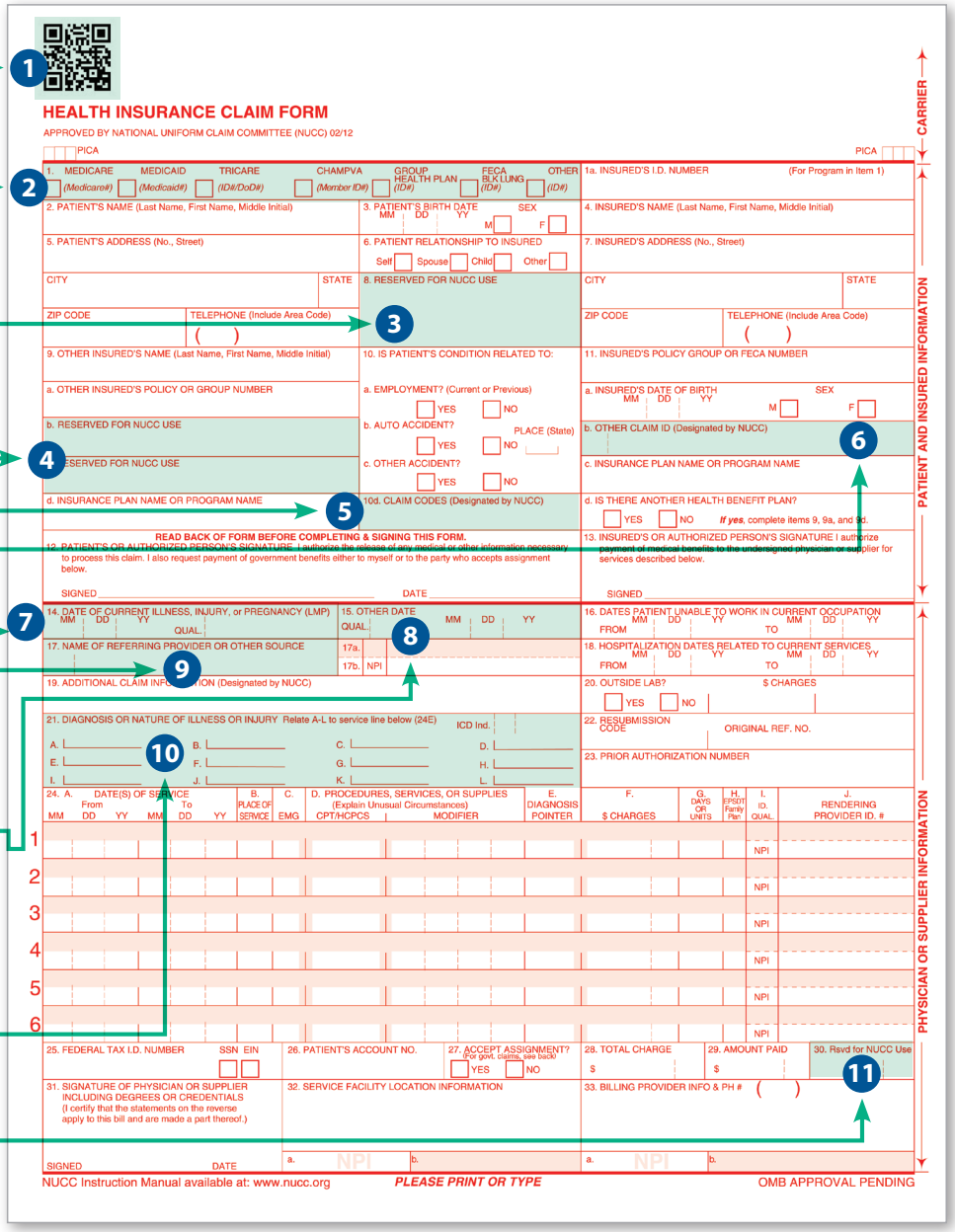
The Revised CMS-1500 Form … at a Glance

The Office of Management and Budgets (OMB) has approved a revised CMS-1500 health insurance claim form (version 02/12) to replace the current form (version 08/05). TFP Data Systems, the designated provider of the form, worked directly with the National Uniform Claim Committee (NUCC) on the form's development and distribution.

The revisions, which better align the CMS-1500 with certain changes in the electronic Health Care Claims, are:

1. 1500 symbol replaced with a scannable QR code that takes the user to the NUCC CMS-1500 landing page.
2. **1** – Minor changes to the wording of payer ID number requirements.
3. **8** - Changed to "RESERVED FOR NUCC USE" ("PATIENT STATUS" removed from the form).
4. **9b** and **9c** – Replaced with "RESERVED FOR NUCC USE" ("EMPLOYER'S NAME OR SCHOOL NAME" removed from the form).
5. **10d** – Changed to "CLAIM CODES (Designated by NUCC)."
6. **11b** – Changed to "OTHER CLAIM ID (Designated by NUCC)."
7. **14** – Minor changes to layout of field.
8. **15** – Removed "IF PATIENT HAS HAD SAME OR SIMILAR ILLNESS, GIVE FIRST DATE."
9. **17** – Added a field to report a qualifier to identify which provider is being reported.
10. **21** – Added eight additional lines for diagnosis or nature of illness/injury.
11. **30** – Replaced with "Rsvd for NUCC Use" ("BALANCE DUE" removed from the form).



File Claims with Complete Confidence

The TFP-supported CMS-1500 offers some distinct advantages for healthcare customers. It is 100% compliant and printed to exact specifications. It also uses soy-based OCR "dropout" red ink and SFI (Sustainable Forestry Initiative) 20# paper for greater scanning accuracy. As a result, we're so confident of our CMS-1500 form's acceptance by insurance carriers that we offer **Anti-Rejection Protection**™ *

Our forms are fully compliant and rejection-proof to ensure quicker payment by insurance companies.

Please be aware that the revised form is available for testing and preparation purposes only, and should not be used for official claims submission at this time.

**If a CMS-1500 form manufactured by TFP is rejected by an insurance carrier due to improper formatting or print quality, TFP will provide a full replacement order of the purchaser's forms. To qualify, the purchaser must notify his/her forms provider no later than 20 days after the rejection letter is issued. Upon review of the rejection letter and confirmation that the rejected forms were manufactured by TFP, TFP will send a full replacement order of the affected items. This Anti-Rejection Protection™ limited warranty applies to rejections based on the form itself being invalid due to ink quality or formatting, such as data elements being improperly positioned or misaligned. This protection does not apply to missing or incorrect entries provided by the user.*

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