

## Admission Dates and Discharge Hours

Arizona Complete Health-Complete Care Plan has noticed a significant increase in provider claims denying for Missing or Invalid admission dates or discharge hours. All institutional (UB04/837I) claims must include the date of admit and discharge hour (if applicable).

Providers receiving the following claim denial: EX8a- Admit date or discharge hour missing/ invalid should thoroughly review this communication as a means to prevent further denials.

### ADMISSION DATE BILLING

Please ensure when billing an inpatient claim, the following claims submission fields on the UB04/837I are filled out in their entirety in compliance with the Arizona Health Care Cost Containment System (AHCCCS) Fee-For Service Billing Guidelines.

*Box 12-15 submission guidelines:*

Box 12. Date - Enter the admission start of care date.

Box 13. HR - Enter the admission hour.

- Enter the hour in which the patient is admitted for inpatient or outpatient care, using Military Standard Time (00-23) in top-of-hour times only. Please refer to the Time Reporting Code Structure chart on page two of this communication for reporting examples.

Box 14. Type - Enter the priority of admission/visit.

- This is required for all claims. Enter the code that best describes the member's status for this billing period. Example Codes:
  - 1 for Emergency
  - 2 for Urgent
  - 3 for Elective
  - 4 for Newborn
  - 5 for Trauma

Box 15. SRC - Enter the point of origin for admissions or visit.

- This indicates the point of patient origin for the admission or visit. It is the source of referral for the admission or visit, and will always be entered in as 1 character. (Example: 1 will be 1, not 01.)

Admission			
12 Date	13 HR	14 Type	15 SRC
MM/DD/CC YY	08	1	8

THIS UPDATE APPLIES TO THE FOLLOWING **AzCH-Complete Care Plan** PROVIDER TYPES:

- Physicians
- Medical Groups/IPAs
- Hospitals
- Ancillary Providers
- Behavioral Health Physicians
- FQHC

### PROVIDER SERVICES

AzCHProviderEngagement  
@azcompletehealth.com  
1-866-796-0542  
azcompletehealth.com

### PROVIDER DISPUTES

AzCH-Complete Care Plan Provider Disputes  
1870 W. Rio Salado Parkway, Ste. 2A  
Tempe, AZ 85281

### STATE FAIR HEARINGS

AzCH-Complete Care Plan Provider State Fair Hearings  
1870 W. Rio Salado Parkway, Ste. 2A  
Tempe, AZ 85281

## DISCHARGE BILLING

*Box 16 submission guidelines:*

Box 16. DHR (Discharge Hour) - Enter the time (two digits), which best indicates the member's time of discharge. Please refer to the Time Reporting Code Structure chart below for reporting examples.

- This is required for inpatient claims when the member has been discharged.

*Time Reporting Code Structure:*

12:00 a.m. = 00	6:00 a.m. = 06	12:00 p.m. = 12	6:00 p.m. = 18
1:00 a.m. = 01	7:00 a.m. = 07	1:00 p.m. = 13	7:00 p.m. = 19
2:00 a.m. = 02	8:00 a.m. = 08	2:00 p.m. = 14	8:00 p.m. = 20
3:00 a.m. = 03	9:00 a.m. = 09	3:00 p.m. = 15	9:00 p.m. = 21
4:00 a.m. = 04	10:00 a.m. = 10	4:00 p.m. = 16	10:00 p.m. = 22
5:00 a.m. = 05	11:00 a.m. = 11	5:00 p.m. = 17	11:00 p.m. = 23

## ADDITIONAL INFORMATION

For more information regarding Admission Date and Discharge Hour Billing please visit:

[https://www.azahcccs.gov/PlansProviders/Downloads/FFSProviderManual/FFS\\_Chap06.pdf](https://www.azahcccs.gov/PlansProviders/Downloads/FFSProviderManual/FFS_Chap06.pdf)

If you have questions regarding the information contained in this update, please contact your Provider Engagement Specialist or email [AzCHProviderEngagement@azcompletehealth.com](mailto:AzCHProviderEngagement@azcompletehealth.com).