

Alaska Medical Assistance

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Remittance Advice (RA) Message

Title: Billing Instructions for the UB-04 Claim Form Now Available

Issue Date: 09/30/2015 Run Length: 8 weeks

Provider Type(s): 001, 002, 003, 005, 008, 010, 012, 028, 051, 056, 059, 060, 062, 112

Message: An updated set of billing instructions for the UB-04 claim form is now available on the

billing manuals bookshelf at http://manuals.medicaidalaska.com and through Health Enterprise at http://manuals.medicaidalaska.com/docs/ProviderReference.html. This

document is intended to provide Alaska Medicaid-specific instructions and

clarifications for completion of the UB-04 claim form. It is to be used as a companion to, and not a replacement for, the UB-04 Data Specifications Manual, available from

the National Uniform Billing Committee at http://www.nubc.org/.

Questions? Please contact Provider Inquiry at 907.644.6800, option 1, 1, or toll-free

in Alaska at 800.770.5650, option 1, 1, 1.