

## Place of Service Codes for Professional Claims

*Database (updated November 1, 2009)*

Listed below are place of service codes and descriptions. These codes should be used on professional claims to specify the entity where service(s) were rendered. Check with individual payers (e.g., Medicare, Medicaid, other private insurance) for reimbursement policies regarding these codes. If you would like to comment on a code(s) or description(s), please send your request [toposinfo@cms.hhs.gov](mailto:toposinfo@cms.hhs.gov).

Place of Service Code(s)	Place of Service Name	Place of Service Description
01	Pharmacy* *	A facility or location where drugs and other medically related items and services are sold, dispensed, or otherwise provided directly to patients.
02	Unassigned	N/ A
03	School	A facility whose primary purpose is education.
04	Homeless Shelter	A facility or location whose primary purpose is to provide temporary housing to homeless individuals (e.g., emergency shelters, individual or family shelters).
05	Indian Health Service Free-standing Facility	A facility or location, owned and operated by the Indian Health Service, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services to American Indians and Alaska Natives who do not require hospitalization.
06	Indian Health Service Provider-based Facility	A facility or location, owned and operated by the Indian Health Service, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services rendered by, or under the supervision of, physicians to American Indians and Alaska Natives admitted as inpatients or outpatients.
07	Tribal 638 Free-standing Facility	A facility or location owned and operated by a federally recognized American Indian or Alaska Native tribe or tribal organization under a 638 agreement, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services to tribal members who do not require hospitalization.
08	Tribal 638 Provider-based Facility	A facility or location owned and operated by a federally recognized American Indian or Alaska Native tribe or tribal organization under a 638 agreement, which provides diagnostic, therapeutic (surgical and non-surgical), and rehabilitation services to tribal members admitted as inpatients or outpatients.

# Place Of Service Codes For Cms 15

**Elsevier Inc,Jackie Koesterman**

A red circular graphic with a gradient, appearing as a partial circle or a stylized arrow pointing to the right, located to the right of the text bar.

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*Kinn's The Medical Assistant* Deborah B. Proctor, Brigitte Niedzwiecki, Julie Pepper, Payel Madero, Marti Garrels, Helen Mills, 2016-05-04 Comprehensive Medical Assisting begins with Kinn Elsevier s 60th Anniversary edition of Kinn s The Medical Assistant 13th Edition provides you with real world administrative and clinical skills that are essential to working in the modern medical office An applied learning approach to the MA curriculum is threaded throughout each chapter to help you further develop the tactile and critical thinking skills necessary for working in today s healthcare setting Paired with our adaptive solutions real world simulations EHR documentation and HESI remediation and assessment you will learn the leading skills of modern administrative and clinical medical assisting in the classroom Basics of Diagnostic Coding prepares you to use the ICD 10 coding system Learning objectives listed in the same order as content makes it easy to review material Clinical procedures integrated into the TOC give you a quick reference point Professional behavior boxes provide guidelines on how to interact with patients families and coworkers Patient education and legal and ethical issues are described in relation to the Medical Assistant s job Applied approach to learning helps you use what you ve learned in the clinical setting Learning objectives and vocabulary with definitions highlight what s important in each chapter Critical thinking applications test your understanding of the content Step by step procedures explain complex conditions and abstract concepts Rationales for each procedure clarify the need for each step and explains why it s being performed Portfolio builder helps you demonstrate your mastery of the material to potential employers NEW Chapter on The Health Record reviews how you ll be working with a patient s medical record NEW Chapter on Technology in the Medical Office introduces you to the role EHR technology plays in the medical office NEW Chapter on Competency Based Education helps you understand how your mastery of the material will affect your ability to get a job NEW Clinical procedure videos helps you visualize and review key procedures

**Acute and Chronic Wounds - E-Book** Ruth Bryant, Denise Nix, 2023-05-18 Acute Telehealth and Wound Management Quality Tracking Across the Continuum and Medications and Phytotherapy Impact on Wounds provide evidence based coverage of these important topics

UPDATED Consolidated pressure injuries content puts everything you need to know into one chapter Expanded full color insert includes 50 new images for a total of 95 color plates with more than 160 images that visually reinforce key concepts New information presents the latest developments in biofilm assessment and management topical oxygen therapy skin manifestations related to COVID 19 and strategies to enhance engagement as well as updated product photos and more authors who are clinical experts and providers

**Buck's Coding Exam Review 2025 - E-BOOK** Elsevier Inc, Jackie Koesterman, 2025-01-02 Prepare to succeed on your coding certification exam with Buck's Coding Exam Review 2025 The Physician and Facility Certification Step This extensive exam review provides complete coverage of all topics included on the physician and facility coding certification exams including anatomy terminology and pathophysiology for each body system reimbursement issues CPT HCPCS and ICD 10 CM PCS coding and more Six full practice exams with answers and rationales simulate the testing experience and provide enough practice to reassure even the most insecure exam taker It's the only coding exam review you need NEW Updated content features the latest coding information available promoting accurate coding and success on the job NEW Revised exams mimic the latest format changes to best simulate the exam experience Six full practice exams on the Evolve companion website simulate the experience of taking the actual coding certification exams allowing you to assess your strengths and weaknesses in order to develop a plan for focused study Full coverage and exam prep for facility and physician coding Coverage reflects the latest changes to the CPT E/M guidelines for office and other outpatient codes Answers and rationales to questions on the practice exams let you check your work Concise outline format helps you access key information quickly and study more efficiently Mobile optimized quick quizzes offer on the go practice with more than 350 medical terminology pathophysiology CPT HCPCS and ICD 10 CM questions Real life coding reports simulate the reports that you will encounter on the job and challenge you to apply key coding principles to actual cases Test taking tips in the Success Strategies section guide you step by step through the entire exam process

**Federal Register**, 2013-02

**Telemedicine in the ICU** Matthew A. Koenig, 2019-04-25 This text provides a concise yet comprehensive overview of telemedicine in the ICU The first part of the book reviews common issues faced by practitioners and hospital administrators in implementing and managing tele ICU programs including the merits of different staffing models the challenges of building homegrown programs versus contracting for services and the impact of state laws and payer policies on reimbursement for tele ICU services The second part of the book presents the current state of evidence for and against ICU telemedicine based on clinical trials before and after implementation studies and observational data The third part dives deeper into specific use cases for telemedicine in the ICU including telestroke pediatric and cardiac intensive care and early treatment of declining patients with sepsis Written by experts in the field Telemedicine in the ICU is a practical guide for intensive care physicians and hospital administrators that provides all the information necessary in building and maintaining a successful tele ICU program

**The Massachusetts register**, 2003

**Compliance for Coding, Billing &**

**Reimbursement** Duane C. Abbey, James H. Handwerk, Mark J. Kaiser, 2008-04-02 While the vast majority of providers never intend to commit fraud or file false claims complex procedures changing regulations and evolving technology make it nearly impossible to avoid billing errors For example if you play by HIPAA's rules a physician is a provider however Medicare requires that the same physician must be referred to as a supplier Even more troubling is the need to alter claims to meet specific requirements that may conflict with national standards Far from being a benign issue differing guidelines can lead to false claims with financial and even criminal implications Compliance for Coding Billing Reimbursement Second Edition A Systematic Approach to Developing a Comprehensive Program provides an organized way to deal with the complex coding billing and reimbursement CBR processes that seem to force providers to choose between being paid and being compliant Fully revised to account for recent changes and evolving terminology this unique and accessible resource covers statutorily based programs and contract based relationships as well as ways to efficiently handle those situations that do not involve formal relationships Based on 25 years of direct client consultation and drawing on teaching techniques developed in highly successful workshops Duane Abbey offers a logical approach to CBR compliance Designed to facilitate efficient reimbursements that don't run afoul of laws and regulations this resource Addresses the seven key elements promulgated by the OIG for any compliance program Discusses numerous types of compliance issues for all type of healthcare providers Offers access to online resources that provide continually updated information Cuts through the morass of terminology and acronyms with a comprehensive glossary Includes downloadable resources packed with regulations and information In addition to offering salient information illustrated by case studies Dr Abbey provides healthcare providers and administrators as well as consultants and attorneys with the mindset and attitude required to meet this very real challenge with savvy humor and perseverance

**Code of Federal Regulations**, 2003 **Code of Federal Regulations, Title 42, Public Health, Pt. 414-429, Revised as of October 1 2007** United States, 2008-02 Special edition of the Federal Register containing a codification of documents of general applicability and future effect with ancillaries *Code of Federal Regulations, Title 42, Public Health, Pt. 414-429, Revised as of October 1, 2009* Office of the Federal Register, 2010-02-18

**Reference Guide for Medicare Physician & Supplier Billers**, 2004 **Health Care Finance and the Mechanics of Insurance and Reimbursement** Michael K. Harrington, 2023-11-06 Health Care Finance and the Mechanics of Insurance and Reimbursement combines financial principles unique to the health care setting with the methods and process for reimbursement including coding reimbursement strategies compliance financial reporting case mix index and external auditing It explains the revenue cycle correlating it with regular management functions and covers reimbursement from the initial point of care through claim submission and reconciliation Updated throughout the Third Edition offers expanded material on financial statements new and expanded Skilled Nursing Facility examples and enhanced sections on PDPM Practice Management for Primary Care and other Specialties Clearinghouse Processes Predictive Modeling data mining and

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**The New Face of Evaluation and Management** Kellie Hall,2025-06-30 Physicians want to care for patients not spend their time documenting in an electronic medical record Physicians are always complaining about the amount of time they spend documenting patient care in support of medical billing through an evaluation and management coding system E M New guidelines were created to lessen the time a physician provider spends on documentation as many of the mandatory elements are no longer a requirement for calculating a code level Previously an E M evaluation and management note

required documentation of history exam and medical decision making with required elements in each component to support a level for payment. If an element was missing the level of service was not supported therefore the code was lowered resulting in a lower reimbursement for the physician provider. The new guidelines eliminated the requirement of History and Exam as part of the calculation of a code level. Yes an appropriate history and exam are required this supports good patient care but when it comes to reimbursement they are no longer part of the picture. The overall system is not difficult if time is taken to understand the elements and how they are applied in the documentation. Documentation is a word game always has been the authors focus is to show what words to use to lessen the time but still convey the complexity of the patient's condition and how the physician provider determines a treatment plan which includes the risk to the patient to satisfy the Coding guidelines initiated by Medicare and American Medical Association. This book evaluates the new guidelines and brings them into perspective so physicians providers coders can easily understand how to document and calculate the level of service for reimbursement. This is not a cumbersome book or complicated but straight to the point. The main goal of the book is to educate physicians nurses and coders on what documentation is really required and what has just become habit over the last 30 years. Medicare and Medicaid Guide ,1969



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