Present On Admission (POA) Indicators

Scope Description:
Applies to Present On Admission (POA) Indicator requirement for all BlueCross BlueShield of TN lines of business.

Subject:
Present On Admission (POA) requirement

Purpose:
To establish guidelines for Present On Admission (POA) Indicator requirement

Standard:
POA indicators are needed when Acute Inpatient Prospective Payment System (IPPS) Hospital providers bill for selected Hospital Acquired Conditions (HACs), including some conditions on the National Quality Forum's (NQF) list of Serious Reportable Events (commonly referred to as "Never Events"), these certain conditions have been selected according to the criteria in section 5001(c) of the Deficit Reduction Act (DRA) of 2005 and are reportable by The Centers for Medicare & Medicaid Services (CMS) POA Indicator Options:

- Y = Diagnosis was present at time of inpatient admission.

- N = Diagnosis was not present at time of inpatient admission.

- U = Documentation insufficient to determine if the condition

  was present at the time of inpatient admission.

- W = Clinically undetermined. Provider unable to clinically

  determine whether the condition was present at the time

  of inpatient admission.

- 1 = Unreported/Not used. Exempt from POA reporting. This

  code is equivalent to a blank on the UB-04, therefore;

  for paper claims, in this instance, leave the space blank

  and a "1" will automatically be assigned.

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Claims will be rejected if:

- · POA "1" is submitted on a paper UB04 inpatient claim
- · POA equal space is submitted on an electronic inpatient claim
- · POA is required but not submitted

BlueCross BlueShield of Tennessee (BCBST) began accepting POA
indicator codes on inpatient hospital claims effective January 1, 2008.

Note: BlueAdvantage lines of business will follow CMS Billing Guidelines.