

Procedure 1228- Team Conferences

Lines of Business: All

Purpose: This guideline describes reimbursement for Team Conferences reported using the Centers for Medicare and Medicaid Services (CMS) 1500 Claim Form or its electronic equivalent.

Procedure: A medical team conference is an interdisciplinary team of health care professionals that meet for 30 minutes or more to collaborate and develop a plan of care that benefits a long-term outcome for the patient in which the patient and/or family is not present.

The team conference services are considered to be incidental to other services provided directly to the patient and will not be separately reimbursed. Claims submitted with these codes will be denied with ansi code 97- The benefit for this service is included in the payment/allowance for another service/procedure that has already been adjudicated.

This policy is not a guarantee of coverage or payment. The claim(s) will be denied if it does not meet with all the terms and provisions of the members Certificate of Coverage. Actual benefits will be determined when the claim(s) or bill(s) are submitted to NHP/NHIC/NHAS. NHP/NHIC/NHAS reserves the right to periodically review and update all claims policies and procedures.

HMO plans underwritten by Network Health Plan. POS Plans underwritten by Network Health Insurance Corporation, or Network Health Insurance Corporation and Network Health Plan. Self-funded HMO and POS plans administered by Network Health Administrative Services, LLC.

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