

Mollenhauer, Dave

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Sent: Wednesday, January 08, 2014 4:26 PM
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Cc: DHCM OPS; Mollenhauer, Dave
Subject: Clarification Regarding New CMS 1500 Claim Form - Diagnosis Code Pointer

Please note the new CMS 1500 Claim Form (1500 Form **02-12**) instruction manual indicates a letter usage for the Diagnosis Code Pointer noted below in the provided example. We would expect to have the alpha letters A-L cross-walked to a numeric equivalent for use in the 837 Encounter, as per the TR3 for the 837 Professional transaction, the only acceptable values that can be used for a Diagnosis code pointer is 1-12.

EXAMPLE:



FROM TR3:

REQUIRED SV107 - 1 1328 Diagnosis Code Pointer M N0 1/2

A pointer to the diagnosis code in the order of importance to this service

SEMANTIC:

C004-01 identifies the primary diagnosis code for this service line.

This first pointer designates the primary diagnosis for this service line. Remaining diagnosis pointers indicate declining level of importance to service line. Acceptable values are 1 through 12, and correspond to Composite Data Elements 01 through 12 in the Health Care Diagnosis Code HI segment in the Claim Loop ID-2300.

If you have any questions please let us know. Thanks.