# Medical Coverage Policies

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# **Emergency Department Services/Waiver of Copayment**

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EFFECTIVE DATE	02/01/2005		LAST UPDATED	01/18/2008

### **Description:**

An emergency department is defined as an organized hospital-based facility for the provision of unscheduled episodic services to patients who are present for immediate medical attention. The facility must be available 24 hours a day.

#### **Medical Criteria:**

Not applicable, this is a reimbursement policy.

#### Policy:

Treatment for medical emergencies are covered services.

Contractual copayment for Emergency Department Services is waived, when allowed by a specific group or contract, under the inpatient benefit if one of the following conditions are met:

- The member is admitted to the hospital within 24 hours of treatment in the emergency department.
- The member is dead on arrival (DOA) to the emergency department, or expires in the emergency department.
- The member is admitted to the hospital under an OBSERVATION status.

#### Coverage:

Please refer to the appropriate member certificate/subscriber agreement/RIte Care contract for applicable Emergency Department benefits/coverage.

#### **Related Topics:**

Not applicable

## Published:

Policy Update, June 2007 Provider Update, March 2008

This medical policy is made available to you for informational purposes only. It is not a guarantee of payment or a substitute for your medical judgement in the treatment of your patients. Benefits and eligibility are determined by the member's subscriber agreement or member certificate and/or the employer agreement, and those documents will supersede the provisions of this medical policy. For information on member-specific benefits, call the provider call center . If you provide services to a member which are determined to not be medically necessary (or in some cases medically necessary services which are non-covered benefits), you may not charge the member for the services unless you have informed the member and they have agreed in writing in advance to continue with the treatment at their own expense. Please refer to your participation agreement(s) for the applicable provisions.

This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. BCBSRI reserves the right to review and revise this policy for any reason and at any time, with or without notice.



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