

Provider Question and Answer UB-04 Claim Form (3/07)

What is the UB-04?

The UB-04 is replacing the UB-92 claim form effective 5-23-07.

Why is the UB-92 being replaced?

The UB-04, which builds on many of the previous UB components, was developed for a number of reasons including the following:

- Align the UB data set to the HIPAA transaction standard for electronic billing
- Accommodate the reporting of the National Provider Identifier (NPI) and taxonomy codes
- Prepare for the future adoption of the HIPAA Health Plan Identifier
- Prepare for future migration from ICD-9-CM to ICD-10-CM and ICD-10-PCS
- To better accommodate public health reporting needs
- Reduce the reliance on claims attachments by increasing the number of clinical codes one can report

What is the timeline for implementation of the UB-04?

Providers may begin using the UB-04 on March 1, 2007 during an initial transitional period. Starting May 23, 2007 all paper claims must be submitted on the UB-04.

Note: For Medica claims continued use of the UB-92 after May 23, 2007 is yet to be determined. More information will be conveyed once a decision is made.

How does the UB-04 differ from the UB-92?

Most of the data usage descriptions and data values have not changed, however there are a number of important changes to the UB-04:

- Relocation of numerous fields
- Expansion of some field sizes
- The addition of many new fields including:
 - Accident State
 - Health Plan Identification Number
 - National Provider Identifier – Billing Provider
 - Other (Billing) Provider Identifier
 - Diagnosis and Procedure Code Qualifier
 - Patient's Reason for Visit
 - Prospective Payment System (PPS) Code
 - Operating Physician Name and Identifiers
 - Code-Code Field
- The deletion of some fields including:
 - Prior Payments from Patient
 - Employment Status Code
 - Employer Location
 - Procedure Code Method Used
 - Provider Rep Signature

What are Medica's reporting requirements for each of the UB-04 fields?

A guide entitled, "How to Complete UB-04" is posted on Medica.com. This guide lists each of the UB-04 fields and indicates whether the field is "Required", "Required if Applicable", "Optional", or "Not Required".

The guide can be found in the "Provider Resources" section under "Tools and Forms," then "Claims Tools and Forms," in the "Claim Forms" subsection (at this Web page: <http://provider.medica.com/C13/ClaimsToolsForms/default.aspx>).

Where can I find more information?

Further general information on the UB-04 can also be obtained from the following Web sites:

- National Uniform Billing Committee Web site: www.nubc.org
- CMS Web site: <http://www.cms.hhs.gov/Transmittals/downloads/R1104CP.pdf>

The following information is included in this transmittal:

- A copy of the UB-04 form (front and back) in PDF format (Attachment E)
- The UB-92- to-UB-04 crosswalk (Attachment B)
- UB-04 mapping to the HIPAA institutional 837 (Attachment C)
- The revised portion of the *Medicare Claims Processing Manual*, Chapter 25 (Completing and Processing the CMS 1450 Data Set

(Note: While the *Medicare Claims Processing Manual* provides general reference information, Medica requirements for specific UB-04 fields may differ. Please refer to the "How to Complete UB-04" guide referenced above for Medica specific requirements.)