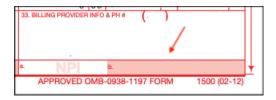
HCFA 1500 Box 33b - How Do I Enter an Individual or Group Provider Identifier?

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Sometimes a payer will require a separate identifier on the claim along with the billing/rendering NPI and Tax ID. DrChrono makes it easy to add this information, by payer, so that it will be on each claim, helping to ensure that your claim is accepted for processing and not delayed for additional information.

Typically, these identifiers are required to show in box 24J and/or box 33B on the HCFA 1500 form.





Here is how you can enter information that will appear in each of these areas on the claim for a specific payer.

Box 24J

• Box 24J: This box will display the individual NPI of whichever provider is listed as the rendering provider on each appointment. The provider can specify their NPI number by going to **Account > Provider Settings > Billing**, and entering data into the **Rendering Provider NPI** field.

If you are in an incident-to-arrangement where you are billing under a different provider's NPI, please be sure you are complying with all rules/regulations for this type of arrangement. Additional information regarding incident-to-billing can be found here.

• Box 33B: By default, this box will remain blank; however, if a particular payer wants to see a separate provider ID number in that box, you can add it, by the provider, for that particular payer.

While under the provider view, navigate to Billing > Insurance Setup.

This screen will display all the insurances that you are billing along with the billing information (NPI, Tax ID, Organization Name, etc.) that you have updated in the **Account > Provider Settings > Billing Tab**.

If you do not see a payer that you need listed, simply click on the green + New EDI Enrollment and enter the info. Once you refresh your screen, the payer will be listed.

1. Select the blue pencil on the row that corresponds with the payer.



2. Enter the requested provider number in the **Group Provider #** field (left column). Then select the qualifier that applies.



