

## Link1500<sup>™</sup> New Form Changes

The following fields have changed in Link1500 to match the changes made for HCFA version 02/12, effective 04/01/2014:

| Field            | Note   |
|------------------|--|
| Box 8            | Reserved for NUCC use  |
| Box 9B           | Reserved for NUCC use  |
| Box 9C           | Reserved for NUCC use  |
| Box 10D          | Claim Codes (Designated by NUCC)   |
| Box 11B          | Other Claim ID - used for workers compensation or property and casualty claims                   |
| Box 14           | Addition of Qualifiers:  |
|                  | 431 Onset of Current Symptoms or Illness   |
|                  | 484 Last Menstrual Period  |
| Box 15           | Addition of Qualifiers:  |
|                  | 454 Initial Treatment  |
|                  | 304 Latest Visit or Consultation   |
|                  | 453 Acute Manifestation of a Chronic Condition   |
|                  | 439 Accident   |
|                  | 455 Last X-ray   |
|                  | 471 Prescription   |
|                  | 090 Report Start (Assumed Care Date)   |
|                  | 091 Report End (Relinquished Care Date)  |
|                  | 444 First Visit or Consultation  |
| Box 17, 17A, 17B | Addition of qualifier, but information will populate from Referring/Other Physician Lookup       |
|                  | DN Referring Physician   |
|                  | DQ Supervising Physician   |
|                  | DK Ordering Physician  |
| Box 21           | Addition of ICD-10-CM indicator (not available for selection at this time; diagonal numbers have |
|                  | also changed to letters  |
| Box 23           | Ability to define value as prior authorization, referral number, mammography pre-certification   |
|                  | number, or CLIA  |
| Box 25           | Selection for box 25 populates box 31 and 33. This information comes from the Physician/         |
|                  | Organization Maintenance screen.   |
| Box 30           | Reserved for NUCC use  |
| Box 32           | Addition of Legacy ID Qualifier – populates from the Facility Information Maintenance screen     |

\*Only enter legacy qualifiers and legacy IDs if required by payer

## **Helpful Hints:**

- If you have always entered your NPI manually into 24J and/or 33A, you will no longer be able to do so. You must go to "Physician/Organization Maintenance" and add the NPIs there.
- Box 24E now requires an alphabetical letter as the DX pointer instead of a numeric integer.
- If you use "Edit/Resubmit Transmitted Claims" to send new dates of service for existing patients, please remember to reselect your Tax ID in field 25 so your NPI will prepopulate fields 24J and 33A on your claim.
- Legacy ID fields in 24J, 32B and 33B do not need to be used if you never used them before 04/01.
- If you have incorrect data on a claim in 24J, 32 or 33, you are no longer able to remove it from an existing claim. Please select "Add a New Claim" to fill in the claim correctly. Once you have transmitted that claim, you will be able to use it for future dates of service just as you always have.