

2026 Healthcare Forms



COMPLY*RIGHT*.[®]

Health Insurance Claim Forms: Your Prescription for Compliant, Convenient Billing

Satisfy Recordkeeping Requirements with CMS-1500 Health Insurance Claim Forms

... for use by all medical facilities

Federal regulations require all healthcare providers to use the CMS-1500 Form for specific billing. This form includes the National Provider Identifier, which all HIPAA-covered entities must use.

- Printed with OCR "dropout" red ink on 20# paper, according to government regulations
- Available in continuous, laser and snap-apart

02/12 Version CMS-1500 Laser-Cut and Continuous Forms			
Item #	Item Description	Paper/Sequence*	Quantity Per Case
CMS12LC	Laser-Cut Sheet (02/12)	20# (W)	2,500
CMS12LC1	Laser-Cut Sheet (02/12)	20# (W)	1,000
CMS12LC500	Laser-Cut Sheet (02/12)	20# (W)	500
CMS12LC250	Laser-Cut Sheet (02/12)	20# (W)	250
CMS1212	1-Part Continuous (02/12)	20# (W)	2,000
CMS1211	1-Part Continuous (02/12)	20# (W)	1,000

*W (White) / C (Canary) / P (Pink)

Everything You Need, Bundled to Perform

Save time and eliminate the hassle of sourcing items separately. These perfectly matched bundles ensure everything works seamlessly together, streamlining your workflow from preparation to mailing.

CMS-1500 Forms and Envelopes		
Item #	Item Description	Quantity Per Bundle
CMS12LCE	CMS-1500 (02-12) Laser Cut sheet (W) & #10 Envelopes	2,500
CMS12LCE1000	CMS-1500 (02-12) Laser Cut sheet (W) & #10 Envelopes	1,000
CMS12LC500E	CMS-1500 (02-12) Laser Cut sheet (W) & #10 Envelopes	500

UB-04 Claim Forms and Medical Records Folder

Compliance is Critical

What Makes a CMS-1500 or UB-04 Form Compliant?

For starters, these forms must adhere to strict printing standards that govern the layout, paper and ink. Each must have accurate content and conform to the Health Insurance Portability and Accountability Act (HIPAA).

Furthermore, these billing forms were developed in conjunction with all governing agencies, including the National Uniform Claim Committee, the National Uniform Billing Committee, the CMS Centers for Medicare and Medicaid Services, the Health and Human Services Agency, and the American Hospital Association.

As a result, you can be confident our forms are up-to-date and fully compliant with the law.

Reduce Billing Errors with UB-04 Health Insurance Claim Forms

... for use by hospitals and institutions

Designed for hospitals to file a medical claim with the patient's insurance carrier, Form UB-04 is printed with OCR "dropout" red ink on 20# paper.

- Available in both continuous and laser formats
- All parts printed on white carbonless stock



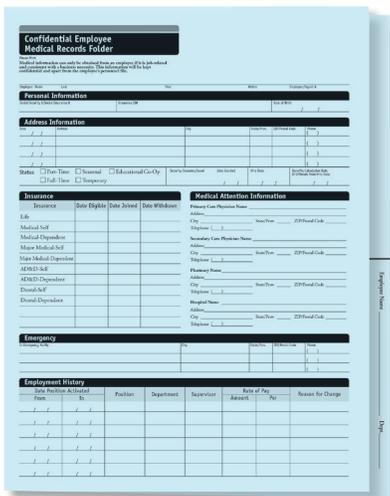
UB-04 Health Insurance Claim Forms (CMS-1450)			
Item #	Item Description	Paper/Sequence*	Quantity Per Case
UB04LC	UB-04 Laser-Cut Sheet	20# (W)	2,500
UB04LC1	UB-04 Laser-Cut Sheet	20# (W)	1,000
UB04LC5	UB-04 Laser-Cut Sheet	20# (W)	500

*W (White)

Protect Vital Information with the Confidential Employee Medical Records Folder

These durable folders are perfect for storing your required FMLA forms and for documenting accident and illness information as required by OSHA.

- Heavy-duty for prolonged use
- Record key information right on the folder



ComplyRight® Confidential Employee Medical Records Folder

Item # A2211

9 3/8" x 11 3/4" x 1/4" (25 per package)

Dental Solutions

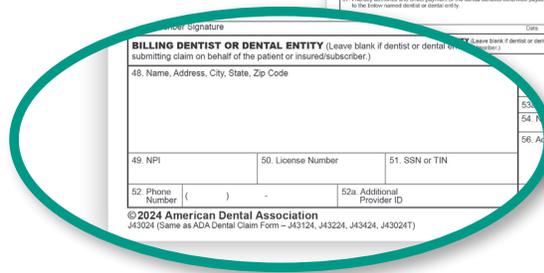
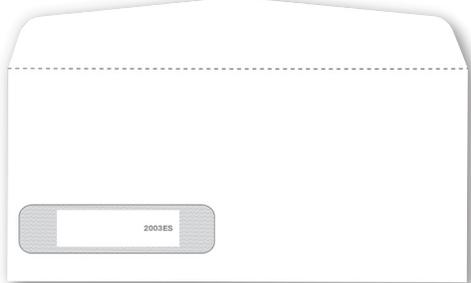
Use the Latest Version of the ADA Dental Claim Form

Work with the most current claim/attending dentist form, as authorized by the American Dental Association (ADA).

- Available in both continuous and laser formats
- 100% compliant with ADA guidelines

ADA Dental Claim Forms			
Item #	Item Description	Paper/ Sequence*	Quantity Per Case
20241	Laser-Cut Sheet (2019)	20# (W)	2,500
202411	Laser-Cut Sheet (2019)	20# (W)	1,000
20241500	Laser-Cut Sheet (2019)	20# (W)	500

*W (White)

Secure Records with the ComplyRight® Orthodontic Case Analysis Envelo-File

Safely store patient documents, in addition to logging important details for quick reference.

- Designed for long-term durability
- Record key information right on the folder

ComplyRight® Orthodontic Case Analysis Envelo-File	
Item # A1048	

9½" x 11¼" (25 per package)

Submit Claims with ADA Envelopes

Send your practice's ADA claims and attending dentist's forms in convenient self-seal envelopes.

- Comes with security tint to meet HIPAA guidelines
- Accommodates up to 12 folded ADA Claim Forms

ADA Self-Seal Window Envelopes		
Item #	Item Description	Quantity Per Case
2003ES	4½" x 9" Version 2012	500

Prevent Processing Delays with CMS-1500 and UB-04 Jumbo Envelopes

Mailing claim forms unfolded becomes increasingly important as more insurance companies convert to optical scanning. When folded, forms may jam automatic scanning equipment and delay processing.

- Accommodates up to 50 unfolded forms
- Reduces processing complications

Jumbo Window Envelopes		
Item #	Item Description	Quantity
1500LL	9" x 12½" Left Window CMS-1500	500
1500LR100	9" x 12½" Right Window CMS-1500	100
1500RS100	9" x 12½" Right Window CMS-1500 No Wording	100
1492LL100	9" x 12½" Left Window UB-04	100

Available in smaller quantities of 100

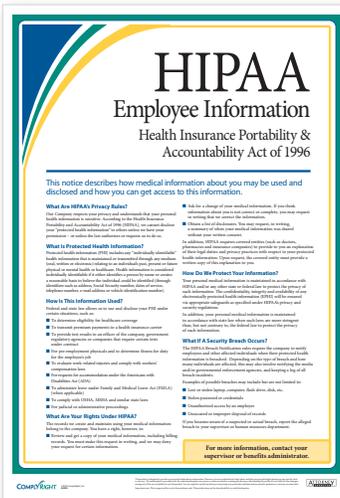
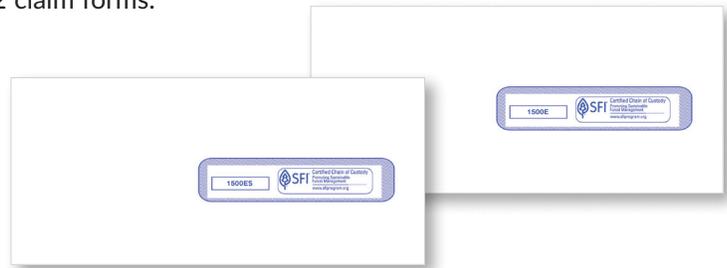


Choose from Two Styles of CMS-1500 Window Envelopes

Our traditional #10½ size envelope accommodates up to 12 claim forms.

- Available in either gum-seal or a self-seal style
- Must be ordered in case quantities

CMS-1500 Window Envelopes		
Item #	Item Description	Quantity
1500ES	4½" x 9½" Self-Seal	500
1500E	4½" x 9½" Gum-Seal	500

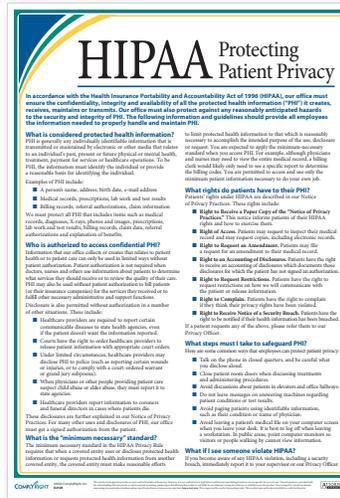


Disclose Mandatory HIPAA Rules to Employees

Educate your employees on how and when patients' medical information may be used and disclosed, and what to do if a breach occurs.

ComplyRight® HIPAA Employee Poster
Item # AR0953

17" x 24" (Laminated)



Explain HIPAA Rules to Employees

Share the latest HIPAA rules with employees and outline their obligation to patients.

ComplyRight® HIPAA Protecting Patient Privacy Poster
Item # A2126

12" x 18" (Laminated)



Communicate HIPAA Rights to Patients

Display this poster in your waiting room or reception area to inform patients of their rights and responsibilities under HIPAA.

ComplyRight® HIPAA Notice of Privacy Practices Poster
Item # A2123

12" x 18" (Laminated)

CMS Medical Forms

Terms and Conditions | General Information

- 1. MULTI-STATE RESALE CERTIFICATE:** We must have a valid Sales & Use Tax Certificate on file. If ComplyRight® drop ships product on your behalf to multiple states, we will need the applicable certificates.
- 2. RETURNS:** Absolutely NO unauthorized returns. Authorized returns will be issued with a minimum restock fee of 25% of product cost, excluding shipping charges. Returns are only accepted within 30 days of invoice date. Prior approval and Return Merchandise Authorization (RMA) number must be obtained before returning stock.
- 3. UNDELIVERABLE RETURNS:** Package carriers charge return freight on shipments that are undeliverable or have been refused by consignee. Due to this policy, ComplyRight® will charge returned freight charges on all packages refused by your customer or deemed undeliverable due to an inadequate or incomplete address. The cost of the returned freight will be the same as the original freight charged on the order.
- 4. ADDRESS CORRECTIONS:** All shipments with incomplete or inaccurate addresses resulting in address corrections will be charged an address correction fee of \$21.00 per carton. Additional delivery fees apply for address changes, intercept requests, or rescheduled deliveries. REDIRECTED DELIVERY: A \$18.00 per carton fee applies to successfully redirected UPS deliveries.
- 5. RESHIPMENTS:** Reshipments will ship the same manner as the original order. Our liability is limited to the replacement of forms only. We will not issue credits on duplicated orders. All claims must be made within 30 days. NO credit will be issued on reorders due to freight delays (i.e., weather, acts of God, etc.).
- 6. CANCELLATIONS:** No cancellations are accepted after an order has shipped! A cancellation is void if it reaches us after the merchandise has shipped. A \$10.00 fee applies to order cancellations made more than 24 hours after submission if the order has not shipped.
- 7. NEW ACCOUNTS:** All orders will be shipped Cash In Advance (Check, M/C, Discover, VISA, American Express accepted) until a line of credit is established. Credit checks begin after receipt of application.
- 8. SHIPPING:** All shipments F.O.B. from our nearest warehouse with available stock. WE ARE NOT RESPONSIBLE FOR SHIPPING DELAYS ONCE THE FREIGHT HAS LEFT OUR WAREHOUSE. Allow 1-2 business days for stock orders, 7-10 business days for imprinted form orders and additional time for larger quantities.
- 9. SATURDAY ORDERS:** All orders received on Saturday will be processed as though received on Monday.

For questions, email info@complyright.com
Pricing is available for download at complyrightdealer.com

