



# Itemized Bill Submission

## Reimbursement Policy

### Purpose

Identification of claims that require itemized bills required for claim review processing by Community Health Options (“Health Options”).

### Policy

Health Options requires an itemized bill for each claim with a billed amount equal to and greater than \$20,000; itemized bills may also be requested on claims identified for further review. “An itemized statement is defined as a listing of each service(s) or item(s) provided to the beneficiary. Statements that reflect a grouping of services or items (such as a revenue code) are not considered an itemized statement” (CMS).

The itemized bill must include, but not limited to, for each line item detail: charge code, description, date of service, quantity, and amount that matches the billed claim form. Revenue code, CPT and HCPCS codes are also helpful for a thorough claims review process and reimbursement determination.

For your convenience, Health Options accepts itemized bills electronically using the following email address: [itemizedbill@healthoptions.org](mailto:itemizedbill@healthoptions.org)

Claims submitted without the associated itemized bill will be denied for reimbursement.

### References / Resources

Centers for Medicare & Medicaid Services, Medicare Program Integrity Manual, Chapter 4, Section 4.20.5.1: <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Downloads/pim83c04.pdf>

### Document Publication History

7/15/2019 Initial publication

11/9/2020 Annual Review: Added email address

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This policy provides information on Community Health Options’ claims adjudication processing guidelines. As every claim is unique, the use of this policy is neither a guarantee of payment nor a final prediction of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization and utilization management guidelines when applicable, adherence to plan policies and procedures, and claims editing logic. Community Health Options reserves the right to amend a payment policy at its discretion. Policies are enforced unless underpinning direction stated otherwise.