

# HYALGAN® CMS-1450/UB-04 SAMPLE CLAIM FORM

1		2		3a PAT CNTL #		4 TYPE OF BILL	
b. MED. REC. #		5 FED. TAX NO.		6 STATEMENT COVERS PERIOD FROM		7 THROUGH	
8 PATIENT NAME				9 PATIENT ADDRESS			
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 DATE		32 OCCURRENCE DATE		33 OCCURRENCE DATE	
34 OCCURRENCE DATE		35 CODE		36 OCCURRENCE SPAN FROM		37 THROUGH	
38		39 VALUE CODES AMOUNT		40 SERVICE UNITS		41 VALUE CODES AMOUNT	
42 REV. CD.		43 DESCRIPTION		44 HCPCS / ICD-10 / HIPS CODE		45 SERV. DATE	
46 SERV. UNITS		47 TOTAL CHARGES		48 NON-COVERED CHARGES		49	
1		0636		J7321		X	
2		0510		2060 - 50		1	
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PAGE		OF		CREATION DATE		TOTALS	
50 PAYER NAME		51 HEALTH PLAN ID		52 FILL BNO		53 ORIG BNO	
54 PRIOR PAYMENTS		55 EST. AMOUNT DUE		56 NPI		57 OTHER PRV ID	
58 INSURED'S NAME		59 P.REL.		60 INSURED'S UNIQUE ID		61 GROUP NAME	
62 INSURANCE GROUP NO.		63 EMPLOYER NAME		64		65	
66		67		68		69	
70		71		72		73	
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98		99		00		01	

**Box 44: HCPCS Code**  
Enter HCPCS code for HYALGAN® J7321—Hyaluronan or derivative, HYALGAN®, for intra-articular injection, per dose

**Box 46: Service Units**  
Enter number of HYALGAN® units administered  
Example: 1 service unit for each dose

**Fields 42-43:** Enter the appropriate revenue code and description corresponding to the HCPCS code in Field 44  
- 0636 for HYALGAN®  
- 0510 for knee joint injection administered in the outpatient clinic  
Note: Other revenue codes may apply

**Box 44: CPT Code**  
Enter appropriate CPT code and modifier  
Example: 20610—Arthrocentesis, aspiration, and/or injection; major joint or bursa [eg, shoulder, hip, knee joint, subacromial bursa]

**Field 66:** Identify the type of ICD diagnosis code used  
- Enter a "0" for ICD-10-CM

**Fields 67 and 67A-67Q:** Enter appropriate ICD-10-CM diagnosis M17.0-Bilateral primary osteoarthritis of knee (specific 4th and 5th digits depend on medical record documentation)  
Note: Other diagnoses codes may apply

**Box 74: Principal Procedure Code & Date**  
Enter principal ICD-10-PCS procedure code and date  
Example: 3E0U3GC for percutaneous knee joint injection of a therapeutic substance

DISCLAIMER: HYALGAN® Sample Claim Form CMS-1450/UB-04 is intended solely for use as a resource tool to assist physician office and hospital outpatient billing staff regarding reimbursement issues. Any determination about if and how to seek reimbursement should be made only by the appropriate members of the physician office or hospital outpatient staff in consultation with the physician and in consideration of the procedure performed or therapy provided to a specific patient. FIDIA FARMACEUTICI S.P.A./FIDIA PHARMA USA INC. do not recommend or endorse the use of any particular diagnosis or procedure code(s) and makes no determination if or how reimbursement may be available. Of important note, reimbursement codes and payment, as well as health policy/legislation are subject to continual change; information contained in this version of the HYALGAN® Reimbursement Guide is current as of January 2020.