

CHAPTER 1
SECTION 4.4

INPATIENT CONCURRENT CARE

Issue Date: April 19, 1983

Authority: 32 CFR 199.4(c)(3)(ii) and (c)(3)(vi)

I. DESCRIPTION

Concurrent care exists when services more extensive than consultative services are provided by more than one individual professional provider during the same period of time.

II. POLICY

A. If, during the same admission, a beneficiary receives care from more than one individual professional provider, the services of the providers may be covered if the severity of the beneficiary's condition warranted the concurrent care.

B. If the providers are of the same specialty, the claim must be submitted to medical review to assure that the beneficiary's condition is of a severity to justify the concurrent care.

C. In the absence of such a determination, benefits are payable only for the services of the attending provider.

D. If the patient receives medical care and surgical/maternity care from the same provider during the same hospitalization, only the type of care with the higher total charge is covered.

E. If the patient receives medical care and surgical/maternity care from different providers for the same diagnosis, see paragraph II.A. and paragraph II.B., above. If the care is provided by different providers for different diagnoses, the services are covered if medically necessary.

III. EXCEPTIONS

Claims for inpatient concurrent care, by providers of the same or different disciplines, related to inpatient mental health admissions which have been certified by the contractor do not require medical review. These type of claims may be reimbursed by the claims processors according to the reimbursement methodology in place for the institution where services are rendered, since the concurrent care is considered to be part of the overall approved treatment plan.

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