

Introduction

Type of bill codes are three-digit codes located on the UB-04 claim form that describe the type of bill a provider is submitting to a payer, such as Medicaid or an insurance company. This code is required on line 4 of the UB-04.

Each digit has a specific purpose and is required on all UB-04 claims in field locator 4.

The codes are published in the National Uniform Billing Committee (NUBC) guidelines.

First Digit of the Bill Type Code - Facility Type

- 1 - Hospital
- 2 - Skilled Nursing
- 3 - Home Health
- 4 - Religious Nonmedical Health Care Facility (Hospital)
- 5 - Religious Nonmedical Health Care Facility (Extended Care)
- 7 - Clinic
- 8 - Specialty Facility, Hospital ASC Surgery

Second Digit of the Bill Type Code

What the second digit signifies depends on the first digit is. It has a different set of meanings for clinics and special facilities.

The second digit refers to the bill classification except for clinics and special facilities.

If the first digit is 1-5, then the second digit is:

- 1 - Inpatient (Medicare Part A)
- 2 - Inpatient (Medicare Part B)
- 3 - Outpatient
- 4 - Other (Medicare Part B)
- 5 - Level I Intermediate Care
- 6 - Level II Intermediate Care
- 7 - Subacute Inpatient (for use with Revenue Code 019X)
- 8 - Swing Bed

For Clinics only:

If the first digit is 7, then the second digit is:

- 1 - Rural Health Clinic
- 2 - Hospital Based or Independent Renal Dialysis Facility
- 3 - Federally Qualified Health Center (FQHC), Free Standing Provider-Based
- 4 - Other Rehabilitation Facility (ORF)
- 5 - Comprehensive Outpatient Rehabilitation Facility (CORF)
- 6 - Community Mental Health Center (CMHC)

For Special Facilities Only:

If the first digit is 8, then the second digit is:

- 1 - Nonhospital Based Hospice
- 2 - Hospital Based Hospice

Second Digit of the Bill Type Code (cont)

- 3 - Ambulatory Surgical Center Services to Hospital Patients
- 4 - Other Rehabilitation Facility (ORF)
- 5 - Comprehensive Outpatient Rehabilitation Facility (CORF)
- 6 - Community Mental Health Center (CMHC)

Third Digit of the Bill Type Code - Frequency

- | | |
|--|--|
| 0 - Non-payment/Zero Claim | A - Admission/Election Notice for Hospice |
| 1 - Admit Through Discharge | B - Hospice/Medicare Coordinated Care Demonstration/Religious Nonmedical Health Care Institution Termination/ Revocation Notice |
| 2 - Interim - First Claim | C - Hospice Change of Provider Notice |
| 3 - Interim-Continuing Claims (Not valid for PPS Bills) | D - Hospice/Medicare Coordinated Care Demonstration/Religious Nonmedical Health Care Institution Void/Cancel |
| 4 - Interim - Last Claim (Not valid for PPS Bills) | E - Hospice Change of Ownership |
| 5 - Late Charge Only (Outpatient claims only) | F - Beneficiary Initiated Adjustment Claim |
| 7 - Replacement of Prior Claim (See adjustment third digit) | G - CWF Initiated Adjustment Claim |
| 8 - Void/Cancel of Prior Claim (See adjustment third digit) | G - CMS Initiated Adjustment Claim |
| 9 - Final claim for a Home Health PPS Episode | I - FI Adjustment Claim (Other than QIO or Provider) |
| | J - Initiated Adjustment Claim--Other |
| | K - OIG Initiated Adjustment Claim |
| | M - MSP Initiated Adjustment Claim |
| | P - QIO Adjustment Claim |

The third digit refers to the frequency.

Corrected Claims

When making changes to previously paid claims, most corrected claims can be submitted electronically.

1. Update the Claim Frequency Code with: 7 = Replacement of a prior claim 8 = Void/cancel of a prior claim

2. Submit the claim using the DCN (document control number) or ICN (internal control number) from the payer's explanation of payment (EOP) or electronic remittance.

3. If you must submit a corrected claim on paper, make sure the format is correct. Some payers accept the photocopied black-and-white versions of the medical claims but the best process is to submit the original red-and-white version. Depending on the payer, when the original claim form is not used, the claim may not scan into their system properly creating a delay or denial in payment.

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