



# MLN Matters®



Information for Medicare Fee-For-Service Health Care Professionals

MLN Matters Number: MM3183

Related Change Request (CR) #: 3183

Related CR Release Date: April 23, 2004

Effective Date: October 1, 2004

Related CR Transmittal #: R149CP

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):

#### Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.

- 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.

### Disclaimer

This article was prepared as a service to the public and is not intended to grant rights or impose obligations. This article may contain references or links to statutes, regulations, or other policy materials. The information provided is only intended to be a general summary. It is not intended to take the place of either the written law or regulations. We encourage readers to review the specific statutes, regulations and other interpretive materials for a full and accurate statement of their contents.