



Billing and Reimbursement Guideline:	From and To Dates/Date Range Billing
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Guideline Publication Date:	September 1, 2011
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Key coding, documentation and reimbursement points include:

- When billing for a single date of service, the From and To dates are both required. Both fields on the claim form must be completed or your submission will be returned for correction.
- Services that span over a date range may be billed with a date range, with the exception of office visits. Multiple office visits must be itemized by individual dates of service.
- This guideline applies to both CMS-1500 and UB-92 claim submissions.

Please refer to Neighborhood’s provider website at <http://www.nhpri.org> for specific provisions by product line.

This guideline is not a guarantee of reimbursement. Plan coverage, eligibility and claim payment edit rules may apply.

Version History

Original Publication Date: 9/1/2011

Revision Date (s):

9/1/13 Condensed existing Date Range Billing for Professional and Outpatient Services guidelines. Deleted itemized date requirement. Added office visit exception.