The following is intended to be a companion document to the National Electronic Data Interchange Transaction Set Implementation Guide, Health Care Eligibility Benefit Inquiry and Response, ASC X12N 270/271 (004010X092A1). The specifications in this document are clarifications that are allowed within the HIPAA transaction sets. The Medicare COB Contractor will only accept and send data in this transaction that is allowed by the HIPAA rules and guides. **This document does not outline all data segments and elements that are in the HIPAA transaction set guide. This document will only address segments as they apply to the COB Contactor.**

Additional information on the Final Rule for Standards for Electronic Transmissions can be found at
http://aspe.hhs.gov/admnsimp/final/txfin00.htm.  The HIPAA Implementation Guides can be accessed at
http://www.wpc-edi.com/products/publications.

# Purpose of the 270/271 Health Care Eligibility Benefit Inquiry and Response

The 270 Transaction Set is used to transmit Health Care Eligibility Benefit Inquiries from health care providers, insurers, clearinghouses and other health care adjudication processors. The 270 Transaction Set can be used to make an inquiry about the Medicare eligibility of an individual.

The 271 Transaction Set is the appropriate response mechanism for Health Care Eligibility Benefit Inquiries. There are several levels (i.e. Information Source, Information Receiver, Subscriber, etc.) at which a transaction can be rejected for incomplete or erroneously formatted inquiry information. The AAA Request Validation segment is used to communicate the reason for the failure at the appropriate level. For a detailed analysis AAA segment and its use, please refer to Page 23 of the 270/271 Implementation Guide.

## Special Notes – Applicable to the Entire Transaction

- Syntax: Always use a tilde (~) as the segment terminator, an asterisk (*) as the element separator and a colon (: ) as the sub-element separator. Alpha characters should always be submitted in ALL CAPS.

- The 270 file must be formatted to a record length of 80 bytes wrapped.

- The 271 file will be sent also in a 80 byte wrapped format.

- For the 270, We use multiple eligibility requests in one transaction set (ST/SE), and one functional group (GS/GE) and one interchange (ISA/IEA) per file.

  Example:

  ISA
  GS
  ST
  Eligibility Request
  Eligibility Request
  Eligibility Request
  Eligibility Request
  .....
  SE
  GS
  IEA

*HIPAA Guidelines for Electronic Transactions – Companion Document for Mandatory Reporting GHP Entities*

- For the 271, we use multiple eligibility response in one transaction set (ST/SE), and one functional group (GS/GE) and one interchange (ISA/IEA) per file.

  Example:

  ISA
  GS
  ST
  Eligibility Response
  Eligibility Response
  Eligibility Response
  Eligibility Response
  .....
  SE
  GS
  IEA

## 270/271 File Translation

- The COB Contractor has HEW (HIPAA Eligibility Wrapper) software available for translating the COB Medicare eligibility query and response files into and out of the 270/271 formats. This software is available in both a mainframe and a PC compatible format to Responsible Reporting Entities under Section 111 Mandatory Reporting. If you choose to use a different translator you will need to ensure that the information used to create the file is compatible with the COB processing as defined in the following file specification. Please note that the HEW software can only be used for translation of the COB Medicare eligibility query file format.

# 270 Eligibility Inquiry Companion Document

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| **Interchange Control Header** | | | *Fixed length section- include spaces to fill entire field* | | |
| ISA01 | Authorization Information Qualifier | ISA | N/A | '00' (zero, zero) – No Authorization Information Present (No meaningful information in ISA02) | 00 |
| ISA02 | Authorization Information | ISA | N/A | Blank (fill with 10 spaces) | |
| ISA03 | Security Information Qualifier | ISA | N/A | '00' (zero, zero) – No Authorization Information Present (No meaningful information in ISA04) | 00 |
| ISA04 | Security Information | ISA | N/A | Blank (fill with 10 spaces) | |
| ISA05 | Interchange ID Qualifier | ISA | N/A | 'ZZ' (for Mutually Defined) | ZZ |
| ISA06 | Interchange Sender ID | ISA | N/A | 9-digit Responsible Reporting Entity (RRE) number assigned by COB. This field must be 15 bytes in length. The 9-digit RRE number should be left justified within the field. Leading zeros should be used to populate the 9-digits. The remaining 6-bytes should be filled with spaces. | 012345678 |
| ISA07 | Interchange ID Qualifier | ISA | N/A | 'ZZ' (for Mutually Defined) | ZZ |
| ISA08 | Interchange Receiver ID | ISA | N/A | 'CMS' – Field must be 15 bytes and left justified. Fill balance of field with spaces. | CMS |
| ISA09 | Interchange Date | ISA | N/A | Interchange Creation Date in YYMMDD format | 090427 |
| ISA10 | Interchange Time | ISA | N/A | Interchange Creation Time in HHMM format | 1734 |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| ISA11 | Interchange Control Standards Identifier | ISA | N/A | 'U' (for U.S. EDI Community of ASC X12, TDCC and UCS) | U |
| ISA12 | Interchange Control Version Number | ISA | N/A | '00401' | 00401 |
| ISA13 | Interchange Control Number | ISA | N/A | Unique number that should start with 1 and increment by 1 with each ISA record submitted. The number should be 9 digits. | 000000001 |
| ISA14 | Acknowledgment Requested | ISA | N/A | '0' (zero for no Interchange Acknowledgment Requested) | 0 |
| ISA15 | Usage Indicator | ISA | N/A | 'P' (for Production Data) * Data Set name determines whether file will be processed as production or test. Always use 'P' | P |
| ISA16 | Component Element Separator | ISA | N/A | A ':' (colon) must be sent in this field. | : |
| Functional Group Header | *Variable length section* | | | | |
| GS01 | Functional Identifier Code | GS | N/A | 'HS' (for Eligibility, Coverage or Benefit Inquiry- 270) | HS |
| GS02 | Application Sender's Code | GS | N/A | The RRE number must contain 9 digits. Populate leading positions with zeros. | 012345678 |
| GS03 | Application Receiver's Code | GS | N/A | Value = 'CMS' | CMS |
| GS04 | Date | GS | N/A | Functional Group Creation date in CCYYMMDD format | 20090428 |
| GS05 | Time | GS | N/A | Functional Group Creation time in HHMM or HHMMSS format | 1425 or 142530 |
| GS06 | Group Control Number | GS | N/A | Unique number within the interchange that must be identical to value in GE02 (should | 01 |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| | | | | begin with '1' and increment by 1 for each GS-GE) | |
| GS07 | Responsible Agency Code | GS | N/A | 'X' (from Accredited Standards Committee X12) | X |
| GS08 | Version/Release/Industry Identifier Code | GS | N/A | '004010X092A1' | 004010X092A1 |
| Transaction Set Header – Indicates the start of the Transaction Set *(Variable length section)* | | | | | |
| ST01 | Transaction Set Identifier | ST | N/A | '270' (for Eligibility, Coverage, or Benefit Inquiry) | 270 |
| ST02 | Transaction Set Control Number | ST | N/A | Unique number to the interchange that must be identical to value in SE02 (should begin with '0001' and increment by 1 for each ST-SE). | 0001 |
| Beginning of Hierarchical Transaction – First segment of the 270 Transaction set *(Variable length section)* | | | | | |
| BHT01 | Hierarchical Structure Code | BHT | N/A | '0022' (for Information Source, Information Receiver, Subscriber, Dependent) | 0022 |
| BHT02 | Transaction Set Purpose | BHT | N/A | '13' (for request) | 13 |
| BHT04 | Transaction Set Creation Date | BHT | N/A | Creation date of file expressed in CCYYMMDD format | 20090428 |
| BHT05 | Transaction Set Creation Time | BHT | N/A | Creation time of file expressed in HHMM format | 1411 |
| Please refer to the 270/271 Implementation Guide for Notes and Gray Box comments regarding use of the 2000A-HL segment. *(variable length)* | | | | | |
| HL01 | Hierarchical ID Number | HL | 2000A | HL01 must begin with the number one (1) and increase by 1 for each subsequent HL segment. Only numeric values are allowed in | HL*1 |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| | | | | HL01. | |
| HL03 | Hierarchical Level code | HL | 2000A | '20' (for Information Source). | HL*1**20 |
| HL04 | Hierarchical Child code | HL | 2000A | '1' (to indicate that subordinate HL segments will follow). | HL*1**20*1 |
| **Information Receiver Name** | | | | | |
| NM101 | Entity Identifier Code | NM1 | 2100A | 'PR' (for payer) | PR |
| NM102 | Entity Type Qualifier | NM1 | 2100A | '2' (for Non-Person Entity) | 2 |
| NM108 | Identification Code Qualifier | NM1 | 2100A | 'PI' (for Payer Information) | PI |
| NM109 | Information Source Primary Identifier | NM1 | 2100A | 'CMS' | CMS |
| **Please refer to the 270/271 Implementation Guide for Notes and Gray Box comments regarding use of the 2000B-HL segment.** *(variable length)* | | | | | |
| HL01 | Hierarchical ID Number | HL | 2000B | HL01 value at this loop should be '2'. Only numeric values are allowed in HL01. | HL*2 |
| HL02 | Hierarchical Parent ID Number | HL | 2000B | Should always be '1' at this loop | HL*2*1 |
| HL03 | Hierarchical Level code | HL | 2000B | '21' (for Information Receiver) | HL*2*1*21 |
| HL04 | Entity Child Code | HL | 2000B | '1' (for Additional Subordinate HL Data Segment in this Hierarchical Structure – refers to Subscriber info in 2000C loop) | HL*2*1*21*1 |
| NM101 | Entity Identifier Code | NM1 | 2100B | 'P5' (for Plan Sponsor) | P5 |
| NM102 | Entity Type Qualifier | NM1 | 2100B | '2' (for Non-Person entity) | 2 |
| NM108 | Identification Code Qualifier | NM1 | 2100B | 'PI' (for Payer Information) | PI |
| NM109 | Information Receiver Identification Number | NM1 | 2100B | The RRE number must contain 9 digits. Populate leading positions with zeros. | 012345678 |

*HIPAA Guidelines for Electronic Transactions – Companion Document for Mandatory Reporting GHP Entities*

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| Please refer to the 270/271 Implementation Guide for Notes and Gray Box comments regarding use of the 2000C-HL segment. *(variable length)* | | | | | |
| HL01 | Hierarchical ID Number | HL | 2000C | HL01 value at this loop should begin with '3' and increment by one for each new transaction in the transaction set. Only numeric values are allowed in HL01. | HL*3 |
| HL02 | Hierarchical Parent ID Number | HL | 2000C | Should always be '2' at this loop | HL*3*2 |
| HL03 | Hierarchical Level code | HL | 2000C | '22' (for Subscriber) | HL*3*2*22 |
| HL04 | Entity Child Code | HL | 2000C | '0' (for No Subordinate HL Segment in this Hierarchical Structure – *refers to the fact that the Subscriber is always the Recipient/Patient* | HL*3*2*22*0 |
| The 2100C-NM1 – Subscriber Name segment identifies the subscriber (insured) by name and identification number. *(variable length)* | | | | | |
| NM101 | Entity Identifier Code | NM1 | 2100C | 'IL' (for insured or subscriber) | IL |
| NM102 | Entity Type Qualifier | NM1 | 2100C | '1' (for Person) | 1 |
| NM103 | Subscriber Last Name | NM1 | 2100C | First 6 bytes of Last Name of subscriber (insured) | DOE |
| NM104 | Subscriber First Name | NM1 | 2100C | First initial of subscriber (insured) | J |
| NM108 | Identification Code Qualifier | NM1 | 2100C | 'MI' (for member identification number) | MI |
| NM109 | Subscriber Primary Identifier | NM1 | 2100C | Member's HICN | 123456789A |
| Information Receiver Additional Identification | | | | | |
| REF01 | Reference Identification Qualifier | REF | 2100C | 'IG' (for insurance policy number) | IG |
| REF02 | Subscriber Supplemental Identifier | REF | 2100C | Plan enrollees Social Security Number (9-digits) Do not include hyphens. | 999999999 |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| The 2100C-DMG-Subscriber Demographic Information segment is situational. This segment should be sent when the value in 2100C-NM109 is not known and the birth date can be used to identify the subscriber. | | | | | |
| DMG01 | Date Time Period Format | DMG | 2100C | 'D8' (for Date Expressed in format CCYYMMDD) | D8 |
| DMG02 | Subscriber Birth Date | DMG | 2100C | Member's Date of Birth in format CCYYMMDD | 19351215 |
| DMG03 | Subscriber Gender Code | DMG | 2100C | 'F' (for female) 'M' (for male) 'U' (for unknown) | F |
| Transaction Set Trailer – Indicates the end of the Transaction Set | | | | | |
| SE01 | Transaction Segment Count | SE | N/A | Total Number of segments included in a transaction set (including the ST and SE segments) | 42 |
| SE02 | Transaction Set Control Number | SE | N/A | Unique number to the interchange that must be identical to the value in ST02. | 0001 |
| Functional Group Trailer | | | | | |
| GE01 | Number of Transaction Sets Included | GE | N/A | Total Number of transaction sets included in the functional group | 1 |
| GE02 | Group Control Number | GE | N/A | Unique number assigned by the sender that must be identical to GS06 | 0001 |
| Interchange Control Trailer | | | | | |
| IEA01 | Number of Included Functional Groups | IEA | N/A | Count of the number of functional groups included in an interchange. | 1 |
| IEA02 | Interchange Control Number | IEA | N/A | Control number assigned by the interchange sender that should be 9 characters and be identical to the value in ISA13. | 000000001 |

## 271 Eligibility Response Companion Document

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| **Interchange Control Header** | | | *Fixed length section- include spaces to fill entire field* | | |
| ISA01 | Authorization Information Qualifier | ISA | N/A | '00' (zero, zero) – No Authorization Information Present (No meaningful information in ISA02) | 00 |
| ISA02 | Authorization Information | ISA | N/A | Blank (fill with 10 spaces) | |
| ISA03 | Security Information Qualifier | ISA | N/A | '00' (zero, zero) – No Authorization Information Present (No meaningful information in ISA04) | 00 |
| ISA04 | Security Information | ISA | N/A | Blank (fill with 10 spaces) | |
| ISA05 | Interchange ID Qualifier | ISA | N/A | 'ZZ' (for Mutually Defined) | ZZ |
| ISA06 | Interchange Sender ID | ISA | N/A | 'COB' – Field must be 15 bytes and left justified. Fill balance of field with spaces. | COB |
| ISA07 | Interchange ID Qualifier | ISA | N/A | 'ZZ' (for Mutually Defined) | ZZ |
| ISA08 | Interchange Receiver ID | ISA | N/A | 9-digit Responsible Reporting Entity (RRE) number assigned by COB. This field must be 15 bytes and left justified. Fill balance of field with spaces. | 012345678 |
| ISA09 | Interchange Date | ISA | N/A | Interchange Creation Date in YYMMDD format | 090427 |
| ISA10 | Interchange Time | ISA | N/A | Interchange Creation Time in HHMM format | 1734 |
| ISA11 | Interchange Control Standards Identifier | ISA | N/A | 'U' (for U.S. EDI Community of ASC X12, TDCC and UCS) | U |
| ISA12 | Interchange Control Version Number | ISA | N/A | '00401' | 00401 |
| ISA13 | Interchange Control | ISA | N/A | Unique number that should start with 1 and | 000000001 |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| | Number | | | increment by 1 with each ISA record submitted. The number should be 9 digits and identical to IEA02. | |
| ISA14 | Acknowledgment Requested | ISA | N/A | '0' (zero for no Interchange Acknowledgment Requested) | 0 |
| ISA15 | Usage Indicator | ISA | N/A | 'P' (for Production Data) * Data Set name determines whether file will be processed as production or test. Always use 'P' | P |
| ISA16 | Component Element Separator | ISA | N/A | A ':' (colon) must be sent in this field. | : |
| Functional Group Header | | | | | |
| GS01 | Functional Identifier Code | GS | N/A | 'HB' (for Eligibility, Coverage or Benefit Inquiry- 271) | HB |
| GS02 | Application Sender's Code | GS | N/A | COB | COB |
| GS03 | Application Receiver's Code | GS | N/A | 9-digit Responsible Reporting Entity (RRE) number assigned by COB. | 012345678 |
| GS04 | Date | GS | N/A | Functional Group Creation date in CCYYMMDD format | 20090428 |
| GS05 | Time | GS | N/A | Functional Group Creation time in HHMM or HHMMSS format | 1425 or 142530 |
| GS06 | Group Control Number | GS | N/A | Unique number within the interchange. Will begin with 0001 and will increment by 1 for each ISA sent, and will be identical to GE02) | 0001 |
| GS07 | Responsible Agency Code | GS | N/A | 'X' (from Accredited Standards Committee X12) | X |
| GS08 | Version/Release/Industry | GS | N/A | '004010' | 004010 |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| | Identifier Code | | | | |
| Transaction Set Header – Indicates the start of the Transaction Set | | | | | |
| ST01 | Transaction Set Identifier | ST | N/A | '271' (for Eligibility, Coverage or Benefit Information) | 271 |
| ST02 | Transaction Set Control Number | ST | N/A | Unique number to the interchange that must be identical to the value in SE02 (should begin with '0001' and increment by 1 for each ST-SE) | 0001 |
| Beginning of Hierarchical Transaction – First segment of the 271 Transaction Set | | | | | |
| BHT01 | Hierarchical Structure Code | BHT | N/A | '0022' (for Information Source, Information Receiver, Subscriber, Dependent) | 0022 |
| BHT02 | Transaction Set Purpose Code | BHT | N/A | '11' (for response) | 11 |
| BHT03 | Reference Identification | BHT | N/A | Number assigned by the originator to identify the transaction. Populate with 9-digit Responsible Reporting Entity (RRE) number assigned by COB. | 012345678 |
| BHT04 | Date | BHT | N/A | Creation date of file expressed in CCYYMMDD format | 20090428 |
| BHT05 | Time | BHT | N/A | Creation time of file expressed in HHMMSS format | 141125 |
| Please refer to the 270/271 Implementation Guide for Notes and Gray Box comments regarding use of the 2000A-HL segment. *(variable length)* | | | | | |
| HL01 | Hierarchical ID Number | HL | 2000A | HL01 must begin with the number one (1) and increase by 1 for each subsequent HL segment. Only numeric values are allowed in HL01. | HL*1 |
| HL03 | Hierarchical Level code | HL | 2000A | '20' (for Information Source). | HL*1**20 |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| HL04 | Hierarchical Child code | HL | 2000A | '1' (to indicate that subordinate HL segments will follow). | HL*1**20*1 |
| NM101 | Entity Identifier Code | NM1 | 2100A | 'PR' (for Payer) | PR |
| NM102 | Entity Type Qualifier | NM1 | 2100A | '2' (for Non-Person Entity) | 2 |
| NM108 | Identification Code Qualifier | NM1 | 2100A | Eligibility or Benefit Information | PI |
| NM109 | Information Source Primary Identifier | NM1 | 2100A | Coverage Level code | CMS |
| Information Receiver 2000B Loop *(variable length)* | | | | | |
| HL01 | Hierarchical ID Number | HL | 2000B | HL01 must begin with the number one (1) and increase by 1 for each subsequent HL segment. Only numeric values are allowed in HL01. | HL*2 |
| HL02 | Hierarchical Parent ID Number | HL | 2000B | '1' to identify hierarchical ID number of the HL segment to which current segment is subordinate | HL*2*1 |
| HL03 | Hierarchical Level code | HL | 2000B | '21' (for Information Receiver). | HL*2*1*21 |
| HL04 | Hierarchical Child code | HL | 2000B | '1' (to indicate that subordinate HL segments will follow). | HL*2*1*21*1 |
| NM101 | Entity Identifier Code | NM1 | 2100B | 'P5' (for Plan Sponsor) | P5 |
| NM102 | Entity Type Qualifier | NM1 | 2100B | '2' (for Non-Person Entity) | 2 |
| NM108 | Identification Code Qualifier | NM1 | 2100B | 'PI' (for Payor Identification) | PI |
| NM109 | Information Source Primary Identifier | NM1 | 2100B | 9-digit Responsible Reporting Entity (RRE) number assigned by COB. This field must be 15 bytes and left justified. Fill balance of field with spaces. | 012345678 |
| Subscriber Level – 2000C loop *(variable length)* | | | | | |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| HL01 | Hierarchical ID Number | HL | 2000C | HL01 must begin with the number one (3) and increase by 1 for each subsequent HL segment. Only numeric values are allowed in HL01. | HL*3 |
| HL02 | Hierarchical Parent ID Number | HL | 2000C | HL02 identifies the Hierarchical ID number of the HL segment to which the current HL segment is subordinate. | HL*3*2 |
| HL03 | Hierarchical Level code | HL | 2000C | '22' (for Subscriber) | HL*3*2*22 |
| HL04 | Hierarchical Child code | HL | 2000C | '1' (to indicate that subordinate HL segments will follow). | HL*3*2*22*1 |
| TRN01 | Trace Type Code | TRN | 2000C | '1' (for Current Transaction Trace Numbers) –refers to trace or reference number assigned by the creator of the 271 transaction (the information source) | 1 |
| TRN02 | Trace Number | TRN | 2000C | Reference number sent in the 270 Inquiry transaction (when '2' qualifier is present in TRN01) or new reference number (when '1' qualifier is present in TRN01) Document control number | 123456789 |
| TRN03 | Originating Company ID | TRN | 2000C | The number '9' plus the RRE number. The RRE number must contain 9 digits. Populate leading positions with zeros. | 9002345678 |
| The 2100C-NM1 – Subscriber Name segment identifies the subscriber (insured) for whom the eligibility information was requested. | | | | | |
| NM101 | Entity Identifier Code | NM1 | 2100C | 'IL' (for insured or subscriber) | IL |
| NM102 | Entity Type Qualifier | NM1 | 2100C | '1' (for Person) | 1 |
| NM103 | Subscriber Last Name | NM1 | 2100C | First 6 bytes of Last Name of subscriber (insured) | DOE |
| NM104 | Subscriber First Name | NM1 | 2100C | First initial of subscriber (insured) | J |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| NM108 | Identification Code Qualifier | NM1 | 2100C | 'MI' (for member identification number) | MI |
| NM109 | Subscriber Primary Identifier | NM1 | 2100C | Member's HICN | 123456789A |
| REF01 | Reference Identification Qualifier | REF | 2100C | 'IG' Insurance Policy Number | IG |
| REF02 | Subscriber Supplemental Identifier | REF | 2100C | Subscriber Social Security Number | 999999999 |
| Subscriber Request Validation  - Situational   Only included if insured not found. | | | | | |
| AAA01 | Valid Request Indicator | AAA | 2100C | 'Y' (for yes) | Y |
| AAA03 | Reject Reason Code | AAA | 2100C | '75' (for subscriber/insured not found) | 75 |
| AAA04 | Follow-up Action Code | AAA | 2100C | 'C' (for correct and resubmit) | C |
| The 2100C-DMG-Subscriber Demographic Information segment. This segment should be sent when the value in 2100C-NM109 is not known and the birth date can be used to identify the subscriber. | | | | | |
| DMG01 | Date Time Period Format | DMG | 2100C | 'D8' (for Date Expressed in format CCYYMMDD) | D8 |
| DMG02 | Subscriber Birth Date | DMG | 2100C | Member's Date of Birth in format CCYYMMDD | 19351215 |
| DMG03 | Subscriber Gender Code | DMG | 2100C | 'F' (for female) 'M' (for male) 'U' (for unknown) | F |
| DTP01 | Date and Time Period Qualifier | DTP | 2100C | '442' (for End Date) | 442 |
| DTP02 | Date Format | DTP | 2100C | 'D8' Date Format = CCYYMMDD | D8 |
| DTP03 | Date | DTP | 2100C | Date of Death | 20090315 |
| Subscriber Eligibility or Benefit Information  2110C loop | | | | | |
| EB01 | Eligibility or Benefit Information | EB | 2110C | '1' (for Active Coverage) | 1 |
| EB02 | Coverage Level code | EB | 2110C | 'IND' (for individual) | IND |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| EB04 | Insurance Type Code | EB | 2110C | 'MA' (for Medicare Part A) | MA |
| DTP01 | Date and Time Period Qualifier | DTP | 2110C | '356' (for Begin Date) | 356 |
| DTP02 | Date Format | DTP | 2110C | 'D8' Date Format = CCYYMMDD | D8 |
| DTP03 | Date | DTP | 2110C | Part A Entitlement Date | 20050101 |
| DTP01 | Date and Time Period Qualifier | DTP | 2110C | '357' (for End Date) | 357 |
| DTP02 | Date Format | DTP | 2110C | 'D8' Date Format = CCYYMMDD | D8 |
| DTP03 | Date | DTP | 2110C | Part A Entitlement Termination date | 20090131 |
| EB01 | Eligibility or Benefit Information | EB | 2110C | '1' (for Active Coverage) | 1 |
| EB02 | Coverage Level code | EB | 2110C | 'IND' (for individual) | IND |
| EB04 | Service Type Code | EB | 2110C | 'MB' (for Medicare Part B) | MB |
| DTP01 | Date and Time Period Qualifier | DTP | 2110C | '356' (for Begin Date) | 356 |
| DTP02 | Date Format | DTP | 2110C | 'D8' Date Format = CCYYMMDD | D8 |
| DTP03 | Date | DTP | 2110C | Part B Entitlement Date | 20050101 |
| DTP01 | Date and Time Period Qualifier | DTP | 2110C | '357' (for End Date) | 357 |
| DTP02 | Date Format | DTP | 2110C | 'D8' Date Format = CCYYMMDD | D8 |
| DTP03 | Date | DTP | 2110C | Part B Entitlement Termination date | 20090131 |
| EB01 | Eligibility or Benefit Information | EB | 2110C | '1' (for Active Coverage) | 1 |
| EB02 | Coverage Level code | EB | 2110C | 'IND' (for individual) | IND |
| EB04 | Service Type Code | EB | 2110C | 'HM' (for Medicare Part C - HMO) | HM |
| EB05 | Plan Coverage Description | EB | 2110C | Contractor number 5-digits | 12345 |
| DTP01 | Date and Time Period | DTP | | '356' (for Begin Date) | 356 |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
| | Qualifier | | 2110C | | |
| DTP02 | Date Format | DTP | 2110C | 'D8' Date Format = CCYYMMDD | D8 |
| DTP03 | Date | DTP | 2110C | Part C Enrollment date | 20060101 |
| DTP01 | Date and Time Period Qualifier | DTP | 2110C | '357' (for End Date) | 357 |
| DTP02 | Date Format | DTP | 2110C | 'D8' Date Format = CCYYMMDD | D8 |
| DTP03 | Date | DTP | 2110C | Part C Termination date | 20081231 |
| 2110C – Subscriber Eligibility or Benefit Information - Situational | | | | | |
| MSG01 | Freeform Message Text | MSG | 2110C | Medicare Entitlement Reason 'ENTREAS=' <br> A = 65+ <br> B = ESRD <br> G = Disabled | ENTREAS=A |
| Transaction Set Trailer – Indicates the end of the Transaction Set | | | | | |
| SE01 | Transaction Segment Count | SE | N/A | Total Number of segments included in a transaction set (including the ST and SE segments) | 42 |
| SE02 | Transaction Set Control Number | SE | N/A | Unique number to the interchange that must be identical to the value in ST02. | 0001 |
| Functional Group Trailer | | | | | |
| GE01 | Number of Transaction Sets Included | GE | N/A | Total Number of transaction sets included in the functional group | 1 |
| GE02 | Group Control Number | GE | N/A | Unique number assigned by the sender that must be identical to GS06 | 0001 |
| Interchange Control Trailer | | | | | |
| IEA01 | Number of Included Functional Groups | IEA | N/A | Count of the number of functional groups included in an interchange. | 1 |
| IEA02 | Interchange Control Number | IEA | N/A | Control number assigned by the interchange sender that should be 9 characters and be | 000000001 |

| Element ID | Element Name | Segment ID | Loop ID | Valid Value(s) | Format Example |
|---|---|---|---|---|---|
|  |  |  |  | identical to the value in ISA13. |  |