

# 599 Field References

9/1/2004

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-01	1	RECORD TYPE "01"	Hard Code 01	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-02	2	SUBMITTER ID	Misys Customer Number	136, 1, Field 9) Customer number in 7.01 *Field 7) in 7.02	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-03	3	MULTI PROV BILLING EMC IND	Multiple Provider Indicator 1 = Single Provider 2 = Multiple Providers	None Zero fill -Per Kathy Samford, this should not be a required field and specs will be changed.	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-04	4	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-05	5	VENDOR APP CAT	Hard Code M	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-06	6	RECEIVER ID	Hard Code FASTCLAIM	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-07	7	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-08	8	SUBMITTER NAME	Submitter Name	136, 1, 1) Clinic Name	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-09	9	SUBMITTER ADDRESS	Submitter Address	136, 1, 3) Address line 1	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-10	10	SUBMITTER CITY	Submitter City	136, 1, 3) Address city	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-11	11	SUBMITTER STATE	Submitter State	136, 1, 3) Address state	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-12	12	SUBMITTER ZIP CODE	Submitter Zip Code	136, 1, 3) Address zip	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-13	13	SUBMITTER CONTACT	Submitter Contact	Claim format variable - Submitter Contact	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-14	14	SUBMITTER COUNTRY CODE	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-15	15	SUBMITTER TELEPHONE NO	Submitter Telephone Number	Claim format variable Submitter Phone	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-16	16	FILE SEQ / SERIAL NO	Transmission Sequence #	Claim format variable - Transmission sequence # -Use format julian date: yyddd + seq #	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-17	17	TEST / PROD IND	Test / Production Indicator TEST (Test) PROD (Production)	Claim format variable - Transmission mode	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-18	18	REVISION DATE	Software Revision Date	136, 1, 6) Revision Date (column 1 without the slashes)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-19	19	PROCESSING DATE	File Creation Date (ccyyymmdd)	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-20	20	VENDOR SW VERSION	Software Version Software version to be reported in positions 163-167 Software update to be reported in positions 168-171	Positions 163-167: 136, 1, 6) Rev Level (column#1 w/o the periods)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
01-21	21	VERSION CODE	Hard Code H60	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-01	1	RECORD TYPE "02"	Hardcode 02	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-02	2	BILLING PROV TAX ID	Provider Tax ID	<p>If Ins co File as PA = Y -&gt; 136, 1, field 5) Practice EIN or override file EIN</p> <p>If Ins co File as PA = N or D -&gt; Doctor File, field 3) EIN if filled (or EIN from Override file), If Doctor EIN blank then pull Doctor file field 6) SSN (or SSN from Override file).</p> <p>Note: ID override file field 14) File as PA = Y , N, or D should take priority over ins co File as a PA response</p> <p>If Ins Co file ? 38) print location as practice = Y then pull location file or Done at Location field 8) EIN. * If location EIN is blank, then id that would have been used if Print Location as practice was not = Y should be put in this field.</p> <p>UB92 screen field 1) Box 1 = L - Location EIN will override all of the above</p>	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-03	3	BILLING PROV TAX ID TYPE	Provider Tax ID Type 24 = EIN 34 = SSN	If EIN in Record 02 field 2 -> 24 IF SSN in Record 02 field 2 -> 34	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-04	4	TYPE OF BATCH	Batch Type Type of Bill is a three digit code requires 1 digit each in the following sequence: 1 Type of Facility 2 Bill Classification 3 - Frequency	1st UB92 edits screen, 4) Type of Bill	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-05	5	BILLING PROV NAME	Provider Name	<p>If File as PA = Y or N , 136, 1, field 1) Clinic Name or</p> <p>If File as PA = D , Doctor File, 2) Name or</p> <p>Note: ID Override file File as a PA response may override.</p> <p>ID Override file 15) Address override file field 2) Name or Location File or Done @ Loc 2) Name if ins co? 38 Print Location as Practice = Y or</p> <p>If UB92 screen field 1) Box 1 = L - Location name will override all of the above</p> <p>Note: / will always be removed</p>	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-06	6	BILLING PROV ADDRESS	Provider Address	<p>136, 1, 3) Address Line 1 or</p> <p>ID Override file 15) Address override line 1 or</p> <p>Location File or Done @ Loc 4) Address if ins co? 38 Print Location as Practice = Y or</p> <p>If UB92 screen field 1) Box 1 = L - Location address will override all of the above</p>	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-07	7	BILLING PROV CITY	Provider City	136, 1, 3) Address City or ID Override file 15) Address City Location File or Done @ Loc 4) City if ins co? 38 Print Location as Practice = Y or If UB92 screen field 1) Box 1 = L - Location city will override all of the above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-08	8	BILLING PROV STATE	Provider State	136, 1, 3) Address or ID Override file 15) Address State Location File or Done @ Loc 4) State if ins co? 38 Print Location as Practice = Y or If UB92 screen field 1) Box 1 = L - Location state will override all of the above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-09	9	BILLING PROV ZIP	Provider Zip Code	136, 1, 3) Address or ID Override file 15) Address Zip Location File or Done @ Loc 4) Zip if ins co? 38 Print Location as Practice = Y or If UB92 screen field 1) Box 1 = L - Location zip will override all of the above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-10	10	BILLING PROV NPI	Provider NPI	If File as PA = Y, 136, 1, field 14) Practice NPI or id override file 17) Practice NPI If File as PA = D or N, Doctor File, field 17) NPI. Note: ID Override file File as a PA response may override. Location File or Done @ Loc 13) NPI if ins co? 38 Print Location as Practice = Y or If UB92 screen field 1) Box 1 = L - Location NPI will override all of the above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-11	11	BILLING PROV SPECIALTY CODE	Provider Specialty	Charge entry field 3) Doctor Specialty or Charge entry field 5) Location Specialty if ins co? 38 Print Location as Practice = Y or If UB92 screen field 1) Box 1 = L 5) Location Specialty	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-12	12	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-13	13	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-14	14	PROCESS FROM DATE THIS FILE COVERS	Process From Date Comes from Remittance Advice for 2ndary filing	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-15	15	PROCESS THRU DATE THIS FILE COVERS	Process Through Date Comes from Remittance Advice for 2ndary filing	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-16	16	BILLING PROV CONTACT	Provider Contact	Claim format variable 6) Billing Provider Contact Name	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-17	17	BILLING PROV CONTACT PHONE	Provider Contact Telephone	136, 1, 4) Phone or if ID override 55) Pract. Override, 6) Phone	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-18	18	BILLING PROV 2ND ID QUAL	Provider 2nd ID Qual 0B = State License Number 1A = Blue Cross Provider Number 1B = Blue Shield Provider Number 1C = Medicare Provider Number 1D = Medicaid Provider Number 1G = Provider UPIN Number 1H = Champus ID Number 1J = Facility ID Number B3 = Preferred Provider Org Number BQ = HMO Code Number E1 = Employer's Identification Number FH = Clinic Number G2 = Provider Commercial Number G5 = Provider Site Number LU = Location Number SY = Social Security Number X5 = State Industrial Accident Provider Number	UB92 screen field 51A/51B/51C Qualifier, <input type="checkbox"/> Or If 51A/51B/51C blank pull Location File (or done at location) FACILITY id qualifier	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-19	19	BILLING PROV 2ND ID	Provider 2nd ID	UB92 Screen 51A/51B/51C Or If 51A/51B/51C blank, pull Location File (or done at location) FACILITY id	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
02-20	20	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-01	1	RECORD TYPE "10"	Hardcode 10	None	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-02	2	TYPE OF BATCH	Batch Type	1st UB92 Edits screen, 4)Type of Bill	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-03	3	BATCH NUMBER	Sequential Batch Number	None (Hard Coded)	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-04	4	PAY-TO PROV TAX ID	Provider Tax ID	<p>Only fill if response in field 16 of id override file.            If Ins co File as PA = Y -&gt; 136, 1, field 5) Practice EIN or override file            If Ins co File as PA = N or D -&gt; Doctor File, field 3) EIN if filled (or override file), If Doctor EIN blank then pull Doctor file field 6) SSN (or override file)            Note: ID override file field 14) File as PA = Y , N, or D should take priority over ins co File as a PA response            If Ins Co file ? 38) print location as practice = Y then pull location file or Done at Location field 8) EIN. * If location EIN is blank, then id that would have been used if Print Location as practice was not = Y should be put in this field.            UB92 screen field 1) Box 1 = L - Location EIN will override all of the above</p> <p>Note: should equal Record 95 field 2</p>	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-05	5	PAY-TO PROV TAX ID TYPE	Provider Tax ID Type 24 = EIN 34 = SSN	<p>Only fill if response in field 16 of id override file.            If RT 10 Field 4 filled with EIN, fill with 24.            If filled with SSN, fill with SSN.</p>	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-06	6	PAY-TO PROV NPI	Provider NPI	<p>Only fill if response in field 16 of id override file,            If File as PA = Y, 136, 1, field 14) Practice NPI or id override file            17) Practice NPI            If File as PA = D or N, Doctor File, field 17) NPI Location File or Done @ Loc 13) NPI if ins co? 38 Print Location as Practice = Y or            If UB92 screen field 1) Box 1 = L - Location NPI will override all of the above</p>	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-07	7	PAY-TO PROV 2ND ID	Provider 2nd ID	Only fill if response in field 16 of id override file. <input type="checkbox"/> UB92 Screen 51A/51B/51C Or If 51A/51B/51C blank, pull Location File (or done at location) FACILITY id	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-08	8	PAY-TO PROV 2ND ID QUAL	Provider 2nd ID Qual OB = State License Number 1A = Blue Cross Provider Number 1B = Blue Shield Provider Number 1C = Medicare Provider Number 1D = Medicaid Provider Number 1G = Provider UPIN Number 1H = Champus ID Number 1J = Facility ID Number B3 = Preferred Provider Org Number BQ = HMO Code Number E1 = Employer's Identification Number FH = Clinic Number G2 = Provider Commercial Number G5 = Provider Site Number LU = Location Number SY = Social Security Number X5 = State Industrial Accident Provider Number	Only fill if response in field 16 of id override file. UB92 screen field 51A/51B/51C Qualifier, <input type="checkbox"/> Or If 51A/51B/51C blank <input type="checkbox"/> pull Location File (or done at location file) FACILITY id qualifier	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-09	9	FILLER	Spaces	None	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-10	10	FILLER	Spaces	None	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-11	11	PAY-TO PROV PHONE	Provider Telephone Number	Only fill if response in field 16 of id override file. Fill with address override phone from id override file field 16	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-12	12	PAY-TO PROV NAME	Provider Name	Only fill if response in field 16 of id override file. Fill with address override name from id override file field 16  Note: / will always be removed	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-13	13	PAY-TO PROV ADDR	Provider Address	Only fill if response in field 16 of id override file.  Fill with address override address line 1 from id override file field 16	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-14	14	PAY-TO PROV CITY	Provider City	Only fill if response in field 16 of id override file.  Fill with address override city from id override file field 16	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-15	15	PAY-TO PROV STATE	Provider State	Only fill if response in field 16 of id override file.  Fill with address override state from id override file field 16	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-16	16	PAY-TO PROV ZIP	Provider Zip Code	Only fill if response in field 16 of id override file.  Fill with address override zip from id override file field 16	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-17	17	FILLER	Spaces	None	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-18	18	PAY-TO PROV COUNTRY CODE	Spaces	None	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-19	19	FILLER	Spaces	None	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
10-20	20	FILLER	Spaces	None	***The 10 record is only built if the ID override record has field 16) Remit address override # filled in.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-01	1	RECORD TYPE 20	Hardcode 20	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-02	2	ADMISSION MINUTES	Admission Time MM	1st UB92 edits screen, Minutes (MM) from field 18) TIME (HHMM)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-03	3	PATIENT CONTROL NUMBER	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1) *Patient # all other responses = claim number	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-04	4	PATIENT LAST NAME	Patient Last Name	Patient Demographics, 2) Name	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-05	5	PATIENT FIRST NAME	Patient First Name	Patient Demographics, 2) Name	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-06	6	PATIENT MIDDLE INITIAL	Patient Middle Initial	Patient Demographics, 2) Name	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-07	7	PATIENT SEX	Patient Sex M = Male F = Female U = Unknown, blank, None	Patient Demographics, 3) Sex M -> M F -> F U -> U N -> U O -> U	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-08	8	PATIENT BIRTHDATE	Patient Birthdate (ccyyymmdd)	Patient Demographics, 4) Birthdate	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-09	9	PATIENT MARITAL STATUS	Patient Marital Status S = Single M = Married X = Legally Separated D = Divorced W = Widowed U = Unknown	1st UB92 edits screen, 16) MS (reported as is) or Patient Demographics, 105)*Marital status As follows: 1 = S, 2 = M, 3 = U; 4 = W, 5 = D, 6 = X, all others = U	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-10	10	TYPE OF ADMISSION	Admission Priority Code 1 = Emergency 2 = Urgent 3 = Elective 4 = Newborn	1st UB92 edits screen, 19) TYPE	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-11	11	SOURCE OF ADMISSION	Source of Admission code 1 = Physician Referral 2 = Clinical Referral 3 = HMO Referral 4 = Transfer from a Hospital 5 = Transfer from a SNF 6 = Transfer from Another Health Care Facility 7 = Emergency Room 8 = court/Law Enforcement 9 = Information not Available	1st UB92 edits screen, 20) SRC	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-12	12	PATIENT ADDRESS LINE 1	Patient Address Line 1	Patient Demographics, 13) Patient Address or Patient Demographics, 12) Guarantor Address	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-13	13	PATIENT ADDRESS LINE 2	Patient Address Line 2	Patient Demographics, 13) Patient Address or 12) Guarantor Address	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-14	14	PATIENT CITY	Patient City	Patient Demographics, 13) Patient Address or 12) Guarantor Address	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-15	15	PATIENT STATE	Patient State	Patient Demographics, 13) Patient Address or 12) Guarantor Address	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-16	16	PATIENT ZIP CODE	Patient Zip Code	Patient Demographics, 13) Patient Address or 12) Guarantor Address	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-17	17	ADMISSION/START OF CARE DATE	Admission / Start of Care Date	Charge Entry, 6) Dates: Admission	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-18	18	ADMISSION HOUR	Admission Time HH	1st UB92 edits screen, Hour (HH) from field 18) TIME (HHMM)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-19	19	STATEMENT FROM DATE	Beginning Service Date (ccyymmdd)	Charge Entry, From Date of Service (earliest From Date of Service on the ticket)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-20	20	STATEMENT THRU DATE	Ending Service Date (ccyymmdd)	Charge Entry, To Date of Service (latest To Date of Service on the ticket)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-21	21	PATIENT STATUS	Patient Status at Ending Service Date	1st UB92 edits screen, 22) STAT	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-22	22	DISCHARGE TIME	Discharge Time HHMM	1st UB92 edits screen, 21) D TIME	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-23	23	PAYMENTS RECEIVED (PATIENT LINE)	Patient Payment Amount	1st UB92 edits screen, 54D) Prior Payments P = user-entered % of total claim D = user-entered dollar amount C = patient paid from Charge Entry Submenu, <input type="checkbox"/> Receipt Entry or Charge Entry Submenu, 12) Enter pat paid amount or Change a Charge, 21) Pat Paid (For the C option to work, ins screen field 21 Ins Pay Option must = 2 or 6)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-24	24	ESTIMATED AMOUNT DUE (PATIENT LINE)	Estimated Amount Due from Patient	1st UB92 edits screen, 55D) Est Amount Due P = user-entered % of total claim D = user-entered dollar amount C = the sum of Receipt Entry, 7) Co-ins + Receipt Entry, 6) Deductible - Pat Paid amount depending upon Ins Co File, 21) Ins pay option (Pat paid will = ins option i.e. For option 5 pat paid will = ins payment + write off, For option 6 pat paid will = ins payment + write off + pat paid)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-25	25	MEDICAL RECORD NUMBER	Provider's Patient Account Number	1st UB92 edits screen, 3) Pat Control # P = claim number all other responses = Patient Demo, 1)*Patient #	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
20-26	26	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-01	1	RECORD TYPE 21	Hardcode 21	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-02	2	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-03	3	PATIENT CONTROL NUMBER	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1) Patient # all other responses = claim number	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-04	4	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-05	5	PATIENT PRIMARY ID	Patient Insurance ID	From Patient Id Information , Field 37, 57, or 77 based on if filing insurance coverage 1, 2, or 3 If id format 9, field 36 first id If id format 11, field 36 contract If id format 13, field 36 con # If id format 10, Medicaid id If id format 15, Contract #	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-06	6	PATIENT 2ND ID	Patient Insurance ID	From Patient Id Information , Field 37, 57, or 77 based on if filing insurance coverage 1, 2, or 3 If id format 9, field 36 Second id If id format 11, field 36 Group If id format 13, field Group # If id format 10, not filled If id format 15, not filled	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-07	7	PATIENT 2ND ID QUAL <input type="checkbox"/> Required if field #6 is filled	Patient ID Qualifier 1W = Member Identification Number 23 = Client Number IG = Insurance Policy Number SY = Social Security Number	Hard coded 1W (Only fill if field 6 is filled.)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-08	8	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-09	9	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-09	9	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-10	10	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-11	11	RESP PARTY NAME	Responsible Party Name positions 109-123 (15 bytes) last name positions 124-131 (8 bytes) first name position 132 (1 byte) middle initial	Patient File, 8) Guar	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-12	12	RESP PARTY ADDR	Responsible Party Address	Patient File, 12) Address Line 1	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-13	13	RESP PARTY CITY	Responsible Party City	Patient File, 12) Address (City)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-14	14	RESP PARTY STATE	Responsible Party State	Patient File, 12) Address (State)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-15	15	RESP PARTY ZIP	Responsible Party Zip Code	Patient File, 12) Address (Zip)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-16	16	INS EMPLOYMENT STATUS CODE	Patient Employment Status 1 = Employed full time 2 = Employed part time 3 = Not employed 4 = Self-employed 5 = Retired 6 = On active military duty 9 = unknown	Patient file, 112) Employ Status 1 - Full-time -> 1 2 - Part-time -> 2 3 - Not Employed -> 3 4 Self -> 4 5 Retired -> 5 6 - Active Duty -> 6 9 Unknown -> 9 Blank -> 9	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-16	16	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
21-17	17	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-01	1	RECORD TYPE "30"	Hardcode 30	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-02	2	SEQUENCE NO.	Record 30 Sequence Number 01 = Primary payer 02 = Secondary payer 03 = Tertiary payer	None (Hard coded)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1) *Patient # all other responses = claim number	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-04	4	SOURCE OF PAY	Source of Payment Code A = Self Pay B = Workers' Compensation C = Medicare D = Medicaid E = Other federal programs (BCBS FEP) F = Commercial Insurance companies G = Blue Cross and Blue Shield H = Champus Z = Other P = Blue Cross ??? K = Central Certification 11 = Other Non-Federal Programs 12 = Preferred Provider Organization (PPO) 3 = Point of Service (POS) 14 = Exclusive Provider Organization (EPO) 15 = Indemnity Insurance 16 = Health Maint Org (HMO) Medicare Risk AM = Automobile Medical DS = Disability HM Health maintenance Organization (HMO) LI = Liability LM = Liability Medical T = Title V V = Veteran Administration Plan	Insurance Company File, 6) Filing Indicator Filing Indicator 1 p 'G' Filing Indicator 2 p 'C' Filing Indicator 3 p 'D' Filing Indicator 4 p 'F' Filing Indicator 5 p 'H' Filing Indicator 6 p 'E' Filing Indicator 7 p 'AM' Filing Indicator 8 p 'B' Filing Indicator 9 p 'HM' Filing Indicator 10 p 'K' Filing Indicator 11 p '11' Filing Indicator 12 p '12' Filing Indicator 13 p '13' Filing Indicator 14 p '14' Filing Indicator 15 p '15' Filing Indicator 16 p '16' Filing Indicator 17 p 'LI' Filing Indicator 18 p 'LM' Filing Indicator 19 p 'Z' Filing Indicator 20 p 'A' Filing Indicator 21 p 'T' Filing Indicator 22 p 'V' Filing Indicator 23 p 'DS' If filing indicator blank, use insurance type: 1 -> G 2 -> C 3 -> D 4 -> F 5 -> H 6 -> E 7 -> D 8 -> B 9 -> HM	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-05	5	PAYER PRIMARY ID	Insurance Company Payer Code	Medigap id from crossover file field 7 or Insurance Company File, 11) Ins co id's (updated w/NPI when implemented)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-06	6	INSURED PRIMARY ID	Subscriber ID	Patient Demographics, 31) 51) 71) If id format 9, First id If id format 11, Contract If id format 13, Con # If id format 10, Medicaid id If id format 15, Contract #	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-07	7	PROV/SUPPLIER SIG IND	Provider Signature Indicator Y = Provider's signature is on file N = Provider's signature is not on file	Doctor file 9) Dr signature on file Position 1 = Y -> Y All others -> N	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-08	8	PAYER NAME	Insurance Company Name	Patient File, 20) 40) 60) Ins Co	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-09	9	CLAIM FILING IND	Claim Filing Indicator P = Payment requested of payer I = Informational claim only	Hardcode P for current coverage; I for otherwise	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-10	10	MEDICARE ASSIGN CODE	Medicare Assignment Code A = Assigned C = Not Assigned	Charge entry Benefit Assignment (BA) If BA = Y, we should transmit A If BA = N, we should transmit C If BA = A, we should transmit A If BA = B, we should transmit C (Coverage with BA = D would not be transmitted)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-11	11	GROUP NO	Subscriber Insurance ID Number	Patient Demographics, 31) 51) 71) If id format 9, Second id If id format 11, Group If id format 13, Group # If id format 10, not filled If id format 15, not filled	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-12	12	GROUP NAME	Insurance Company Group Name	1st UB92 edits screen, 61A) 61B) 61C) Group Name Employer File, 2) Name 1 = Group Name 2 = Employer Name all other responses = blank	or

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-13	13	INSURED LAST NAME	Subscriber Last Name	Patient Demographics, 21), 41), 61) Subscriber	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-14	14	INSURED FIRST NAME	Subscriber First Name	Patient Demographics, 21), 41), 61) Subscriber	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-15	15	INSURED MI	Subscriber Middle Initial	Patient Demographics, 21), 41), 61) Subscriber	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-16	16	INSURED SEX	Subscriber Sex M = Male F = Female U = Unknown, Unknown Medical Condition, None	Patient Demographics, 22) 42) 62) Sex If value in file = blank, populate with U If value in file = F, populate with F If value in file = M, populate with M If value in file = U, populate with U If value in file = O, populate with U If value in file = N, populate with U	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-17	17	REL OF INFO IND	Release of Information Indicator A = Appropriate Release of Information on File at Health Care Service Provider or at Utilization review Organization I = Informed consent to Release Medical Information for Conditions or Diagnoses Regulated by Federal Statues M = The provider has limited or Restricted Ability to release Data related to a claim. N = no provider is not allowed to release data O = On file at Payor or at Plan Sponsor Y = yes, provider has signed statement permitting release of Medical Billing Data related to a claim	1st UB92 Screen fields 52A/52B/52C, if blank use Patient Demographics, 35) 55) 75) Release of Information Indicator if blank use 136, 7, 6) Sig on file med info? Y/N If release of info = N, claims should be listed on 599 exception report and should NOT be included in CLAIM599 file.	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-18	18	BENEFITS ASSIGN IND	Benefit Assignment Y = Yes N = No	Charge Entry Screen, B/A 10) 11) 12 b/a = 'D' b 'N' b/a = 'Y' b 'Y' b/a = 'A' b 'Y' b/a = 'N' b 'N' b/a = 'B' b 'N' (Coverage with BA = D would not be transmitted)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-19	19	PAT REL TO INSURED	Patient to Subscriber Relationship 01=Patient is insured 02 = Spouse 03 = Natural Child / Insured has fina resp 04 = Natural Child / Insured does not have financial responsibility 05 = Step Child 06 = Foster Child 07 = Ward of the court 08 = Employee 09 = Unknown pat's rel to insured is other than the indicated 10 = handicapped dependent 11 = Organ donar 12 = Cadaver donor 13 = Grandchild 14 = Niece / Nephew 15 = Injured Plaintiff 16 = Sponsored dependent 17 = Minor dependent of a minor dependent 18 = Parent 19 = Grandparent 21 = Adopted child 29 = Significant other 34 = Other adult 36 = Emancipated Minor 53 = Life Partner G8 = Other relationship	Patient File, 25) 45) 65) Pat Sub Relation response = 1, 2 '01' response = 3, 4 '02' response = 5, 6 '03' response = 7, 8 '10' response = 9 '09' response = 10 '34' response = 11 'G8' response = 30 '04' response = 31 '05' response = 32 '06' response = 33 '07' response = 34 '08' response = 35 '11' response = 36 '12' response = 37 '13' response = 38 '14' response = 39 '15' response = 40 '16' response = 41 '17' response = 42 '18' response = 43 '19' response = 44 '21' response = 45 '29' response = 46 '36' response = 47 '53'	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-20	20	EMPLOYMENT STATUS CODE	Employment Status Code If UB92-30-EMP-STAT-CODE = spaces, form #599 reports 0.	1st UB92 edits screen, 64A) 64B) 64C) ESC or if blank Patient Demographics Field 112) Employment Status 1 = Employed full-time -> 1 2 = Employed part time -> 2 3 = Not employed -> 3 4 = Self Employed -> 4 5 = Retired -> 5 6 = On active military duty -> 6 9 = unknown -> 9 Blank -> 9	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-21	21	COVERED DAYS	Covered Days If UB92-30-COVERED-DAYS = spaces, form #599 reports 000	1st UB92 edits screen, 7) COV D Note: only filled for sequence of 30 record for claim that is being filed.	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-22	22	NON-COVERED DAYS	Non-Covered Days If UB92-30-NON-COVERED-DAYS = spaces, form #599 reports 000	1st UB92 edits screen, 8) N-C D Note: only filled for sequence of 30 record for claim that is being filed.	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-23	23	CO-INS DAYS	Co-Insurance Days If UB92-30-COINS-DAYS = spaces, form #599 reports 000	1st UB92 edits screen, 9) C-I D Note: only filled for sequence of 30 record for claim that is being filed.	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-24	24	LIFETIME RESERVE DAYS	Lifetime Reserve Days If UB92-30-L-RES-DAYS = spaces, form #599 reports 000	1st UB92 edits screen 10) L-R D Note: only filled for sequence of 30 record for claim that is being filed.	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-25	25	FSPAYER ID	Fast Services Payer ID	Insurance Company File, field 69) Payer ID or Ins Co Plan File, field 18) Payer ID	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-26	26	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-27	27	PRIOR PAYMENT	Insurance Coverage Payment	1st UB92 edits screen, 54A/B/C Prior Payments D = user-entered dollar amount P = user entered % of total claim R = insurance paid amt as entered through the Insurance receipt entry menu (either # 1 or 2 option) B = insurance receipts + write offs **All options work in conjunction with ins company pay option (field 21)**	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
30-28	28	EST AMOUNT DUE	Estimated Amount Due	1st UB92 edits screen, 55A/B/C Est Amount Due D = user-entered dollar amount P = user-entered % of total claim	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-01	1	RECORD TYPE "31"	Hardcode 31	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-02	2	SEQUENCE NO	Record 31 Sequence Number 01 = Primary payer 02 = Secondary Payer 03 = Tertiary payer	None (Hard coded)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Patient Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-04	4	INSURED ADDR 1	Subscriber Address Line 1	Patient Demographics, 12) Guarantor Address Line 1	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-05	5	INSURED ADDR 2	Subscriber Address Line 2	Patient Demographics, 12) Guarantor Address Line 2	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-06	6	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-07	7	INSURED CITY	Subscriber City	Patient Demographics, 12) Guarantor Address (city)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-08	8	INSURED STATE	Subscriber State	Patient Demographics, 12) Guarantor Address (state)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-09	9	INSURED ZIP	Subscriber Zip Code	Patient Demographics, 12) Guarantor Address (zip)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-10	10	EMPLOYER NAME	Employer Name	1st UB92 edits screen, 65A) 65B) 65C) Employer = Y Patient file field 29/ 49/ 69 -> Employer File, 2) Name	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-11	11	EMPLOYER ADDR	Employer Address	1st UB92 edits screen, 65A) 65B) 65C) Employer = Y Patient file field 29/ 49/ 69 -> Employer File, 3) Address (Line 1)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-12	12	EMPLOYER CITY	Employer City	1st UB92 edits screen, 65A) 65B) 65C) Employer = Y Patient file field 29/ 49/ 69 -> Employer File, 3) Address (city)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-13	13	EMPLOYER STATE	Employer State	1st UB92 edits screen, 65A) 65B) 65C) Employer = Y Patient file field 29/ 49/ 69 -> Employer File, 3) Address (state)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-14	14	EMPLOYER ZIP	Employer Zip Code	1st UB92 edits screen, Y Patient file field 29/ 49/ 69 -> Employer File, 3) Address (zip)	65A) 65B) 65C) Employer =

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-15	15	ICN/DCN	Spaces	Insurance Receipt Entry Pay-by-Line, Original CRN #	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-16	16	PAYER 2ND ID QUAL	Additional Payer ID Qualifier 2U = Payer Identification Number FY = Claim Office Number NF = National Association of Insurance Commissioners (NAIC) Code TJ = Federal Taxpayer's Identification Number	Plan File, 20) Add'l Claim Payer ID Qualifier	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
31-17	17	PAYER 2ND ID	Additional Payer ID	Plan File, 19) Add'l Claim Payer ID	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-01	1	RECORD TYPE "32"	Hardcode 32	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-02	2	SEQUENCE NO	Record 32 Sequence Number 01 Primary payer 02 Secondary payer 03 Tertiary payer	None (Hard coded)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-04	4	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-05	5	PAYER STREET ADDR 1	Insurance Company Address	Insurance Company, 4) Address Line 1	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-06	6	PAYER STREET ADDR 2	Insurance Company Address	Insurance Company, 4) Address Line 2	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-07	7	PAYER CITY	Insurance Company City	Insurance Company, 4) Address City	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-08	8	PAYER STATE	Insurance Company State	Insurance Company, 4) Address State	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-09	9	PAYER ZIP	Insurance Company Zip Code	Insurance Company, 4) Address Zip Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-10	10	INSURED DATE OF BIRTH	Subscriber Date of Birth	Patient File, 23), 43), 63) Birthdate	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-11	11	INSURED 2ND ID	Subscriber 2nd ID	None (Space filled)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-12	12	INSURED 2ND ID QUAL	Subscriber 2nd ID Qualifier 1W = Member Identification Number 23 = Client Number IG = Insurance Policy Number SY = Social Security Number	None (Space filled)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-13	13	PROPERTY CASUALTY CLAIM NO	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
32-14	14	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-01	1	RECORD TYPE "34"	Hardcode 34	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-02	2	SEQUENCE NO	Record 34 Sequence Number 01 = Primary payer 02 = Secondary payer 03 = Tertiary payer	None (Hard coded)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-04	4	SERVICE AUTH EXCEPTION CODE	Service Auth Exception Code 0= None 1= Immediate / Urgent Care 2 = Services rendered in a Retroactive Period 3 = Emergency Care 4 = Client as Temporary Medicaid 5 = Request from County for Second Opinion to Recipient can Work 6 = Request for Override Pending 7 = Special Handling	Charge Entry, Additional Insurance Screen, 2) Service Authorization Code 0 -> space 1 -> 1 2 -> 2 3 -> 3 4 -> 4 5 -> 5 6 -> 6 7 -> 7	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-05	5	IDE NO	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-06	6	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-07	7	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-08	8	DELAY REASON CODE	Delay Reason Code 1 = Proof of Eligibility Unknown or Unavailable 2 = Litigation 3 = Authorization Delay 4 = Delay in Certifying Provider 5 = Delay in Supply Billing Forms 6 = Delay in Delivery of Custom-made Appliances 7 = Third Party Processing Delay 8 = Delay in Eligibility Determination 9 = Original Claim Rejected or Denied Due to a reason unrelated to the billing limitation rules 10 = Administration Delay in the Prior Approval Process 11 = Other	Charge Entry, Additional Insurance Screen, 11) Delay Reason Code	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-09	9	ATTACHMENT REPORT TYPE CODE	Attachment Report Type K = Admission Summary 2 = Prescription 3 = Physician Order 4 = Referral Form V = Certification L = Dental Models C = Diagnostic Report S = Discharge Summary B = EOB M = Models N = Nursing Notes D = Operative Notes O = Support Data for Claim P = Physical Therapy Notes I = Prosthetics or Orthotic Certification G = Physical Therapy Certification Q = Radiology Films R = Radiology Reports T = Report of Tests and Analysis Report	Charge Entry, Additional Insurance Screen, 3) Report Type Code	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-10	10	ATTACHMENT TRANSMISSION CODE	Attachment Transmission 3 = Available on request at provider site 1 = By Mail A = Electronically only E = E-Mail 2 = Fax	Charge Entry, Additional Insurance Screen, 4) Transmission Code	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-11	11	ATTACHMENT CONTROL NUMBER	Attachment Control Number	Charge Entry, Additional Insurance Screen, 5) Attach Control #	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-12	12	ATTACHMENT DESCRIPTION	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
34-13	13	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-01	1	RECORD TYPE "40"	Hardcode 40	None	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-02	2	SEQUENCE NO	Record 40 Sequence Number Valid Values: 01, 02, 03	None (Hard coded)	***Note: This record is only created for the coverage being filed.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	***Note: This record is only created for the coverage being filed.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-04	4	TYPE OF BILL	Bill Type Type of Bill is a three digit code requires 1 digit each in the following sequence: 1 Type of Facility 2 Bill Classification 3 - Frequency	1st UB92 edits screen, 4) Type of Bill	***Note: This record is only created for the coverage being filed.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-05	5	TREATMENT AUTH CODE	Prior Authorization	Charge Entry, 13 / 14/ 15 Prior Auth	***Note: This record is only created for the coverage being filed.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-06	6	TREATMENT REFERRAL CODE	Referral Number	Charge Entry, 13 / 14 / 15 Prior Auth if Referral Date is entered	***Note: This record is only created for the coverage being filed.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-07	7	FILLER	Spaces	None	***Note: This record is only created for the coverage being filed.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-08	8	OCCURRENCE CODE 1	1st Occurrence Code	2nd UB92 edits screen, 32A) Code	***Note: This record is only created for the coverage being filed.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-09	9	OCCURRENCE DATE 1	1st Occurrence Date (ccyyymmdd)	2nd UB92 edits screen, 32A) Date If Occurrence code 01-12 use charge Onset Date if occurrence date blank If Occurrence code 35, 40, or 45 use charge Admit Date if occurrence date blank If Occurrence code 42 use charge Discharge Date if occurrence date blank	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-10	10	OCCURRENCE CODE 2	2nd Occurrence Code	2nd UB92 edits screen, 33A) Code	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-11	11	OCCURRENCE DATE 2	2nd Occurrence Date (ccyymmdd)	2nd UB92 edits screen, 33A) Date If Occurrence code 01-12 use charge Onset Date if occurrence date blank If Occurrence code 35, 40, or 45 use charge Admit Date if occurrence date blank If Occurrence code 42 use charge Discharge Date if occurrence date blank	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-12	12	OCCURRENCE CODE 3	3rd Occurrence Code	2nd UB92 edits screen, 34A) Code	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-13	13	OCCURRENCE DATE 3	3rd Occurrence Date (ccyymmdd)	2nd UB92 edits screen, 34A) Date If Occurrence code 01-12 use charge Onset Date if occurrence date blank If Occurrence code 35, 40, or 45 use charge Admit Date if occurrence date blank If Occurrence code 42 use charge Discharge Date if occurrence date blank	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-14	14	OCCURRENCE CODE 4	4th Occurrence Code	2nd UB92 edits screen, 35A) Code	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-15	15	OCCURRENCE DATE 4	4th Occurrence Date (ccyymmdd)	2nd UB92 edits screen, 35A) Date If Occurrence code 01-12 use charge Onset Date if occurrence date blank If Occurrence code 35, 40, or 45 use charge Admit Date if occurrence date blank If Occurrence code 42 use charge Discharge Date if occurrence date blank	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-16	16	OCCURRENCE CODE 5	5th Occurrence Code	2nd UB92 edits screen, 32B) Code	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-17	17	OCCURRENCE DATE 5	5th Occurrence Date (ccyymmdd)	2nd UB92 edits screen, 32B) Date If Occurrence code 01-12 use charge Onset Date if occurrence date blank If Occurrence code 35, 40, or 45 use charge Admit Date if occurrence date blank If Occurrence code 42 use charge Discharge Date if occurrence date blank	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-18	18	OCCURRENCE CODE 6	6th Occurrence Code	2nd UB92 edits screen, 33B) Code	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-19	19	OCCURRENCE DATE 6	6th Occurrence Date (ccyymmdd)	2nd UB92 edits screen, 33B) Date If Occurrence code 01-12 use charge Onset Date if occurrence date blank If Occurrence code 35, 40, or 45 use charge Admit Date if occurrence date blank If Occurrence code 42 use charge Discharge Date if occurrence date blank	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-20	20	OCCURRENCE CODE 7	7th Occurrence Code	2nd UB92 edits screen, 34B) Code	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-21	21	OCCURRENCE DATE 7	7th Occurrence Date (ccyymmdd)	2nd UB92 edits screen, 34B) Date If Occurrence code 01-12 use charge Onset Date if occurrence date blank If Occurrence code 35, 40, or 45 use charge Admit Date if occurrence date blank If Occurrence code 42 use charge Discharge Date if occurrence date blank	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-22	22	OCCURRENCE SPAN CODE 1	1st Occurrence Span Code	2nd UB92 edits screen, 36A) Code	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-23	23	OCCURRENCE SPAN FROM DATE 1	1st Occurrence Span From Date (ccyymmdd)	2nd UB92 edits screen, 36A) From	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-24	24	OCCURRENCE SPAN THRU DATE 1	1st Occurrence Span Thru Date (ccyymmdd)	2nd UB92 edits screen, 36A) Through	***Note: This record is only created for the coverage being filed.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-25	25	OCCURRENCE SPAN CODE 2	2nd Occurrence Span Code	2nd UB92 edits screen, 36B) Code	***Note: This record is only created for the coverage being filed.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-26	26	OCCURRENCE SPAN FROM DATE 2	2nd Occurrence Span From Date (ccyymmdd)	2nd UB92 edits screen, 36B) From	***Note: This record is only created for the coverage being filed.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-27	27	OCCURRENCE SPAN THRU DATE 2	2nd Occurrence Span Thru Date (ccyymmdd)	2nd UB92 edits screen, 36B) Through	***Note: This record is only created for the coverage being filed.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
40-28	28	FILLER	Spaces	None	***Note: This record is only created for the coverage being filed.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-01	1	RECORD TYPE "41"	Hardcode 41	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-02	2	SEQUENCE NO	Record 41 Sequence Number Valid values: 01, 02, 03	None (Hard coded)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-04	4	CONDITION CODE 1	1st Occurrence Condition Code	2nd UB92 edits screen, 24)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-05	5	CONDITION CODE 2	2nd Occurrence Condition Code	2nd UB92 edits screen, 25)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-06	6	CONDITION CODE 3	3rd Occurrence Condition Code	2nd UB92 edits screen, 26)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-07	7	CONDITION CODE 4	4th Occurrence Condition Code	2nd UB92 edits screen, 27)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-08	8	CONDITION CODE 5	5th Occurrence Condition Code	2nd UB92 edits screen, 28)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-09	9	CONDITION CODE 6	6th Occurrence Condition Code	2nd UB92 edits screen, 29)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-10	10	CONDITION CODE 7	7th Occurrence Condition Code	2nd UB92 edits screen, 30)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-11	11	CONDITION CODE 8	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-12	12	CONDITION CODE 9	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-13	13	CONDITION CODE 10	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-14	14	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-15	15	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-16	16	VALUE CODE 1	1st Occurrence Value Code	2nd UB92 edits screen, 39A) Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-17	17	VALUE AMT 1	1st Occurrence Value Amount	2nd UB92 edits screen, 39A) Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group.	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-18	18	VALUE CODE 2	2nd Occurrence Value Code	2nd UB92 edits screen, 40A) Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-19	19	VALUE AMT 2	2nd Occurrence Value Amount	2nd UB92 edits screen, 40A) Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-20	20	VALUE CODE 3	3rd Occurrence Value Code	2nd UB92 edits screen, 41A) Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-21	21	VALUE AMT 3	3rd Occurrence Value Amount	2nd UB92 edits screen, 41A) Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-22	22	VALUE CODE 4	4th Occurrence Value Code	2nd UB92 edits screen, 39B) Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-23	23	VALUE AMT 4	4th Occurrence Value Amount	2nd UB92 edits screen, 39B) Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-24	24	VALUE CODE 5	5th Occurrence Value Code	2nd UB92 edits screen, 40B) Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-25	25	VALUE AMT 5	5th Occurrence Value Amount	2nd UB92 edits screen, 40B) Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-26	26	VALUE CODE 6	6th Occurrence Value Code	2nd UB92 edits screen, 41B) Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-27	27	VALUE AMT 6	6th Occurrence Value Amount	2nd UB92 edits screen, 41B) Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-28	28	VALUE CODE 7	7th Occurrence Value Code	2nd UB92 edits screen, 39C) Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-29	29	VALUE AMT 7	7th Occurrence Value Amount	2nd UB92 edits screen, 39C) Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-30	30	VALUE CODE 8	8th Occurrence Value Code	2nd UB92 edits screen, 40C) Code	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-31	31	VALUE AMT 8	8th Occurrence Value Amount	2nd UB92 edits screen, 40C) Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-32	32	VALUE CODE 9	9th Occurrence Value Code	2nd UB92 edits screen, 41C) Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-33	33	VALUE AMT 9	9th Occurrence Value Amount	2nd UB92 edits screen, 41C) Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-34	34	VALUE CODE 10	10th Occurrence Value Code	2nd UB92 edits screen, 39D) Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-35	35	VALUE AMT 10	10th Occurrence Value Amount	2nd UB92 edits screen, 39D)Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-36	36	VALUE CODE 11	11th Occurrence Value Code	2nd UB92 edits screen, 40D) Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-37	37	VALUE AMT 11	11th Occurrence Value Amount	2nd UB92 edits screen, 40D) Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-38	38	VALUE CODE 12	12th Occurrence Value Code	2nd UB92 edits screen, 41D) Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-39	39	VALUE AMT 12	12th Occurrence Value Amount	2nd UB92 edits screen, 41D) Amount If + in Opt field, total Value Code amts on a grouped ticket If the Opt field is blank, the amt should be taken from the head ticket in the group	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
41-40	40	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-01	1	RECORD TYPE "42"	Hardcode 42	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-02	2	SEQUENCE NO	Record 42 Sequence Number Valid values: 01 - 05	None (Hard coded)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-03	3	PAYER SEQUENCE	Payer Sequence Number Valid values: 01 through 05	None (Hard coded)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-04	4	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-05	5	GROUP CODE	Payment Adjustment Group Code CO = Contractual Obligations Reversals OA = Other Adjustments PI = Payer Initiated Reduction PR = Patient Responsibility	Receipt Entry Pay by line F1 Additional Info 3) First two positions of claim Reason Code Build one 42 record for each different Group Code Note: Invalid codes will be put in file if keyed.	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-06	6	REASON CODE 1	Adjustment Reason Code	Receipt Entry Pay by line F1 Add'l Info, 3) Next three digits after stripping any non-numeric characters or spaces, of Claim Reason Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-07	7	ADJUSTMENT AMT 1	Adjustment Amount	Receipt Entry Pay by line F1 Add'l Info, 3) Claim Reason Amount that corresponds to payment adjustment group code above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-08	8	ADJUSTMENT QTY 1	Adjustment Quantity	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-09	9	REASON CODE 2	Adjustment Reason Code	Receipt Entry Pay by line F1 Add'l Info, 3) Next three digits after stripping any non-numeric characters or spaces, of Claim Reason Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-10	10	ADJUSTMENT AMT 2	Adjustment Amount	Receipt Entry Pay by line F1 Add'l Info, 3) Claim Reason Amount that corresponds to payment adjustment group code above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-11	11	ADJUSTMENT QTY 2	Adjustment Quantity	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-12	12	REASON CODE 3	Adjustment Reason Code	Receipt Entry Pay by line F1 Add'l Info, 3) Next three digits after stripping any non-numeric characters or spaces, of Claim Reason Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-13	13	ADJUSTMENT AMT 3	Adjustment Amount	Receipt Entry Pay by line F1 Add'l Info, 3) Claim Reason Amount that corresponds to payment adjustment group code above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-14	14	ADJUSTMENT QTY 3	Adjustment Quantity	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-15	15	REASON CODE 4	Adjustment Reason Code	Receipt Entry Pay by line F1 Add'l Info, 3) Next three digits after stripping any non-numeric characters or spaces, of Claim Reason Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-16	16	ADJUSTMENT AMT 4	Adjustment Amount	Receipt Entry Pay by line F1 Add'l Info, 3) Claim Reason Amount that corresponds to payment adjustment group code above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-17	17	ADJUSTMENT QTY 4	Adjustment Quantity	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-18	18	REASON CODE 5	Adjustment Reason Code	Receipt Entry Pay by line F1 Add'l Info, 3) Next three digits after stripping any non-numeric characters or spaces, of Claim Reason Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-19	19	ADJUSTMENT AMT 5	Adjustment Amount	Receipt Entry Pay by line F1 Add'l Info, 3) Claim Reason Amount that corresponds to payment adjustment group code above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-20	20	ADJUSTMENT QTY 5	Adjustment Quantity	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-21	21	REASON CODE 6	Adjustment Reason Code	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-22	22	ADJUSTMENT AMT 6	Adjustment Amount	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-23	23	ADJUSTMENT QTY 6	Adjustment Quantity	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-24	24	MIA / MOA REMARK CODE 1	MIA / MOA Remark Code Required if returned via 835	Receipt Entry Pay by line F1 Add'l Info, 2) Claim Remark Codes Note: Only 5 remark codes available per claim so will get all remark codes on first occurrence of 42 record	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-25	25	MIA / MOA REMARK CODE 2	MIA / MOA Remark Code Required if returned via 835	Receipt Entry Pay by line F1 Add'l Info, 2) Claim Remark Codes	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-26	26	MIA / MOA REMARK CODE 3	MIA / MOA Remark Code Required if returned via 835	Receipt Entry Pay by line F1 Add'l Info, 2) Claim Remark Codes	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-27	27	MIA / MOA REMARK CODE 4	MIA / MOA Remark Code Required if returned via 835	Receipt Entry Pay by line F1 Add'l Info, 2) Claim Remark Codes	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-28	28	MIA / MOA REMARK CODE 5	MIA / MOA Remark Code Required if returned via 835	Receipt Entry Pay by line F1 Add'l Info, 2) Claim Remark Codes	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
42-29	29	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-01	1	RECORD TYPE "50"	Hardcode 50	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-02	2	SEQUENCE NO	Record 50 Sequence Number Valid values = 001 - 016	None (Hard coded)	***Note: We currently do not build this record.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-04	4	FILLER	Spaces	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-05	5	ACCOMMODATION REV CODE 1	Line Item Revenue Code	Procedure File, 11) Revenue Code If UB92 screen field 42 = A, print rev codes in ascending order If UB92 screen field 42 = blank, print rev codes in order they were entered in charge add	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-06	6	ACCOMMODATION RATE 1	Line Item Total Charge	Charge Entry, Unit Multiplied by Charge Entry, Chg/Unit	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-07	7	ACCOMMODATION DAYS 1	Line Item Units	1st UB92 edits screen, 46) Serv Units U = Charge Entry, Units D = # of days spanning grouped line items (Always 1)	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-08	8	ACCOMMODATION TOTAL CHG 1	Line Item Total Charge	Charge Entry, Unit Multiplied by Charge Entry, Chg/Unit	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-09	9	ACCOMMODATION NON COVERED CHG 1	Line Item Non-Covered Charge	1st UB92 edits screen, 48A) 48B) 48C) Non-Cov Chg Slot	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-10	10	FILLER	Spaces	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-11	11	ACCOMMODATION REV CODE 2	Line Item Revenue Code	Procedure File, 10) Rev ctr code If UB92 screen field 42 = A, print rev codes in ascending order If UB92 screen field 42 = blank, print rev codes in order they were entered in charge add	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-12	12	ACCOMMODATION RATE 2	Line Item Total Charge	Charge Entry, Unit Multiplied by Charge Entry, Chg/Unit	***Note: We currently do not build this record.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-13	13	ACCOMMODATION DAYS 2	Line Item Units	1st UB92 edits screen, 46) Serv Units U = Charge Entry, Units D = # of days spanning grouped line items (Always 1)	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-14	14	ACCOMMODATION TOTAL CHG 2	Line Item Total Charge	Charge Entry, Unit Multiplied by Charge Entry, Chg/Unit	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-15	15	ACCOMMODATION NON COVERED CHG 2	Line Item Non-Covered Charge	1st UB92 edits screen, 48A) 48B) 48C) Non-Cov Chg Slot	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-16	16	FILLER	Spaces	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-17	17	ACCOMMODATION REV CODE 3	Line Item Revenue Code	Procedure File, 10) Rev ctr code If UB92 screen field 42 = A, print rev codes in ascending order If UB92 screen field 42 = blank, print rev codes in order they were entered in charge add	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-18	18	ACCOMMODATION RATE 3	Line Item Total Charge	Charge Entry, Unit Multiplied by Charge Entry, Chg/Unit	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-19	19	ACCOMMODATION DAYS 3	Line Item Units	1st UB92 edits screen, 46) Serv Units U = Charge Entry, Units D = # of days spanning grouped line items (Always 1)	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-20	20	ACCOMMODATION TOTAL CHG 3	Line Item Total Charge	Charge Entry, Unit Multiplied by Charge Entry, Chg/Unit	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-21	21	ACCOMMODATION NON COVERED CHG 3	Line Item Non-Covered Charge	1st UB92 edits screen, 48A) 48B) 48C) Non-Cov Chg Slot	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-22	22	FILLER	Spaces	None	***Note: We currently do not build this record.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-23	23	ACCOMMODATION REV CODE 4	Line Item Revenue Code	Procedure File, 10) Rev ctr code If UB92 screen field 42 = A, print rev codes in ascending order If UB92 screen field 42 = blank, print rev codes in order they were entered in charge add	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-24	24	ACCOMMODATION RATE 4	Line Item Total Charge	Charge Entry, Unit Multiplied by Charge Entry, Chg/Unit	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-25	25	ACCOMMODATION DAYS 4	Line Item Units	1st UB92 edits screen, 46) Serv Units U = Charge Entry, Units D = # of days spanning grouped line items (Always 1)	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-26	26	ACCOMMODATION TOTAL CHG 4	Line Item Total Charge	Charge Entry, Unit Multiplied by Charge Entry, Chg/Unit	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-27	27	ACCOMMODATION NON COVERED CHG 4	Line Item Non-Covered Charge	1st UB92 edits screen, 48A) 48B) 48C) Non-Cov Chg Slot	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
50-28	28	FILLER	Spaces	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-01	1	RECORD TYPE "52"	Hardcode 52	None	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-02	2	SEQUENCE NO	Record 52 Sequence Number Valid values: 001 - 016	None (Hard coded)	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-03	3	PAYER SEQUENCE	Payer Sequence 01 = Primary payer 02 = Secondary payer 03 = Tertiary payer	None (Hard coded)	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-04	4	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-05	5	REVENUE CODE	Revenue Code	Procedure file 11) Revenue Code	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-06	6	GROUP CODE	Group Code CO = Contractual Obligations CR = Corrections and Reversals OA = Other Adjustments PI = Payer Initiated Reduction PR = Patient Responsibility	Receipt Entry Pay by line F1 Additional Info 3) First two positions of claim Reason Code Build one 52 record for each different Group Code	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-07	7	REASON CODE 1	Reason Code	Receipt Entry Pay by line F1 Add'l Info, 3) Next three digits after stripping any non-numeric characters or spaces, of Claim Reason Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-08	8	ADJUSTMENT AMT 1	Adjustment Amount	Receipt Entry Pay by line F1 Add'l Info, 3) Claim Reason Amount that corresponds to payment adjustment group code above	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-09	9	ADJUSTMENT QTY 1	Adjustment Quantity	None	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-10	10	REASON CODE 2	Reason Code	Receipt Entry Pay by line F1 Add'l Info, 3) Next three digits after stripping any non-numeric characters or spaces, of Claim Reason Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-11	11	ADJUSTMENT AMT 2	Adjustment Amount	Receipt Entry Pay by line F1 Add'l Info, 3) Claim Reason Amount that corresponds to payment adjustment group code above	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-12	12	ADJUSTMENT QTY 2	Adjustment Quantity	None	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-13	13	REASON CODE 3	Reason Code	Receipt Entry Pay by line F1 Add'l Info, 3) Next three digits after stripping any non-numeric characters or spaces, of Claim Reason Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-14	14	ADJUSTMENT AMT 3	Adjustment Amount	Receipt Entry Pay by line F1 Add'l Info, 3) Claim Reason Amount that corresponds to payment adjustment group code above	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-15	15	ADJUSTMENT QTY 3	Adjustment Quantity	None	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-16	16	REASON CODE 4	Reason Code	Receipt Entry Pay by line F1 Add'l Info, 3) Next three digits after stripping any non-numeric characters or spaces, of Claim Reason Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-17	17	ADJUSTMENT AMT 4	Adjustment Amount	Receipt Entry Pay by line F1 Add'l Info, 3) Claim Reason Amount that corresponds to payment adjustment group code above	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-18	18	ADJUSTMENT QTY 4	Adjustment Quantity	None	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-19	19	REASON CODE 5	Reason Code	Receipt Entry Pay by line F1 Add'l Info, 3) Next three digits after stripping any non-numeric characters or spaces, of Claim Reason Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-20	20	ADJUSTMENT AMT 5	Adjustment Amount	Receipt Entry Pay by line F1 Add'l Info, 3) Claim Reason Amount that corresponds to payment adjustment group code above	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-21	21	ADJUSTMENT QTY 5	Adjustment Quantity	None	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-22	22	REASON CODE 6	Reason Code	None	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-23	23	ADJUSTMENT AMT 6	Adjustment Amount	None	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-24	24	ADJUSTMENT QTY 6	Adjustment Quantity	None	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-25	25	REVENUE CODE SEQUENCE	Revenue Code Sequence Valid responses 1 - 4	Hard code to show which of the four occurrences of the revenue code on RT 50 is being referenced.	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-26	26	COB RECORD TYPE SEQUENCE	COB Record Sequence Valid responses 1 4	None	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
52-27	27	FILLER	Spaces	None	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-01	1	RECORD TYPE "59"	Hardcode 59	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-02	2	SEQUENCE NO	Record 59 Sequence Number Same as corresponding Record 50	None (Hard coded)	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-03	3	PAYER SEQUENCE	Payer Sequence 01 = Primary payer 02 = Secondary payer 03 = Tertiary payer	None (Hard coded)	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-04	4	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-05	5	SERVICE LINE PAID AMT	Service Lind Paid Amount	Receipt Entry Pay by line Line Item Payment	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-06	6	ADJ HCPCS PROC CODE	Adjudicated HCPCS Procedure Code Returned in remittance file	Charge Entry, Line Item, Procedure	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-07	7	ADJ PROC MOD 1	Adjudicated Procedure Modifier 1 Returned in remittance file	Charge Entry, Line Item, Modifier	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-08	8	ADJ PROC MOD 2	Adjudicated Procedure Modifier 2 Returned in remittance file	Charge Entry, Line Item, Modifier	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-09	9	ADJ PROC MOD 3	Adjudicated Procedure Modifier 3 Returned in remittance file	Charge Entry, Line Item, Modifier	***Note: We currently do not build this record.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-10	10	ADJ PROC MOD 4	Adjudicated Procedure Modifier 4 Returned in remittance file	Charge Entry, Line Item, Modifier	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-11	11	PROC CODE DESCRIPTION	Procedure Description Returned in remittance file	Procedure File, 2) Name *Ins co file field 40, Print proc name must be answered Y and field 44, Print vl comments must be answered Y.	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-12	12	ADJ REVENUE CODE	Adjudicated Revenue Code Returned in remittance file	Procedure File, 11) Revenue Code	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-13	13	PAID UNITS OF SVC	Paid Units Returned in remittance file	Charge Entry, Line Item, Units	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-14	14	LINE ADJ OR PAYMENT DATE	Payment Date (ccymmdd) Returned in remittance file	Receipt Entry, check date	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
59-15	15	FILLER	Spaces	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-01	1	RECORD TYPE "60"	Hardcode 60	None	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-02	2	SEQUENCE NO	Record 60 Sequence Number Start with 001 and increment by 001	None (Hard coded)	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-04	4	FILLER	Spaces	None	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-05	5	ANCILLARY REV CODE 1	Line Item Revenue Code	Procedure File, 11) Rev ctr code If UB92 screen field 42 = A, print rev codes in ascending order If UB92 screen field 42 = blank, print rev codes in order they were entered in charge add	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-06	6	HCPCS PROC CODE / HIPS RATE CODE 1	Line Item Procedure Code	1st UB92 edits screen, 44) HCPCS/Rates P = Procedure File, 5) Procedure codes C = Charge Entry, line item charge per unit	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-07	7	MOD (1) 1	Line Item Modifier Code 1	Charge Entry, Modifier - 1	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-08	8	MOD (2) 1	Line Item Modifier Code 2	Charge Entry, Modifier - 2	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-09	9	ANCILLARY UNITS OF SVC 1	Line Item Units	1st UB92 edits screen, 46) Serv Units U = Charge Entry, Units D = # of days spanning grouped line items (Always 1)	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-10	10	ANCILLARY TOTAL CHG 1	Line Item Total Charge	Charge Entry, Units Multiplied by Charge Entry, Chg/Unit	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-11	11	ANCILLARY NON COVERED CHG 1	Line Item Non-Covered Charge	1st UB92 edits screen 48A) 48B) 48C) Non-Cov Chg Slot	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-12	12	MOD (3) 1	Line Item Modifier Code 3	Charge Entry, Modifier	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-13	13	MOD (4) 1	Line Item Modifier Code 4	Charge Entry, Modifier	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-14	14	ASSESSMENT DATE	Assessment Date	None See issue 113069	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-15	15	FILLER	Spaces	None	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-16	16	ANCILLARY REV CODE 2	Line Item Revenue Code	Procedure File, 10) Rev ctr code If UB92 screen field 42 = A, print rev codes in ascending order If UB92 screen field 42 = blank, print rev codes in order they were entered in charge add	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-17	17	HCPCS PROC CODE / HIPS RATE CODE 2	Line Item Procedure Code	1st UB92 edits screen, 44) HCPCS/Rates P = Procedure File, 5) Procedure codes C = Charge Entry, line item charge per unit	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-18	18	MOD (1) 2	Line Item Modifier Code 1	Charge Entry, Modifier	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-19	19	MOD (2) 2	Line Item Modifier Code 2	Charge Entry, Modifier	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-20	20	ANCILLARY UNITS OF SVC 2	Line Item Units	1st UB92 edits screen, 46) Serv Units U = Charge Entry, Units D = # of days spanning grouped line items (Always 1)	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-21	21	ANCILLARY TOTAL CHG 2	Line Item Total Charge	Charge Entry, Units Multiplied by Charge Entry, Chg/Unit	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-22	22	ANCILLARY NON COVERED CHG 2	Line Item Non-Covered Charge	1st UB92 edits screen 48A) 48B) 48C) Non-Cov Chg Slot	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-23	23	MOD (3) 2	Line Item Modifier Code 3	Charge Entry, Modifier	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-24	24	MOD (4) 2	Line Item Modifier Code 4	Charge Entry, Modifier	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-25	25	ASSESSMENT DATE	Assessment Date	None - See issue 113069	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-26	26	FILLER	Spaced	None	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-27	27	ANCILLARY REV CODE 3	Line Item Revenue Code	Procedure File, 10) Rev ctr code If UB92 screen field 42 = A, print rev codes in ascending order If UB92 screen field 42 = blank, print rev codes in order they were entered in charge add	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-28	28	HCPCS PROC CODE / HIPS RATE CODE 3	Line Item Procedure Code	1st UB92 edits screen, 44) HCPCS/Rates P = Procedure File, 5) Procedure codes C = Charge Entry, line item charge per unit	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-29	29	MOD (1) 3	Line Item Modifier Code 1	Charge Entry, Modifier	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-30	30	MOD (2) 3	Line Item Modifier Code 2	Charge Entry, Modifier	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-31	31	ANCILLARY UNITS OF SVC 3	Line Item Units	1st UB92 edits screen, 46) Serv Units U = Charge Entry, Units D = # of days spanning grouped line items (Always 1)	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-32	32	ANCILLARY TOTAL CHG 3	Line Item Total Charge	Charge Entry, Units Multiplied by Charge Entry, Chg/Unit	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-33	33	ANCILLARY NON COVERED CHG 3	Line Item Non-Covered Charge	1st UB92 edits screen 48A) 48B) 48C) Non-Cov Chg Slot	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-34	34	MOD (3) 3	Line Item Modifier Code 3	Charge Entry, Modifier	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-35	35	MOD (4) 3	Line Item Modifier Code 4	Charge Entry, Modifier	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-36	36	ASSESSMENT DATE	Assessment Date	None - See issue 113069	***Note: We do not build this record at this time.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
60-37	37	FILLER	Spaces	None	***Note: We do not build this record at this time.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-01	1	RECORD TYPE "61"	Hardcode 61	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-02	2	SEQUENCE NO	Record 61 Sequence Number Valid values: 001 - 016	None (Hard coded)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-04	4	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-05	5	REVENUE CODE 1	Line Item Revenue Code	Procedure File, 10) Rev ctr code If UB92 screen field 42 = blank, print rev codes in order they were entered in charge add	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-06	6	HCPCS PROC CODE 1	Line Item Procedure Code	1st UB92 edits screen, 44) HCPCS/Rate P = Procedure File, 5) Procedure codes	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-07	7	MOD (1) 1	Line Item Modifier 1	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-08	8	MOD (2) 1	Line Item Modifier 2	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-09	9	UNITS PF SVC 1	Line Item Units	1st UB92 edits screen, 46) Serv Units U = Charge Entry, Units D = # of days spanning grouped line items (Always 1)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-10	10	MOD (3) 1	Line Item Modifier 3	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-11	11	MOD (4) 1	Line Item Modifier 4	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-12	12	FILLER	Spaced	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-13	13	OUPATIENT TOTAL CHGS 1	Line Item Total Charge	Charge Entry, Units Multiplied by Charge Entry, Chg/Unit	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-14	14	OUTPATIENT NON COVERED CHGS 1	Line Item Non-Covered Charge	1st UB92 edits screen, 48A) 48B) 48C) Non-Cov Chg Slot	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-15	15	DATE OF SVC 1	Line Item Service Date	1st UB92 edits screen, 45) Serv Date Y = Charge Entry From DOS all other responses = blank	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-16	16	FILLER	Spaced	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-17	17	REVENUE CODE 2	Line Item Revenue Code	Procedure File, 10) Rev ctr code If UB92 screen field 42 = blank, print rev codes in order they were entered in charge add	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-18	18	HCPCS PROC CODE 2	Line Item Procedure Code	1st UB92 edits screen, 44) HCPCS/Rate P = Procedure File, 5) Procedure codes	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-19	19	MOD (1) 2	Line Item Modifier 1	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-20	20	MOD (2) 2	Line Item Modifier 2	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-21	21	UNITS OF SVC 2	Line Item Units	1st UB92 edits screen, 46) Serv Units U = Charge Entry, Units D = # of days spanning grouped line items (Always 1)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-22	22	MOD (3) 2	Line Item Modifier 3	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-23	23	MOD (4) 2	Line Item Modifier 4	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-24	24	FILLER	Spaced	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-25	25	OUPATIENT TOTAL CHGS 2	Line Item Total Charge	Charge Entry, Units Multiplied by Charge Entry, Chg/Unit	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-26	26	OUTPATIENT NON COVERED CHGS 2	Line Item Non-Covered Charge	1st UB92 edits screen, 48A) 48B) 48C) Non-Cov Chg Slot	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-27	27	DATE OF SVC 2	Line Item Service Date	1st UB92 edits screen, 45) Serv Date Y = Charge Entry From DOS all other responses = blank	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-28	28	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-29	29	REVENUE CODE 3	Line Item Revenue Code	Procedure File, 10) Rev ctr code If UB92 screen field 42 = blank, print rev codes in order they were entered in charge add	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-30	30	HCPCS PROC CODE 3	Line Item Procedure Code	1st UB92 edits screen, 44) HCPCS/Rate P = Procedure File, 5) Procedure codes	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-31	31	MOD (1) 3	Line Item Modifier 1	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-32	32	MOD (2) 3	Line Item Modifier 2	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-33	33	UNITS OF SVC 3	Line Item Units	1st UB92 edits screen, 46) Serv Units U = Charge Entry, Units D = # of days spanning grouped line items (Always 1)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-34	34	MOD (3) 3	Line Item Modifier 3	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-35	35	MOD (4) 3	Line Item Modifier 4	Charge Entry, Modifier (1st UB92 edits screen field 44 must = P)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-36	36	FILLER	Spaced	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-37	37	OUPATIENT TOTAL CHGS 3	Line Item Total Charge	Charge Entry, Units Multiplied by Charge Entry, Chg/Unit	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-38	38	OUTPATIENT NON COVERED CHGS 3	Line Item Non-Covered Charge	1st UB92 edits screen, 48A) 48B) 48C) Non-Cov Chg Slot	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-39	39	DATE OF SVC 3	Line Item Service Date	1st UB92 edits screen, 45) Serv Date Y = Charge Entry From DOS all other responses = blank	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
61-40	40	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-01	1	RECORD TYPE "63"	Hardcode 63	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-02	2	SEQUENCE NO	Record 63 Sequence Number Same as RT 60 or RT 61	None (Hard coded)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-03	3	PAYER SEQUENCE	Payer Sequence 01 = Primary payer 02 = Secondary payer 03 = Tertiary payer	None (Hard coded)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-04	4	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-05	5	REVENUE CODE	Revenue Code	Procedure File, field 11) Revenue Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-06	6	GROUP CODE	Group Code CO = Contractual Obligations CR = Corrections and Reversals OA = Other Adjustments PI = Payer Initiated Reduction PR = Patient Responsibility	Receipt Entry Pay by line F9 Adj Code - First two positions of Code Build one 63 record for each different Group Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-07	7	REASON CODE 1	Reason Code	Receipt Entry Pay by line F9 Adj Code - Next three digits after stripping any non-numeric characters or spaces, of Codes Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-08	8	ADJUSTMENT AMT 1	Adjustment Amount	Receipt Entry Pay by line F9 Adj Code Amount that corresponds to payment adjustment group code above	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-09	9	ADJUSTMENT QTY 1	Adjustment Quantity	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-10	10	REASON CODE 2	Reason Code	Receipt Entry Pay by line F9 Adj Code Next three digits after stripping any non-numeric characters or spaces, of Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-11	11	ADJUSTMENT AMT 2	Adjustment Amount	Receipt Entry Pay by line F9 Adj Code Amount that corresponds to payment adjustment group code above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-12	12	ADJUSTMENT QTY 2	Adjustment Quantity	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-13	13	REASON CODE 3	Reason Code	Receipt Entry Pay by line F9 Adj Code Next three digits after stripping any non-numeric characters or spaces, of Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-14	14	ADJUSTMENT AMT 3	Adjustment Amount	Receipt Entry Pay by line F9 Adj Code, Amount that corresponds to payment adjustment group code above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-15	15	ADJUSTMENT QTY 3	Adjustment Quantity	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-16	16	REASON CODE 4	Reason Code	Receipt Entry Pay by line F9 Adj Code, Next three digits after stripping any non-numeric characters or spaces, of Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-17	17	ADJUSTMENT AMT 4	Adjustment Amount	Receipt Entry Pay by line F9 Adj Code Amount that corresponds to payment adjustment group code above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-18	18	ADJUSTMENT QTY 4	Adjustment Quantity	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-19	19	REASON CODE 5	Reason Code	Receipt Entry Pay by line F9 Adj Code Next three digits after stripping any non-numeric characters or spaces, of Codes that corresponds to payment adjustment group code above Ex CO-123 -> code sent would be 123 Ex CO 123 -> code sent would be 123 Ex CO123 -> code sent would be 123 Ex CO1234 -> code sent would be 123	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-20	20	ADJUSTMENT AMT 5	Adjustment Amount	Receipt Entry Pay by line F9 Adj Code Claim Reason Amount that corresponds to payment adjustment group code above	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-21	21	ADJUSTMENT QTY 5	Adjustment Quantity	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-22	22	REASON CODE 6	Reason Code	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-23	23	ADJUSTMENT AMT 6	Adjustment Amount	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-24	24	ADJUSTMENT QTY 6	Adjustment Quantity	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-25	25	REVENUE CODE SEQUENCE	Revenue Code Sequence Valid responses 1 - 3	Hard code to show which of the four occurrences of the revenue code on RT 60 or 61 is being referenced.	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-26	26	COB RECORD TYPE SEQUENCE	COB Record Sequence Valid responses 1 4 Required when more that one RT 63 is sent	None hard coded to show which sequence of 63 record for this group code (field 6)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
63-27	27	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
65-01	1	RECORD TYPE "65"	Hardcode 65	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
65-02	2	SEQUENCE NO	Record 65 Sequence Number Start with 001 and increment by 001	None (Hard coded)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
65-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
65-04	4	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
65-05	5	REVENUE DESCRIPTION 1	Revenue Description	Procedure File, 2) Name	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
65-06	6	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
65-07	7	REVENUE DESCRIPTION 2	Revenue Description	Procedure File, 2) Name	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
65-08	8	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
65-09	9	REVENUE DESCRIPTION 3	Revenue Description	Procedure File, 2) Name	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
65-10	10	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
66-01	1	RECORD TYPE "66"	Hardcode 66	None Note: Insurance co ? 44 Print VL Comments needs to = Y, 135/5 Form 599 ? 9 = L, and charge parameter 136/4/30 = L to build this record	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
66-02	2	SEQUENCE NO	Record 66 Sequence Number Same as RT 60 or RT 61	None (Hard coded)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
66-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
66-04	4	OCCURRENCE IND	Occurrence Indicator 0001, 0002, 0003	Hard code to indicate the occurrence in Rec 61 in which the comment is associated. 0001 if comment is associated with rev code in field 5 0002 if comment is associated with rev code in field 17 0003 if comment is associated with revenue code in field 29	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
66-05	5	VISIT LINE COMMENT	Visit Line Comment	Charge Entry, Line Item F6 Comment (599 Data ID # = 7) corresponding to field above. If grouped procedure, pull first available comment.	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
66-06	6	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-01	1	RECORD TYPE "68"	Hardcode 68	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-02	2	SEQUENCE NO	Record 68 Sequence Number Same as RT 60 or RT 61	None (Hard coded)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-03	3	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-04	4	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-05	5	Filler	Spaces	Changed to filler per issue 123187	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-06	6	DRUG UNIT PRICE	Drug Unit Prince	Procedure File, 32) NDC Unit Price *Procedure must have DRUG grouping code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-07	7	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-08	8	UNIT/BASIS OF MEASUREMENT	Measurement GR = Gram ML = Milliliter UN = Unit F2 = International Unit	Procedure File, 32) NDC Unit of Measure *Procedure must have DRUG grouping code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-09	9	PRESCRIPTION NO	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-10	10	OCCURRENCE INDICATOR	Occurrence Indicator Valid values: 0001, 0002, 0003	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-11	11	DRUG UNIT COUNT	NDC Units	Procedure File, 32) NDC Unit Count *Procedure must have DRUG grouping code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-12	12	NDC CODE	NDC Code	Procedure File, 32) NDC *Procedure must have DRUG grouping code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
68-13	13	Filler	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-01	1	RECORD TYPE "69"	Hardcode 69	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-02	2	SEQUENCE NO	Record 69 Sequence Number Same as RT 61	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-03	3	PAYER SEQUENCE	Payer Sequence 01 = Primary payer 02 = Secondary payer 03 = Tertiary payer	None (Hard coded)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-04	4	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-05	5	SERVICE LINE PAID AMT - 1	Service Line Paid Amount	Receipt Entry, pay by line, Line Item Payment	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-06	6	ADJ HCPCS PROC CODE – 1	Adjudicated HCPCS Procedure Code	Charge Entry, Line Item, Procedure	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-07	7	ADJ PROC MOD (1) – 1	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-08	8	ADJ PROC MOD (2) – 1	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-09	9	ADJ PROC MOD (3) – 1	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-10	10	ADJ PROC MOD (4) – 1	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-11	11	AJD REVENUE CODE – 1	Adjudicated Revenue Code Returned in remittance file	Procedure File, 11) Revenue Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-12	12	PAID UNITS OF SVC – 1	Paid Units Returned in remittance file	Charge Entry, Line Item, Units Or units override	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-13	13	LINE ADJ OR PAYMENT DATE – 1	Payment Date (ccymmdd)	Receipt Entry, field 7) Check Date	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-14	14	SERVICE LINE PAID AMT – 2	Service Line Paid Amount	Receipt Entry, pay by line, Line Item Payment	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-15	15	ADJ HCPCS PROC CODE – 2	Adjudicated HCPCS Procedure Code	Charge Entry, Line Item, Procedure	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-16	16	ADJ PROC MOD (1) – 2	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-17	17	ADJ PROC MOD (2) – 2	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-18	18	ADJ PROC MOD (3) – 2	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-19	19	ADJ PROC MOD (4) – 2	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-20	20	AJD REVENUE CODE – 2	Adjudicated Revenue Code Returned in remittance file	Procedure File, 11) Revenue Code	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-21	21	PAID UNITS OF SVC – 2	Paid Units Returned in remittance file	Charge Entry, Line Item, Units Or units override	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-22	22	LINE ADJ OR PAYMENT DATE – 2	Payment Date (ccymmdd)	Receipt Entry, field 7) Check Date	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-23	23	SERVICE LINE PAID AMT – 3	Service Line Paid Amount	Receipt Entry, pay by line, Line Item Payment	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-24	24	ADJ HCPCS PROC CODE – 3	Adjudicated HCPCS Procedure Code	Charge Entry, Line Item, Procedure	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-25	25	ADJ PROC MOD (1) – 3	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-26	26	ADJ PROC MOD (2) – 3	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-27	27	ADJ PROC MOD (3) – 3	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-28	28	ADJ PROC MOD (4) – 3	Adjudicated Modifier Returned in remittance file	Charge Entry, Line Item, Modifier	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-29	29	AJD REVENUE CODE – 3	Adjudicated Revenue Code Returned in remittance file	Procedure File, 11) Revenue Code	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-30	30	PAID UNITS OF SVC – 3	Paid Units Returned in remittance file	Charge Entry, Line Item, Units Or units override	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-31	31	LINE ADJ OR PAYMENT DATE – 3	Payment Date (ccyyymmdd)	Receipt Entry, field 7) Check Date	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
69-32	32	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-01	1	RECORD TYPE “70”	Hardcode 70	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-02	2	SEQUENCE NO	Record 70 Sequence Number Hardcode 01	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-04	4	PRINCIPAL DIAG CODE	Principal Diagnosis Code	3rd UB92 edits screen, 67) Prin Diag Cd Y> Charge Entry, first diagnosis. (The diagnosis code that prints is determined by the insurance company file pointer.) otherwise blank	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-05	5	OTHER DIAG CODE 1	Additional Diagnosis Code	3rd UB92 edits screen, 67) Other Diag Cd Y = Charge Entry, subsequent diagnosis. (The diagnosis code that prints is determined by the insurance company file pointer.) otherwise blank	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-06	6	OTHER DIAG CODE 2	Additional Diagnosis Code	3rd UB92 edits screen, 67) Other Diag Cd Y = Charge Entry, diagnosis from *Diag File	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-07	7	OTHER DIAG CODE 3	Additional Diagnosis Code	3rd UB92 edits screen, 67) Other Diag Cd Y = Charge Entry, diagnosis from *Diag File	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-08	8	OTHER DIAG CODE 4	Additional Diagnosis Code	3rd UB92 edits screen, 67) Other Diag Cd Y = Charge Entry, diagnosis from *Diag File	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-09	9	OTHER DIAG CODE 5	Additional Diagnosis Code	3rd UB92 edits screen, 67) Other Diag Cd Y = Charge Entry, diagnosis from *Diag File	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-10	10	OTHER DIAG CODE 6	Additional Diagnosis Code	3rd UB92 edits screen, 67) Other Diag Cd Y = Charge Entry, diagnosis from *Diag File	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-11	11	OTHER DIAG CODE 7	Additional Diagnosis Code	3rd UB92 edits screen, 67) Other Diag Cd Y = Charge Entry, diagnosis from *Diag File	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-12	12	OTHER DIAG CODE 8	Additional Diagnosis Code	3rd UB92 edits screen, 67) Other Diag Cd Y = Charge Entry, diagnosis from *Diag File	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-13	13	PRINCIPAL PROC CODE	Principal Procedure Code	3rd UB92 edits screen, 80) Principal Procedure Y = Charge Entry, first line item procedure from Proc file	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-14	14	PRINCIPAL PROC DATE	Principal Procedure Date If this field is blank it will be = 0's	3rd UB92 edits screen, 80) Principal Procedure :Y: = Charge Entry, first line item From date of service	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-15	15	OTHER PROC CODE 1	Additional Procedure Code	3rd UB92 edits screen, 81) Principal Procedure Y = Charge Entry, subsequent line item procedure from Proc file	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-16	16	OTHER PROC DATE 1	Additional Procedure Date If this field is blank it will be = 0's	3rd UB92 edits screen, 81) Principal Procedure :Y: = Charge Entry, subsequent line item From date of service	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-17	17	OTHER PROC CODE 2	Additional Procedure Code	3rd UB92 edits screen, 81) Principal Procedure Y = Charge Entry, subsequent line item procedure from Proc file	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-18	18	OTHER PROC DATE 2	Additional Procedure Date If this field is blank it will be = 0's	3rd UB92 edits screen, 81) Principal Procedure :Y: = Charge Entry, subsequent line item From date of service	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-19	19	OTHER PROC CODE 3	Additional Procedure Code	3rd UB92 edits screen, 81) Principal Procedure Y = Charge Entry, subsequent line item procedure from Proc file	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-20	20	OTHER PROC DATE 3	Additional Procedure Date If this field is blank it will be = 0's	3rd UB92 edits screen, 81) Principal Procedure :Y: = Charge Entry, subsequent line item From date of service	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-21	21	OTHER PROC CODE 4	Additional Procedure Code	3rd UB92 edits screen, 81) Principal Procedure Y = Charge Entry, subsequent line item procedure from Proc file	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-22	22	OTHER PROC DATE 4	Additional Procedure Date If this field is blank it will be = 0's	3rd UB92 edits screen, 81) Principal Procedure :Y: = Charge Entry, subsequent line item From date of service	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-23	23	OTHER PROC CODE 5	Additional Procedure Code	3rd UB92 edits screen, 81) Principal Procedure Y = Charge Entry, subsequent line item procedure from Proc file	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-24	24	OTHER PROC DATE 5	Additional Procedure Date If this field is blank it will be = 0's	3rd UB92 edits screen, 81) Principal Procedure :Y: = Charge Entry, subsequent line item From date of service	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-25	25	ADMITTING DIAG CODE	Admitting Diagnosis Code	3rd UB92 edits screen, *76) Adm Diag Cd 1 = user-entered Diagnosis Key Number 2 = Principal Diagnosis Code from Charge Entry, *Diag code slot Otherwise blank	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-26	26	EXT CAUSE OF INJURY	External Cause of Injury Code	3rd UB92 edits screen, *77) E-Code user-entered E-code (first character must = E) or if not E code user-entered Diagnosis Key Number (pulls diag code from the slot designated by the insurance company)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-27	27	PROC CODING METHOD USED	Procedure Coding Method	3rd UB92 edits screen, 79) P.C.	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
70-28	28	DIAGNOSIS RELATED GROUP (DRG) CODE	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
73-01	1	RECORD TYPE "73"	Hardcode 73	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
73-02	2	SEQUENCE NO	Record 73 Sequence Number Start with 01 and increment by 01	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
73-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
73-04	4	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
73-05	5	DATA ID NO	Data Id # Valid values: 48517 = Allergies  48522 = Goals, Rehabilitation Potential or Discharge plans 48514 = Durable Medical Equipment (DME) and Supplies 48510 = Medications 48516 = Nutritional Requirements 48521 = Orders for Disciplines and Treatments 48617 = Functional Limitations, Reason Homebound, or Both □ 48621 = Reasons Patient Leaves Home 48620 = Times and Reasons Patient Not at Home 48619 = Unusual Home, Social Environment, or Both 48515 = Safety Measures 48618 = Supplementary Plan of Treatment □48616 = Updated Information DGN = Diagnosis Description	Charge Entry, Line Item F6 Comments (599 Data ID # <>7) 1-Allergies -> 48517 2-Diagnosis Description -> DGN 3-DME and Supplies -> 48514 4-Functional Limitations, Reason Homebound or Both -> 48617 5-Goals, Rehab Potential or Discharge plans -> 48522 6-Medications -> 485107-None -> blank 8-Nutritional Requirements -> 48516 9-Orders for Disciplines and Treatments -> 48521 10-Reasons Patient Leaves Home -> 48621 11-Safety Measures -> 48515 12-Supplementary Plan of Treatment -> 48618 13-Times and Reasons Patient Not at Home -> 48620 14-Unusual Home, Social Environment or Both -> 48619 15-Updated Information ->48616	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
73-06	6	CORRESPONDING NARRATIVE DATA	Narrative Data	Charge Entry, Line Item F6 Comments	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-01	1	RECORD TYPE "80"	Hardcode 80	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-02	2	SEQUENCE NO	Record 80 Sequence Number 01 = Primary payer 02 = Secondary payer 03 = Tertiary payer	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-04	4	ATTENDING PHYS PRIMARY ID QUAL	Attending Physician ID Qualifier 24 = Employer's Identification Number 34 = Social Security Number XX = HCFA NPI Required if Attending Physician Primary Identification Number is sent	3rd UB92 edits screen 82) Attending Physician ID 1) Options A, B, C, D, & J -> Doctor File, If NPI in RT 80 field 5, use XX, If EIN use 24, if SSN use 34 2) Options E, F, G, & H -> If NPI in RT 80 field 5 use XX, if ID is from field 6) EIN use 24, if field 5 is blank space fill 3) Option I -> Order Provider If NPI in RT 80 field 5 use XX, if ID is from field 6) EIN use 24 □4) Any option + RESIDENT charge variable present and on claim being processed - Doctor File, If NPI in RT 80 field 5, use XX, If EIN use 24, if SSN use 34 Note: The resident must be setup in the dr file and the key number of the resident charge variable must match the key number of the doctor	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-05	5	ATTENDING PHYS PRIMARY ID	Attending Physician ID Number	3rd UB92 edits screen 82) Attending Physician ID 1) Options A, B, C, D, & J -> First fill with Doctor File, field 17) NPI, if NPI blank fill with field 3) EIN, if EIN blank fill with field 6) SSN 2) Options E, F, G, & H -> Referring Doctor File, first fill with field 8) NPI, if NPI blank fill with field 6) EIN, if both are blank space fill 3) Option I -> Order Doctor (RDR) from additional provider screen, first fill with field 8) NPI, if NPI blank fill with field 6) EIN 4) Any option + RESIDENT charge variable present and on claim being processed - First fill with Doctor File, field 17) NPI, if NPI blank fill with field 3) EIN, if EIN blank fill with field 6) SSN Note: The resident must be setup in the dr file and the key number of the resident charge variable must match the key number of the doctor	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-06	6	OPERATING PHYS PRIMARY ID	Operating Physician ID Number	3rd UB92 edits screen 83) Other Physician ID (First field) 1) Options A, B, C, & D -> Charge entry field 4) Referring Doctor Referring Doctor File, First fill with field 8) NPI, If NPI blank fill with field 6) EIN 2) Option E -> Charge entry Additional Provider screen Field 4) Ordering Provider - Referring Doctor File, First fill with field 8) NPI, If NPI blank fill with field 6) EIN 3) Option F -> Charge entry Additional Provider Screen 6) Operating Physician - Referring Doctor File, First fill with field 8) NPI, If NPI blank fill with field 6) EIN 4) Option G -> Charge entry Additional Provider Screen 7) Other Physician - Referring Doctor File, First fill with field 8) NPI, If NPI blank fill with field 6) EIN	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-07	7	OPERATING PHYS PRIMARY ID QUAL	Operating Physician ID Qualifier 24 = Employer's Identification Number 34 = Social Security Number XX = HCFA NPI Required if Operating Physician Primary Identification Number is sent	3rd UB92 edits screen 83) Other Physician ID (First field) If NPI in RT 80 field 6 use XX, if EIN use 24	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-08	8	ATTENDING PHYS SPECIALTY CODE	Attending Physician Specialty	3rd UB92 edits screen 82) Attending Physician ID 1) Options A, B, C, D, & J -> fill with Charge Entry 3) Doctor Specialty 2) Options E, F, G, & H -> fill with Charge Entry 4) Referring Doctor Specialty 3) Option I -> fill with Charge Entry Additional Provider Screen 4) Ordering doctor specialty □4) Any option + RESIDENT charge variable present and on claim being processed Specialty from doctor file Note: The resident must be setup in the dr file and the key number of the resident charge variable must match the key number of the doctor For 7.02 and 2.02 pull the specialty from the first slot.	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-09	9	ATTENDING PHYS 2ND ID QUAL	Attending Physician 2nd ID Qualifier 0B = State License Number 1A = Blue Cross Provider Number 1B = Blue Shield Provider Number 1C = Medicare Provider Number 1D = Medicaid Provider Number 1G = Provider UPIN Number 1H = CHAMPUS Identification Number EI = Employer's Identification Number G2 = Provider Commercial Number LU = Location Number N5 = Provider Plan Network Identification Number SY = Social Security Number X5 = State Industrial Accident Provider Number	3rd UB92 edits screen 82) Attending Physician ID 1) Option A Charge entry field 3) Doctor - Doctor File, 19) Doctor slot ID Qualifier 2) Option B blank 3) Option C Charge entry field 3) Doctor File, 19) Doctor slot ID Qualifier 4) Option D 0B 5) Option E Charge entry field 4) Referring Doctor Referring Dr File, 11) Referring dr Slot ID Qualifier 6) Option F blank 7) Option G Charge entry field 4) Referring Doctor Referring Dr File, 11) Referring dr Slot ID Qualifier 8) Option H 0B 9) Option I Charge Entry field 4) Referring Doctor Referring Doctor file 11) Referring dr Slot ID Qualifier 10) Option J 1G 11) Any option + RESIDENT charge variable present and on claim being processed 19) Doctor slot ID Qualifier Note: The resident must be setup in the dr file and the key number of the resident charge variable must match the key number of the doctor	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-10	10	ATTENDING PHYS 2ND ID	Attending Physician 2nd ID	3rd UB92 edits screen 82) Attending Physician ID Option A Charge entry field 3) Dr # - Doctor File, 19) Doctor slot ID Option B blank Option C Charge entry field 3) Dr # - Doctor File, 19) Doctor slot ID Option D Charge entry field 3) Dr # - Doctor File, 5) State License Option E Charge entry field 4) R dr # - Referring Doctor File, 11) Referring dr Slot ID <input type="checkbox"/> Option F blank Option G Charge entry field 4) R dr # - Referring Doctor File, 11) Referring dr Slot ID <input type="checkbox"/> Option H Charge entry field 4) R dr # - Referring Doctor File 7) State License Option I Charge entry field 4) R dr # - Referring Doctor File, 11) Referring dr Slot ID <input type="checkbox"/> Option J Charge entry field 3) DR # - Doctor File, 10) UPIN # Any option + RESIDENT charge variable present and on claim being processed 19) Doctor slot ID Qualifier Note: The resident must be setup in the dr file and the key number of the resident charge variable must match the key number of the doctor	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-11	11	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-12	12	ATTENDING PHYS NAME	Attending Physician Name Last Name: Positions 91 106 First Name: Positions 107 114 Middle Initial: Position 115	3rd UB92 edits screen 82) Attending Physician ID Option A Charge entry field 3) Dr # - Doctor File 2) Name Option B Charge entry field 3) Dr # - Doctor File 2) Name Option C Charge entry field 3) Dr # - Doctor File, 2) Name Option D Charge entry field 3) Dr # - Doctor File, 2) Name Option E Charge entry field 4) R dr # - Referring Doctor File, 2) Name Option F Charge entry field 4) R dr # - Referring Doctor File, 2) Name Option G Charge entry field 4) R dr # - Referring Doctor File, 2) Name Option H Charge entry field 4) R dr # - Referring Doctor File 2) Name Option I Charge entry field 4) R dr # - Referring Doctor File, 2) Name Option J Charge entry field 3) Dr # - Doctor File, 2) Name Any option + RESIDENT charge variable present and on claim being processed 2) Doctor Name Note: The resident must be setup in the dr file and the key number of the resident charge variable must match the key number of the doctor	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-13	13	OPERATING PHYS NAME	Operating Physician Name Last Name: Positions 116 131 First Name: Positions 132 139 Middle Initial: Position 140	3rd UB92 edits screen 83) Other Physician ID (First field) Options A, B, C, & D -> Charge Entry 4) Referring Doctor File, 2) Name Option E -> Charge entry Additional Provider Screen 4) Order doctor 2) Name (from RDR File) Option F -> Charge entry Additional Provider Screen 6) Operating Physician 2) Name (from RDR File) Option G -> Charge entry Additional Provider Screen 7) Other Physician 2) Name (from RDR File)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-14	14	OPERATING PHYS 2ND ID QUAL	Operating Physician 2nd ID Qualifier 0B = State License Number 1A = Blue Cross Provider Number 1B = Blue Shield Provider Number 1C = Medicare Provider Number 1D = Medicaid Provider Number 1G = Provider UPIN Number 1H = CHAMPUS Identification Number EI = Employer's Identification Number G2 = Provider Commercial Number LU = Location Number N5 = Provider Plan Network Identification Number SY = Social Security Number X5 = State Industrial Accident Provider Number	3rd UB92 edits screen 83) Other Physician ID (first field) Option A Charge entry 4) Referring Dr - Referring Doctor File, 11) ID Qualifier Option B Blank Option C Charge entry 4) Referring Doctor File, 11) ID Qualifier Option D 0B Option E Charge entry Additional Provider Screen 4) Ordering Provider Referring Doctor file 11) ID Qualifier Option F Charge entry Additional Provider Screen 6) Operating Physician Referring Doctor file 11) ID Qualifier Option G Charge entry Additional Provider Screen 7) Other Physician Referring Doctor file 11) ID Qualifier	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-15	15	OPERATING PHYS 2ND ID	Operating Physician 2nd ID	3rd UB92 edits screen 83) Other Physician ID (first field) Option A Charge entry field 4) R dr # - Referring Doctor File, 11) Referring dr Slot ID Option B Blank Option C Charge entry field 4) R dr # - Referring Doctor File, 11) Referring dr Slot ID Option D Charge entry field 4) R dr # - Referring Doctor File 7) State License Number Option E Charge entry Additional Provider Screen 4) Ordering Provider Referring Doctor file 11) ID Slot Option F Charge entry Additional Provider Screen 6) Operating Physician Referring Doctor file 11) ID Slot Option G Charge entry Additional Provider Screen 7) Other Physician Referring Doctor file 11) ID Slot	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-16	16	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
80-17	17	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-01	1	RECORD TYPE "81"	Hardcode 81	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-02	2	SEQUENCE NO	Record 81 Sequence Number 01 = Primary payer 02 = Secondary payer 03 = Tertiary payer	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pa t Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-04	4	OTHER PHYS PRIMARY ID QUAL	Other Physician ID Qualifier 24 = Employer's Identification Number 34 = Social Security Number XX = HCFA NPI	3rd UB92 edits screen 83) Other Physician ID (Second field) If NPI in RT 81 field 5 use XX, if EIN use 24	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-05	5	OTHER PHYS PRIMARY ID	Other Physician ID	3rd UB92 edits screen 83) Other Physician ID (Second field) 1) Options A, B, C, & D -> Charge entry field 4) Referring Doctor Referring Doctor File, First fill with field 8) NPI, If NPI blank fill with field 6) EIN 2) Option E -> Charge entry Additional Provider screen Field 4) Ordering Provider - Referring Doctor File, First fill with field 8) NPI, If NPI blank fill with field 6) EIN 3) Option F -> Charge entry Additional Provider Screen 6) Operating Physician - Referring Doctor File, First fill with field 8) NPI, If NPI blank fill with field 6) EIN 4) Option G -> Charge entry Additional Provider Screen 7) Other Physician - Referring Doctor File, First fill with field 8) NPI, If NPI blank fill with field 6) EIN	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-06	6	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-07	7	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-08	8	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-09	9	OTHER PHYS 2ND ID QUAL	Other Physician 2nd ID Qualifier OB = State License Number 1A = Blue Cross Provider Number 1B = Blue Shield Provider Number 1C = Medicare Provider Number 1D = Medicaid Provider Number 1G = Provider UPIN Number 1H = CHAMPUS Identification Number EI = Employer's Identification Number G2 = Provider Commercial Number LU = Location Number N5 = Provider Plan Network Identification Number SY = Social Security Number X5 = State Industrial Accident Provider Number	3rd UB92 edits screen 83) Other Physician ID (second field) Option A Charge entry 4) Referring Dr - Referring Doctor File, 11) ID Qualifier Option B Blank Option C Charge entry 4) Referring Doctor File, 11) ID Qualifier Option D 0B Option E Charge entry Additional Provider Screen 4) Ordering Provider Referring Doctor file 11) ID Qualifier Option F Charge entry Additional Provider Screen 6) Operating Physician Referring Doctor file 11) ID Qualifier Option G Charge entry Additional Provider Screen 7) Other Physician Referring Doctor file 11) ID Qualifier	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-10	10	OTHER PHYS 2ND ID	Other Physician 2nd ID	3rd UB92 edits screen 83) Other Physician ID (second field) Option A Charge entry field 4) R dr # - Referring Doctor File, 11) Referring dr Slot ID Option B Blank Option C Charge entry field 4) R dr # - Referring Doctor File, 11) Referring dr Slot ID Option D Charge entry field 4) R dr # - Referring Doctor File 7) State License Number Option E Charge entry Additional Provider Screen 4) Ordering Provider Referring Doctor file 11) ID Slot Option F Charge entry Additional Provider Screen 6) Operating Physician Referring Doctor file 11) ID Slot Option G Charge entry Additional Provider Screen 7) Other Physician Referring Doctor file 11) ID Slot	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-11	11	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-12	12	OTHER PHYS NAME	Other Physician Name Last Name: Positions 91 106 First Name: Positions 107 114 Middle Initial: Position 115	3rd UB92 edits screen 83) Other Physician ID (Second field) Options A, B, C, & D -> Charge Entry 4) Referring Doctor File, 2) Name Option E -> Charge entry Additional Provider Screen 4) Order doctor 2) Name (from RDR File) Option F -> Charge entry Additional Provider Screen 6) Operating Physician 2) Name (from RDR File) Option G -> Charge entry Additional Provider Screen 7) Other Provider 2) Name (from RDR File)	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-13	13	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-14	14	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-15	15	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-16	16	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
81-17	17	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-01	1	RECORD TYPE "82"	Hardcode 82	None	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-02	2	SEQUENCE NO	Record 82 Sequence Number 01 = Primary payer 02 = Secondary payer 03 = Tertiary payer	None	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number *Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-04	4	LAB / FACILITY PRIMARY ID QUAL	Lab / Facility ID Qualifier 24 = Employer's Identification Number 34 = Social Security Number XX = HCFA NPI	Fill with XX if RT 82 Field 5 has NPI or fill with 24 if EIN If RT 82 Field 5 is blank leave blank *Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-05	5	LAB / FACILITY PRIMARY ID	Lab / Facility ID	Charge Entry field 5) Location - Location File, Fill with field 13) NPI, If NPI blank fill with 8) EIN If both NPI and EIN blank -> leave blank *Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-06	6	FILLER	Spaces	None	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-07	7	LAB / FACILITY 2ND ID QUAL	Lab / Facility 2nd ID Qualifier 1B = Blue Shield Provider Number 1C = Medicare Provider Number 1D = Medicaid Provider Number E1 = Employer's Identification Number G2 = Provider Commercial Number LU = Location Number N5 = Provider Plan Network Identification Number	UB92 Screen field 51A/51B/51C Provider # Qualifier or Charge Entry field 5) Location File, field 16) Facility Codes Qualifier *Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-08	8	LAB / FACILITY 2ND ID	Lab / Facility 2nd ID	UB92 Screen field 51A/51B/51C Prov # or Charge Entry field 5) Location File, field 16) Facility Codes *Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-09	9	LAB / FACILITY NAME	Lab / Facility Name	Charge Entry field 5) Location File, field 2) Name *Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec) *Note: / will always be removed.	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-10	10	LAB / FACILITY ADDR	Lab / Facility Address	Charge Entry field 5) Location File, field 4) Address Line 1 *Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-11	11	LAB / FACILITY CITY	Lab / Facility City	Charge Entry field 5) Location File, field 4) Address - city *Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-12	12	LAB / FACILITY STATE	Lab / Facility State	Charge Entry field 5) Location File, field 4) Address - State *Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-13	13	LAB / FACILITY ZIP	Lab / Facility Zip Code	Charge Entry field 5) Location File, field 4) Address - zip *Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
82-14	14	FILLER	Spaces	None	*Record is only created if the visit location (or done at location) is different than the Billing Provider Location Name and Address (02 Rec) or Pay-to-Prov Location Name and Address (10 Rec)

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-01	1	RECORD TYPE "90"	Hardcode 90	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-02	2	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-04	4	PHYS RECORD COUNT	Total Number Records Record 20 thru Record 82 (per claim)	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-05	5	RECORD TYPE 2N COUNT	Total Number Records 20 & 21 (per claim)	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-06	6	RECORD TYPE 3N COUNT	Total Number Records 30, 31, 32, & 34 (per claim)	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-07	7	RECORD TYPE 4N COUNT	Total Number Records 40, 41, & 42 (per claim)	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-08	8	RECORD TYPE 5N COUNT	Total Number Records 50, 52 & 59 (per claim)	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-09	9	RECORD TYPE 6N COUNT	Total Number Records 60, 61, 63, 65, 66, 68, and 69 (per claim)	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-10	10	RECORD TYPE 7N COUNT	Total Number Records 70 & 73 (per claim)	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-11	11	RECORD TYPE 8N COUNT	Total Number Record 80, 81, & 82 (per claim)	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-12	12	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-13	13	ACCOMMODATION TOTAL CHG	Accommodations Total Charge (per claim)	Zero fill	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-14	14	ACCOMMODATION TOTAL NON COVERED CHG	Accommodations Non-Covered Total Charge (per claim)	Zero fill	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-15	15	ANCILLARY TOTAL CHARGE	Ancillary Total Charge (per claim) Total of Rec 61 Outpatient Total Charges (Rec 61 Fields 13, 25, & 37)	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-16	16	ANCILLARY TOTAL NON COVERED CHARGE	Ancillary Non-Covered Total Charge (per claim) Total of Rec 61 Outpatient Non-covered charges (Rec 61 Fields 14, 26, & 38)	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-17	17	COMMENT TYPE IND	Comment Type Indicator L = Line (Form location 43) F = Footer (Form Location 84) Required if billing note remarks are sent on the claim and the claim will be printed	If remarks in RT 90 Field 19 from UB92 screen field 84 -> F If remarks in RT 90 Field 19 from Charge entry visit line comments + 135/5 599 field 9 = F -> F Otherwise blank	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-18	18	COMMENT LINE IND	Comment Line Indicator Valid responses: 1 45, required if Comment Type = L	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
90-19	19	BILLING NOTE REMARKS	Remarks (first 104 positions of box #84 or visit line comments)	3rd UB92 edits screen, 84) Remarks or Charge Entry, F6-Comments + Ins Co Print Visit line comments = Y + 135/5 599 field 9 = F -> Fill with	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-01	1	RECORD TYPE "92"	Hardcode 92	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-02	2	SEQUENCE NO	Record 92 Sequence Number 01 = Primary payer 02 = Secondary payer 03 = Tertiary payer	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-04	4	CURRENT DCN / ICN	Current DCN/ICN	Receipt entry field 10) Original CRN	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-05	5	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-06	6	TOTAL SUBMITTED CHARGES	Total Submitted Charges Sum of RT 90-13 & RT 90-15	RT 90 Field 15	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-07	7	TOTAL NON-COVERED CHARGES	Total Non-Covered Charges Sum of RT 90-14 & RT 90-16	RT 90 Field 16	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-08	8	TOTAL CHARGE ALLOWED	Total Charges Allowed Required for secondary claims	Zero fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-09	9	TOTAL MEDICARE REIMBURSEMENT	Total Medicare Reimbursement Required for secondary claims	Zero fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-10	10	TOTAL AMT MEDICARE PAID PROVIDER	Total Amount Medicare Paid Provider Required for secondary claims	Zero fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-11	11	TOTAL AMT PAID BENE	Total Amount Paid Beneficiary Required for secondary claims	Zero fill	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-12	12	TOTAL MEDICARE DAYS UTILIZED	Total Medicare Days Utilized Same as RT 30-20 Required for secondary claims	Zero fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-13	13	DRG / APC ASSIGNED VIA GROUPER	DRG / APC Assigned via Grouper	Zero fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-14	14	DRG / APC AMT APPLIED VIA PRICER	DRG / APC Amount Applied via Pricer	Zero fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-15	15	DRG OUTLIER AMT	DRG Outlier Amount	Zero fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-16	16	TOTAL DENIED CHARGES	Total Denied Charges Required for secondary claims	Zero fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-17	17	COST REPORT DAYS	Cost Report Days Required for secondary claims	Zero fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-18	18	LIFETIME PSYCH DAYS	Lifetime Psychiatric Days Required for secondary claims	Zero fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-19	19	CLAIM STATUS	Claim Status Refer to ANSI X12 Codes	Space fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-20	20	REIMBURSEMENT RATE (%)	Reimbursement Rate (%) Required for secondary claims	Zero fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-21	21	CLAIM PAID DATE	Claim Paid Date (ccyymmdd) Required for secondary claims	Receipt Entry, field 7) Check date	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
92-22	22	FILLER	Spaces	Space fill	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-01	1	RECORD TYPE "93"	Hardcode 93	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-02	2	SEQUENCE NO	Record 93 Sequence Number 01 = Primary payer 02 = Secondary payer 03 = Tertiary payer	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-03	3	PAT CONTROL NO	Patient Control Number	1st UB92 edits screen, 3) Pat Control # P = Patient Demographics, 1)*Patient # all other responses = claim number	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-04	4	ALLOWED CHGS MEDICARE PAID 100%	Allowed Charges Medicare Paid at 100%	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-05	5	ALLOWED CHGS MEDICARE PAID 80%	Allowed Charges Medicare Paid at 80%	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-06	6	PAID FROM PART A MEDICARE TRUST FUND	Paid from Part A Medicare Trust Fund	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-07	7	PAID FROM PART B MEDICARE TRUST FUND	Paid from Part B Medicare Trust Fund	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-08	8	CLAIM HCPCS PAYABLE AMT	Claim HCPCS Payable Amount	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-09	9	CLAIM ESRD PAYMENT AMT	Claim ESRD Payment Amount	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-10	10	NONPAYABLE PROF COMPONENT AMT	Non-Payable Professional Component Amount	None	***Note: We currently do not build this record.***

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-11	11	OUTPATIENT REIMB RATE	Outpatient Reimbursement Rate	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
93-12	12	FILLER	Spaces	None	***Note: We currently do not build this record.***
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-01	1	RECORD TYPE "95"	Hardcode "95"	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-02	2	PAY-TO PROV TAX ID	EIN	If RT 10 is sent, then must = Pay to provider Tax ID (Rec 10 Field 4) If RT 10 is not sent, then must = Billing Provider Tax ID (Rec 02 Field 2)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-03	3	RECEIVER ID	Hardcode FASTCLAIM	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-04	4	TYPE OF BATCH	Batch Type	1st UB92 edits screen, 4) Type of Bill If RT 10 is sent, then must = Type of Batch (Rec 10 Field 2) in the "Provider Record for this batch. If RT 10 is NOT sent, then must = Type of Batch (Rec 02 Field 4)	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-05	5	TOTAL NUMBER OF CLAIMS	Total Batch Claim Count	None Must = the total number of claims or admissions (Rec 20) in this batch	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-06	6	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-07	7	BATCH ACCOMMODATION TOTAL CHARGE	Total Batch Claim Accommodation Charge (inpatient claims only)	None Must = the sum of accommodation total charges (Rec 90 Field 13) for all claims in this batch ZEROS	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-08	8	BATCH ACCOMMODATION NON COVERED CHARGE	Total Batch Claim Accommodation Non-Covered Charge (inpatient claims only)	None Must = the sum of accommodation non-covered charges (Rec 90 Field 14) for all the claims in this batch ZEROS	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-09	9	BATCH ANCILLARY TOTAL CHARGE	Total Batch Claim Ancillary Charge (inpatient and/or outpatient claims)	None Must = the sum of ancillary total charge (Rec 90 Field 15) for all claims in this batch	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-10	10	BATCH ANCILLARY NON COVERED CHARGE	Total Batch Claim Ancillary Non-Covered Charge (inpatient and/or outpatient claims)	None Must = the sum of ancillary total charge (Rec 90 Field 16) for all claims in this batch	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-11	11	TOTAL CHARGES FOR BATCH	Total Charges for Batch Sum of RT 95-7 & RT 95-9	None Sum of charges entered in Record Type 95, Field 7 (Accommodation Total charges for the batch) and Field 9 (Ancillary Total charges for the Batch).	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-12	12	TOTAL NON COVERED CHARGES FOR THE BATCH	Total Non-Covered Charges for Batch Sum of RT 95-8 & RT 95-10	None Sum of charges entered in Record Type 95, Field 8 (Accommodation Non covered Charges for the Batch) and Field 10 (Ancillary Non covered Charges for the batch).	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-13	13	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-14	14	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
95-15	15	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-01	1	RECORD TYPE "98"	Hardcode 98	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-02	2	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-03	3	BILLING PROV TAX ID	EIN Must = Rec 02 Field 02	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-04	4	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-05	5	TOTAL NUMBER OF BILLING PROV CLAIMS	Total Number of Billing Provider Claims	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-06	6	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-07	7	ACCOMMODATIONS TOTAL CHARGES FOR THE BILLING PROV	Accommodations Total Charges for the Billing Provider	Zeros	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-08	8	ACCOMMODATIONS NONCOVERED CHARGES FOR BILLING PROV	Accommodations Total Non-covered Charges for the Billing Provider	Zeros	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-09	9	ANCILLARY TOTAL CHARGES FOR BILLING PROV	Ancillary Total Charges for the Billing Provider	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-10	10	ANCILLARY TOTAL NONCOVERED CHARGES FOR BILLING PRO	Ancillary Total Non-covered Charges for the Billing Provider	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-11	11	TOTAL CHARGES FOR BILLING PROV	Total Charges for Billing Provider	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-12	12	TOTAL NONCOVERED CHARGES FOR BILLING PROV	Total Non-covered Charges for the Billing Provider	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-13	13	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-14	14	FILLER	Spaces	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
98-15	15	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-01	1	RECORD TYPE "99"	Hardcode 99	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-02	2	SUBMITTER ID	Submitter's EIN	Must = 'Submitter ID' (Rec 01, Field 2) in the submitter record	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-03	3	RECEIVER ID	Hardcode FASTCLAIM	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-04	4	TOTAL NO OF BATCHES	Number of Batches in File	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-05	5	FILE ACCOMMODATION – TOTAL CHARGE	Total File Claim Accommodation Charge (inpatient claims only) Sum of RT 95-7 for all batches Or zeros	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-06	6	FILE ACCOMMODATION – NON COVERED CHARGE	Total File Claim Accommodation Non-Covered Charge (inpatient claims only) Sum of RT 95-8 for all batches in this file Or zeros	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-07	7	FILE ANCILLARIES – TOTAL CHARGE	Total File Claim ancillary Charge (inpatient and/or outpatient claims) Sum of RT 95-9 for all batches in this file	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-08	8	FILE ANCILLARIES – NON COVERED CHARGE	Total File Claim Ancillary Non-Covered Charge (inpatient and/or outpatient claims) Sum of RT 95-10 for all batches in this file	None	
<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-09	9	TOTAL CHARGES FOR THE FILE	Total Charges for the File Sum of RT 99-5 & RT 99-7 Or zeros	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-10	10	TOTAL NON COVERED CHARGES FOR THE FILE	Total Non-covered Charges for the file Sum of RT 99-6 & RT 99-8 Or zeros	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-11	11	NUMBER OF CLAIMS FOR THE FILE	Number of Claim for the file A count of the number of Rec. 20 entries for this file (Rec 01 through Rec 99)	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-12	12	NUMBER OF RECORDS FOR THE FILE	Number of Records for the File Total number of records from 01 through 99 in a file transmission	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-13	13	FILLER	Spaces	None	

<i>Reference</i>	<i>Field Number</i>	<i>Field Name</i>	<i>Remarks</i>	<i>Misys PM Reference</i>	<i>Additional Remarks</i>
99-14	14	FILLER	Spaces	None	