

Point of Origin for Admission or Visit

UB-04 Form Locator 15

1	<p>Non-Health Care Facility Point of Origin</p> <p>Effective July 1, 2010 Usage Note: Examples: Includes patients coming from home or workplace and patients receiving care at home (such as home health services).</p>	<p>Effective July 1, 2010: New Definitions</p> <p><u>For Inpatients:</u> The patient was admitted to this facility.</p> <p><u>For Outpatients:</u> The patient presented to this facility for outpatient services.</p>
2	<p>Clinic or Physician's Office</p> <p>Effective July 1, 2010 Usage Note: Eg. patient seen in clinic and directly admitted to a facility.</p>	<p>Effective July 1, 2010: New Definitions</p> <p><u>For Inpatients:</u> The patient was admitted to this facility.</p> <p><u>For Outpatients:</u> The patient presented to this facility for outpatient services.</p>
3	<p>(Discontinued effective 10/1/07)</p>	<p>Reserved for assignment by the NUBC.</p>
4	<p>Transfer From a Hospital (Different Facility)</p> <p>Usage Notes: Excludes Transfers from Hospital Inpatient in the Same Facility (See Code D)</p>	<p><u>Inpatient:</u> The patient was admitted to this facility as a hospital transfer from an acute care facility where he or she was an inpatient or outpatient.</p> <p><u>Outpatient:</u> The patient was transferred to this facility as an outpatient from an acute care facility.</p>
5	<p>Transfer From A Skilled Nursing Facility (SNF), Intermediate Care Facility (ICF) or Assisted Living Facility (ALF)</p>	<p><u>Inpatient:</u> The patient was admitted to this facility as a transfer from a SNF, ICF or ALF where he or she was a resident.</p> <p><u>Outpatient:</u> The patient was presented to this facility for outpatient or referenced diagnostic services from a SNF, ICF or ALF where he or she was a resident.</p>
6	<p>Transfer From Another Health Care Facility</p>	<p><u>Inpatient:</u> The patient was admitted to this facility as a transfer from another type of health care facility not defined elsewhere in this code list.</p> <p><u>Outpatient:</u> The patient was presented to this facility for services from another health care facility not defined</p>

		elsewhere in this code list.
7	Emergency Room <u>Usage Notes:</u> Excludes patients who came to the emergency room from another health care facility. (Discontinued effective 7/1/10)	<u>Inpatient:</u> The patient was admitted to this facility after receiving services in this facility's emergency department. <u>Outpatient:</u> The patient received unscheduled services in this facility's emergency department and discharged without an inpatient admission. Includes self-referrals in emergency situations that require immediate medical attention. (Condition Code P7 will be used for Public Health reporting only as determined by the State)
8	Court/Law Enforcement <u>Usage Note:</u> Includes transfers from incarceration facilities	<u>Inpatient:</u> The patient was admitted to this facility upon the direction of a court of law, or upon the request of a law enforcement agency representative. <u>Outpatient:</u> The patient presented to this facility upon the direction of a court of law, or upon the request of a law enforcement agency representative for outpatient or referenced diagnostic services.
9	Information Not Available	<u>Inpatient:</u> The means by which the patient was admitted to this hospital is not known. <u>Outpatient:</u> The means by which the patient was referred to this hospital's outpatient department is not known. *Not valid for Medicare outpatients.
A	(Discontinued effective 10/1/07)	Reserved for assignment by the NUBC.
B	Transfer from Another Home Health Agency (Discontinued effective 7/1/10 – see condition code 47)	The patient was admitted to this facility's home health agency, as a transfer from another home health agency.
C	Readmission to Same Home Health Agency (Discontinued effective 7/1/10)	The patient was readmitted to this facility's home health agency within the existing 60-day home health payment. (For use with Medicare bill type 32x.)
D	Transfer from One Distinct Unit of the Hospital to another Distinct Unit of the Same Hospital Resulting in a Separate Claim to the Payer	<u>Inpatient:</u> The patient was admitted to this facility as a transfer from hospital inpatient within this hospital resulting in a separate claim to the payer. <u>Outpatient:</u> The patient received outpatient services in this facility as a transfer from within this hospital resulting in a separate claim to the payer. <u>Usage Notes:</u> For the purposes of this code "Distinct unit" is defined as a unique unit or level of care at the hospital requiring the issuance of a separate claim to the payer. Examples could include observation services, psychiatric units, rehabilitation units, a unit in a critical access hospital, or a

		swing bed located in an acute hospital resulting in a separate claim to the payer.
E	Transfer from Ambulatory Surgery Center *recognized by Medicare 1/4/10	<u>Inpatient:</u> The patient was admitted to this facility as a transfer from an ambulatory surgery center. <u>Outpatient:</u> The patient presented to this facility for outpatient or referenced diagnostic services from an ambulatory surgery center.
F	Transfer from Hospice and is Under a Hospice Plan of Care or Enrolled in a Hospice Program	<u>Inpatient:</u> The patient was admitted to this facility as a transfer from hospice. <u>Outpatient:</u> The patient presented to this facility for outpatient or referenced diagnostic services from a hospice facility.
G-Z		Reserved for assignment by the NUBC.

Point of Origin for Admission or Visit Newborn Coding Structure

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Note: Newborn coding structure must be used when the Type of Admission Code 4 is used.

1-4	(Discontinued effective 10/1/07)	Reserved for assignment by the NUBC.
5	Born inside this Hospital (Effective 10/1/07)	A baby born inside this Hospital.
6	Born Outside of this Hospital (Effective 10/1/07)	A baby born outside of this Hospital
7- 8		Reserved for assignment by the NUBC.