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**PAYMENT POLICY ID NUMBER:** 10-035

**Original Effective Date:** 11/30/2010

**Revised:** 03/13/2025

## Standby Services

**THIS PAYMENT POLICY IS NOT AN AUTHORIZATION, CERTIFICATION, EXPLANATION OF BENEFITS, OR 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 ISSUES RELATED TO PAYMENT FOR SERVICES PROVIDED TO BCBSF MEMBERS AS LEGISLATIVE MANDATES, PROVIDER CONTRACT DOCUMENTS OR THE MEMBER'S BENEFIT COVERAGE MAY SUPERSEDE THIS POLICY.**

### DESCRIPTION:

This policy applies to the reimbursement of standby services. As described in the Current Procedural Terminology (CPT®) definition, CPT® code 99360 is used to report physician or other qualified healthcare professional standby services requested by another individual that involves prolonged physician attendance without direct (face-to-face) patient contact. The provider may not be providing care or services to other patients during this period. This code is not used to report time spent proctoring another individual. It is also not used if the period of standby ends with the performance of a procedure, subject to a surgical package by the individual who was on standby.

This policy applies to billing for services on a CMS-1500 or equivalent claim form. Same provider for the purposes of this policy includes all physicians and/or other health care professionals reporting under the same Federal Tax Identification number.

### REIMBURSEMENT INFORMATION:

Florida Blue does not reimburse for standby services. These services are considered by Florida Blue to be included in the payment for a facility as part of providing quality care. Therefore, these services are not separately reimbursable.

If a specific service is directly rendered to the patient by the standby physician, the service or procedure could be a reimbursable service and should be reported with the appropriate procedure code that describes that service.

Florida Blue does not reimburse for hospital mandated on-call services, CPT® codes 99026 and 99027, as they do not involve services directly provided to a specific patient. Such services are part of a facility's cost to provide quality care to our members and should not be reported by physicians.

**BILLING AND CODING:**

The following codes may be used to describe standby services:

**CPT Codes:**

99360	Standby service, requiring prolonged attendance, each 30 minutes (e.g., operative standby, standby for frozen section, for cesarean/high risk delivery, for monitoring EEG).
99026	Hospital mandated on call service; in-hospital, each hour
99027	Hospital mandated on call service; out-of-hospital, each hour

**REFERENCES:**

- Centers for Medicare and Medicaid Services (CMS), Medicare Claims Processing Manual 100-4, Chapter 12, Section 30.6.15.3
- American Medical Association, Current Procedural Terminology (CPT®), Professional Edition
- CMS, Medicare Physician Fee Schedule Relative Value File  
<http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/PhysicianFeeSched/PFS-Relative-Value-Files.html>

**GUIDELINE UPDATE INFORMATION:**

11/30/2010	New payment policy
08/21/2012	Revised – changed name from BCBSFL to Florida Blue
04/15/2016	Routine policy review; references updated; Added on-call services
04/13/2017	Annual Review
04/12/2018	Annual Review
04/11/2019	Annual Review
04/09/2020	Annual Review
04/15/2021	Annual Review
04/14/2022	Annual Review
03/09/2023	Annual Review – References reviewed and updated.
03/14/2024	Annual Review – References reviewed and updated.
03/13/2025	Annual Review – Clarifying language added to indicate this policy applies to billing for services on a CMS-1500 or equivalent claim form. References reviewed and updated.

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