

Coding and Billing Units: **OUTPATIENT HOSPITAL UB-04 FORM**

FL 42

- Enter the 4-digit revenue code for service provided¹
- For chemotherapy administration, 0260 (IV therapy) or 0335 (radiology-therapeutic: chemotherapy-IV) could be used²
- CMS recommends using 0636 (drugs requiring detailed coding)³

FL 44

- Enter HCPCS code J9228. The infusion time corresponds to CPT[†] code 96413^{1,5,6}
- In addition, it is required that you enter J9228-JW on next line to record waste⁷

FL 43

- For each line item, enter the modifier "N4" followed by 11-digit NDC in positions 01-13¹
- Report quantity qualifier (ML) followed by quantity administered (50 mg/10 mL or 200 mg/40 mL) beginning in position 14^{*1,4}

FL 46

- Billing units (service units) are entered here¹
- 1 mg = 1 billing unit

FLs 67A-67Q

Enter ICD-10-CM diagnosis codes for malignancy being treated.¹

FL 80

Enter the following^{1,8}:

- Drug name: YERVOY® (ipilimumab)
- Total dosage and strength
- Method of administration
- 11-digit NDC: 00003232711 or 00003232822
- Basis of measurement

The image shows a sample Outpatient Hospital UB-04 form. The form is divided into several sections: 1. Patient Information (3a PAT. CNTL.#, 3b MED. REC.#, 4 TYPE OF BILL, 5 FED. TAX NO., 6 STATEMENT COVERS PERIOD FROM, 7 STATEMENT COVERS PERIOD THROUGH), 2. ADDRESS (a), 3. REFERENCE DATE, 4. PROCEDURE TABLE (42 REV. CD., 43 DESCRIPTION, 44 HCPCS / RATE / HIPPS CODE, 45 SERV. DATE, 46 SERV. UNITS, 47 TOTAL CHARGES, 48 NON-COVERED CHARGES, 49), 5. TREATMENT AUTHORIZATION CODES (63), 6. DOCUMENT CONTROL NUMBER (64), 7. DRUG INFORMATION (67A-67Q), 8. ADMIT/DX INFORMATION (69 ADMIT DX, 70 PATIENT REASON DX, 71 PPS CODE), 9. PROCEDURE CODES (74 PRINCIPAL PROCEDURE CODE, 75 OTHER PROCEDURE CODE, 76 OTHER PROCEDURE CODE, 77 OTHER PROCEDURE CODE), 10. REMARKS (80). Blue callout boxes provide instructions for each section.

This sample form is for informational purposes only.

Abbreviations: CMS=Centers for Medicare & Medicaid Services; CPT=Current Procedural Terminology; FL=form locator; HCPCS=Healthcare Common Procedure Code System; IV=intravenous; NDC=National Drug Code.

*For example, use "N400003232711ML10" (50-mg/10-mL vial) or "N400003232822ML40" (200-mg/40-mL vial).⁴

[†]CPT codes and descriptions only are ©2015 by American Medical Association (AMA). All rights reserved. The AMA assumes no liability for data contained or not contained herein. CPT is a registered trademark of the American Medical Association.

The accurate completion of reimbursement- or coverage-related documentation is the responsibility of the healthcare provider and patient. Bristol-Myers Squibb and its agents make no guarantee regarding reimbursement for any service or item.

References

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8. Centers for Medicare & Medicaid Services. Medicare Claims Processing Manual. Chapter 26 - Completing and Processing Form CMS-1500 Data Set. Revision 3547, June 22, 2016. <http://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/clm104c26.pdf>. Accessed July 26, 2016.