Please use the following guidelines when you submit a skilled nursing facility (SNF) claim for a UnitedHealthcare commercial or Medicare Advantage plan member who is admitted to your facility. By working together, we can help improve the accuracy and timeliness of claims processing.

**What you need to know**

- Complete Field 12 (Admission/Start-of-Care Date) of the UB-04. It’s a required field to indicate the admission date of the SNF stay.
- When a member is discharged from skilled care, this ends the admission period.
- If a member is re-admitted to an SNF, show the new admission date in Field 12. Enter the start of the episode of care using the MMDDYY format.
- Additionally, use the correct admission hour in Box 13 of the UB-04 that corresponds to the hour the member was admitted.

**Care provider remittance advice remark codes**

If you don’t include the correct admission date and hour on the claim, it may result in partial or full reimbursement reduction or claim denial.

If there’s a reimbursement reduction, one of the following remark codes will appear on the provider remittance advice:

- **Admit Late Notification (V3):** According to the network health care facility contract, admission notification was required but not received in a timely manner. Therefore, the applicable administrative reimbursement reduction has been applied and deducted from the facility’s payment.
- **Admit Non-Notification (V4):** According to the network health care facility contract, admission notification was required but not received. Therefore, the applicable administrative reimbursement reduction has been applied and deducted from the facility’s payment.
- **CO197:** Contractual obligations – Precertification/authorization/notification/pre-treatment absent

If there is a claim denial, one of the following remark codes will appear on the provider remittance advice:

- **1551 AUTH NOT RECEIVED PRIOR TO ADMISSION**
- **1561 PRIOR AUTH REQUIRED BUT NOT OBTAINED**
- **N385** Notification of admission was not timely according to published plan procedures

**We’re here to help**

If you have questions or need assistance, please contact your Provider Representative. Thank you.