Billing and Reimbursement

Health insurance prospective payment system (HIPPS) code reporting requirements

Geisinger Health Plan

HIPPS five-digit alpha numeric codes contain a specific set of patient characteristics, or case mix.

The first 3 positions of the code represent the Resource Utilization Group (RUG) case mix group, and the last 2 represent the assessment indicator. When billing applicable HIPPS codes:

- Place HIPPS codes in data element SV202 for electronic 837 claim transactions, or in field 44 (HCPCS/rate) for paper UB-04 claim forms.
- The associated revenue code is placed in data element SV201, or in field 42.
- In certain circumstances, multiple HIPPS codes may appear on separate lines of a single claim.
- Claims submitted without HIPPS codes and associated revenue code will be considered incomplete.