

UB04 SAMPLE

2 Provider Name Physical Address City, ST Zip+4		3a PAT CNTL # b. MED. REC.#	4 TYPE OF BILL 131				
8 PATIENT NAME a		9 PATIENT ADDRESS a	5 FED. TAX NO. 6 STATEMENT COVERS PERIOD FROM 7/6/14 THROUGH 7/7/14 Passport#				
10 BIRTHDATE 11 SEX 12 DATE 13 HPI 14 TYPE 15 SRC 16 DHR 17 STAT 18 19 20 21 22 23 24 25 26 27 28 29 ACDT STATE 30		Member First Name Last Name b c d e					
In/Out multi ER visits 01 Condition Codes relate to copay overrides							
31 OCCURRENCE DATE 32 CODE 33 OCCURRENCE DATE 34 CODE 35 OCCURRENCE DATE 36 CODE 37 OCCURRENCE DATE 38 CODE Occurrence codes are used to denote events relating to the bill that may effect payer processing							
39 VALUE CODES CODE AMOUNT 40 VALUE CODES CODE AMOUNT 41 VALUE CODES CODE AMOUNT Value Codes and Amounts reflect Medicare Payment Information							
42 REV. CD.	43 DESCRIPTION	44 HCPCS / RATE / HIPPS CODE	45 SERV. DATE	46 SERV. UNITS	47 TOTAL CHARGES	48 NON-COVERED CHARGES	49
250			7/6/14	1	83.95		
260		96365	7/7/14	1	326.72		
260		96366	7/7/14	1	32.83		
260		96367	7/7/14	1	63.50		
301		80048	7/7/14	1	95.56		
301		82055	7/7/14	1	121.37		
306		87040	7/7/14	2	223.96		
306		87804	7/7/14	2	259.56		
320		71020 TC	7/7/14	1	209.83		
450		99284 25	7/7/14	1	687.39		
636	N4 63323047401 4 ML	J1630	7/7/14	4	159.30		
636	N4 50458016601 150 ML	J1956	7/6/14	3	75.95		
PAGE ____ OF ____		CREATION DATE 8/11/14		TOTALS			
50 PAYER NAME Possible TPL Payer		51 HEALTH PLAN ID 123456789	52 REL INFC	53 ASO BEN	54 PRIOR PAYMENTS 42.80	55 EST. AMOUNT DUE	56 NPI Billing NPI
58 INSURED'S NAME Member Name		59 P.F.E.L.	60 INSURED'S UNIQUE ID Member ID		61 GROUP NAME	62 INSURANCE GROUP NO.	
63 TREATMENT AUTHORIZATION CODES Prior Auth# PAs are required in order for certain services to be paid.			64 DOCUMENT CONTROL NUMBER		65 EMPLOYER NAME		
68 ICD-10 codes							
69 ADMIT DX	70 PATIENT REASON DX	71 PPS CODE	72 ECI	73	76 ATTENDING NPI 123456789 LAST Attending Last Name FIRST First Name		
74 PRINCIPAL PROCEDURE CODE	75 OTHER PROCEDURE CODE	76 OTHER PROCEDURE CODE	77 OTHER PROCEDURE CODE	78 OTHER CODE	79 OTHER CODE	80 REMARKS	81 OTHER CODE
80 REMARKS							82 OTHER CODE
Billing Taxonomy							83 OTHER CODE
B3 282N00000X							84 OTHER CODE