



# Sample CMS-1450 Claim Form

**HCPCS code (Box 44):**

- List the unique HCPCS code, J7325, to represent the Synvisc-One or SYNVISIC injection
- Enter the appropriate modifier, -LT or -RT, to denote the specific knee injected

**Serv. units (Box 46):**

- Enter 48 units to identify Synvisc-One or 16 units to identify SYNVISIC

**Procedure revenue codes (Box 42):**

- CMS requires a revenue code on each line item within the UB-04 Claim Form

**Procedure code (Box 44):**

- Enter the CPT-4 code that represents the administered procedure performed, as well as modifier -50 to denote bilateral injection, if applicable

Enter the ICD-9-CM code for the patient's diagnosis/condition.

1		2		3a PAT. CNTL. # 3b MED. REC. #		4 TYPE OF BILL																																			
5 FED. TAX NO.				6 STATEMENT COVERS PERIOD FROM				7 THROUGH																																	
8 PATIENT NAME		9 PATIENT ADDRESS		c		d		e																																	
10 BIRTHDATE		11 SEX		12 DATE		13 HR		14 TYPE		15 SRC		16 DHR		17 STAT		18		19		20		21		22		23		24		25		26		27		28		29 ACCT STATE		30	
31 OCCURRENCE CODE		32 OCCURRENCE DATE		33 OCCURRENCE CODE		34 OCCURRENCE DATE		35 OCCURRENCE CODE		36 OCCURRENCE DATE		37		38		39		40		41		42		43		44		45		46		47		48		49					
42 REV. CD.		43 DESCRIPTION		44 HCPCS / RATE / HPPS CODE		45 SERV. DATE		46 SERV. UNITS		47 TOTAL CHARGES		48 NON-COVERED CHARGES		49																											
50 PAYER NAME		51 HEALTH PLAN ID		52 REL. RFD		53 AMB. BEN.		54 PRIOR PAYMENTS		55 EST. AMOUNT DUE		56 NPI		57 OTHER PRV. ID																											
58 INSURED'S NAME		59 PREL.		60 INSURED'S UNIQUE ID		61 GROUP NAME		62 INSURANCE GROUP NO.																																	
63 TREATMENT AUTHORIZATION CODES		64 DOCUMENT CONTROL NUMBER		65 EMPLOYER NAME																																					
66		67		68																																					
69 ADMIT. DX		70 PATIENT PRISON DX		71 PPS CODE		72		73																																	
74 PRINCIPAL PROCEDURE CODE		75 OTHER PROCEDURE CODE		76 OTHER PROCEDURE CODE		77 ATTENDING NPI		78 QUAL																																	
79 OPERATING NPI		80 OTHER NPI		81 QUAL		82		83																																	
84		85		86		87		88																																	
89		90		91		92		93																																	
94		95		96		97		98																																	
99		100		101		102		103																																	

For demonstration use only. Actual patient coverage will differ on a case-by-case basis.