# Billing Requirements for Outpatient Revenue Codes

## Outpatient Revenue Codes[1]

Outpatient UB-04 claims must be billed with both a revenue code and a CPT or HCPCS code.[2] A revenue code must be assigned (Form Locator [FL] 42) for each line item. If multiple CPT or HCPCS are necessary to reflect multiple, distinct, or independent visits with the same revenue code, repeat the revenue code as required.

Absence of a CPT or HCPCS code for any revenue code not listed on this policy may affect claim payment or result in a claim denial. When required, CPT and HCPCS codes are assigned in FL 44.

Harvard Pilgrim accepts the following revenue codes without a CPT or HCPCS code:

| Revenue code | Description |
|---|---|
| 0250–0259[3] | Pharmacy |
| 0270–0273, 0275–0279 | M&S supplies and device |
| 0370–0379 | Anesthesia |
| 0620–0622 | Supplies |
| 0710, 0719 | Recovery room |

PUBLICATION HISTORY

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|---|---|
| 07/01/05 | original documentation |
| 01/31/08 | annual review; minor edits |
| 01/31/09 | annual review; revised Outpatient Revenue Codes paragraph |
| 11/15/09 | annual review; no changes |
| 11/15/10 | annual review; no changes |
| 12/15/11 | annual review; no changes |
| 01/01/12 | removed First Seniority Freedom information from header |
| 10/15/12 | annual review; no changes |
| 12/15/13 | annual review; no changes |
| 01/15/15 | annual review; no changes |

[1]This policy applies to the products of Harvard Pilgrim Health Care and its affiliates—Harvard Pilgrim Health Care of Connecticut, Harvard Pilgrim Health Care of New England, and HPHC Insurance Company—for services performed by contracted providers. Payment is based on member benefits and eligibility, medical necessity review, where applicable, and provider contractual agreement. Payment for covered services rendered by contracted providers will be reimbursed at the lesser of charges or the contracted rate. (Does not apply to inpatient per diem, DRG, or case rates.) HPHC reserves the right to amend a payment policy at its discretion. CPT and HCPCS codes are updated annually. Always use the most recent CPT and HCPCS coding guidelines.

[2]Coding requirements may vary based on contractual agreement. Please refer to your contract for information regarding specific coding requirements.

[3]Certain classes of drugs that require detailed coding such as chemotherapy drugs, oral anti-emetic drugs, immunosuppressive drugs, hemophilia clotting factors, epoetin alfa, and darbepoetin alfa must be billed with revenue codes 0634, 0635 or 0636 and detailed CPT or HCPCS coding. This billing requirement is consistent with UB04 editor guidelines. Revenue code 0250—pharmacy is not appropriate for billing these categories of drugs. Billing patterns for these services will continue to be monitored, and may be subject to audits for incorrect coding as necessary (e.g., chemotherapy drugs billed under revenue code 0250—pharmacy).