



ADMINISTRATIVE RULES OF MONTANA

6.6.5509 REQUIREMENTS FOR USE OF HCFA FORM 1450 (UB-92)

- (1) Institutional care practitioners shall use the HCFA Form 1450 (UB-92) and instructions provided by HCFA for use of the HCFA Form 1450 (UB-92) when filing claims with issuers for health care services. Institutional care providers that bill patients directly shall provide a properly completed HCFA Form 1450 in addition to any other explanation information used to bill the patient when requested by the patient.
- (2) Issuers may only require institutional care practitioners to use the following coding system for the initial filing of claims for health care services:
 - (a) ICD-9-CM codes;
 - (b) revenue codes;
 - (c) HCPCS codes; and
 - (d) the information outlined in ARM 6.6.5507, if the charges include direct service furnished by a health care practitioner, and the direct service is not covered by the instructions for the HCFA Form 1450 (UB-92) .
- (3) Hospitals may use the HCFA Form 1500 to supplement a HCFA Form 1450 (UB-92) if necessary in billing patients or their representatives or filing claims with issuers for outpatient services.

Authorizing statute(s): Sec. 50-4-501, MCA

Implementing statute(s): 50-4-305 and 50-4-501, MCA

History: NEW, 1995 MAR p. 923, Eff. 5/26/95.