UB-04 / CMS-1450 Form Locator Cheat Sheet

A quick map of common institutional paper-claim form locators.

Common form locators

1	Provider name/address/telephone	Billing provider identification.
3a	Patient control number	Provider-assigned account/control number.
3b	Medical/health record number	Medical record identifier when applicable.
4	Type of Bill (TOB)	Facility type, bill classification/frequency.
6	Statement covers period	From/through dates for the billing period.
8	Patient name / ID details	Patient identity information.
10–12	Birth date / sex / admission date	Core patient/admission fields.
14–17	Admission/priority/discharge/status	Admission and patient status context.
18–28	Condition codes	Conditions that affect processing; use current code-set rules.
29	Accident state	State associated with accident when applicable.
31–34	Occurrence codes/dates	Events/dates affecting the claim.
35–36	Occurrence span codes/dates	Date ranges for defined events.
39–41	Value codes/amounts	Code/amount pairs for required values.
42	Revenue code	Revenue center/service category.
43	Revenue description	Description associated with revenue line.
44	HCPCS/rate/HIPPS	Procedure/rate information as applicable.
45	Service date	Date associated with revenue line when required.
46	Service units	Units for the revenue/service line.
47	Total charges	Revenue-line charge amounts.
50	Payer name	Primary/secondary/other payer identification.
56	Billing provider NPI	NPI for billing provider.
58–62	Insured/subscriber/policy data	Subscriber identity and plan/group information.
63	Treatment authorization codes	Authorization/reference codes when required.
66	Diagnosis/procedure code qualifier	Qualifier for diagnosis/procedure coding system.
67	Principal diagnosis	Principal diagnosis and POA where applicable.
67A–Q	Other diagnoses	Additional diagnosis fields.
69	Admitting diagnosis	Admission diagnosis when applicable.
70	Patient reason for visit	Reason-for-visit diagnosis fields.
74	Principal procedure/date	Principal procedure and date when applicable.
76–79	Attending/operating/other providers	Provider names/NPIs by role.
80	Remarks	Additional payer/program information when permitted/required.

Code-set caution: UB-04 data specifications and many institutional billing codes are maintained by NUBC. Use current licensed NUBC/payer instructions for allowed values; this sheet is a locator map, not a code-set replacement.

Official references: CMS / NUBC: cms.gov/medicare/coding-billing/electronic-billing/institutional-paper-claim-form · nubc.org