



The THERAPIST EZ CMS-1500 (08/05) Data Entry Locations (as of version 2.5.023)

Box	Description	Screen Where Data Is Input
1	Medicare, Medicaid, Champus, Etc.	Setup>Lookup Lists>Carriers>carrier>Change>CMS-1500 (2)>Check boxes for Box 1
1a	Insured's ID Number	Patient>Insurance>Change>Eligibility>Insurance ID
2	Patient Name	Patient>Demographics>General>First Name, MI, Last, Generation
3	Patient Birthdate	Patient>Demographics>General>Date of Birth
3	Sex	Patient>Demographics>General>Sex
4	Insured's Name	Patient>Insurance>Change>General>First Name, MI, Last
5	Patient's Address	Patient>Demographics>General>Address 1, City, State, Zip
6	Patient Relationship To Insured	Patient>Insurance>Change>General>Relationship (select option)
7	Insured's Address	Patient>Insurance>Change>General>Address 1, City, State, Zip
8	Patient Status	Patient>Demographics>Claims>Marital Status and Student Status
9	Other Insured's Name	Patient>Insurance>Change>Box 9 tab>First Name, MI, Last
9a	Other Insured's Policy or Group #	Patient>Insurance>Change>Box 9 tab>Other Policy or Group
9b	Other Insured's Date of Birth	Patient>Insurance>Change>Box 9 tab>Date of Birth
9b	Sex	Patient>Insurance>Change>Box 9 tab>Sex
9c	Employer or School Name	Patient>Insurance>Change>Box 9 tab>Other Employer
9d	Insurance Plan or Program Name	Patient>Insurance>Change>Box 9 tab>Plan or Program Name
10a	Employment	Patient>Case Information>Misc tab>Employment Related
10b	Auto Accident	Patient>Case Information>Misc tab>Accident
10c	Other Accident	Patient>Case Information>Misc tab>Accident
10d	Reserved for local use	Patient>Insurance>Eligibility>Reseved Box 10d
11	Insured's Policy Group/FECA Number	Patient>Insurance>Change>Eligibility>Policy Group No
11a	Insured's Date of Birth	Patient>Insurance>Change>General
11a	Sex	Patient>Insurance>Change>General
11b	Employer or School Name	Patient>Insurance>Change>Eligibility>Employer Name
11c	Insurance Plan or Program Name	Patient>Insurance>Change>Eligibility>Plan Name
11d	Is there another health benefit plan	Patient>Insurance>Change>Eligibility>Another Health Plan (select option)
12	Patient Signature	Patient>Demographics>Claims>Signature on File>Release of Information & Signature Date
13	Insured or Authorized Signature	Patient>Demographics>Claims>Signature on File>Payment of Benefits
14	Date of Current Illness	Patient>Case Information>General>Onset/Symptom Date
15	Date of Similar Illness	Patient>Case Information>General>Same/Similar Illness Date
16	Dates Patient Unable To Work	Patient>Case Information>General>Unable to work from date
17	Name of Referring Physician	Patient>Case Information>Misc tab>Referring Physician. The physician can be edited at Setup>Lookup Lists>Outside Physicians>Physician>Change
17a	Referring Physician Secondary ID	1. Setup>Lookup Lists>Outside Physicians>Physician>Change>Carrier tab. Enter ID and qualifier for claims to the selected carrier.

		2. Setup>Lookup Lists>Outside Physicians>Physician>Change>General tab>enter both the ID Qualifier and Physician ID.
17b	Referring Physiain NPI	Setup>Lookup Lists>Outside Physicians>Physician>Change>General tab>NPI
18	Hospitalization Dates	Patient>Case Information>General>Hospitalization from date
19	Reserved for local use	Patient>Insurance>Eligibility>Reseved Box 19 (upper and lower line)
20	Outside Lab	Patient>Case Information>Misc tab>Outside Lab
21	Diagnosis or Nature of Illness or Injury	Patient>Diagnosis
22	Medicaid Resubmission Code	All Claims. Patient>Case Informaion>Misc tab>Original Reference No. Single Claim Override: Patient>Print button>CMS-1500>Patient tab
23	Prior Authorization#	Patient>Authorizations>Authorization>Change>Authorizaion tab>Authorization Number
24	Supplemental Field (top line)	Transactions>Service>Change>General tab>Supplemental field
24a	Dates of Service	Transactions>Service>General>From Date & To Date
24b	Place of Service	Transactions>Service>General>Place of Service
24c	EMG indicator	Transactions>Service>Change>General tab>Emergency
24d	CPT/Modifier	Transactions>Service>General>Procedure and Modifier Codes 1-4
24e	Reference to Diagnosis in 21	Transactions>Service>Diagnosis This is system generated fro diagnosis codes selected in service.
24f	Charges	Transactions>Service>Money>Amount to Bill on Insurance Claims
24g	Days or Units	Transactions>Service>General>Units
24h	EPSDT Family Plan	Transactions>Service>General>EPSDT
24i	Rendering Provider ID Qualifier (upper)	1. Setup>Preferences>Provider Preferences>Provider>Carrier Options>Override rendering provider secondary ID and qualifier. 2. Setup>Preferences>Provider Preferences>Provider>Provider Options>Claims tab>Rendering provider Qualifier and ID.
24j	Rendering Provder ID (upper line)	1. Setup>Preferences>Provider Preferences>Provider>Carrier Options>Override rendering provider secondary ID and qualifier. 2. Setup>Preferences>Provider Preferences>Provider>Provider Options>Claims tab>Rendering provider Qualifier and ID.
	NOTE:	If the ID in box 24j is the same as the NPI in box 33b, box 24j will be blank unless "Print duplicate IDs in box 24j" is checked in either the Carrier options (for printed claims) or the Receiver's Generator options (for electronic claims).
24j	Rendering Provder NPI (lowerline)	1. Setup>Preferences>Provider Preferences>Provider>Carrier Options>Override rendering provider NPI. 2. Setup>Preferences>Provider Preferences>Provider>Provider Options>Claims tab>Rendering provider NPI.
	NOTE:	If the NPI in box 24j is the same as the NPI in box 33a, box 24j will be blank unless "Print duplicate IDs in box 24j" is checked in either the Carrier options (for printed claims) or the Receiver's Generator options (for electronic claims).
25	Federal Tax ID - SSN - EIN	Setup> Preferences> Provider Preferences> Provider> Provider Options> Claims tab
	NOTE:	A Carrier setting determines whether to use the SSN or EIN if both are present.

		NOTE: The tax ID can be extended with a provider-carrier option: Setup>Preferences>Provider Preferences>Provider>Carrier Options>Override Provider Tax ID
26	Patient's Account No.	Patient>Demographic>General>Patient ID
27	Accept Assignment	1.Setup>Preferences> Provider Preferences> Carrier Options> Carrier> Accept Assignment 2.Setup>Lookup Lists>Carrier>Carrier>Change>CMS-1500(1)>Accept Assignemnts of benefits
28	Total Charge	Transactions>Service>Money This is system generated
29	Amount Paid	Calculated from a sum of payments to services on the claim subject to Payment, Practice, and Carrier options for which payments to total. 1. Setup> Lookup Lists> Carriers> Carrier> Change>CMS-1500(1)> Reported Amounts Paid 2. Setup> Preferences> Practice Preferences> MISC> Payments are reported on Claim total amount paid
30	Balance Due	Calculated from 28 and 29 This is system generated
31	Signature of Physician	Setup>Preferences>Provider Preferences>Provider>Provider Options>Claims (use line 1 only)
31	Date	System generated from the computer's system date
32	Facility Address	1. Setup>Lookup Lists>Carriers>Carrier>change>CMS-1500 (2) tab>Force service provider name and practice address into box 32. This will be for all patient's with this Carrier 2. Patient List>Case Information>General tab>Facility>click on the Select button and select the Facility. Edit facilities at Setup>Lookup Lists>Treatment Facilities>General tab 3. Patient List>Case Information>General tab>Facility>Enter facility information.
32a	Facility NPI	1. Setup>Lookup Lists>Carriers>Carrier>change>CMS-1500 (2) tab>Force service provider name and practice NPI into box 32. This will force the Practice's NPI for all patient's with this Carrier 2. Patient List>Case Information>General tab>Facility>click on the Select button and select the Facility. Edit facilities at Setup>Lookup Lists>Treatment Facilities>Identification tab>NPI 3. Patient List>Case Information>General tab>Facility>Enter facility NPI.
32b	Facility Secondary ID/Qualifier	1. Setup>Lookup Lists>Carriers>Carrier>change>CMS-1500 (2) tab>Force service provider name and practice address into box 32. This will force the the override billing provider qualifier and ID the billing provider qualifier and ID if no override. 2. Patient List>Case Information>General tab>Facility>click on the Select button and select the Facility. Edit facilities at Setup>Lookup Lists>Facilities>Identification tab>ID Qualifier and Facility ID. 3. Patient List>Case Information>General tab>Facility>Enter facility ID and Qualifier.
33	Billing Provider Phone Number	Setup>Preferences>Practice Preferences>General tab>Phone Number
	Billing Provider Name and Address	Setup>Preferences>Provider Preferences>Provider>Provider Options>Claims
33a	Billing Provider NPI	1. Setup>Preferences>Provider Preferences>Provider>Carrier Options>General tab>Override billing provider NPI 2, Setup>Preferences>Provider Preferences>Provider>Provider Options>Claims Billing Provider - Box 33>NPI
33b	Billing Provider secondary ID/Qualifier	Setup>Preferences>Provider Preferences>Provider>Carrier Options>Carrier>Change>Override box>Override billing provider secondary ID

		Setup>Preferences>Provider Preferences>Provider>Provider Options>Claims>Billing Provider>- Box 33 Qualifier and ID
		NOTE: Boxes with multiple options are filled preferentially in the order shown
Remember any field with a mouse icon you can right click for a list of available codes of a calendar.		