



NETWORK Notification

Notice Date: July 8, 2022
To: CareSource PASSE Providers
From: CareSource PASSE
Subject: Condition Code 88 Billing Requirement

Summary

In alignment with Arkansas Medicaid billing requirements, CareSource PASSE™ requires providers to bill condition code 88 when rev code 450 is billed on institutional claims (CMS-1450/UB-04).

Impact

Please refer to the image below from the Arkansas Medicaid Hospital Manual:

272.130 **Outpatient – Emergency, Non-Emergency and Related Charges** **11-1-17**

National Code	Revenue Code Description
450*	Emergency Room Coverage. Condition code 88 required.
459*	Non-emergency Service Room Charge. This Service Room Charge includes supplies, drugs and injections.
622*	Outpatient Hospital Supplies - emergency only.
250*	Outpatient Hospital drugs and injection; emergency only.

*Revenue code

Service:	Hospital Bills:	CareSource PASSE Pays:
Assess and screen (1) <i>Note: You cannot bill if any form of treatment has already been provided</i>	451	\$15.00 plus ancillary charges
Non-emergency (2)	459	\$12.00 plus ancillary charges No drugs or supplies
Emergency	450	\$51.00 plus ancillary charges No drugs or supplies
	622	Supplies
	250	Drugs and supplies paid

As a reminder, facility/institutional services (CMS-150/UB-04) are billed separately from professional/physician services (CMS-1500).

Questions

For questions, please contact Provider Services at **1-833-230-2100**.

AR-PAS-P-1279174

