

Professional Claims – Admission Date Required when Place of Service is Inpatient

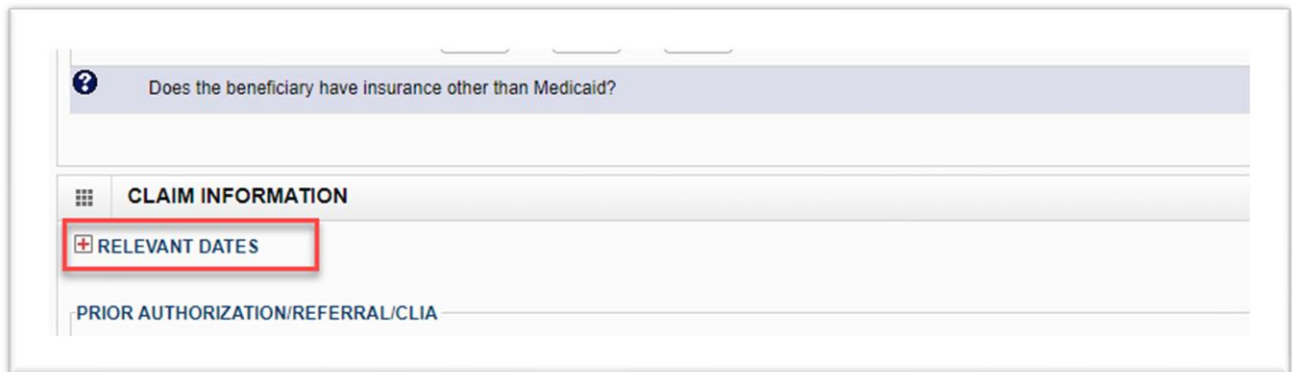
Attention Practitioners and Billers:

A change in billing requirements is in effect for when a member is inpatient in a facility. This change now requires providers/practitioners to enter the member's Admission Date to the facility on their Professional Claims or 837P claims transactions when the place of service is one of the following:

- 21 – Inpatient Hospital
- 51 – Inpatient Psychiatric Facility
- 61 – Comprehensive Inpatient Rehab

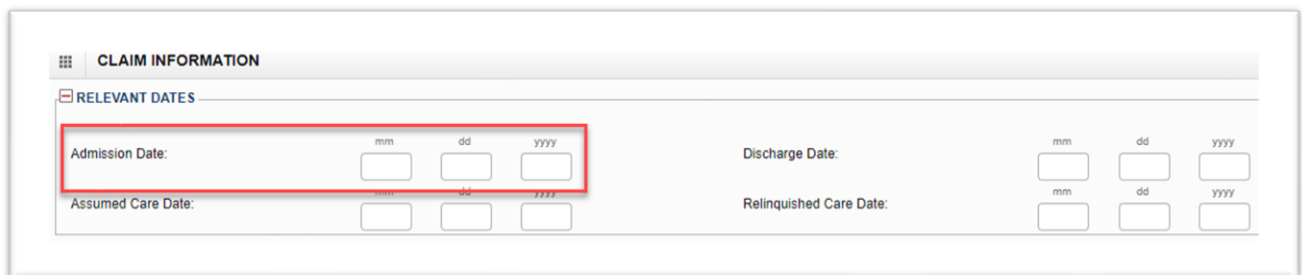
BMS Provider Portal Direct Data Entry

The **Admission Date** field is located within the “Claim Information” section. Open the “Relevant Dates” dropdown by clicking on the “+” symbol.



The screenshot shows a web interface with a question: "Does the beneficiary have insurance other than Medicaid?". Below this is a section titled "CLAIM INFORMATION" with a sub-section "RELEVANT DATES" highlighted by a red box. Below "RELEVANT DATES" is a link for "PRIOR AUTHORIZATION/REFERRAL/CLIA".

Enter the **Admit Date** in the Admission Date fields.



The screenshot shows the "RELEVANT DATES" section expanded. It contains four date input fields: "Admission Date", "Discharge Date", "Assumed Care Date", and "Relinquished Care Date". Each field has three sub-inputs for month (mm), day (dd), and year (yyyy). The "Admission Date" field is highlighted with a red box.

The **Place of Service** must be selected from the available options in the dropdown box, including the following inpatient options:

- 21 – Inpatient Hospital
- 51 – Inpatient Psychiatric Facility
- 61 – Comprehensive Inpatient Rehab

CLAIM DATA

Patient Account No.: *

Place of Service: *

Please check if the claim is related to NEM

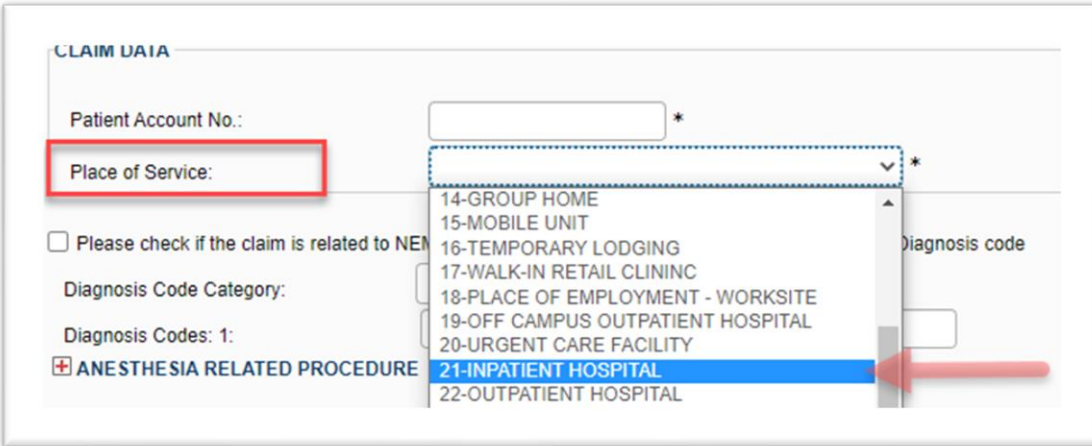
Diagnosis Code Category:

Diagnosis Codes: 1:

ANESTHESIA RELATED PROCEDURE

- 14-GROUP HOME
- 15-MOBILE UNIT
- 16-TEMPORARY LODGING
- 17-WALK-IN RETAIL CLINIC
- 18-PLACE OF EMPLOYMENT - WORKSITE
- 19-OFF CAMPUS OUTPATIENT HOSPITAL
- 20-URGENT CARE FACILITY
- 21-INPATIENT HOSPITAL**
- 22-OUTPATIENT HOSPITAL

Diagnosis code



Note: Whenever an Inpatient-based Place of Service code is selected (21, 51 or 61) then the Admission Date is required.

The [CMS-1500 Provider Manual](#) will be updated in July to reflect this situational requirement in Chapter 6.4.1 Instructions for Completing the CMS-1500 Claim Form.