



HIPAA Transaction
Standard Companion Guide

ASC X12N Version 005010X220A1
834 Benefit and Enrollment Maintenance

Preface

This Companion Document to the ASC X12N Implementation Guides adopted under HIPAA clarifies and specifies the data content when exchanging electronically with MagnaCare. Transmissions based on this companion document, used in tandem with the X12N Implementation Guides, are intended to be compliant with both X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

Table of Contents

1	<i>Introduction</i>	4
1.1	Scope	4
1.2	Overview.....	4
1.3	References	4
1.4	Additional Information	4
2	<i>Before you begin</i>	5
2.1	Important information	5
2.2	Registration	5
2.3	Testing Overview	5
3	<i>Testing Procedures</i>	6
3.1	Phases of Testing.....	6
3.2	Testing Process.....	6
4	<i>Transfer of Information</i>	7
4.1	Data Transfer.....	7
4.2	Administrative Transmission Procedures	8
4.3	Specification of Communication Protocol.....	8
4.4	Passwords	9
4.5	Encryption.....	9
4.6	FTP Server	9
5	<i>Business Rules and Specifications</i>	9
6	<i>Additional Requests</i>	9
7	<i>Transaction Specification</i>	10
7.1	Control Segments.....	10
7.2	834 Eligibility File Layout.....	12
8	<i>Appendix</i>	17
9	<i>Example</i>	18

1 Introduction

1.1 Scope

This Companion Guide is intended to support the implementation of a batch processing application. MagnaCare will accept inbound submissions that are formatted correctly in X12 terms. The files must comply with the specifications outlined in this companion document as well as the corresponding HIPAA implementation guide. MagnaCare Electronic Data Interchange (EDI) applications will edit for these conditions and reject files that are out of compliance. This companion document will specify everything that is necessary to conduct EDI for this standard transaction.

This includes:

- Communications link specifications
- Submission methods specifications
- Transaction specifications

1.2 Overview

This document is intended to compliment the ASC X12N implementation guide currently adopted from HIPAA. It is compliant with the corresponding HIPAA implementation guides in terms of data element and code standards and requirements. It will be the vehicle that MagnaCare uses with its Clients to further qualify the HIPAA-adopted implementation guides.

Data elements that require mutual agreement and understanding will be specified in this companion guide. Types of information that will be clarified within this companion are;

- Qualifiers that will be used from the HIPAA implementation guides to describe certain data elements
- Situational segments and data elements that will be utilized to satisfy business conditions
- Client profile information for purpose of establishing who we are trading with for the transmissions exchanged

1.3 References

ASC X12N Implementation Guides

1. Benefit Enrollment and Maintenance

- 834 (005010X220A1)

<http://store.x12.org/store/healthcare-5010-consolidated-guides>

1.4 Additional Information

Electronic Data Interchange (EDI) is the computer-to-computer exchange of formatted business data between Clients, without human intervention. MagnaCare maintains a dedicated staff for the purpose of enabling and processing X12 EDI transmissions with its Clients. It is the goal of MagnaCare to establish Client relationships and to conduct EDI as opposed to paper information flows whenever and wherever possible.

2 Before you begin

2.1 Important information

Clients will be working with two units within MagnaCare to implement EDI transactions:

- MagnaCare EDI Business support unit will serve as the Client's central point of contact. This group will also facilitate the implementation of Clients through all steps of external testing. This group will coordinate closely with MagnaCare EDI team who will be accepting and translating data on behalf of MagnaCare.
- MagnaCare corporate EDI IT group is a centralized technical team that implements the communication link and facilitates the acceptance or rejection of a Client's EDI. This group maintains the EDI translator maps. They will also handle all issues relating to files that were accepted from our translator and moved forward to MagnaCare for processing.

2.2 Registration

To register as a Client with MagnaCare, you will need to do the following:

1. Initial conversations are held between the Client and MagnaCare.
2. Verbal agreements are reached as to the transactions that will be conducted.
3. A companion guide is provided and reviewed.
4. Submitter Id and Receiver Id is established for the purpose of identification.
5. Required Client profiling is built into our EDI translator.
6. X12 compliant test files are exchanged and test runs conducted.
7. Once the testing phase is completed, the Client is registered.

2.3 Testing Overview

MagnaCare requires their Clients to do validations and test at their end or using third party certification such as Claredi so that the process to test and implement a Client for the purpose of conducting EDI with standard transactions is smooth and efficient.

The complexity of X12 files when not tested and certified by a third party will cause delays in the ability to enable the X12 submissions in a production environment.

MagnaCare wants to spend the majority of the testing period time, working with prospective Clients on the agreed components of this companion document rather than X12 or HIPAA implementation guide syntax.

3 Testing Procedures

MagnaCare would like to establish a set of scenarios intended for testing with the Client. It should be a representation at a high level or cross section of the majority of conditions that will be encountered with production data from these transactions.

3.1 Phases of Testing

MagnaCare requires testing to be completed with all Clients. The testing phase will consist of several smaller phases of testing, as appropriate.

3.1.1 Syntactic Testing

MagnaCare uses an industry standard data translator, REDIX to validate transactions and to translate them into an acceptable format for internal processing. Clients are required to validate files prior to sending. Any issues identified during this phase of testing will have to be addressed in order for subsequent phases to continue.

3.1.2 Compliance Testing

Client specific setup, as defined in the companion guide will be verified. Generally, this will be done in conjunction with Syntactic testing.

3.1.3 Scenario Testing

This will normally involve all possible business scenarios to be tested.

3.1.4 Volume Testing

This will involve testing large eligibility files. We would like to receive eligibility files with 50 members each representative of the actual population which will be sent on the production files.

3.2 Testing Process

The following summarizes the testing process:

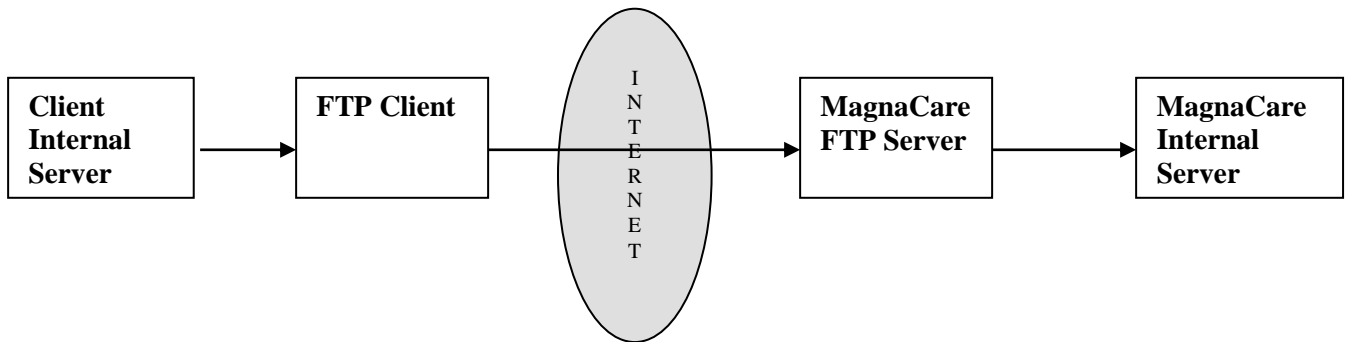
- 1 After initial contacts and agreements are made, Client will provide MagnaCare with its EDI certification.
- 2 Next, the Client will provide the MagnaCare HIPAA project manager with one or more files of the X12N formatted sample data, and samples of all relevant business scenarios.
- 3 MagnaCare HIPAA project manager will translate the files and then upload to the MagnaCare core system. Error messages or diagnostics will be relayed to the Client. This process will proceed by iteration until all parties are satisfied.
- 4 Once format issues are settled, the communication protocols are similarly implemented and tested.
- 5 Once the technical requirements have been settled and documented in the companion guide and it's Appendix, the Client and MagnaCare will sign off on the companion guide and move the transaction into production.

4 Transfer of Information

4.1 Data Transfer

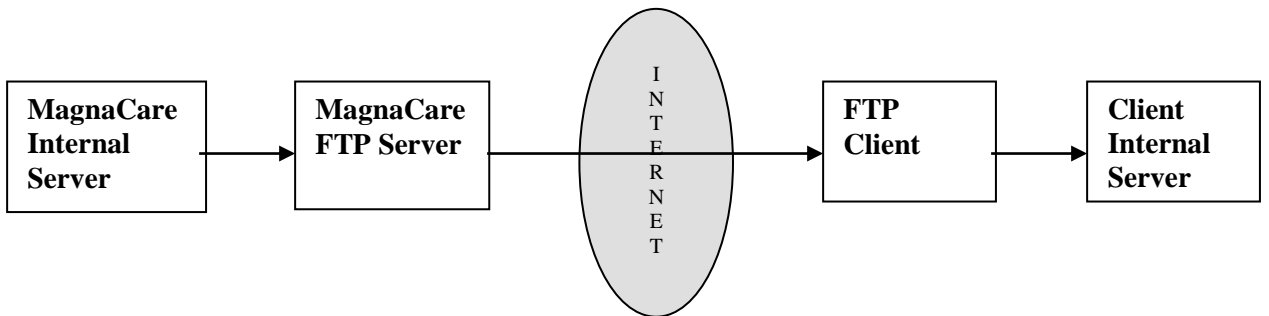
Data can be exchanged with MagnaCare via FTP over the Internet where the file is encrypted, sent over the Internet and then decrypted. For data inbound to MagnaCare (see Figure 1A), the Client would encrypt the data on an internal server, transfer it using FTP Client to MagnaCare's FTP server. MagnaCare will then move the encrypted file from MagnaCare's FTP server to an internal server where the file is decrypted and forwarded for processing.

Figure 1A
Encrypted Data sent over the Internet from Client to MagnaCare FTP Server



MagnaCare data sent to Client (see Figure 1B). MagnaCare will generate the X12 data file and encrypt it. Once encrypted, the file will be sent to MagnaCare's FTP server. At that time, the Client can retrieve the file, transfer it to their internal system using FTP client, decrypt it and process it.

Figure 1B
Encrypted Data sent over the Internet from MagnaCare FTP Server to Client



4.2 Administrative Transmission Procedures

As part of the process establishing the relationship, MagnaCare and the Client must exchange certain technical information.

The requested information will include:

1. Contacts: business, data and communications
2. Dates: testing, production
3. File information; size, naming
4. Transfer; schedule, protocol
5. Server information; host name, user ID, password, file location, file name
6. Notification; failure, success

4.2.1 Re-transmission procedures

When a file needs to be re-transmitted, the Client will contact their primary Account Management contact at MagnaCare.

4.3 Specification of Communication Protocol

The following items are required from the Client in order to exchange data with MagnaCare utilizing FTP server over the Internet.

1. Internet Connectivity; Client should consider a broadband connection for large files.
2. Computer with FTP client and connectivity to the Internet.
3. PGP software for encryption/decryption. RSA (or Legacy) keys must be generated and exchanged with MagnaCare via e-mail (public keys only).
4. E-mail capability to exchange configuration and testing information.

Initial setup will include confirming FTP connectivity, exchanging PGP public keys and performing end-to-end communications testing. Before sending data to MagnaCare, the data must be encrypted with PGP and then sent to the MagnaCare FTP using the FTP client over the Internet connection. When receiving data from MagnaCare, the FTP client will be used to get the data from the MagnaCare FTP server after which PGP will be used to decrypt the data.

MagnaCare provides following three connectivity options to establish interface with its servers.

1. MagnaCare offers FTP over SSL with explicit encryption. SSL (Secure Socket Layer) FTP provides reliable encryption for both the user login, and transferred files.
2. SFTP (Secure File Transfer Protocol) is based on SSH2 (Secure Shell 2). SFTP provides comprehensive protection for a user's data, ID, and password by establishing a secure channel for file transfers. MagnaCare recommends SFTP for small-to-medium size file transfers whenever possible.
3. VPN (Virtual Private Network) option is available to larger clients with extensive data interchange needs. VPN allows a user to connect directly to MagnaCare's LAN via a controlled access point. The VPN protocol is used to establish a secure data tunnel between MagnaCare and a client or vendor, where large numbers of files are to be

transferred periodically. If appropriate, VPN access must be pre-arranged, and configured with MagnaCare's IT Dept.

4.4 Passwords

MagnaCare requires the use of User IDs and Passwords to access its systems and servers and will assign each Client a unique User ID and password when using MagnaCare server. In the event a Client forgets their password, MagnaCare will change the password after verifying the authenticity of the request.

4.5 Encryption

MagnaCare requires the encryption of data that is exchanged via the Internet or any other public network. MagnaCare utilizes Gnu PGP encryption with 1024 or 2048 bit keys for file encryption.

4.6 FTP Server

MagnaCare FTP server can be reached using the DNS name <ftp://itbbs.magnacare.com> . MagnaCare highly recommend using the DNS name rather than the IP address of the server, as we have more than one FTP server available to meet our Disaster Recovery needs.

5 Business Rules and Specifications

- Numeric fields should not be zero padded.
- Fields should not be space padded except ISA segment.
- All monetary amounts are to include decimal points with two positions allowed to the right of the decimal point to represent cents.
- Specific field descriptions may be found in the detailed file layout section of this Companion Guide. Although some elements are situational, MagnaCare may require them and may also require a specific value.

6 Additional Requests

If requested, 997 Acknowledgement will be sent so the Client will get confirmation that we received their submission.

7 Transaction Specification

7.1 Control Segments

7.1.1 ISA - INTERCHANGE CONTROL HEADER

Element	ELEMENT DEFINITION	Values	Description
ISA01	AUTHORIZATION INFORMATION QUALIFIER	00	No Authorization Information Present
ISA02	AUTHORIZATION INFORMATION		[space fill]
ISA03	SECURITY INFORMATION QUALIFIER	00	No Security Information Present
ISA04	SECURITY INFORMATION		[space fill]
ISA05	INTERCHANGE ID QUALIFIER	ZZ 30	Mutually Defined U.S. Federal Tax Identification Number
ISA06	INTERCHANGE SENDER ID	Inbound: Client TIN/MagnaCare assigned Client Code Outbound: 11-3038233	
ISA07	INTERCHANGE ID QUALIFIER	ZZ 30	Mutually Defined U.S. Federal Tax Identification Number
ISA08	INTERCHANGE RECEIVER ID	Inbound: 11-3038233 Outbound: Client TIN/MagnaCare assigned Client Code	Inbound: "11-3038233" Outbound: Client TIN/ MagnaCare assigned client Code.
ISA09	INTERCHANGE DATE	YYMMDD	Date of interchange
ISA10	INTERCHANGE TIME	HHMM	Time of interchange
ISA11	INTERCHANGE CONTROL STANDARDS IDENTIFIER	^	Repetition separator
ISA12	INTERCHANGE CONTROL VERSION NUMBER	00501	Draft Standards approved by ASCX12
ISA13	INTERCHANGE CONTROL NUMBER	Assigned by sender	Must be identical to the interchange trailer IEA02
ISA14	ACKNOWLEDGMENT REQUEST	0	No Acknowledgment Requested
ISA15	USAGE INDICATOR	P or T	P = Production, T = Test
ISA16	COMPONENT ELEMENT SEPARATOR		“.”

NOTE: MagnaCare will accept only One ISA-IEA per file.

7.1.2 IEA – INTERCHANGE

Element	ELEMENT DEFINITION	Values	Description
IEA01	NUMBER OF INCLUDED FUNCTIONAL GROUPS		Number of included Functional Groups
IEA02	INTERCHANGE CONTROL NUMBER	Assigned by Sender	Must be identical to the value in ISA13

7.1.3 GS – FUNCTIONAL GROUP HEADER

Element	ELEMENT DEFINITION	Values	Description
GS01	FUNCTIONAL IDENTIFIER CODE	BE	Benefit Enrollment and Maintenance
GS02	APPLICATION SENDER'S CODE	Inbound: MagnaCare assigned client code Outbound: MagnaCare TIN	Sender's code / Tax Identification Number
GS03	APPLICATION RECEIVER'S CODE	Inbound: MagnaCare TIN Outbound: MagnaCare assigned client code	Receiver's code / Tax Identification Number
GS04	DATE	CCYYMMDD	Group creation date
GS05	TIME	HHMM	Creation time
GS06	GROUP CONTROL NUMBER		Assigned and maintained by the sender
GS07	RESPONSIBLE AGENCY CODE	X	Accredited Standards Committee X12
GS08	VERSION/RELEASE/INDUSTRY IDENTIFIER CODE	005010X220A1	Version/Release/Industry Identifier Code

NOTE: MagnaCare will accept only one GS-GE per file.

7.1.4 GE – FUNCTIONAL GROUP TRAILER

Element	ELEMENT DEFINITION	Values	Description
GE01	NUMBER OF TRANSACTION SETS INCLUDED		Number of Transaction Sets Included
GE02	GROUP CONTROL NUMBER	Assigned by Sender	Must be identical to the value in GS06

7.1.5 ST – TRANSACTION SET HEADER

Element	ELEMENT DEFINITION	Values	Description
ST01	TRANSACTION SET IDENTIFIER CODE	834	Benefit Enrollment and Maintenance
ST02	TRANSACTION SET CONTROL NUMBER		The transaction set control numbers in ST02 and SE02 must be Identical. This number must be unique within a specific group and interchange
ST03	IMPLEMENTATION CONVENTION REFERENCE	005010X220A1	Implementation Guide Version Name

NOTE: Magnacare can accept multiple ST-SE segments.

7.1.6 SE – TRANSACTION SET TRAILER

Element	ELEMENT DEFINITION	Values	Description
SE01	TRANSACTION SET IDENTIFIER CODE		Total number of segments included in a transaction set including ST and SE segments.
SE02	TRANSACTION SET CONTROL NUMBER	Assigned by Sender	The transaction set control numbers in ST02 and SE02 must be Identical. This number must be unique within a specific group and interchange.

7.1.7 VALID DELIMITERS FOR MAGNACARE EDI

Definition	ASCII	Decimal	Hexadecimal
Segment Separator	\n (New Line)	13	
Element Separator	*	42	2A
Compound element Separator	:	58	3A

7.2 834 Eligibility File Layout

This table specifies the columns and suggested use of the rows for the detailed description of the transaction set companion guides.

834 Loops/Segments that MagnaCare will use:					
Loop:	None	Segment(s):	ISA	Interchange Control Header	Required
				GS Functional Group Header	Required
				ST Transaction Set Header	Required
				BGN Beginning Segment	Required
				DTP File Effective Date	Situational
				REF Transaction Set Policy Number	Required
Loop:	1000A	Segment(s):	N1	Sponsor Name	Required
Loop:	1000B	Segment(s):	N1	Payer	Required
Loop:	2000	Segment(s):	INS	Member Level Detail	Required
				REF Subscriber Number	Required
				REF Member Policy Number	Situational
				REF Member Identification Number	Situational
				DTP Member Level Dates	Situational
Loop:	2100A	Segment(s):	NM1	Member Name	Required
				PER Member Communications Number	Situational
				N3 Member Residence Street Address	Required
				N4 Member Residence City, State, Zip	Required
				DMG Demographics	Required
Loop:	2200	Segment(s):	DSB	Disability Information	Situational
				DTP Disability Eligibility Dates	Situational
Loop:	2300	Segment(s):	HD	Health Coverage	Required
				DTP Health Coverage Dates	Required
Loop	2310	Segment(s):	NM1	Provider Name	Situational
Loop:	2320	Segment(s):	COB	Coordination of Benefits	Situational
			DTP	COB Dates	Situational
Loop	2330	Segment	NM1	COB Related Entity	Situational
Loop:	None	Segment(s):		Trailer Record	

HIPAA Field Position-Segment ID	HIPAA Data Element Name and Page Number from Implementation Guide	Attributes	Valid Values and Comments
CONTROL			
BGN	Beginning Segment	M	
020-BGN01	Transaction Set Purpose Code Pg 28	M ID 2/2	"00" Original
020-BGN02	Reference Identification INDUSTRY: Transaction Set Identifier Code	M AN 1/30	Not used by MagnaCare
020-BGN03	Date INDUSTRY: Transaction Set Creation Date	M DT 8/8	CCYYMMDD – Date submitter created the file.
020-BGN04	Time INDUSTRY: Transaction Set Creation Time	M TM 4/8	Time submitter created the file in HHMM format.
020-BGN05	Time Code INDUSTRY: Time Zone Code	O ID 2/2	Not used by MagnaCare
020-BGN06	Reference Identification INDUSTRY: Transaction Set Identifier Code	O AN 1/30	Not used by MagnaCare
020-BGN07	Sender DFI Identifier	N/U ID 2/2	Not used by MagnaCare
020-BGN08	Action Code	O ID 1/2	"4" - Verify "2" – Changes only "RX" – Replace (recommended) Any X12 action code may be used, but MagnaCare does not determine action from this code

HIPAA Field Position-Segment ID	HIPAA Data Element Name and Page Number from Implementation Guide	Attributes	Valid Values and Comments
020-BGN09	Security Level Code	N/U ID 2/2	Not used by MagnaCare
1000			
REF	Subscriber Number	M	
030-REF01	Reference Identification Qualifier Pg 32	M ID 2/3	"38" Master Policy Number
030-REF02	Reference Identification	X AN 1/30	MagnaCare assigned Client Code (PPO only)
1000			
QTY	Transaction Set Control Totals	O	<i>New in 5010</i>
030-QTY01	Reference Identification Qualifier Pg 32	M AN 2/2	DT – Dependent Total, ET – Employee Total, TO - Total
030-QTY02	Reference Identification	M R 1/15	Record Totals
1000A			
N1	Sponsor Name	M	
070-N101	Entity Identifier Code Pg35	M ID 2/3	"P5" – Plan Sponsor
070-N102	Plan Sponsor Name	M AN 1/60	MagnaCare assigned Client Code (ASC only)
070-N103	Identification Code Qualifier	M ID 1/2	"F1" - Federal Taxpayer's Identification Number
070-N104	Identification Code INDUSTRY: Sponsor Identifier	M AN 2/80	Sponsor Tax ID
1000B			
N1	Payer Name	M	
070-N101	Entity Identifier Code Pg37	M ID 2/3	"IN" – Insurer
070-N102	Insurer Name	M AN 1/60	
070-N103	Identification Code Qualifier	M ID 1/2	"ZZ" – Mutually Defined
070-N104	Identification Code INDUSTRY: Insurer Identification Code	M AN 2/80	MagnaCare Assigned Client Code
2000			
INS	Member Level Detail	M	
010-INS01	Yes/No Condition or Response Code INDUSTRY: Insured Indicator Pg 43	M ID 1/1	"Y" – if Insured is a subscriber "N" – Insured is a dependent
010-INS02	Individual Relationship Code	M ID 2/2	"18" – subscriber '01" – Spouse "03" – Father or Mother "19" – Child Please refer to Guide for other Values
010-INS03	Maintenance Type Code	O ID 3/3	"030" - Audit or Compare
010-INS04	Maintenance Reason Code	O ID 2/3	"XN" - Notification Only (This is used when INS03 is equal to 030)
010-INS05	Benefit Status Code	M ID 1/1	"A" Active "C" Consolidated Omnibus Budget Reconciliation Act (COBRA)
010-INS06.01	Medicare Status Code	O ID 1/1	"A" - Medicare Part A "B" - Medicare Part B "C" - Medicare Part A and B "D" - Medicare "E" - No Medicare
010-INS07	Consolidated Omnibus Budget Reconciliation Act (COBRA) Qualifying	O ID 1/2	
010-INS08	Employment Status Code	O ID 2/2	"FT" – Full time active employee "RT" – Retired "PT" – Part-time
REF	Subscriber Number	M	
020-REF01	Reference Identification Qualifier Pg 51	M ID 2/3	"0F" Subscriber Number
020-REF02	Reference Identification	M AN 1/30	Member Social Security Number

HIPAA Field Position-Segment ID	HIPAA Data Element Name and Page Number from Implementation Guide	Attributes	Valid Values and Comments
REF	Member Policy Number	M	
020-REF01	Reference Identification Qualifier Pg 53	M ID 2/3	"1L" - Group or Policy Number
020-REF02	Reference Identification INDUSTRY: Insured Group or Policy Number	M AN 1/10	Up to 10 character Plan ID for PPO Up to 4 character MagnaCare Assigned Plan ID for ASC
REF	Member Supplemental Number	M	<i>Name change in 5010</i>
020-REF02	Reference Identification Qualifier Pg 55	M ID 2/3	"ZZ"- Alternate ID "23" –Person Number. – Unique Person Identifier e.g. "01", "02" ... This number must always be the same in each update received and cannot contain Alpha Char. The sequencing must start with "01" as member, "02" spouse, "03" first child, "04" next child.... (ASC only) "DX" – Member Shop Number (ASC only) "F6" – Health Insurance Claim (HIC) number. Format accepted is (HIC#-SEE Begin Date-SEE End Date). SEE stands for Small Employer Exception.
	Reference Identification	M AN 1/50	
2100A			
NM1	Member Name	M	
030-NM101	Entity Identifier Code Pg 61	M ID 2/3	"1L" - Insured or Subscriber
030-NM102	Entity Type Qualifier	M ID 1/1	"1" – Person
030-NM103	Name Last or Organization Name INDUSTRY: Subscriber Last Name	M AN 1/60	
030-NM104	Name First INDUSTRY: Subscriber First Name	M AN 1/35	
030-NM105	Name Middle	O AN 1/25	
030-NM106	Name Prefix	O AN 1/10	
030-NM107	Name Suffix	O AN 1/10	
030-NM108	Identification Code Qualifier	M ID 1/2	"34" Social Security Number
030-NM109	Identification Code INDUSTRY: Subscriber Identifier	M AN 2/80	Must be numeric, 9 digits
PER	Member Communication Numbers	O	
040-PER01	Contact Function Code	M ID 2/2	"IP" – Insured Party
040-PER01	Communication Number Qualifier	O AN 1/60	"EM" Electronic Mail "EX" Telephone Extension "FX" Facsimile "HP" Home Phone Number "TE" Telephone "WP" Work Phone Number
N3	Member Residence Street Address	M	
050-N301	Address Information Pg 67	M AN 1/55	
050-N301	Address line 2	O AN 1/55	
N4	Member Residence City, State, Zip	M	
060-N401	City Name Pg 68	O AN 2/30	For International Address please send default value 'XXX'
060-N402	State	O ID 2/2	For International Address please send default value 'XX'
060-N403	Zip	O ID 3/15	For International Address please send default value 'NONUS'
060-N404	Country Code	O ID 2/2	For International Address please send appropriate

HIPAA Field Position-Segment ID	HIPAA Data Element Name and Page Number from Implementation Guide	Attributes	Valid Values and Comments
			code for the country
DMG	Member Demographics	M	
080-DMG01	Date Time Period Qualifier Pg 70	M ID 2/3	"D8" (CCYYMMDD)
080-DMG02	Date Time Period	M AN 1/35	Member Birth Date
080-DMG03	Gender Code	M ID 1/1	"F"- Female, "M"- Male, "U" – Unknown
080-DM04	Marital Status Code (optional)	O ID 1/1	"B" Registered Domestic Partner "D" Divorced "I" Single "M" Married "R" Unreported "S" Separated "U" Unmarried (Single or Divorced or Widowed) This code should be used if the previous status is unknown. "W" Widowed "X" Legally Separated
2200			
DSB	Disability Information	O	
200-DSB01	Disability Type Code Pg 124	M ID 1/1	"1" Short Term Disability "2" Long Term Disability "3" Permanent or Total Disability "4" No Disability
200-DSB07	Product or Service ID Qualifier	X ID 2/2	"DX" - ICD-9 Diagnosis "ZZ" – ICD-10 Diagnosis
200-DSB08	Medical Code Value INDUSTRY: Diagnosis Code	M AN 1/15	"585" - The only allowed value Use DSB08 to indicate if the reason for disability is End Stage renal Disease (ESRD).
DTP	Disability Eligibility Dates	O	
210-DTP01	Date/Time Qualifier Pg 126	M ID 3/3	"360" Disability Begin "361" Disability End
210-DTP02	Date Time Period Format Qualifier	M ID 2/3	"D8" - Date Expressed in Format CCYYMMDD
210-DTP03	Disability Eligibility Date	M AN 1/35	
2300			
HD	Health Coverage	M	
260-HD01	Maintenance Type Code Pg 128	M ID 3/3	"030" Audit or Compare
260-HD03	Insurance Line Code	M ID 2/3	"HLT" – Health. Includes both hospital and professional coverage "VIS" – Vision "DEN" - Dental
260-HD05	Plan Coverage Description	O 1/50	
260-HD05	Coverage Level Code	O ID 3/3	"FAM" – Family "IND" – Individual "ECH" – Employee and Children
DTP	Health Coverage Dates	M	
270-DTP01	Date/Time Qualifier Pg 131	M ID 3/3	"348" Benefit Begin. This is the effective date of coverage. This code should always be sent when adding coverage. "349" Benefit End. To cancel coverage which was not intended to be active, use benefit end date equal to the benefit begin date. "543" Last Premium Paid Date / Hold Date
270-DTP02	Date Time Period Format Qualifier	M ID 2/3	"D8" Date Expressed in Format CCYYMMDD "RD8" Date Expressed in Range CCYYMMDD - CCYYMMDD

HIPAA Field Position-Segment ID	HIPAA Data Element Name and Page Number from Implementation Guide	Attributes	Valid Values and Comments
270-DTP03	Date Time Period INDUSTRY: Coverage Period	M AN 1/35	
2310			
NM1	Provider Name	O	
320-NM101	Entity Identifier Code Pg 140	M ID 2/3	"3D" Obstetrics and Gynecology Facility "OD" Doctor of Optometry "P3" Primary Care Provider "QA" Pharmacy "QN" Dentist "Y2" Managed Care Organization
320-NM102	Entity Type Qualifier	M ID 1/1	"1" – Person "2" Non-Person Entity
320-NM103	Name Last or Organization Name INDUSTRY: Subscriber Last Name	O AN 1/35	
320-NM104	Name First INDUSTRY: Subscriber First Name	O AN 1/25	
320-NM105	Name Middle	O AN 1/25	
320-NM105	Name Prefix	O AN 1/10	
320-NM108	Identification Code Qualifier	M ID 1/2	"34" Social Security Number "FI" Federal Taxpayer's Identification Number "XX" Health Care Financing Administration National Provider Identifier
320-NM109	Identification Code INDUSTRY: Subscriber Identifier	M AN 2/80	
2320			
COB	Coordination of Benefits	O	
400-COB01	Payer Responsibility Sequence Number Code Pg 150	M ID 1/1	RANK – <i>Only submit COB information that is Primary to MagnaCare</i> "P" Primary
400-COB02	Reference Identification INDUSTRY: Insured Group or Policy Number	M AN 1/50	COB policy number when it is available
400-COB03	Coordination of Benefits Code	M ID 1/1	"1" Coordination of Benefits
REF	Additional COB Identifiers	O	
405-REF01	Reference Identification Qualifier	M ID 2/3	"SY", "6P", "ZZ"
405-REF02	Reference Identification	X AN 1/30	COB Policy Number
DTP	COB Eligibility Dates	O	
450-DTP01	Date Time Qualifier Pg 156	M ID 3/3	"344" Coordination of Benefits Begin "345" Coordination of Benefits End
	Date Time Period Format Qualifier	M ID 2/3	D8 Date Expressed in Format CCYYMMDD
	Date Time Period INDUSTRY: COB Date	M AN 1/35	
2330 (New Loop in 5010)			
NM1	COB Related Entity	O	
030-NM101	Entity Identifier Code	M ID 2/3	"IN" - Insurer
030-NM102	Entity Type Qualifier	M ID 1/1	"2" – Non Person Entity
030-NM103	Name Last or Organization Name INDUSTRY: COB Insurer Name	M AN 1/60	Note: Please pass Medicare information in INS06.01 and non-Medicare in this Segment.

8 Appendix

A. Implementation Checklist

The following task list should be completed to facilitate a smooth implementation of the EDI process.

TASK	Responsibility	Date
<input type="checkbox"/> Establish Standard ISA and GS information	Client & MagnaCare	
<input type="checkbox"/> Confirm business rules	Client & MagnaCare	
<input type="checkbox"/> Determine communication method	Client & MagnaCare	
<input type="checkbox"/> Set up the encryption process	Client & MagnaCare	
<input type="checkbox"/> Establish a schedule for testing	Client & MagnaCare	
<input type="checkbox"/> Complete testing	Client & MagnaCare	
<input type="checkbox"/> Sign off on Companion Guide	Client & MagnaCare	
<input type="checkbox"/> Production cut-over	Client & MagnaCare	

9 Example

ISA*00* *00* *ZZ*CLIENT CODE *30*11-3038233
*030828*1547*^*00501*000000001*0*P*:
GS*BE*CLIENT*12-3456789*20030828*1547*1*X*005010X220A1
ST*834*0001*005010X220A1
BGN*00*000000001*20030828*1547****4
REF*38*ClientCode
DTP*007*D8*20030828
N1*P5*ClientCode*FI*11-1111111
N1*IN*MAGNACARE*FI*11-3038233
INS*Y*18*030*XN*A***FT
REF*0F*900000001
REF*23*01
REF*DX*452A
REF*F6*0123456789-20081212-20081231
REF*ZZ*1234567989AB
REF*1L*A
DTP*356*D8*19871201
NM1*IL*1*LAST NAME*SUBSCRIBER FIRST NAME****34*900000001
PER*IP**HP*5165551212
N3*ADDRESS1*ADDRESS2
N4*CITY**NONUS*ZZ*CA
DMG*D8*19590830*F*M
DSB*2*****DX*585
DTP*360*D8*20081212
DTP*361*D8*20081231
HD*030**HLT*A*FAM
DTP*348*D8*19871201
DTP*349*D8*20050801
INS*N*01*030*XN*A
REF*0F*900000001
REF*23*02
REF*F6*012345678912
REF*ZZ*1234567989AB
REF*1L*B
NM1*IL*1*LAST*DEPENDENT FIRST NAME****34*900000002
PER*IP**HP*5162265756
N3*ADDRESS1*ADDRESS2
N4*CITY*NY*11507
DMG*D8*19551104*M*M
HD*030**HLT*A*FAM
DTP*348*D8*20030801
DTP*349*D8*20030801
INS*N*19*030*XN*A
REF*0F*900000001

REF*23*03
REF*ZZ*1234567989AB
REF*1L*C
NM1*IL*1*LAST*DEPENDENT FIRST NAME****34*900000003
PER*IP**HP*5162265756
N3*ADDRESS1*ADDRESS2
N4*CITY*NY*11507
DMG*D8*19820521*F
HD*030**HLT*A*FAM
DTP*348*D8*20030801
INS*Y*18*030*XN*A***FT
REF*0F*900000004
REF*23*01
REF*ZZ*123456888
REF*DX*452B-123
REF*1L*PLAN 1234
NM1*IL*1*LAST*SUBSCRIBER FIRST NAME****34*900000004
PER*IP**HP*2074158398
N3*ADDRESS1*ADDRESS2
N4*CITY*MA*04000
DMG*D8*19650412*M*D
HD*030**HLT*A*EMP
DTP*348*D8*19951201
COB*P*890111*1
REF*SY*890111
DTP*344*D8*20120101
DTP*345*D8*20130101
NM1*IN*2*COB INS COMPANY NAME
SE*70*0001
GE*1*1
IEA*1*000000001