



State of New Jersey  
Department of Human Services  
Division of Medical Assistance and Health Services

# MEDICAID ALERT

May 1995

**TO:** Hospitals - Chief Executive Officer

**ROUTE TO:** Billing, Finance and Accounting Offices

**SUBJECT:** Instructions for Claims Completion for Multiple Births

**EFFECTIVE:** Immediately

**PURPOSE:** To provide instructions for the completion of a UB-92 claim form for billing for multiple births.

**ACTION:** The following Conditions Codes must be used in the Form Locators 24-30, on the UB-92 claim form, when billing the New Jersey Medicaid program for multiple births. These codes are to be used only when the mother's Medicaid identification number is being used.

**IN FORM LOCATORS 24-30:**

- 1.** Condition Code 82 - This code is to be used for the second child when a hospital is billing for multiple births and the mother's Medicaid identification number is being used.
- 2.** Condition Code 83 - This code is to be used for the third child when a hospital is billing for multiple births and the mother's Medicaid identification number is being used.
- 3.** Condition Code 84 - This code is to be used for the fourth child when a hospital is billing for multiple births and the mother's Medicaid identification number is being used.

For further information or questions, contact Provider Services Unit, Unisys, the Medicaid fiscal agent at 1-800-776-6334.

**RETAIN THIS MEDICAID ALERT CHRONOLOGICALLY BEHIND THE ALERTS TAB**

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