Blood Component Return/Reimbursement Guidelines
Job Aid for SOP-HS-01-005

- To encourage judicious inventory management practices by Memorial Blood Centers and each of our customers for the benefit of all customers served.
- To allow hospitals to establish their own criteria for managing their unique patient population, sharing in the cost of meeting their inventory needs.

<table>
<thead>
<tr>
<th>COMPONENT</th>
<th>GUIDELINES</th>
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| Red Blood Cells—acceptable for reissue | **MBC**
- **AB+/-**
  - Unit(s) cannot be returned, if not used complete request for credit request (Form-IT-005)
- **B+/-**
  - Unit(s) with > 10 days to out date may be returned
  - Unit(s) with ≤10 days will be charged
  - Unit(s) consigned with ≤10 days will not be charged if not used
| **MBC-M**
- **A+/-, O+/-**
  - Unit(s) with >3 days to outdate may be returned
  - Unit(s) with ≤3 days will be charged
  - Unit(s) consigned with ≤3 days will not be charged if not used
| **MBC-D**
- **A+/-, O+/-**
  - Unit(s) with >7 days to outdate may be returned
  - Unit(s) with ≤7 days will be charged
  - Unit(s) consigned with ≤7 days will not be charged if not used

<table>
<thead>
<tr>
<th>Autologous Component</th>
<th>Hospital is charged—No returns accepted</th>
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| Directed Donation Component—acceptable for reissue | May be returned to Blood Center
- Hospital credited for the component service fee and charged for the Directed Processing fee. |
| Components collected/prepared at the hospital request: Buffy Coats, Modified Components (Washed, Deglyced, volume reduced etc.), Quint/Quad Pediatric Blood Cells | Discard at Hospital
- Report Disposition
- Hospital is charged |
| Apheresis Platelets—General Inventory | If units have > 48 hours credit is given for returned component
- If < 24 hours (day of expiration) Hospital is charged—No returns accepted unless requested by MBC
- Returns accepted with > 24 hours but < 48 hours to expiration, component fee is charged
- If returned unit can be used, component charge will be credited |
| Apheresis Platelets—Reserved for a specific patient (by hospital request—yellow sticker): HLA-matched Special typing (PIA1) Cross-matched | Sent to hospital when available
- Charged to hospital if not used
- If used by alternate hospital—collection fee of $250.00 + special fees
- (HLA, cross-matched, irradiation) charged to requesting hospital; receiving hospital charged $250.00
- All fees associated with units imported to meet a patient’s specific need are passed on to the hospital |
| Frozen Plasma Components | > 3 months to outdate—may be returned |
| Component not available at MBC | MBC physician consulted for alternative
- If hospital chooses not to use suggested alternative, hospital charged full cost of imported component
- If no alternative, MBC assumes cost of imported alternative |