

HEALTH & WELFARE

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MEDICAID INFORMATION RELEASE MA12-21

To: All Hospital and Physician Providers

From: Paul J. Leary, Administrator by DG

Subject: Revenue codes 0510, 0456, 0760, and 0761

Effective for dates of service on or after January 1, 2013, hospital providers will be allowed to bill facility expenses related to hospital owned outpatient clinic charges using revenue code 0510 with the corresponding CPT service code. This charge represents the room, hospital personnel, and overhead costs of the facility and can be used if the following criteria are met:

- The visit must take place in hospital owned space.
- A hospital employee must render a Medicaid service (i.e., chart medical complaint, vitals, assessment).
- The medical record must be retained by the hospital doing the billing.
- Documentation in the record supports the medical necessity for the medical service.

If the facility does not meet the criteria outlined above, a charge for revenue code 0510 cannot be billed to Medicaid.

The above information should be discussed with visiting physicians and/or hospital employed physicians. The physicians should bill their professional component to Medicaid on the CMS HCFA 1500, with the appropriate site of service indicator 22 (outpatient hospital). The physician claims will be subject to a 30% reduction of the physician fee schedule.

The HCPC/CPT code should reflect the service provided. For example, if a physician visit occurred, 99201-99215, would be billable. The charge billed on the UB04 represents the room and personnel. If the patient receives other services, bill the services under the appropriate revenue code with the corresponding HCPC/CPT.

Services provided by a hospital employed nurse should not be billed as described above. Services provided by the hospital employed nurse should have the entire charge billed on the UB04. Ancillary services, such as lab or injections administered by a nurse, are also billed in full on a UB04.

EXAMPLE

Service	Total Charge	1500 Form	UB04 Form
Physician Visit	\$60	\$36	\$24 revenue code 0510
Administration of	\$15		\$15 revenue code 0771
injection by RN			
Drug	\$30		\$30 revenue code 025X or 0636
CBC Lab	\$30		\$30 revenue code 0300

This example does not reflect actual reimbursement rates; for a copy of Medicaid's posted reimbursement rates please <u>visit our website</u> and click the current fee schedule link on the right side of the page. In a real billing situation, HCPCs/CPT and line item date of service are required.

REMINDERS

- **Revenue code 0456** Urgent care should only be used in cases of emergency treatment to those ill and injured persons who require immediate unscheduled medical or surgical care.
- **Revenue code 0760** General services should be used for patients requiring an observation/treatment room for specialty services.
- **Revenue code 0761** Treatment room should be used for charges requiring treatment room services.

If you have questions, please contact the Senior Financial Specialist in the Division of Medicaid at (208) 287-1162.

Thank you for participating in the Idaho Medicaid Program.

PJL/rs