

CMS 1500 Data Translation Table for Practice Today		
Field	Title	Data
	Carrier Block	[Patient record Insurance tab Add or Edit Insurance abbreviation]
1	Medicare, Medicaid, TRICARE CHAMPUS, CHAMPVA, Group Health Plan, FECA, Black Lung, Other	[Patient record Insurance tab Insur abbreviation button Add or Edit Insurance company profile CMS 1500 Setup tab 1. Insurance Type]
1a	Insured's ID Number	[Patient record Insur tab Insured ID#]
2	Patient's Name	[Patient record Basic tab Patient name]
3	Patient's Birth Date, Sex	[Patient record Basic tab Patient birth date, sex]
4	Insured's Name	[Patient record Insur tab Insured person info]
5	Patient's Address	[Patient record Basic tab Patient address]
6	Patient Relationship to Insured	[Patient record Insur tab Pt rel to Insured]
7	Insured's Address	[Patient record Insur tab Insured person address info]
8	Patient Status	[Patient record Insur tab Enter/edit claim 8. Patient Status]
9	Other Insured's Name	[Patient record Insur tab check "Other plan?" Insurance #2 tab Insured Person #2 name]
9a	Other Insured's Policy or Group Number	[Patient record Insur tab check "Other plan?" Insurance #2 tab Insured Person #2 ID#]
9b	Other Insured's Date of Birth, Sex	[Patient record Insur tab check "Other plan?" Insurance #2 tab Insured Person #2 Date of Birth, Sex]
9c	Employer's Name or School Name	[Patient record Insur tab check "Other plan?" Employer #2 tab Employer abbreviation]
9d	Insurance Plan Name or Program Name	[Patient record Insur tab check "Other plan?" Insurance #2 tab Plan Name]
10a - 10c	Is Patient's Condition Related To:	[Patient record Insur tab Enter/edit claim 10a, 10b, 10c]
10d	Reserved for Local Use	[Patient record Insur tab Enter/edit claim 10d]
11	Insured's Policy, Group, or FECA Number	[Patient record Insur tab Insurance #1 Group#]
11a	Insured's Date of Birth, Sex	[Patient record Insur tab Insured Person #1 date of birth, sex]

11b	Insured's Employer's Name or School Name	[Patient record Emp tab Employer abbreviation]
11c	Insurance Plan Name or Program Name	[Patient record Insur tab Insurance #1 Plan Name]
11d	Is there another Health Benefit Plan?	[Patient record Insur tab check "Other plan?"]
12	Patient's or Authorized Person's Signature	[Patient record Claims tab Print 1500 "#12 Prt Sign on file?", check Yes or No]
13	Insured's or Authorized Person's Signature	[Patient record Claims tab Print 1500 "#13 Prt Sign on file?", check Yes or No]
14	Date of Current Illness, Injury, Pregnancy	[Patient record Claims (or Insur) tab Enter/edit Claim enter "14 Date of Current Illness, Injury, Pregnancy"]
15	If Patient Has Had Same or Similar Illness	[Patient record Claims (or Insur) tab Enter/edit Claim enter "15 First date of Same or similar Illness"]
16	Dates Patient Unable to Work in Current Occupation	[Patient record Claims (or Insur) tab Enter/edit Claim enter "16 Enter Dates"]
17	Name of Referring Provider or Other Source	[Patient record Transaction Referring Dr]
17a	Other ID#	Step 1. [Patient record Insur tab Add or Edit insurance profile CMS 1500 setup tab 17a. Select detail from dropdown box]; Step 2. [Patient record Trans tab Add or Edit transaction enter Referring doctor abbreviation]
17b	NPI #	Step 1. [Referring Doctor profile Enter NPI]; Step 2. [Patient record Trans tab Edit transaction enter Referring doctor abbreviation]
18	Hospitalization Dates Related to Current Services	[Patient record Transaction Add or Edit transaction Hosp tab enter dates]
19	Reserved for local use	[Patient record Insur or Claims tab Enter/Edit Claim 19. Reserved for local user]
20	Outside Lab? \$Charges	[Patient record Insur or Claims tab Enter/Edit Claim 20. Outside lab and charges]
21	Diagnosis or Nature of Illness or Injury (relate items 1, 2, 3, or 4 to 24E by line)	[Patient record Trans tab Add or edit transaction enter transaction diagnoses (1 to 4)]
22	Medicaid Resubmission	[Patient record Claims (or Insur) tab Enter/edit Claim 22 enter Medicaid Resubmission Code and Original Ref. #]

23	Prior Authorization Number	Option 1. [Patient record Claims (or Insur) tab Enter/edit Prior Authorization #]; Option 2. [Patient record Trans tab Add or Edit transactions Details tab 23. Enter Prior Authorization #]
24a	Date(s) of Service [lines 1-6]	[Patient record Trans tab Add or edit transaction enter date of service]
24b	Place of Service [lines 1-6]	[Patient record Trans tab Add or edit transaction enter Place of Service]
24c	EMG [lines 1-6]	[Patient record Trans tab Add or edit transaction enter EMG]
24d	Procedures, Services, or Supplies [lines 1-6]	[Patient record Trans tab Add or edit transaction enter procedure code]
24e	Diagnosis Pointer [lines 1-6]	[Patient record Trans tab Add or edit transaction enter diagnosis code (this will be translated to a pointer for box 21)]
24f	\$ Charges [lines 1-6]	[Patient record Trans tab Add or edit transaction enter charge]
24g	Days or Units [lines 1-6]	[Patient record Trans tab Add or edit transaction enter days or units]
24h	EPSDT/Family Plan [lines 1-6]	[Patient record Trans tab Add or edit transaction enter EPSDT]
24i shaded	ID Qualifier [lines 1-6]	Step 1. [Patient record Insur tab Add or Edit insurance profile CMS 1500 setup tab 24j. Select detail from dropdown box]; Step 2. [Patient record Trans tab Add or Edit transaction enter Rendering provider abbreviation]
24j	Rendering Provider ID # [lines 1-6]	Step 1. [Add or Edit Rendering (Referring) Doctor profile Enter NPI]; Step 2. [Patient record Trans tab Add or edit transaction enter Rendering Provider abbreviation]
24j shaded	Rendering Provider ID qualifier	Step 1. [Patient record Insur tab Add or Edit insurance company profile CMS 1500 Setup tab 24j Select Rendering Provider Qualifier]; Step 2. [Patient record Trans tab Add or edit transaction enter Rendering Provider abbreviation]
25	Federal Tax ID Number	Step 1. [Patient record Doctor tab Add or edit Attending Doctor Enter Federal ID#]; Step 2. [Patient record Transaction tab Add or edit transaction enter doctor abbreviation on POS tab]
26	Patient's Account No.	[Patient account number]
27	Accept Assignment?	Setup [Quick Setup 8. Do you normally accept assignment? Enter yes or no]; Step 1. [Patient record Insur tab Enter/edit claim 27. Accept assignment? Enter yes or no]
28	Total Charge	[This field is automatically calculated from transactions listed.]
29	Amount Paid	[This field is automatically calculated from transactions listed.]
30	Balance Due	[This field is automatically calculated from transactions listed.]

31	Signature of Physician or Supplier Including Degrees or Credentials	[Patient record transaction tab Add or edit transaction Enter Dr abbreviation on POS tab]
32	Service Facility Location Information	[Patient record transaction tab Add or edit transaction Enter Facility on POS tab]
32a	NPI#	[Patient record transaction tab Add or edit transaction Enter Facility on POS tab Edit facility profile enter NPI and facility qualifier]
32b	Other ID#	[Patient record transaction tab Add or edit transaction Enter Facility on POS tab Edit facility profile enter Other ID# and qualifier for facility]
33	Billing Provider Info & Phone#	Method 1. Pull from Quick Setup [Quick Setup Page 6 enter Billing Info]; Method 2. Pull from transaction doctor [Patient record transaction tab Add or edit transaction enter Doctor on POS tab]
33a	NPI#	Method 1. Pull from Quick Setup [Quick Setup Page 6 enter Billing NPI, Qualifier, and Other ID#]; Method 2. Pull from transaction doctor [Patient record transaction tab Add or edit transaction enter Doctor on POS tab]
33b	Other ID#	Method 1. Pull from Quick Setup [Quick Setup Page 6 enter Billing NPI, Qualifier, and Other ID#]; Method 2. Pull from transaction doctor [Patient record transaction tab Add or edit transaction enter Doctor on POS tab]
Footnotes:		
1. Quick Setup must be examined before using new CMS 1500.		
2. Rendering Provider and Referring Doctor are the exact same database.		