



The THERAPIST Pro CMS-1500 (08/05) Data Entry Locations (as of version 2.5.022)

Box	Description	Screen Where Data Is Input
1	Medicare, Medicaid, Champus, Etc.	Setup>Lookup Lists>Carriers>Carrier>Change>CMS 1500>check boxes at top of screen
1a	Insured's ID Number	Patient>Insurance>Insurance>Change>Eligibility tab>Insurance ID
2	Patient Name	Patient>Demographics>General>First Name, MI, Last, Generation
3	Patient Birth date	Patient>Demographics>General>Date of Birth
3	Sex	Patient>Demographics>General>Sex
4	Insured's Name	Patient>Insurance>Change>General>First Name, MI, Last (if different than self)
5	Patient's Address	Patient>Demographics>General>Address 1, City, State, Zip 9if different than self)
6	Patient Relationship To Insured	Patient>Insurance>Change>General>Relationship (select correct button) (code value only electronic)
7	Insured's Address	Patient>Insurance>Change>General>Address 1, City, State, Zip, Area Code, Telephone Number
8	Patient Status	Patient>Demographics>Status tab>Marital Status and Student Status (select correct button)
9	Other Insured's Name	Patient>Insurance>Carrier>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 tab
9d	Insurance Plan Name or Program Name	Patient>Insurance>Change>Box 9 tab>Plan or Program Name
10a	Employment	Patient>Case/Diagnosis>Case Information>Condition>Employment Related (select correct button)
10b	Auto Accident	Patient>Case Information>Misc>Accident>Auto
10c	Other Accident	Patient>Case Information>Misc>Accident>Other
10d	Reserved for local use	Patient>Insurance>Carrier>Billing tab>Reserved Local Box 10d
11	Insured's Policy Group or FECA Number	Patient>Insurance>Change>Eligibility>Policy Group Number
11a	Insured's Date of Birth	Patient>Insurance>Change>General>Date of Birth (check box to Print Date of Birth and Sex)
11a	Sex	Patient>Insurance>Change>General>Sex (check box to Print Date of Birth and Sex)
11b	Employer or School Name	Patient>Insurance>Change>Employment>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 correct button)
12	Patient Signature	Patient>Demographics>Claims tab>Release of Information & Signature Date
13	Insured or Authorized Signature	Patient>Demographics>Claims tab>Payment of Benefits (check box)
14	Date of Current Illness	Patient>Case/Diagnosis>Case Information>General>Onset/Symptom Date
15	Date of Similar Illness	Patient>Case/Diagnosis>Case Information>Condition tab>check box and Date for Same/Similar
16	Dates Patient Unable To Work	Patient>Case/Diagnosis>Case Information>Condition tab>Disability box (select button and fill in date)

17	Name of Referring Physician	Patient>Case/Diagnosis>Case Information>Links tab>Referring Physician
17a	Referring Physician ID/Qualifier	1. Setup>Lookup Lists>Outside Physicians>Physician>Change>Carrier tab. Enter override.
		2. Setup>Lookup Lists>Outside Physicians>Physician>Change>General tab. Qualifier is system generated from ID number entered.
17b	Referring Physician NPI	Setup>Lookup Lists>Outside Physicians>Physician>Change>General tab
18	Hospitalization Dates Relating To	Patient>Case/Diagnosis>Case Information>Inpatient tab>Admission Date
19	Reserved for local use	Patient>Insurance>Carrier>Billing tab>Reserved Local Box 19 (top and bottom lines of field)
20	Outside Lab	Patient>Case/Diagnosis>Case Information>Misc>Outside Lab box
21	Diagnosis or Nature of Illness or Injury	Patient>Case/Diagnosis>Diagnosis (Insert, Date must proceed first date of service))
22	Medicaid Resubmission Code	All Claims: Patient>Print>CMS-1500>Patient tab
		Single Claim Override: Patient>Case/Diagnosis>Case Information>Misc tab>Original Reference No.
23	Prior Authorization#	Patient>Insurance>Carrier>Authorizations>Authorization or Insert Authorization>Authorizations tab>Authorization number
24	Supplemental Field (top line)	Transactions>Service>Change>General tab>Supplemental field
24a	Date(s) of Service	Transactions>Service>From Date and To Date
24b	Place of Service	Transactions>Service>General>Place of Service
24c	EMG	Transactions>Service>Change>General tab>Emergency
24d	CPT/Modifier	Transactions>Service>General>Procedure & 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>Insurance tab>Bill to Insurance
24g	Days or Units (upper level)	Transactions>Service>General>Days or Units>Top Line
24g	Days or Units	Transactions>Service>General>Days or Units>Units
24h	EPSDT Family Plan (upper level)	Transactions>Service>General>EPSDT/ Family Planning>Top Line
24h	EPSDT Family Plan	Transactions>Service>General>EPSDT/ Family Planning>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>Carrier Options>ID Numbers tab>ID Type>Change>enter qualifier or leave blank to use the default qualifier based on the selected ID type.
		3. Setup>Preferences>Provider Preferences>Provider>Provider Options>ID Numbers tab>ID Type>Change>enter Qualifier. Leave blank to use the default qualifier based on the selected ID type.
		NOTE: The ID for #2 and #3 above is selected by a carrier preference: Setup>Lookup Lists>Carriers>Carrier>Claims tab Provider ID Preference (pull down list).
24j	Rendering Provider ID (upper line)	1. Setup>Preferences>Provider Preferences>Provider>Carrier Options>Override rendering provider secondary ID and qualifier.

		2. Setup>Preferences>Provider Preferences>Provider>Carrier Options>ID Numbers tab>ID Type>Change>enter ID. ID is selected by a carrier preference.
		3. Setup>Preferences>Provider Preferences>Provider>Provider Options>ID Numbers tab>ID Type>Change>enter ID.
		NOTE: The ID for #2 and #3 above is selected by a carrier preference: Setup>Lookup Lists>Carriers>Carrier>Claims tab Provider ID Preference (pull down list).
		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 Provider NPI (lower line)	1. Setup>Preferences>Provider Preferences>Provider>Carrier Options>Override rendering provider NPI 2. Setup>Preferences>Provider Preferences>Provider>Provider Options>General tab>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>Providers>Provider>ID>enter Social Security Number and/or Employer ID Number.
		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>Tax ID extension
26	Patient's Account No.	Patient>Demographics>General>Patient ID
27	Accept Assignment	1. Setup>Preferences>Provider Preferences>Carrier Options>Carrier>Change>General tab>Override carrier's Accept Assignment settings (check box) 2. Setup>Lookup Lists>Carriers>Carrier>Change>Contract tab>Accept Assignments (check box)
28	Total Charge	Automatically calculated from information in Box(es) 24F
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.
30	Balance Due	Calculated from 28 and 29
31	Signature of Physician	Setup>Preferences>Provider Preferences>Provider>Provider Options>Claims tab (only top line)
31	Date	1. Setup>Preferences>Provider Preferences>Provider>Provider Options>Claims tab>Provider signature on file date. 2. Set from the Computer System Date
32	Facility Address	1. Setup>Lookup Lists>Carriers>Carrier>change>CMS-1500 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\Diagnosis>Case Information>Inpatient tab>Facility>click on the Select button and select the Facility. Edit facilities at Setup>Lookup Lists>Facilities>General tab 3. Patient List>Case\Diagnosis>Case Information>Inpatient tab>Facility>Enter facility information.
32a	Facility NPI	1. Setup>Lookup Lists>Carriers>Carrier>change>CMS-1500 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\Diagnosis>Case Information>Inpatient tab>Facility>click on the Select button and select the Facility. Edit facilities at Setup>Lookup Lists>Facilities>Identification tab>NPI
		3. Patient List>Case\Diagnosis>Case Information>Inpatient tab>Facility>Enter facility NPI.
32b	Facility Secondary ID/Qualifier	1. Setup>Lookup Lists>Carriers>Carrier>change>CMS-1500 tab>Force service provider name and practice address into box 32. This will force the Practice's Facility NPI for all patient's with this Carrier. Setup>Preferences>Practice Preferences>ID Numbers tab>Facility ID Number>Enter ID and, optionally, a qualifier code. If the qualifier is left blank, it will be filled with "LU" on claims.
		2. Patient List>Case\Diagnosis>Case Information>Inpatient 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\Diagnosis>Case Information>Inpatient 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 tab (top 3 lines)
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 tab>Box 33 NPI
33b	Billing Provider secondary ID/Qualifier	1. Setup>Preferences>Provider Preferences>Provider>click on Carrier Options>Carrier>Change>Overrides tab>Override the billing provider secondary ID.
		2. Setup>Preferences>Provider Preferences>Provider>Provider options>Claims tab>Box 33 Qualifier and ID number.
		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.		