Populating Item 15 on the New CMS-1500 (02-12) Form

This document will detail:

- Information about Item 15
- How to populate Item 15

Information about Item 15 (Other Date)

The National Uniform Claim Committee (NUCC) claim form specification state to use Item 15 to identify additional date information about the patient's condition.   Report the information that is required by the payer receiving claims.

Populating Item 15 (Other Date)

Qualifier 439

To populate Item 15 with a 439 qualifier for Accident, enter the date in the Illness/Injury Date field, then check Auto, Work, or Other under the Related to Accident field. **If Auto is selected, you must also select the state the accident occurred. Remember to save your changes.**

Qualifier 304

To populate Item 15 with a 304 qualifier for Last Visit or Consultation, go to the All Fields tab in the Header, enter the date in the Ref (Last Seen) Date field and save your changes.

Additional Information
There are 2 other qualifiers that can populate Item 15 – 454 for Initial Treatment Date and 455 for Last X-ray, however present specifications from Medicare state that Item 15 is not used. They go on to say to use Item 19 to report this information.
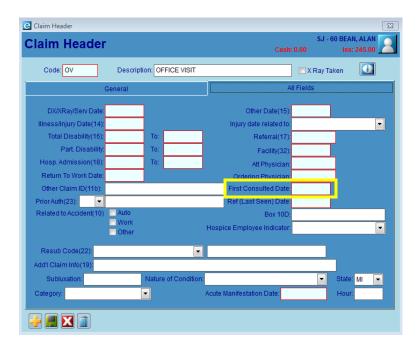
Item 15 - Leave blank.

Item 19 - Enter either a 6-digit (MM | DD | YY) or an 8-digit (MM | DD | CCYY) date patient was last seen and the NPI of his/her attending physician when a physician providing routine foot care submits claims.

NOTE: Effective May 23, 2008, all provider identifiers submitted on the CMS-1500 *claim form* MUST be in the form of an NPI.

Enter either a 6-digit (MM | DD | YY) or an 8-digit (MM | DD | CCYY) x-ray date for chiropractor services (if an x-ray, rather than a physical examination was the method used to demonstrate the subluxation). By entering an x-ray date and the initiation date for course of chiropractic treatment in item 14, the chiropractor is certifying that all the relevant information requirements (including level of subluxation) of Pub. 100-02, Medicare Benefit Policy Manual, chapter 15, is on file, along with the appropriate x-ray and all are available for *A/B MAC (B)* review.

Qualifier 454

To populate Item 15 with a 454 qualifier for Initial Treatment date (for all insurances aside from Medicare), go to the All Fields tab in the Header and enter the date in the First Consulted Date field. Keep in mind that on paper claims only one date can populate Item 15.

If Chiropractic or procedure code is marked Spinal Manipulation, Item 15 will populate in this order:

1st – 454 First consulted date

2nd – 439 Illness/Injury Date (Auto/Work/Other checked)

3rd – 304 Ref (Last Seen) Date

For all other practice types and non-spinal manipulation claims, Item 15 will populate in this order:

1st – 439 Illness/Injury Date (Auto/Work/Other checked)

2nd – 304 Ref (Last Seen) Date

Electronically, any/all of these dates will populate if they are chosen in the header.

As payers update their specifications for the new CMS-1500 (02-12) form, we will be making additional programming changes. These dates and qualifiers **do** report electronically.