or encounter. The following examples illustrate the appropriate use of evening, weekend, and holiday procedure codes based on the situation described:

1. If the existing office hours are Monday through Friday from 8 a.m. to 5 p.m., and the physician treats the beneficiary in the office at 7 p.m., the provider may report the appropriate basic service (E/M visit code) and evening, weekend, and holiday code.
2. If the existing office hours are Monday through Friday from 8:30 a.m. to 6:30 p.m., and the physician treats the beneficiary in the office at 6 p.m., the provider may not report the evening, weekend, and holiday code.
3. If a beneficiary is seen in the office on Saturday during existing office hours, the provider may report the appropriate basic service (E/M visit code) and evening, weekend, and holiday code.

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Documentation in the medical record relative to this reimbursement must include the time the services were rendered. Should there be a post payment review of claims, providers may also be asked to submit documentation regarding the existing office hours during the timeframe being reviewed.

Reimbursement

The reimbursement for evening, weekend, and holiday services is based on the following current CPT codes or their successors:

1. 99050 (Services...at times other than regularly scheduled office hours...); or
2. 99051 (Services ...at regularly scheduled evening, weekend, or holiday hours...).

When used, these procedure codes must be submitted with the code(s) for the associated evaluation and management services on that date.

Providers should refer to the fee schedule on the Medicaid website for reimbursement information relative to these codes (See Appendix A for information on how to access the fee schedule).

Providers are instructed to bill usual and customary charges.

NOTE: Rural Health Clinic and Federally Qualified Health Center providers should refer to policies in the manual specific to these providers.