Attending provider requirements
Attending Provider Requirement- IHS/638
UB-04

Effective with Date of Service 01/01/2016, or discharge date 01/01/2016, UB-04 claims must have valid attending provider information billed in Field 76 or claim will be denied as incomplete (unclean).

The “attending provider” is identified as the individual who has overall responsibility for the patient’s care and treatment reported on the claim submitted.

The Attending Provider must be an AHCCCS covered provider as well as AHCCCS registered and active on the date of service.

Verify your facility’s personnel:

• are AHCCCS registered and active on 01/01/2016
• have valid NPI numbers on file with AHCCCS
• are set up in Provider Registration with the various group billing links (when the provider is working at more than one location/facility)
Attending Provider Requirement- IHS/638 UB-04

Provider Type 77 (Behavioral Health Outpatient) Exception:
When billing for outpatient behavioral health services with revenue code 0510 for reimbursement at the AIR then continue to bill with revenue code 0510 and the facility as the attending provider UNLESS the attending provider is an AHCCCS registered provider.

Example:
Behavioral Health Techs are not AHCCCS registered providers. When the BHT performs the service and the Behavioral Health Outpatient Clinic bills for the service, the BHT cannot be billed as the attending provider, since they are not registered with AHCCCS. In this example, the Behavioral Health Clinic would show the facility as the attending provider on the UB.

Example:
The Behavioral Health Clinic’s Licensed Clinical Social Worker performs the service. AHCCCS does register LCSWs (as Provider Type 85), so this claim should have the LCSW as the attending provider on the UB.

The bottom line: if the professional person who performed the BH service is a registered AHCCCS provider (can be any of the provider types shown below) then bill the UB claim with that professional person as the attending provider.
But if the professional person who performed the service is NOT an AHCCCS registered provider (is not any of the provider types below) then the BH Clinic should bill the UB with the BH Clinic as the attending provider.

The Attending Provider could be one of the following AHCCCS registered provider types:

- 07  dentist
- 08  MD physician
- 09  certified nurse midwife
- 10  DPM (provider type NC)
- 11  psychologist
- 12  CRNA
- 13  occupational therapist
- 14  physical therapist
- 15  speech/hearing therapist
- 17  naturopath
- 18  PA
- 19  RNP
- 20  respiratory therapist
- 31  DO physician
- 47  registered dietician
- 48  nutritionist
- 54  dental hygienist
- 62  audiologist
- 69  optometrist
- 84  licensed midwife
- 85  Licensed Clinical Social Worker
- 86  Licensed Marriage/Family Therapist
- 87  Licensed Professional Counselor
- A4  Licensed Independent Substance Abuse Counselor
- SA  speech language pathology assistant
April 7, 2016: Attending Provider Update – Pharmacy Clinic Visit

In previous notifications, including ListServ emails as well as IHS/638 Quarterly Forum meetings, AHCCCS advised that when billing for the pharmacy encounter clinic visit the pharmacist’s NPI must be billed on the UB-04 as the attending provider.

AHCCCS has determined that, due to system limitations: Effective with date of receipt April 9, 2016, for AIR reimbursement of IHS/638 outpatient pharmacy claims billed on a UB-04 with revenue code 0519, the attending provider should be billed with the facility’s NPI.

If you have claims billed with pharmacist’s NPI that were denied, please do not resubmit these claims.
Questions?
Thank You.

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