Providers must send the following data elements on Medicare Advantage claims effective 10/17/10:

Facility Claims

Data Element	837 Institutional 004010A1[1]	UB-04[2]
Taxonomy Code (If you represent an institution with more than one subpart to bill)	2000A Billing/Pay-To Provider Specialty Information Loop PRV Segment PRV03	Form Locator 81 Code-Code Field Left Column =B3 Middle Column = Taxonomy Code
Billing Provider National Provider Identifier	2010AA Billing Provider Name Loop NM1 Segment NM109	Form Locator 56
Service Location ZIP Code (if different than Billing Provider ZIP Code)	If services occur at primary location: 2010AA Billing Provider Loop N4 Segment N403 If services occur at a secondary location: 2310E Service Facility Name N4 Segment N403	If services occur at primary location: Form Locator 01 Line 3 Positions 17-25 If services occur at a secondary location: Not Applicable
Treatment Authorization Code (Payer Responsibility Code) (for Home Health Claims)	2000B Subscriber Hierarchical Level SBR Segment SBR01	Form Locator 63 Treatment Authorization Code
Height and Weight for ESRD Patients	2300 Claim Information Loop HI Value Information Segment HIXX-1 = BE HIXX-2 = Value Code (A9 or A8) HIXX-5 = Height or Weight (based upon the value code) Up to 24 value codes may be reported	Form Locators 39-41 Value Codes and Amounts
Core Based Statistical Area (for Home Health and ESRD claims)	2300 Claim Information Loop HI Value Information Segment HIXX-1 = BE HIXX-2 = Value Code (61) HIXX-5 = Core Based Statistical Area (CBSA) Up to 24 value codes may be reported	Form Locators 39-41 Value Codes and Amounts
Ambulance Pick Up ZIP Code	2300 Claim Information Loop HI Value Information Segment HIXX-1 = BE HIXX-2 = Value Code (A0) HIXX-5 = ZIP Code	Form Locators 39-41 Value Codes and Amounts
Source of Referral for Admission (for Home Health Claims) (One alpha-numeric character indicating transfer or admission)	2300 Claim Information Loop CL1 Segment CL102	Form Locator 15 Point of Origin for Admission or Visit
Admitting Diagnosis Code	2300 Claim Information Loop HI Principal, Admitting, E-Code, and Patient Reason for Visit HI02-2	Form Locator 69 Admitting Diagnosis Code
Present On Admission (POA) Indicator	2300 Claim Information Loop K3 Segment	Form Locator 67 Principal Diagnosis Code and Present on Admission Indicator Form Locator 67A-Q Other Diagnosis Codes and Present on Admission

		Indicator Form Locator 72a-c External Cause of Injury (ECI) Code and Present on Admission Indicator Position 8 (for all)
HIPPS Code for Home Health, Skilled Nursing and Inpatient Rehabilitation	2400 Service Line Number SV2 Segment SV202-1 = ZZ SV202-1	Form Locator 44 HCPCPS/Accommodation Rates/HIPPS Rate Codes

Professional Claims

Data Element	837 Professional 004010A1[3]	CMS 1500[4]
Billing Provider National Provider Identifier	2010AA Billing Provider Name Loop NM1 Segment NM109	Item Number 33a
Service Location ZIP Code (if different than Billing Provider ZIP Code)	If services occur at primary location: 2010AA Billing Provider Loop N4 Segment N403 If services occur at a secondary location: 2310D Service Facility Name N4 Segment N403	If services occur at primary location: Item Number 33 3rd Line If services occur at a secondary location: Item Number 32 3rd Line
Height and Weight for ESRD Patients	Weight: If the subscriber is the patient: 2000B Subscriber Hierarchical Level PAT Segment PAT08 If a dependent is the patient: 2000C Patient Hierarchical Level PAT Segment PAT08 Height: Not Applicable	Item Number 19 Reserved for Local Use
Ambulance Pick Up ZIP Code	2310D Service Facility Name N4 Segment N403	Item Number 32