

INPATIENT (CMS-1450)

SAMPLE FORM - FOR EDUCATIONAL PURPOSES ONLY



SPEVIGO and the associated services provided in an inpatient setting are billed on the UB-04 claim form or its electronic equivalent. A sample UB-04 claim form for billing SPEVIGO is provided below.*

Sample Hospital Technical Billing Form: Inpatient Prospective Payment System (IPPS) Setting

UB-04 CMS-1450

1		2		NUBC National Uniform Billing Committee		38 PAT CNTL#		4 TYPE OF BILL	
8 PATIENT NAME		9 PATIENT ADDRESS		5 FED. TAX NO.		6 STATEMENT COVERS PERIOD FROM		7 THROUGH	
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 ACI STAT	
30		31 OCCURRENCE DATE		32 OCCURRENCE DATE		33 OCCURRENCE DATE		34 OCCURRENCE DATE	
35		36		37		38		39	
40		41		42		43		44	
45		46		47		48		49	
50 PAYER NAME		51 HEALTH PLAN ID		52 REL INFO		53 BIRTH		54 PRIOR PAYMENTS	
55 EST. AMOUNT DUE		56 NP		57		58		59	
60 INSURED'S NAME		61 INSURED'S UNIQUE ID		62 GROUP NAME		63		64	
65 TREATMENT AUTHORIZATION CODES		66 DOCUMENT CONTROL NUMBER		67 EMPLOYER NAME		68		69	
70 ADMIT DX		71 PATIENT REASON DX		72 PPS CODE		73		74	
75		76		77		78		79	
80 REMARKS		81 CC		82		83		84	

Box 42:
Revenue Codes
Enter appropriate revenue code for each line item:
0636
0260

Box 43:
Enter the description of the revenue code used:
- Spesolimab
- Intravenous infusion, for therapy, prophylaxis, or diagnosis; initial, up to 1 hour
- Each additional hour

Box 66:
ICD-10 Code:
L40.1

Box 4:
Place of Service

Box 44:
HCPCS/CPT Code:
J1747
96365
96366

Box 46:
Number of Units: 900

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