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## Occupational Therapy Billing Example: UB-04

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The example in this section is to assist providers in billing occupational therapy services on the *UB-04* claim form. For general policy information, refer to the *Occupational Therapy* section in this manual.

Refer to the *UB-04 Completion: Outpatient Services* section of this manual for instructions to complete claim fields not explained in the following example. For additional claim preparation information, refer to the *Forms: Legibility and Completion Standards* section of this manual.

### **Billing Tips**

When completing claims, do not enter the decimal points in ICD-10-CM codes or dollar amounts. If requested information does not fit neatly in the *Remarks* field (Box 80) of the claim, type it on an 8½ x 11-inch sheet of paper and attach it to the claim.

## **Follow-Up Visit**

*Figure 1. Follow-up visit.*

*This is a sample only. Please adapt to your billing situation.*

In this example, a routine occupational therapy visit is being billed. HCPCS codes X4110 (treatment – initial 30 minutes) and X4112 (treatment – additional 15 minutes) are entered in the *HCPCS/Rate field* (Box 44).

Enter the two-digit facility type code “74” (clinic – outpatient rehabilitation facility) and one-character claim frequency code “1” as “741” in the *Type of Bill field* (Box 4).

The occurrence code “05” (other accident) and the date the accident occurred are entered in the *Occurrence Code/Date field* (Box 31), indicating that the accident/injury is not employment related.

Enter the usual and customary charges in the *Total Charges field* (Box 47). Enter code 001 in the *Revenue Code column* (Box 42, line 23) to designate that this is the total charge line and enter the total of all charges in “TOTALS” (Box 47, line 23).

Enter “O/P Medi-Cal” to indicate the type of claim and payer in the *Payer Name field* (Box 50). The rehabilitation center’s NPI is placed in the *NPI field* (Box 56).

Because the services are not part of an initial or six-month evaluation, authorization is required. The *Treatment Authorization Request* (TAR) number is entered in the *Treatment Authorization Codes field* (Box 63). Refer to the *Occupational Therapy* section of this manual for more information on authorization.

In this example, an ICD-10-CM code is entered in Box 67. Because this claim is submitted with a diagnosis code, an ICD indicator is required in the white space below the *DX field* (Box 66). An indicator is required only when an ICD-10-CM/PCS code is entered on the claim.

The referring provider’s NPI is entered in the *Attending field* (Box 76) because a prescription is required for all therapy services. The rendering physician’s NPI is entered on the *Operating field* (Box 77).

Figure 1: Follow-Up Visit

1 UPTOWN MEDICAL CENTER 140 SECOND STREET ANYTOWN CA 958235555		2		3a PAT CNTS #	3b MED REC #	4 TYPE OF BILL
				5 FED TAX NO	6 STATEMENT COVERS PERIOD FROM THROUGH	
8 PATIENT NAME DOE, JANE				9 PATIENT ADDRESS		
10 BIRTHDATE	11 SEX	12 DATE		13 ADMISSION 13 HR1 14 TYPE		15 SRC
08241980	F			17 STAT		80
31 OCCURRENCE DATE		32 OCCURRENCE DATE		33 OCCURRENCE DATE		34 OCCURRENCE DATE
05 090115						
42 REV. CD				43 DESCRIPTION		44 HOPS / RATE / HPPS CODE
				TREATMENT - INITIAL 30 MINUTES		X4110
				TREATMENT - ADDITIONAL 15 MIN		X4112
				45 SERV DATE		46 SERV UNITS
				100115		1
				47 TOTAL CHARGES		30 00
				48 NON-COVERED CHARGES		10 00
				TOTALS		40 00
50 PAYER NAME		51 HEALTH PLAN ID		52 PRIOR PAYMENTS		53 EST AMOUNT DUE
O/P MEDI-CAL						40 00
58 INSURED'S NAME		59 REL		60 INSURED'S UNIQUE ID		61 GROUP NAME
				90000000A95001		
63 TREATMENT AUTHORIZATION CODES				64 DOCUMENT CONTROL NUMBER		65 EMPLOYER NAME
77123456780						
66 ZS		67		68		69
D1D1D1D		A B C D E F G H		I J K L M N O P Q		R S
69 ADMIT DATE		70 PATIENT REASON DISEASE		71 HOPS CODE		72 EG
74 PRINCIPAL PROCEDURE CODE		75 OTHER PROCEDURE CODE		76 ATTENDING NPI		77 QUAL
				1234567890		
				77 OPERATING NPI		78 QUAL
				2345678901		
80 REMARKS				78 OTHER NPI		79 QUAL
REHABILITATION CENTER						

**<<Legend>>**

<<Symbols used in the document above are explained in the following table.>>

<b>Symbol</b>	<b>Description</b>
<<	This is a change mark symbol. It is used to indicate where on the page the most recent change begins.
>>	This is a change mark symbol. It is used to indicate where on the page the most recent change ends.