

Highmark Reimbursement Policy Bulletin



HISTORY VERSION

Bulletin Number: RP-080
Subject: Integral or Necessary Services
Effective Date: May 30, 2025
Issue Date: June 30, 2025
Date Reviewed: March 2025
Source: Reimbursement Policy

End Date:

Revised Date: June 2025

Applicable Commercial Market

PA ☒ WV ☒ DE ☒ NY ☒

Applicable Medicare Advantage Market

PA ☒ WV ☒ DE ☒ NY ☒

Applicable Claim Type

UB ☒ 1500 ☒

➔ A checked box indicates the policy is applicable to that market either entirely, or partially, as indicated within the policy.

Reimbursement Policy designation of Professional or Facility application is based on how the provider is contracted with the Plan. This Policy supersedes direction provided in Bulletins prior to the effective date of this policy.

This policy position applies to all Commercial and/or Medicare Advantage lines of business as indicated above. The Plan retains the right to update reimbursement policy guidelines at its sole discretion.

PURPOSE:

The intent of this policy is not to provide new guidance, but rather to establish general guidelines for reimbursement and provide stand-alone policy language clarifying the Plan's definition of "Integral".

REIMBURSEMENT GUIDELINES:

"Integral" refers to services that are needed or required during the provision of patient care which are inclusive of another service or component parts of a more comprehensive service.

"Integral" also refers to supplies, equipment and certain services that are inherent, needed or required for the provision of patient care and are considered by the Plan as part of another service.

Integral supplies and/or services are items or services that are used during the normal provision of care. Examples include, but are not limited to surgery, treatment, therapy, or procedures.

Integral supplies are included in the general cost of the room where services are rendered. As such, these items are considered not eligible for separate reimbursement and are not eligible to be included in outlier calculations for additional reimbursement.

Facilities shall not be reimbursed or allowed to retain reimbursement for services considered to be non-reimbursable either through initial claim processing or audit/review functions.

RELATED POLICIES:

Refer to the following Reimbursement Policies for additional information:

- RP-010: Incident To Billing
- RP-035: Correct Coding Guidelines
- RP-040: Facility Routine Supplies and Services
- RP-061: Implants and Implant Components
- RP-066: Sleep Study Supplies and Services
- RP-077: Intraoperative Neurophysiological Monitoring

POLICY UPDATE HISTORY INFORMATION:

5 / 2025	Implementation
6 / 2025	Policy applicable to New York

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