



January 15, 2010

Dear Administrator:

Thank you for providing quality services to our members. We would like to remind physicians of the proper billing guidelines when submitting claims for emergency services. Please distribute this notice to your billing personnel and/or companies. Below are the billing guidelines:

- Claims submitted with **99283, 99284 or 99285** for physicians must be accompanied by medical notes unless billed with a primary emergent diagnosis based on the prudent layperson auto-pay list. Claims that are billed without a primary emergent diagnosis and without medical records will be reimbursed at a triage rate.
- Claims billed using a primary diagnosis found on the prudent layperson auto-pay listing will be automatically approved for payment, but subject to period review for coding accuracy.
- Claims submitted with **99281 or 99282** for physicians will auto-pay in accordance with Department of Medical Assistance Services (DMAS) reimbursement guidelines, **but** are subject to periodic review for coding accuracy.

The above billing instruction is not a guarantee of payment. Payment is determined when claims are received and are subjected to various checks, including but not limited to eligibility checks, coding checks, etc.

The emergent diagnosis list can be found on the Virginia Premier web site at [www.virginiapremier.com](http://www.virginiapremier.com). Should you have any questions, please do not hesitate to contact the Network Development Department at 800-727-7536.

Sincerely,

Patrick McMahon  
Vice President, Network Development

cc: Vice-President, Claims and Encounters