Reimbursement Alert:
New Documentation Guidelines for In-Network Physician Referrals to Out-of-Network Facilities

The State of Texas has released new documentation guidelines for In-Network physician referrals to Out-of-Network Facilities. These guidelines call for disclosure and patient acknowledgement of the referral relationship to the Physician and Out-of-Network Facility or Practitioner. Insurance Carriers have taken steps to ensure that the patient is informed about the OON status of all referrals, physician or facility, and have required the In-Network referral source to document as much on the specific carrier forms. You will find these documents to be all encompassing, including the patient acknowledgement of Out-of-Network disclosure and the relationships between the parties.

These requirements have gone into effect and you must comply with State Regulations if you participate with the carriers. Please find the forms below from Cigna and United Healthcare, along with the Texas State Administrative Codes for your review (see 23 A, B).

Participant Disclosure Form - Cigna and United Healthcare
Texas State Administrative Codes

Disclaimer: The information provided is general coding information only - it is not legal advice; nor is it advice about how to code, complete or submit any particular claim for payment. It is always the provider’s responsibility to determine and submit appropriate codes, charges, modifiers and bills for services rendered. This information is provided as of the date listed above and all coding and reimbursement information is subject to change without notice. Before filing any claims, providers should verify current requirements and policies with the payer. Thank you for your compliance.

For more information on our services visit our website or contact us:
516 294 4118
contact@businessdynamicsrcm.com
www.businessdynamicsrcm.com