



POLICY INFORMATION			
Policy Number:	POL-PP-257 Inpatient Only Procedures	Original Effective Date:	9/1/2025
Version Number:	004	Revision Date:	9/1/2025
Policy Status:	Active	Next Revision Date:	9/1/2026

NOTICE

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Blue KC reserves the right to review and revise these policies when necessary. When there is an update, we will publish the most current policy to: <https://providers.bluekc.com/ContactUs/PaymentPolicies>.

PROVIDER/ENTITY IMPACTED					
<input checked="" type="checkbox"/> PROFESSIONAL	<input checked="" type="checkbox"/> FACILITY	<input type="checkbox"/> DME	<input checked="" type="checkbox"/> AMBULATORY SURGERY	<input type="checkbox"/> LAB	<input type="checkbox"/> OTHER

LINES OF BUSINESS IMPACTED						
<input checked="" type="checkbox"/> COMMERCIAL	<input checked="" type="checkbox"/> BLUE MEDICARE ADVANTAGE	<input checked="" type="checkbox"/> ACA QHP¹	<input checked="" type="checkbox"/> SMALL GROUP ACA	<input checked="" type="checkbox"/> JAA²	<input checked="" type="checkbox"/> FEP³	<input type="checkbox"/> DENTAL

¹ ACA QHP: Affordable Care Act Qualified Health Plan for Individual/Family ² JAA: Joint Administrative Account ³ FEP: Federal Employee Program

Disclaimer

Blue KC has developed Provider Payment Policies to provide guidance on payment methodologies as they pertain to submitted claims. These policies are written following industry standard recommendations from sources such as:

- Current Procedural Terminology
- Centers for Medicare and Medicaid
- American Medical Association
- National Correct Coding Initiative
- Other professional organizations and societies

Coverage of any service is determined by date of service, a member's eligibility and benefit limits for the service or services rendered, all terms of the Provider Service Agreement, and other standards of coding rules and guidelines.

Final payment is subject to the application of claims adjudication and edits common to the industry.

For confirmation of which services may be eligible for coverage and description of when medical services are considered medically necessary, not medically necessary or investigational, please contact:

- Blue KC Provider Hotline for Commercial lines of Business 816-395-3929
- Affordable Care Act Provider Hotline 866-859-3822
- Blue Medicare Advantage Provider Hotline 866-508-7140

In the event of a conflict between any policies, the Member's coverage document will govern.



Description/Application

Effective 9/1/2025, Blue KC will follow the CMS Inpatient-only list. The inpatient-only list consists of surgeries/ procedures that Blue KC will only pay as an Inpatient procedure in an acute hospital setting. These surgical services customarily require inpatient care due to,

- the invasive nature of the procedure,
- the typical underlying physical condition of patients who require the service or
- the need for at least 24 hours of postoperative recovery time or monitoring before the patient can be safely discharged.

Policy

This policy applies to all providers and facilities, unless the provider’s Blue KC network participation agreement contains a specific rate of reimbursement for the in-patient only code.

If a surgery/procedure on the inpatient- only list is performed as outpatient and reported on an outpatient claim, no payment will be made to the facility for the surgery/procedure or for any other services provided on the same date of service.

Coding

The inpatient only surgery/procedure list is available at the site below under Addendum E.

<https://www.cms.gov/license/ama?file=/files/zip/2025-nfrm-opps-addenda.zip>

References and Resources

Centers for Medicare and Medicaid Services
Blue KC Provider Reference Guide

Related Documents

N/A

Revision History

Version	Date	Summary of Revisions
001	6/12/2025	Initial version
002	7/21/2025	Effective Date changed to 11/1/2025
003	8/21/2025	Corrected effective date to 9/1/2025
004	9/1/2025	Updated link to inpatient only list, addendum E.



Kansas City

PAYMENT INTEGRITY COMPLIANCE
Inpatient Only Procedures