Healthcare Business Specialists

Specializing in RHC reimbursement

5010 Transition -RHC UB-04 Claims Requirements Cheatsheet
Source: HRSA Technical Assistance for RHCs presentation
February 2, 2012

This Cheatsheet is derived from Janet Lytton's excellent presentation sponsored by the NARHC. If you would like to contact Janet, her email is RHDconsultJL@hotmail.com.

Form Locator	Required?	Description	Comments
1	Y	Name of Facility Name, Street, City, Zipcode, Phone, Fax	Do not use P.O. Box Number.
2	N		
3a	Y	Patient control number	RHC created
3b	N	Medical Record Number	Use situationally
4	Y	Bill Type	Use 0711 is most cases Use 0710 for a denial Use 0717 for an adjustment Use 0718 to cancel a claim
5	Y	Federal Tax ID Number	Must agree with the 855A
6	Y	Statement from and through date	Use the date of the office visit only
7	N	Not Used	
8	Y	Patient Name	Must agree exactly to the patient's Medicare card
9	Y	Patient Address	
10	Y	Patient Birthday	
11	Y	Patient Sex	
12	N	Admission Date	NA for Outpatient claims
13	N	Admission Hour	NA for Outpatient claims
14	Y	Admission Type	This is new – RHCs will most like use the following: 2 = urgent **3 = elective (most common)** 9 = information not available

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Form Locator	Required?	Description	Comments
15	Y	Source	Typical responses for RHCs **1= nonhealthcare point of origin (home-most common)** 5 = from ICF, SNF or ALF 9 = information not available
16	N	Discharge Hour	Do not use on OP Claim
17	Y	Status (where discharged to)	Typical Responses for RHCs 01=discharge to home or self care 03=discharge to SNF 04=discharge to custodial care fac.
18-28	N	Condition Codes (rarely used with RHCs except for secondary payer, denials, and Hospice.	Typical Responses for RHCs 07=hospice patient for nonhospice DX 21=claim sent for denial purposes. See Cahaba reference guide for secondary billing codes at the end of this document
29	N	Accident state	Not used
30	N	Not used	
31-34	N	Occurrence Code & Date	Situational but normally not used unless related to MSP
35-36	N	Occurrence Span Codes	Typically not used in RHCs
37	N	Not Used	
38	N	Responsible Party	Usually the patient name and address defaults here
39-41	N	Value Codes and Amount	Must include a dollar amount; only used in MSP
42	Y	Revenue Code	0521 = office visit, 0522 = home, 0524 = SNF or SW paid by Part A 0525 = Nursing Home visit, 0900 =Behavioral health, 0780 = Telehealth site fee, 001 = Total charges at bottom

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Form Locator	Required?	Description	Comments
43	N	Description	Most systems default to a description of "clinic visit"
44	N*	HCPCS/Rate/HIPPS Code	HCPCS codes are not required for RHC claims *unless a preventive service is performed, then the CPT code is required.
45	Y	Service Date	Will be the same as the from an through date in FL 6
46	Y	Service Units	Will be a unit of 1 regardless of number of services performed, unless there are two allowable visits on the same day.
47	Y	Total Charges	All services performed that day to include office visit, procedures, additional supplies, injections, and Part B drugs that are bundled into the 052X revenue code.
48	N	NonCovered Charges	Rarely used unless sending for a denial.
49	N	Not Used	
50	Y	Payer Name	Typically, Medicare, CahabaGBA, WPS, etc.
51	Y	Health Plan ID	National Health Plan Identifier or the number Medicare has assigned
52	Y	Release of Information	Usually "Y" – Yes, patient signed statement for data release, could be "I" – Informed consent to release data regulated by statue.
53	Y	Assignment of Benefits	"Y" – Payment to provider is authorized "N" – Payment to provider is not authorized
54	N	Prior Payments	Left Blank for RHC claim
55	N	Est. Amount Due from Patient	

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Form Locator	Required?	Description	Comments
56	Y	NPI of Billing Provider	RHC NPI Number
57	N	Provider ID of Second and Third Payers	If you want the claim to crossover to Medicaid or secondary payers, this must be completed.
58	Y	Insured's Name	
59	Y	Patient Relationship to Insured	Typically 18 (self)
60	Y	Insured's Unique Identification	
61	N	Insured Group Name	
62	N	Insurance Group Number	
63	N	Treatment Authorization Code	May be required for HMO or PPO claims when preauthorization is required
64	N	Document Control Number	Required for any adjustment or cancel claims, Condition Code, D0 – D9, most used in RHC . D1 = change to charges; D5 cancel to correct HICN (Medicare number); D9 = any other change
65	N	Employer Name	
66	N	Diagnosis and Procedure Code Qualifier	The qualifier that denotes the version of International Classification of Diseases (ICD) reported.
67	Y	Principal Diagnosis Code and Present on Admission Indicator (ICD-9-CM code)	Some V-codes are appropriate as primary codes; list as many as provider addressed and also those that were considered in the treatment of the patient
68	N	Not Used	
69	N	Admission Diagnosis	Not required for outpatient claims
70	N	Patient Reason Diagnosis	Not required for RHCs
71-73	N	Not Used	

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Form Locator	Required?	Description	Comments
74	N	Principal Procedure Codes and Dates	Not used in RHCs
75	N	Not Used	
76	Y	Attending Provider NPI, Last Name, First Name	May also have another Qualifier number in "Qual": could include State license number, 1G = Provider UPIN, G2 = Provider Commercial Number
77-79	N	Other Providers	Not used with RHC claim
80	N	Remarks	Use only if need additional information to the payer. Must have a remark if claim is adjusted, canceled, or two visits on the same day.
81CCa	N	Code-Code Field	This will show if there is a marital status for the patient, ie B2 for single. This is not required.
81CCb	Y	Code-Code Field	This is the Taxonomy code for the facility. RHC = B3 (noting taxonomy code) 261QR1300X (taxonomy code)

Notes

Only 27 of the 81 fields are required to be completed, so try to obtain only the information requested and complete the required fields. Providing additional information will only slow your claim or possibly cause it to get rejected.

There is still a considerable amount of confusion regarding the preventive services and they are still not being paid correctly by the majority of the MACs. We have included some additional resources on the next page that should help you navigate this difficult transition to a 5010 world. Good Luck and thanks to Janet for a wonderful presentation that was extremely helpful.

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Table of Additional Resources

Description of Reference Tool	Link
BCBSMA Supplement to the NUBC -UB-04 Data Specifications Manual	https://www.bluecrossma.com/staticcontent/npi_docs/UB_04BillingGuide.pdf
TrailBlazer Health Enterprises® UB-04 Rural Health Clinic Billing Examples	**http://www.trailblazerhealth.com/Publications/Job%20Aid/RHCUB04BillingExamples.pdf**
Medicare Guide for Preventive Services as of March 11, 2011 (298 pages)	**http://www.cms.gov/MLNProducts/downloads/mps_guide_web-061305.pdf**
Medicare Quick Reference Chart to Preventive Services (3 pages)	**https://www.cms.gov/MLNProducts/downloads/MPS_QuickReferenceChart_1.pdf**
Medicare Guide to the Annual Wellness Visit – Quick (3 page check-list)	https://www.cms.gov/mlnproducts/downloads/AWV_Chart_ICN905706.pdf
Medlearn Matters article on Preventive Billing	https://www.cms.gov/MLNMattersArticles/downloads/SE1039.pdf
Cahaba GBA MSP Reference Guide with Value Codes Listed for Form Locator 18-28	https://www.cahabagba.com/part_a/education_and_outreach/educational_materials/quick_msp.pdf
Cabaha GBA MSP Adjustment Form	https://www.cahabagba.com/part_a/forms/MSPAdjustmentForm.pdf
Medicare Claims Processing Manual Chapter 9 - Rural Health Clinics/	https://www.cms.gov/manuals/downloads/clm104c09.pdf
Trailblazer Health Billing Guide for RHCs updated October, 2011	http://www.trailblazerhealth.com/Publications/Training%20Manual/rhcmanual.pdf
What is a 99211 from Trailblazer?	**http://www.trailblazerhealth.com/Publications/Job%20Aid/DocReqCPT99211JobAid.pdf**

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