

UB04 Box 4 - Type of Bill on an institutional claim

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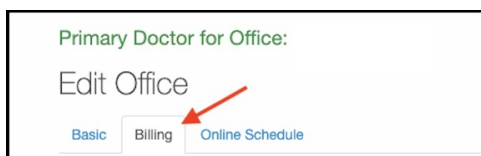
On an institutional claim, a 4-digit code in box 4 identifies the type of facility and type of care, and the frequency code is generated based on parameters set under the office settings and attached to a patient's claim.

Facility Level

To set the information for the facility:

1. Navigate to **Account > Office > Edit > Billing > Institutional Billing**

- Information that claims/visits specific can be entered on the appointment level. The options are available to set at a facility level to increase efficiency. Any information loaded at the claim level will override what is entered at a facility level.



Institutional Medical Billing

Use alternate pay to address in Hospital Claim ☐ use alternate "pay to" address in 837i billing and UB-04 form if checked.

Facility Tax ID # (institutional) Leave it blank if same to account settings.

Facility Type	<input type="text"/>	default value for UB04 box 4
Care Type	<input type="text"/>	default value for UB04 box 4
Billing Sequence	<input type="text"/>	default value for UB04 box 4
Admission Type	<input type="text"/>	default value for UB04 box 14
Origin Point	<input type="text"/>	default value for UB04 box 15
Discharge Status	<input type="text"/>	default value for UB04 box 17

[Save](#)

- First digit** - Leading zero that is ignored by some payers

- **Second digit** - Type of Facility
 - 1- Hospital
 - 2- Skilled Nursing Facility
 - 3- Home Health
 - 4- Christian Science (Hospital)
 - 5- Christian Science (Extended Care)
 - 6- Intermediate Care
 - 7- Clinic
 - 8- Special Facility
- **Third digit** - Type of Care
 - 1- Including Medicare Part A
 - 2- Medicare Part B Only
 - 3- Outpatient
 - 4- Other
 - 5- Intermediate Care - Level I
 - 6- Intermediate Care - Level II
 - 7- Intermediate Care - Level III
 - 8- Swing Bed
- **Fourth digit** - Sequence of this bill in the sequence of care (aka frequency code)
 - 0- Non-Payment/Zero Claim
 - 1- Admit Through Discharge Date
 - 2- First Interim Claim
 - 3- Continuing Interim Claim
 - 4- Last Interim Claim
 - 5- Late Charge(s) Only Claim
 - 6- First Interim Claim
 - 7- Replacement of Prior Claim
 - 8- Void/Cancel of Prior Claim

Appointment/Claim Level

To set the information on the claim level,

1. Navigate to **Billing > Live Claims Feed > Inside patient's appointment > Right side of the screen > Info tab**

- Please note any information loaded/included at the appointment level will override what has been entered for the facility under **Account > Offices**

Info	Cond & Occ	Value Code	Insurance	Attending
Claim Type	<div></div>			
Facility Type	<div></div> UB04 box 4			
Care Type	<div></div> UB04 box 4			
Billing Sequences	<div></div> UB04 box 4			

Each drop-down will show available selections. The number that prints in box 4 on the UB04 form will populate based on the information added.
