

# Outpatient From-To Date Policy

Policy Number: ADMINISTRATIVE 295.1 TO  
Effective Date: November 1, 2021

[Instructions for Use](#)

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Related Policies
None

## Applicable Lines of Business/Products

This policy applies to Oxford Commercial plan membership.

## Application

This reimbursement policy applies to services reported using the UB-04 Health Insurance Claim Form or its electronic equivalent or its successor form. This policy applies to all products and all network and non-network facilities, including, but not limited to, non-network authorized and percent of charge contract facilities.

## Overview

The policy describes how Oxford reimburses outpatient UB-04 claims submitted with a from and to date. It also addresses the requirement to report valid dates of service on each claim line, which must fall within the from and to date range.

## Reimbursement Guidelines

In accordance with Centers for Medicare and Medicaid Services (CMS) and National Uniform Billing Committee (NUBC), a valid date of service must be reported on each claim line, as it represents the date the outpatient service was provided. There must be a single line-item date of service reported for every revenue code, procedure code or drug code on all outpatient claims.

In addition, each service date (MMDDYY) must fall within the from and to date of service on the outpatient facility claim.

## Questions and Answers

1	Q:	What field on the UB-04 electronic claim form is used for the “From” and “To” date?
	A:	Field Line 6 - Statement Covers Period (From-Through) on the UB-04 electronic claim form should be used to enter the “From” and “To” date.
2	Q:	What happens if the date of service submitted for a procedure is out of the “From” and “To” date calendar range?
	A:	The claim will be denied. The provider can resubmit the claim with an appropriate date of service.

## References

The foregoing Oxford policy has been adapted from an existing UnitedHealthcare national policy that was researched, developed, and approved by UnitedHealthcare Reimbursement Policy Oversight Committee. [2021R5024A]

Centers for Medicare and Medicaid Services, CMS Manual System and other CMS publications and services  
National Uniform Billing Committee (NUBC)

## Policy History/Revision Information

Date	Summary of Changes
11/01/2021	<ul style="list-style-type: none"><li>New Reimbursement Policy.</li></ul>

## Instructions for Use

The services described in Oxford policies are subject to the terms, conditions and limitations of the member's contract or certificate. Unless otherwise stated, Oxford policies do not apply to Medicare Advantage members. Oxford reserves the right, in its sole discretion, to modify policies as necessary without prior written notice unless otherwise required by Oxford's administrative procedures or applicable state law. The term Oxford includes Oxford Health Plans, LLC and all of its subsidiaries as appropriate for these policies.

Certain policies may not be applicable to Self-Funded members and certain insured products. Refer to the member specific benefit plan document or Certificate of Coverage to determine whether coverage is provided or if there are any exclusions or benefit limitations applicable to any of these policies. If there is a difference between any policy and the member specific benefit plan document or Certificate of Coverage, the member specific benefit plan document or Certificate of Coverage will govern.

UnitedHealthcare may also use tools developed by third parties, such as the InterQual<sup>®</sup> criteria, to assist us in administering health benefits. The InterQual<sup>®</sup> criteria are intended to be used in connection with the independent professional medical judgment of a qualified health care provider and do not constitute the practice of medicine or medical advice.