

WHA Information Center

Revenue Record - **IMPLEMENTATION 07/01/07** - updated 10/2007

The fields highlighted in pink in the Field Name column are required by freestanding ambulatory surgery centers (FASCs).

The fields highlighted in red cannot be submitted (are not allowed) for that data type.

Field #	Field Name	Length	Decimal Places	Description	IP	OP	Appendix	UB04	837I-4010A1	CMS-1500	837P-4010A1
1	RECTYPE	1		Record Type = R	X	X					
2	FNUM	10		Facility Number	X	X	I				
3	PCONTROL	24		Patient Control No.	X	X		3a	2300, CLM01	26	2300, CLM01
4	REVCODE	4		Revenue Code	X	Hospitals		42	2400, SV201		
5	HCPCSRATE	9	2 for rates	HCPCS/Rates/HIPPS Rates	Rates	Codes		44	2400, SV202-2, 2400 Sv206	24 D	2400, SV101
6	HCPCSMOD1	2		CPT/HCPCS Level II Modifier		X		44 (characters 6&7)	2400, SV202-3	24 D	2400, SV101
7	HCPCSMOD2	2		CPT/HCPCS Level II Modifier		X		44 (characters 8&9))	2400, SV202-4	24 D	2400, SV101
8	HCPCSMOD3	2		CPT/HCPCS Level II Modifier		X		44 (characters 10&11)	2400, SV202-5	24 D	2400, SV101
9	HCPCSMOD4	2		CPT/HCPCS Level II Modifier		X		44 (characters 12&13)	2400, SV202-6	24 D	2400, SV101
10	SERVDATE	8		Service Date (mmddyyyy)		X		45	2400, DTP03	24 A	2400, DTP03
11	UNITSERV	7		Units of Service	X	X		46	2400, SV205	24 G	2400, SV104
12	REVCHG	12	2	Line Item Charge Amount (-) nnnnnnnn.nn	X	X		47	2400, SV203	24 F	2400, SV102