

# What are UB04s and Why Are They Important to Appeal Writers?

By Karla Hiravi, BSN, RN

Understanding and verifying what was billed is often vital to writing an accurate appeal. Why is that? Sometimes the payers get it wrong, and we don't realize that unless we check that what was denied was actually billed. The purpose of this article is not to make anybody a billing expert, but to give some basic information to assist non-biller appeal writers understand what was billed.

Never, EVER believe payer denial rationale is correct until you verify for yourself.

A UB-04 (Uniform Billing Form) is a standardized form that facilities use to bill insurance agencies for health-related services. It is also called a "claim" and CMS-1450 form.

- This is not what is used for physician billing.

Let's look at certain portions of a UB-04. You will notice there are numbered "boxes" in the form. Each numbered box (**Form Locator**, or FL) provides information. The Medicare Claims Processing Manual provides detailed instructions of what is to be entered in each Form Locator.

- Information and codes are entered into appropriate fields and represent specific information about the patient, place of service, and billed services.
- Example 1: Box 1 (Form Locator 01 or FL 01) is for the billing provider's (hospital, skilled nursing facility, inpatient rehabilitation facility, critical access hospital, etc.) name, address, telephone number, fax number.
- Example 2: FL 10 is for the patient's birth date

1	2	3a PAT. CNTL #	4 TYPE OF BILL
		b MED. REC. #	
		5 FED. TAX NO.	6 STATEMENT COVERS PERIOD FROM THROUGH
			7
8 PATIENT NAME	a	9 PATIENT ADDRESS	a
b	b	c	d
10 BIRTHDATE	11 SEX	12 DATE	13 HR
		14 TYPE	15 SRC
		16 DHR	17 STAT
		18	19
		20	21
		22	23
		24	25
		26	27
		28	29
		30	ACDT STATE
31 OCCURRENCE CODE	32 OCCURRENCE DATE	33 OCCURRENCE CODE	34 OCCURRENCE DATE
		35 CODE	36 OCCURRENCE SPAN FROM THROUGH
			37

In the above section of a UB-04, FL 04 is the "bill type" and includes a code that translates to whether the bill is for hospital inpatient, hospital outpatient, skilled nursing facility inpatient, critical access hospital, and many other types of bills.

- Examples of common codes in FL 04 are:
  - 111: Hospital inpatient claim (admit through discharge)
  - 117: Replaced (revised) inpatient claim (admit through discharge)
    - This is useful to scrutinize to see if there was a denial because the payer was not looking at a revised claim.
  - 131: Hospital outpatient claim (admit through discharge)
  - 137: Replaced (revised) hospital outpatient claim (admit through discharge)

FL 06 is the “Statement Covers Period (From-Through)”: the dates of service. If services were provided in only one day total, the dates will be the same.

This next part is where revenue codes, HCPCS codes, service dates, service units, and other items are listed. It is good to have a working knowledge of this section when services or certain parts of a particular service are denied. For example, this is where you would look to find out information about what and how much chemotherapy was billed, compare to what was denied, figure out if what was billed was correct, and appeal if applicable.

42 REV. CD.	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE	45 SERV. DATE	46 SERV. UNITS	47 TOTAL CHARGES	48 NON-COVERED CHARGES	49

The following portion of the UB-04 is of particular importance for those services denied for no authorization.

- See FL 63: this is where an authorization number should be entered if it was obtained.

50 PAYER NAME		51 HEALTH PLAN ID		52 REL INFO	53 ASQ BEN.	54 PRIOR PAYMENTS	55 EST. AMOUNT DUE	56 NPI	57 OTHER PRV ID
58 INSURED'S NAME		59 P.REL.	60 INSURED'S UNIQUE ID			61 GROUP NAME		62 INSURANCE GROUP NO.	
63 TREATMENT AUTHORIZATION CODES				64 DOCUMENT CONTROL NUMBER			65 EMPLOYER NAME		

This next part of the UB-04 is of vital importance to figure out the inpatient billing for the principal diagnosis, secondary diagnoses, principal procedure, secondary procedures, and DRG billed (for DRG cases).

66 DX	67	A	B	C	D	E	F	G	H	68
69 ADMIT DX	70 PATIENT REASON DX	a.	b.	c.	71 PPS CODE	72 ECI	a.	b.	c.	73
74 PRINCIPAL PROCEDURE CODE	DATE	a.	OTHER PROCEDURE CODE	DATE	b.	OTHER PROCEDURE CODE	DATE	75	76 ATTENDING NPI	QUAL
c.	OTHER PROCEDURE CODE	DATE	d.	OTHER PROCEDURE CODE	DATE	e.	OTHER PROCEDURE CODE	DATE	LAST	FIRST
									77 OPERATING NPI	QUAL
									LAST	FIRST

FL 67 (sometimes missing on the UB-04 but follows FL 66) is reserved for the ICD-10 principal diagnosis code, as ascertained by the professional coder who coded the case.

- It is important to note that FL 69, Admit diagnosis, is not necessarily the same as the principal diagnosis.
- The DRG is based on the principal diagnosis, not the admit diagnosis.

FL A-Q: for secondary ICD-10 diagnosis codes.

FL 71, PPS (Prospective Payment System) Code: for the billed DRG

FL 74: for the principal ICD-10 procedure code.

FL 74 A-E: for secondary ICD-10 procedure codes.

Detailed information from CMS about UB-04s can be found in Chapter 25 of the Medicare Claims Processing Manual at <https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/Internet-Only-Manuals-IOMs-Items/CMS018912>.

1		2		34 FKT UNCL #		35 DATE OF BILL	
4		5		6 UNCL REC #		7	
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