

eForms Express Super-Bill Example

CPT	DESCRIPTION	FEE	CPT	DESCRIPTION	FEE	CPT	DESCRIPTION	FEE
OFFICE SERVICES			PROCEDURE CONT.			IMMUNIZATION - CHILD		
NEW	EST.		93000	EKG		90471	Immun Admin inj. single	
	99211		10060*	I&D Abscess, Simple		90472+	Immun Admin inj. @add'l vaccine	
99201	99212		10061	I&D Abscess, Complex				
99202	99213		11100	Punch Biopsy (each)		90465	Immun Admin inj with VIS under age 8, single	
99203	99214		11101+	Punch Biopsy (each add.)				
99204	99215			Shave Lesion, single trunk		90467	Immun Admin Intranasa/OriI with VIS, under age 8, single	
99205	Complex		11300*	arm or legs, 0.5 or less		90723	Pediarix	
CONSULTS			11305*	scalp, neck, hands, feet, 0.5 cm or less		90700	DTaP Less than 7 years of age	
99241			11310	face, ears, eyelids, lips, mucous mem, 0.5 cm or less		90744	Hep B	
99242			45330	Sigmoidoscopy		90645	Hemoph Infla (HIB)	
99243			11200*	Skin Tag removal (1-15)		90713	IPV	
99244			11201+	Skin Tag removal (add. 10)		90707	MMR	
99245			20552	Trigger Point inj single/multi 1-2 mus. grps		90657	Influenza Virus Vaccine, 6-35 mos	
99080	Special Reports		20553	Trigger Point inj single/multi 3+mus.grps		G0008	Admin. of influenza	
G0375	Smoking Cessation Counseling, 3-10 min		55250	Vasectomy		90669	Prevnar	
G0376	Smoking Cessation Counseling, >10 min		20550	Injection single tendon sheath/ligament		90718	TD	
PREVENTIVE MEDICINE			20551	Injection single tendon origin/insertion		90716	Varicella	
9938	9939	Prevent Age		Destruction benign shin lesion-any size		90649	GARDASIL	
G0101	MC Only	Breast & Pelvic Screen	17000	1st Lesion		IMMUNIZATION - ADULT		
		High Risk Low Risk	17003+	2nd to 14th lesion (each)		90658	Influenza Injection	
Q0091	MC Only	Pap Collection Screen	17004	15 or more		G0009	Admin. of Influenza	
NEW TO MEDICARE PHYSICAL				Destruction - Flat Wart		90732	Pneumococcal Injection	
G0334	Initial Preventive Physical Examination		17110	Up to 14 lesions		G0009	Admin. of Pneumococcal	
G0336	EKG - Routine		17111	15 or more		90746	Hepatitis B Injection	
CERTIFICATION/RE-CERTIFICATION HOME HEALTH			114	Excision of Benign Skin Lesion		G0010	Admin. of Hep B	
G0180	Certification of Home Health Care			Loc: _____ Size: _____ cm		90718	TD	
G0179	Re-Certification of Home Health Care		116	Excision of Malignant Skin Lesion		90715	Tetnus,diphtheria toxoids and acellular	
ADMINISTRATION OF IV INFUSIONS				Loc: _____ Size: _____ cm		G0010	Admin. of Hep B	
90760	IV Infuse-Hydration - up to 1 hr		11730	Ingrown toenail		90718	TD	
90761	IV Infuse-Hydration-Each add'l hr, upto 8hrs		11732+	ingrown toenail each additional		90715	Tetnus,diphtheria toxoids and acellular	
90765	IV Infuse-Therapy- up to 1 hour		LAB					
90766	IV Infuse-Therapy-@each add'l hr upto 8hrs		86580	TB skin test - IPPD				
90767	IV Infuse-Therapy-@add'l seq IV-up to 1 hr		82948	Glucose Finger Stick				
COLPOSCOPY			85014	Hematocrit		90736	ZOSTAVAX (ETMG FURNISHES MEDS)	
57420	Colposcopy, vagina w/cervix		87220	KOH Prep		INJECTIONS		
57421	Colposcopy, w/biopsy /cervix		87804	Rapid Flu		95117	Allergy Inj. Multiple	
57452	Colposcopy, cervix, upper/adjacnt vagina		87880	Rapid Strep		95115	Allergy Inj. Single	
57454	Colposcopy, w/bx, cervix & endocerv curettage		81000	Urinalysis Micro		J3420	B12 up to 1,000mcg	
57455	Colposcopy, w/biopsy, cervix		81002	Urine Dip		J0540	Bicillin LA up to 1.2 mil units	
57456	Colposcopy, w/endocervical curettage		81025	Urine Pregnancy Test		J2175	Demerol per 100 mg	
PROCEDURE			87210	Wet Prep		J1055	Depo Provera 150 mg Contra	
94640	Aerosol Treatment					J3301	Kenalog per 10 mg	
94664	Aerosol Treatment, Demo					J2550	Phenergan up to 50 mg	
20600	Arthrocentesis, small joint or bursa					J0696	Rocaphin per 250 mg	
20605	Arthrocentesis, intermediate joint or bursa					J3150	Testosterone up to 100 mg	
20610	Arthrocentesis, large joint or bursa					J1885	Toradol per 15 mg	
51702	Bladder Cath					90772	Therapeutic or diagnostic inj, subq or IM	
69210	Cerumen Removal (BY PHYSICIAN)						Drug: _____	
							Dosage: _____	

Date	Patient	Reason	Ticket #	Dr. #	Doctor
11/02/2009	MICKEY MOUSE				
Location	D.O.B.	Patient #	Responsible Party	PH#	Referring Dr.
	10/09/2001	20051			
Sex	Address	City/State	Zip Code	Over 90 Over 60 Over 30 Current Total Due PT BC CS Pay Choice	
M					
Insurance Company		BA SCT Policy I.D.	Relationship to Insured		
Diagnosis					
Prior Balance	Today's Charge	Adjustments	Today's Payments	Co-Pay	Balance Due
Next Appointment			Doctor's Signature		



MED1011

