



ATTENTION HOSPITAL PROVIDERS

ISSUES BILLING REVENUE CODE 761 FOR AMBULATORY SURGERIES AND IMMUNIZATIONS

A review of hospital claims has identified two issues related to billing claims with revenue code 761. Claims processing logic changes were made in April to prevent reimbursement for claims billed inappropriately with revenue code 761. All claims with dates of service January 1, 2014 forward that are related to the issues identified below and paid in error will be systematically voided on the RA of June 30, 2015.

1. Some hospitals were billing ambulatory surgical procedure codes with revenue code 761 rather than with revenue code 490. Policy is clear that any procedures listed on the Hospital Outpatient Ambulatory Surgery Fee Schedule must be billed with revenue code 490. Billing these claims with an incorrect revenue code allowed some claims to process incorrectly and overpay. Once these ambulatory surgery claims are systematically voided on the RA of June 30, providers may resubmit claims appropriately using revenue code 490.

2. Additionally, some hospitals were billing immunizations and immunization administration with revenue code 761. Immunizations and the immunization administration are professional services and should not be billed by hospitals. Payments made for immunizations and/or the immunization administration billed with revenue code 761 were in error and will be voided on the RA of June 30. These claims may not be resubmitted.

The billing of a clinic visit (HR 510, 514, 515, 517, or 519) for the use of space and supplies is allowable.

Please contact Molina Provider Relations (800) 473-2783 or (225) 924-5040 for questions.