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PAYMENT POLICY ID NUMBER 26-090

Original Effective Date: 11/12/2026

Revised: N/A

Treatment Room Revenue Codes Billed with Evaluation and Management Services

THIS PAYMENT POLICY IS NOT AN AUTHORIZATION, CERTIFICATION, EXPLANATION OF BENEFITS, A GUARANTEE OF PAYMENT, NOR DOES IT SUBSTITUTE FOR OR CONSTITUTE MEDICAL ADVICE. ALL MEDICAL DECISIONS ARE SOLELY THE RESPONSIBILITY OF THE PATIENT AND PHYSICIAN. BENEFITS ARE DETERMINED BY THE GROUP CONTRACT, MEMBER BENEFIT BOOKLET, AND/OR INDIVIDUAL SUBSCRIBER CERTIFICATE IN EFFECT AT THE TIME SERVICES WERE RENDERED. THIS PAYMENT POLICY APPLIES TO ALL LINES OF BUSINESS AND PROVIDERS OF SERVICE. IT DOES NOT ADDRESS ALL POTENTIAL ISUES RELATED TO PAYMENT FOR SERVICES PROVIDED TO FLORIDA BLUE MEMBERS AS LEGISLATIVE MANDATES, PROVIDER CONTRACT DOCUMENTS OF THE MEMBER'S BENEFIT COVERAGE MAY SUPERSEDE THIS POLICY.

DESCRIPTION:

Revenue codes 0760, 0761, and 0769 represent treatment room and specialty services provided in a facility setting. These codes are used to report facility resources and services associated with specific outpatient procedures, treatments and specialty services that are performed in a designated treatment room or clinical setting. Treatment room and specialty services revenue codes should only be used when a specific procedure has been performed, or treatment has been rendered.

This policy addresses E/M service codes (99202 –99499, G0463) billed with revenue codes 0760, 0761, and 0769. The policy applies to Florida Blue institutional outpatient facility claims reported on a UB-04.

REIMBURSEMENT INFORMATION:

Treatment room and specialty services revenue codes must be accompanied by an appropriate Current Procedural Terminology (CPT®) codes/Healthcare Common Procedure Coding System (HCPCS) code that accurately represents the specific procedure or specialty service performed. Evaluation and management (E/M) services and clinic visits do not represent specialty services or procedures.

Florida Blue will deny claim lines containing E/M service codes (99202 – 99499, G0463) billed in conjunction with revenue codes 0760, 0761, or 0769. These revenue codes represent treatment room and specialty services and are not billable with E/M codes.

Treatment room or specialty services billed with revenue codes 0760, 0761, or 0769 may be reimbursed when billed with an appropriate CPT® or HCPCS code for a covered procedure or treatment.

BILLING/CODING INFORMATION:

Revenue Codes

Revenue Code	Descriptor
0760	Specialty Services – General
0761	Treatment Room
0769	Other Specialty Services

CPT/HCPCS Codes

Code	Descriptor
99202-99499, G0463	E/M service codes

RELATED MEDICAL COVERAGE GUIDELINES OR PAYMENT POLICIES:

Outpatient Facility Alternate Procedure Code Reimbursement 23-080

REFERENCES:

1. American Medical Association, *Current Procedural Terminology (CPT®), Professional Edition*
2. Noridian Healthcare Solutions (Noridian). Revenue Codes. Updated 2/12/2026. https://med.noridianmedicare.com/web/jfa/topics/claim-submission/revenue-codes
3. National Uniform Billing Committee. (2027). Official UB-04 Data Specifications Manual. American Hospital Association – available via a subscription.

GUIDELINE UPDATE INFORMATION:

11/12/2026	New policy established

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