

NICU Payment Policy

Effective October 1, 2015 supplemental payments for very low birth weight newborns (less than 1500 grams) will be determined using the ICD-10 Diagnosis codes.

These payments, otherwise known as "NICU" payments, will be reimbursed to the health plan when notification is provided to the state agency that a very low birth weight newborn has been born.

*After July 1, 2023, payment for NICU stays will not be separate issues, but will be collapsed into the capitation rates.

Notification must be provided in one of two formats:

<u>Claim Type</u>	<u>Format</u>	<u>Criteria</u>	<u>Criteria</u>	<u>Other</u>
Inpatient	837- I	<u>Procedure Code</u>	<u>Contained in one of the first 5 diagnosis</u>	<u>With Revenue Code</u>
		N/A	P05.01 – P05.05 P05.11 – P05.15 P07.01 – P07.03 P07.14 – P07.15	172, 173, or 174
Medical	837- P	<u>Procedure Code</u>	<u>Contained in one of the first 5 diagnosis</u>	<u>With Revenue Code</u>
		99471	Same as Inpatient	N/A
		99472	Same as Inpatient	N/A
		99468	Same as Inpatient	N/A
		99469	Same as Inpatient	N/A
		99478	Same as Inpatient	N/A
		99221	Same as Inpatient	N/A
		99222	Same as Inpatient	N/A
		99223	Same as Inpatient	N/A

Encounters meeting the above criteria will generate a supplemental payment to the health plan when received and processed by the fiscal agent. No more than one supplemental payment will be paid per newborn. Health plans will continue to receive a monthly newborn capitation payment during the newborn's first year of MO HealthNet eligibility. The NICU supplemental payment will cover the additional risk associated with a low birth weight newborn during the first year of life.

*Updated 11/22/2023