

## Major Changes to Source of Admission Code

Effective October 1, 2007, UB-04 field locator 15 has been renamed: ***Point of Origin for Admission or Visit***

Data element values for this field have been significantly changed. Effective October 1, 2007, the following codes will be in effect:

- 1 = Nonhealthcare Facility Point of origin
- 2 = Clinic
- 4 = Transfer from a Hospital (Different Facility)
- 5 = Transfer from a Skilled Nursing Facility (SNF) or Intermediate Care Facility (ICF)
- 6 = Transfer from Another Healthcare Facility
- 7 = Emergency Room
- 8 = Court/Law Enforcement
- 9 = Information Not Available
- B = Transfer from another Home Health Agency
- C = Readmission to same Home Health Agency
- 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
- E = Transfer from Ambulatory Surgery Center
- F = Transfer from Hospice and is under a hospice plan of care or enrolled in a hospice program

### **NEWBORNS**

- 5 = Born inside this hospital
- 6 = Born outside of this hospital

Data element values 3 and A, and Newborn values 1-4 have been discontinued.

The definitions of the remaining values have been modified for clarity. The changes are noted below.

- 1 **Inpatient**—The patient was admitted to this facility upon the order of a physician;  
**Outpatient**—The patient presents to this facility with an order from a physician for services or seeks scheduled services for which an order is not required (e.g., mammography). This includes non-emergent self-referrals.  
*(No substantial change from the prior definition.)*
- 2 **Inpatient**—The patient was admitted to this facility as a transfer from a freestanding or nonfreestanding clinic;  
**Outpatient**—The patient was referred to this facility for outpatient or referenced diagnostic services.  
*(The restriction that applies this to only "this facility's" clinic physician has been removed.)*
- 4 **Inpatient**—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;  
**Outpatient**—The patient was transferred to this facility as an outpatient from an acute care facility. This excludes transfers from hospital inpatient in the same facility.  
*(No substantial change from the prior definition.)*
- 5 **Inpatient**—The patient was admitted to this facility as a transfer from a SNF or ICF where he or she was a resident;  
**Outpatient**—The patient was referred to this facility for outpatient or referenced diagnostic

services from a SNF or ICF where he or she was a resident.

*(ICF was added as an appropriate source. The term "inpatient" has been changed to "resident.")*

- 6 **Inpatient**—The patient was admitted to this facility as a transfer from another type of health care facility not defined elsewhere in this code list;  
**Outpatient**—The patient was referred to this facility for services by (a physician of) another health care facility not defined elsewhere in this code list where he or she was an inpatient or outpatient.  
*(No substantial change from the prior definition.)*
- 7 **Inpatient**—The patient was admitted to this facility after receiving services in this facility's emergency department;  
**Outpatient**—The patient received unscheduled services in this facility's emergency department and discharged without an inpatient admission. This includes self-referrals in emergency situations that require immediate medical attention. It excludes patients who come to the emergency room from another health care facility.  
*(Clarification has been added that transfers from another facility to the ED are excluded.)*
- 8 **Inpatient**—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;  
**Outpatient**—The patient was referred 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. This includes transfers from incarceration facilities.  
*(Clarification has been added that transfers from incarceration facilities are included.)*
- 9 **Inpatient**—The means by which the patient was admitted to this hospital is not known;  
**Outpatient**—The means by which the patient was referred to this hospital's outpatient department is not known.  
*(No substantial change from the prior definition.)*
- B The patient was admitted to this home health agency as a transfer from another home health agency.  
*(No substantial change from the prior definition.)*
- C The patient was readmitted to this home health agency within the existing 60-day payment. (For use with Medicare bill type 032X.)  
*(No substantial change from the prior definition.)*
- D **Inpatient**—The patient was admitted to this facility as a transfer from hospital inpatient within this hospital resulting in a separate claim to the payer;  
**Outpatient**—The patient received outpatient services in this facility as a transfer from within this hospital resulting in a separate claim to the payer.  
For 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 service, psychiatric units, rehabilitation units, a unit in a critical access hospital, or a swing bed located in an acute hospital.  
*(Clarification has been added that this code should be used only when a separate claim to the payer will result and that the code is applicable to outpatients also.)*
- E **Inpatient**—The patient was admitted to this facility as a transfer from an ambulatory surgery center;  
**Outpatient**—The patient was referred to this facility for outpatient or referenced diagnostic services from an ambulatory surgery center.  
*(New Code)*
- F **Inpatient**—The patient was admitted to this facility as a transfer from a hospice;  
**Outpatient**—The patient as referred to this facility for outpatient or referenced diagnostic services from a hospice.  
*(New Code)*

NEWBORN codes 5 and 6 are self-explanatory. No other definition is provided.