

UB-04 CMS-1450 Outpatient Electronic Claim Filing Requirements to Align with NUBC

Information posted January 20, 2015

Note: *This article applies to claims submitted to TMHP for processing. For claims processed by a Medicaid managed care organization (MCO), providers must refer to the MCO for information about benefits, limitations, and reimbursement.*

Effective December 13, 2014, providers that bill UB-04 CMS-1450 outpatient electronic claims (UB-04 /837I ANSI X12 5010 format) will be required to include values in the fields for Patient Discharge Status Codes, Priority (Type) of Admission or Visit codes, and Point of Origin for Admission or Visit codes to align with the National Uniform Billing Committee (NUBC) guidelines.

The following fields are now required for outpatient claims to align with NUBC standards:

Field	Paper	Other Electronic
Priority (Type) of Admission or Visit	Block 14	Loop 2300, CL101
Point of Origin for Admission or Visit	Block 15	Loop 2300, CL102
Patient Discharge Status Codes	Block 17	Loop 2300, CL103

Reminder: Providers are required to adhere to national billing standards, including NUBC guidelines defining data submission requirements.

Providers may refer to the [National Uniform Billing Committee](#) website for further information.

For more information, call the TMHP Contact Center at 1-800-925-9126 or the TMHP-CSHCN Services Program Contact Center at 1-800-568-2413.