

## Billing and Reimbursement Guideline: Labor Evaluation- Outpatient Facility Charges

Guideline Publication Date: July 1, 2011

Key coding, documentation and reimbursement points include:

- Services should be billed with revenue codes 0720 or 0721.
- Service must be billed under HCPC code S4005 (Interim labor facility global (labor occurring but not resulting in delivery)).
- This guideline applies to UB-92 claim submissions.
- This guideline applies to outpatient facility services only.

*Please refer to Neighborhood's provider website at <u>http://www.nhpri.org</u> for specific provisions by product line.* 

This guideline is not a guarantee of reimbursement. Plan coverage, eligibility and claim payment edit rules may apply.

Version History Original Publish Date	: 7/1/2011
Revision Date (s): 9/1/13	Format change, minor edits, deleted place of service 22 reference
	and replaced with outpatient facility language.

Neighborhood Health Plan of Rhode Island Billing and Reimbursement Guidelines