

Highmark Reimbursement Policy Bulletin



Bulletin Number: RP-081
Subject: Critical Care with Home Discharge
Effective Date: May 16, 2025
Issue Date: May 16, 2025
Date Reviewed:
Source: Reimbursement Policy

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.

PURPOSE:

Critical care services are reported when a member with potentially life-threatening conditions receives services with attention beyond standard Emergency Department Evaluation and Management (E/M) codes. This policy addresses the circumstances surrounding the appropriate reporting of critical care services when discharged to home in the same day for reimbursement.

Critical illness or injury is defined by the American Medical Association (AMA) Common Procedural Terminology (CPT) and the Centers for Medicare and Medicaid Services (CMS) as a condition that acutely impairs one or more vital organ systems in such a way that there is a high probability of imminent or life-threatening deterioration in the patient's condition. Based on the definition of critical illness (a requirement to submit critical care codes), it is unlikely to meet the definition of critical illness and then be well enough to not be admitted and be discharged to home. While it is possible to be critically ill and choose to not be admitted and potentially expire at home, these cases generally utilize a hospice discharge status code.

According to CMS, critical care services must be medically necessary and reasonable. Services provided that do not meet critical care services or services provided for a patient who is not critically ill or injured in accordance with the above definitions and criteria but who happens to be in a critical care, intensive care, or other specialized care unit should be reported using another appropriate E/M code (e.g., subsequent hospital care, CPT codes 99231 - 99233).

REIMBURSEMENT GUIDELINES:

Critical care services submitted with revenue code 045X and a discharge status code of 01 (to home or self-care) on the same day are not reimbursable. If billed, the claim will be denied with no member liability.

Applicable Critical Care CPT Codes: 99291 99292

DEFINITIONS:

| Term | Definition |
|-------------------------------------|---|
| Discharge Status Code 01 | Discharge to Home or Self-Care (Routine Discharge) |
| Critical Illness or Critical Injury | A condition that acutely impairs one or more vital organ systems in such a way that there is a high probability of imminent or life-threatening deterioration in the patient's condition. |

RELATED POLICIES:

Refer to the following Reimbursement Policies for additional information:

- RP-009: Modifiers 25, 59, XE, XP, XS, XU, FT
- RP-034: Prolonged Detention or Critical Care
- RP-035: Correct Coding Guidelines
- RP-037: Emergency Evaluation and Management Coding Guidelines
- RP-057: Evaluation and Management Services

ADDITIONAL BILLING INFORMATION AND GUIDELINES:

- Current version of AMA CPT Manual, Evaluation and Management (E/M) Service Code Section.

Note: Current Procedure Terminology Manual (CPT®) is copyright American Medical Association. All rights Reserved. The AMA assumes no liability for the data contained in this policy.

REFERENCES:

- American Medical Association, Current Procedural Terminology (CPT®) and associated publications and services.
- Centers for Medicare and Medicaid Services (CMS), Manual System and Claims Processing; Change Request 8688, Transmittal 2997.
- Centers for Medicare and Medicaid Services (CMS), National Correct Coding Initiative (NCCI) publications.

POLICY UPDATE HISTORY INFORMATION:

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| 5 / 2025 | Implementation |
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