

## Claims requiring additional documentation facility reimbursement policy update

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As we advised you in the April 2018 *Network Update* and September 2018 *Network eUpdate*, in our efforts to improve payment accuracy and reduce post-payment recoveries, beginning with dates of service on or after July 13, 2018, we updated our Claims Requiring Additional Documentation policy to include the following requirement:

- Inpatient stay claims reimbursed at a percent of charge with billed charges above \$40,000 require an itemized bill to be submitted with the claim.

We continue to receive claims without the required itemized bill causing the claims to be returned for the itemization. *To help ensure accuracy and eliminate delays in the adjudication of your claims, the itemized bill must be included with qualifying claim submissions.*

For more information about this policy, visit the facility reimbursement page on our anthem.com provider website for your state: [Indiana](#), [Kentucky](#), [Missouri](#), [Ohio](#), [Wisconsin](#).

In addition, visit our anthem.com provider website to view the [instructions](#) on how to submit your itemized bill to Anthem Blue Cross and Blue Shield.

**URL:** <https://providernews.anthem.com/missouri/article/claims-requiring-additional-documentation-facility-reimbursement-policy-update-7>

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