

## **ADMISSION TYPE CODE**

MVP Health Care® will begin to look at all institutional claims and will begin to deny certain claims as of 2/28/17. Per 5010 guidelines, when an institutional claim is received without an admission type code it will be denied back to the provider. This is the CL101 segment on an institutional 837 claim.

## **Valid Admission Type Codes**

- 1 Emergency
- 2 Urgent
- 3 Elective
- 4 Newborn
- 5 Trauma Center
- 9 Information Not Available

## **ADMISSION SOURCE CODE**

The admission source code when submitted for all lines of business will be validated and confirmed that it's a valid code. An admission source code submission is required for institutional Medicare claims except for type of bill 14X. In cases where the member is not admitted, please submit admission source code 9.

## Valid Admission Source Codes

- 1 Non-Health Care Facility Point of Origin (Physician Referral)
- 2 Clinic
- 4 Transfer from a Hospital (Different Facility)
- 5 Transfer from a SNF or Intermediate Care Facility (ICF)
- 6 Transfer from Another Health Care Facility
- 7 Emergency Room (ER)
- 8 Court/Law Enforcement
- 9 Information Not Available
- B Transfer From Another Home Health Agency
- C Readmission to Same Home Health Agency
- D Transfer from hospital inpatient in the same facility resulting in a separate claim to the payer
- E Transfer from Ambulatory Surgery Center
- F Transfer from Hospice and is Under a Hospice Plan of Care or Enrolled

Please contact the Customer Care Center for Provider Services. Representatives are available weekdays from 8:30 a.m. - 5:00 p.m. Eastern Time at 1-800-999-3920.

