Hospice - UB-04 Sample Claim

APPROVED OMB NO. 0938-0279

ST 11943 1PLY UB-04

1	2	3a PAT. CNTL#	4 TYPE OF BILL
Anytown Hospice 1 Maple Avenue Anytown, NY 11111-1111		AB1234567 b. MED. REC #	810
		5 FED. TAX NO.	6 STATEMENT COVERS PERIOD FROM 04012007 THROUGH 04302007

8 PATIENT NAME	9 PATIENT ADDRESS
b SMITH, WILLIAM	

10 BIRTHDATE	11 SEX	12 ADMISSION DATE	13 HR	14 TYPE	15 SRC	16 DHR	17 STAT	18	19	20	21	22	23	24	25	26	27	28	29 ACDT STATE	30
04191940	M						30													

	31 OCCURRENCE CODE	31 DATE	32 CODE	32 DATE	33 CODE	33 DATE	34 CODE	34 DATE	35 CODE	35 SPAN FROM	35 SPAN THROUGH	36 CODE	36 SPAN FROM	36 SPAN THROUGH	37
a															a
b															b

38

	39 CODE	39 VALUE CODES AMOUNT	40 CODE	40 VALUE CODES AMOUNT	41 CODE	41 VALUE CODES AMOUNT
a	61	003.	24	3945.	23	400.00
b	A3	00.00	80	30.		.
c		.		.		.
d		.		.		.

	42 REV CD	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE	45 SERV. DATE	46 SERV. UNITS	47 TOTAL CHARGES	48 NON-COVERED CHARGES	49
1	0001					3000.00	.	1
2						.	.	2
3						.	.	3
4						.	.	4
5						.	.	5
6						.	.	6
7						.	.	7
8						.	.	8
9						.	.	9
10						.	.	10
11						.	.	11
12						.	.	12
13						.	.	13
14						.	.	14
15						.	.	15
16						.	.	16
17						.	.	17
18						.	.	18
19						.	.	19
20						.	.	20
21						.	.	21
22						.	.	22
23		PAGE ___ OF ___	CREATION DATE		TOTALS	.	.	23

	50 PAYER NAME	51 HEALTH PLAN ID	52 REL INFO		53 ASG BEN.	54 PRIOR PAYMENTS	55 EST. AMOUNT DUE	56 NPI	1234567890
A	Blue Cross					.	.	57 OTHER PRV ID	None
B	Medicaid					.	.		00123456
C						.	.		

	58 INSURED'S NAME	59 P.REL	60 INSURED'S UNIQUE ID	61 GROUP NAME	62 INSURANCE GROUP NO.
A			None		
B			AB12345C		
C					

	63 TREATMENT AUTHORIZATION CODES	64 DOCUMENT CONTROL NUMBER	65 EMPLOYER NAME
A			
B			
C			

66 DX	67	A	B	C	D	E	F	G	H	68
	I	J	K	L	M	N	O	P	Q	

69 ADMIT DX	70 PATIENT REASON DX	a	b	c	71 PPS CODE	72 ECI	a	b	c	73

74 PRINCIPAL PROCEDURE CODE	DATE	a OTHER PROCEDURE CODE	DATE	b OTHER PROCEDURE CODE	DATE	75

c OTHER PROCEDURE CODE	DATE	d OTHER PROCEDURE CODE	DATE	e OTHER PROCEDURE CODE	DATE

76 ATTENDING	NPI	QUAL	
LAST		FIRST	
77 OPERATING	NPI	QUAL	
LAST		FIRST	
78 OTHER	NPI	QUAL	
LAST		FIRST	
79 OTHER	NPI	QUAL	
LAST		FIRST	

80 REMARKS	81 CC	a		
		b		
		c		
		d		

UB-04 CMS-1450 @ 2005 NUBC

OMB APPROVAL PENDING

NUBC NATIONAL UNIFORM BILLING COMMITTEE LIC9213257

THE CERTIFICATIONS ON THE REVERSE APPLY TO THIS BILL AND ARE MADE A PART HEREOF.