



AETNA BETTER HEALTH OF ILLINOIS

Provider Memorandum

General Acute Care and Childrens Hospital Billing Guidelines

The Illinois Department of Healthcare and Family Services (HFS) requires Managed Care Organizations (MCO) to meet very specific claim data submission standards requiring particular and exact data elements on claims submitted from Hospitals. To facilitate the appropriate application of these rules, Managed Care Organizations are collectively relaying the enclosed information in this Provider Memorandum in an effort to reiterate and provide transparency on hospital billing guidelines for services rendered in a Children's and General Acute Care Institutional setting.

General guidance:

- HFS requires that outpatient services are submitted via an UB-04 form (837I) to include one of the following
 - Ambulatory Procedure Listing (APL) procedure code
 - Emergency room revenue code
 - Observation revenue code
- In all cases where one of these three criteria is not met, Hospital providers are required to submit claims via a CMS-1500 form (837P). MCOs will reject these types of encounters if this protocol is not followed.

Both General Acute Care and Children's Hospitals are required to register their NPIs as a Provider Type 30 – General Hospital

The following is a list of HFS registered Childrens Hospitals:

Medicaid ID	NPI	Name
370723793006	XXXX941105	ABRAHAM LINCOLN CHILDRENS HOSP
364251846002	XXXX581725	ALEXIAN BROS CHILDRENS HOSP
430738490001	XXXX935891	CARDINAL GLENNON CHILDRENS HSP
390812532001	XXXX482022	CHILDRENS HOSP OF WISCONSIN
370662569009	XXXX734127	CHILDRENS HOSPITAL OF ILLINOIS
363488183008	XXXX894990	COMER CHILDRENS HOSPITAL
362169147027	XXXX375082	HOPE CHILDRENS HOSPITAL
362170866002	XXXX387388	INGALLS CHILDRENS HOSPITAL
362170143001	XXXX146430	LA RABIDA CHILDRENS HOSP
362170833007	XXXX234535	LURIE CHILDRENS HOSPITAL
362169147026	XXXX539730	LUTHERAN GENERAL CHILDRENS HOS
370661220012	XXXX099098	MEMORIAL MED CTR CHILDRENS HSP
370661230003	XXXX861330	PASSAVANT AREA CHILDRENS HOSP
430666765002	XXXX117532	RANKEN JORDAN A PED REHAB CTR
364015560005	XXXX361748	RONALD MCDONALDS CHILDRENS HSP
362174823005	XXXX908728	RUSH CHILDRENS SERVICES
362193608002	XXXX656538	SHRINERS HOSPITAL FOR CHILDREN
362193608001	XXXX343447	SHRINERS HOSPITAL FOR CHILDREN

361509000006	XXXX733681	SINAI CHILDRENS HOSPITAL
370661238009	XXXX637591	ST JOHNS CHILDRENS HOSPITAL
430654870001	XXXX727663	ST LOUIS CHILDRENS HOSPITAL
370661250009	XXXX729036	TAYLORVILLE MEM CHILDRENS HOSP

Listed below are the allowable inpatient and outpatient Categories of Services for Institutional NPI billing

020	Inpatient Hospital Services (General)
021	Inpatient Hospital Services (Psychiatric)
022	Inpatient Hospital Services (Physical Rehabilitation)
023	Inpatient Hospital Services (ESRD)
024	Outpatient Services (General)
025	Outpatient Services (ESRD)
026	General Clinic Services
027	Psychiatric Clinic Services (Type 'A')
028	Psychiatric Clinic Services (Type 'B')
029	Clinic Services (Physical Rehabilitation)

Hospitals registered with separate General Acute Care Institutional and Children’s Institutional Hospital NPIs

The following information denotes how the allowable Hospital Institutional Categories of Services (COS) are to be billed for providers who have both a registered General Acute Care Institutional and Children’s Institutional Hospital NPIs

Children’s Institutional Hospital NPI - less than the age of 18 years on the date of admission

- Children’s Hospital Institutional NPIs **must always** be used for members less than the age of 18 years on the date of admission (with the exception of Labor and Delivery) for the following COS:

020	Inpatient Hospital Services (General)
023	Inpatient Hospital Services (ESRD)
024	Outpatient Services (General)
025	Outpatient Services (ESRD)
026	General Clinic Services

- Labor and Delivery Claims (APR-DRG 626 or 640) for members less than the age of 18 years on the date of admission **must be billed using the General Acute Care Institutional NPI** and Encounters are submitted with 282NC2000X (General Acute Care Hospital - Children), 281PC2000X (Chronic Disease Hospital - Children), 282NW0100X (General Acute Care Hospital - Women), 282N00000X (General Acute Care Hospital), or 282NR1301X (General Acute Care Hospital - Rural) taxonomies. Children’s hospitals billing for these services will receive the General Acute Care Per Diem and applicable MHVA/MPA Add-ons.
- Claims **may not** be submitted using the Children’s Hospital Institutional NPIs for the following Categories of Services **unless** the provider’s Children’s Hospital Institutional NPI is specifically registered for the allowable Categories of Services.

021	Inpatient Hospital Services (Psychiatric)
022	Inpatient Hospital Services (Physical Rehabilitation)
027	Psychiatric Clinic Services (Type 'A')
028	Psychiatric Clinic Services (Type 'B')
029	Clinic Services (Physical Rehabilitation)

- In the scenarios where the Children’s Hospital Institutional NPI is not registered for the aforementioned COS, then the General Acute Care Hospital Institutional NPI may be used, if registered for the respective COS, and Encounters submitted with 283XC2000X (Rehabilitation Hospital - Children), 273R00000X (Psychiatric Unit), 283Q00000X (Psychiatric Hospital), or 283X00000X (Rehabilitation Hospital) taxonomies. Hospitals billing in this manner will receive the respective General Acute Care Per Diem and applicable MHVA/MPA Add-ons.
- If neither the Children’s Institutional Hospital nor the General Acute Care Institutional Hospitals’ NPI is registered for Category of Service 21 (Psychiatric), the provider may submit a claim for emergency psychiatric care which is reimbursable under a 3 day DRG by billing with the General Acute Care Institutional Hospital NPI and will receive its applicable MHVA/MPA Add-ons.
- If the Children’s Institutional Hospital NPI is not registered for one of the following Category of Services, then the provider may not submit a claim for reimbursement using the Children’s Institutional Hospital NPI for the following COS:

021	Inpatient Hospital Services (Psychiatric)
022	Inpatient Hospital Services (Physical Rehabilitation)
027	Psychiatric Clinic Services (Type 'A')
028	Psychiatric Clinic Services (Type 'B')
029	Clinic Services (Physical Rehabilitation)

- The following **may never be billed** under the registered Children’s Institutional Hospital NPI:
 - Category of Service is 20 or 23 and:
 - Primary ICD-9 diagnosis code in the range of 290 through 302 or 306 through 319; equivalent ICD-10 primary diagnosis codes related to psychoses, mental & personality related disorders, retardation and intellectual disturbances/disabilities; or
 - DRG code is in the range 370 through 384; or
 - DRG code is 391
 - APR-DRG is 540, 541, 542, 544, 545, 546, 560, 561, 563, 564, 565, 566, 626 or 640

General Acute Care Institutional Hospital NPI - over the age of 18 years on the date of admission

- General Acute Care Hospital Institutional NPI **must always** be used for members over the age of 18 years on the date of admission for the following COS:

020	Inpatient Hospital Services (General)
023	Inpatient Hospital Services (ESRD)
024	Outpatient Services (General)
025	Outpatient Services (ESRD)

026 General Clinic Services

- Labor and Delivery Claims (APR-DRG 540, 541, 542, 544, 545, 546, 560, 561, 563, 564, 565 or 566) for members over the age of 18 years on the date of admission **must be billed using the General Acute Care Institutional NPI** and Encounters are submitted with 282N00000X (General Acute Care Hospital), 282NR1301X (General Acute Care Hospital - Rural), or 282NW0100X (General Acute Care Hospital - Women) taxonomies.
- Claims must be submitted using the General Acute Care Hospital Institutional NPI for the following Categories of Services:

- 021 Inpatient Hospital Services (Psychiatric)
- 022 Inpatient Hospital Services (Physical Rehabilitation)
- 027 Psychiatric Clinic Services (Type 'A')
- 028 Psychiatric Clinic Services (Type 'B')
- 029 Clinic Services (Physical Rehabilitation)

- If the General Acute Care Institutional Hospital NPI is registered for Category of Service 21 (Psychiatric) and/or Category of Service 22 (Rehabilitation), the provider must submit claims using the General Acute Care Institutional Hospital NPI and will receive the Per Diem and applicable MHVA/MPA Add-on reimbursement.
- If the General Acute Care Institutional Hospitals' NPI is not registered for Category of Service 21 (Psychiatric), the provider may submit a claim for emergency psychiatric care which is reimbursable under a 3 day DRG.
- If the General Acute Care Institutional Hospitals' NPI is **not registered** for one of the following Category of Services, then the provider **may not submit a claim** for reimbursement:

- 021 Inpatient Hospital Services (Psychiatric)
- 022 Inpatient Hospital Services (Physical Rehabilitation)
- 027 Psychiatric Clinic Services (Type 'A')
- 028 Psychiatric Clinic Services (Type 'B')
- 029 Clinic Services (Physical Rehabilitation)

- The following **must be billed** under the registered General Acute Care Institutional Hospital NPI:
 - Category of Service is 20 or 23 and:
 - DRG code is in the range 370 through 384; or
 - DRG code is 391; or
 - APR-DRG is 540, 541, 542, 544, 545, 546, 560, 561, 563, 564, 565, 566, 626 or 640
 - Category of Service is 24, 25 or 26 and:
 - Primary ICD-9 diagnosis code in the range of 630 through 677 or V22, V23 or V28, or equivalent principle ICD-10 Diagnosis codes related to conception, pregnancy, abortion, pre-post labor/pregnancy/delivery/abortion complications.

Hospitals registered with only General Acute Care Institutional Hospital NPIs

- General Acute Care Hospital Institutional NPI is to be used for all members regardless of age.
- Labor and Delivery Claims (APR-DRG 626 or 640) for members less than the age of 18 years on the date of admission will be billed using the General Acute Care Institutional NPI and Encounters are submitted with

282NC2000X (General Acute Care Hospital - Children), 281PC2000X (Chronic Disease Hospital - Children), 282NW0100X (General Acute Care Hospital - Women), 282N00000X (General Acute Care Hospital), or 282NR1301X (General Acute Care Hospital - Rural) taxonomies.

- Labor and Delivery Claims (APR-DRG 626 or 640) for members over the age of 18 years on the date of admission will be billed using the General Acute Care Institutional NPI and Encounters are submitted with 282N00000X (General Acute Care Hospital), 282NR1301X (General Acute Care Hospital - Rural), or 282NR1301X (General Acute Care Hospital - Rural) taxonomies.
- Claims will be submitted using the General Acute Care Hospital Institutional NPI for the following Categories of Services:

021	Inpatient Hospital Services (Psychiatric)
022	Inpatient Hospital Services (Physical Rehabilitation)
027	Psychiatric Clinic Services (Type 'A')
028	Psychiatric Clinic Services (Type 'B')
029	Clinic Services (Physical Rehabilitation)

- If the General Acute Care Institutional Hospital NPI is registered for Category of Service 21 (Psychiatric) and/or Category of Service 22 (Rehabilitation), the provider may submit claims using the General Acute Care Institutional Hospital NPI and will receive the Per Diem and applicable MHVA/MPA Add-on reimbursement.
- If the General Acute Care Institutional Hospitals' NPI is not registered for Category of Service 21 (Psychiatric), the provider may submit a claim for emergency psychiatric care which is reimbursable under a 3 day DRG using the 282N00000X (General Acute Care Hospital) taxonomy.
- If the General Acute Care Institutional Hospitals' NPI is not registered for one of the following Category of Services, then the provider may not submit a claim for reimbursement for the following Categories of Services:

021	Inpatient Hospital Services (Psychiatric)
022	Inpatient Hospital Services (Physical Rehabilitation)
027	Psychiatric Clinic Services (Type 'A')
028	Psychiatric Clinic Services (Type 'B')
029	Clinic Services (Physical Rehabilitation)

- The following **must be billed** under the registered General Acute Care Institutional Hospitals' NPI:
 - Category of Service is 20 or 23 and:
 - DRG code is in the range 370 through 384; or
 - DRG code is 391; or
 - APR-DRG is 540, 541, 542, 544, 545, 546, 560, 561, 563, 564, 565, 566, 626 or 640
 - Category of Service is 24, 25 or 26 and:
 - Primary ICD-9 diagnosis code in the range of 630 through 677 or V22, V23 or V28 or equivalent principle ICD-10 Diagnosis codes related to conception, pregnancy, abortion, pre-post labor/pregnancy/delivery/abortion complications.

La Rabida and Ranken Jordan Rehab (Provider Type 30) Children's Hospitals remain on a Per Diem reimbursement model coupled with MPA and MHVA Add-ons and can bill for labor and delivery claims (DRG 626 and 640).

Appendix A illustrates the appropriate taxonomies for encounter submissions relative to a properly billed NPI for a provider's allowable category of service.