

UB04 Box 67 - How to add diagnosis codes to a patient's institutional claim

Last modified on 02/25/2026 4:21 pm EST

There are a few ways in DrChrono to add diagnosis codes to a patient's claim. Which one is best depends on where you are in the system and what fits better in your workflow.

Adding directly to the appointment

1. Navigate to **Billing > Live Claims Feed > Inside patient's appointment > Line items transactions section**

The primary diagnosis added in the box outlined in red will print first on the UB04.

The screenshot displays the 'Line items transactions' section. It features a table with the following structure:

#	Diagnosis Code	Description	POA
	<input type="text" value="Add ICD-10 code"/>		<input type="button" value="Switch to ICD-9"/>
Print	<input type="text"/>		<input type="button" value="X"/>
Adm	<input type="text"/>		<input type="button" value="X"/>
A			<input type="button" value="X"/>
B			<input type="button" value="X"/>

Additional diagnosis codes can be added in the box pointed to with the red arrow. The ICD-10 code or verbiage can be entered into this box. Diagnosis codes will print on the UB04 in the order in which they are entered.

Identifying POA diagnosis codes

While adding diagnosis codes within the patient's appointment, you have options to include or exclude each diagnosis from the patient's POA (Present on Admission) listing. There is a drop-down box to the right of the diagnosis that will show you available options.

POA	Line It
Switch to ICD-9	
<input checked="" type="checkbox"/> Exempt from POA reporting	
Y - Yes	
N - No	
U - No information in the record	
W - Clinically undetermined	

Selecting from the Diagnosis Pick List

1. Navigate to **Billing > Live Claims Feed > Inside patient's appointment > Diagnosis Pick List**

Institutional Claim **Yes**

Billing Status

ICD Version

Primary Insurer

Secondary Insurer

Billing Provider:

Supervising Provider:

Pt Payment \$

Payment Profile

Pt Payment Due

Billing Profile

Billing Pick List

Diagnosis Pick List

Referral #

Billing Facility

Purchased Serv Provider

Appointment Notes

Follow-up Date

Billing Notes

Any diagnosis codes added to the patient's problem list will appear. You can easily select the applicable codes for the claim and add them to the invoice. To unselect a diagnosis that is not related to the current invoice, simply uncheck the box to the left of the ICD-10 code.

Choose Codes to Include In Billing For This Appointment

Patient Active Problems

<input checked="" type="checkbox"/>	ICD9 Code
Patient does not have active ICD9 problem.	
<input checked="" type="checkbox"/>	ICD10 Code
<input checked="" type="checkbox"/>	I26.99: Other pulmonary embolism without acute cor pulmonale
<input checked="" type="checkbox"/>	R07.9: Chest pain, unspecified
<input checked="" type="checkbox"/>	M62.00: Separation of muscle (nontraumatic), unspecified site

Previous Diagnosis

<input type="checkbox"/>	ICD9 Code
Patient does not have ICD9 diagnosis record.	
<input type="checkbox"/>	ICD10 Code
<input type="checkbox"/>	I26.99: Other pulmonary embolism without acute cor pulmonale
<input type="checkbox"/>	R07.9: Chest pain, unspecified

Add

Adding to the patient's appointment

1. Navigate to **Calendar > Select patient's appointment/encounter > Billing tab > Diagnosis Pick List**

Appointment | **Billing** | Eligibility | Vitals | Growthcharts | Flags | Log Comm. | Revisions | Custom Data | MU Helper

Institutional Claim Patient SuperBill | Clinical Note | Billing Details | Other Forms ▾

<p>Billing Status <input type="text"/></p> <p>ICD Version <input type="text"/></p> <p>Primary Insurer <input type="text"/></p> <p>Secondary Insurer <input type="text"/></p> <p>Patient Payment \$ <input type="text"/> <input type="text"/> +</p> <p><input type="text"/> Receipt ▾</p> <p>Pre Authorization Approval <input type="text"/></p> <p>Referral # <input type="text"/></p> <p>Payment Profile <input type="text"/></p> <p>Billing Profile <input type="text"/> +</p> <p>Billing Pick List <input type="text"/> Choose Codes from Pick List</p> <p>Diagnosis Pick List <input type="text"/> Choose Codes from Pt Problems</p>	<p>HCFA Box 10 - Is patient's condition related to:</p> <p>Employment <input type="text"/></p> <p>Auto Accident <input type="text"/></p> <p>Other Accident <input type="text"/></p> <p>Onset Date Type <input type="text"/></p> <p>Onset Date <input type="text"/></p> <p>Other Date Type <input type="text"/></p> <p>Other Date <input type="text"/></p> <p>Hospitalization Info</p> <p>Admission Date <input type="text"/></p> <p>Discharge Date <input type="text"/></p> <p>Start Care/Strm Covers Start <input type="text"/></p> <p>End Care/Strm Covers End <input type="text"/></p>
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Include note in EDI Billing: Custom NTE EDI Billing Note (a.k.a. HCFA/CMS-1500 Line 19)

Delete Save

Any diagnosis codes added to the patient's problem list will appear. You can easily select the applicable codes for the claim and add them to the invoice. To unselect a diagnosis that is not related to the current invoice, simply uncheck the box to the left of the ICD10 code.

Choose Codes to Include In Billing For This Appointment

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[Add](#)