MEDICAID REVENUE CODE REQUIREMENTS AND BILLING INSTRUCTIONS

The Utah Medicaid program has three plans; Traditional Medicaid, Non Traditional Medicaid and Primary Care Plan. On the following pages is lists of revenue codes with information indicating which revenue codes are accepted by each plan covered by Medicaid. Billing instructions follow the revenue code list.

KEY:

Units	**I**	**= IP Units Required for Inpatient**
	O	**= OP Units Required for Outpatient**
	E	**= Units Required for ESRD**
	Blank	**= No Units Necessary**
Medicaid Allowed	**Y**	**= Yes**
	N	**= No**
IP OP ESRD	**X**	**= Allowable for Service Indicated**
	C	**= CPT Procedure Code Required**

Code	Description	Units	Allowed	IP	OP	ESRD	Comments
0001	Total Charge						Not used for processing
0250	Pharmacy		Y		X		
0258	IV Solutions		Y		X		
0260	IV Therapy		Y		X		
0269	IV Therapy/Other		Y		X		
0270	Med-Sur Supplies		Y		X		
0300	Lab	O	Y		C		C = CPT-4 code required. Enter revenue code in Form Locator 42. Enter CPT code in Form Locator 51
0302	Lab/Immunology	O	Y		C		
0305	Lab/Hematology	O	Y		C		
0306	Lab/Bact-Micro	O	Y		C		
0309	Lab/Other	O	Y		C		
0320	Dx X-ray	O	Y		C		
0324	Dx X-Ray/Chest	O	Y		C		
0329	Dx X-Ray/Other	O	Y		C		
0410	Respiratory Svs		Y		X		
0412	Inhalation Svc		Y		X		
0419	Other Respir Svs		Y		X		
0450	Emerg Room	O	Y		X		
0458	Emergency Room		Y		X		
0459	Emergency Room/ Other	O	Y		X		
0700	Cast Room		Y		X		
0709	Other Cast Room		Y		X		
0730	EKG/ECG		Y		X		
0739	Other EKG-ECG		Y		X		
0760	Treat/Observation Rm/General		Y		X		
0761	Treatment Room		Y		X		
0762	Observation Room		Y		X		
0769	Other Treat/Observ Rm		Y		X		
0925	Preg Test	O	Y		C		
0929	Additional Dx Svs	O	Y		C		

Units I = I P Units Required for Inpatient
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Blank = No Units Necessary

Medicaid Allowed Y =Yes
N = No

I P/ OP/ ESRD X= Allowable
C= CPT Rqd