

UB04 Box 74 - Where do I add the Principal Procedure Code for an institutional claim?

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For inpatient claims where a procedure was performed, the claim must include the procedure code(s) and dates on which they were performed. This field is not currently required on outpatient claims. Be sure to check the [Medicare Claims Processing Manual](#) for any updates.

DrChrono makes it easy to add this information to the claim. You can add 1 primary code (will print in box 74a) and up to 4 additional codes (will print in boxes 74b - 74e).

Line items transactions

#	Diagnosis Code	Description	POA	
	<input type="text" value="Add ICD-10 code"/>			<input type="button" value="Switch to ICD-9"/>
Print	<input type="text" value="Principal Dx Code"/>		<input type="text" value="Exempt from"/>	<input type="button" value="x"/>
Adm	<input type="text" value="Admitting Dx Code"/>			<input type="button" value="x"/>

#	Procedure Code	Description	Service Date	
	<input type="text" value="Add Procedure"/>			
Print	<input type="text"/>		<input type="text"/>	<input type="button" value="x"/>
a			<input type="text"/>	<input type="button" value="x"/>
b			<input type="text"/>	<input type="button" value="x"/>

- **Red arrow** - primary procedure code; will print in UB04 box 74a
- **Blue arrow** - additional procedure codes; will print in order of entry in UB04 boxes 74b - 74e
- **Green arrow** - date of procedure