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## Every Woman Counts Billing Examples: UB-04

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Page updated: July 2021

The examples in this section are to assist providers in billing for Every Woman Counts services on the *UB-04* claim form. They do not necessarily reflect current policy. For general policy information, refer to the *Every Woman Counts* section in this manual. Refer to the *UB-04 Completion: Outpatient Services* section of this manual for instructions to complete claim fields not explained in the following example. For additional claim preparation information, refer to the Forms: *Legibility and Completion Standards* section of this manual.

**Billing Tips:** When completing claims, do not enter the decimal points in ICD-10-CM codes or dollar amounts. When entering modifiers, do not include hyphens. If requested information does not fit neatly in the *Remarks* field (Box 80) of the claim, type it on an 8½ x 11-inch sheet of paper and attach it to the claim.

### Clinic Billing for Routine Mammogram

*Figure 1. Hospital clinic billing for routine mammogram.*

*This is a sample only and may not necessarily reflect current policy. Please adapt to your billing situation.*

Jane Doe is eligible for breast cancer screening and visits the Uptown Medical Center for a routine mammogram.

«In this example, a freestanding clinic is billing for the mammogram services rendered to Ms. Doe. CPT® code 77067 (screening mammography, bilateral [2-view study of each breast], including computer-aided detection [CAD] when performed) is billed without a modifier (representing professional and technical components) in the *HCPCS/Rate* field (Box 44). An explanation of code 77067 is placed in the *Description* field (Box 43).»

Enter the two-digit facility type code “72” (clinic – hospital based) and one-character claim frequency code “1” as “721” in the *Type of Bill* field (Box 4).

In the *Service Date* field (Box 45), enter the date of service in six-digit format. Enter a “1” in the *Service Units* field (Box 46) for code 77067 and the usual and customary charges in the *Total Charges* field (Box 47, line 23).

Enter “O/P Medi-Cal” to indicate the type of claim and payer in the *Payer Name* field (Box 50). The hospital clinic’s NPI is placed in the NPI field (Box 56).

Every Woman Counts services do not require authorization. Therefore, no information is entered in the *Treatment Authorization Codes* field (Box 63).

An ICD-10-CM diagnosis code is required in the *Diagnosis Code* field (Box 67 A-E). Because this claim is submitted with a diagnosis code, an ICD indicator is required in the white space below the DX field (Box 66). An indicator is required only when an ICD-10-CM/PCS code is entered on the claim.

See “Approved Procedures” in the *Every Woman Counts* section of this manual for a listing of relevant ICD-10-CM diagnosis codes.

«The referring physician’s NPI is entered in the *Attending* field (Box 76).»

1 UPTOWN MEDICAL CENTER 140 SECOND STREET ANYTOWN CA 958235555		2		3 SICRZ CNTL #		4 TYPE OF BILL 721	
8 PATIENT NAME DOE, JANE		9 PATIENT ADDRESS					
10 BIRTHDATE 06211957		11 SEX F		12 DATE		13 ADMISSION 13 HR 14 TYPE 15 SRC	
14 DMR		15 STAT		16		17	
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43 DESCRIPTION SCREENING MAMMOGRAPH. BILAT		44 HOPS / RATE / HIPPS CODE 77067		45 SERV DATE 111217		46 SERV UNITS 1	
47 TOTAL CHARGES 7057		48 NON-COVERED CHARGES		49			
001 PAGE OF		CREATION DATE		TOTALS		7057	
50 PAYER NAME O/P MEDICAL		51 HEALTH PLAN ID		52 REL INFO		53 REL BEN	
54 PRIOR PAYMENTS		55 EST. AMOUNT DUE 7057		56 NPI 0123456789		57 OTHER PRV ID	
58 INSURED'S NAME		59 PREL		60 INSURED'S UNIQUE ID 909A0000005001		61 GROUP NAME	
62 INSURANCE GROUP NO.		63 TREATMENT AUTHORIZATION CODES		64 DOCUMENT CONTROL NUMBER		65 EMPLOYER NAME	
66 D1D1D1D		67 A B C D E F G H		68 I J K L M N O P Q		69	
70 PATIENT REASON EX		71 HIPPS CODE		72 EO		73	
74 PRINCIPAL PROCEDURE CODE		75 OTHER PROCEDURE CODE		76 ATTENDING NPI 1234567890		77 QUAL	
78 OTHER CODE		79 OTHER CODE		80 OTHER NPI		81 QUAL	
82 OTHER CODE		83 OTHER CODE		84 OTHER NPI		85 QUAL	
86 OTHER CODE		87 OTHER CODE		88 OTHER NPI		89 QUAL	
90 REMARKS		91 CC 3		92 4		93 5	
94 6		95 7		96 8		97 9	
98 10		99 11		100 12		101 13	
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**<<Legend>>**

<<Symbols used in the document above are explained in the following table.>>

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