



Date of Service	06/18/2014				Waiver?	<input type="checkbox"/>	Account	6678954		
Patient Name	Coleman H Parker				Insurance	BCBS #YTG1234/ Medicare # 222-33-4444DD				
					Subscriber	Patricia G Henderson				
Address	12 McKenzie Road Albany, Oregon 97321				Group #	YTG1234		Previous balance	\$0.00	
					Copay			Today's charges		
Phone	541-777-7777				NPI	2313890		Today's payment check #		
DOB	07/07/1949	Age	65	Sex	M	Physician name	Seymour Koffs, DO		Balance due	

Rank	Office Visit	New	Est
<input type="checkbox"/>	Minimal		99211
<input type="checkbox"/>	Problem focused	99201	99212
<input checked="" type="checkbox"/>	Expanded problem focused	99202	99213
<input type="checkbox"/>	Detailed	99203	99214
<input type="checkbox"/>	Comprehensive	99204	99215
<input type="checkbox"/>	Comprehensive (new patient)	99205	
<input type="checkbox"/>	Significant, separate service	-25	-25
Well visit	New	Est	
<input type="checkbox"/>	<1 y	99381	99391
<input type="checkbox"/>	1-4 y	99382	99392
<input type="checkbox"/>	5-11 y	99383	99393
<input type="checkbox"/>	12-17 y	99384	99394
<input type="checkbox"/>	18-39 y	99385	99395
<input type="checkbox"/>	40-64 y	99386	99396
<input type="checkbox"/>	65 y +	99387	99397

Medicare preventive services		
<input type="checkbox"/>	Pap	Q0091
<input type="checkbox"/>	Pelvic & breast	G0101
<input type="checkbox"/>	Prostate/PSA	G0103
<input type="checkbox"/>	Tobacco counseling/3-10 min	99406
<input type="checkbox"/>	Tobacco counseling/>10 min	99407
<input type="checkbox"/>	Welcome to Medicare exam	G0344
<input type="checkbox"/>	ECG w/Welcome to Medicare exam	G0366
<input type="checkbox"/>	Flexible sigmoidoscopy	G0104
<input type="checkbox"/>	Hemoccult, guaiac	G0107
<input type="checkbox"/>	Flu shot	G0008
<input type="checkbox"/>	Pneumonia shot	G0009

Consultation/preop clearance		
<input type="checkbox"/>	Expanded problem focused	99242
<input type="checkbox"/>	Detailed	99243
<input type="checkbox"/>	Comprehensive/mod complexity	99244
<input type="checkbox"/>	Comprehensive/high complexity	99245
Other services		
<input type="checkbox"/>	After posted hours	99050
<input type="checkbox"/>	Evening/weekend appointment	99051
<input type="checkbox"/>	Home health certification	G0180
<input type="checkbox"/>	Home health recertification	G0179
<input type="checkbox"/>	Post-op follow-up	99024
<input type="checkbox"/>	Prolonged/30-74 min	99354
<input type="checkbox"/>	Special reports/forms	99080
<input type="checkbox"/>	Disability/workers comp	99455

Radiology		
Diagnoses		
1	ICD 10 = I10	
2		
3		
4		

Next Office Visit				
Recheck	Prev.	PRN	DWMY	
Instructions				
Referral				
To:				
Instructions:				
Physician Signature				

Rank	Office procedures	Units
<input type="checkbox"/>	Anoscopy	46600
<input type="checkbox"/>	Audiometry	92551
<input type="checkbox"/>	Cerumen Removal	69210
<input type="checkbox"/>	Colposcopy	57452
<input type="checkbox"/>	Colposcopy w/biopsy	57455
<input type="checkbox"/>	ECG, w/interpretation	93000
<input type="checkbox"/>	ECG, rhythm strip	93040
<input type="checkbox"/>	Endometrial biopsy	58100
<input type="checkbox"/>	Flexible sigmoidoscopy	45330
<input type="checkbox"/>	Flexible sigmoidoscopy w/biopsy	45331
<input type="checkbox"/>	Fracture care, cast/splint	
<input type="checkbox"/>	Site: _____	29
<input type="checkbox"/>	Nebulizer	94640
<input type="checkbox"/>	Nebulizer demo	94664
<input type="checkbox"/>	Spirometry	94010
<input type="checkbox"/>	Spirometry, pre and post	94060
<input type="checkbox"/>	Tympanometry	92567
<input type="checkbox"/>	Vasectomy	55250

Skin Procedures			Units
<input type="checkbox"/>	Burn care, initial		16000
<input type="checkbox"/>	Foreign body, skin, simple		10120
<input type="checkbox"/>	Foreign body, skin, complex		10121
<input type="checkbox"/>	I&D, abscess		10060
<input type="checkbox"/>	I&D, hematoma/seroma		10140
<input type="checkbox"/>	Laceration repair, simple		120
<input type="checkbox"/>	Site: _____	Size: _____	
<input type="checkbox"/>	Laceration repair, layered		120
<input type="checkbox"/>	Site: _____	Size: _____	
<input type="checkbox"/>	Lesion, biopsy, one		11100
<input type="checkbox"/>	Lesion, biopsy, each add'l		11101
<input type="checkbox"/>	Lesion, destruct, benign, 1-14		17110
<input type="checkbox"/>	Lesion, destruct, premal., single		17000
<input type="checkbox"/>	Lesion, destruct, premal., ea. Add'l		17003
<input type="checkbox"/>	Lesion, excision, benign		114
<input type="checkbox"/>	Site: _____	Size: _____	
<input type="checkbox"/>	Lesion, excision, malignant		116
<input type="checkbox"/>	Site: _____	Size: _____	
<input type="checkbox"/>	Lesion, paring/cutting, one		11055
<input type="checkbox"/>	Lesion, paring/cutting, 2-4		11056
<input type="checkbox"/>	Lesion, shave		113
<input type="checkbox"/>	Site: _____	Size: _____	
<input type="checkbox"/>	Nail removal, partial		11730
<input type="checkbox"/>	Nail removal, w/matrix		11750
<input type="checkbox"/>	Skin tag, 1-15		11200

Medications			Units
<input type="checkbox"/>	Ampicillin, up to 500mg		J0290
<input type="checkbox"/>	B-12, up to 1,000 mcg		J3420
<input type="checkbox"/>	Epinephrine, up to 1ml		J0170
<input type="checkbox"/>	Kenalog, 10mg		J3301
<input type="checkbox"/>	Lidocaine, 10mg		J2001
<input type="checkbox"/>	Normal saline, 1000cc		J7030
<input type="checkbox"/>	Phenergan, up to 50mg		J2550
<input type="checkbox"/>	Progesterone, 150 mg		J1055
<input type="checkbox"/>	Rocephin, 250mg		J0696
<input type="checkbox"/>	testosterone, 200mg		J1080
<input type="checkbox"/>	Tigan, up to 200 mg		J3250
<input type="checkbox"/>	Tora dol, 15 mg		J1885

Miscellaneous services		

Rank	La boratory	Units
<input type="checkbox"/>	Venipuncture	36415
<input type="checkbox"/>	Blood glucose, monitoring device	82962
<input type="checkbox"/>	Blood glucose, visual dipstick	82948
<input type="checkbox"/>	CBC, w/ auto differential	85025
<input type="checkbox"/>	CBC, w/o auto differential	85027
<input type="checkbox"/>	Cholesterol	82465
<input type="checkbox"/>	Hemoccult, guaiac	82270
<input type="checkbox"/>	Hemoccult, immunoassay	82274
<input type="checkbox"/>	Hemoglobin A1C	85018
<input type="checkbox"/>	Lipid panel	80061
<input type="checkbox"/>	Liver panel	80076
<input type="checkbox"/>	KOH prep (skin, hair, nails)	87220
<input type="checkbox"/>	Metabolic panel, basic	80048
<input checked="" type="checkbox"/>	Metabolic panel, comprehensive	80053
<input type="checkbox"/>	Mononucleosis	86308
<input type="checkbox"/>	Pregnancy, blood	84703
<input type="checkbox"/>	Pregnancy, urine	81025
<input type="checkbox"/>	Renal panel	80069
<input type="checkbox"/>	Sedimentation rate	85651
<input type="checkbox"/>	Strep, rapid	86403
<input type="checkbox"/>	Strep culture	87081
<input type="checkbox"/>	Strep A	87880
<input type="checkbox"/>	TB	86580
<input type="checkbox"/>	UA, complete, non-automated	81000
<input type="checkbox"/>	UA, w/o micro, non-automated	81002
<input type="checkbox"/>	UA, w/ micro, non-automated	81003
<input type="checkbox"/>	Urine colony count	87086
<input type="checkbox"/>	Urine culture, presumptive	87088
<input type="checkbox"/>	Wet mount/KOH	87210

Vaccines		
<input type="checkbox"/>	DT, <7 y	90702
<input type="checkbox"/>	DTP	90701
<input type="checkbox"/>	DtaP, <7 y	90700
<input type="checkbox"/>	Flu, 6-35 months	90657
<input type="checkbox"/>	Flu, 3 y+	90658
<input type="checkbox"/>	Hep A, adult	90632
<input type="checkbox"/>	hep A, ped/adol, 2 dose	90633
<input type="checkbox"/>	Hep B, adult	90746
<input type="checkbox"/>	Hep B, ped/adol, 3 dose	90744
<input type="checkbox"/>	Hep B-Hib	90748
<input type="checkbox"/>	Hib, 4 dose	90645
<input type="checkbox"/>	HPV	90649
<input type="checkbox"/>	IPV	90713
<input type="checkbox"/>	MMR	90707
<input type="checkbox"/>	Pneumonia, >2 y	90732
<input type="checkbox"/>	Pneumonia conjugate, <5 y	90669
<input type="checkbox"/>	Td, >7 y	90718
<input type="checkbox"/>	Varicella	90716

Immunizations & Injections			Units
<input type="checkbox"/>	Allergen, one		95115
<input type="checkbox"/>	Allergen, multiple		95117
<input type="checkbox"/>	Imm admin, one		90471
<input type="checkbox"/>	Imm admin, each add'l		90472
<input type="checkbox"/>	Imm admin, intranasal, one		90473
<input type="checkbox"/>	Imm admin, intranasal, each add'l		90474
<input type="checkbox"/>	Injection, joint, small		20600
<input type="checkbox"/>	Injection, joint, intermediate		20605
<input type="checkbox"/>	Injection, joint, major		20610
<input type="checkbox"/>	Injection, ther/proph/diag		90772
<input type="checkbox"/>	Injection, trigger point		20552

Supplies		