



MLN Matters®



Information for Medicare Fee-For-Service Health Care Professionals

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Implementation Date: October 4, 2004

New Condition Code for ESRD Facilities and Patient Status Code Changes

Note: This article was updated on May 7, 2013, to reflect current Web addresses. All other information remains unchanged.

Provider Types Affected

Hospitals and End Stage Renal Disease (ESRD) facilities

Provider Action Needed

ESRD facilities should note that new Condition Code 59 must be used when an ESRD beneficiary receives non-scheduled or emergency dialysis services at a facility other than his/her primary ESRD dialysis facility. In addition, Patient Status Codes 8, 61, and 65 are being clarified, and the *Medicare Claims Processing Manual (Pub. 100-4), Chapter 25 (Completing and Processing UB92 Data Set), Section 60 (Instructions for Completing CMS-1450)*, is being updated to include these changes.

Background

Effective October 1, 2004, the National Uniform Billing Committee (NUBC) has approved the use of the following new Condition Code:

- **Condition Code 59 - Non-primary ESRD Facility.**

This new Condition Code must be used when an ESRD beneficiary receives non-scheduled or emergency dialysis services at a facility other than his/her primary ESRD dialysis facility.

In addition, Patient Status Codes 8, 61, and 65 are being clarified as follows (changes bolded and italicized):

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- Status Code 8 - Discharged/transferred to home under care of a home IV drug therapy provider. (*This is not a certified Medicare provider.*)
- Status Code 61 - *Discharged/transferred to a hospital-based, Medicare-approved swing bed.*
- Status Code 65 - Discharged/transferred to a psychiatric hospital or psychiatric distinct part unit of a hospital (*for future use*). *Providers shall continue to use Patient Status Code 05 until further notice.*

Also in this instruction, Medicare fiscal intermediaries (FIs) are advised to continue to accept patient Status Code 05 for discharges/transfers to inpatient psychiatric hospitals and units until further notice.

Related Instructions

The *Medicare Claims Processing Manual (Pub 100-04), Chapter 25 (Completing and Processing UB92 Data Set), Section 60*, is modified by this CR. The revised portions of the manual are included with the official instruction released by the Centers for Medicare & Medicaid Services (CMS).

That instruction, which was issued to all FIs, can be found at <http://www.cms.gov/Regulations-and-Guidance/Guidance/Transmittals/downloads/R105CP.pdf> on the CMS website.

If you have any questions, please contact your FI at their toll-free number, which may be found at <http://www.cms.gov/Research-Statistics-Data-and-Systems/Monitoring-Programs/provider-compliance-interactive-map/index.html> on the CMS website.

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