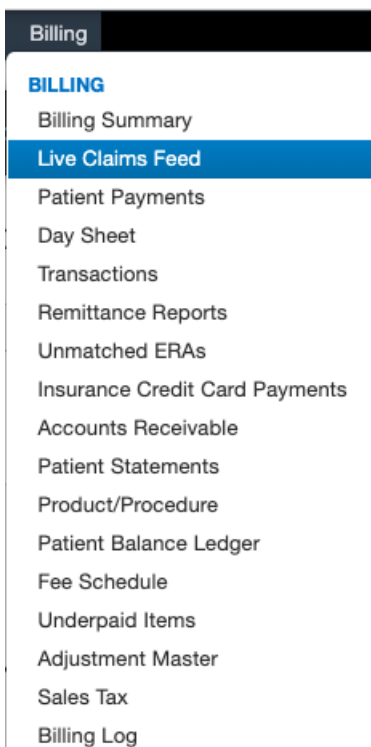


HCFA 1500 Box 11 - How to enter 'NONE' to be displayed

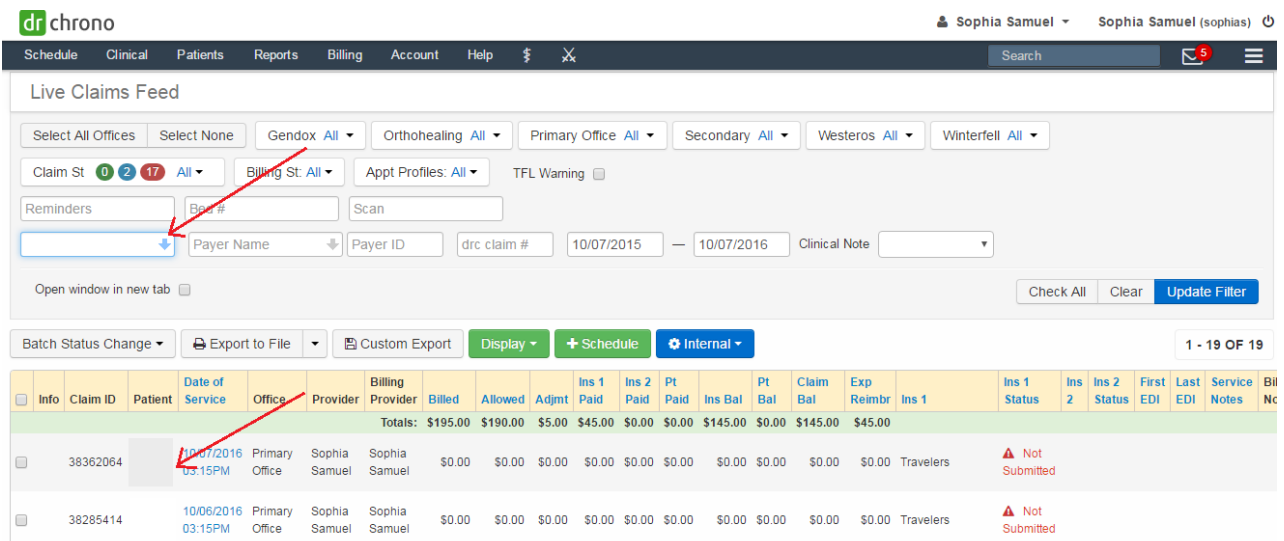
07/24/2024 3:05 pm EDT

Most insurances do not require box #11 (Insured's policy group or FECA number) to display the word "NONE". However, you may come across this scenario specifically with Medicare. To update this information, please follow the steps outlined below:

1. Hover over **Billing** and select **Live Claims Feed**:



2. Search for the patient in the **Patient** field and click on the patient name which will access the demographics screen:

A screenshot of the 'dr chrono' software interface. The top navigation bar includes 'Schedule', 'Clinical', 'Patients', 'Reports', 'Billing', 'Account', 'Help', and a search bar. The 'Billing' menu is open, and 'Live Claims Feed' is selected. The interface shows various filters and search options, including 'Select All Offices', 'Gendox', 'Orthohealing', 'Primary Office', 'Secondary', 'Westeros', and 'Winterfell'. A red arrow points to the 'Patient' field in the search criteria. Below the filters, there is a table with columns for 'Info', 'Claim ID', 'Patient', 'Date of Service', 'Office', 'Provider', 'Billing Provider', 'Billed', 'Allowed', 'Adjmt', 'Ins 1 Paid', 'Ins 2 Paid', 'Pt Paid', 'Ins Bal', 'Pt Bal', 'Claim Bal', 'Exp Reimbr', 'Ins 1 Status', 'Ins 2 Status', 'First EDI', 'Last EDI', 'Service Notes', and 'Bl'. The table contains two rows of data, both with a 'Not Submitted' status. A red arrow points to the 'Patient' field in the first row of the table.

3. In the demographics screen, click on the **Insurances** tab > select **Primary Insurance** or **Secondary Insurance** depending on the insurance that you want to update.

Enter **NONE** in the **Insurance group number** field and click **Save Demographics**. This will allow the word **NONE** to appear in box #11 on the HCFA 1500 form.

The screenshot shows a web application interface for managing patient insurance. At the top, there is a navigation bar with tabs: Schedule, Clinical, Patients, Reports, Billing, Account, Help, and a search bar. Below this is a sub-navigation bar with tabs: Important, Demographics, Insurances, Eligibility, Authorizations, Smoking Status, Flags, Balance, and onpatient. A green button '+ Add new patient' is on the left. A sidebar on the left contains a 'Demographics' section with various menu items: Appointments, Clinical Dashboard, Documents, Tasks (2), Problem List (5), Medication List (1), Send eRx, Allergy List (1), Drug Interactions (0), CQMs, Intake Data, Lab Orders, Immunizations, Growth Charts, onpatient Access, Education Resources, Communication, and Family History. The main content area is titled 'Primary Insurance' and contains several form fields: 'Subscriber is the Patient' (checked), 'Insurance Company' (UnitedHealthcare), 'Address' (PO Box 30757, Salt Lake City, UT 84130), 'Carrier Payer ID' (87726), 'TPL Code' (empty), 'Insurance ID Number' (1504642121), 'Insurance group name' (empty), 'Insurance group number' (NONE), 'Insurance plan name' (empty), 'Insurance plan type' (empty), 'Insurance claim office number' (empty), 'Number visits allowed per year' (empty), 'Card issued date' (empty), and 'Primary Insurance Notes' (empty). Below these are 'Insurance Photo Front' and 'Insurance Photo Back' fields, each with a 'Choose File' button. At the bottom, there is an 'HCFA Options' section with 'Default Onset Date' (empty), 'Default Initial Visit Date' (empty), and 'Prepopulate Last Related Visit' (checked). A blue 'Save Demographics' button is at the bottom center. Red arrows point to the 'Insurances' tab, the 'Primary Ins' button, the 'Insurance group number' field, the 'NONE' value, and the 'Save Demographics' button.

Primary Insurance Patient Insurance History

Subscriber is the Patient Insured person is the same person as the Patient

Insurance Company UnitedHealthcare *contact support if you can't find an insurance company.

PO Box 30757, Salt Lake City, UT 84130

Carrier Payer ID 87726

TPL Code *if the Medicaid is Secondary

Insurance ID Number 1504642121

Insurance group name *if available

Insurance group number NONE *if available

Insurance plan name *if available

Insurance plan type *if available

Insurance claim office number *if available

Number visits allowed per year

Card issued date *Required for checking eligibility of CA Medicaid

Primary Insurance Notes

Insurance Photo Front Choose File No file chosen

Insurance Photo Back Choose File No file chosen

HCFA Options

Default Onset Date HCFA Box #14

Default Initial Visit Date HCFA Box #15

Prepopulate Last Related Visit HCFA Box #19

Save Demographics