

1 BANNER SURGICAL 3600 DALLAS HIGHWAY SUITE 230-282 MARIETTA, GA 30064 2 866-411-2525 PHONE 800-865-8691 FAX										Medical Medical Medical, Illinois Alask, 12345 1234567890 Contact										3a PAT. CNTL# b.MED REC # 5 FEED TAX No.					6 STATEMENT COVERS PERIOD FROM THROUGH					4 TYPE OF BILL 7							
8 PATIENT NAME a Test Mananger b Test Mananger										8 PATIENT ADDRESS b										a c d 0 e																	
10 BIRTHDATE		11 SEX		ADMISSION				16 DHR		17 SAT		CONDITION CODES										29 A CDT STA TE		30													
12-12-2000				12 Date		13 HR		14 TYPE		15 SRC						18		19		20		21		22		23		24		25		26		27		28	
31 OCCURRENCE CODE DATE		32 OCCURRENCE CODE DATE		33 OCCURRENCE CODE DATE		34 OCCURRENCE CODE DATE		35 OCCURRENCE CODE FROM THROUGH		36 OCCURRENCE CODE FROM THROUGH		37																									
, 0 Mob. No.0 Office. No.0										VALUE CODES CODE AMOUNT					VALUE CODES CODE AMOUNT					VALUE CODES CODE AMONT																	
										a																											
										b																											
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										d																											
42 REV. CD.		43 DESCRIPTION										44 HCPCS/R ATE/HIPPS CODE		45 SERV. DATE		45 SERV. UNITS		47 TOTAL CHARGES		48 NON-COVERED CHARGES		49															
73221		Xray Hip, 1 View										73221		31-12-69				0.00																			
73030		MRI Upper Extremity, Joint										73030		31-12-69				0.00																			
		Page ____1____ of ____1____										CREATION DATE		12-03-15		TOTAL		0.00		00		0 00															
50 PAYER NAME										51 HEALTH PLAN ID		52 REL INFO		53 ASG. BEN		54 PRIOR PAYMENT		55 EST. AMOUNT DUE		56 NPL																	
																		57 OTHER PRV ID																			
58 INSURED'S NAME										59 P. REL		60 INSURED'S UNIQUE ID		61 GROUP NAME		62 INSURANCE GROUP NO.																					
63 TREATMENT AUTHORIZATION CODES										64 DOCUMENT CONTROL NUMBER										65 EMPLOYER NAME																	
66 DX																																		68			
69 ADMIT DX				70 PATIENT REASON DX								71 PPS CODE				72 ECI														73							
7 4		PRINCIPAL PROCEDURE		a		OTHER PROCEDURE		b		OTHER PROCEDURE		75				76 ATTENDING		NPL		QUAL																	
		CODE		DATE		CODE		DATE		CODE		DATE				LAST Medical				FIRST Medical																	
7 4		OTHER PROCEDURE		a		OTHER PROCEDURE		b		OTHER PROCEDURE						77 OPERATING		NPL		QUAL																	
		CODE		DATE		CODE		DATE		CODE		DATE				LAST Medical				FIRST Medical																	
80 REMARKS				81 CC												78 OTHER		NPL		QUAL																	
				a												LAST Medical				FIRST Medical																	
				b																																	
				c												79 OTHER		NPL		QUAL																	
				d												LAST Medical				FIRST Medical																	