

Please refer to NUBC (National Uniform Billing Committee – UB-04 forms) for complete detailed information about paper claim submission” and refer to the 837 Institutional Implementation Guide by Washington Publishing Company (May 2006) for any EDI related issues.

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|---|--|---|------------------------|---|--|
| 1 Bill To Provider Name 456 Physical Location Rd Suite A Macon, GA 31201 | | 2 Pay To Provider Name PO Box 123 Macon, GA 31201 | | 3a PAT. CNTL # b MED REC # | 4 TYPE OF BILL |
| 8 PATIENT NAME | | 9 PATIENT ADDRESS | | 5 FED. TAX NO. 9 digit Federal Tax ID | 6 STATEMENT COVERS PERIOD FROM THROUGH |
| 51 | | 52 | | 37 | |
| 42 REV. CD. | | 43 DESCRIPTION | | 47 TOTAL CHARGES | 48 NON COVERED CHARGES |
| 50 PAYER NAME | | 51 HEALTH PLAN ID | 52 REL. INFO | 53 ASG. BEN. | 54 PRIOR PAYMENTS |
| 55 EST. AMOUNT DUE | | 56 NPI | | 57 OTHER | |
| 58 INSURED'S NAME | | 59 P. REL. | 60 INSURED'S UNIQUE ID | | |
| 63 TREATMENT AUTHORIZA | | 64 CONTROL N | | | |
| 66 DX | | 67 | | | |
| 69 ADMIT DX | | 70 | | | |
| 74 PRINCIPAL PROCEDURE | | 75 | | 76 ATTENDING | |
| 77 OPERATING | | 78 OTHER | | 79 OTHER | |
| 80 REMARKS | | 81CC | | 82 | |
| | | B3 282N00000X | | | |

Box 1
Paper- Bill To Provider should be billed as shown above in Box 1
 Bill To Provider is Required
 Address MUST BE the physical address services were rendered
 Address MAY NOT BE PO Box address
 EDI- Loop 2010AA

Box 2
Paper- Pay To Provider should be billed as shown above in Box 2
 Pay To Provider is only required if different from Bill To Provider
 Address should be the address to direct payment to
 Address MAY be a PO Box address if the Service Facility Location's
 or the Bill To Provider's address is a physical location
 EDI- Loop 2010AB

Box 5
Paper- Federal Tax ID is Required
 EDI- Loop 2010AA element REF02
 EDI Qualifier element REF01=EI

Box 43
NDC: National Drug Code
Paper- If the facility populates a NDC code – it must be a valid National Drug Code (NDC) – the code must be entered in Box 43. The "N4" qualifier should precede the 11 digit NDC code. No spaces or dashes are allowed.
EDI-
 Loop 2410
 Segment: LIN
 Element: N4 (5-4-2 data format)

Box 56
NPI
Paper- Billing Provider's NPI - required
 Paper – Box 56
 EDI- NPI - Loop 2010AA NM108 = XX NM109
Note: Billing Provider's Taxonomy code should be populated in 81CC a

Boxes 81CC a-d
Taxonomy Code:
Paper- Billing Provider's Taxonomy
 Paper- left column = 'B3'
 Paper- middle column= 10 character Taxonomy Code
EDI- Billing provider- Loop 2000A – PRV01 "B"
 PRV02 – "PXC" qualifier
 PRV03 = 10 character Taxonomy Code

Boxes 76, 77, 78 and 79
Attending/Operating/Other Name and NPI
Paper- Box 76- Attending Name and NPI are required
 Box 77- Operating Name and NPI are required when surgical procedures are billed-
 Box 78-79 If any of these boxes are populated then their NPI is required
EDI- Attending - Loop 2310A element NM108=XX NM109 – 10 digit NPI number
 Operating – Loop 2310B element NM108 = XX NM109 – 10 digit NPI number
 Other – Loop 2310C element NM108 = XX NM109 – 10 digit NPI number
Taxonomy Code:
 Loop 2310A - PRV01 "AT" PRV02 – "PXC" qualifier PRV03 = 10 character Taxonomy Code