| CMS Manual System |  <br> Human Services (DHHS) |
| :--- | :--- |
| Pub 100-20 One-Time Notification |  <br> Medicaid Services (CMS) |
| Transmittal 1145 | Date: November 2, 2012 |
|  | Change Request 8073 |

SUBJECT: Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for April 2013
I. SUMMARY OF CHANGES: The purpose of this Change Request (CR) is to provide the April 2013 CEM edits for the following Jurisdictions: J1, JF, JH, J4, J5, J8, J9, J10, J11, J12, J13, J14, and J15, as well as the Common Electronic Data Interchange (CEDI) contractor. Additionally, this CR directs Shared Systems to appropriately update the CEM.

This CR Title replaces the previous CR known as Health Insurance Portability and Accountability Act (HIPAA) 837 Institutional (837I) Edits and 837 Professional (837P) Edits January 2013

EFFECTIVE DATE: April 1, 2013
IMPLEMENTATION DATE: April 1, 2013
Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.
II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, N=NEW, D=DELETED-Only One Per Row.

| R/N/D | CHAPTER / SECTION / SUBSECTION / TITLE |
| :--- | :--- |
| N/A |  |

## III. FUNDING:

For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers: Not Applicable

## For Medicare Administrative Contractors (MACs):

The Medicare Administrative contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC statement of Work. The contractor is not obliged to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

## IV. ATTACHMENTS:

## One-Time Notification

*Unless otherwise specified, the effective date is the date of service.

## Attachment - One-Time Notification

Pub. 100-20 $\quad$ Transmittal: 1145 Date: November 2, 2012 Change Request: 8073

## SUBJECT: Health Insurance Portability and Accountability Act (HIPAA) EDI Front End Updates for April 2013

EFFECTIVE DATE: April 1, 2013
IMPLEMENTATION DATE: April 1, 2013

## I. GENERAL INFORMATION

A. Background: The purpose of this Change Request (CR) is to provide the April 2013 CEM edits for the following Jurisdictions: J1, JF, JH, J4, J5, J8, J9, J10, J11, J12, J13, J14, and J15, as well as the Common Electronic Data Interchange (CEDI) contractor. Additionally, this CR directs Shared Systems to appropriately update the CEM.

The change log worksheet tab contains only the changes made for this version.
Contractors and shared systems maintainers will use the attached edits spreadsheets as replacements for the previously issued edits spreadsheets. Contractors are not required to replicate work already done, but are only expected to use the updates to the spreadsheets to build upon their previous core deliverables.
B. Policy: The Administrative Simplification provisions of HIPAA require the Secretary of DHHS to adopt standard electronic transactions and code sets for administrative health care transactions. The Secretary may also modify these standards periodically.

## II. BUSINESS REQUIREMENTS TABLE

Use "Shall" to denote a mandatory requirement.



## III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility |  |  |  |  |  |
| :--- | :--- | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  | A/B | D | F | C | R |
|  | MAC | M | I | A | H | Other |  |
|  |  |  | E |  | R | H |  |


|  |  | P | P |  |  | R | I |  |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
|  |  | a | a | M |  | I |  |  |
|  |  | r | r | A | E |  |  |  |
|  |  | t | t | C |  | R |  |  |
|  |  | A | B |  |  |  |  |  |
|  | None |  |  |  |  |  |  |  |

## IV. SUPPORTING INFORMATION

## Section A: Recommendations and supporting information associated with listed requirements:

Use "Should" to denote a recommendation.

| X-Ref <br> Requirement <br> Number | Recommendations or other supporting information: |
| :--- | :--- |
|  | None. |

## Section B: All other recommendations and supporting information: N/A

## V. CONTACTS

Pre-Implementation Contact(s): Matthew Klischer, 410-786-7488 or Matthew.Klischer@cms.hhs.gov , Lauren Vandegrift, 410-786-4882 or lauren.vandegrift@cms.hhs.gov , Jason Jackson, 410-786-6156 or jason.jackson@cms.hhs.gov

Post-Implementation Contact(s): Contact your Contracting Officer's Representative (COR) or Contractor Manager, as applicable.

## VI. FUNDING

## Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), and/or Carriers:

Not Applicable

## Section B: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS do not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

Attachment (3)

| Version EA20132V01 | If alternative formats of the 5010 Edits spreadsheet are required, please use the "Submit Feedback" feature at the bottom of the Technical Documentation web page, from which these documents were downloaded. <br> http://www.cms.gov/MFFS5010D0/20 TechnicalDocumentation.asp |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | The Data Interchange Standards Association(DISA) holds a copyright on the TR3 documents: Copyright (c) 2009, Data Interchange Standards Association on behalf of ASC X12. Format (c) 2009, http://store.x12.org/ |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \\ \hline \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA111 } \\ 999 / \\ \text { 277CA } \end{gathered}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| X223.C3..ISA. 010 | ISA | $\begin{aligned} & \text { INTERCHANGE } \\ & \text { CONTROL HEADER } \\ & \hline \end{aligned}$ |  | 1 | R | - | 1 |  | TA1 | R | TA105 = 024: "Invalid Interchange Content". | ISA must be present. |  |
| X222.C3..ISA. 015 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.C3.ISA. 015 | ISA |  |  |  |  |  |  |  | TA1 | R | TA105 = 022: "Invalid Control Structure" -OR- | Only one iteration of ISA is allowed. | Contractors are free to choose the edit that best fits their translator functionality. |
|  |  |  |  |  |  |  |  |  | TA1 | R | TA105 = 023: "Improper (Premature) End-of-File (Transmission)" | Only one iteration of ISA is allowed. |  |
| X223.C3.ISA. 020 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.C3..ISA01.010 | ISA01 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Authorization Information } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-2 | R |  |  | 00, 03 | TA1 | R | $\begin{aligned} & \text { TA105 = 010: "Invalid Authorization } \\ & \text { Information Qualifier Value". } \end{aligned}$ | ISA01 must be present. |  |
| X223.C3..ISA01.020 | ISA01 |  |  |  |  |  |  |  | TA1 | R | TA105 = 010: "Invalid Authorization Information Qualifier Value". | ISA01 must be valid values. |  |
| X223.C3..ISA02.010 | ISA02 | Authorization Information | AN | 10-10 | R |  |  |  | TA1 | R | TA105 = 011: "Invalid Authorization Information Value". | ISA02 must be present. |  |
| X223.C3..ISA02.020 | ISA02 |  |  |  |  |  |  |  | TA1 | R | TA105 = 011: "Invalid Authorization | ISA02 must be 10 characters. |  |
| X223.C3..ISA02.030 | ISA02 |  |  |  |  |  |  |  | TA1 | R | TA105 = 011: "Invalid Authorization Information Value". | ISA02 must be populated with accepted AN characters <br> OR <br> ISA02 must be populated with all spaces. |  |
| X223.C3..ISA03.010 | ISA03 | Security Information Qualifier | ID | 2-2 | R |  |  | 00, 01 | TA1 | R | $\begin{aligned} & \text { TA105 = 012: "Security Information } \\ & \text { Qualifier Value". } \end{aligned}$ | ISA03 must be present. |  |
| X223.C3.ISA03.020 | ISA03 |  |  |  |  |  |  |  | TA1 | R | $\begin{aligned} & \text { TA105 = 012: "Security Information } \\ & \text { Qualifier Value". } \end{aligned}$ | ISA03 must be vaild values. |  |
| X223.C3..ISA04.010 | ISA04 | Security Information | AN | 10-10 | R |  |  |  | TA1 | R | TA105 = 013: "Security Information Value". | ISA04 must be present. |  |
| X223.C3.ISA04.020 | ISA04 |  |  |  |  |  |  |  | TA1 | R | TA105 = 013: "Security Information Value". | ISA04 must be 10 characters. |  |
| X223.C3..ISA04.030 | ISA04 |  |  |  |  |  |  |  | TA1 | R | TA105 = 013: "Security Information Value". | ISA04 must be populated with accepted AN characters <br> OR <br> ISA04 must be populated with all spaces. |  |
| X223.C3..ISA05.010 | ISA05 | Interchange ID Qualifier | ID | 2-2 | R |  |  | $\begin{array}{\|c\|} \hline 01,14,20,27,28,29,30,33, \\ z z \end{array}$ | TA1 | R | TA105 = 005: "Invalid Interchange ID Qualifier for Sender". | ISA05 must be present. |  |
| X223.C3..ISA05.020 | ISA05 |  |  |  |  |  |  |  | TA1 | R | TA105 = 005 : "Invalid Interchange ID Qualifier for Sender". | ISA05 must be "27", "28" or "ZZ". | Companion Guide Note needed. |
| X223.C3..ISA06.010 | ISA06 | Interchange Sender ID | AN | 15-15 | R |  |  |  | TA1 | R | $\begin{aligned} & \text { TA105 = 006: "Invalid Interchange } \\ & \text { Sender ID". } \end{aligned}$ | ISA06 must be present. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. Max. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.C3..ISA06.020 | ISA06 |  |  |  |  |  |  |  | TA1 | R | TA105 = 006: "Invalid Interchange Sender ID". | ISA06 must be 15 characters. |  |
| X223.C3..ISA06.030 | ISA06 |  |  |  |  |  |  |  | TA1 | R | TA105 = 006: "Invalid Interchange Sender ID". | ISA06 must contain at least one non-space character. |  |
| X223.C3..ISA06.040 | ISA06 |  |  |  |  |  |  |  | TA1 | R | TA105 = 006: "Invalid Interchange Sender ID". | ISA06 must be populated with accepted AN characters. |  |
| X223.C3..ISA07.010 | ISA07 | Interchange ID Qualifier | ID | 2-2 | R |  |  | $\begin{array}{\|c\|} \hline 01,14,20,27,28,29,30,33, \\ z z \end{array}$ | TA1 | R | TA105 = 007: "Invalid Interchange ID Qualifier for Receiver". | ISA07 must be present. |  |
| X223.C3..ISA07.020 | ISA07 |  |  |  |  |  |  |  | TA1 | R | TA105 = 007: "Invalid Interchange ID Qualifier for Receiver". | ISA07 must be "27", "28" or "ZZ". | Companion Guide Note needed. |
| X223.C3..ISA08.010 | ISA08 | Interchange Receiver ID | AN | 15-15 | R |  |  |  | TA1 | R | TA105 = 008: "Invalid Interchange Receiver ID". | ISA08 must be present. |  |
| X223.C3..ISA08.020 | ISA08 |  |  |  |  |  |  |  | TA1 | R | TA105 = 008: "Invalid Interchange Receiver ID": | ISA08 must be 15 characters. |  |
| X223.C3..ISA08.030 | ISA08 |  |  |  |  |  |  |  | TA1 | R | TA105 = 008: "Invalid Interchange Receiver ID". | ISA08 must contain at least one non-space character. |  |
| X223.C3..ISA08.040 | ISA08 |  |  |  |  |  |  |  | TA1 | R | TA105 = 008: "Invalid Interchange Receiver ID". | ISA08 must be populated with accepted AN characters. |  |
| X223.C3..ISA09.010 | ISA09 | Interchange Date | DT | 6-6 | R |  |  |  | TA1 | R | TA105 = 014: "Invalid Interchange Date Value". | ISA09 must be present. |  |
| X223.C3..ISA09.020 | ISA09 |  |  |  |  |  |  |  | TA1 | R | TA105 = 014: "Invalid Interchange Date Value". | ISA09 must be a valid date in YYMMDD format. |  |
| X223.C3.IISA09.030 | ISA09 |  |  |  |  |  |  |  | TA1 | R | TA105 = 014: "Invalid Interchange Date Value". | ISA09 must be a the date of the interchange; must not be a future date. |  |
| X223.C3..ISA10.010 | ISA10 | Interchange Time | TM | 4-4 | R |  |  | нНмM | TA1 | R | TA105 = 015: "Invalid Interchange Time Value". | ISA10 must be present. |  |
| X223.C3..ISA10.020 | ISA10 |  |  |  |  |  |  |  | TA1 | R | TA105 = 015: "Invalid Interchange Time Value". | ISA10 must be a valid time in HHMM format. |  |
| X223.C3..ISA11.010 | ISA11 | Repetitoon Seperator |  | 1-1 | R |  |  |  | TA1 | R | TA105 = 024: "Invalid Interchange Content". | ISA11 must be present. | 01/20: Companion Guide Note |
| X223.C3..ISA11.020 | ISA11 |  |  |  |  |  |  |  | TA1 | R | TA105 = 024: "Invalid Interchange Content". | ISA11 must be 1 character. |  |
| X223.C3..ISA11.030 | ISA11 |  |  |  |  |  |  |  | TA1 | R | TA105 = 024: "Invalid Interchange Content". | ISA11 must contain at least one non-space character. |  |
| X223.C3..ISA12.010 | ISA12 | Interchange Control Version Number | ID | 5-5 | R |  |  | 00501 | TA1 | R | TA105 = 017: "Invalid Interchange Version ID Value". | ISA12 must be present. |  |
| X223.C3..ISA12.020 | ISA12 |  |  |  |  |  |  |  | TA1 | R | TA105 = 017: "Invalid Interchange Version ID Value". | ISA12 must be "00501". |  |
| X223.C3..ISA13.010 | ISA13 | Interchange Control Number | N0 | 9-9 | R |  |  |  | TA1 | R | TA105 = 018: "Invalid Interchange Conrol Number Value". | ISA13 must be present. |  |
| X223.C3..ISA13.020 | ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105 = 018: "Invalid Interchange Conrol Number Value". | ISA13 must be numeric. |  |
| X223.C3..ISA13.030 | ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105 = 018: "Invalid Interchange Conrol Number Value". | ISA13 must be 9 characters. |  |
| X223.C3..ISA13.040 | ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105 = 018: "Invalid Interchange Conrol Number Value". | ISA13 must be > 0 . |  |
| X223.C3..ISA13.050 | ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105 = 018: "Invalid Interchange | ISA13 must be unsigned. |  |
| X223.C3..ISA14.010 | ISA14 | $\begin{gathered} \hline \text { Acknowledgement } \\ \text { Requested } \\ \hline \end{gathered}$ | ID | 1-1 | R |  |  | 0, 1 | TA1 | R | $\begin{aligned} & \text { TA105 = 019: "Invalid } \\ & \text { Acknowledgment Requested Value". } \end{aligned}$ | ISA14 must be present. |  |
| X223.C3..ISA14.020 | ISA14 |  |  |  |  |  |  |  | TA1 | R | TA105 = 019: "Invalid Acknowledgment Requested Value". | ISA14 must be valid values. |  |
| X223.C3..ISA15.010 | ISA15 | Usage Indicator | ID | 1-1 | R |  |  | P, T | TA1 | R | TA105 = 020: "Invalid Test Indicator Value". | ISA15 must be present. |  |
| X223.C3..ISA15.020 | ISA15 |  |  |  |  |  |  |  | TA1 | R | TA105 = 020: "Invalid Test Indicator Value". | ISA15 must be valid values. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.C3..ISA16.010 | ISA16 | $\underset{\substack{\text { Component Element } \\ \text { Separator }}}{\text { Con }}$ |  | 1-1 | R |  |  |  | TA1 | R | $\begin{aligned} & \text { TA105 = 027: "Invalid Component } \\ & \text { Element Separator" } \end{aligned}$ | ISA16 must be present. |  |
| X223.C3..ISA16.020 | ISA16 |  |  |  |  |  |  |  | TA1 | R | TA105 = 027: "Invalid Component | ISA16 must be 1 character |  |
| X223.C3..ISA16.030 | ISA16 |  |  |  |  |  |  |  | TA1 | R | TA105 = 027: "Invalid Component Element Separator" | ISA16 must contain at least one non-space character. |  |
| $\begin{array}{\|l} \begin{array}{l} \text { X223.C3..ISA16.040 } \\ \text { (edit deactivated) } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Gs | Functional Groups |  |  |  |  | >1 |  |  |  |  |  |  |
| X223.C7..GS. 010 | Gs | $\underset{\substack{\text { FUNCTIONAL GROUP } \\ \text { HEADER }}}{\text { F }}$ |  | 1 | R | - | 1 |  | TA1 | R | TA105 = 024: "Invalid Interchange Content". | GS must be present. |  |
| X223.C7..GS. 020 | Gs |  |  |  |  |  |  |  | 999 | R | AK905: 1 "Functional Group Not Supported". | Only one iteration of GS is allowed. |  |
| X223.C7..GS01.010 | GS01 | Functional Identifier Code | ID | 2-2 | R |  |  | HC | 999 | R | AK905: 1 "Functional Group Not Supported". | GS01 must be present. |  |
| X223.C7..GS01.020 | GS01 |  |  |  |  |  |  |  | 999 | R | AK905: 1 "Functional Group Not Supported". | GS01 must be "HC". |  |
| X223.C7..GS02.010 | GS02 | Application Sender Code | AN | 2-15 | R |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must be present. |  |
| X223.C7..GS02.020 | GS02 |  |  |  |  |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must be 2-15 characters. |  |
| X223.C7..GS02.030 | GS02 |  |  |  |  |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must contain at least two non-space characters. |  |
| X223.C7..GS02.040 | GS02 |  |  |  |  |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must be populated with accepted AN |  |
| X223.C7..GS03.010 | GS03 | Application Receiver Code | AN | 2-15 | R |  |  |  | 999 | R | AK905: 13 "Unknown Security Recipient". | GS03 must be present. |  |
| X223.C7..GS03.020 | GS03 |  |  |  |  |  |  |  | 999 | R | AK905: 13 "Unknown Security | GS03 must be 2-15 characters. |  |
| X223.C7..GS03.030 | GS03 |  |  |  |  |  |  |  | 999 | R | AK905: 13 "Unknown Security | GS03 must contain at least two non-space characters. |  |
| X223.C7..GS03.040 | GS03 |  |  |  |  |  |  |  | 999 | R | AK905: 13 "Unknown Security Recipient". | GS03 must be populated with accepted AN characters. |  |
| X223.C7..GS04.010 | GS04 | Date | DT | 8-8 | R |  |  | CCYYMMDD | TA1 | R | TA105 = 024: "Invalid Interchange Content". | GS04 must be present. |  |
| X223.C7..GS04.020 | GS04 |  |  |  |  |  |  |  | TA1 | R | TA105 = 024: "Invalid Interchange Content". | GS04 must be a valid date in CCYYMMDD format. |  |
| X223.C7..GS04.030 | GSO4 |  |  |  |  |  |  |  | TA1 | R | TA105 = 024: "Invalid Interchange Content". | GS04 must be the date the functional group is created; must not be a future date. |  |
| X223.C7..GS05.010 | GS05 | Time | тм | 4-8 | R |  |  | HHMM, HHMMSS, HHMMSSD, HHMMSSDD | TA1 | R | TA105 = 024: "Invalid Interchange Content". | GS05 must be present. |  |
| X223.C7..GS05.020 | GS05 |  |  |  |  |  |  |  | TA1 | R | TA105 = 024: "Invalid Interchange Content". | GS05 must be a valid time in a valid format. |  |
| X223.C7..GS06.010 | GS06 | Group Control Number | No | 1-9 | R |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be present. |  |
| X223.C7..GS06.020 | GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be numeric. |  |
| X223.C7..GS06.030 | GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be > 0 . |  |
| X223.C7..GS06.040 | GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be < = =999,999,999. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Reg. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.C7..GS06.050 | GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 19 "Functional Group Control Number not Unique within Interchange. | GS06 must be unique within the interchange. |  |
| X223.C7..GS06. 055 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.C7..GS07.010 | GS07 | Responsible Agency Code | ID | 1-2 | R |  |  | x | TA1 | R | TA105 = 024: "Invalid Interchange Content". | GS07 must be present. |  |
| X223.C7..GS07.020 | GS07 |  |  |  |  |  |  |  | TA1 | R | TA105 = 024: "Invalid Interchange Content". | GS07 must be "X". |  |
| X223A2.41..GS08.010 | GS08 | Version Identifier Code | AN | 1-12 | R |  |  | 005010x223A2 | 999 | R | AK905: 2 "Functional Group Version Not Supported" | GS08 must be present. |  |
| $\begin{array}{\|l} \hline \text { X223A1.23..GS08.010 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223A2.41..GS08.020 | GS08 |  |  |  |  |  |  |  | 999 | R | AK905: 2 "Functional Group Version Not Supported" | GS08 must be "005010X223A2". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | ST | Transaction Sets |  |  |  |  | >1 |  |  |  |  |  |  |
| X223.067..ST. 010 | ST | TRANSACTION SET HEADER |  | 1 | R | - | >1 |  | 999 | R | IK502 = 6: "Missing or Invalid Transaction Set Identifier". | ST must be present. |  |
| X223.067..ST. 020 | ST |  |  |  |  |  |  |  | 999 | R | Supported" <br> OR <br> AK905 = 5: "Number Included Transaction Sets Does Not Match Actual Count" <br> OR <br> IK502 = 6: "Missing or Invalid Transaction Set Identifier" <br> OR <br> IK502 = 15: "Implementation One or More Segments in Error" | Only one iteration of ST is allowed. | This error means there can't be more than one ST segment in this set, not that there can't be more than 1 within the GS. |
| X223.067..ST01.010 | ST01 | Transaction Set Identifier Code | ID | 3-3 | R |  |  | 837 | 999 | R | IK502 = 6: "Missing or Invalid Transaction Set Identifier". | ST01 must be present. |  |
| X223.067..ST01.020 | ST01 |  |  |  |  |  |  |  | 999 | R | IK502 = 6: "Misssing or Invalid Transaction Set Identifier". | ST01 must be "837". |  |
| X223.067..ST02.010 | ST02 | Transaction Set Control Number | AN | 4-9 | R |  |  |  | 999 | R | \|K502 = 7: "Missing or Invalid Transaction Set Control Number". | ST02 must be present. |  |
| X223.067..ST02.020 | ST02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK502 = 7: "Missing or Invalid } \\ & \text { Transaction Set Control Number". } \end{aligned}$ | ST02 must be 4-9 characters. |  |
| X223.067..ST02.030 | ST02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK502 = 7: "Missing or Invalid } \\ & \text { Transaction Set Control Number". } \end{aligned}$ | ST02 must contain at least four non-space characters. |  |
| X223.067..ST02.040 | ST02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK502 = 7: "Missing or Invalid } \\ & \text { Transaction Set Control Number". } \end{aligned}$ | ST02 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | Min. | $\begin{array}{\|l} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.067..ST02.050 | ST02 |  |  |  |  |  |  |  | 999 | R | IK502 = 23: "Transaction Set Control Number Not Unique within the Functional Group". | ST02 must be a unique number within the functional group. |  |
| X223A2.14.ST03.010 | ST03 | Version, Release, or Industry Identifier | AN | 1-35 | R |  |  | 005010x223A2 | 999 | R | \|K502 = 16: "Implementation Convention Not Supported". | ST03 must be present. |  |
| $\begin{array}{\|l\|} \hline \text { X223A1.11..ST03.010 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223A2.14..ST03.020 | ST03 |  |  |  |  |  |  |  | 999 | R | IK502 = 19: "Invalid Transaction Set Implementation Convention reference", | ST03 must be "005010X223A2". |  |
| X223.067..ST03.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.068.BHT.010 | BHT | BEGINNING OF HIERARCHICAL TRANSACTION |  | 1 | R | - | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | BHT must be present. |  |
| X223.068.8.В ${ }^{\text {BHT. } 020}$ | BHT |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only iteration of BHT is allowed. |  |
| X223.068..ВНT01.010 | BHT01 | $\begin{gathered} \hline \text { Hierarchical Structure } \\ \text { Code } \\ \hline \end{gathered}$ | ID | 4-4 | R |  |  | 0019 | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT01 must be present. |  |
| X223.068..BHT01.020 | BHT01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | BHT01 must be "019". |  |
| X223.068..ВНT02.010 | BHT02 | Transaction Set Purpose Code | ID | 2-2 | R |  |  | 00, 18 | 999 | R | 1K403 = 1: "Required Data Element Missing" | BHT02 must be present. |  |
| X223.068..ВНT02.020 | внт02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | BHT02 must be valid values. |  |
| X223.068..ВНТ03.010 | ВНто3 | $\begin{gathered} \hline \text { Originator Application } \\ \text { Transaction ID } \\ \hline \end{gathered}$ | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT03 must be present. |  |
| х223.068..ВНто3.020 | внтоз |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | BHTO3 must be 1-30 characters. |  |
| X223.068..ВНТ03.030 | вНто3 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | BHT03 must be populated with accepted AN |  |
| X223.068..ВНT04.010 | BHT04 | $\begin{array}{\|c\|} \hline \text { Transaction Set Creation } \\ \text { Date } \\ \hline \end{array}$ | DT | 8-8 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT04 must be present. |  |
| X223.068..ВНT04.020 | внт04 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | BHT04 must be a valid date in CCYYMMDD format. |  |
| Х223.068..ВНT05.010 | в ${ }^{\text {HT05 }}$ | $\begin{array}{\|c\|} \hline \text { Transaction Set Creation } \\ \text { Time } \end{array}$ | TM | 4-8 | R |  |  | HHMM. HHMMSS HHMMSSD, HHMMSSDD | 999 | R | 1K403 = 1: "Required Data Element Missing" | BHT05 must be present. |  |
| х223.068..ВНT05.020 | внто5 |  |  |  |  |  |  |  | 999 | R | IK403 = 9: "Invalid Time" | BHT05 must be a valid time in a valid time format. |  |
| X223.068..ВНT06.010 | BHT06 | Claim or Encounter ID | ID | 2-2 | R |  |  | 31, CH, RP | 999 | R | 1K403 = 1: "Required Data Element Missing" | BHT06 must be present. |  |
| X223.068..ВНT06.020 | в ${ }^{\text {¢ }}$ (06 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | BHT06 must be"CH". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.010 |  | SUBMITTER NAME LOOP |  | 1 | R | 1000A | 1 |  | 999 | R | 1K304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 1000A is allowed. |  |
| X223.071.1000A.NM1.010 | NM1 | SUBMITTER NAME |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 1000A.NM1 must be present. |  |
| X223.071.1000A.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 41 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.NM101 must be present. |  |
| X223.071.1000A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000A.NM101 must be "41". |  |
| X223.071.1000A.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1,2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.NM102 must be present. |  |
| X223.071.1000A.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000A.NM102 must be valid values. |  |
| X223.071.1000A.NM103.010 | NM103 | Submitter Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.NM103 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.071.1000A.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM103 must contain at least one non-space character. |  |
| X223.071.1000A.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data <br> Element" | 1000A.NM103 must be populated with accepted AN characters. |  |
| $\begin{aligned} & \hline \text { X223.071.1000A.NM103.040 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.NM103 must be 1 - 60 characters. |  |
| X223.071.1000A.NM103.060 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM104.010 | NM104 | Submitter First Name | AN | 1-35 | s |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 1000A.NM102 is "2", 1000A.NM104 must not be present. |  |
| X223.071.1000A.NM104.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x223.071.1000A.NM104.030 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.NM104 must be 1-35 characters. |  |
| X223.071.1000A.NM104.040 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM104.050 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM104 must contain at least one non-space character. |  |
| X223.071.1000A.NM104.060 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM104 must be populated with accepted AN characters. |  |
| X223.071.1000A.NM104.070 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM105.010 | NM105 | Submitter Middle Name | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM105 must contain at least one non-space character. |  |
| X223.071.1000A.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | R | 1K403 = 113: "Implementation Dependent 'not used' Data Element Present" | If 1000A.NM102 is "2", 1000A.NM105 must not be present. |  |
| X223.071.1000A.NM105.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.NM105 must be 1-25 characters. |  |
| X223.071.1000A.NM105.050 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM105.060 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM105 must be populated with accepted AN characters. |  |
| X223.071.1000A.NM105.065 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 514: "Entity's Middle Name" EIC: 41 "Submitter" | The first position of 1000A.NM105 must be alphabetic (A...Z). |  |
| $\begin{aligned} & \text { X223.071.1000A.NM105.070 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.071.1000A.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.071.1000A.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | 46 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.NM108 must be present. |  |
| X223.071.1000A.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000A.NM108 must be "46". |  |
| X223.071.1000A.NM109.010 | NM109 | Submitter Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.NM109 must be present. |  |
| X223.071.1000A.NM109.020 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM109 must contain at least two non-space characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.071.1000A.NM109.030 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 1000A.NM109 must be 2-80 characters. |  |
| X223.071.1000A.NM109.040 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM109.050 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM109 must be populated with accepted AN characters. |  |
| X223.071.1000A.NM109.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM109.070 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 1000A.NM109 must be an approved electronic submitter. |  |
| X223.071.1000A.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.071.1000A.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.071.1000A.NM112.010 | NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER. 010 | PER | SUBMITTER ED CONTACT INFORMATION |  | 2 | R | 1000A |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 1000A.PER must be present. |  |
| X223.073.1000A.PER.020 | PER |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 1000A.PER are allowed. |  |
| X223.073.1000A.PER01.010 | PER01 | Contact Function Code | ID | 2-2 | R |  |  | IC | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.PER01 must be present. |  |
| X223.073.1000A.PER01.020 | PER01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 1000A.PER01 must be "IC". |  |
| X223.073.1000A.PER02.010 | PER02 | Submitter Contact Name | AN | 1-60 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PERO2 must contain at least one non-space character. |  |
| X223.073.1000A.PER02.020 | PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern | For the 1st 1000A.PER transmitted, 1000A.PER02 must not $=1000 \mathrm{~A} . \mathrm{NM} 103$. |  |
| X223.073.1000A.PER02.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER02.040 | PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | For the 2nd 1000A.PER transmitted, 1000A.PER02 must not be present. |  |
| X223.073.1000A.PER02.050 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER02.060 | PER02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 1000A.PER02 must be 1-60 characters. |  |
| $\begin{array}{\|l\|} \hline \text { X223.073.1000A.PER02.070 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER02.080 | PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PERO2 must be populated with accepted AN characters. |  |
| $\begin{array}{\|l\|} \hline \text { X223.073.1000A.PER02.090 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER03.010 | PER03 | Communication Number Qualifier | ID | 2-2 | R |  |  | EM, FX. TE | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.PER03 must be present. |  |
| X223.073.1000A.PER03.020 | PER03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000A.PER03 must be valid values. |  |
| X223.073.1000A.PER04.010 | PER04 | Communication Number | AN | 1-256 | R |  |  |  | 999 | R | K 403 = 1: "Required Data Element Missing" | 1000A.PER04 must be present. |  |
| X223.073.1000A.PER04.020 | PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER04 must contain at least one non-space character. |  |
| X223.073.1000A.PER04.030 | PER04 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 1000A.PER04 must be 1-256 characters. |  |
| X223.073.1000A.PER04.040 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\operatorname{Min}_{\text {Max }}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.073.1000A.PER04.050 | PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER04 must be populated with accepted AN characters. |  |
| $\begin{array}{\|l\|} \hline \text { X223.073.1000A.PER04.060 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER04.070 | PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 127: "Entity's Communication Number" <br> EIC: 41 "Submitter" | 1000A.PER04 must be populated with exactly ten numeric characters when 1000A.PER03 equals TE or FX. |  |
| X223.073.1000A.PER05.010 | PER05 | $\underset{\substack{\text { Communication Number } \\ \text { Qualifier }}}{\text { Con }}$ | ID | 2-2 | s |  |  | EM, EX, FX, TE | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000A.PER05 must be valid values. |  |
| X223.073.1000A.PER05.020 | PER05 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | If 1000A.PER05 is "EX", 1000A.PER03 must be "TE". |  |
| X223.073.1000A.PER06.010 | PER06 | Communication Number | AN | 1-256 | s |  |  |  | 999 | R | 1K403 = 2: "Conditional Required Data Element Missing" | If 1000A.PER06 is present, 1000A.PER05 must be present. |  |
| X223.073.1000A.PER06.020 | PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER06 must contain at least one non-space character. |  |
| X223.073.1000A.PER06.030 | PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.PER06 must be 1-256 characters. |  |
| X223.073.1000A.PER06.040 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER06.050 | PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 1000A.PER06 must be populated with accepted AN characters. |  |
| $\begin{array}{l}\text { X223.073.1000A.PER06.060 } \\ \text { edit deactivated }\end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER06.070 | PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 127: "Entity's Communication Number" <br> EIC: 41 "Submitter" | 1000A.PER06 must be populated with exactly ten numeric characters when 1000A.PER05 equals TE or FX. |  |
| X223.073.1000A.PER07.010 | PER07 | Communication Number Qualifier | ID | 2-2 | s |  |  | EM, EX, FX, TE | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 1000A.PER07 is present, 1000A.PER05 must be present. |  |
| X223.073.1000A.PER07.020 | PER07 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000A.PER07 must be valid values. |  |
| X223.073.1000A.PER07.030 | PER07 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | If 1000A.PER07 is "EX", 1000A.PER05 must be "TE". |  |
| X223.073.1000A.PER08.010 | PER08 | Communication Number | AN | 1-256 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 1000A.PER08 is present, 1000A.PER07 must be present. |  |
| X223.073.1000A.PER08.020 | PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER08 must contain at least one non-space character. |  |
| X223.073.1000A.PER08.030 | PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.PER08 must be 1-256 characters. |  |
| X223.073.1000A.PER08.040 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER08.050 | PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 1000A.PER08 must be populated with accepted AN characters. |  |
| X223.073.1000A.PER08.060 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER08.070 | PER08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 127: "Entity's Communication Number" <br> EIC: 41 "Submitter" | 1000A.PER08 must be populated with exactly ten numeric characters when 1000A.PER07 equals TE or FX. |  |
| X223.073.1000A.PER09.010 | PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Leop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.076.1000B. 010 |  | RECEIVER NAME LOOP |  | 1 | R | 1000B | 1 |  | 999 | R | 1K304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 10008 is allowed. |  |
| х223.076.1000B.NM1.010 | NM1 | RECEIVER NAME |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 1000B.NM1 must be present. |  |
| х223.076.1000B.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 40 | 999 | R | 1K403 = 1: "Required Data Element Missing" | 1000B.NM101 must be present. |  |
| X223.076.1000B.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000B.NM101 must be "40". |  |
| X223.076.1000B.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | 1K403 = 1: "Required Data Element Missing" | 1000B.NM102 must be present. |  |
| X223.076.1000B.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000B.NM102 must be "2". |  |
| X223.076.1000B.NM103.010 | NM103 | Receiver Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM103 must be present. |  |
| X223.076.1000B.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 1000B.NM103 must be 1-60 characters. |  |
| X223.076.1000B.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000B.NM103 must be popoulated with accepted AN characters. |  |
| X223.076.1000B.NM103.040 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000B.NM103 must contain at least one non-space character. |  |
| X223.076.1000B.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.076.1000B.NM105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.076.1000B.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.076.1000B.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.076.1000B.NM108.010 | NM108 | $\begin{gathered} \hline \text { Identification Code } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 1-2 | R |  |  | 46 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM108 must be present. |  |
| X223.076.1000B.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000B.NM108 must be "46". |  |
| X223.076.1000B.NM109.010 | NM109 | Receiver Primary Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM109 must be present. |  |
| X223.076.1000B.NM109.020 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 112 : "Implementation Pattern Match Failure" | 1000B.NM109 must be [contractor put receiver code |  |
| X223.076.1000B.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.076.1000B.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.076.1000B.NM112.010 | NM112 | $\underset{\text { Name }}{\text { Name Last or Organization }}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l\|} \hline \begin{array}{l} \text { 223.078.2000A.. } 010 \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.078.2000A.. } 020 \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.078.2000A.HL. 010 | HL | BILLING/PAY-TO PROVIDER HIERARCHICAL LEVEL |  | 1 | R | 2000A |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2000A.HL must be present. |  |
| X223.078.2000A.HL. 020 | HL |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000A.HL is allowed. | This error means there can only be one HL in each iteration of the loop. |
| X223.078.2000A.HL01.010 | HL01 | Hierarchical ID Number | AN | 1-12 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A. HL01 must be present. |  |
| х223.078.2000A.HL01.020 | HL01 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2000A.HL01 must be 1-12 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.078.2000A.HL01.030 | HL01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000A.HL01 must be numeric value. |  |
| Х223.078.2000А.HL01.040 | HL01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | The first HL01 must be "1". |  |
| X223.078.2000A.HLO2.010 | HL02 | Hierarchical Parent ID Number | AN | 1-12 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.078.2000A.HL03.010 | HL03 | Hierarchical Level Code | ID | 1-2 | R |  |  | 20 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.HL03 must be present. |  |
| х223.078.2000А.HL03.020 | HL03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2000A.HL03 must be "20". |  |
| X223.078.2000A.HL04.010 | HL04 | Hierarchical Child Code | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A. HL04 must be present. |  |
| х223.078.2000A.HL04.020 | HL04 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2000A.HL04 must be "1". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.080.2000A.PRV. 010 | PRV | BILLING/PAY-TO PROVIDER SPECIALTY INFORMATION |  | 1 | s | 2000A |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000A.PRV is allowed. |  |
| X223.080.2000A.PRV01.010 | PRV01 | Provider Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A PRV01 must be present. |  |
| X223.080.2000A.PRV01.020 | PRV01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2000A.PRV01 must be "BI". |  |
| X223.080.2000A.PRV02.010 | PRV02 | $\begin{gathered} \hline \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | PXC | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.PRV02 must be present. |  |
| X223.080.2000A.PRV02.020 | PRV02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2000A.PRV02 must be "PXC". |  |
| X223.080.2000A.PRV03.010 | PRV03 | Provider Taxonomy Code | AN | 1-50 | R |  |  |  | 999 | R | K 403 = 1: "Required Data Element Missing" | 2000A.PRV03 must be present. |  |
| X223.080.2000A.PRV03.020 | PRV03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 145: "Entity's specialty/taxonomy code" EIC: 85 Billing Provider | 2000A.PRV03 Must be a valid Provider Taxonomy Code. | Valid Provider Taxonomy Code reference must be available for this edit. |
| X223.080.2000A.PRV04.010 | PRV04 | State or Province Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.080.2000A.PRV05.010 | PRV05 | $\qquad$ |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.080.2000A.PRV06.010 | PRV06 | $\begin{aligned} & \text { Provider Organization } \\ & \text { Code } \\ & \hline \end{aligned}$ | ID | 3-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.081.2000A.CUR. 010 | CUR | Foreign currency INFORMATION |  | 1 | s | 2000A |  |  | 999 | E | IK304 = I4: "Implementation "Not Used" Segment Present" | 2000A.CUR must not be present. | 01/20: Companion Guide Note needed. |
| X223.081.2000A.CUR. 020 | CUR |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 681: "Claim Currency Not Supported" |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.084.2010AA.. 010 |  | Billing Provider Name Loop |  | 1 | R | 2010AA | 1 |  | 999 | R | IK 304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2010AA is allowed. |  |
| X223.084.2010AA.NM1.010 | NM1 | Billing Provider Name |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.NM1 must be present. |  |
| X223.084.2010AA.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 85 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.NM101 must be present. |  |


| 8371 Edit Reference | Segment or | Description | ID | Min. <br> Max | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.084.2010AA.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010AA.NM101 must be "85". |  |
| X223.084.2010AA.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.NM102 must be present. |  |
| X223.084.2010AA.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010AA.NM102 must be "2". |  |
| х223.084.2010AA.NM103.010 | NM103 | Billing Provider Last or Organizational Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.NM103 must be present. |  |
| X223.084.2010AA.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM103 must contain at least one non-space character. |  |
| х223.084.2010AA.NM103.030 | Nм103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.NM103 must be 1-60 characters. |  |
| X223.084.2010AA.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: 85 "Billing Provider" |  |  |
| X223.084.2010AA.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM103 must be populated with accepted AN characters. |  |
| X223.084.2010AA.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.084.2010AA.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.084.2010AA.NM105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.084.2010AA.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.084.2010AA.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.084.2010AA.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error." CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 85 "Billing Provider" | 2010AA.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.084.2010AA.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 85 "Billing Provider" | 2010AA.NM108 must be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.084.2010AA.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010AA.NM108 must be "XX". | Does not apply to Trailblazer VA or JH (Texas) claims. |
| X223.084.2010AA.NM109.010 | NM109 | Billing Provider Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AA.NM108 is present, 2010AA.NM109 must be present. |  |
| х223.084.2010AA.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 85 "Billing Provider" | 2010AA.NM109 must be valid according to the NPI algorithm. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage Req. | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.084.2010AA.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 85 "Billing Provider" | The first position of 2010AA.NM109 must be a "1". |  |
| X223.084.2010AA.NM109.040 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error." CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 85 "Billing Provider" | 2010AA.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | Valid NPI Crosswalk must be available for this edit. |
| X223.084.2010AA.NM109.050 | NM109 |  |  |  |  |  |  |  | 277 | T | CSCC A8: "Acknowledgement / Rejected for relational field in error" CSC 496 "Submitter not approved for electronic claim submissions on behalf of this entity." EIC: 85 "Billing Provider" | 2010AA.NM109 billing provider must be "associated" to the submitter (from a trading partner management perspective) in 1000A.NM109. |  |
| X223.084.2010AA.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.084.2010AA.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.084.2010AA.NM112.010 | NM112 | $\substack{\text { Name Last or Organization } \\ \text { Name }}$ | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.087.2010AA.N3.010 | N3 | BILLING PROVIDER ADDRESS |  | 1 | R | 2010AA |  |  | 999 | R | 1K304 = 3: "Required Segment Missing" | 2010AA.N3 must be present. |  |
| X223.087.2010AA.N3.020 | N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds | Only one iteration of 2010AA.N3 is allowed. |  |
| X223.087.2010AA.N301.010 | N301 | Billing Provider Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.N301 must be present. |  |
| X223.087.2010AA.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" Element" | 2010AA.N301 must contain at least one non-space character. |  |
| X223.087.2010AA.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA. 301 must be 1-55 characters. |  |
| X223.087.2010AA.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" EIC: 85 "Billing Provider" |  |  |
| X223.087.2010AA.N301.050 | N301 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \\ & \hline \end{aligned}$ | 2010AA.N301 must be populated with accepted AN characters. |  |
| X223.087.2010AA.N301.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.087.2010AA.N301.070 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 503: "Entity's Street Address" EIC: 85 "Billing Provider" | 2010AA.N301 must not contain the following exact phrases (not case sensitive): "Post Office Box", "P.O. Bох", "Pо вох", "LOck BOX", "LOCk BIN", "P о BOX" | N301 must be a street address, not a post office box or lock box. |
| $\begin{array}{\|l\|} \hline \text { X223.087.2010AA.N302.010 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.087.2010AA.N302.012 | N302 | Billing Provider Address Line | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If present, 2010AA.N302 must contain at least one non-space character. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat <br> Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.087.2010AA.N302.015 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.N302 must be 1-55 characters. |  |
| X223.087.2010AA.N302.020 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" EIC: 85 "Billing Provider" |  |  |
| X223.087.2010AA.N302.030 | N302 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2010AA.N302 must be populated with accepted AN characters. |  |
| X223.087.2010AA.N302.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.087.2010AA.N302.050 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.087.2010AA.N302.060 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.088.2010AA.N4.010 | N4 | BILLING PROVIDER CITYISTATEIZIP CODE |  | 1 | R | 2010AA |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.N4 must be present. |  |
| X223.088.2010AA.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AA.N4 is allowed. |  |
| X223.088.2010AA.N401.010 | N401 | Billing Provider City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.N401 must be present. |  |
| X223.088.2010AA.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403=6: "Invalid Character in Data Element" | 2010AA.N401 must contain at least two non-space characters. |  |
| X223.088.2010AA.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010AA.N401 must be 2-30 characters. |  |
| X223.088.2010AA.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" EIC: 85 "Billing Provider" |  |  |
| X223.088.2010AA.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N401 must be populated with accepted AN characters. |  |
| X223.088.2010AA.N401.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.088.2010AA.N402.010 | N402 | Billing Provider State or Province Code | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AA.N404 is not present, 2010AA.N402 must be present. |  |
| X223.088.2010AA.N402.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.088.2010AA.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" EIC: 85 "Billing Provider" | 2010AA.N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.088.2010AA.N403.010 | N403 | Billing Provider Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | R | 110403 = 2: "Conditional Required Data | If 2010AA.N404 is not present, 2010AA.N403 must be present. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | $\begin{aligned} & \text { min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.088.2010AA.N403.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.088.2010AA.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 500: "Entity's Postal/Zip Code" EIC: 85 "Billing Provider" | 2010AA.N403 must be a valid 9 digit zip code. | Valid Zip Code reference must be available for this edit. |
| X223.088.2010AA.N404.010 | N404 | Country Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.088.2010AA.N405.010 | N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.088.2010AA.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.088.2010AA.N407.010 | N407 | Country Subdivision Code | ID | 1-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| $\begin{aligned} & \text { X223.088.2010AA.N407.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.090.2010AA.REF. 010 | REF | BILLING PROVIDER TAX identification |  | 1 | R | 2010AA |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.REF must be present. |  |
| X223.090.2010AA.REF. 020 | REF |  |  |  |  |  |  |  | 999 | R | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AA.REF with REF01 = "EI" is allowed. |  |
| X223.090.2010AA.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | El | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.REF01 must be present. |  |
| X223.090.2010AA.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010AA.REF01 must be "El". |  |
| X223.090.2010AA.REF02.010 | REF02 | Billing Provider Additional Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.REF02 must be present. |  |
| X223.090.2010AA.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.REF02 must be populated with accepted AN characters. |  |
| X223.090.2010AA.REF02.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.090.2010AA.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 128: "Entity's tax id" EIC: 85 "Billing Provider" | 2010AA.REF02 must be 9 digits with no punctuation. | pass through, syntax only. |
| X223.090.2010AA.REF02.050 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error" CSC 562: "Entity's National Provider Identifier (NPI)" CSC 128: "Entity's tax id" EIC: 85 "Billing Provider" | 2010AA.REF must be associated with the provider identified in 2010AA.NM109 |  |
| X223.090.2010AA.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.090.2010AA.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.091.2010AA.PER. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.091.2010AA.PER. 020 | PER | BILLING PROVIDER CONTACT INFORMATION |  | 2 | s | 2010AA |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2010AA.PER are allowed. |  |
| X223.091.2010AA.PER01.010 | PER01 | Contact Function Code | ID | 2-2 | R |  |  | IC | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.PER01 must be present. |  |
| X223.091.2010AA.PER01.020 | PER01 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2010AA.PER01 must be "IC". |  |
| X223.091.2010AA.PER02.010 | PER02 | $\begin{array}{l}\text { Billing Provider Contact } \\ \text { Name }\end{array}$ | AN | 1-60 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | For the 1st 2010AA.PER transmitted, 2010AA.PER02 must be present. |  |
| X223.091.2010AA.PER02.020 | PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | For the 2nd 2010AA.PER transmitted, 2010AA.PER02 must not be present. |  |
| X223.091.2010AA.PER02.030 | PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | 2010AA. PER02 must not $=1000 \mathrm{~A}$. PER02. |  |
| X223.091.2010AA.PER02.040 | PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER02 must contain at least one non-space character. |  |
| X223.091.2010AA.PER02.050 | PER02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER02 must be 1-60 characters. |  |
| X223.091.2010AA.PER02.060 | PER02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 561: "Entity's Contact Name" EIC: 85 "Billing Provider" |  |  |
| X223.091.2010AA.PER02.070 | PER02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK } 403 \text { = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010AA.PER02 must be populated with accepted AN characters. |  |
| X223.091.2010AA.PER02.080 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.091.2010AA.PER03.010 | PER03 | Communication Number Qualifier | ID | 2-2 | R |  |  | EM, FX, TE | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.PER03 must be present. |  |
| X223.091.2010AA.PER03.020 | PER03 |  |  |  |  |  |  |  | 999 | R | 1 1403 = 7: "Invalid Code Value" | 2010AA.PER03 must be valid values. |  |
| X223.091.2010AA.PER04.010 | PER04 | Communication Number | AN | 1-256 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.PER04 must be present. |  |
| X223.091.2010AA.PER04.020 | PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER04 must contain at least one non-space |  |
| X223.091.2010AA.PER04.030 | PER04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER04 must be 1-256 characters. |  |
| X223.091.2010AA.PER04.040 | PER04 |  |  |  |  |  |  |  | 277 | T | cscC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Communication Number" EIC: 85 "Billing Provider" |  |  |
| X223.091.2010AA.PER04.050 | PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER04 must be populated with accepted AN characters. |  |
| X223.091.2010AA.PER04.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.091.2010AA.PER04.070 | PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 127: "Entity's Communication Number" <br> EIC: 85 "Billing Provider" | 2010AA.PER04 must be populated with exactly ten numeric characters when 2010AA.PER03 equals TE or FX. |  |
| X223.091.2010AA.PER05.010 | PER05 | Communication Number Qualifier | ID | 2-2 | s |  |  | EM, EX, FX, TE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010AA.PER05 must be valid values. |  |
| X223.091.2010AA.PER05.020 | PER05 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | If 2010AA.PER05 is "EX" 2010AA.PER03 must be "TE". |  |
| X223.091.2010AA.PER06.010 | PER06 | Communication Number | AN | 1-256 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AA.PER05 is present 2010AA.PER06 must be present. |  |
| X223.091.2010AA.PER06.020 | PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER06 must contain at least one non-space character. |  |
| X223.091.2010AA.PER06.030 | PER06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER06 must be 1-256 characters. |  |
| X223.091.2010AA.PER06.035 | PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 127: "Entity's Communication Number" EIC: 85 "Billing Provider" |  |  |
| X223.091.2010AA.PER06.040 | PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER06 must be populated with accepted AN characters. |  |
| X223.091.2010AA.PER06.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.091.2010AA.PER06.060 | PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 127: "Entity's Communication Number" EIC: 85 "Billing Provider" | 2010AA.PER06 must be populated with exactly ten numeric characters when 2010AA.PER05 equals TE or FX. |  |
| X223.091.2010AA.PER07.010 | PER07 | $\begin{gathered} \text { Communication Number } \\ \text { Qualifier } \end{gathered}$ | ID | 2-2 | s |  |  | EM, EX, FX, TE | 999 | R | IK K 403 = 2: "Conditional Required Data Element Missing" | If 2010AA.PER07 is present, 2010AA.PER05 must be present. |  |
| X223.091.2010AA.PER07.020 | PER07 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010AA.PER07 must be valid values. |  |
| X223.091.2010AA.PER07.030 | PER07 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | If 2010AA.PER07 is "EX", 2010AA.PER05 must be |  |
| X223.091.2010AA.PER08.010 | PER08 | Communication Number | AN | 1-256 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AA.PER07 is present, 2010AA.PER08 must be present. |  |
| X223.091.2010AA.PER08.015 | PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER08 must contain at least one non-space character. |  |
| X223.091.2010AA.PER08.020 | PER08 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER08 must be 1-256 characters. |  |
| X223.091.2010AA.PER08.025 | PER08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's communication Number" EIC: 85 "Billing Provider" |  |  |
| X223.091.2010AA.PER08.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. Max. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.091.2010AA.PER08.040 | PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER08 must be populated with accepted AN characters. |  |
| X223.091.2010AA.PER08.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.091.2010AA.PER08.060 | PER08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 127: "Entity's Communication Number" EIC• 85 "Billing Provider" | 2010AA.PER08 must be populated with exactly ten numeric characters when 2010AA.PER07 equals TE or FX. |  |
| X223.091.2010AA.PER09.010 | PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.094.2010AB.NM1.010 | NM1 | PAY TO ADDRESS NAME |  | 1 | s | 2010AB | 1 |  | 999 | R | 1K304 = 4: "Loop Occurs Over Maximum Times" | One iteration of 2010AB.NM1 is allowed. |  |
| X223.094.2010AB.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 87 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AB.NM101 must be preset. |  |
| X223.094.2010AB.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1 1403 = 7: "Invalid Code Value" | 2010AB.NM101 must be "87". |  |
| х223.094.2010AB.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AB. NM102 must be present. |  |
| X223.094.2010AB.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010AB.NM102 must be "2". |  |
| X223.094.2010AB.NM103.010 | NM103 | Pay-to Provider Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.094.2010AB.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.094.2010AB.NM105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.094.2010AB.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.094.2010AB.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.094.2010AB.NM108.010 | NM108 | $\begin{aligned} & \text { Identification Code } \\ & \text { Qualifier } \end{aligned}$ | ID | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.094.2010AB.NM109.010 | NM109 | Pay-to Provider Identifier | AN | 2-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.094.2010AB.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.094.2010AB.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.094.2010AB.NM112.010 | NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.096.2010AB.N3.010 | N3 | PAY-TO ADDRESS |  | 1 | R | 2010AB |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2010AB.NM1 is present, 2010AB.N3 must be present. |  |
| X223.096.2010AB.N3.020 | N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AB.N3 is allowed. |  |
| X223.096.2010AB.N301.010 | N301 | Pay-to Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AB. N 301 must be present. |  |
| X223.096.2010AB.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | $\underset{\substack{\text { IK } \\ \text { Element" }}}{ }$ Element" | 2010AB.N301 must be at least one non-space character. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.096.2010AB.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AB. 301 must be $1-55$ characters. |  |
| X223.096.2010AB.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" EIC: 87 "Pay-to Provider" |  |  |
| X223.096.2010AB.N301.050 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N301 must be populated with accepted AN characters. |  |
| X223.096.2010AB.N301.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.096.2010AB.N302.010 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.096.2010AB.N302.020 | N302 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Pay-to Provider Address } \\ \text { Line } \end{array} \\ \hline \end{array}$ | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If present, 2010AB. N302 must be at least one non- space character. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.096.2010AB.N302.040 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AB. 302 must be 1-55 characters. |  |
| X223.096.2010AB.N302.050 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" EIC: 87 "Pay-to Provider" |  |  |
| X223.096.2010AB.N302.060 | N302 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N302 must be populated with accepted AN characters. |  |
| X223.096.2010AB.N302.070 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.097.2010AB.N4.010 | N4 | PAY-TO ADDRESS CITYISTATEIZIP CODE |  | 1 | R | 2010AB |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2010AB.NM1 is present, 2010AB.N4 must be present. |  |
| X223.097.2010AB.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AB.N4 is allowed. |  |
| X223.097.2010AB.N401.010 | N401 | Pay-to Adress City Name | AN | 2-30 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2010AB. N 401 must be present. |  |
| X223.097.2010AB.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N401 must contain at least two non-space characters. |  |
| X223.097.2010AB.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010AB.N401 must be 2-30 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.097.2010AB.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" EIC: 87 "Pay-to Provider" |  |  |
| X223.097.2010AB.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010AB.N401 must be populated with accepted AN characters. |  |
| X223.097.2010AB.N401.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.097.2010AB.N402.010 | N402 | $\xrightarrow[\text { Code }]{\text { Pay-to-Address State }}$ | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AB. N404 is not present, 2010AB.N402 must be present. |  |
| X223.097.2010AB.N402.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.097.2010AB.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 501: "Entity's State/Province" EIC: 87 "Pay-to Provider" | 2010AB. N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.097.2010AB.N403.010 | N403 | Pay-to Address Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $\begin{aligned} & \text { If 2010AB.N404 is not present, 2010AB.N403 must be } \\ & \text { present. } \end{aligned}$ |  |
| X223.097.2010AB.N403.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.097.2010AB.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 500: "Entity's Postal/Zip Code" EIC: 87 "Pay-to Provider" | 2010AB. N 403 must be a valid zip code. | Valid Zip Code reference must be available for this edit. |
| X223.097.2010AB.N404.010 | N404 | Country Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.097.2010AB.N405.010 | N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.097.2010AB.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.097.2010AB.N407.010 | N407 | Country Subdivision Code | ID | 1-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| X223.097.2010AB.N407.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l} \begin{array}{l} \text { X223.099.2010AC..010 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.099.2010AC.NM1.010 <br> edit |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.099.2010AC.NM1.020 | NM1 | PAY-TO PLAN NAME |  | 1 | s | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" CSC 732: "Information submitted inconsistent with billing guidelines." CSC 125: "Entity's name." EIC 87: "Pay-to Provider" | 2010AC.NM1 must not be present |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.101.2010AC.N3.010 | N3 | PAY-TO PLAN ADDRESS |  | 1 | R | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" CSC 732: "Information submitted inconsistent with billing guidelines." CSC 503: "Entity's Street Address." EIC 87: "Pay-to Provider" | 2010AC.N3 must not be present. |  |
| X223.102.2010AC.N4.010 | N4 | PAY-TO PLAN CITYISTATEIZIP CODE |  | 1 | R | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" CSC 732: "Information submitted inconsistent with billing guidelines." CSC 126: "Entity's Address." EIC 87: "Pay-to Provider" | 2010AC.N4 must not be present. |  |
| X223.104.2010AC.REF. 010 | REF | PAY-TO PLAN SECONDARY IDENTIFICATION |  | 1 | s | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier. " EIC 87: "Pay-to Provider" | 2010AC. REF with REF01 $=2 \mathrm{U}, \mathrm{FY}$, or NF must not be present. |  |
| X223.106.2010AC.REF. 020 | REF | PAY-TO PLAN TAX IDENTIFICATION |  | 1 | R | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" CSC 732: "Information submitted inconsistent with billing guidelines." CSC 128: "Entity's tax id." EIC 87: "Pay-to Provider" | 2010AC.REF with REF01 = El must not be present. |  |
| $\begin{array}{\|l\|} \hline \text { X223.078.2000B..010 } \\ \text { edit deactivated } \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.078.2000B.HL. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.107.2000B.HL. 010 | HL | SUBSCRIBER HIERARCHICAL LEVEL |  | 1 | R | 2000B |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2000B.HL must be present. |  |
| X223.078.2000B.HL. 020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.107.2000B.HL.O20 | HL |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000B.HL is allowed. | This error means there can only be one HL in each iteration of the loop. |
| X223.107.2000B.HL01.010 | HL01 | Hierarchical ID Number | AN | 1-12 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element | 20008.HL01 must be present. |  |
| X223.107.2000B.HL01.020 | HL01 |  |  |  |  |  |  |  | 999 | R | IK 403 = 5: "Data Element Too Long" | 2000B.HL01 must be 1-12 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Reg. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.107.2000B.HL01.030 | HL01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000B. HL01 must be numeric. |  |
| х223.107.2000B.HL01.040 | HL01 |  |  |  |  |  |  |  | 999 | R | 1K403 = I12: "Implementation Pattern Match Failure" | 2000B.HL01 must = the value of the previous HL01 (2000A.HL01) plus one. |  |
| X223.107.2000B.HL02.010 | HL02 | Hierarchical Parent ID Number | AN | 1-12 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B. HL02 must be present. |  |
| X223.107.2000B.HL02.020 | HL02 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2000B.HLO2 must = the value of the HLO1 (2000A.HL01) of the parent HL. |  |
| х223.107.2000B.HL03.010 | HL03 | Hierarchical Level Code | ID | 1-2 | R |  |  | 22 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B. HL03 must be present. |  |
| х223.107.2000B.HL03.020 | HL03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2000B. HL03 must be "22". |  |
| X223.107.2000B.HL04.010 | HL04 | Hierarchical Child Code | ID | 1-1 | R |  |  | 0, 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B. HL04 must be present. |  |
| х223.107.2000B.HL04.020 | HL04 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2000B.HL04 must be "0". |  |
| X223.107.2000B.HL04.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR. 010 | SBR | SUBSCRIBER INFORMATION |  | 1 | R | 2000B |  |  | 999 | R | 1K304 = 3: "Required Segment Missing" | 2000B.SBR must be present. |  |
| X223.109.2000B.SBR.020 | SBR |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000B.SBR is allowed. |  |
| X223.109.2000B.SBR01.010 | SBR01 | Payer Responsibility Sequence Number Code | ID | 1-1 | R |  |  | $\underset{\mathrm{U}}{\mathrm{~A}, \mathrm{~B}, \mathrm{C}, \mathrm{D}, \mathrm{E}, \mathrm{~F}, \mathrm{G}, \mathrm{H}, \mathrm{P}, \mathrm{~S}, \mathrm{~T},}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.SBR01 must be present. |  |
| X223.109.2000B.SBR01.020 | SBR01 |  |  |  |  |  |  |  | 999 | E | IK403 = 7: "Invalid Code Value" | 2000B.SBR01 must be "S" or "P". |  |
| X223.109.2000B.SBR01.030 | SBR01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 732 "Information submitted inconsistent with billing guidelines." CSC 742 "Payer Responsibility Sequence Number Code." |  | Companion Guide Note needed. |
| X223.109.2000B.SBR01.040 | SBR01 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> CSC 286: "Other payer's <br> Explanation of Benefits/payment information" | If 2000B.SBR01 = "S" there must be at least one 2320. SBR01 with a value $=$ to " $P$ ". |  |
| X223.109.2000B.SBR02.010 | SBR02 | $\begin{gathered} \text { Individual Relationship } \\ \text { Code } \end{gathered}$ | ID | 2-2 | s |  |  | 18 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.SBR02 must be present. |  |
| X223.109.2000B.SBR02.020 | SBR02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2000B.SBR02 must be "18". |  |
| X223.109.2000B.SBR03.004 | SBR03 | Insured Group or Policy Number | AN | 1-50 | s |  |  |  | 999 | E | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | 2000B.SBR03 must not be present" |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { TA99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.109.2000B.SBR03.006 | SBR03 |  |  |  |  |  |  |  | 277 | T | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error" CSC 163: "Entity's Policy Number" CSC 732 "Information submitted inconsistent with billing guidelines." EIC: IL "Subscriber" |  |  |
| X223.109.2000B.SBR03.010 edit deactivated x223.20.2. |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR03.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR03.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR03.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR03.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR04.004 | SBR04 | Insured Group Name | AN | 1-60 | s |  |  |  | 999 | E | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | 2000B.SBR04 must not be present. |  |
| X223.109.2000B.SBR04.007 |  |  |  |  |  |  |  |  | 277 | T | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error" CSC 663: "Entity's Group Name" CSC 732 "Information submitted inconsistent with billing guidelines." EIC: IL "Subscriber" |  |  |
| X223.109.2000B.SBR04.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR04.015 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR04.020 edit deactivated edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR04.030 ctivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR04.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.109.2000B.SBR04.050 - |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR04.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR04.070 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR05.010 | SBR05 | Insurance Type Code | ID | 1-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.109.2000B.SBR06.010 | SBR06 | Coordination of Benefits Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.109.2000B.SBR07.010 | SBR07 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.109.2000B.SBR08.010 | SBR08 | Employment Status Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.109.2000B.SBR09.010 | SBR09 | Claim Filing Indicator Code | ID | 1-2 | s |  |  | 11, 12, 13, 14, 15, 16, 17, AM, $\mathrm{BL}, \mathrm{CH}, \mathrm{Cl}, \mathrm{DS}, \mathrm{FI}, \mathrm{HM}, \mathrm{LM}$, $\underset{\text { MA, MB, MC, OF, TV, VA, WC, }}{\substack{\text { Z }}}$ | 277 | T | CSCC A7: "Acknowedgement /Rejected for Invalid Information... CSC 732 "Information submitted inconsistent with billing guidelines." CSC 480 "Entity's claim filing indicator." EIC: PR "Payer" | 2000B.SBR09 must be "MA". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.112.2010BA.NM1.010 | NM1 | SUBSCRIBER NAME |  | 1 | R | 2010BA | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010BA.NM1 must be present. |  |
| X223.112.2010BA.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum TTimes" } \\ & \hline \end{aligned}$ | Only one iteration of 2010BA.NM1 is allowed. |  |
| X223.112.2010BA.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | IL | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM101 must be present. |  |
| х223.112.2010BA.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010BA.NM101 must be "LL". |  |
| X223.112.2010BA.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM102 must be present. |  |
| X223.112.2010BA.NM102.020 | NM102 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC741 "Entity must be a person." EIC: IL "Subscriber" | 2010BA.NM102 must be "1". | Companion guide note needed |
| X223.112.2010BA.NM103.010 | NM103 | Subscriber Last Name | AN | 1-60 | R |  |  |  | 999 | R | 1 K403 = 1: "Required Data Element Missing" Missing" | 2010BA.NM103 must be present. |  |
| X223.112.2010BA.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM103 must contain at least one non-space |  |
| х223.112.2010BA.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 20108A.Nm103 must be 1-60 characters. |  |
| X223.112.2010BA.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: IL "Subscriber" |  |  |
| X223.112.2010BA.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM103 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { anx. } \end{gathered}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.112.2010BA.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.112.2010BA.NM104.010 | NM104 | Subscriber First Name | AN | 1-35 | s |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information...." CSC 505: "Entity's First Name" EIC: IL "Subscriber" | 2010BA.NM104 must be present. |  |
| X223.112.2010BA.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2010BA.NM104 must contain at least one non-space character. |  |
| X223.112.2010BA.NM104.030 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.NM104 must be 1-35 characters. |  |
| X223.112.2010BA.NM104.040 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: IL "Subscriber" |  |  |
| X223.112.2010BA.NM104.050 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM104 must be populated with accepted AN characters. |  |
| X223.112.2010BA.NM104.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.112.20108A.NM105.010 | NM105 | Subscriber Middle Name | AN | 1-25 | s |  |  |  | 999 | R | 1K403 = 6: "Invalid Character in Data Element" | 2010BA.NM105 must contain at least one non-space character. |  |
| X223.112.2010BA.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.NM105 must be 1-25 characters. |  |
| X223.112.2010BA.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC: IL "Subscriber" |  |  |
| X223.112.20108A.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | IK $403=6$ 6: "Invalid Character in Data Element" | 2010BA.NM105 must be populated with accepted AN characters. |  |
| X223.112.2010BA.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 514: "Entity's Middle Name" EIC: IL "Subscriber" | The first position of 2010BA.NM105 must be alphabetic (A...Z). |  |
| X223.112.2010BA.NM105.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.112.2010BA.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.112.20108A.NM107.010 | NM107 | Subscriber Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM107 must contain at least one non-space character. |  |
| x223.112.2010BA.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 20108A.NM107 must be 1-10 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \begin{array}{c} \text { Loop } \\ \text { Repeat } \end{array} \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.112.2010BA.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: IL "Subscriber" |  |  |
| X223.112.2010BA.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM107 must be populated with accepted AN characters. |  |
| X223.112.2010BA.NM107.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223A2.15.2010BA.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | s |  |  | II, MI | 999 | R | IK403 = 1: "Required Data Element Missing" | 20108A.NM108 must be present. | Companion Guide Note needed. |
| X223.112.2010BA.NM108.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.112.2010BA.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 20108A.NM108 must be "MII". | Companion Guide Note needed. |
| X223A2.16.2010BA.NM109.010 | NM109 | Subscriber Primary Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM109 must be present. | Companion Guide Note needed. |
| $\begin{array}{l}\text { 2223.112.2010BA.NM109.010 } \\ \text { edit deactivated }\end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.112.2010BA.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 164: "Entity's contract/member number" EIC: IL "Subscriber" | 2010BA.NM109 must be 7-12 positions in the format of ANNNNNN, AANNNNNN, ANNNNNNNNN, AANNNNNNNNN, AAANNNNNN, or AAANNNNNNNNN where " $A$ " represents an alpha character and " N " represents a numeric digit. | 01/20: Companion Guide Note needed. |
| X223.112.2010BA.NM109.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.112.2010BA.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.112.2010BA.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.112.2010BA.NM112.010 | NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.115.2010BA.N3.005 | N3 | SUBSCRIBER ADDRESS |  | 1 | s | 2010BA |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | 2010BA.N3 must be present when 2000B.SBR02 is " 18 ". |  |
| X223.115.2010BA.N3.010 |  |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.N3 is allowed. |  |
| X223.115.2010BA.N301.010 | N301 | Subscriber Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.N301 must be present. |  |
| X223.115.2010BA.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N301 must contain at least one non-space |  |
| X223.115.2010BA.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.N301 must be 1-55 characters. |  |
| X223.115.2010BA.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street Address" EIC: IL "Subscriber" |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.115.2010BA.N301.050 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N301 must be populated with accepted AN characters. |  |
| X223.115.2010BA.N301.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.115.2010BA.N302.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.115.2010BA.N302.020 | N302 | Subscriber Address Line | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If present 2010BA.N302 must contain at least one non- space character. |  |
| X223.115.2010BA.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.N302 must be 1-55 characters. |  |
| X223.115.2010BA.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street Address" EIC: IL "Subscriber" |  |  |
| X223.115.2010BA.N302.050 | N302 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data <br> Element" | 2010BA.N302 must be populated with accepted AN |  |
| X223.115.2010BA.N302.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223A2.17.2010BA.N4.005 | N4 | SUBSCRIBER CITYISTATEIZIP CODE |  | 1 | s | 2010BA |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | 2010BA.N4 must be present when 2000B.SBR02 is " 18 ". |  |
| X223.116.2010BA.N4.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.116.2010BA.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds | Only one iteration of 2010BA.N4 is allowed. |  |
| X223.116.2010BA.N401.010 | N401 | Subscriber City Name | AN | 2-30 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element | 2010BA.N401 must be present. |  |
| X223.116.2010BA.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N401 must contain at least two non-space |  |
| X223.116.2010BA.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010BA.N401 must be $2-30$ characters. |  |
| X223.116.2010BA.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { Rejected for Invalid Information.." } \\ & \text { RSC 12: "Length invalid for receiver's } \\ & \text { Cpplication system" } \\ & \text { CSC } 52 \text { "Entity's City" } \\ & \text { EIC: IL "Subscriber" } \\ & \hline \end{aligned}$ |  |  |
| X223.116.2010BA.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N401 must be populated with accepted AN characters. |  |
| X223.116.2010BA.N401.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.116.2010BA.N402.010 | N402 | Subscriber State Code | ID | 2-2 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If 2010BA.N404 is not present, 2010BA.N402 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { Accept } / \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.116.2010BA.N402.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.116.2010BA.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 501: "Entity's State/Province" EIC: IL "Subscriber" | 2010BA.N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.116.2010BA.N403.010 | N403 | Subscriber Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010BA.N404 is not present, 2010BA.N403 must be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.116.2010BA.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" EIC: IL "Subscriber" | 2010BA.N403 must be a valid postal/zip Code when N404 equals US or blank | Valid Zip Code reference must be available for this edit. |
| X223.116.2010BA.N404.010 | N404 | Country Code | ID | 2-3 | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 680: "Entity's Country" EIC: IL "Subscriber" | 2010BA.N404 must be a valid 2 character Country Code. | Valid alpha-2 Country Code reference must be available for this edit. (from Part 1 of ISO 3166) |
| X223.116.2010BA.N405.010 | N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.116.2010BA.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.116.2010BA.N407.010 | N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 695: "Entity's Country Subdivision Code" EIC: IL "Subscriber" | 2010BA.N407 must be a valid Country Subdivision Code. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.118.2010BA.DMG. 010 | DMG | SUBSCRIBER DEMOGRAPHIC INFORMATION |  | 1 | s | 2010BA |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | 2010BA.DMG must be present. |  |
| X223.118.2010BA.DMG. 020 | DMG |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.DMG is allowed. |  |
| X223.118.2010BA.DMG01.010 | DMG01 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.DMG01 must be present. |  |
| X223.118.2010BA.DMG01.020 | DMG01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010BA.DMG01 must be "D8". |  |
| X223.118.2010BA.DMG02.010 | DMG02 | Subscriber Birth Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 20108A.DMG02 must be present. |  |
| X223.118.2010BA.DMG02.020 | DMG02 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2010 BA.DMG02 must be a valid date in CCYYMMDD format. |  |
| X223.118.2010BA.DMG02.030 | DMG02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 510: "Future date" CSC 158: "Entity's date of birth" EIC: IL "Subscriber" | 2010BA.DMG02 must not be a future date. | 01/20: Companion Guide Note needed. |
| X223.118.2010BA.DMG03.010 | DMG03 | Subscriber Gender Code | ID | 1-1 | R |  |  | F, M, U | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.DMG03 must be present. |  |
| X223.118.2010BA.DMG03.020 | DMGG3 |  |  |  |  |  |  |  | 999 | R | 1 K403 = 7: "Invalid Code Value" | 2010BA.DMG03 must be valid values. |  |
| X223.118.20108A.DMG04.010 | DMG04 | Marital Status Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.118.2010BA.DMG05.010 | DMG05 | Race or Ethnicity Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.118.2010BA.DMG06.010 | DMG06 | Citizenship Status Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.118.2010BA.DMG07.010 | DMG07 | Country Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.118.2010BA.DMG08.010 | DMG08 | Basis of Verification Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.118.2010BA.DMG09.010 | DMG09 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.118.20108A.DMG10.010 | DMG10 | Code List Qualifier Code | ID | 1-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.118.2010BA.DMG11.010 | DMG11 | Industry Code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.120.2010BA.REF. 010 | REF | SUBSCRIBER SECONDARY IDENTIFICATION |  | 1 | s | 2010BA |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: HK "Subscriber" | 2010BA.REF with REF01 = "SY" must not be present. present. | Companion Guide Note needed. |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.121.2010BA.REF. 010 | REF | PROPERTY AND CASUALTY CLAIM NUMBER |  | 1 | s | 2010BA |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.REF with REF01 = " Y 4 " is allowed. | pass-through |
| X223.121.2010BA.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | Y4 | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2010BA.REF01 must be present. |  |
| X223.121.2010BA.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010BA.REF01 must be "Y4". |  |
| X223.121.2010BA.REF02.010 | REF02 | Property Casualty Claim Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.REF02 must be present. |  |
| X223.121.2010BA.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.REF02 must contain at least one non-space |  |
| X223.121.2010BA.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.REF02 must be 1-50 characters. |  |
| X223.121.2010BA.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." Csc 512 "Lenth invalid for receiver's application system" CSC 629 "Property Casualty Claim Number" EIC: IL "Subscriber" |  |  |
| X223.121.2010BA.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IKC. AL }=6 \text { :"Invalid Character in Data } \\ & \text { Element" } \\ & \text { Elo } \end{aligned}$ | 2010BA.REF02 must be populated with accepted AN |  |
| X223.121.2010BA.REF02.060 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.121.2010BA.REF03.010 | REFO3 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.121.2010BA.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.122.2010BB.NM1.010 | NM1 | PAYER NAME |  | 1 | R | 2010BB | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010BB.NM1 must be present. |  |
| X223.122.2010BB.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2010BB.NM1 is allowed. |  |
| X223.122.2010BB.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | PR | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM101 must be present. |  |
| X223.122.2010BB.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 20108B.NM101 must be "PR". |  |
| X223.122.2010BB.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 20108B,NM102 must be present. |  |
| х223.122.2010BB.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010BB.NM102 must be "2". |  |
| X223.122.2010BB.NM103.010 | NM103 | Payer Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM103 must be present. |  |
| X223.122.2010BB.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM103 must contain at least one non-space character. |  |
| X223.122.20108B.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 20108B.NM103 must be 1-60 characters. |  |
| X223.122.2010BB.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: PR "Paver" |  |  |
| X223.122.2010BB.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R |  | 2010BB.NM103 must be populated with accepted AN characters. |  |
| X223.122.2010BB.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.122.2010BB.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.122.2010BB.NM105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.122.2010BB.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.122.2010BB.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.122.2010BB.NM108.010 | NM108 | $\begin{gathered} \hline \text { Identification Code } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 1-2 | R |  |  | PI, XV | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM108 must be present. |  |
| X223.122.2010BB.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010BB.NM108 must be "Pl". |  |
| X223.122.20108B.NM109.010 | NM109 | Payer Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM109 must be present. |  |
| X223.122.2010BB.NM109.020 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2010BB.NM109 must contain at least two non-space characters. |  |
| X223.122.2010BB.NM109.030 | NM109 |  |  |  |  |  |  |  | 999 | E | K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010BB.NM109 must be $2-80$ characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999 } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.122.2010BB.NM109.040 | NM109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 53: "Entity ID Number" EIC: PR "Payer" |  |  |
| X223.122.2010BB.NM109.050 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM109 must be populated with accepted AN |  |
| X223.122.2010BB.NM109.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.122.20108B.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.122.20108B.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.122.2010BB.NM112.010 | NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.124.2010BB.N3.010 | N3 | PAYER ADDRESS |  | 1 | s | 2010BB |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BB.N3 is allowed. |  |
| X223.124.2010BB.N301.010 | N301 | Payer Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 20108B.N301 must be present. |  |
| X223.124.2010BB.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N301 must contain at least one non-space character. |  |
| X223.124.2010BB.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BB.N301 must be 1-55 characters. |  |
| X223.124.2010BB.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street Address" EIC: PR "Paver" |  |  |
| X223.124.2010BB.N301.050 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N301 must be populated with accepted AN characters. |  |
| X223.124.2010BB.N301.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.124.2010BB.N302.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.124.2010BB.N302.020 | N302 | Payer Address Line | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If present, 2010BB.N302 must contain at least one non-space character. |  |
| х223.124.20108B.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BB.N302 must be 1-55 characters. |  |
| X223.124.2010BB.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street Address" EIC: PR "Payer" |  |  |
| X223.124.2010BB.N302.050 | N302 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N302 must be populated with accepted AN |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.124.2010BB.N302.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.125.2010BB.N4.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.125.2010BB.N4.020 | N4 | PAYER CITYISTATEIZIP CODE |  | 1 | s | 2010BB |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BB.N4 is allowed. |  |
| X223.125.2010BB.N401.010 | N401 | Payer City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.N401 must be present. |  |
| X223.125.2010BB.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N401 Must contain at least two non-space characters. |  |
| X223.125.2010BB.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010BB. N401 must be 2-30 characters. |  |
| X223.125.2010BB.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" EIC: PR "Payer" |  |  |
| X223.125.2010BB.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N401 must be populated with accepted AN |  |
| X223.125.2010BB.N401.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.125.2010BB.N402.010 | N402 | Payer State Code | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010BB.N404 is not present, 2010BB.N402 must be present. |  |
| X223.125.2010BB.N402.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.125.2010BB.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 501: "Entity's State/Province" EIC: PR "Payer" | 2010BB.N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.125.2010BB.N403.010 | N403 | Payer Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010BB.N404 is not present, 2010BB.N403 must be present. |  |
| X223.125.2010BB.N403.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.125.2010BB.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" EIC: PR "Payer" | 2010BB. N403 must be a valid zip code. | Valid Zip Code reference must be available for this edit. |
| X223.125.20108B.N404.010 | N404 | Country Code | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| х223.125.2010BB.N405.010 | N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.125.2010BB.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.125.2010BB.N407.010 | N407 | Country Subdivision Code | ID | 1-3 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| 8371 Edit Reference | Segment or Elemen | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | $\begin{gathered} \text { Accept/ } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.127.2010BB.REF. 010 | REF | PAYER SECONDARY |  | 3 | s | 2010BB |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: PR "Payer" | 2010Bb.REF with Ref01 = "2U", "El", "FY", or "NF" must not be present. | Companion Guide Note needed. |
| X223.129.2010BB.REF. 010 | REF | BILLING PROVIDER SECONDARY IDENTIFICATION |  | 1 | s | 2010BB |  |  | 999 | R | 1K304 = 2: "Unexpected Segment" | 2010Bb.REF with REF01 = "G2" must be present when 2010AA.NM109 is not present. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.129.2010BB.REF. 020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BB.REF with REF01 = "G2" is allowed. | Trailblazeror JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.129.2010BB.REF. 030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2010BB.REF must not be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.129.2010BB.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.REF01 must be present. |  |
| х223.129.2010BB.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010BB.REF01 must be valid values. |  |
| X223.129.2010BB.REFO2.010 | REF02 | Payer Additional Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.REF02 must be present. |  |
| X223.129.2010BB.REFO2.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.REF02 must contain at least one-none space |  |
| X223.129.2010BB.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 20108B.REF02 must be 1-50 characters. |  |
| X223.129.2010BB.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 560: "Entity's Additional/Secondary Identifier" EIC: PR "Paver" |  |  |
| X223.129.2010BB.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2010BB.REF02 must be populated with accepted AN characters. |  |
| X223.129.2010BB.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.129.2010BB.REF02.070 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2010BB.REFO2 billing provider must be "associated" to the submitter (from a trading partner management perspective) in 1000A.NM109. |  |
| X223.129.2010BB.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Elemen | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | $\begin{gathered} \text { Accept/ } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.129.2010BB.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.131.2000C.HL. 010 | HL | PATIENT HIERARCHICAL LEVEL |  | 1 | s | 2000 C | >1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines. CSC 173: "Entity's name, address, phone, gender, DOB, marital status, employment status and relation to subscriber. EIC: QC "Patient" | 2000C.HL must not be present. | 01/20: Companion Guide Note needed. |
| X223.133.2000C.PAT. 010 | PAT | PATIENT INFORMATION | ID | 1 | R | 2000 C |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 156: "Patient relationship to subscriber." | 2000C.PAT must not be present. |  |
| X223.135.2010CA.NM1.010 | NM1 | PATIENT NAME | ID | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 125: "Entity's name." EIC: QC "Patient." | 2010CA.NM1 must not be present. |  |
| X223.137.2010CA.N3.010 | N3 | PATIENT ADDRESS |  | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 503: "Entity's Street Address." EIC QC: "Patient" | 2010CA.N3 must not be present. |  |
| X223.138.2010CA.N4.010 | N4 | PATIENT CITYISTATEIZIP CODE |  | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 126: "Entity's Address." EIC QC: "Patient" | 2010CA.N4 must not be present. |  |


| 8371 Edit Reference | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.140.2010CA.DMG. 010 | DMG | PATIENT DEMOGRAPHIC INFORMATION |  | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 157:"Entity's Gender." CSC 158: "Entity's date of birth." EIC QC: "Patient' | 2010CA.DMG must not be present. |  |
| X223.142.2010CA.REF. 010 | REF | PROPERTY AND CASUALTY CLAIM NUMBER |  | 1 | s | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 629: "Property Casualty Claim Number." | 2010CA.REF with REF01 = "Y4" must not be present. |  |
| X223A2.19.2010CA.REF. 010 | REF | PROPERTY AND CASUALTY PATIENT IDENTIFIER |  | 1 | s | 2010CA |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: QC "Patient" | 2010CA.REF with REF01 = "1W" or "SY" must not be present. |  |
| х223.143.2300.CLM. 010 | CLM | CLAIM INFORMATION Loop |  |  |  | 2300 | 100 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only 100 iterations of the $\mathbf{2 3 0 0}$ loop are allowed. |  |
| X223.143.2300.CLM.020 | CLM | CLAIM InFormation |  | 1 | R | 2300 | 1 |  | 999 | R | 1K304 = 3: "Required Segment Missing" | 2300.CLM must be present. |  |
| X223.143.2300.CLM. 030 | CLM |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds | Only 1 iteration of 2300.CLM is allowed. |  |
| X223.143.2300.CLM01.010 | CLM01 | Patient Control Number | AN | 1-38 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM01 must be present. |  |
| X223.143.2300.CLM01.020 | CLM01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.CLM01 must contain at least one-non-space character. |  |
| X223.143.2300.CLM01.030 | CLM01 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.CLM01 must be 1-38 characters. | Companion Guide Note Needed only positions 1-20 will be stored/returned |
| X223.143.2300.CLM01.040 | CLM01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 478: Claim submitter's identifier |  |  |
| X223.143.2300.CLM01.050 | CLM01 |  |  |  |  |  |  |  | 999 | R | $\underset{\substack{\text { IK403 = 6: "Invalid Character in Data } \\ \text { Element" }}}{ }$ | 2300.CLM01 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \begin{array}{c} \text { Loop } \\ \text { Repeat } \end{array} \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.143.2300.CLM01.060 - |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.143.2300.CLM02.010 | CLM02 | Total Claim Charge Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM02 must be present. |  |
| X223.143.2300.CLM02.020 | CLM02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.CLM02 must be numeric. |  |
| $\begin{array}{\|l} \hline \begin{array}{l} \text { X223.143.2300.CLM02.030 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.143.2300.CLM02.040 | CLM02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.CLM02 must be >= 0 and <= 99,999,999.99. |  |
| X223.143.2300.CLM02.050 | CLM02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 178: "Submitted Charges" |  |  |
| X223.143.2300.CLM02.060 | CLM02 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 697: "Invalid Decimal Precision" } \\ & \text { CSC 178: "Submitted Charges" } \\ & \hline \end{aligned}$ | 2300.CLM02 is limited to 0,1 or 2 decimal positions. |  |
| X223.143.2300.CLM02.070 | CLM02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement 1Rejected for Invalid Information..." CSC 400: "Claim is out of balance" CSC 178: "Submitted Charges" | 2300.CLM02 must = the sum of all 2400. SV203 amounts. |  |
| X223.143.2300.CLM02.080 | CLM02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 400: "Claim is out of Balance" CSC 672 "Payer's payment information is out of balance" | CLM02 must = the sum of all 2320 CAS amounts \& all 2430 CAS amounts and 2320 AMT02 (when AMT01=D). |  |
| X223.143.2300.CLM03.010 | CLM03 | Claim Filing Indicator Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM04.010 | CLM04 | Non-Institutional Claim Type Code | ID | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| $\begin{array}{\|l\|} \hline \text { 2223.143.2300.CLM05.010 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.143.2300.CLM05-1.010 | CLM05-1 | Facility Type Code | AN | 1-2 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM05-1 must be present. |  |
| X223.143.2300.CLM05-1.020 | CLM05-1 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 228: "Type of bill for UB claim" | 2300.CLM05-1 must be the 1st and 2nd positions of a valid Uniform Bill Type Code. | Valid Uniform Bill Type Code reference must be available for this edit. |
| X223.143.2300.CLM05-2.010 | CLM05-2 | Facility Code Qualifier | ID | 1-2 | R |  |  | A | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM05-2 must be present. |  |
| X223.143.2300.CLM05-2.020 | CLM05-2 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.CLM05-2 must be"A". |  |
| X223.143.2300.CLM05-3.010 | CLM05-3 | Claim Frequency Code | ID | 1-1 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM05-3 must be present. |  |
| X223.143.2300.CLM05-3.020 | CLM05-3 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 228:"Type of bill for UB claim" | 2300.CLM05-3 must be the 3rd position of a valid Uniform Bill Type Code. | Valid Uniform Bill Type Code reference must be available for this edit. |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. Max. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.143.2300.CLM06.010 | CLM06 | Provider or Supplier Signature Indicator | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.143.2300.CLM07.010 | CLM07 | $\begin{gathered} \text { Meicare Assignment } \\ \text { Code } \end{gathered}$ | ID | 1-1 | R |  |  | A, B, C | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM07 must be present. |  |
| X223.143.2300.CLM07.020 | CLM07 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.CLM07 must be valid values. |  |
| X223.143.2300.CLM08.010 | CLM08 | Benefits Assignment Certification Indicator | ID | 1-1 | R |  |  | N, W, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM08 must be present. |  |
| X223.143.2300.CLM08.020 | CLM08 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.CLM08 must be valid values. |  |
| X223.143.2300.CLM09.010 | CLM09 | Release of Information Code | ID | 1-1 | R |  |  | I, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM09 must be present. |  |
| X223.143.2300.CLM09.020 | CLM09 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CLM09 must be valid values. |  |
| X223.143.2300.CLM10.010 | CLM10 | Patient Signature Source Code | ID | 1-1 | N/U |  |  | P | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM11.010 | CLM11 | RELATED CAUSES INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.143.2300.CLM12.010 | CLM12 | Special Program Indicator | ID | 2-3 | N/U |  |  | 02, 03, 05, 09 | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM13.010 | CLM13 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.143.2300.CLM14.010 | CLM14 | Level of Service Code | ID | 1-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.143.2300.CLM15.010 | CLM15 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.143.2300.CLM16.010 | CLM16 | Participation Agreement | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.143.2300.CLM17.010 | CLM17 | Claim Status Code | ID | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.143.2300.CLM18.010 | CLM18 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.143.2300.CLM19.010 | CLM19 | Claim Submission Reason Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| $\times 223.143 .2300 . C L M 20.010$ | CLM20 | Delay Reason Code | ID | 1-2 | S |  |  | $\begin{array}{\|l\|l\|} \hline 1,2,3,4,5,0,7,8,9,10,11, \\ \hline \end{array}$ | 999 | R | \|K403 = 7: "Invalid Code Value" | $2300 . C L M 20$ must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.149.2300.DTP. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.149.2300.DTP. 020 | DTP | DATE - DISCHARGE HOUR |  | 1 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. DTP with DTP01 $=$ " 096 " is allowed. |  |
| X223.149.2300.DTP01.010 | DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 096 | 999 | R | 403 = 1: "Required Data Element Missir | 2300.DTP01 must be present. |  |
| X223.149.2300.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "096". |  |
| X223.149.2300.DTP02.010 | DTP02 | $\substack{\text { Date Time Period Format } \\ \text { Qualifier }}$ | ID | 2-3 | R |  |  | TM | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| $\times 223.149 .2300 . \mathrm{DTP} 02.020$ | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.DTP02 must be "TM". |  |
| X223.149.2300.DTP03.010 | DTP03 | Discharge Hour | AN | 1-35 | R |  |  | HHMM | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| X223.149.2300.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 9: "Invalid Time" | 2300.DTP03 must be a valid time in HHMM format. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.150.2300.DTP. 010 | DTP | date - statement dAtes | ID | 1 | R | 2300 |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2300.DTP must be present. |  |
| X223.150.2300.DTP. 020 | DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "434" is allowed. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | Loop <br> Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.150.2300.DTP01.010 | DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 434 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |  |
| X223.150.2300.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.DTP01 must be "434". |  |
| X223.150.2300.DTP02.010 | DTP02 | Date Time Period Format Qualifier | AN | 2-3 | R |  |  | RD8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| X223.150.2300.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "RD8". |  |
| $\times 223.150 .2300$. DTP03.010 | DTP03 | $\begin{gathered} \hline \text { Statement From or To } \\ \text { Date } \end{gathered}$ | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| X223.150.2300.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.151.2300.DTP. 010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.151.2300.DTP.020 | DTP | DATE - ADMISSION DATE/HOUR |  | 1 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. DTP with DTP01 $=$ " 435 " is allowed. |  |
| X223.151.2300.DTP01.010 | DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 435 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |  |
| X223.151.2300.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.DTP01 must be "435". |  |
| X223.151.2300.DTP02.010 | DTP02 | Date Time Period Format <br> Qualifier | ID | 2-3 | R |  |  | D8, DT | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| X223.151.2300.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.DTP02 must be valid values. |  |
| X223.151.2300.DTP03.010 | DTP03 | Admission Date and Hour | AN | 1-35 | R |  |  | CCYYMMDD, CCYYMMDDHHMM | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| X223.151.2300.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 8: "Invalid Date" | If 2300.DTP02 = D8, then 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
| X223.151.2300.DTP03.030 | DTP03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 8: "Invalid Date" | If 2300. DTP02 $=$ DT, then 2300. DTP03 must be a | 3/17: Companion Guide note needed - CMS prefers use of the DT code and inclusion of the time. |
| X223.151.2300.DTP03.040 | DTP03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 510: "Future date" CSC 189: "Facility admission date" | 2300.DTP03 must not be a future date. | Companion Guide note needed |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.152.2300.DTP. 010 | DTP | DATE-REPRICER RECEIVED DATE |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP is allowed. | pass through, syntax only. |
| X223.152.2300.DTP01.010 | DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 050 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |  |
| X223.152.2300.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "050". |  |
| X223.152.2300.DTP02.010 | DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| X223.152.2300.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |  |
| X223.152.2300.DTP03.010 | DTP03 | Order Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| X223.152.2300.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.153.2300.CL1.010 | CL1 | $\underset{\text { CODE }}{\text { INSTITUTIONAL CLAIM }}$ |  | 1 | R | 2300 |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2300.CL1 must be present. |  |
| X223.153.2300.CL1.020 | CL1 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CL1 is allowed. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { Accept } / \mid \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223A2.20.2300.CL101.010 | CL101 | Priority (Type) of Admission or Visit Code | ID | 1-1 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CL101 must be present. |  |
| $\begin{array}{\|l\|} \hline \begin{array}{l} \text { X223.153.2300.CL101.010 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.153.2300.CL101.020 | CL101 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.CL101 must be 1 character. |  |
| X223.153.2300.CL101.030 | CL101 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 231: "Hospital admission type" | 2300.CL101 must be a valid Priority (Type) of Admission or Visit code. | Valid Priority (Type) of Admission or Visit Code reference must be available for this edit. |
| X223A2.20.2300.CL102.010 | CL102 | Point of Origin for Admission or Visit Code | ID | 1-1 | s |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CL102 must be present when 2300.CLM05-1 is not "14". | per NUBC |
| X223.153.2300.CL102.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.153.2300.CL102.020 | CL102 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | $2300 . C L 102$ must be 1 character. |  |
| X223.153.2300.CL102.030 | CL102 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 229: "Hospital admission source" | 2300.CL102 must be a valid Point of Origin for Admission or Visit Code. | Valid Point of Origin for Admission or Visit Code reference must be available for this edit. |
| X223.153.2300.CL103.010 | CL103 | Patient Status Code | ID | 1-2 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CL103 must be present. |  |
| X223.153.2300.CL103.015 | CL103 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 234: "Patient discharge status" | When 2300.CL103 value " 20 ", " 40 ", " 41 ", or " 42 " is present, at least one occurrence of 2300.HIO1-2 thru HI12-2 must = " 55 " where HIO1-1 is "BH". |  |
| X223.153.2300.CL103.020 | CL103 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 234: "Patient discharge status" | 2300.CL103 must be a valid Patient Status Code. | Valid Patient Status Code reference must be available for this edit. |
| X223.153.2300.CL104.010 | CL104 | Nursing Home Code | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.154.2300.PWK.010 | PWK | CLAIM SUPPLEMENTAL information |  | 10 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of $2300 . \mathrm{PWK}$ are allowed. | pass through, syntax only. |
| X223.154.2300.PWK01.010 | PWK01 | Attachment Report Type Code | ID | 2-2 | R |  |  | 03, 04, 05, 06, 07, 08, 09, 10, 11, 13, 15, 21, A3, A4, AM, AS B2, B3, B4, BR, BS, BT, CB, CK, CT, D2, DA, DB, DG, DJ, DS, EB, HC, HR, I5, IR, LA, M1, MT, NN, OB, OC, OD, OE, OX, OZ, P4, P5, PE, PN, PO, $P Q, P Y, P Z, R B, R R, R T, R X$, SG.V5.XP | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.PWK01 must be present. |  |
| X223.154.2300.PWK01.020 | PWK01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.PWK01 must be valid values. |  |
| X223.154.2300.PWK02.010 | PWK02 | Attachment Transmission Code | ID | 1-2 | R |  |  | AA, BM, EL, EM, FT, FX | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.PWK02 must be present. |  |
| X223.154.2300.PWK02.020 | PWK02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.PWK02 must be valid values. |  |
| X223.154.2300.PWK03.010 | PWK03 | Report Copies Needed | No | 1-2 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.154.2300.PWK04.010 | PWK04 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.154.2300.PWK05.010 | PWK05 | Identification Code Qualifier | ID | 1-2 | s |  |  | AC | 999 | R | IK403 = 2:"Conditional Required Data Element Missing" | When 2300.PWK05 is present, 2300.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |  |
| X223.154.2300.PWK05.020 | PWK05 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.PWK05 must be "AC". |  |
| X223.154.2300.PWK06.010 | PWK06 | Attachment Control Number | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | When 2300.PWK06 is present, 2300.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.154.2300.PWK06.020 | PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2300.PWK06 must be $2-50$ characters. |  |
| X223.154.2300.PWK06.030 | PWK06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 489: "Attachment Control Number" |  |  |
| X223.154.2300.PWK06.040 | PWK06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.PWK06 must be populated with accepted AN characters. |  |
| X223.154.2300.PWK06.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.154.2300.PWK06.060 | PWK06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.PWK06 must contain at least two non-space characters. |  |
| X223.154.2300.PWK07.010 | PWK07 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.154.2300.PWK08.010 | PWK08 | ACTIONS INDICATED |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.154.2300.PWK09.010 | PWK09 | Request Category Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.158.2300.CN1.010 | CN1 | CONTRACT INFORMATION | ID | 1 | s | 2300 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300.CN1 must not be present. | IG note that CN1 is not for HIPAA claims. |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.160.2300.AMT. 010 | AMT | patient estimated AMOUNT DUE |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.AMT is allowed. |  |
| X223.160.2300.AMT01.010 | AMT01 | Amount Qualifier Code | ID | 1-3 | R |  |  | F3 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.AMT01 must be present. |  |
| X223.160.2300.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.AMT01 must be "F3". |  |
| X223.160.2300.AMT02.010 | AMT02 | Patient Responsibility Amount | R | 1-18 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.AMT02 must be present. |  |
| х223.160.2300.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | AMT02 must be numeric. |  |
| X223.160.2300.AMT02.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.160.2300.AMT02.040 | AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.AMT02 must be >= 0 and <=99,999,999.99. |  |
| X223.160.2300.AMT02.050 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 565: "Estimated Claim Due Amount" EIC: OC "Patient" |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Reg. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.160.2300.AMT02.060 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 565: "Estimated Claim Due Amount" <br> EIC: QC "Patient" | 2300.AMTO2 is limited to 0,1 or 2 decimal positions. |  |
| X223.160.2300.AMT03.010 | AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.161.2300.REF. 010 | REF | SERVICE AUTHORIZATION EXCEPTION CODE |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .REF with REF01 = "4N" is allowed. | pass through, syntax only. |
| X223.161.2300.REF01.010 | REF01 | Reference Identification Qualifier |  |  |  |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.161.2300.REF01.020 | REF01 |  | ID | 2-3 | R |  |  | 4 N | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . R$ EF01 must be "4N". |  |
| X223.161.2300.REF02.030 | REF02 | Service Authorization Exception Code | ID | 1-50 | R |  |  | 1, 2, 3, 4, 5, 6, 7 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REFO2 must be present. |  |
| X223.161.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{REFO2}$ must be valid values. |  |
| X223.161.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.161.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.163.2300.REF. 010 | REF | REFERRAL NUMBER |  | 1 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. REF with REF01 $=$ " $9 \mathrm{~F} "$ is allowed. |  |
| X223.163.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9 F | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| Х223.163.2300.REF01.020 | REFF1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "9F". |  |
| X223.163.2300.REF02.010 | REF02 | Prior Authorization or Referral Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.163.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| Х223.163.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| X223.163.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 252: "Entity's authorization/certification number" EIC: PR "Payer" |  |  |
| X223.163.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| X223.163.2300.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.163.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.163.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Flement Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.164.2300.REF. 010 | REF | PRIOR AUTHORIZATION |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "G1" is allowed. |  |
| X223.164.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G1 | 999 | R | IK403 = 1: "Required Data Element Missing" Missing" | 2300.REF01 must be present. |  |
| X223.164.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "G1". |  |
| X223.164.2300.REF02.010 | REF02 | Prior Authorization Number | AN | 1-50 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.164.2300.REF02.020 | REFF2 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.164.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300. REF02 must be 1-50 characters. |  |
| X223.164.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 252: "Entity's authorization/certification number" EIC: 85 "Billing Provider" |  |  |
| X223.164.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REFO2 must be populated with accepted AN characters. |  |
| X223.164.2300.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.164.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.164.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.166.2300.REF. 010 | REF | PAYER CLAIM CONTROL NUMBER | ID | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "F8" is allowed. | Required when CLM05-3 (Claim Frequency Code) indicates this claim is a replacement or void to a previously adjudicated claim. |
| X223.166.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | F8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.166.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "F8". |  |
| X223.166.2300.REF02.010 | REF02 | PAYER CLAIM CONTROL NUMBER | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.166.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.166.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be $1-50$ characters. |  |
| X223.166.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | $\qquad$ CSCC A7: Acknowedgemen CSC 512: "Length invalid for receiver's application system" CSC 464: "Payer Assigned Claim Control Number |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | $\begin{gathered} \text { Segment or } \\ \text { Element } \\ \hline \end{gathered}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|c\|} \hline \text { TA111 } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.166.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| X223.166.2300.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.166.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.166.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.167.2300.REF. 010 | REF | REPRICED CLAIM NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "9A" is allowed. | pass through, syntax only. |
| X223.167.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9A | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.167.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK 403 - 7: "Invalid Code Value" | 2300.REF01 must be "9A". |  |
| X223.167.2300.REF02.010 | REF02 | Repriced Claim Reference Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.167.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.167.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| X223.167.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 702: "Repriced Claim Reference |  |  |
| X223.167.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \\ & \hline \end{aligned}$ | 2300.REF02 must be populated with accepted AN characters. |  |
| X223.167.2300.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.167.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.167.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.168.2300.REF. 010 | REF | ADJUSTED REPRICED CLAIM NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. REF with REF01 $=$ "9C" is allowed. | pass through, syntax only. |
| X223.168.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9 C | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.168.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "9C". |  |
| X223.168.2300.REF02.010 | REF02 | Adjusted Repriced Claim Reference Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.168.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.168.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.168.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 517: "Adjusted Repriced Claim Reference Number" |  |  |
| X223.168.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REFO2 must be populated with accepted AN characters. |  |
| X223.168.2300.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.168.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.168.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.169.2300.REF. 010 | REF | INVESTIGATIONAL DEVICE EXEMPTION NUMBER |  | 5 | s | 2300 |  |  | 999 | R | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "LX" is allowed. | CMS is only accepting one iteration. |
| X223.169.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | LX | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. | 03/30: Companion Guide Note needed. |
| X223.169.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "LX". |  |
| X223.169.2300.REF02.010 | REF02 | Investigational Device Exemption Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.169.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.169.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| X223.169.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 579: "Investigational Device Exemption Identifier" |  |  |
| X223.169.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REFO2 must be populated with accepted AN characters. |  |
| X223.169.2300.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.169.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.169.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.170.2300.REF. 010 | REF | CLAIM IDENTIFIER FOR TRANSMISSION INTERMEDIARIES |  | 1 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "D9" is allowed. | pass through, syntax only. |
| X223.170.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | D9 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.170.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "D9" |  |
| X223.170.2300.REF02.010 | REF02 | Value Added Network Trace Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.170.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REFO2 must contain at least one non-space |  |
| X223.170.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-20 characters. |  |
| X223.170.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 543: "Clearinghouse or Value Added Network Trace" |  |  |
| X223.170.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN |  |
| X223.170.2300.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.170.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.170.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.172.2300.REF. 010 | REF | AUTO ACCIDENT STATE |  | 1 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds | Only one iteration of 2300.REF with REF01 = "LU" is allowed. | pass through, syntax only. |
| X223.172.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.172.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.REF01 must be "LU". |  |
| X223.172.2300.REF02.010 | REF02 | Auto Accident State or Province | AN | 1-50 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" CSC 171: Other insurance coverage information (health, liability, auto, etc.) EIC: PR "Payer" | 2300.REF02 must be a valid State or Provience code. | Valid State Code reference must be available for this edit. |
| X223.172.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.172.2300.REF04.010 | REFO4 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 $=110: ~ " I m p l e m e n t a t i o n ~ " N o t ~$ Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.173.2300.REF. 010 | REF | MEDICAL RECORD NUMBER |  | 1 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "EA" is allowed. |  |
| X223.173.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | EA | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.173.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "EA". |  |
| X223.173.2300.REF02.010 | REF02 | Medical Record Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.173.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REFO2 must contain at least one non-space character. |  |
| X223.173.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage Req. | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.173.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 588: "medical Record Number" |  |  |
| X223.173.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| X223.173.2300.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.173.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.173.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.174.2300.REF. 010 | REF | demonstration PROJECT IDENTIFIER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. REF with REF01 = "P4" is allowed. |  |
| X223.174.2300.REF01.010 | REF01 | $\underset{\text { Reference Identification }}{\text { Qualifier }}$ | ID | 2-3 | R |  |  | P4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.174.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "P4". |  |
| X223.174.2300.REF02.010 | REF02 | $\begin{gathered} \text { Demonstration Project } \\ \text { Identifier } \end{gathered}$ | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REFO2 must be present. |  |
| X223.174.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.REF02 must contain at least one non-space character. |  |
| X223.174.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| X223.174.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 556: "Demonstration Project Identifier" |  |  |
| X223.174.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 732: Information submitted inconsistent with billing guidelines CSC 556: Demonstration Project Identifier | If 2300.REF02 (REF01=P4) is a valid VA demonstration project identifier, 1000B.NM109 must be "04001" or "04411". |  |
| X223.174.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 $=$ I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.174.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Element Prasent" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.175.2300.REF. 010 | REF | PEER REVIEW ORGANIZATION (PRO) APPROVAL NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 REF with REF01 = "G4" is allowed. |  |
| X223.175.2300.REF01.010 | REF01 | $\begin{gathered} \hline \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | G4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.175.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "G4". |  |
| X223.175.2300.REFO2.010 | REF02 | PRO Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REFO2 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { anx. } \end{gathered}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.175.2300.REFO2.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.175.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| X223.175.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 611: "Peer Review Authorization Number" |  |  |
| X223.175.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN |  |
| X223.175.2300.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.175.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.175.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.176.2300.к3.010 | к3 | FILE INFORMATION |  | 10 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of K 3 are allowed. |  |
| х223.176.2300.к301.010 | K301 | Fixed Format Information | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.K301 must be present. |  |
| X223.176.2300.K301.020 | K301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.K301 must contain at least one non-space character. |  |
| X223.176.2300.K301.030 | K301 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | $2300 . \mathrm{K} 301$ must be 1-80 characters. |  |
| X223.176.2300.K301.040 | K301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 569: "Fixed Format Information" |  |  |
| X223.176.2300.K301.050 | K301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.K301 must be populated with accepted AN characters. |  |
| X223.176.2300.K301.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Х223.176.2300.K302.010 | K302 | Record Format Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 $=$ I $10:$ "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.176.2300.K303.010 | K303 | COMPOSITE UNIT OF MEASURE |  |  | N/U |  |  |  | 999 | E | IK403 $=110:$ "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.178.2300.NTE.010 | NTE | CLAIM NOTE |  | 10 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of 2300.NTE are allowed. |  |
| X223.178.2300.NTE01.010 | NTE01 | Note Reference Code | ID | 3-3 | R |  |  | ALG, DCP, DGN, DME, MED, NTR, ODT, RHB, RLH, RNH, SET, SFM, SPT, UPI | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.NTE01 must be present. |  |
| X223.178.2300.NTE01.020 | NTE01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.NTE01 must be valid values. |  |
| X223.178.2300.NTE02.010 | NTE02 | Claim Note Text | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.NTE02 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { TA99/ } \\ \text { 277CA } \end{gathered}$ | Accept Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.178.2300.NTE02.020 | NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must be at least one non-space |  |
| X223.178.2300.NTE02.030 | NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.NTE02 must be 1-80 characters. |  |
| X223.178.2300.NTE02.040 | NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 297: "Medical Notes/Report" |  |  |
| X223.178.2300.NTE02.050 | NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must be populated with accepted AN characters. |  |
| X223.178.2300.NTE02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.180.2300.NTE. 010 | NTE | biluing note |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds | Only one iteration of 2300.NTE is allowed. |  |
| X223.180.2300.NTE01.010 | NTE01 | Note Reference Code | ID | 3-3 | R |  |  | ADD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.NTE01 must be present. |  |
| X223.180.2300.NTE01.020 | NTE01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.NTE01 must be "ADD". |  |
| X223.180.2300.NTE02.010 | NTE02 | Billing Note Text | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.NTE02 must be present. |  |
| X223.180.2300.NTE02.020 | NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must be at least one non-space character. |  |
| X223.180.2300.NTE02.030 | NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.NTE02 must be 1-80 characters. |  |
| X223.180.2300.NTE02.040 | NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 704: "Claim Note Text" |  |  |
| X223.180.2300.NTE02.050 | NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.NTE02 must be populated with accepted AN characters. |  |
| X223.180.2300.NTE02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.181.2300.CRC. 010 | CRC | EPSDT REFERRAL |  | 1 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CRC with CRC01 = "ZZ" is allowed. | pass through, syntax only. |
| X223.181.2300.CRC01.010 | CRC01 | Code Category | ID | 2-2 | R |  |  | zz | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC01 must be present. |  |
| X223.181.2300.CRC01.020 | CRC01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.CRC01 must be "ZZ". |  |
| X223.181.2300.CRC02.010 | CRC02 | $\begin{gathered} \hline \text { Certification Condition } \\ \text { Indicator } \\ \hline \end{gathered}$ | ID | 1-1 | R |  |  | N, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC02 must be present. |  |
| X223.181.2300.CRC02.020 | CRC02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.CRC02 must be valid values. |  |
| X223.181.2300.CRC03.010 | CRC03 | Condition Code | ID | 2-3 | R |  |  | AV, NU, S2, ST | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC03 must be present. |  |
| X223.181.2300.CRC03.020 | CRC03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.CRC03 must be valid values. |  |
| X223.181.2300.CRC03.025 | CRC03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | If 2300.CRC02 is "N", 2300.CRC03 must be "NU". |  |
| X223.181.2300.CRC04.010 | CRC04 | Condition Code | ID | 2-3 | s |  |  | $\mathrm{AV}, \mathrm{NU}, \mathrm{S} 2, \mathrm{ST}$ | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . C R C 04$ must be valid values. |  |
| X223.181.2300.CRC05.010 | CRC05 | Condition Code | ID | 2-3 | S |  |  | $\mathrm{AV}, \mathrm{NU}, \mathrm{S} 2, \mathrm{ST}$ | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.CRC05 must be valid values. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { TA99/ } \\ \text { 277CA } \end{gathered}$ | Accept Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.181.2300.CRC06.010 | CRC06 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.181.2300.CRC07.010 | CRC07 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.184.2300.H1.010 | HI | PRINCIPAL DIAGNOSIS |  | 1 | R | 2300 |  |  | 999 | R | IK304 = 3: "Required Segment | 2300.HI with H101-1 = "BK" must be present. | ICD-9 Only period |
| X223.184.2300.HI.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.184.2300.H1.030 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2300. HI with H101-1 $=$ "ABK" must be present. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.184.2300.H1.040 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with $\mathrm{HIO1-1}=$ " BK " is allowed. | ICD-9 Only period |
| X223.184.2300.HI. 050 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.184.2300.H1.060 | HI |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | $\begin{aligned} & \text { Only one iteration of } 2300 . \mathrm{HI} \text { with HI01-1 = "ABK" } \\ & \text { is allowed. } \end{aligned}$ | ICD-10 Only period - assumes no dual-use after mandated date. |
|  | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.184.2300.H01-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABK, BK | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.H101-1 must be present. |  |
| X223.184.2300.H101-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| X223.184.2300.H101-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BK". | ICD-9 Only period |
| X223.184.2300.H01-1.040 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H101-1 must = "ABK". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.184.2300.H101-2.010 | H01-2 | Industry Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" Missing" | 2300.H101-2 must be present. |  |
| X223.184.2300.H101-2.020 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 254: "Principal diagnosis code" | If 2300. HIO1-1 is "BK" then 2300 . HIO1-2 must be a valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.184.2300.H01-2.030 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 254: "Principal diagnosis code" | If $2300 . \mathrm{HIO1}-1$ is "ABK" then 2300 . HIO1-2 must be a valid ICD-10 Diagnosis code. | ICD-10 Only period. <br> Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X223.184.2300.H01-2.040 | H01-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H101-2 must not contain a ".". |  |
| X223.184.2300.H01-2.050 | H01-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 254: "Principal diagnosis code" |  |  |
| X223.184.2300.H101-2.060 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 254: Principal Diagnosis Code CSC 509: E-Code | If $2300 . \mathrm{HIO1}-1=\mathrm{BK}$ then $2300 . \mathrm{HIO1}-2$ must not begin with " E ". |  |
| X223.184.2300.H101-2.065 |  |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 254: "Principal diagnosis code" CSC 509: External Cause of Injury | If 2300.HI01-1 = ABK, then 2300.HI01-2 must not begin with a "V", "W", "X" or "Y". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.184.2300.H101-3.010 | H01-3 | $\begin{array}{c}\text { Date Time Period Format } \\ \text { Qualifier }\end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.184.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.184.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.184.2300.H101-6.010 | H01-6 | Quantity | R | -15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.184.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.184.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.184.2300.H101-9.010 | H01-9 | Present on Admission | ID | 1-1 | N/U |  |  | N, U, W, Y | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.184.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.184.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.184.2300.H104.010 | H04 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.184.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.184.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.184.2300.H107.010 | H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.184.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.184.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.184.2300.H110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.184.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.184.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.187.2300.HI } 010 \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.187.2300.H1. } 020 \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.187.2300.H1. } 030 \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.187.2300.HI. 040 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.187.2300.H1.050 | HI | ADMITTING DIAGNOSIS |  | 1 | R | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds | Only one iteration of $2300 . \mathrm{HI}$ with $\mathrm{HIO1-1}=$ "BJ" is allowed. | ICD-9 Only period |
| X223.187.2300.HI. 060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.187.2300.H1.070 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H101-1 = "ABJ" is allowed. is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.187.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.187.2300.H101-1.010 | H01-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABJ, BJ | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300. H01-1 must be valid values. |  |
| X223.187.2300.H101-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BJ". | ICD-9 Only period |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.187.2300.H101-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H H01-1 $\mathrm{must}=$ "ABJ". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.187.2300.H101-2.010 | H101-2 | Admitting Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 232: "Admitting Diagnosis" | If $2300 . \mathrm{HIO1}-1$ is "BJ" then $2300 . \mathrm{HIO1}-2$ must be a valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.187.2300.H101-2.020 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 232: "Admitting Diagnosis" | If $2300 . \mathrm{HIO1}-1$ is "ABJ" then 2300 .HI01-2 must be a valid ICD-10 Diagnosis code. valid ICD-10 Diagnosis code. | ICD-10 Only period. <br> Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X223.187.2300.H101-2.030 | H01-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.HI01-2 must not contain a ".." |  |
| X223.187.2300.H101-2.040 | H01-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 232: "Admitting Diagnosis" |  |  |
| X223.187.2300.H101-3.010 | H101-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" " | Must not be present. |  |
| X223.187.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.187.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.187.2300.H101-6.010 | H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.187.2300.H101-7.010 | H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.187.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.187.2300.H101-9.010 | H01-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.187.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | \|K403 = I10: "Implementation "Not Used" Element Present" 竍 | Must not be present. |  |
| X223.187.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.187.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.187.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.187.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.187.2300.H107.010 | H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.187.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.187.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.187.2300.H110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.187.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.187.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|c\|} \hline \text { TA111 } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.189.2300.H1.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.189.2300.HI. 020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.189.2300.HI.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.189.2300.HI. } 040 \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.189.2300.H1.050 | HI | PATIENT REASON FOR <br> VISIT |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with $\mathrm{H} 101-1=$ "PR" is allowed. | ICD-9 Only period |
| X223.189.2300.HI. 060 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.189.2300.H1.070 | HI |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds | Only one iteration of $2300 . \mathrm{HI}$ with $\mathrm{HIO1-1}=$ "APR" is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.189.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| х223.189.2300.H101-1.010 | H01-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | APR, PR | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| х223.189.2300.H101-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | $1 \mathrm{~K} 403=7$ : "Invalid Code Value" | 2300.H101-1 must = "PR". | ICD-9 Only period |
| X223.189.2300.H101-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H 101 -1 must = "APR". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.189.2300.H101-2.010 | H01-2 | Patient Reason For Visit | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 673: "Patient reason for visit" | If 2300.HIO1-1 is "PR" then 2300. HIO1-2 must be a valid ICD-9 Patient Reason for Visit code. | ICD-9 Only period. <br> Valid ICD-9 Patient's Reason for Visit Code reference must be available for this edit. |
| X223.189.2300.H101-2.020 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 673: "Patient reason for visit" | If 2300. H101-1 is "APR" then 2300 .HI01- 2 must be a valid ICD-10 Patient Reason for Visit code. | ICD-10 Only period. <br> Valid ICD-10 Patient's Reason for Visit Code reference must be available for this edit. |
| х223.189.2300.H101-2.030 | H01-2 |  |  |  |  |  |  |  | 999 | E | 1K403 = 6: "IIvalid Character in Data Element" | 2300.H01-2 must not contain a ".". |  |
| X223.189.2300.H101-2.040 | H101-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSS 511: "Invalid character" CSC 673: "Patient reason for visit" |  |  |
| х223.189.2300.H101-3.010 | H01-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.189.2300.H101-5.010 | H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.189.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H101-8.010 | H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2:"Conditional Required Data Element Missing" | 2300.HIO2 can only be present if 2300 . HIO1 is present. |  |
| X223.189.2300.H102-1.010 | H02-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | APR, PR | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H02-1 must be valid values. |  |
| X223.189.2300.H102-1.020 | H02-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must = "PR". | ICD-9 Only period |
| X223.189.2300.H102-1.030 | H02-1 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H102-1 must = "APR". | ICD-10 Only period - assumes no dual-use after mandated date. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{aligned} & 5010 \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.189.2300.H102-2.010 | H102-2 | Patient Reason For Visit | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 673: "Patient reason for visit" | If 2300.HIO2-1 is "PR" then 2300.HIO2-2 must be a valid ICD-9 Patient Reason for Visit code. | ICD-9 Only period. <br> Valid ICD-9 Patient's Reason for Visit Code reference must be available for this edit. |
| X223.189.2300.H102-2.020 | H102-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 673: "Patient reason for visit" | $\begin{aligned} & \text { If 2300.HIO2-1 is "APR" then } 2300 . \text { HIO2-2 must be a } \\ & \text { valid ICD-10 Patient Reason for Visit code. } \end{aligned}$ | ICD-10 Only period. <br> Valid ICD-10 Patient's Reason for Visit Code reference must be available for this edit. |
| X223.189.2300.H102-2.030 | H102-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H02-2 must not contain a ".." |  |
| X223.189.2300.H102-2.040 | H102-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 673: "Patient reason for visit" |  |  |
| X223.189.2300.H102-3.010 | H102-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| х223.189.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H102-9.010 | H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H103.010 | H03 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2:"Conditional Required Data Element Missing" | 2300. HIO3 can only be present if 2300 . $\mathrm{HIO2}$ is present. |  |
| х223.189.2300.H103-1.010 | H103-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | APR, PR | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must be valid values. |  |
| х223.189.2300.H103-1.020 | H103-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must = "PR". | ICD-9 Only period |
| х223.189.2300.H103-1.030 | H103-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H (103-1 must = "APR". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.189.2300.H103-2.010 | H103-2 | Patient Reason For Visit | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 673: "Patient reason for visit" | If 2300.HIO3-1 is "PR" then 2300. HIO3-2 must be a valid ICD-9 Patient Reason for Visit code. | ICD-9 Only period. <br> Valid ICD-9 Patient's Reason for Visit Code reference must be available for this edit. |
| X223.189.2300.H103-2.020 | H103-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 673: "Patient reason for visit" | If 2300. HIO3-1 is "APR" then 2300 .HIO3-2 must be a valid ICD-10 Patient Reason for Visit code. | ICD-10 Only period. Valid ICD-10 Patient's Reason for Visit Code reference must be available for this edit. |
| X223.189.2300.H103-2.030 | H103-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H03-2 must not contain a ".". |  |
| X223.189.2300.H103-2.040 | H103-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 673: "Patient reason for visit" |  |  |
| X223.189.2300.H103-3.010 | H103-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.189.2300.H103-4.010 | H103-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300. $\mathrm{H} 103-5.010$ | H03-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\underset{\text { Elemment or }}{\text { Elemer }}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Rea. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.189.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H103-7.010 | H03-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H103-9.010 | H03-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.189.2300.H104.010 | H104 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.189.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.189.2300.H106.010 | H106 | HEALTH CARE CODE NFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.189.2300.H107.010 | H107 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.189.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.189.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.189.2300.H110.010 | H110 | $\qquad$ |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I } 10 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.189.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.189.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.193.2300.H1.010 | HI | EXTERNAL CAUSE OF INJURY |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds | Only one iteration of $2300 . \mathrm{HI}$ with $\mathrm{HIO1-1}=$ "BN" is allowed. | ICD-9 Only period |
| X223.193.2300.HI.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.193.2300.H1.030 | HI |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds | Only one iteration of $2300 . \mathrm{HI}$ with $\mathrm{HIO1-1}=$ "ABN" is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H101.010 | H01 | HEALTH CARE CODE NFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.193.2300.H01-1.010 | H01-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| X223.193.2300.H101-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.HIO1-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H101-1.030 | H101-1 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300. H I01-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H101-2.010 | H101-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO1-1 is "BN" then 2300. $\mathrm{HIO1}-2$ must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H01-2.020 | H101-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 509: "E-Code" | If 2300.HIO1-1 is "ABN" then 2300.HIO1-2 must be a valid ICD-10 External Cause of Injury code. | ICD-10 Only period. Valid ICD-10 External Cause of Injury Code reference must be available for this edit. |
| X223.193.2300.H01-2.030 | H101-2 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.H01-2 must not contain a ".". |  |
| X223.193.2300.H101-2.040 | H01-2 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CIEmem } \\ & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 511: "Invalid character" } \\ & \hline \text { CSC 509: "E-Code" } \\ & \hline \end{aligned}$ |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H01-2.050 | H01-2 |  |  |  |  |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSS 511: "Invalid haracter" } \\ & \text { CSC 509: "E-Code" } \end{aligned}$ | If $2300 . \mathrm{HIO1}-1=\mathrm{BN}$ then $2300 . \mathrm{HIO1}-2$ must begin with " E ". |  |
| X223.193.2300.H101-3.010 | H101-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H101-4.010 | H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H101-5.010 | H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.193.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H01-9.010 | H01-9 | Present on Admission indicator | ID | 1-1 | s |  |  | $\mathrm{N}, \mathrm{U}, \mathrm{W}, \mathrm{Y}$ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H I01-9 must be valid values. |  |
| X223.193.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | \|K403 = 2:"Conditional Required Data Element Missing" | 2300. HIO2 can only be present if 2300 .HIO1 is present. |  |
| X223.193.2300.H102-1.010 | H102-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2300.H102-1 must be valid values. |  |
| X223.193.2300.H102-1.020 | H102-1 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2300.H102-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H102-1.030 | H102-1 |  |  |  |  |  |  |  | 999 | R | 1 1403 = 7: "Invalid Code Value" | 2300. H H02-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H102-2.010 | H102-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO2-1 is "BN" then 2300.HIO2-2 must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H102-2.020 | H102-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 509: "E-Code" | If 2300.HIO2-1 is "ABN" then $2300 . \mathrm{HIO2}-2$ must be a valid ICD-10 External Cause of Injury code. | ICD-10 Only period. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H102-2.030 | H102-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H102-2 must not contain a ".." |  |
| X223.193.2300.H02-2.040 | H102-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 511: "Invalid haracter" CSC 509: "E-Code" |  |  |
| X223.193.2300.H102-2.050 | H02-2 |  |  |  |  |  |  |  | 277 | c |  | If $2300 . \mathrm{HIO2}-1=\mathrm{BN}$ then $2300 . \mathrm{HIO2}-2$ must begin with "E". |  |
| X223.193.2300.H102-3.010 | H102-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.193.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.193.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Flement Present" | Must not be present. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H102-9.010 | H102-9 | $\begin{aligned} & \text { Present on Admission } \\ & \text { indicator } \end{aligned}$ | ID | 1-1 | S |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H102-9 must be valid values. |  |
| X223.193.2300.H103.010 | H03 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2:"Conditional Required Data Element Missing" | $2300 . \mathrm{HIO}$ can only be present if 2300 . HI02 is present. |  |
| X223.193.2300.H103-1.010 | H103-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must be valid values. |  |
| Х223.193.2300.H103-1.020 | H103-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must = "BN". | ICD-9 Only period |
| х223.193.2300.H103-1.030 | H03-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H IO3-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H103-2.010 | H03-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO3-1 is "BN" then 2300. HIO3-2 must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H103-2.020 | H103-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. HIO3-1 is "ABN" then 2300 . HIO3-2 must be a valid ICD-10 External Cause of Injury code. | ICD-10 Only period. <br> Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H103-2.030 | H103-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H103-2 must not contain a ".." |  |
| X223.193.2300.H103-2.040 | H03-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H103-2.050 | H03-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" | If 2300. HIO3-1 $=$ BN then 2300. HIO3-2 must begin with " E ". |  |
| X223.193.2300. $\mathrm{HIO3}-3.010$ | H003-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H103-4.010 | H03-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H103-5.010 | H03-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H103-7.010 | H03-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H103-9.010 | H03-9 | $\begin{aligned} & \text { Present on Admission } \\ & \text { indicator } \end{aligned}$ | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 103$-9 must be valid values. |  |
| X223.193.2300.H104.010 | H04 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO}$ can only be present if 2300 . HIO3 is present. |  |
| X223.193.2300.H104-1.010 | H104-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | \|K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 104-1$ must be valid values. |  |
| Х223.193.2300.H104-1.020 | H104-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H141-1 must = "BN". | ICD-9 Only period |
| х223.193.2300.H104-1.030 | H104-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H (104-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H104-2.010 | H104-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO4-1 is "BN" then 2300. HIO4-2 must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H104-2.020 | H104-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO4-1 is "ABN" then 2300.HIO4-2 must be a valid ICD-10 External Cause of Injury code. | ICD-10 Only period. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H104-2.030 | H104-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H104-2 must not contain a ".". |  |
| X223.193.2300.H104-2.040 | H104-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H104-2.050 | H04-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 509: "E-Code" | If $2300 . \mathrm{HIO} 04-1=\mathrm{BN}$ then 2300 . $\mathrm{H} 104-2$ must begin with "E". |  |
| X223.193.2300.H104-3.010 | H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H104-4.010 | H04-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H104-9.010 | H04-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 104-9$ must be valid values. |  |
| X223.193.2300.H105.010 | H105 | HEALTH CARE CODE |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO5}$ can only be present if 2300 . HI 04 is present. |  |
| X223.193.2300.H105-1.010 | H05-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H105-1 must be valid values. |  |
| X223.193.2300.H105-1.020 | H105-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H105-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H105-1.030 | H105-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{Hl05-1}$ must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H105-2.010 | H105-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If $2300 . \mathrm{HIO5}-1$ is "BN" then $2300 . \mathrm{H} 105-2$ must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H105-2.020 | H05-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO5-1 is "ABN" then 2300 .HIO5-2 must be a valid ICD-10 External Cause of Injury code. | $\begin{aligned} & \text { elat-10 Only period. } \\ & \text { Valid ICD-10 Diagnosis Code } \\ & \text { veference must be available for this } \\ & \text { fedit. } \end{aligned}$ |
| X223.193.2300.H105-2.030 | H05-2 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.H105-2 must not contain a "." |  |
| X223.193.2300.H105-2.040 | H05-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H105-2.050 | H105-2 |  |  |  |  |  |  |  | 277 | C | $\begin{aligned} & \text { CRCC AT: "Accou } \\ & \text { (Rejedectemed for Invalid Information..." } \\ & \text { CSC 511: "Invalid haracter" } \\ & \text { CSC 509: "E-Code" } \\ & \hline \end{aligned}$ | If $2300 . \mathrm{HIO5}-1=\mathrm{BN}$ then $2300 . \mathrm{H} 105-2$ must begin with "E". |  |
| X223.193.2300.H105-3.010 | H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not | Must not be present. |  |
| X223.193.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H105-9.010 | H105-9 | Present on Admission indicator | ID | 1-1 | s |  |  | $\mathrm{N}, \mathrm{U}, \mathrm{W}, \mathrm{Y}$ | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 105-9$ must be valid values. |  |
| X223.193.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{HIO6}$ can only be present if 2300 . H 05 is present. |  |
| X223.193.2300.H106-1.010 | H06-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1 K 403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 106-1$ must be valid values. |  |
| X223.193.2300.H106-1.020 | H106-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 106-1$ must = "BN". | ICD-9 Only period |
| X223.193.2300.H106-1.030 | H106-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 106-1$ must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H106-2.010 | H06-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If $2300 . \mathrm{HIO6}-1$ is "BN" then $2300 . \mathrm{HIO6}-2$ must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H106-2.020 | H106-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 509: "E-Code" | If 2300. HIO6-1 is "ABN" then 2300 .HIO6-2 must be a valid ICD-10 External Cause of Injury code. | $\begin{aligned} & \text { eall. } \\ & \text { ICD-10 Only period. } \\ & \text { Valid ICD-10 Diagnosis Code } \\ & \text { reference must be available for this } \\ & \text { edit. } \\ & \hline \end{aligned}$ |
| X223.193.2300.H106-2.030 | H106-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H106-2 must not contain a ".". |  |
| X223.193.2300.H106-2.040 | H06-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 509: "E-Code" |  |  |
| X223.193.2300.H106-2.050 | H106-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: E "- Code" | If 2300. HIO6-1 $=$ BN then 2300. HIO6-2 must begin with "E". |  |
| X223.193.2300.H106-3.010 | H106-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110: \text { "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H106-4.010 | H006-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.193.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H106-7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300. H 106 -8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.193.2300.H106-9.010 | H106-9 | Present on Admission indicator | ID | 1-1 | S |  |  | N, U, W, Y | 999 | R | IK403 = 7: "IInvalid Code Value" | 2300.H106-9 must be valid values. |  |
| X223.193.2300.H107.010 | H107 | HEALTH CARE CODE |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{HIO7}$ can only be present if $2300 . \mathrm{HIO6}$ is present. |  |
| X223.193.2300.H107-1.010 | H107-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 14403 = 7: "Invalid Code Value" | 2300.H107-1 must be valid values. |  |
| X223.193.2300.H107-1.020 | H07-1 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H107-1 must = "BN". | ICD-9 Only period |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H107-1.030 | H107-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.HI07-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H107-2.010 | H107-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. HIO7-1 is "BN" then 2300. HIO7-2 must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H107-2.020 | H107-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO7-1 is "ABN" then 2300. HIO7-2 must be a valid ICD-10 External Cause of Injury code. | ICD-10 Only period. <br> Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H107-2.030 | H07-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.HI07-2 must not contain a ".". |  |
| X223.193.2300.H107-2.040 | H107-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H107-2.050 | H107-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 509: "E-Code" | If $2300 . \mathrm{HIOT}-1=\mathrm{BN}$ then $2300 . \mathrm{HIO} 0-2$ must begin with " E ". |  |
| X223.193.2300.H107-3.010 | H107-3 | Date Time Period Format Oualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H107-4.010 | H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H107-5.010 | H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H107-9.010 | H107-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | $1 \mathrm{~K} 403=7$ : "Invalid Code Value" | $2300 . \mathrm{HIO7}-9$ must be valid values. |  |
| X223.193.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300.HI08 can only be present if 2300 .HI07 is present. |  |
| Х223.193.2300.H108-1.010 | H08-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 108-1$ must be valid values. |  |
| X223.193.2300.H108-1.020 | H108-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO} 0-1$ must = "BN". | ICD-9 Only period |
| X223.193.2300.H108-1.030 | H008-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 108-1$ must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H108-2.010 | H108-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HI08-1 is "BN" then 2300. HIO8-2 must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H108-2.020 | H108-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. HIO8-1 is "ABN" then 2300. HI08-2 must be a valid ICD-10 External Cause of Injury code. valid ICD-10 External Cause of Injury code. | ICD-10 Only period Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H108-2.030 | H108-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H108-2 must not contain a ".." |  |
| X223.193.2300.H108-2.040 | H108-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H108-2.050 | H108-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" | If $2300 . \mathrm{HIO} 08-1=\mathrm{BN}$ then $2300 . \mathrm{H} 108-2$ must begin with " E ". |  |
| X223.193.2300.H108-3.010 | H108-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H108-4.010 | H108-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H108-5.010 | H08-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.193.2300.H108-7.010 | H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300. H 108 -8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H108-9.010 | H08-9 | Present on Admission indicator | ID | 1-1 | s |  |  | $\mathrm{N}, \mathrm{U}, \mathrm{W}, \mathrm{Y}$ | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 108$-9 must be valid values. |  |
| X223.193.2300.H109.010 | H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300. HIO9 can only be present if $2300 . \mathrm{HIO8}$ is present. |  |
| X223.193.2300.H109-1.010 | H109-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H09-1 must be valid values. |  |
| X223.193.2300.H109-1.020 | H109-1 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H109-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H109-1.030 | H09-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H H09-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H109-2.010 | H109-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO9-1 is "BN" then 2300.HIO9-2 must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H109-2.020 | H109-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 509: "E-Code" | If 2300.HIO9-1 is "ABN" then $2300 . \mathrm{HIO9}-2$ must be a valid ICD-10 External Cause of Injury code. | $\begin{aligned} & \text { tela--10 Only period. } \\ & \text { Valid ICD-10 Diagnosis Code } \\ & \text { reference must be available for this } \\ & \text { edit. } \end{aligned}$ |
| х223.193.2300.H109-2.030 | H109-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H109-2 must not contain a ".." |  |
| X223.193.2300.H109-2.040 | H109-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H109-2.050 | H109-2 |  |  |  |  |  |  |  | 277 | c |  | If $2300 . \mathrm{HIO9}-1=\mathrm{BN}$ then $2300 . \mathrm{HIO9}-2$ must begin with " E ". |  |
| X223.193.2300.H109-3.010 | H109-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300. $\mathrm{H} 109 \mathrm{9}-4.010$ | H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.193.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H109-7.010 | H009-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H109-8.010 | H09-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Flement Present" | Must not be present. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H109-9.010 | H109-9 | $\begin{aligned} & \text { Present on Admission } \\ & \text { indicator } \end{aligned}$ | ID | 1-1 | S |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H109-9 must be valid values. |  |
| X223.193.2300.H110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK03 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HI110}$ can only be present if $2300 . \mathrm{HIO9}$ is present. |  |
| X223.193.2300.H110-1.010 | H110-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 10-1$ must be valid values. |  |
| X223.193.2300.H110-1.020 | H110-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 110-1$ must = "BN". | ICD-9 Only period |
| X223.193.2300.H110-1.030 | H110-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 110-1$ must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H110-2.010 | H110-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HI1O-1 is "BN" then 2300. HIO10-2 must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H110-2.020 | H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If $2300 . \mathrm{HI} 10-1$ is "ABN" then $2300 . \mathrm{HIO1O}-2$ must be a valid ICD-10 External Cause of Injury code. | ICD-10 Only period. <br> Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H110-2.030 | H110-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H110-2 must not contain a ".." |  |
| X223.193.2300.H110-2.040 | H110-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H110-2.050 | H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" | If $2300 \cdot \mathrm{HI} 10-1=\mathrm{BN}$ then $2300 \cdot \mathrm{HI} 10-2$ must begin with "E". |  |
| X223.193.2300.H110-3.010 | H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H110-9.010 | H110-9 | $\begin{aligned} & \text { Present on Admission } \\ & \text { indicator } \end{aligned}$ | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 10-9$ must be valid values. |  |
| X223.193.2300.H111.010 | H11 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300 .HI11 can only be present if 2300 .H110 is present. |  |
| X223.193.2300.H111-1.010 | H111-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.H11-1 must be valid values. |  |
| X223.193.2300.H111-1.020 | H111-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 111-1$ must = "BN". | ICD-9 Only period |
| X223.193.2300.H111-1.030 | H111-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H 1111 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H111-2.010 | H111-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HI11-1 is "BN" then 2300.HI11-2 must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |


| 8371 Edit Reference | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H111-2.020 | H111-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HI11-1 is "ABN" then 2300 .HI11-2 must be a valid ICD-10 External Cause of Injury code. | $\begin{array}{\|l} \hline \text { ICD-10 Only period. } \\ \text { Valid ICD-10 Diagnosis Code } \\ \text { reference must be available for this } \\ \text { edit. } \end{array}$ |
| X223.193.2300.H111-2.030 | H111-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H111-2 must not contain a ".". |  |
| X223.193.2300.H111-2.040 | H111-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H111-2.050 | H111-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 509: "E-Code" | If $2300 . \mathrm{HI} 11-1=\mathrm{BN}$ then 2300 . $\mathrm{H} 111-2$ must begin with "E". |  |
| X223.193.2300.H111-3.010 | H111-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\text { K } 103=\text { = I10: "Implementation "Not }$ | Must not be present. |  |
| X223.193.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I IO: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H111-9.010 | H111-9 | Present on Admission indicator | ID | 1-1 | s |  |  | $\mathrm{N}, \mathrm{U}, \mathrm{W}, \mathrm{Y}$ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-9 must be valid values. |  |
| X223.193.2300.H112.010 | H12 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300 .HI12 can only be present if 2300 . HI11 is present. |  |
| X223.193.2300.H112-1.010 | H12-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be valid values. |  |
| х223.193.2300.H112-1.020 | H112-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H112-1.030 | H12-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H112-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H112-2.010 | H112-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.H112-1 is "BN" then 2300.HI12-2 must be a valid ICD-9 External Cause of Injury code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.193.2300.H112-2.020 | H112-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300 .HI12-1 is "ABN" then 2300 .HI12-2 must be a valid ICD-10 External Cause of Injury code. | $\begin{aligned} & \text { ICD-10 Only period. } \\ & \text { Valid ICD-10 Diagnosis Code } \\ & \text { reference must be available for this } \\ & \text { edit. } \\ & \hline \end{aligned}$ |
| X223.193.2300.H112-2.030 | H112-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H112-2 must not contain a ".". |  |
| X223.193.2300.H112-2.040 | H112-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H112-2.050 | H112-2 |  |  |  |  |  |  |  | 277 | C |  | If $2300 . \mathrm{HI} 12-1=\mathrm{BN}$ then $2300 . \mathrm{H} 112-2$ must begin with "E". |  |
| X223.193.2300.H112-3.010 | H112-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Rea. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H112-4.010 | H112-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H112-5.010 | H12-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H112-6.010 | H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.193.2300.H112-7.010 | H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.193.2300.H112-8.010 | H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| X223.193.2300.H112-9.010 | H12-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H12-9 must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.218.2300.H1.010 | HI | DIAGNOSIS RELATED GROUP (DRG) INFORMATION |  | 1 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H101-1 = "DR" is allowed. | 03/27: not pass through |
| X223.218.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| х223.218.2300.H101-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | DR | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H01-1 must be "DR". |  |
| X223.218.2300.H101-2.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.218.2300.H01-2.015 | H01-2 | DRG Code | AN | 1-30 | R |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300. H101-2 must be 1-30 characters. |  |
| X223.218.2300.H101-3.010 | H01-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.218.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.218.2300.H101-5.010 | H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \text { Whent } \end{aligned}$ | Must not be present. |  |
| х223.218.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.218.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.218.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.218.2300.H101-9.010 | H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.218.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.218.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.218.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.218.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.218.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.218.2300.H107.010 | H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.218.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.218.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\underset{\text { Element or }}{\text { Element }}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.218.2300.H110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.218.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.218.2300.H112.010 | H112 | HEALTH CARE CODE |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.220.2300.H1.010 | HI | OTHER DIAGNOSIS INFORMATION |  | 2 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with H01-1 = "BF" are allowed. | ICD-9 Only period |
| X223.220.2300.HI.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.220.2300.H1.030 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300.H1 with H01-1 = "ABF" are allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.220.2300.H101-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| $\times 223.220 .2300 . \mathrm{H} 101-1.020$ | H101-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H01-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H101-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H101-2.010 | H101-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO1}-1$ is "BF" then $2300 . \mathrm{HIO1}-2$ must be a valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.220.2300.H101-2.020 | H101-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300.HIO1-1 is "ABF" then 2300 .HIO1-2 must be a valid ICD-10 Diagnosis code. | ICD-10 Only period. <br> Valid ICD-10 Diagnosis code reference must be available for this edit. |
| X223.220.2300.H01-2.030 | H01-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H01-2 must not contain a ".." |  |
| X223.220.2300.H01-2.040 | H101-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character CSC 255: "Diagnosis Code" |  |  |
| X223.220.2300.H101-3.010 | H101-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I } 10 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H101-6.010 | H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H101-7.010 | H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H01-9.010 | H101-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 101-9$ must be valid values. |  |
| X223.220.2300.H102.010 | H02 | HEALTH CARE CODE information |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300. H102 can only be present if 2300 . H 101 is present. |  |
| X223.220.2300.H102-1.010 | H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must be valid values. |  |
| X223.220.2300.H102-1.020 | H102-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H102-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H102-1.030 | H102-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 102-1$ must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H102-2.010 | H102-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO2}-1$ is "BF" then 2300. HIO2-2 must be a valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.220.2300.H102-2.020 | H102-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 255: "Diagnosis Code" | If 2300.HIO2-1 is "ABF" then 2300.HIO2-2 must be a valid ICD-10 Diagnosis code. | ICD-10 Only period. <br> Valid ICD-10 Diagnosis code <br> reference must be available for this <br> edit. |
| X223.220.2300.H102-2.030 | H02-2 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.H02-2 must not contain a ".". |  |
| X223.220.2300.H102-2.040 | H02-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 255: "Diagnosis Code" |  |  |
| X223.220.2300.H102-3.010 | H102-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| х223.220.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H102-8.010 | H02-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H102-9.010 | H02-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 102-9$ must be valid values. |  |
| X223.220.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | 2300 . HIO3 can only be present if $2300 . \mathrm{HIO}$ is present. |  |
| X223.220.2300.H103-1.010 | H03-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{HIO} 3-1$ must be valid values. |  |
| X223.220.2300.H103-1.020 | H103-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H103-1.030 | H03-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO3-1}$ must = "ABF". | ICD-10 Only period - assumes no |
| X223.220.2300.H103-2.010 | H03-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO3}-1$ is "BF" then 2300. HIO3-2 must be a valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.220.2300.H103-2.020 | H103-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300.HIO3-1 is "ABF" then 2300. HIO3-2 must be a valid ICD-10 Diagnosis code. | $\begin{aligned} & \text { ICD-10 Only period. } \\ & \text { Valid ICD-10 Diagnosis code } \\ & \text { reference must be available for this } \\ & \text { fedit. } \end{aligned}$ |
| X223.220.2300.H103-2.030 | H03-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H103-2 must not contain a ".." |  |
| X223.220.2300.H103-2.040 | H03-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> Rejected for Invalid Information..." <br> CCS 511. "Invalid character" <br> CSC 255: "Diagnosis Code" |  |  |
| X223.220.2300.H103-3.010 | H003-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\text { K } 1 \text { 403 = = I10: "Implementation "Not }$ | Must not be present. |  |
| X223.220.2300.H103-4.010 | H103-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Rea. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H103-5.010 | H03-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H103-6.010 | H03-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.220.2300.H103-9.010 | H103-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300.H103-9 must be valid values. |  |
| X223.220.2300.H104.010 | H04 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{HIO} 4$ can only be present if $2300 . \mathrm{HIO}$ is present. |  |
| х223.220.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H104-1 must be valid values. |  |
| Х223.220.2300.H104-1.020 | H104-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H104-1 must = "BF". | CD-9 Only period |
| X223.220.2300.H104-1.030 | H04-1 |  |  |  |  |  |  |  | 999 | R | 1 1403 = 7: "Invalid Code Value" | 2300. H 104 -1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H104-2.010 | H104-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HI} 04-1$ is "BF" then 2300 . H104-2 must be a valid ICD- 9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.220.2300.H104-2.020 | H104-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300.HIO4-1 is "ABF" then 2300 .HIO4-2 must be a valid ICD-10 Diagnosis code. | $\begin{aligned} & \text { euti-10 Only period. } \\ & \text { Calid ICD-10 Diagnosis code } \\ & \text { reference must be available for this } \\ & \text { edit. } \end{aligned}$ |
| X223.220.2300.H104-2.030 | H104-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H104-2 must not contain a ".". |  |
| X223.220.2300.H104-2.040 | H104-2 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CCS 511. "Invalid character" } \\ & \text { CSC 255: "Diagnosis Cocte" } \end{aligned}$ |  |  |
| X223.220.2300.H104-3.010 | H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H104-9.010 | H04-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 104-9$ must be valid values. |  |
| X223.220.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO5}$ can only be present if 2300 . HI04 is present. |  |
| X223.220.2300.H105-1.010 | H05-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H105-1 must be valid values. |  |
| х223.220.2300.H105-1.020 | H105-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 105-1$ must = "BF". | ICD-9 Only period |
| X223.220.2300.H105-1.030 | H105-1 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300. H H05-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H105-2.010 | H105-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO5-1}$ is "BF" then $2300 . \mathrm{HIO5}-2$ must be a valid ICD-9 Diagnosis code. valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.220.2300.H105-2.020 | H105-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 255: "Diagnosis Code" | If 2300.HIO5-1 is "ABF" then $2300 . \mathrm{HIO5}-2$ must be a valid ICD-10 Diagnosis code. | ICD-10 Only period. <br> Valid ICD-10 Diagnosis code reference must be available for this edit. |
| X223.220.2300.H105-2.030 | H105-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H105-2 must not contain a ".." |  |
| X223.220.2300.H105-2.040 | H105-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 255: "Diagnosis Code" |  |  |
| X223.220.2300.H105-3.010 | H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H105-9.010 | H105-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 105-9$ must be valid values. |  |
| X223.220.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO6}$ can only be present if 2300 . $\mathrm{HIO5}$ is present. present. |  |
| X223.220.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 06-1$ must be valid values. |  |
| $\times 223.220 .2300 . \mathrm{H} 106-1.020$ | H106-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 106-1$ must = "BF". | ICD-9 Only period |
| X223.220.2300.H106-1.030 | H106-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H (06-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H106-2.010 | H06-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO6}-1$ is "BF" then 2300. HI06-2 must be a valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.220.2300.H106-2.020 | H106-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 255: "Diagnosis Code" | If 2300.HIO6-1 is "ABF" then 2300.HIO6-2 must be a valid ICD-10 Diagnosis code. | ICD-10 Only period. <br> Valid ICD-10 Diagnosis code reference must be available for this edit. |
| X223.220.2300.H106-2.030 | H106-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H106-2 must not contain a ".." |  |
| X223.220.2300.H106-2.040 | H106-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 255: "Diagnosis Code" |  |  |
| X223.220.2300.H106-3.010 | H106-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H106-4.010 | H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300. $\mathrm{H} 1066-5.010$ | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300. H 106 6-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300. H 106 -7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300. H 106 -8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300. H 106 -9.010 | H106-9 | Present on Admission | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | IK403 = 7: "Invalid Code Value" | 2300 H106-9 must be valid values. |  |
| X223.220.2300.H107.010 | H07 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300. HIO7 can only be present if 2300 . H106 is present. |  |
| X223.220.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 07-1$ must be valid values. |  |
| X223.220.2300.H107-1.020 | H07-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H107-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H107-1.030 | H107-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H H07-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H107-2.010 | H07-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300.HIO7-1 is "BF" then 2300.HIO1-2 must be a valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.220.2300.H107-2.020 | H07-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300. HIO7-1 is "ABF" then 2300.HIO7-2 must be a valid ICD-10 Diagnosis code. | ICD-10 Only period. Valid ICD-10 Diagnosis code reference must be available for this edit. |
| X223.220.2300.H107-2.030 | H07-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H107-2 must not contain a ".." |  |
| X223.220.2300.H107-2.040 | H07-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 255: "Diagnosis Code" |  |  |
| X223.220.2300.H107-3.010 | H07-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H107-4.010 | H07-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H107-5.010 | H07-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H107-9.010 | H07-9 | Present on Admission indicator | ID | 1-1 | S |  |  | N, U, W, Y | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H107-9 must be valid values. |  |
| X223.220.2300.H108.010 | H08 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO} 8$ can only be present if $2300 . \mathrm{H} 107$ is present |  |
| X223.220.2300.H108-1.010 | H108-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H108-1 must be valid values. |  |
| X223.220.2300.H108-1.020 | H008-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H I08-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H108-1.030 | H08-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H08-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H108-2.010 | H08-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO} 0-1$ is "BF" then $2300 . \mathrm{HIO}-2$ must be a valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\operatorname{Min}_{\text {M }}$ Max. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Leop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H108-2.020 | H108-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300. HIO8-1 is "ABF" then 2300 . HI08-2 must be a valid ICD-10 Diagnosis code. | ICD-10 Only period. Valid ICD-10 Diagnosis code reference must be available for this edit. |
| X223.220.2300.H108-2.030 | H08-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H108-2 must not contain a ".". |  |
| X223.220.2300.H108-2.040 | H108-2 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 511: "Invalid character" } \\ & \text { CSC 255: "Diagnosis Code" } \\ & \hline \end{aligned}$ |  |  |
| X223.220.2300.H108-3.010 | H008-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |  |
| X223.220.2300.H108-4.010 | H08-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.220.2300.H108-5.010 | H08-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| х223.220.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.220.2300.H108-7.010 | H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H108-8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H108-9.010 | H08-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300. H108-9 must be valid values. |  |
| X223.220.2300.H109.010 | H09 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO9}$ can only be present if 2300 .H108 is present. |  |
| х223.220.2300.H109-1.010 | H109-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H109-1 must be valid values. |  |
| X223.220.2300.H109-1.020 | H109-1 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300. H l09-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H109-1.030 | H109-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7 : "Invalid Code Value" | 2300. H I09-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H109-2.010 | H109-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO9}-1$ is "BF" then 2300. HIO9-2 valid ICD-9 Diagnosis be a | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.220.2300.H109-2.020 | H109-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300.HIO9-1 is "ABF" then 2300.HIO9-2 must be a valid ICD-10 Diagnosis code. | ICD-10 Only period. Valid ICD-10 Diagnosis code reference must be available for this edit. |
| X223.220.2300.H109-2.030 | H09-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H09-2 must not contain a ".." |  |
| X223.220.2300.H109-2.040 | H09-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> Rejected for Invalid Information..." <br> CCS 511: "nvalid character" <br> CSC 25: ""iagnosis Code" |  |  |
| X223.220.2300.H109-3.010 | H09-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H109-7.010 | H099-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { TA99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H109-8.010 | H09-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H109-9.010 | H09-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-9 must be valid values. |  |
| X223.220.2300. H 110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{H} 110$ can only be present if $2300 . \mathrm{H} 109$ is present. |  |
| X223.220.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must be valid values. |  |
| X223.220.2300.H110-1.020 | H110-1 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2300.H110-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H110-1.030 | H110-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 110-1$ must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H110-2.010 | H110-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HI} 10-1$ is "BF" then $2300 . \mathrm{HI} 10-2$ must be a valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.220.2300.H110-2.020 | H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 255: "Diagnosis Code" | If 2300. H110-1 is "ABF" then 2300 .HI10-2 must be a valid ICD-10 Diagnosis code. | $\begin{aligned} & \begin{array}{l} \text { ICD-10 Only period. } \\ \text { Valid ICD-10 Diagnosis code } \\ \text { reference must be available for this } \\ \text { edit. } \end{array} \\ & \hline \end{aligned}$ |
| X223.220.2300.H110-2.030 | H110-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H110-2 must not contain a ".". |  |
| X223.220.2300.H110-2.040 | H110-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diagnosis Code" |  |  |
| X223.220.2300.H110-3.010 | H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.220.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H110-9.010 | H110-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H110-9 must be valid values. |  |
| X223.220.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300. H111 can only be present if 2300 . H 110 is present. |  |
| X223.220.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be valid values. |  |
| X223.220.2300.H111-1.020 | H111-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H111-1.030 | H111-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H111-2.010 | H111-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 255: "Diagnosis Code" | If 2300. HI11-1 is "BF" then 2300 . H111-2 must be a valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X223.220.2300.H111-2.020 | H111-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300.HI11-1 is "ABF" then 2300. HI11-2 must be a valid ICD-10 Diagnosis code. | $\begin{aligned} & \text { ICD-10 Only period. } \\ & \text { Valid ICD-10 Diagnosis code } \\ & \text { reference must be available for this } \\ & \text { edit. } \end{aligned}$ |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | Min. <br> Max. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA111 } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H111-2.030 | H111-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H111-2 must not contain a ".". |  |
| X223.220.2300.H111-2.040 | H111-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 255: "Diagnosis Code" |  |  |
| X223.220.2300.H111-3.010 | H111-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.220.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H111-9.010 | H111-9 | Present on Admission | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1 K 403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 111-9$ must be valid values. |  |
| X223.220.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300. HI12 can only be present if 2300. H111 is present. |  |
| X223.220.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300.H112-1 must be valid values. |  |
| X223.220.2300.H112-1.020 | H112-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H112-1.030 | H112-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 112-1$ must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H112-2.010 | H112-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HI} 12-1$ is "BF" then 2300. H112-2 must be a valid ICD-9 Diagnosis code. | ICD-9 Only period. <br> Valid ICD-9 Diagnosis Code reference must be available for this edit |
| X223.220.2300.H112-2.020 | H112-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300.H112-1 is "ABF" then 2300. H112-2 must be a valid ICD-10 Diagnosis code. | $\begin{array}{\|l} \hline \text { Leul. } \\ \text { VCD-10 Only period. } \\ \text { Valid ICD-10 Diagnosis code } \\ \text { reference must be available for this } \\ \text { edit. } \\ \hline \end{array}$ |
| X223.220.2300.H112-2.030 | H12-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H112-2 must not contain a ".". |  |
| X223.220.2300.H112-2.040 | H112-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 255: "Diagnosis Code" |  |  |
| X223.220.2300.H112-3.010 | H12-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H112-4.010 | H12-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H112-5.010 | H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.220.2300.H112-6.010 | H12-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H112-7.010 | H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H112-8.010 | H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.220.2300.H112-9.010 | H112-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1 K403 = 7: "Invalid Code Value" | 2300.H112-9 must be valid values. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage Req. | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.239.2300.H1.010 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.239.2300.HI.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.239.2300.H1.030 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.239.2300.H1.040 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.239.2300.H1.050 | HI | PRINCIPAL PROCEDURE INFORMATION |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.HI with H101-1 = "BR" is allowed. | ICD-9 Only period |
| X223.239.2300.HI. 060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.239.2300.H1.070 | HI |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H01-1 = "BBR" or is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.239.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| х223.239.2300.H101-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBR, BR | 999 | R | 11403 = 7: "Invalid Code Value" | 2300. H01-1 must be valid values. |  |
| х223.239.2300.H101-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BR" | ICD-9 Only period |
| X223.239.2300.H101-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H I01-1 must = "BBR" | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.239.2300.H101-2.010 | H01-2 | Principal Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 465: "Principal Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO1-1}$ is "BR" then $2300 . \mathrm{HIO1}-2$ must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit |
| X223.239.2300.H101-2.020 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. . CSC 465: "Principal Procedure Code for Service(s) Rendered" | If 2300.HI01-1 is "BBR" then 2300.HIO1-2 must be a valid ICD-10 Procedure code. | ICD-10 Only period. <br> Valid ICD-10 Procedure Code reference must be available for this edit. |
| $\begin{aligned} & \text { X223.239.2300.HI01-2.030 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.239.2300.H101-2.040 | H101-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H101-2 must not contain a ".." |  |
| X223.239.2300.H101-2.050 | H01-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 703: "Advanced Billing Concepts (ABC) code" |  |  |
| X223.239.2300.H101-3.010 | H01-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H101-3 must be valid values. |  |
| X223.239.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | s |  |  |  | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HIO1-4 must be a valid date in CCYYMMDD format. |  |
| X223.239.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Flement Present" | Must not be present. |  |
| X223.239.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.239.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.239.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.239.2300.H101-9.010 | H101-9 | Present on Admission indicator | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.239.2300.H102.010 | H102 | $\qquad$ |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.239.2300.H103.010 | H103 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.239.2300.H104.010 | H104 | HEALTH CARE CODE NFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.239.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.239.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.239.2300.H107.010 | H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.239.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.239.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.239.2300. H 110.010 | H110 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.239.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.239.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.242.2300.HI.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.242.2300.H1. } 020 \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.242.2300.HI.030 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\text { X223.242.2300.HI. } 040$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.242.2300.H1.050 | HI | OTHER PROCEDURE information |  | 2 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with H101-1 = "BQ" are allowed. | ICD-9 Only period |
| $\begin{aligned} & \text { X223.242.2300.HI. } 060 \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.242.2300.H1.070 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with H101-1 = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.242.2300.H101-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 11403 = 7: "Invalid Code Value" | 2300. H01-1 must be valid values. |  |
| X223.242.2300.H01-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H101-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 101-1$ must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H101-2.010 | H01-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO1}-1$ is "BQ" then 2300 . H IO1-2 must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H101-2.020 | H101-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{H} 101-1$ is "BBQ" then $2300 . \mathrm{H} 101-2$ must be a valid ICD-10 Other Procedure code. | ICD-10 Only period. Valid ICD-10 Procedure Code reference must be available for this edit. |
| X223.242.2300.H101-2.030 | H01-2 |  |  |  |  |  |  |  | 999 | E | K403 = 6: "Invalid Character in Data Element" | 2300.HI01-2 must not contain a ".". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\underset{\text { Elegment or }}{\text { Element }}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H01-2.040 | H101-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H01-3.010 | H01-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{array}$ | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H01-3 must be "D8". |  |
| X223.242.2300.H01-4.010 | H01-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HIO1-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H101-7.010 | H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H101-8.010 | H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H101-9.010 | H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO2}$ can only be present if $2300 . \mathrm{HIO}$ is present. |  |
| X223.242.2300.H102-1.010 | H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must be valid values. |  |
| X223.242.2300.H102-1.020 | H102-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H102-1.030 | H02-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H H02-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H102-2.010 | H102-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO2-1}$ is "BQ" then $2300 . \mathrm{HIO2}-2$ must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H102-2.020 | H02-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO2}-1$ is "BBQ" then $2300 . \mathrm{HIO2}-2$ must be a valid ICD-10 Procedure code. | ICD-10 Only period. <br> Valid ICD-10 Procedure Code reference must be available for this edit. |
| X223.242.2300.H02-2.030 | H02-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.HIO2-2 must not contain a ".." |  |
| X223.242.2300.H102-2.040 | H102-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H102-3.010 | H102-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HI02-3 must be "D8". |  |
| X223.242.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HIO2-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H102-9.010 | H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H103.010 | H03 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO}$ can only be present if 2300 . HIO is present. |  |
| х223.242.2300.H103-1.010 | H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2300. H O3-1 l must be valid values. |  |
| Х223.242.2300.H103-1.020 | H103-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H103-1.030 | H03-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 103-1$ must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H103-2.010 | H103-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" |  valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H103-2.020 | H03-2 |  |  |  |  |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..." } \\ \text { CSC 490: "Other Procedure Code for } \\ \text { Service(s) Rendered" } \\ \hline \end{array}$ | If 2300. HIO3-1 is "BBQ" then 2300 .HIO3- 2 must be a valid ICD-10 Procedure code. | ICD-10 Only period. Valid ICD-10 Procedure Code reference must be available for this edit. |
| X223.242.2300.H103-2.030 | H03-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H103-2 must not contain a ".". |  |
| X223.242.2300.H103-2.040 | H03-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H103-3.010 | H03-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H03-3 must be "D8". |  |
| X223.242.2300.H103-4.010 | H03-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HIO3-4 must be a valid date in CCYYMMDD |  |
| X223.242.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H103-6.010 | H03-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H103-9.010 | H03-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.242.2300. H 104.010 | H04 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO4}$ can only be present if 2300 . HIO3 is present. |  |
| X223.242.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H104-1 must be valid values. |  |
| X223.242.2300.H104-1.020 | H04-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 104-1$ must = "BQ". | ICD-9 Only period |
| X223.242.2300.H104-1.030 | H104-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 104-1$ must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H104-2.010 | H104-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300.H104-1 is "BQ" then 2300. H104-2 must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H104-2.020 | H104-2 |  |  |  |  |  |  |  | 277 | C | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 490: "Other Procedure Code for } \\ & \text { Service(s) Rendered" } \\ & \hline \end{aligned}$ | If 2300. HIO4-1 is "BBQ" then 2300 . HIO4-2 must be a valid ICD-10 Procedure code. | ICD-10 Only period. <br> Valid ICD-10 Procedure Code reference must be available for this edit. |
| X223.242.2300.H104-2.030 | H104-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H104-2 must not contain a ".". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H104-2.040 | H104-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H104-3.010 | H104-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{array}$ | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H104-3 must be "D8". |  |
| X223.242.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HIO4-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H104-9.010 | H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO} 05$ can only be present if $2300 . \mathrm{HI} 04$ is present. |  |
| X223.242.2300.H105-1.010 | H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H105-1 must be valid values. |  |
| $\times 223.242 .2300 . \mathrm{H} 105-1.020$ | H105-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H105-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H105-1.030 | H105-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H H05-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H105-2.010 | H105-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO5-1}$ is "BQ" then $2300 . \mathrm{H} 105-2$ must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H105-2.020 | H05-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300. HIO5-1 is "BBQ" then 2300 . HIO5-2 must be a valid ICD-10 Procedure code. valid ICD-10 Procedure code. | ICD-10 Only period. <br> Valid ICD-10 Procedure Code reference must be available for this edit. |
| X223.242.2300.H105-2.030 | H05-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.HI05-2 must not contain a ".." |  |
| X223.242.2300.H105-2.040 | H05-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H105-3.010 | H105-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H105-3 must be "D8". |  |
| X223.242.2300.H105-4.010 | H05-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HIO5-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{H} 106$ can only be present if 2300 . H 105 is present. |  |
| х223.242.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2300. H106-1 must be valid values. |  |
| X223.242.2300.H106-1.020 | H106-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H106-1.030 | H106-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 106-1$ must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H106-2.010 | H106-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO6-1 is "BQ" then 2300. H106-2 must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H106-2.020 | H06-2 |  |  |  |  |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..." } \\ \text { CSC 490: "Other Procedure Code for } \\ \text { Service(s) Rendered" } \\ \hline \end{array}$ | If 2300.HIO6-1 is "BBQ" then 2300.HIO6-2 must be a valid ICD-10 Procedure code. | ICD-10 Only period. Valid ICD-10 Procedure Code reference must be available for this edit. |
| X223.242.2300.H106-2.030 | H06-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H106-2 must not contain a ".". |  |
| X223.242.2300.H106-2.040 | H06-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H106-3.010 | H06-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H106-3 must be "D8". |  |
| X223.242.2300.H106-4.010 | H106-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HI06-4 must be a valid date in CCYYMMDD |  |
| X223.242.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H106-7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.242.2300.H107.010 | H07 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO7}$ can only be present if 2300 . HI06 is present. |  |
| X223.242.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H07-1 must be valid values. |  |
| X223.242.2300.H107-1.020 | H07-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H107-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H107-1.030 | H107-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 107-1$ must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H107-2.010 | H07-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO7-1 is "BQ" then 2300. HIO7-2 must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H107-2.020 | H07-2 |  |  |  |  |  |  |  | 277 | C | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 490: "Other Procedure Code for } \\ & \text { Service(s) Rendered" } \\ & \hline \end{aligned}$ | If 2300. HIO7-1 is "BBQ" then 2300 .HIO7-2 must be a valid ICD-10 Procedure code. | ICD-10 Only period. <br> Valid ICD-10 Procedure Code reference must be available for this edit. |
| X223.242.2300.H107-2.030 | H107-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H107-2 must not contain a ".". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\underset{\text { Elegment or }}{\text { Element }}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H107-2.040 | H107-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H107-3.010 | H07-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{array}$ | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H107-3 must be "D8". |  |
| X223.242.2300.H07-4.010 | H107-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HI07-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H107-5.010 | H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H107-9.010 | H07-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H108.010 | H08 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO8}$ can only be present if 2300 . HIO 07 is present. |  |
| X223.242.2300.H108-1.010 | H08-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 108-1$ must be valid values. |  |
| $\times 223.242 .2300 . \mathrm{H} 108-1.020$ | H108-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H108-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H108-1.030 | H008-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H H08-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H108-2.010 | H08-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO8}-1$ is "BQ" then $2300 . \mathrm{H} 108-2$ must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H108-2.020 | H108-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300. HI08-1 is "BBQ" then 2300 . HI08-2 must be a valid ICD-10 Procedure code. valid ICD-10 Procedure code. | ICD-10 Only period. <br> Valid ICD-10 Procedure Code reference must be available for this edit. |
| X223.242.2300.H08-2.030 | H108-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H108-2 must not contain a ".." |  |
| X223.242.2300.H108-2.040 | H108-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H108-3.010 | H088-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H108-3 must be "D8". |  |
| X223.242.2300.H108-4.010 | H08-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HI08-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H108-5.010 | H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H108-7.010 | H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H108-8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H108-9.010 | H08-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{H} 109$ can only be present if $2300 . \mathrm{H} 108$ is present. |  |
| х223.242.2300.H109-1.010 | H109-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2300. H109-1 must be valid values. |  |
| X223.242.2300.H109-1.020 | H109-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H109-1.030 | H109-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H109-2.010 | H109-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO9-1 is "BQ" then 2300. HIO9-2 must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H109-2.020 | H109-2 |  |  |  |  |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..." } \\ \text { CSC 490: "Other Procedure Code for } \\ \text { Service(s) Rendered" } \\ \hline \end{array}$ | If 2300.HIO9-1 is "BBQ" then 2300.HI09-2 must be a valid ICD-10 Procedure code. | ICD-10 Only period. Valid ICD-10 Procedure Code reference must be available for this edit. |
| X223.242.2300.H109-2.030 | H099-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H109-2 must not contain a ".". |  |
| X223.242.2300.H109-2.040 | H09-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H109-3.010 | H09-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H109-3 must be "D8". |  |
| X223.242.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300. HIO9-4 must be a valid date in CCYYMMDD |  |
| X223.242.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.242.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H109-9.010 | H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.242.2300. H 110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HI} 10$ can only be present if $2300 . \mathrm{HIO} 9$ is present. |  |
| х223.242.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H110-1 must be valid values. |  |
| X223.242.2300.H110-1.020 | H110-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H110-1.030 | H110-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{Hl10-1}$ must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H110-2.010 | H110-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HI} 10-1$ is "BQ" then $2300 . \mathrm{HI} 10-2$ must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H110-2.020 | H110-2 |  |  |  |  |  |  |  | 277 | C | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 490: "Other Procedure Code for } \\ & \text { Service(s) Rendered" } \\ & \hline \end{aligned}$ | If 2300. H110-1 is "BBQ" then 2300 .HI10-2 must be a valid ICD-10 Procedure code. | $\qquad$ |
| X223.242.2300.H110-2.030 | H110-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H110-2 must not contain a ".". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H110-2.040 | H110-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H110-3.010 | H110-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{array}$ | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-3 must be "D8". |  |
| X223.242.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HI10-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H110-9.010 | H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HI} 11$ can only be present if 2300 .HI10 is present. |  |
| X223.242.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be valid values. |  |
| $\times 223.242 .2300 . \mathrm{H} 111-1.020$ | H111-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H111-1.030 | H111-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 111-1$ must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H111-2.010 | H111-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{H} 111-1$ is "BQ" then $2300 . \mathrm{H} 111-2$ must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H111-2.020 | H111-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{H} 111-1$ is "BBQ" then 2300. HI11-2 must be a valid ICD-10 Procedure code. | ICD-10 Only period. <br> Valid ICD-10 Procedure Code reference must be available for this edit. |
| X223.242.2300.H111-2.030 | H111-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H111-2 must not contain a ".." |  |
| X223.242.2300.H111-2.040 | H111-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H111-3.010 | H111-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H111-3 must be "D8". |  |
| X223.242.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HI11-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H111-9.010 | H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H112.010 | H112 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \end{aligned}$ |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{H} 112$ can only be present if 2300 .H111 is present. |  |
| X223.242.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be valid values. |  |
| X223.242.2300.H112-1.020 | H112-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H112-1.030 | H112-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H112-2.010 | H112-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300.H112-1 is "BQ" then 2300 . HI12-2 must be a valid ICD-9 Procedure code. | ICD-9 Only period. <br> Valid ICD-9 Procedure Code reference must be available for this edit. |
| X223.242.2300.H112-2.020 | H112-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300. H112-1 is "BBQ" then 2300 .HI12-2 must be a valid ICD-10 Procedure code. | ICD-10 Only period. Valid ICD-10 Procedure Code reference must be available for this edit. |
| X223.242.2300.H112-2.030 | H112-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H112-2 must not contain a ".". |  |
| X223.242.2300.H112-2.040 | H112-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H112-3.010 | H112-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-3 must be "D8". |  |
| X223.242.2300.H112-4.010 | H12-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HI12-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H112-5.010 | H12-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H112-6.010 | H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H112-7.010 | H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.242.2300.H112-8.010 | H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.242.2300.H112-9.010 | H12-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.258.2300.H1.010 | HI | occurrence span INFORMATION |  | 2 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with $\mathrm{HIO1}-1=$ "BI" are allowed. |  |
| X223.258.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| х223.258.2300.H101-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H101-1 must be "BI". |  |
| X223.258.2300.H101-2.010 | H01-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO1}-1$ is "BI" then $2300 . \mathrm{H} 01-2$ must be a valid Occurrence Span code. valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H101-3.010 | H01-3 | Date Time Period Format | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H101-3 must be "RD8". |  |
| X223.258.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300. HIO1-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H101-5.010 | H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | $\begin{array}{\|c\|} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.258.2300.H101-7.010 | H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H101-9.010 | H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{array}{\|l\|} \hline \text { IK403 = 2: "Conditional Required Data } \\ \text { Element Missing" } \\ \hline \end{array}$ | 2300. H102 can only be present if 2300 . H 101 is present. |  |
| X223.258.2300.H102-1.010 | H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H102-1 must be "BI". |  |
| X223.258.2300.H02-2.010 | H02-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO2}-1$ is "BI" then 2300 . HIO -2 2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H102-3.010 | H02-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-3 must be "RD8". |  |
| X223.258.2300.H102-4.010 | H02-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HIO2-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H102-5.010 | H02-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H102-6.010 | H02-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H102-8.010 | H02-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H102-9.010 | H02-9 | $\begin{gathered} \text { Yes/No Condition or } \\ \text { response Code } \\ \hline \end{gathered}$ | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H103.010 | H03 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \text { \|K403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{HIO3}$ can only be present if 2300 . HIO 2 is present. |  |
| х223.258.2300.H03-1.010 | H03-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H03-1 must be "BI". |  |
| X223.258.2300.H103-2.010 | H03-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO} 03-1$ is "BI" then 2300 .HIO3-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H103-3.010 | H103-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H03-3 must be "RD8. |  |
| X223.258.2300.H03-4.010 | H103-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HIO3-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H103-9.010 | H03-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO4}$ can only be present if 2300 .HIO3 is present. |  |
| $\times 223.258 .2300 . \mathrm{H104-1.010}$ | H04-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H104-1 must be "BII. |  |
| X223.258.2300.H104-2.010 | H04-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If 2300 .HIO4-1 is "BI" then 2300 .HIO4-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |


| 8371 Edit Reference | Segment or | Description | ID | Min. Max. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.258.2300.H104-3.010 | H104-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H04-3 must be "RD8. |  |
| X223.258.2300.H104-4.010 | H04-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. H004-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H104-9.010 | H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300. H 05.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data | 2300. HIO5 can only be present if 2300 . H104 is present. |  |
| X223.258.2300.H105-1.010 | H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | B1 | 999 | R | $11403=7$ : "Invalid Code Value" | 2300. $\mathrm{HIO5-1}$ must be "BI". |  |
| X223.258.2300.H105-2.010 | H105-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "ACknowledgement IRejected for Invalid Information..." CSC 62: "NUC Occrrence Span Code(s) and Date(s)" | If 2300. HI05-1 is "BI" then 2300 .HIO5-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H105-3.010 | H105-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H105-3 must be "RD8". |  |
| X223.258.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. $\mathrm{HIO5}$-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H106.010 | H106 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO6}$ can only be present if 2300 .HI05 is present. |  |
| $\times 223.258 .2300 . \mathrm{H106-1.010}$ | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H106-1 must be "B1". |  |
| X223.258.2300.H106-2.010 | H106-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If 2300 .HI06-1 is "BI" then 2300 .HIO6-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H106-3.010 | H106-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H106-3 must be "RD8". |  |
| X223.258.2300.H106-4.010 | H06-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300. HIO6-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H106-6.010 | H006-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H106-7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H106-8.010 | H06-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.258.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H107.010 | H07 | HEALTH CARE CODE NFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300. HI07 can only be present if 2300 . HIO6 is present. |  |
| X223.258.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H107-1 must be "BI". |  |
| X223.258.2300.H107-2.010 | H107-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If 2300. HIO7-1 is "BI" then 2300. HI07-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H107-3.010 | H007-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H107-3 must be "RD8". |  |
| X223.258.2300.H107-4.010 | H107-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HIO7-4 must be a valid date in CCYYMMDD- |  |
| X223.258.2300.H107-5.010 | H07-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = } 110 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H107-6.010 | H07-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H107-9.010 | H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK03 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{HIO} 8$ can only be present if $2300 . \mathrm{H} 107$ is present. |  |
| х223.258.2300.H108-1.010 | H108-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H108-1 must be "BI". |  |
| X223.258.2300.H108-2.010 | H08-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement RRejected for Invalid Information.... CSC 462: "NUBC Occrence Span Code(s) and Date(s)" | If 2300 .HI08-1 is "BI" then 2300.H108-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H108-3.010 | H108-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H108-3 must be "RD8". |  |
| X223.258.2300.H108-4.010 | H008-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HIO8-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H108-5.010 | H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H108-6.010 | H008-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300. H 108 -7.010 | H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H108-8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H108-9.010 | H08-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{HIO9}$ can only be present if $2300 . \mathrm{HIO}$ is present. |  |
| х223.258.2300.H109-1.010 | H09-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must be "BII". |  |
| X223.258.2300.H109-2.010 | H109-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO9}-1$ is "BI" then 2300.HI09-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H109-3.010 | H109-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-3 must be "RD8". |  |
| X223.258.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HIO9-4 must be a valid date in CCYYMMDD- |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.258.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H109-7.010 | H09-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H109-8.010 | H09-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H109-9.010 | H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H110.010 | H110 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK03 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{H} 110$ can only be present if $2300 . \mathrm{H} 109$ is present. |  |
| X223.258.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H110-1 must be "BI". |  |
| X223.258.2300.H110-2.010 | H110-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement IRejected for Invalid Information... CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If 2300 .H110-1 is "BI" then $2300 . \mathrm{HI} 10-2$ must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H110-3.010 | H110-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-3 must be "RD8". |  |
| X223.258.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.H110-4 must be a valid date in CCYYMMDD- |  |
| X223.258.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.258.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.258.2300.H110-9.010 | H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H111.010 | H11 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{H} 111$ can only be present if $2300 . \mathrm{H} 110$ is present. |  |
| X223.258.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BI". |  |
| X223.258.2300.H111-2.010 | H111-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If 2300. HI11-1 is "BI" then 2300.HI11-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H111-3.010 | H111-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-3 must be "RD8". |  |
| X223.258.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300. HI11-4 must be a valid date in CCYYMMDD- |  |
| X223.258.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \text { INe } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H111-9.010 | H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.258.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \text { IK03 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{H} 112$ can only be present if $2300 . \mathrm{H} 111$ is present. |  |
| X223.258.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BII". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1I } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.258.2300.H112-2.010 | H112-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HI} 12-1$ is "Bl" then $2300 . \mathrm{HI} 12-2$ must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H12-3.010 | H112-3 | $\underset{\substack{\text { Date Time Period Format } \\ \text { Qualifier }}}{\text { Q }}$ | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-3 must be "RD8". |  |
| X223.258.2300.H112-4.010 | H12-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HI12-4 must be a valid date in CCYYMMDD- |  |
| X223.258.2300.H112-5.010 | H12-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H112-6.010 | H12-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H112-7.010 | H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H112-8.010 | H12-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.258.2300.H112-9.010 | H12-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.271.2300.H1.010 | HI | OCCURRENCE INFORMATION |  | 2 | s | 2300 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only two iterations of 2300 .HI with H101-1 = "BH" are allowed. |  |
| X223.271.2300.H101.010 | H01 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  |  | R |  |  |  |  |  |  |  |  |
| х223.271.2300.H101-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H101-1 must be "BH". |  |
| X223.271.2300.H01-2.010 | H01-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { 1Rejected for Invalid Information..." } \\ & \text { CSC 461: "NUBC Occurrence Code(s) } \\ & \text { and Date(s)" } \\ & \hline \end{aligned}$ | If 2300.HIO1-1 is "BH" then 2300. HIO1-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| х223.271.2300.H101-3.010 | H01-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H01-3 must be "D8". |  |
| X223.271.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HIO1-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" 竍 | Must not be present. |  |
| X223.271.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { \|K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Flement Present" | Must not be present. |  |
| X223.271.2300.H01-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H101-9.010 | H01-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \text { IK03 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{HIO2}$ can only be present if $2300 . \mathrm{H} 101$ is present. |  |
| X223.271.2300.H102-1.010 | H02-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H102-1 must be "BH". |  |
| X223.271.2300.H102-2.010 | H02-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | C | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { 1Rejected for Invalid Information..." } \\ & \text { CSC 461: "NUBC Occurrence Code(s) } \\ & \text { and Date(s)" } \\ & \hline \end{aligned}$ | If $2300 . \mathrm{HIO2}-1$ is "BH" then $2300 . \mathrm{HIO2}-2$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H102-3.010 | H02-3 | $\underset{\text { Date Time Period Format }}{\text { Qualifier }}$ | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-3 must be "D8". |  |
| X223.271.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HIO2-4 must be a valid date in CCYYMMDD format. |  |
| х223.271.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.271.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H102-9.010 | H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H103.010 | H03 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO}$ can only be present if $2300 . \mathrm{HIO2}$ is present. |  |
| X223.271.2300.H103-1.010 | H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300.H103-1 must be "BH". |  |
| X223.271.2300.H103-2.010 | H103-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement 1Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If 2300. $\mathrm{HIO3}-1$ is "BH" then 2300. HIO3-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H103-3.010 | H033-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-3 must be "D8". |  |
| X223.271.2300.H103-4.010 | H03-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300. HIO3-4 must be a valid date in CCYYMMDD |  |
| X223.271.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H103-9.010 | H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H104.010 | H04 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300 .HI04 can only be present if 2300 . HIO3 is present. |  |
| X223.271.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H104-1 must be "BH". |  |
| X223.271.2300.H104-2.010 | H104-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If 2300 . HIO4-1 is "BH" then 2300. H104-2 must be a valid Occurrence code. valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H104-3.010 | H04-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H104-3 must be "D8". |  |
| X223.271.2300.H104-4.010 | H04-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HIO4-4 must be a valid date in CCYYMMDD |  |
| X223.271.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H104-9.010 | H104-9 | Yes/No Condition or | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300. $\mathrm{HIO5}$ can only be present if $2300 . \mathrm{HIO} 4$ is present. |  |
| X223.271.2300.H105-1.010 | H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H105-1 must be "BH". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.271.2300.H105-2.010 | H05-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..." } \\ \text { CSC 461: "NUBC Occurrence Code(s) } \\ \text { and Date(s)" } \\ \hline \end{array}$ | If $2300 . \mathrm{HIO5}-1$ is "BH" then $2300 . \mathrm{HIO5-2}$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H105-3.010 | H105-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H105-3 must be "D8". |  |
| X223.271.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HIO5-4 must be a valid date in CCYYMMDD |  |
| X223.271.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300. $\mathrm{H} 105-8.010$ | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO6}$ can only be present if $2300 . \mathrm{HIO5}$ is present. |  |
| х223.271.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must be "ВН". |  |
| X223.271.2300.H106-2.010 | H06-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HIO6}-1$ is "BH" then $2300 . \mathrm{HIO6}-2$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H106-3.010 | H106-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H106-3 must be "D8". |  |
| X223.271.2300.H106-4.010 | H106-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.H106-4 must be a valid date in CCYYMMDD |  |
| х223.271.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H106-7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H107.010 | H107 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{H} 107$ can only be present if $2300 . \mathrm{H} 106$ is present. |  |
| х223.271.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H107-1 must be "BH". |  |
| X223.271.2300.H107-2.010 | H07-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{aligned} & \begin{array}{l} \text { cSCC A7: "Acknowledgement } \\ \text { 1Rejected for Invalid Information..." } \\ \text { cac 461: "NNBC Occurrence Code(s) } \\ \text { and Date(s)" } \end{array} \\ & \hline \end{aligned}$ | If $2300 . \mathrm{HIOT}-1$ is "BH" then $2300 . \mathrm{HIO7-2}$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H107-3.010 | H07-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H107-3 must be "D8". |  |
| X223.271.2300.H107-4.010 | H107-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HIO7-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H107-5.010 | H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage Req. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.271.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H107-9.010 | H07-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300 .HI08 can only be present if 2300 . HIO is present. |  |
| X223.271.2300.H108-1.010 | H108-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H108-1 must be "ВН". |  |
| X223.271.2300.H108-2.010 | H008-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If 2300. HIO8-1 is "BH" then 2300 . H108-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H108-3.010 | H08-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H 108 -3 must be "D8". |  |
| х223.271.2300.H108-4.010 | H08-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HIO8-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H108-5.010 | H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H108-7.010 | H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { \|K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H108-8.010 | H008-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Flement Present" | Must not be present. |  |
| X223.271.2300.H108-9.010 | H08-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{HIO9}$ can only be present if $2300 . \mathrm{H} 108$ is present. |  |
| X223.271.2300.H109-1.010 | H09-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 1K403 = 7: "IIvalid Code Value" | 2300.H09-1 must be "BH". |  |
| X223.271.2300.H109-2.010 | H09-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HIO9}-1$ is "BH" then 2300. HIO9-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H109-3.010 | H09-3 | $\qquad$ | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H109-3 must be "D8". |  |
| X223.271.2300.H09-4.010 | H109-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | ${ }^{2300 . H 109-4}$ must be a valid date in CCYYMMDD |  |
| X223.271.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { \|K403 = I10: "Implementation "Not } \\ & \text { Used" Flement Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H109-9.010 | H109-9 | Yes/No Condition or | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.271.2300.H110.010 | H110 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300 .HI10 can only be present if 2300 . HI09 is present. |  |
| х223.271.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H110-1 must be "ВН". |  |
| X223.271.2300.H110-2.010 | H110-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { 1Rejected for Invalid Information..." } \\ & \text { CSC 461: "NUBC Occurrence Code(s) } \\ & \text { and Date(s)" } \\ & \hline \end{aligned}$ | If $2300 . \mathrm{HI} 10-1$ is "BH" then 2300 .H110-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H110-3.010 | H110-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-3 must be "D8". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.271.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HI10-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H110-9.010 | H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{H} 111$ can only be present if $2300 . \mathrm{H} 110$ is present. |  |
| х223.271.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be "ВН". |  |
| X223.271.2300.H111-2.010 | H111-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If 2300.HI11-1 is "BH" then 2300 .H111-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H111-3.010 | H111-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H111-3 must be "D8". |  |
| X223.271.2300.H11-4.010 | H111-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HI11-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H11--5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H111-9.010 | H111-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H112.010 | H12 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{H} 112$ can only be present if 2300 .H111 is present. |  |
| X223.271.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BH". |  |
| X223.271.2300.H112-2.010 | H12-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HI} 12-1$ is "BH" then 2300 . H112-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H112-3.010 | H112-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H112-3 must be "D8". |  |
| X223.271.2300.H112-4.010 | H12-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.H112-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H112-5.010 | H12-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.271.2300.H112-6.010 | H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.271.2300.H112-7.010 | H12-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.271.2300.H112-8.010 | H12-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| х223.271.2300.H112-9.010 | H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H1.010 | HI | VALUE information |  | 2 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with H101-1 = "BE" are allowed. |  |
| X223.284.2300.H101.010 | H01 | HEALTH CARE CODE |  |  | R |  |  |  |  |  |  |  |  |
| X223.284.2300.H101-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H01-1 must be "BE". |  |
| X223.284.2300.H101-2.010 | H01-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300. HIO1-1 is "BE" then 2300. HIO1-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H101-3.010 | H01-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| х223.284.2300.H101-4.010 | H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H101-5.010 | H01-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H01-5 must be numeric. |  |
| $\begin{aligned} & \hline \begin{array}{l} \text { X223.284.2300.HIO1-5.020 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H101-5.030 | H01-5 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.H01-5 must be >= 0 and << 99,999,999.99. |  |
| X223.284.2300.H101-5.035 | H01-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |
| X223.284.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.284.2300.H101-7.010 | H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H101-9.010 | H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO2}$ can only be present if $2300 . \mathrm{H} 101$ is |  |
| X223.284.2300.H102-1.010 | H02-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | \|1403 = 7: "Invalid Code Value" | 2300.H102-1 must be "BE". |  |
| X223.284.2300.H102-2.010 | H02-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300 .HIO2-1 is "BE" then 2300. HIO2-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H102-3.010 | H102-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H102-5.010 | H102-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. H I02-5 must be numeric. |  |
| $\begin{aligned} & \text { X223.284.2300.HI02-5.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H102-5.030 | H102-5 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300. H (02-5 must be > $=0$ and < $=99,999,999.99$. |  |
| X223.284.2300.H102-5.035 | H02-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\underset{\text { Elemment or }}{\text { Elemer }}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | \|K403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |  |
| X223.284.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H102-9.010 | H02-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300.HIO3 can only be present if 2300 . HIO2 is present. |  |
| X223.284.2300.H103-1.010 | H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H103-1 must be "BE". |  |
| X223.284.2300.H103-2.010 | H03-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300. HIO3-1 is "BE" then 2300. HIO3-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H103-3.010 | H103-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H103-4.010 | H103-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H103-5.010 | H03-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H103-5 must be numeric. |  |
| $\begin{aligned} & \text { X223.284.2300.H03-5.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H103-5.030 | H03-5 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.H103-5 must be >= 0 and < $=99,999,999.99$. |  |
| X223.284.2300.H103-5.035 | H103-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |
| X223.284.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.284.2300.H103-7.010 | H03-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H103-8.010 | H03-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H103-9.010 | H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | 2300 .HI04 can only be present if 2300 . HIO3 is present. |  |
| X223.284.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300.H04-1 must be "BE". |  |
| X223.284.2300.H104-2.010 | H104-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300. HIO4-1 is "BE" then 2300. HIO4-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H104-3.010 | H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110: \text { "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300. H 1044 -4.010 | H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.284.2300.H104-5.010 | H04-5 | $\underset{\text { Amount }}{\substack{\text { Value Code Associated } \\ \text { Amone }}}$ | R | 1-18 | R |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.H104-5 must be numeric. |  |
| $\begin{aligned} & \text { X223.284.2300.H04-5.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H104-5.030 | H104-5 |  |  |  |  |  |  |  | 999 | E | 11403 = 5: "Data Element Too Long" | 2300.H104-5 must be >= 0 and << 99,999,999.99. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. Max. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H104-5.035 | H104-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |
| X223.284.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.284.2300.H104-9.010 | H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.284.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK03 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | 2300. HIO5 can only be present if 2300 . H104 is |  |
| х223.284.2300.H105-1.010 | H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H105-1 must be "BE". |  |
| X223.284.2300.H105-2.010 | H105-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement 1Rejected for Invalid Information..." CSC 463 : "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HIO5}-1$ is "BE" then $2300 . \mathrm{HIO5}-2$ must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H105-3.010 | H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.284.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H105-5.010 | H105-5 | $\underset{\text { Amount }}{\substack{\text { Value Code Associated } \\ \text { Amor }}}$ | R | 1-18 | R |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \\ & \hline \end{aligned}$ | 2300. $\mathrm{H} 105-5$ must be numeric. |  |
| $\begin{aligned} & \text { X223.284.2300.HIO5-5.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H105-5.030 | H105-5 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.H105-5 must be >= 0 and <= 99,999,999.99. |  |
| X223.284.2300.H105-5.035 |  |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |
| X223.284.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| х223.284.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.284.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H106.010 | H06 | HEALTH CARE CODE |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HI} 06$ can only be present if $2300 . \mathrm{HIO5}$ is present. |  |
| х223.284.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must be "BE". |  |
| X223.284.2300.H106-2.010 | H106-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463 : "NUBC Value Code(s) and/or Amount(s)" | If 2300. HIO6-1 is "BE" then 2300. HIO6-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H106-3.010 | H106-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H106-4.010 | H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H106-5.010 | H106-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. H106-5 must be numeric. |  |
| X223.284.2300.H106-5.020 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H106-5.030 | H106-5 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300.H106-5 must be >= 0 and << 99,999,999.99. |  |
| X223.284.2300.H106-5.035 | H106-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |
| X223.284.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.284.2300.H106-7.010 | H06-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300. $\mathrm{H} 106-9.010$ | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I IO: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H107.010 | H07 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO7}$ can only be present if 2300 . HIO 06 is present. |  |
| х223.284.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H107-1 must be "BE". |  |
| X223.284.2300.H107-2.010 | H107-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300. HIOT-1 is "BE" then 2300.HIOT-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| х223.284.2300.H107-3.010 | H107-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.284.2300.H107-4.010 | H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H107-5.010 | H07-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.H107-5 must be numeric. |  |
| X223.284.2300.H107-5.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H107-5.030 | H107-5 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300. H (107-5 must be >= 0 and $<=99,999,999.99$. |  |
| X223.284.2300.H107-5.035 | H07-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |
| X223.284.2300.H107-6.010 | H07-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I } 10 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H107-8.010 | H07-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I } 10 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H107-9.010 | H07-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I } 10 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H108.010 | H08 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300.HI08 can only be present if 2300 . HI07 is |  |
| х223.284.2300.H108-1.010 | H108-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H108-1 must be "BE". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H108-2.010 | H108-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HIO} 08-1$ is "BE" then $2300 . \mathrm{HIO}-2$ must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H108-3.010 | H108-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H108-4.010 | H08-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H108-5.010 | H08-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. $\mathrm{H} 108-5$ must be numeric. |  |
| X223.284.2300.HIO8-5.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.284.2300.H108-5.030 | H108-5 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.H108-5 must be >= 0 and << 99,999,999.99. |  |
| X223.284.2300.H108-5.035 | H08-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |
| X223.284.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H108-7.010 | H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Flement Present" | Must not be present. |  |
| X223.284.2300.H108-8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H108-9.010 | H008-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H109.010 | H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO9}$ can only be present if $2300 . \mathrm{HIO}$ is present. |  |
| х223.284.2300.H109-1.010 | H109-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H109-1 must be "BE". |  |
| X223.284.2300.H109-2.010 | H09-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HIO9-1}$ is "BE" then $2300 . \mathrm{HIO9}-2$ must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H109-3.010 | H109-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H109-5.010 | H099-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H109-5 must be numeric. |  |
| $\begin{aligned} & \text { X223.284.2300.H109-5.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H109-5.030 | H09-5 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300. H -109-5 must be >= 0 and < $=99,999,999.99$. |  |
| X223.284.2300.H109-5.035 | H09-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |
| X223.284.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I 10 : "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300. $\mathrm{H} 109-8.010$ | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H109-9.010 | H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300 .HI10 can only be present if 2300 . HIO9 is present. |  |
| X223.284.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must be "BE". |  |
| X223.284.2300.H110-2.010 | H110-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement 1Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HI} 10-1$ is "BE" then $2300 . \mathrm{H} 110-2$ must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H110-3.010 | H110-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H110-5.010 | H110-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H110-5 must be numeric. |  |
| X223.284.2300.HI10-5.020 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H110-5.030 | H110-5 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.H110-5 must be >= 0 and <= 99,999,999.99. |  |
| X223.284.2300.H110-5.035 | H110-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |
| X223.284.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H110-9.010 | H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300 .HI11 can only be present if 2300 . HI10 is present. |  |
| X223.284.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BE". |  |
| X223.284.2300.H111-2.010 | H111-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HI} 11-1$ is "BE" then $2300 . \mathrm{HI} 11-2$ must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H111-3.010 | H111-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H111-5.010 | H111-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H111-5 must be numeric. |  |
| X223.284.2300.HI11-5.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H111-5.030 | H111-5 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.H111-5 must be > $=0$ and $<=99,999,999.99$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H111-5.035 | H111-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |
| X223.284.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H111-9.010 | H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.284.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300. H112 can only be present if 2300 .H111 is present. |  |
| X223.284.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BE". |  |
| X223.284.2300.H112-2.010 | H112-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463 : "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HI} 12-1$ is "BE" then 2300. $\mathrm{H} 112-2$ must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H112-3.010 | H112-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H112-4.010 | H112-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H112-5.010 | H12-5 | $\begin{aligned} & \hline \text { Value Code Associated } \\ & \text { Amount } \\ & \hline \end{aligned}$ | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H112-5 must be numeric. |  |
| X223.284.2300.H112-5.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H112-5.030 | H112-5 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300.H112-5 must be >= 0 and $<=99,999,999.99$. |  |
| X223.284.2300.H112-5.035 | H112-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 463: "NUBC Value Code(s) and/or Amount(s)" |  |  |
| X223.284.2300.H112-6.010 | H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.284.2300.H112-7.010 | H12-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H112-8.010 | H12-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.284.2300.H112-9.010 | H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.294.2300.H1.010 | HI | CONDITION INFORMATION |  | 2 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with $\mathrm{H} 01-1=$ "BG" are allowed. |  |
| X223.294.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.294.2300.H01-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must be "BG". |  |
| X223.294.2300.H01-2.010 | H01-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If 2300 .HIO1-1 is " BG " then 2300. HIO1-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.294.2300.H101-3.010 | H101-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.HIO1-7.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.294.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H101-9.010 | H101-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO2}$ can only be present if $2300 . \mathrm{HIO1}$ is present. |  |
| х223.294.2300.H102-1.010 | H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H02-1 must be "BG". |  |
| X223.294.2300.H102-2.010 | H102-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO2}-1$ is "BG" then 2300.HIO2-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H102-3.010 | H102-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.294.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H102-9.010 | H102-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO3}$ can only be present if 2300 .HIO2 is present. |  |
| х223.294.2300.H103-1.010 | H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must be "BG". |  |
| X223.294.2300.H103-2.010 | H103-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO} 03-1$ is "BG" then $2300 . \mathrm{HIOS}-2$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| Х223.294.2300.H103-3.010 | H103-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H103-4.010 | H103-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.294.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.294.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.294.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.294.2300. H I03-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage Req. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.294.2300.H103-9.010 | H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H104.010 | H04 | HEALTH CARE CODE |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300. HI04 can only be present if 2300 . HIO3 is present. |  |
| X223.294.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.H104-1 must be "BG". |  |
| X223.294.2300.H104-2.010 | H104-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO4-1}$ is "BG" then 2300 . H IO4-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H104-3.010 | H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| х223.294.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H104-8.010 | H04-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.294.2300.H104-9.010 | H104-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{HIO} 05$ can only be present if 2300 H 104 is present. |  |
| х223.294.2300.H105-1.010 | H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H105-1 must be "BG". |  |
| X223.294.2300.H105-2.010 | H05-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO5}-1$ is "BG" then 2300 . $\mathrm{H} 105-2$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H105-3.010 | H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { \|K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Flement Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{HIO}$ can only be present if $2300 . \mathrm{HIO}$ is present. |  |
| х223.294.2300.H106-1.010 | H06-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must be "BG". |  |
| X223.294.2300.H106-2.010 | H106-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HI} 06-1$ is "BG" then 2300 . $\mathrm{H} 106-2$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H106-3.010 | H106-3 | $\qquad$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300. H 106 -4.010 | H006-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. Max. | Usage | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.294.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H106-7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H107.010 | H07 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO} 07$ can only be present if $2300 . \mathrm{HIO6}$ is present. |  |
| х223.294.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H07-1 must be "BG". |  |
| X223.294.2300.H107-2.010 | H07-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If 2300. HIOT-1 is "BG" then 2300. H107-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H107-3.010 | H07-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H107-4.010 | H07-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H107-5.010 | H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H107-9.010 | H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300 .HI08 can only be present if 2300 . HI07 is present. |  |
| х223.294.2300.H108-1.010 | H08-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.H108-1 must be "BG". |  |
| X223.294.2300.H108-2.010 | H008-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO} 08-1$ is "BG" then 2300 . $\mathrm{H} 108-2$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H108-3.010 | H008-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H108-4.010 | H08-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H108-5.010 | H08-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H108-7.010 | H008-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H108-8.010 | H008-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H108-9.010 | H08-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \text { IK03 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{HIO9}$ can only be present if $2300 . \mathrm{H} 108$ is present. |  |
| х223.294.2300.H109-1.010 | H09-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | 1K403 = 7: "IIvalid Code Value" | 2300.H09-1 must be "BG". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.294.2300.H109-2.010 | H09-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO9-1}$ is "BG" then 2300. HIO9-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H109-3.010 | H09-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H109-9.010 | H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H110.010 | H110 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300.HI10 can only be present if 2300 . HIO9 is present. |  |
| X223.294.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must be "BG". |  |
| X223.294.2300.H110-2.010 | H110-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HI} 10-1$ is "BG" then 2300 . $\mathrm{H} 110-2$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H110-3.010 | H110-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H110-9.010 | H110-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I } 10 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H111.010 | H11 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | \|K403 = 2: "Conditional Required Data Element Missing" | 2300. H111 can only be present if 2300 .H110 is present. |  |
| X223.294.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BG". |  |
| X223.294.2300.H111-2.010 | H111-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HI} 11-1$ is "BG" then 2300 .H111-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H111-3.010 | H111-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.294.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H111-9.010 | H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300. H112 can only be present if 2300 . H111 is |  |
| X223.294.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BG". |  |
| X223.294.2300.H112-2.010 | H112-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{H} 112-1$ is "BG" then 2300. H112-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H112-3.010 | H12-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H112-4.010 | H12-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H112-5.010 | H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.294.2300.H112-6.010 | H12-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" " | Must not be present. |  |
| X223.294.2300.H112-7.010 | H12-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H112-8.010 | H12-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.294.2300.H112-9.010 | H12-9 | Yes/No Condition or | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.304.2300.HI. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.304.2300.HI.020 } \\ \text { deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.304.2300.H1.030 | HI | TREATMENT CODE INFORMATION |  | 2 | s | 2300 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only two iterations of $2300 . \mathrm{HI}$ with H0101-1 = "TC" are allowed. | pass through, syntax only. |
| X223.304.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.304.2300.H01-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H01-1 must be "TC". |  |
| X223.304.2300.H01-2.010 | H01-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HIO1-2 must contain at least one non-space character. |  |
| X223.304.2300.H101-2.020 | H01-2 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H01-2 must be 1-30 characters. |  |
| X223.304.2300.H101-3.010 | H01-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H101-5.010 | H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H101-9.010 | H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Flement Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H102.010 | H102 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \left\lvert\, \begin{array}{l} \text { IK403 }=2: ~ " C o n d i t i o n a l ~ R e q u i r e d ~ D a t a ~ \\ \text { Element Missing" } \\ \hline \end{array}\right. \\ & \hline \end{aligned}$ | 2300. H IO2 can only be present if 2300 . H 101 is present. |  |
| X223.304.2300.H102-1.010 | H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H102-1 must be "TC". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.304.2300.H102-2.010 | H02-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HIO2-2 must contain at least one non-space character. |  |
| X223.304.2300.H102-2.020 | H02-2 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H102-2 must be 1-30 characters. |  |
| X223.304.2300.H102-3.010 | H02-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H102-6.010 | H02-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.304.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H102-8.010 | H02-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H102-9.010 | H02-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H103.010 | H03 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO} 03$ can only be present if 2300 . HI02 is present. |  |
| х223.304.2300.H103-1.010 | H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H03-1 must be "TC". |  |
| X223.304.2300.H103-2.010 | H03-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. HIO3-2 must contain at least one non-space |  |
| X223.304.2300.H103-2.020 | H03-2 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300.H103-2 must be 1-30 characters. |  |
| X223.304.2300.H103-3.010 | H003-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H103-4.010 | H03-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| х223.304.2300. $\mathrm{H} 103-7.010$ | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H103-9.010 | H03-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.304.2300.H104.010 | H04 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300 .HI04 can only be present if 2300 . HIO3 is present. |  |
| X223.304.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H104-1 must be "TC". |  |
| X223.304.2300.H104-2.010 | H104-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HIO4-2 must contain at least one non-space character. |  |
| X223.304.2300.H104-2.020 | H104-2 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H104-2 must be 1-30 characters. |  |
| X223.304.2300.H104-3.010 | H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | $\begin{array}{\|c\|c\|c\|c\|} \hline \text { Accept } / \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.304.2300.H104-9.010 | H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H105.010 | H105 | HEALTH CARE CODE |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300 .HIO5 can only be present if 2300 . HIO4 is present. |  |
| х223.304.2300.H105-1.010 | H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.H105-1 must be "TC". |  |
| X223.304.2300.H105-2.010 | H105-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HIO5-2 must contain at least one non-space |  |
| х223.304.2300.H105-2.020 | H105-2 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300.H105-2 must be 1-30 characters. |  |
| х223.304.2300.H105-3.010 | H105-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| х223.304.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK03 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | $2300 . \mathrm{H} 106$ can only be present if $2300 . \mathrm{H} 105$ is present. |  |
| х223.304.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H106-1 must be "TC". |  |
| X223.304.2300.H106-2.010 | H06-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. H106-2 must contain at least one non-space character. |  |
| X223.304.2300.H106-2.020 | H106-2 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300.H106-2 must be 1-30 characters. |  |
| X223.304.2300.H106-3.010 | H106-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { \|K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H106-4.010 | H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| х223.304.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| х223.304.2300.H106-7.010 | H06-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H107.010 | H107 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300 .HI07 can only be present if 2300 . H106 is present. |  |
| х223.304.2300.H107-1.010 | H07-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H07-1 must be "TC". |  |
| X223.304.2300.H107-2.010 | H07-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H107-2 must contain at least one non-space character. |  |
| х223.304.2300.H107-2.020 | H07-2 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H107-2 must be 1-30 characters. |  |
| х223.304.2300.H107-3.010 | H07-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H107-4.010 | H07-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H107-5.010 | H07-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.304.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.304.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H107-9.010 | H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HI08}$ can only be present if 2300 .HI07 is present. |  |
| X223.304.2300.H108-1.010 | H108-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H08-1 must be "TC". |  |
| X223.304.2300.H108-2.010 | H108-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HI08-2 must contain at least one non-space character. |  |
| X223.304.2300.H108-2.020 | H108-2 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300.H108-2 must be 1-30 characters. |  |
| X223.304.2300.H108-3.010 | H108-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H108-4.010 | H108-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H108-5.010 | H08-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H108-7.010 | H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H108-8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H108-9.010 | H108-9 | $\qquad$ | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H109.010 | H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300.HIO9 can only be present if $2300 . \mathrm{HIO}$ is |  |
| Х223.304.2300.H109-1.010 | H09-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H09-1 must be "TC". |  |
| X223.304.2300.H109-2.010 | H109-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.HIO9-2 must contain at least one non-space |  |
| Х223.304.2300.H109-2.020 | H109-2 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300.H109-2 must be 1-30 characters. |  |
| X223.304.2300.H109-3.010 | H109-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br>  | Must not be present. |  |
| X223.304.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H109-9.010 | H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H110.010 | H10 | HEALTH CARE CODE |  |  | S |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2300.HI10 can only be present if 2300 . HIO9 is |  |
| X223.304.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H110-1 must be "TC". |  |
| X223.304.2300.H110-2.010 | H110-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HI10-2 must contain at least one non-space character. |  |
| Х223.304.2300.H110-2.020 | H110-2 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H110-2 must be 1-30 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.304.2300.H110-3.010 | H110-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H110-9.010 | H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | 2300. H111 can only be present if 2300 . H 110 is present. |  |
| X223.304.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be "TC". |  |
| X223.304.2300.H111-2.010 | H111-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H111-2 must contain at least one non-space character. |  |
| х223.304.2300.H111-2.020 | H111-2 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300.H111-2 must be 1-30 characters. |  |
| X223.304.2300.H111-3.010 | H111-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H111-9.010 | H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H112.010 | H12 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HI} 12$ can only be present if 2300 .HI11 is present. |  |
| X223.304.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be "TC". |  |
| X223.304.2300.H112-2.010 | H12-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H112-2 must contain at least one non-space character. |  |
| X223.304.2300.H112-2.020 | H112-2 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H112-2 must be 1-30 characters. |  |
| X223.304.2300.H112-3.010 | H112-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H112-4.010 | H12-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H112-5.010 | H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H112-6.010 | H12-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H112-7.010 | H12-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.304.2300.H112-8.010 | H12-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.304.2300.H112-9.010 | H12-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\underset{\text { Elegment or }}{\text { Element }}$ | Description | ID | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{c\|} \hline \text { TA11 } \\ 9991 \\ 277 C A \end{array} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.313.2300.HCP. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP. 015 | HCP | CLAIM PRICING/REPRICING INFORMATION |  | 1 | s | 2300 |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 64: "Re-pricing information." | Segment must not be present. |  |
| X223.313.2300.HCP01.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2223.313.2300.HCP01.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| 2223.313.2300.HCP02.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP02.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l\|} \hline \begin{array}{l} \text { X223.313.2300.HCP02.030 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP03.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.313.2300.HCP03.020 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP04.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.313.2300.HCP04.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.313.2300.HCP04.030 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l} \hline \begin{array}{l} \text { 2223.313.2300.HCP04.040 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP04.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP05.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP05.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l\|} \hline \begin{array}{l} \text { X223.313.2300.HCP06.010 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP06.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP06.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP06.040 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP06.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.313.2300.HCP07.010 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.313.2300.HCP07.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l\|} \hline \begin{array}{l} \text { X223.313.2300.HCP08.010 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP08.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l\|} \hline \text { 2223.313.2300.HCP08.030 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP08.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP09.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP10.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { 2223.313.2300.HCP11.010 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.313.2300.HCP11.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.313.2300.HCP12.010 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP12.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP12.025 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP12.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP12.050 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP13.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.313.2300.HCP14.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.313.2300.HCP15.010 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.319.2310A.NM1.010 | NM1 | ATTENDING PROVIDER NAME |  | 1 | s | 2310A | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" Maximum Times" | If present, only one iteration of 2310A.NM1 is allowed. | 2310A is not sent on nonscheduled transportation claims (HCPCS A0425, A0427, A0428 (with a QL modifier in SV202-3, SV202-4, SV202-5, or SV202-6), A0429, A0430, A0431, A0432, A0433, A0434, A0435, or A0436 ) |
| X223.319.2310A.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 71 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A.NM101 must be present. |  |
| X223.319.2310A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310A.NM101 must be "71". |  |
| X223.319.2310A.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A.NM102 must be present. |  |
| X223.319.2310A.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310A.NM102 must be "1". |  |
| X223.319.2310A.NM103.010 | NM103 | Name Last | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A.NM103 must be present. |  |


| 8371 Edit Reference | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.319.2310A.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2310A.NM103 must contain at least one non-space |  |
| X223.319.2310A.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310A.NM103 must be 1-60 characters. |  |
| X223.319.2310A.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: 71 "Attending Phvsician" |  |  |
| X223.319.2310A.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM103 must be populated with accepted AN characters. |  |
| X223.319.2310A.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.319.2310A.NM104.010 | NM104 | Name First | AN | 1-35 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310A.NM104 must be 1 - 35 characters. |  |
| X223.319.2310A.NM104.020 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: 71 "Attending Physician" |  |  |
| X223.319.2310A.NM104.030 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM104 must be populated with accepted AN |  |
| x223.319.2310A.NM104.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.319.2310A.NM105.010 | NM105 | Name Middle | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM105 must contain at least one non-space |  |
| X223.319.2310A.NM105.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.319.2310A.NM105.030 | NM105 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310A.NM105 must be 1-25 characters. |  |
| X223.319.2310A.NM105.040 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC: 71 "Attending Physician" |  |  |
| X223.319.2310A.NM105.050 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM105 must be populated with accepted AN characters. |  |
| X223.319.2310A.NM105.055 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 514: "Entity's Middle Name" EIC: 71 "Attending Physician" | The first position of 2310A.NM105 must be alphabetic (A...Z). |  |
| X223.319.2310A.NM105.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.319.2310A.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.319.2310A.NM107.005 | NM107 | Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM107 must contain at least one non-space character. |  |
| X223.319.2310A.NM107.010 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310A.NM107 must be 1-10 characters. |  |
| X223.319.2310A.NM107.015 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: 71 "Attending Physician" |  |  |
| X223.319.2310A.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM107 must be populated with accepted AN |  |
| X223.319.2310A.NM107.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.319.2310A.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error" CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 71 "Attending Physician" | 2310A.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.319.2310A.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" ElC: 71 "Attendina Phvsician" | 2310A.NM108 must be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.319.2310A.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310A.NM108 must be "XX". | Does not apply to Trailblazer or JH (Texas) VA claims. |
| X223.319.2310A.NM109.005 | NM109 | Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2310A.NM109 must be present if 2310A.NM108 is present. |  |
| X223.319.2310A.NM109.010 |  |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 71 "Attending Physician" | 2310A.NM109 must be valid according to the NPI algorithm. |  |
| X223.319.2310A.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 71 "Attending Physician" | The first position of 2310A.NM109 must be a "1". |  |
| X223.319.2310A.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.319.2310A.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.319.2310A.NM112.010 | NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\begin{gathered} \text { Segment or } \\ \text { Element } \end{gathered}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.322.2310A.PRV. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.322.2310A.PRV. 020 | PRV | ATTENDING PROVIDER SPECIALTY information |  | 1 | s | 2310A |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310A.PRV is allowed. |  |
| X223.322.2310A.PRV01.010 | PRV01 | Provider Code | ID | 1-3 | R |  |  | AT | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A .PRV01 must be present. |  |
| X223.322.2310A.PRV01.020 | PRV01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310A .PRV01 must be "AT". |  |
| X223.322.2310A.PRV02.010 | PRV02 | Reference Identification Qualifier | ID | 2-3 | R |  |  | PXC | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A . PRV02 must be present. |  |
| X223.322.2310A.PRV02.020 | PRV02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310A . PRV02 must be "PXC". |  |
| X223.322.2310A.PRV03.010 | PRV03 | Provider Taxonomy Code | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A .PRV03 must be present. |  |
| X223.322.2310A.PRV03.020 | PRV03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 145: "Entity's specialty/taxonomy code" <br> EIC: 71 "Attending Phvsician" | 2310A .PRV03 must be a valid Provider Taxonomy Code. | Valid Provider Taxonomy Code reference must be available for this edit. |
| X223.322.2310A.PRV04.010 | PRV04 | State or Province Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.322.2310A.PRV05.010 | PRV05 | PROVIDER SPECIALTY INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.322.2310A.PRV06.010 | PRV06 | $\begin{gathered} \text { Provider Organization } \\ \text { Code } \\ \hline \end{gathered}$ | ID | 3-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.324.2310A.REF. 010 | REF | ATTENDING PROVIDER SECONDARY IDENTIFICATION |  | 4 | s | 2310A |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2310A.NM109 is not present, 2310A.REF with REF01 = " 1 G " must be present. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.324.2310A.REF. 020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 71 "Attending Physician" | Only 1 iteration of 2310A.REF with REF01 = "1G" is allowed. | Trailblazeror JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.324.2310A.REF. 030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.324.2310A.REF. 035 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310A.REF must be present if 2300 .REF01 $=$ P4 and 2300. REF02 $=$ is a valid VA qualifier. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.324.2310A.REF. 040 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310A.REF must not be present. | Everyone but Trailblazer or JH (Texas). 01/20: Companion Guide Note needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.324.2310A.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 0B, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A .REF01 must be present. |  |
| X223.324.2310A.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 21: Missing or invalid information CSC 560: Entity's Additional/Secondary Identifier EIC: 71 "Attending Physician" | 2310A.REF01 must be "1G". |  |
| X223.324.2310A.REF02.010 | REF02 | Attending Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A . REF02 must be present. |  |
| X223.324.2310A.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement <br> IRejected for Invalid Information..." <br> CSC 133 "Entity's UPIN" <br> EIC: 71 "Attending Physician" | 2310A.REF02 must be in format ANNNNN or AAANNN (where $A$ is an alpha character and $N$ is a numeric digit). |  |
| X223.324.2310A.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.324.2310A.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.326.2310B.NM1.010 | NM1 | OPERATING PHYSICIAN NAME |  | 1 | s | 2310B | 1 |  | 999 | R | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 2310B.NM1 is allowed. |  |
| X223.326.2310B.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 72 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.NM101 must be present. |  |
| X223.326.2310B.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310B.NM101 must be "72". |  |
| X223.326.2310B.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.NM102 must be present. |  |
| X223.326.2310B.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2310B.NM102 must be "1". |  |
| X223.326.2310B.NM103.010 | NM103 | Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.NM103 must be present. |  |
| X223.326.2310B.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK } 403=6: \text { "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310B.NM103 must contain at least one non-space |  |
| X223.326.2310B.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310B.NM103 must be 1-60 characters. |  |
| X223.326.2310B.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: 72 "Operating Physician" |  |  |
| X223.326.2310B.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \\ & \hline \end{aligned}$ | 2310B.NM103 must be populated with accepted AN characters. |  |
| X223.326.2310B.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.326.2310B.NM104.010 | NM104 | Name First | AN | 1-35 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2310B.NM104 must contain at least one non-space character. |  |
| X223.326.2310B.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310B.NM104 must be 1 - 35 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x223.326.2310B.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: 72 "Operating Physician" |  |  |
| х223.326.2310B.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310B.NM104 must be populated with accepted AN characters. |  |
| X223.326.2310B.NM104.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.326.2310B.NM105.010 | NM105 | Middle Name | AN | 1-25 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2310B.NM105 must contain at least one non-space |  |
| X223.326.2310B.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310B.NM105 must be 1-25 characters. |  |
| X223.326.2310B.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC: 72 "Operating Physician" |  |  |
| X223.326.2310B.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM105 must be populated with accepted AN |  |
| X223.326.2310B.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 514: "Entity's Middle Name" EIC: 72 "Operating Physician" | The first position of 2310B.NM105 must be alphabetic (A...Z). |  |
| X223.326.2310B.NM105.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.326.2310B.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.326.2310B.NM107.010 | NM107 | Name Suffix | AN | 1-10 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM107 must contain at least one non-space character. |  |
| X223.326.2310B.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310B.NM107 must be 1-10 characters. |  |
| X223.326.2310B.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: 72 "Operating Physician" |  |  |
| X223.326.2310B.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \\ & \hline \end{aligned}$ | 2310B.NM107 must be populated with accepted AN |  |
| X223.326.2310B.NM107.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | Min. <br> Max. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.326.2310B.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error" CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Physician" | 2310B.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.326.2310B.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Phvsician" | 2310B.NM108 must be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.326.2310B.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | $1 \mathrm{~K} 403=7$ 7: "Invalid Code Value" | 2310B.NM108 must be "XX". | Does not apply to Trailblazer or JH (Texas) VA claims. |
| X223.326.2310B.NM109.010 | NM109 | Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2310B.NM109 must be present if 2310B.NM108 is present. |  |
| X223.326.2310B.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Physician" | 2310B.NM109 must be valid according to the NPI algorithm. |  |
| X223.326.2310B.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Physician" | The first position of 23108.NM109 must be a "1". |  |
| X223.326.2310B.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.326.2310B.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.326.2310B.NM112.010 | NM112 | $\underset{\text { Name }}{\text { Name Last or Organization }}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.329.2310B.REF. 010 | REF | OPERATING PHYSICIAN SECONDARY IDENTIFICATION |  | 4 | s | 2310B |  |  | 999 | R | 1K304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2310B.NM109 is not present, 2310B.REF with REF01 = "1G" must be present. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.329.2310B.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines. CSC 560: Entity's Additional/Secondary Identifier EIC: 72 "Operating Physician" | Only 1 iteration of 2310 B .REF with REF01 $=$ " $1 \mathrm{G} "$ is allowed. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.329.2310B.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310B.REF must not be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.329.2310B.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.REF01 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.329.2310B.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 21: Missing or invalid information CSC 560: Entity's Additional/Secondary Identifier EIC: 72 "Operating Physician" | 2310B.REF01 must be "1G". |  |
| X223.329.2310B.REF02.010 | REF02 | Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.REF02 must be present. |  |
| X223.329.2310B.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC AT: "Acknowledgement <br> IRejected for Invalid Information..." <br> CsC <br> EIC 133 : "Entity's UPIN" <br> EIC: 2 "Operating Physician" | 2310B.REFO2 must be in format ANNNNN or AAANNN (where $A$ is an alpha character and $N$ is a numeric digit). |  |
| X223.329.2310B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.329.2310B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Flement Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.331.2310C.NM1.010 | NM1 | OTHER OPERATING PHYSICIAN NAME |  | 1 | s | 2310C | 1 |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2310C.NM1 is present 2310B.NM1 must be present. |  |
| X223.331.2310C.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310C.NM1 is allowed. |  |
| X223.331.2310C.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | zz | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2310C.NM101 must be present. |  |
| X223.331.2310C.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310C.NM101 must be "ZZ". |  |
| X223.331.2310C.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.NM102 must be present. |  |
| X223.331.2310C.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310C.NM102 must be "1". |  |
| X223.331.2310C.NM103.010 | NM103 | $\begin{array}{\|c} \hline \text { Other Operating Physician } \\ \text { Last Name } \\ \hline \end{array}$ | AN | 1-60 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2310C.NM103 must be present. |  |
| X223.331.2310C.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM103 must contain at least one non-space |  |
| X223.331.2310C.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310C.NM103 must be 1-60 characters. |  |
| X223.331.2310C.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> 1Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 504: "Entity's Last Name" <br> EIC: 72 "Operating Physician" |  |  |
| X223.331.2310C.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403=6: "Invalid Character in Data Element" | 2310C.NM103 must be populated with accepted AN characters. |  |
| X223.331.2310C.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.331.2310C.NM104.010 | NM104 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Other Operating Physician } \\ \text { First Name } \end{array} \\ \hline \end{array}$ | AN | 1-35 | s |  |  |  | 999 | R | $\begin{aligned} & \text { \|K403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310C.NM104 must contain at least one non-space |  |
| X223.331.2310C.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310C.NM104 must be 1-35 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.331.2310C.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: 72 "Operating Phvsician" |  |  |
| X223.331.2310C.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM104 must be populated with accepted AN characters. |  |
| X223.331.2310C.NM104.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.331.2310C.NM105.010 | NM105 | Other Operating Physician Middle Name or Initial | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM105 must contain at least one non-space character. |  |
| X223.331.2310C.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310C.NM105 must be 1-25 characters. |  |
| X223.331.2310C.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC: 72 "Operating Physician" |  |  |
| X223.331.2310C.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM105 must be populated with accepted AN |  |
| X223.331.2310C.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 514: "Entity's Middle Name EIC: 72 "Operating Physician" | The first position of 2310C.NM105 must be alphabetic (A...Z). |  |
| X223.331.2310C.NM105.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.331.2310C.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.331.2310C.NM107.010 | NM107 | $\begin{gathered} \text { Other Operating Physician } \\ \text { Name Suffix } \end{gathered}$ | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM107 must contain at least one non-space |  |
| X223.331.2310C.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310C.NM107 must be 1-10 characters. |  |
| X223.331.2310C.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: 72 "Operating Physician" |  |  |
| X223.331.2310C.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2310C.NM107 must be populated with accepted AN characters. |  |
| X223.331.2310C.NM107.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Reg. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х223.331.2310C.Nм108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error" CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 72 "Operating Physician" | 2310C.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| х223.331.2310C.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Physician" | 2310C.NM108 must be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.331.2310C.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2310C.NM108 must be "XX". | Does not apply to Trailblazer or JH (Texas) VA claims. |
| X223.331.2310C.NM109.010 | NM109 | Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2310C.NM109 must be present if 2310C.NM108 is present. |  |
| X223.331.2310C.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Physician" | 2310C.NM109 must be valid according to the NPI algorithm. |  |
| X223.331.2310C.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Physician" | The first position of 2310 C .NM109 must be a "1". |  |
| X223.331.2310C.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.331.2310C.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.331.2310C.NM112.010 | NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.334.2310C.REF. 010 | REF | other operating PHYSICIAN SECONDARY identification |  | 4 | s | 2310 C |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2310C.NM109 is not present, 2310C.REF with REFO1 = "1G" must be present. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.334.2310C.REF. 020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 72 "Operating Physician" | Only 1 iteration of 2310C.REF with REF01 $=$ " $1 \mathrm{G} "$ is allowed. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.334.2310C.REF. 030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310C.REF must not be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.334.2310C.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 0B, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.REF01 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.334.2310C.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 21: Missing or invalid information CSC 560: Entity's Additional/Secondary Identifier EIC: 72 "Operating Physician" | 2310C.REF01 must be "1G". |  |
| X223.334.2310C.REF02.010 | REF02 | Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.REF02 must be present. |  |
| X223.334.2310C.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 133: "Entity's UPIN" EIC: 72 "Operating Physician" | 2310C.REF02 must be in format ANNNNN or AAANNN (where $A$ is an alpha character and $N$ is a numeric digit). |  |
| X223.334.2310C.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.334.2310C.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.336.2310D.NM1.010 | NM1 | RENDERING PROVIDER NAME |  | 1 | s | 2310D | 1 |  | 999 | R | 1K304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310D.NM1 is allowed. |  |
| X223.336.2310D.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 82 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.NM101 must be present. |  |
| X223.336.2310D.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2310D.NM101 must be "82". |  |
| X223.336.2310D.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | K403 = 1: "Required Data Element Missing" | 2310D.NM102 must be present. |  |
| X223.336.2310D.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2310D.NM102 must be "1". |  |
| X223.336.2310D.NM103.010 | NM103 | Rendering Provider Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.NM103 must be present. |  |
| X223.336.2310D.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM103 must contain at least one non-space character. |  |
| X223.336.2310D.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM103 must be 1-60 characters. |  |
| X223.336.2310D.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: 82 "Rendering Provider" |  |  |
| X223.336.2310D.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM103 must be populated with accepted AN |  |
| X223.336.2310D.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.336.2310D.NM104.010 | NM104 | Rendering Provider First <br> Name | AN | 1-35 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2310D.NM104 must contain at least one non-space character. |  |
| X223.336.2310D.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM104 must be 1-35 characters. |  |
| X223.336.2310D.Nm104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: 82 "Renderina Provider" |  |  |


| 8371 Edit Reference | Segment or | Description | ID | Min. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.336.2310D.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM104 must be populated with accepted AN characters. |  |
| X223.336.2310D.NM104.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.336.2310D.NM105.010 | NM105 | Rendering Provider Middle <br> Name or Initial | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2310D.NM105 must contain at least one non-space |  |
| X223.336.2310D.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM105 must be 1-25 characters. |  |
| X223.336.2310D.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC: 82 "Rendering Provider" |  |  |
| X223.336.2310D.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM105 must be populated with accepted AN |  |
| X223.336.2310D.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 514: "Entity's Middle Name EIC: 82 "Rendering Provider" | The first position of 2310D.NM105 must be alphabetic (A...Z). |  |
| X223.336.2310D.NM105.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.336.2310D.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.336.2310D.NM107.010 | NM107 | Rendering Provider Name <br> Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM107 must contain at least one non-space character. |  |
| X223.336.2310D.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM107 must be 1-10 characters. |  |
| X223.336.2310D.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: 82 "Rendering Provider" |  |  |
| X223.336.2310D.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM107 must be populated with accepted AN characters. |  |
| X223.336.2310D.NM107.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.336.2310D.NM108.010 | NM108 | Identlfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error" CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 82 "Rendering Provider" | 2310D.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \begin{array}{c} \text { Loop } \\ \text { Repeat } \end{array} \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.336.2310D.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 82 "Rendering Provider" | 2310D.NM108 must be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.336.2310D.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310D.NM108 must be "XX". | Does not apply to Trailblazer or JH (Texas) VA claims. |
| X223.336.2310D.NM109.010 | NM109 | Rendering Provider Identifier | AN | 2-80 | s |  |  |  | 999 | R | K403 = 2: "Conditional Required Data Element Missing" | 2310D.NM109 must be present if 2310D.NM108 is present. present. |  |
| X223.336.2310D.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 82 "Rendering Provider" | 2310D.NM109 must be valid according to the NPI algorithm. |  |
| X223.336.2310D.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 82 "Rendering Provider" | The first position of 2310D.NM109 must be a "1". |  |
| X223.336.2310D.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = =10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.336.2310D.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.336.2310D.NM112.010 | NM112 | $\underset{\text { Name }}{\substack{\text { Name Last or Organization } \\ \text { Name }}}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.339.2310D.REF. 010 | REF | RENDERING PROVIDER SECONDARY IDENTIFICATION |  | 4 | s | 2310D |  |  | 999 | R | IK304 = I9: "Implementation Dependent "Not Used" Segment Present" | If 2310D.NM109 is not present, 2310D.REF with REF01 = " 1 G " must be present. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.339.2310D.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 82 "Rendering Provider" | Only 1 iteration of 2310D.REF with REF01 $=$ " $1 \mathrm{G} "$ is allowed. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.339.2310D.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310D.REF must not be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.339.2310D.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.REF01 must be present. |  |
| X223.339.2310D.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 82 "Rendering Provider" | 2310D.REF01 must be "1G". |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.339.2310D.REF02.010 | REF02 | Rendering Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.REF02 must be present. |  |
| X223.339.2310D.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 133: "Entity's UPIN" EIC: 82 "Rendering Provider" | 2310D.REF02 must be in format ANNNNN or AAANNN (where $A$ is an alpha character and $N$ is a numeric digit). |  |
| X223.339.2310D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.339.2310D.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.341.2310E.NM1.010 | NM1 | SERVICE FACILITY LOCATION NAME |  | 1 | s | 2310E | 1 |  | 999 | R | 1K304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310E.NM1 is allowed. |  |
| X223.341.2310E.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 77 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.NM101 must be present. |  |
| X223.341.2310E.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310E.NM101 must be "77". |  |
| X223.341.2310E.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.NM102 must be present. |  |
| X223.341.2310E.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310E.NM102 must be "2". |  |
| X223.341.2310E.NM103.010 | NM103 | Laboratory or Facility Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.NM103 must be present. |  |
| X223.341.2310E.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.NM103 must contain at least one non-space character. |  |
| X223.341.2310E.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310E.NM103 must be 1-60 characters. |  |
| X223.341.2310E.Nm103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125 "Entity's name." EIC: 77 "Service Location" |  |  |
| X223.341.2310E.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.NM103 must be populated with accepted AN characters. |  |
| X223.341.2310E.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.341.2310E.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.341.2310E.NM 105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.341.2310E.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.341.2310E.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.341.2310E.NM108.010 | NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 999 | R | IK403 = 7: "Invalid Code Value" | 2310E.NM108 must be "XX". |  |
| X223.341.2310E.NM109.010 | NM109 | Laboratory or Facility Primary Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2310E.NM109 must be present if 2310E.NM108 is present. |  |
| X223.341.2310E.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 77 "Service Location" | 2310E.NM109 must be valid according to the NPI algorithm. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|c\|} \hline \text { TA111 } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.341.2310E.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 77 "Service Location" | The first position of 2310E.NM109 must be a "1". |  |
| X223.341.2310E.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110: \text { "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.341.2310E.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.341.2310E.NM112.010 | NM112 | $\begin{array}{c}\text { Name Last or Organization } \\ \text { Name }\end{array}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.344.2310E.N3.010 | N3 | SERVICE FACILITY LOCATION ADDRESS |  | 1 | R | 2310E |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2310E.NM1 is present, 2310.N3 must be present. |  |
| X223.344.2310E.N3.020 | N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310E.N3 is allowed. |  |
| X223.344.2310E.N301.010 | N301 | $\begin{gathered} \hline \text { Laboratory or Facility } \\ \text { Address Line } \\ \hline \end{gathered}$ | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.N301 must be present. |  |
| X223.344.2310E.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N301 must contain at least one non-space character. |  |
| X223.344.2310E.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310E.N301 must be 1-55 characters. |  |
| X223.344.2310E.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" EIC: 77 "Service Location" |  |  |
| X223.344.2310E.N301.050 | N301 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310E.N301 must be populated with accepted AN characters. |  |
| X223.344.2310E.N301.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.344.2310E.N302.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.344.2310E.N302.020 | N302 | $\begin{gathered} \hline \text { Laboratory or Facility } \\ \text { Address Line } \\ \hline \end{gathered}$ | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If present, 2310E.N302 must contain at least one non- space character. |  |
| X223.344.2310E.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310E.N302 must be 1-55 characters. |  |
| X223.344.2310E.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" EIC: 77 "Service Location" |  |  |
| X223.344.2310E.N302.050 | N302 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N302 must be populated with accepted AN characters. |  |
| X223.344.2310E.N302.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.345.2310E.N4.010 | N4 | SERVICE FACILITY LOCATION CITY, STATE, ZIP CODE |  | 1 | R | 2310E |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2310E.N3 is present, 2301E.N4 must be present. |  |
| X223.345.2310E.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310E.N4 is allowed. |  |
| X223.345.2310E.N401.010 | N401 | $\begin{array}{\|c\|} \hline \text { Laboratory or Facility City } \\ \text { Name } \\ \hline \end{array}$ | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.N401 must be present. |  |
| X223.345.2310E.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N401 must contain at least two non-space characters. |  |
| X223.345.2310E.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2310E.N401 must be $2-30$ characters. |  |
| X223.345.2310E.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" EIC: 77 "Service Location" |  |  |
| X223.345.2310E.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N401 must be populated with accepted AN characters. |  |
| X223.345.2310E.N401.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.345.2310E.N402.010 | N402 | $\begin{array}{\|c} \hline \text { Laboratory or Facility State } \\ \text { or Province Code } \\ \hline \end{array}$ | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data | If 2310E.N404 is not present, 2310E.N402 must be present. |  |
| X223.345.2310E.N402.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.345.2310E.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..."" } \\ \text { CSC } 501: \text { "Entity's State/Province" } \\ \text { EIC: } 77 \text { "Service Location" } \\ \hline \end{array}$ | 2310E.N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.345.2310E.N403.010 | N403 | Laboratory or Facility Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2310E.N404 is not present, 2310E.N403 must be present. |  |
| $\begin{array}{\|l} \hline \begin{array}{l} \text { X223.345.2310E.N403.020 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.345.2310E.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 500: "Entity's Postal/Zip Code" EIC: 77 "Service Location" | 2310E.N403 must be a valid 9 digit zip code. | Valid Zip Code reference must be available for this edit. |
| X223.345.2310E.N404.010 | N404 | Country Code | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.345.2310E.N405.010 | N405 | LocationQualifier | ID | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.345.2310E.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.345.2310E.N407.010 | N407 | Country Subdivision Code | ID | 1-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\underset{\text { Elemment or }}{\text { Elemer }}$ | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.347.2310E.REF. 010 | REF | SERVICE FACILITY LOCATION SECONDARY IDENTIFICATION |  | 5 | s | 2310E |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 77 "Service Location" | 2310E.REF must not be present. | Segment not valid for Part A. 02/04: Companion Guide Note needed. |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.349.2310F.NM1.010 | NM1 | REFERRING PROVIDER NAME Loop |  |  |  |  | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | One iteration of this loop is allowed. |  |
| X223A1.12.2310F.NM1.020 | NM1 | REFERRING PROVIDER NAME |  | 1 | s | 2310F |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310F.NM1 with NM101 = "DN" is allowed. | Pass through only. |
| X223.349.2310F.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | DN | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.NM101 must be present. |  |
| X223.349.2310F.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310F.NM101 must be "DN". |  |
| X223.349.2310F.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.NM102 must be present. |  |
| X223.349.2310F.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310F.NM102 must be "1". |  |
| X223.349.2310F.NM103.010 | NM103 | Referring Provider Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.NM103 must be present. |  |
| X223.349.2310F.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310F.NM103 must contain at least one non-space |  |
| X223.349.2310F.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310F.NM103 must be 1-60 characters. |  |
| X223.349.2310F.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: DN "Referring Provider" |  |  |
| X223.349.2310F.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R |  | 2310F.NM103 must be populated with accepted AN characters. |  |
| X223.349.2310F.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.349.2310F.NM104.010 | NM104 | Referring Provider First Name | AN | 1-35 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM104 must contain at least one non-space character. |  |
| X223.349.2310F.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310F.NM104 must be 1-35 characters. |  |
| X223.349.2310F.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: DN "Referring Provider" |  |  |
| X223.349.2310F.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM104 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.349.2310F.NM104.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.349.2310F.NM105.010 | NM105 | $\begin{array}{\|c\|} \hline \text { Referring Provider Middle } \\ \text { Name } \\ \hline \end{array}$ | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM105 must contain at least one non-space character. |  |
| X223.349.2310F.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310F.NM105 must be 1-25 characters. |  |
| X223.349.2310F.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC: DN "Referring Provider" |  |  |
| X223.349.2310F.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM105 must be populated with accepted AN characters. |  |
| X223.349.2310F.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 514: "Entity's Middle Name" EIC: DN "Referring Provider" | The first position of 2310F.NM105 must be alphabetic (A...Z). |  |
| X223.349.2310F.NM105.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.349.2310F.NM 106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | Used" Element Present" | Must not be present. |  |
| X223.349.2310F.NM107.010 | NM107 | Referring Provider Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM107 must contain at least one non-space |  |
| X223.349.2310F.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310F.NM107 must be 1-10 characters. |  |
| X223.349.2310F.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: DN "Referrina Provider" |  |  |
| X223.349.2310F.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM107 must be populated with accepted AN characters. |  |
| X223.349.2310F.NM107.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.349.2310F.NM108.010 | NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error" CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: DN "Referring Provider" | 2310F.NM108 must not be present when 2300.REF with REFO1 = "P4" and REF02 is a valid VA identifier. | Only Trailblazer or JH (Texas). 01/20: Companion Guide Note needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.349.2310F.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: "Acknowledgement/Rejected for Missing Information..." CSC 745: "Identifie Qualifier" CSC 562: "nntiv's National Provider Identifier (NII)" EIC: DN "Refering Provider" | 2310F.NM108 must be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.349.2310F.NM108.030 | Nм108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310F. NM108 must be "XX". | Does not apply to Trailblazer or JH |
| X223.349.2310F.NM109.010 | Nм109 | $\begin{gathered} \hline \text { Referring Provider } \\ \text { Identifier } \\ \hline \end{gathered}$ | AN | 2-80 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | 2310F.NM109 must be present if 2310F.NM108 is present. |  |
| X223.349.2310F.NM109.015 |  |  |  |  |  |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | 2310F.NM109 must not = 2310A.NM109. |  |
| X223.349.2310F.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)"" EIC: DN "Referring Provider" CSCC | 2310F.NM109 must be valid according to the NPI algorithm. |  |
| X223.349.2310F.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: DN "Referring Provider" | The first position of 2310F.NM109 must be a "1". |  |
| X223.349.2310F.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.349.2310F.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.349.2310F.NM112.010 | NM112 | $\underset{\text { Name }}{\text { Name Last or Organization }}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.352.2310F.REF. 005 | REF | REFERRING PROVIDER SECONDARY IDENTIFICATION |  | 3 | s | 2310F |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2310F.NM109 is not present, 2310F.REF with REF01 = "1G" must be present. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.352.2310F.REF. 010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.352.2310F.REF.020 |  |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: DN "Referring Provider" | Only 1 iteration of 2310 F.REF with REF01 $=$ " 1 G " is allowed. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.352.2310F.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310F.REF01 must not be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.352.2310F.REF01.010 | REF01 | Reference Identification Qualifier |  |  |  |  |  | OB, 1G, G2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.REF01 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.352.2310F.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: DN "Referring Provider" | 2310F.REF01 must be "1G". |  |
| X223.352.2310F.REF02.010 | REF02 | Referring Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.REF02 must be present. |  |
| X223.352.2310F.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 133: "Entity's UPIN" <br> EIC: DN "Referring Provider" | 2310F.REFO2 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| X223.352.2310F.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.352.2310F.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.354.2320.010 |  | OTHER SUBSCRIBER LOOP |  |  |  | 2320 | 10 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | If 2000B.SBR01 = "P", then up to ten iterations of the 2320 loop are allowed. |  |
| X223.354.2320.SBR. 010 | SBR | OTHER SUBSCRIBER INFORMATION |  | 1 | s | 2320 | 1 |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2320 . \mathrm{SBR}$ is allowed. |  |
| X223.354.2320.SBR01.010 | SBR01 | Payer Responsibility Sequence Number Code | ID | 1-1 | R |  |  | $\underset{U}{A, B, C, D, E, F, G, H, P, S, T,}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.SBR01 must be present. |  |
| X223.354.2320.SBR01.020 | SBR01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2320.SBR01 must be valid values. |  |
| X223.354.2320.SBR01.030 | SBR01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | Each iteration of 2320.SBR01 must contain a different code value (each code value may appear in one and only one SBR01 element). |  |
| X223.354.2320.SBR01.040 | SBR01 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> CSC 286: "Other payer's <br> Explanation of Benefits/payment information" | If 2000B.SBR01 = "S", 2320.SBR01 ="P" must be present. |  |
| X223.354.2320.SBR02.010 | SBR02 | Individual Relationship Code | ID | 2-2 | R |  |  | $01,18,19,20,21,39,40,53$, G8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.SBR02 must be present. |  |
| X223.354.2320.SBR02.020 | SBR02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2320.SBR02 must be valid values. |  |
| X223.354.2320.SBR03.004 | SBR03 | Insured Group or Policy Number | AN | 1-50 | s |  |  |  | 999 | E | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | 2320.SBR03 must not equal 2330A.NM109 |  |
| X223.354.2320.SBR03.006 | SBR03 |  |  |  |  |  |  |  | 277 | T | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error" CSC 163: "Entity's Policy Number" CSC 732 "Information submitted inconsistent with billing guidelines." EIC: GB "Other Insured" |  |  |
| X223.354.2320.SBR03.010 | SBR03 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR03 must contain at least one non-space character. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.354.2320.SBR03.020 | SBR03 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.SBR03 must be 1-50 characters. |  |
| X223.354.2320.SBR03.030 | SBR03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 163: "Entity's policy number" EIC: GB "Other Insured" |  |  |
| X223.354.2320.SBR03.040 | SBR03 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2320.SBR03 must be populated with accepted AN characters. |  |
| X223.354.2320.SBR03.050 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.354.2320.SBR04.010 | SBR04 | Other Insured Group Name | AN | 1-60 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.SBR04 is present, 2320.SBR03 must not be present. |  |
| X223.354.2320.SBR04.020 | SBR04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR04 must contain at least one non-space character. | 999 |
| X223.354.2320.SBR04.030 | SBR04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.SBR04 must be 1-60 characters. |  |
| X223.354.2320.SBR04.040 | SBR04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 663: "Entity's Group Name" EIC: GB "Other Insured" |  |  |
| X223.354.2320.SBR04.050 | SBR04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR04 must be populated with accepted AN characters. |  |
| X223.354.2320.SBR04.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.354.2320.SBR05.010 | SBR05 | Insurance Type Code | ID | 1-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.354.2320.SBR06.010 | SBR06 | Coordination of Benefits Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.354.2320.SBR07.010 | SBR07 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.354.2320.SBRR08.010 | SBR08 | Employment Status Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.354.2320.SBR09.010 | SBR09 | Claim Filing Indicator Code | ID | 1-2 | s |  |  | 11, 12, 13, 14, 15, 16, 17, AM, BL, CH, CI, DS, FI, HM, LM, MA, MB, MC, OF, TV, VA, WC, zZ | 999 | R | IK403 = 7: "Invalid Code Value" | 2320.SBR09 must be valid values. |  |
| X223.354.2320.SBR09.020 | SBR09 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 480: Other Carrier Claim filing } \\ & \text { indicator is missing or invalid } \end{aligned}$ | 2320.SBR09 must not be = "MA" or "MB". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.358.2320.CAS. 010 | CAS | claim level ADJUSTMENTS |  | 5 | s | 2320 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" <br> OR <br> IK304 = 2: "Unexpected Segment" | If 2320.CAS is present, 2320.SBR must be present. |  |
| X223.358.2320.CAS. 020 | CAS |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 5 iterations of 2320.CAS are allowed. |  |
| X223.358.2320.CAS01.010 | CAS01 | $\begin{array}{\|c} \hline \begin{array}{c} \text { Claim Adjustment Group } \\ \text { Code } \end{array} \\ \hline \end{array}$ | ID | 1-2 | R |  |  | CO, CR, OA, PI, PR | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2320.CAS01 must be present. |  |
| X223.358.2320.CAS01.020 | CAS01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2320.CAS01 must be valid values. |  |
| X223.358.2320.CAS01.030 edit deactivated | CAS01 |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.358.2320.CAS02.010 | CAS02 | Adjustment Reason Code | ID | 1-5 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.CAS02 must be present. |  |
| X223.358.2320.CAS02.020 | CAS02 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error". CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS02 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS02.030 | CAS02 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CASO2 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS03.010 | CAS03 | Adjustment Amount | R | 1-18 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2320.CAS03 must be present. |  |
| X223.358.2320.CAS03.020 | CAS03 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS03 must be numeric. |  |
| X223.358.2320.CAS03.030 | CAS03 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2320.CASO3 must be >=-99,999,999.99. and } \\ & <=99,999,999.99 \text {. } \end{aligned}$ |  |
| X223.358.2320.CAS03.040 | CAS03 |  |  |  |  |  |  |  | 277 | T | cscC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  |
| X223.358.2320.CAS03.050 | CAS03 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero" } \\ & \text { CSC 519: "Adjustment Amount" } \\ & \text { EIC: GB "Other Insured" } \\ & \hline \end{aligned}$ | $2320 . C A S 03$ must not $=0$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{array}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.358.2320.CAS03.060 | CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2320.CAS03 is limited to 0,1 or 2 decimal positions. |  |
| X223.358.2320.CAS04.010 | CAS04 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS04 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.358.2320.CAS04.015 | CAS04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" |  |  |
| X223.358.2320.CAS04.020 | CAS04 |  |  |  |  |  |  |  | 277 | T | CSCC AT: "Acknowledgement <br> Rejected for Invalid Information..." <br> CSC $694:$ "Amount must not be equal <br> to zero: <br> CSC 520: "Adjustment Quantity" <br> EIC: GB "Other Insured" | 2320. CAS04 must not $=0$. |  |
| X223.358.2320.CAS05.010 | CAS05 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS05 is present, 2320.CAS02 must be present. |  |
| X223.358.2320.CAS05.020 | CAS05 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement / <br> Rejected for relational field in error." <br> CSC 521: Adjustment Reason Code <br> CSC 516: Adjudication or Payment <br> Date <br> EIC: GB "Other Insured" <br> CSC | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, <br> 2320.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. 01/08: Add clause to check for the 2330B.DTP. |
| X223.358.2320.CAS05.030 | CAS05 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement// <br> Rejected for relational field in error." <br> CSC 521: Adjustment Reason Code <br> CSC 516: Adjudication or Payment <br> Date <br> EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CASO5 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS06.010 | CAS06 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | \|K403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS06 is present, 2320.CAS05 must be present. |  |
| X223.358.2320.CAS06.020 | CAS06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS06 must be numeric. |  |
| X223.358.2320.CAS06.030 | CAS06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS06 must be >=-99,999,999.99. and $<=99,999,999.99$. |  |
| X223.358.2320.CAS06.040 | CAS06 |  |  |  |  |  |  |  | 277 | T |  <br> CSC E19: "Adjustment Amount EIC: GB Other Insured" CSCC A7: "Acknowledgement |  |  |
| X223.358.2320.CAS06.050 | CAS06 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | /Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" <br> EIC: GB "Other Insured" | 2320.CAS06 must not $=0$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.358.2320.CAS06.060 | CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2320.CAS06 is limited to 0, 1 or 2 decimal positions. |  |
| X223.358.2320.CAS07.010 | CAS07 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS07 is present, 2320.CAS05 must be present. |  |
| X223.358.2320.CAS07.020 | CAS07 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS07 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.358.2320.CAS07.025 | CAS07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" |  |  |
| X223.358.2320.CAS07.030 | CAS07 |  |  |  |  |  |  |  | 277 | T | $\qquad$ Rejected for Invalid Information CSC 694: "Amount must not be equal o zero" ICSC 520: "Adiustment Ouantity" EIC: GB "Other Insured" | 2320.CAS07 must not $=0$. |  |
| X223.358.2320.CAS08.010 | CAS08 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS08 is present, 2320.CAS05 must be present. |  |
| X223.358.2320.CAS08.020 | CAS08 |  |  |  |  |  |  |  | 277 | C | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, <br> 2320.CAS08 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS08.030 | CAS08 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, <br> 2320.CAS08 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573", | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS09.010 | CAS09 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data | If 2320.CAS09 is present, 2320.CAS08 must be present. |  |
| X223.358.2320.CAS09.020 | cas09 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | $2320 . C A S 09$ must be numeric. |  |
| X223.358.2320.CAS09.030 | CAS09 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.CAS09 must be >=-99,999,999.99. and $<=99,999,999.99$. |  |
| X223.358.2320.CAS09.040 | CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  |
| X223.358.2320.CAS09.050 | CAS09 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { IRejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero" } \\ & \text { CSC 519: "Adjustment Amount" } \\ & \text { EIC: GB "Other Insured" } \\ & \hline \end{aligned}$ | 2320.CAS09 must not $=0$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { anx. } \end{gathered}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{array}\right\|$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.358.2320.CAS09.060 | CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2320.CAS09 is limited to 0,1 or 2 decimal positions. |  |
| X223.358.2320.CAS10.010 | CAS10 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS10 is present, 2320.CAS08 must be present. |  |
| X223.358.2320.CAS10.020 | CAS10 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS10 must be $1-15$ digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.358.2320.CAS10.025 | CAS10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" |  |  |
| X223.358.2320.CAS10.030 | CAS10 |  |  |  |  |  |  |  | 277 | T |  | 2320.CAS10 must not $=0$. |  |
| X223.358.2320.CAS11.010 | CAS11 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS11 is present, 2320.CAS08 must be present. |  |
| X223.358.2320.CAS11.020 | CAS11 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS11 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS11.030 | CAS11 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, <br> 2320.CAS11 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS12.010 | CAS12 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | If 2320.CAS12 is present, 2320.CAS11 must be present. |  |
| X223.358.2320.CAS12.020 | CAS12 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | $2320 . C A S 12$ must be numeric. |  |
| X223.358.2320.CAS12.030 | CAS12 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.CAS12 must be >=-99,999,999.99. and $<=99,999,999.99$. |  |
| X223.358.2320.CAS12.040 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  |
| X223.358.2320.CAS12.050 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement 1Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2320.CAS12 must not $=0$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.358.2320.CAS12.060 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2320.CAS12 is limited to 0, 1 or 2 decimal positions. |  |
| X223.358.2320.CAS13.010 | CAS13 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS13 is present, 2320.CAS11 must be present. |  |
| X223.358.2320.CAS13.020 | CAS13 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS13 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.358.2320.CAS13.025 | CAS13 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" |  |  |
| X223.358.2320.CAS13.030 | CAS13 |  |  |  |  |  |  |  | 277 | T | $\qquad$ Rejected for Invalid Information CSC 694: "Amount must not be equal o zero" ICSC 520: "Adiustment Ouantity" EIC: GB "Other Insured" | 2320.CAS13 must not $=0$. |  |
| X223.358.2320.CAS14.010 | CAS14 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS14 is present, 2320.CAS11 must be present. |  |
| X223.358.2320.CAS14.020 | CAS14 |  |  |  |  |  |  |  | 277 | C | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, <br> 2320.CAS14 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS14.030 | CAS14 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, <br> 2320.CAS14 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573", | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS15.010 | CAS15 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data | If 2320. CAS15 is present, 2320.CAS14 must be present. |  |
| X223.358.2320.CAS15.020 | CAS15 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | $2320 . C A S 15$ must be numeric. |  |
| X223.358.2320.CAS15.030 | CAS15 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.CAS15 must be >=-99,999,999.99. and $<=99,999,999.99$. |  |
| X223.358.2320.CAS15.040 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  |
| X223.358.2320.CAS15.050 | CAS15 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { IRejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero" } \\ & \text { CSC 519: "Adjustment Amount" } \\ & \text { EIC: GB "Other Insured" } \\ & \hline \end{aligned}$ | $2320 . C A S 15$ must not $=0$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { anx. } \end{gathered}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.358.2320.CAS15.060 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2320.CAS15 is limited to 0,1 or 2 decimal positions. |  |
| X223.358.2320.CAS16.010 | CAS16 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | $\begin{aligned} & \text { \|K403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If 2320.CAS16 is present, 2320.CAS14 must be present. |  |
| X223.358.2320.CAS16.020 | CAS16 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS16 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.358.2320.CAS16.025 | CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement lRejected for Invalid Information..." CCS 512: "engtth invalid for receiver's application system" CSC 520: "dajustment Quantity" EIC: GB "Other Insured" |  |  |
| X223.358.2320.CAS16.030 | CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" CSC 520: "Adjustment Quantity" EIC. GB "Other Insured" | 2320.CAS16 must not $=0$. |  |
| X223.358.2320.CAS17.010 | CAS17 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | If 2320.CAS17 is present, 2320.CAS14 must be present. |  |
| X223.358.2320.CAS17.020 | CAS17 |  |  |  |  |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A8: "ACknowledgement// } \\ & \text { Rejected for relational field in error." } \\ & \text { CSC 521: Ajdustent Reason Code } \\ & \text { CSC 516: Adjudication or Payment } \\ & \text { Date } \\ & \text { EIC: GB "Other Insured" } \end{aligned}$ | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS17 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS17.025 | CAS17 |  |  |  |  |  |  |  | 277 | C | CSCC A8: "ACknowledgement/I <br> Rejected for relational field in error." <br> CSC 521: Ajjustment Reason ocde <br> CSC 516: Adjudication or Payment <br> Date <br> EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, <br> 2320.CAS17 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS18.010 | CAS18 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If 2320.CAS18 is present, 2320.CAS17 must be present. |  |
| X223.358.2320.CAS18.020 | CAS18 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2320.CAS18 must be numeric. |  |
| X223.358.2320.CAS18.030 | CAS18 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS18 must be $>=-99,999,999.99$. and |  |
| X223.358.2320.CAS18.040 | CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement 1Rejected for Invalid Intomation..." CSC 512: "Length invalid for receiver's application system" CCS 519: "daustment Amount" EIC: GB "Other Insured" |  |  |
| X223.358.2320.CAS18.050 | CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" <br> EIC. GB "Other Insured" | $2320 . C A S 18$ must not $=0$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.358.2320.CAS18.060 | CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2320.CAS18 is limited to 0,1 or 2 decimal positions. |  |
| X223.358.2320.CAS19.010 | CAS19 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data | 2lf 2320.CAS19 is present, 2320.CAS17 must be present. |  |
| X223.358.2320.CAS19.020 | CAS19 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS19 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.358.2320.CAS19.025 | CAS19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" |  |  |
| X223.358.2320.CAS19.030 | CAS19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" | 2320.CAS19 must not $=0$. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.364.2320.AMT.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.364.2320.AMT. 020 | AMT | COB PAYER PAID AMOUNT |  | 1 | s | 2320 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.AMT with AMT01 = "D" is allowed. |  |
| X223.364.2320.AMT. 030 | AMT |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> CSC 286: "Other payer's Explanation of Benefits/payment information" | If 2000B.SBR01 = "S" then one 2320 loop with an AMT segment with AMT01 = "D" must be present. |  |
| X223.364.2320.AMT. 040 | AMT |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 41: Special handling required at payer site CSC 286: Other payer's Explanation of Benefits/payment information CSC 732: Information submitted inconsistent with billing guidelines | If 2000B.SBR01 = "S" then only one iteration of 2320 loop containing an AMT with AMT01 equal to " D " is allowed. |  |
| X223.364.2320.AMT01.010 | AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | D | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.AMT01 must be present. |  |
| X223.364.2320.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2320.AMT01 must be "D". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.364.2320.AMT01.030 | AMT01 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 41: Special handling required at payer site <br> CSC 286: Other payer's Explanation of Benefits/payment information CSC 732: Information submitted inconsistent with billing guidelines | If 2000B.SBR01 $=$ "P" then 2320.AMT01 must not be present. |  |
| X223.364.2320.AMT02.005 | AMT02 | Payer Paid Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.AMT02 must be present. |  |
| X223.364.2320.AMT02.010 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.AMT02 must be numeric. |  |
| X223.364.2320.AMT02.015 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.364.2320.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.AMT02 must be >= 0 and << $99,999,999.99$. |  |
| X223.364.2320.AMT02.030 | AmT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 512: "Length invalid for receiver's application system" <br> CSC 183: "Amount entity has paid" CSC 286: "Other payer's Explanation of Benefits/payment information" EIC: PR "Payer" |  |  |
| X223.364.2320.AMT02.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.364.2320.AMT02.050 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 183: "Amount entity has paid" CSC 286: "Other payer's Explanation of Benefits/payment information" EIC: PR "Payer" | 2320.AMT02 is limited to 0, 1 or 2 decimal positions. |  |
| X223.364.2320.AMT02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.364.2320.AMT03.010 | AMT03 | CreditDebit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.365.2320.AMT. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.365.2320.AMT. 020 | AMT | REMAINING PATIENT LIABILITY |  | 1 | s | 2320 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.AMT with AMT01 = "EAF" is allowed. | pass-thru, syntax only. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { anx. } \end{gathered}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.365.2320.AMT. 025 | AMT |  |  |  |  |  |  |  | 277 | T | CSCC A8: "Acknowledgement/ Rejected for relational field..." CSC 6: Balance due from the subscriber <br> EIC: GB "Other Insured" | If 2430 AMT (EAF) is present for the same payer, the 2320 AMT (EAF) must not be present. |  |
| X223.365.2320.AMT01.010 | AmT01 | AmountQualifier Code | ID | 1-3 | R |  |  | EAF | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.AMT01 must be present. |  |
| X223.365.2320.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2320.AMT01 must be "EAF". |  |
| X223.365.2320.AMT02.005 | AMT02 | Remaining Patient Liability <br> Amount | R | 1-18 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2320.AMT02 must be present. |  |
| X223.365.2320.AMT02.010 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .AMT02 must be numeric. |  |
| X223.365.2320.AMT02.015 | AmT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 6: "Balance due from the subscriber" EIC: GB "Other Insured" | 2320.AMT02 must be >= 0 . |  |
| X223.365.2320.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.AMT02 must be <= 99,999,999.99. |  |
| X223.365.2320.AMT02.030 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 6: "Balance due from the subscriber" EIC: GB "Other Insured" |  |  |
| X223.365.2320.AMT02.040 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 6: "Balance due from the subscriber" <br> EIC: GB "Other Insured" | 2320.AMTO2 is limited to 0,1 or 2 decimal positions. |  |
| X223.365.2320.AMT03.010 | AMT03 | CreditDebit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.366.2320.AMT. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.366.2320.AMT. 020 | AMT | COB TOTAL NONCOVERED AMOUNT |  | 1 | s | 2320 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.AMT with AMT01 = "A8" is allowed. |  |
| X223.366.2320.AMT01.010 | AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | A8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.AMT01 must be present. |  |
| X223.366.2320.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2320.AMT01 must be "A8". |  |
| X223.366.2320.AMT02.005 | AMT02 | Non-Covered Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.AMT02 must be present. |  |
| X223.366.2320.AMT02.010 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.AMT02 must be numeric. |  |
| X223.366.2320.AMT02.015 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max | $\begin{array}{\|c} \text { Usage } \\ \text { Reg. } \end{array}$ | Loop | Loop | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.366.2320.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.AMT02 must be >= 0 and << 99,999,999.99. |  |
| X223.366.2320.AMT02.030 | AmT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 596: "Non-covered Charge Amount" <br> EIC. GB "Other Insured" |  |  |
| X223.366.2320.AMT02.040 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.366.2320.AMT02.050 | AmT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 596: "Non-covered Charge Amount" EIC: GB "Other Insured" | 2320.AMT02 is limited to 0, 1 or 2 decimal positions. |  |
| X223.366.2320.AMT02.060 | AMT02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 596: "Non-covered Charge Amount" <br> EIC: GB "Other Insured" | The sum of all 2320.AMT02 (with AMT01 = "A8") elements must $=2300$. CLMO2 . |  |
| X223.366.2320.AMT03.010 | AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.367.2320.01.010 | 이 | OTHER INSURANCE COVERAGE INFORMATION |  | 1 | R | 2320 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2320.SBR is present, 2320.01 must be present. |  |
| X223.367.2320.01.020 | ol |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.01 is allowed. |  |
| X223.367.2320.0101.010 | 0101 | Claim Filing Indicator Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.367.2320.0102.010 | 0102 | $\begin{array}{\|c\|} \hline \text { Claim Submission Reason } \\ \text { code } \end{array}$ | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.367.2320.0103.010 | 0103 | Benefits Assignment Certlfication Indicator | ID | 1-1 | R |  |  | N, W, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.0103 must be present. |  |
| x223.367.2320.0103.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.367.2320.0103.020 | 0103 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2320.0103 must be valid values. |  |
| X223.367.2320.0104.010 | 0104 | Patient Signature Source | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.367.2320.0105.010 | 0105 | Provider Agreement Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.367.2320.0106.010 | 0106 | $\begin{gathered} \text { Release of Information } \\ \text { Code } \end{gathered}$ | ID | 1-1 | R |  |  | I, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.0106 must be present. |  |
| x223.367.2320.0106.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.367.2320.0106.020 | 0106 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2320.0106 must be valid values. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.MIA.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA.020 | MIA | INPATIENT ADJUDICATION INFORMATION |  | 1 | s | 2320 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.MIA is allowed. |  |
| X223.369.2320.M1A01.010 | MIA01 | Covered Days or Visits Count | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.MIA01 must be present. |  |
| X223.369.2320.MIA01.020 | MIA01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2320.MIA01 must be numeric. |  |
| X223.369.2320.M1A01.030 | MIA01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 456: "Covered Day(s)" | 2320.MIA01 must be >= 0 . |  |
| X223.369.2320.M1A02.010 | MIA02 | Monetary Amount | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| X223.369.2320.M1A03.010 | M1A03 | LIfetime Psychiatric Days | R | 1-15 | s |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2320.MIA03 must be 1-15 characters. |  |
| X223.369.2320.M1A03.020 | M1A03 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.MIA03 must be numeric. |  |
| X223.369.2320.M1A03.030 | MIA03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 582: "Lifetime Psychiatric Days Count" | 2320.MIA03 must be >= 0 . |  |
| X223.369.2320.M1A04.010 | MIA04 | Claim DRG Amount | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MIA04 must be >= 0 and <= 99,999,999.99. |  |
| X223.369.2320.MIA04.015 | MIA04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 532: "Claim DRG Amount" |  |  |
| X223.369.2320.MIA04.020 <br> edit deactivated <br> X223.369.2320.MIA04.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.M1A04.040 | MIA04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> 1Rejected for Invalid Information..." <br> CSC 697: "Invalid Decimal Precision" <br> CSC 532: "Claim DRG Amount" | 2320.MIA04 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.M1A05.010 | MIA05 | Claim Payment Remark <br> Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ <br> Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." <br> CSCC | If 2330B.DTP03 with DTP01 = "573" is present, 2320.MIA05 must be a valid Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.M1A05.015 | MIA05 |  |  |  |  |  |  |  | 277 | C | $\begin{aligned} & \text { CSCC A8: "Acknowledgement / } \\ & \text { Rejected for relational field in error." } \\ & \text { CSC 634: "Remark Code" } \\ & \text { CSC 187: "Date(s) of service." } \\ & \hline \end{aligned}$ | If DTP03 with DTP01 = "573" is not present, 2320.MIA05 must be a valid Remark Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.M1A06.010 | MIA06 | Claim Disproportionate Share Amount | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MIA06 must be >= 0 and < $=99,999,999.99$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.MIA06.015 | MIA06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 531: "Claim Disproportionate Share Amount" |  |  |
| $\begin{aligned} & \text { X223.369.2320.MIA06.020 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA06.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA06.040 | MIA06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 531: "Claim Disproportionate Share Amount" | 2320.MIA06 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.M1A07.010 | MIA07 | Claim MSP Pass-through Amount | R | 1-18 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.MIA07 must be > $=0$ and $<=99,999,999.99$. |  |
| X223.369.2320.MIA07.015 | MIA07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 537: "Claim MSP Pass-through Amount" |  |  |
| X223.369.2320.MIA07.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA07.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA07.040 | MIA07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 537: "Claim MSP Pass-through Amount" | 2320.MIA07 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA08.010 | MIA08 | Claim PPS Capital Amount | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MIA08 must be >= 0 and <= 99,999,999.99. |  |
| X223.369.2320.MIA08.015 | MIA08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 539: "Claim PPS Capital Amount" |  |  |
| X223.369.2320.MIA08.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.369.2320.MIA08.030 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA08.040 | MIA08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 697: "Invalid Decimal Precision" CSC 539: "Claim PPS Capital Amount | 2320.MIA08 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.M1A09.010 | MIA09 | PPS-Capital FSP DRG Amount | R | 1-18 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.MIA09 must be $>=0$ and $<=99,999,999.99$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.M1A09.015 | MIA09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 620: "PPS-Capital FSP DRG Amount" |  |  |
| X223.369.2320.MIA09.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { En2rueacurvaleu } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA09.040 | MIA09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 620: "PPS-Capital FSP DRG Amount" | 2320.MIA09 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.M1A10.010 | MIA10 | $\underset{\substack{\text { PPS-Capital HSP DRG } \\ \text { Amount }}}{ }$ | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MIA10 must be >= 0 and <= 99,999,999.99. |  |
| X223.369.2320.M1A10.015 | MIA10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 621: "PPS-Capital HSP DRG Amount" |  |  |
| $\begin{aligned} & \text { X223.369.2320.MIA10.020 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.369.2320.MIA10.030 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA10.040 | MIA10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 621: "PPS-Capital HSP DRG Amount" | 2320.MIA10 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.M1A11.010 | MIA11 | PPS-Capital DSH DRG Amount | R | 1-18 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.MIA11 must be >= 0 and <= 99,999,999.99. |  |
| X223.369.2320.M1A11.015 | MIA11 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 618: "PPS-Capital DSH DRG Amount" |  |  |
| X223.369.2320.MIA11.020 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.369.2320.MIA11.030 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA11.040 | MIA11 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 618: "PPS-Capital DSH DRG Amount" | 2320.MIA11 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.M1A12.010 | MIA12 | Old Capital Amount | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MIA12 must be >= 0 and << 99,999,999.99. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.MIA12.015 | MIA12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 603: "Old Capital Amount" |  |  |
| X223.369.2320.MIA12.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA12.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA12.040 | MIA12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 603: "Old Capital Amount" | 2320.MIA12 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.M1A13.010 | MIA13 | PPS-Capital IME Amount | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MIA13 must be >= 0 and << 99,999,999.99. |  |
| X223.369.2320.MIA13.015 | MIA13 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 622: "PPS-Capital IME Amount" |  |  |
| X223.369.2320.MIA13.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA13.030 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA13.040 | MIA13 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 622: "PPS-Capital IME Amount" | 2320.MIA13 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA14.010 | MIA14 | PPS-Operating Hospital Speclfic DRG Amount | R | 1-18 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.MIA14 must be > $=0$ and $<=99,999,999.99$. |  |
| X223.369.2320.MIA14.015 | MIA14 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 624: "PPS-Operating Hospital Specific DRG Amount" |  |  |
| X223.369.2320.MIA14.020 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA14.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA14.040 | MIA14 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 624: "PPS-Operating Hospital Specific DRG Amount" | 2320.MIA14 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA15.010 | MIA15 | Cost Report Day Count | R | 1-15 | s |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2320.MIA15 must be 1-15 characters. |  |
| X223.369.2320.MIA15.020 | MIA15 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2320 .MIA15 must be numeric. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Reg. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.M1A15.030 | MIA15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 693: "Amount must be greater than or equal to zero" CSC 552: "Cost Report Day Count" | 2320.MIA15 must be >= 0 . |  |
| X223.369.2320.M1A16.010 | MIA16 | PPS-Operating Federal Specific DRG Amount | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MIA16 must be >= 0 and <= 99,999,999.99. |  |
| X223.369.2320.M1A16.015 | MIA16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 623: "PPS-Operating Federal Specific DRG Amount" |  |  |
| $\begin{aligned} & \text { X223.369.2320.MIA16.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA16.030 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA16.040 | MIA16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 623: "PPS-Operating Federal Specific DRG Amount" | 2320.MIA16 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.M1A17.010 | MIA17 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Claim PPS Capital Outlier } \\ \text { Amount } \end{array} \\ \hline \end{array}$ | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MIA17 must be >= 0 and <= 99,999,999.99. |  |
| X223.369.2320.M1A17.015 | MIA17 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 540: "Claim PPS Capital Outlier Amount" |  |  |
| $\begin{aligned} & \text { X223.369.2320.MIA17.020 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.369.2320.MIA17.030 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.M1A17.040 | MIA17 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 540: "Claim PPS Capital Outlier Amount" | 2320.MIA17 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.M1A18.010 | MIA18 | $\begin{gathered} \hline \text { Claim Indirect Teaching } \\ \text { Amount } \end{gathered}$ | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MIA18 must be >= 0 and $<=99,999,999.99$. |  |
| X223.369.2320.M1A18.015 | MIA18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 536: "Claim Indirect Teaching Amount" |  |  |
| X223.369.2320.MIA18.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.369.2320.MIA18.030 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. Max. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.MIA18.040 | MIA18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 536: "Claim Indirect Teaching Amount" | 2320.MIA18 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA19.010 | MIA19 | Non-Payable Professional Component Amount | R | 1-18 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.MIA19 must be >= 0 and <= 99,999,999.99. |  |
| X223.369.2320.M1A19.015 | MIA19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 597: "Non-payable Professional Component Amount" |  |  |
| X223.369.2320.MIA19.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA19.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA19.040 | MIA19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 597: "Non-payable Professional Component Amount" | 2320.MIA19 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA20.010 | MIA20 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8: "ACknowledgement / <br> Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 $=$ "573" is present, 2320.MIA20 must be a valid Remark Code on the date in 2330B.DTP03 when DTP01 = " 573 ". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA20.020 | MIA20 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If DTP03 with DTP01 = " 573 " is not present, 2320.MIA20 must be a valid Remark Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA21.010 | MIA21 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in erro CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = " 573 " is present, 2320.MIA21 must be a valid Remark Code on the date in 2330B.DTP03 when DTP01 = "573" | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA21.020 | MIA21 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error. CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If DTP03 with DTP01 = "573" is not present, 2320.MIA21 must be a valid Remark Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA22.010 | MIA22 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error. CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.MIA22 must be a valid Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA22.020 | MIA22 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If DTP03 with DTP01 $=$ " 573 " is not present, 2320.MIA22 must be a valid Remark Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA23.010 | MIA23 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.MIA23 must be a valid Remark Code on the date in 2330B.DTP03 when DTP01 = " 573 ". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA23.020 | MIA23 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement / CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If DTP03 with DTP01 = " 573 " is not present, 2320.MIA23 must be a valid Remark Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Remittance Advice Remark Code reference must be available for this edit. |


| 8371 Edit Reference | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.MIA24.010 | MIA24 | PPS-Capital Exception Amount | R | 1-18 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.MIA24 must be >= 0 and <= 99,999,999.99. |  |
| X223.369.2320.MIA24.015 | MIA24 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 619: "PPS-Capital Exception Amount" |  |  |
| X223.369.2320.MIA24.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA24.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.M1A24.040 | MIA24 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 619: "PPS-Capital Exception Amount" | 2320.MIA24 is limited to 0, 1 or 2 decimal positions. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.374.2320.MOA. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.374.2320.MOA. 020 | moA | OUTPATIENT ADJUDICATION |  | 1 | s | 2320 |  |  | 999 | R | IK304 = 5: "Segment Exceeds | Only one iteration of 2320.MOA is allowed. |  |
| X223.374.2320.MOA01.010 | MOA01 | Reimbursement Rate | R | 1-10 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2320 .MOA01 must be numeric. |  |
| X223.374.2320.MOA01.020 | MOA01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2320 . MOA01 must be >= 0.0 and $<=1.0$. | 2320.MOA01 must be a percentage expressed as a decimal. |
| X223.374.2320.MOA01.030 | MOA01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 631: "Reimbursement Rate" | 2320.MOA01 is limited to 0,1 or 2 decimal positions. |  |
| $\begin{array}{\|l\|} \hline \begin{array}{l} \text { X223.374.2320.MOA02.010 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.374.2320.MOA02.020 | MOA02 | $\begin{gathered} \hline \text { Claim HCPCS Payable } \\ \text { Amount } \\ \hline \end{gathered}$ | R | 1-18 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.MOA02 must be >= 0 and $<=99,999,999.99$. |  |
| X223.374.2320.MOA02.030 | MOA02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 574: "HCPCS Payable Amount Home Health" |  |  |
| $\begin{array}{\|l\|} \hline \begin{array}{l} \text { 2223.374.2320.MOA02.040 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.374.2320.MOA02.050 | MOA02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 574: "HCPCS Payable Amount Home Health" | 2320.MOA02 is limited to 0,1 or 2 decimal positions. |  |
| X223.374.2320.MOA03.010 | MOA03 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = "573" is present, 2320.MOA03 must be a valid Remark Code on the date in 2330B.DTP03 when DTP01 = " 573 ". | Valid Remittance Advice Remark Code reference must be available for this edit. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Reg. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.374.2320.MOA03.020 | MOA03 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "ACknowledgement/ Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If DTP03 with DTP01 = "573" is not present, 2320.MOA03 must be a valid Remark Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA04.010 | MOA04 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.MOA04 must be a valid Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA04.020 | MOA04 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error. CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If DTP03 with DTP01 = "573" is not present, 2320.MOA04 must be a valid Remark Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA05.010 | MOA05 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A8: "Acknowledgement } I \\ & \text { Rejected for relational field in error." } \\ & \text { CSC 634: "Remark Code" } \end{aligned}$ $\frac{\text { CsC 187: "Date(s) of service." }}{}$ | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.MOA05 must be a valid Remark Code on the date in 2330B. DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA05.020 | MOA05 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If DTP03 with DTP01 = "573" is not present, 2320.MOA05 must be a valid Remark Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA06.010 | MOA06 | Remark Code | AN | 1-50 | s |  |  |  | 277 | C | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = "573" is present, 2320.MOA06 must be a valid Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA06.020 | MOA06 |  |  |  |  |  |  |  | 277 | C | CSCC A8: "Acknowledgement/ Rejected for relational field in error. CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If DTP03 with DTP01 = "573" is not present, 2320.MOA06 must be a valid Remark Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA07.010 | MOA07 | Remark Code | AN | 1-50 | s |  |  |  | 277 | C | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.MOA07 must be a valid Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA07.020 | MOA07 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If DTP03 with DTP01 = "573" is not present, 2320.MOA07 must be a valid Remark Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| $\begin{aligned} & \text { X223.374.2320.MOA08.010 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.374.2320.MOA08.020 | MOA08 | $\begin{gathered} \hline \text { Claim ESRD Payment } \\ \text { Amount } \\ \hline \end{gathered}$ | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MOA08 must be >= 0 and $<=99,999,999.99$. |  |
| X223.374.2320.MOA08.030 | MOA08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 534: "Claim ESRD Payment Amount" |  |  |
|  <br> $\begin{array}{l}\text { 2223.374.2320.MOA08.040 } \\ \text { edit deactivated }\end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.374.2320.MOA08.050 | MOA08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 534: "Claim ESRD Payment Amount" | 2320.MOA08 is limited to 0, 1 or 2 decimal positions. |  |
| X223.374.2320.MOA09.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. <br> Max | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.374.2320.MOA09.020 | MOA09 | Non-Payable Professional Component Amount | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MOA09 must be >= 0 and <= 99,999,999.99. |  |
| X223.374.2320.MOA09.030 | MOA09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 598: "Non-payable Professional Component Billed Amount" |  |  |
| $\begin{aligned} & \text { X223.374.2320.MOA09.040 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.374.2320.MOA09.050 | MOA09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 598: "Non-payable Professional Component Billed Amount" | 2320.MOA09 is limited to 0,1 or 2 decimal positions. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.377.2330A.NM1.010 | NM1 | OTHER SUBSCRIBER NAME |  | 1 | R | 2330A | 1 |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2320.SBR is present, 2330A.NM1 must be present. |  |
| х223.377.2330A.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2330A.NM1 is allowed. |  |
| X223.377.2330A.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 1 | 999 | R | K 403 = 1: "Required Data Element Missing" | 2330A.NM101 must be present. |  |
| X223.377.2330A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330A.NM101 must be "LL". |  |
| X223.377.2330A.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1,2 | 999 | R | K 403 = 1: "Required Data Element Missing" | 2330A.NM102 must be present. |  |
| X223.377.2330A.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330A.NM102 must be valid values. |  |
| X223.377.2330A.NM103.010 | NM103 | Other Insured Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.NM103 must be present. |  |
| X223.377.2330A.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.NM103 must be 1-60 characters. |  |
| X223.377.2330A.NM103.030 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: GB "Other Insured" |  |  |
| X223.377.2330A.NM103.040 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM103 must be populated with accepted AN characters. |  |
| X223.377.2330A.NM103.050 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.377.2330A.NM103.060 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM103 must contain at least one non-space character. |  |
| X223.377.2330A.NM104.010 | NM104 | Other Insured First Name | AN | 1-35 | s |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 2330A.NM102 is "2", 2330A.NM104 must not be present. |  |
| X223.377.2330A.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM104 must contain at least one non-space character. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. <br> Max | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.377.2330A.NM104.030 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.NM104 must be 1 - 35 characters. |  |
| X223.377.2330A.NM104.040 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: GB "Other Insured" |  |  |
| X223.377.2330A.NM104.050 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM104 must be populated with accepted AN |  |
| X223.377.2330A.NM104.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.377.2330A.NM105.010 | NM105 | Other Insured Middle Name | AN | 1-25 | s |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 2330A.NM102 is "2", 2330A.NM105 must not be present. |  |
| X223.377.2330A.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM105 must contain at least one non-space |  |
| X223.377.2330A.NM105.030 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.NM105 must be $1-25$ characters. |  |
| X223.377.2330A.NM105.040 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC: GB "Other Insured" |  |  |
| X223.377.2330A.NM105.050 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM105 must be populated with accepted AN characters. |  |
| X223.377.2330A.NM105.055 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 514: "Entity's Middle Name" EIC: GB "Other Insured" | The first position of 2330A.NM105 must be alphabetic (A...Z). |  |
| X223.377.2330A.NM105.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.377.2330A.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.377.2330A.NM107.010 | NM107 | Other Insured Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 2330A.NM102 is "2", 2330A.NM107 must not be present. |  |
| X223.377.2330A.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM107 must contain at least one non-space character. |  |
| X223.377.2330A.NM107.030 | NM107 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2330A.NM107 must be 1-10 characters. |  |
| X223.377.2330A.NM107.040 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: GB "Other Insured" |  |  |
| X223.377.2330A.NM107.050 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "IIvalid Character in Data Element" | 2330A.NM107 must be populated with accepted AN |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Reg. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.377.2330A.NM107.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.377.2330A.NM108.010 | NM108 | Identlfication CodeQualifier | ID | 1-2 | R |  |  | II, MI | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.NM108 must be present. |  |
| X223.377.2330A.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330A.NM108 must be valid values. |  |
| X223.377.2330A.NM109.010 | NM109 | Other Insured Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.NM109 must be present. |  |
| X223.377.2330A.NM109.020 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM109 must contain at least two non-space characters. |  |
| X223.377.2330A.NM109.030 | NM109 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2330A.NM109 must be 2-80 characters. |  |
| X223.377.2330A.NM109.040 | NM109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 153: "Entity's ID Number" EIC: GB "Other Insured" |  |  |
| X223.377.2330A.NM109.050 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = $6: ~ " I n v a l i d ~ C h a r a c t e r ~ i n ~ D a t a ~$ <br> Element" Element" | 2330A.NM109 must be populated with accepted AN characters. |  |
| X223.377.2330A.NM109.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.377.2330A.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.377.2330A.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.377.2330A.NM112.010 | NM112 | $\substack{\text { Name Last or Organization } \\ \text { Name }}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| $\begin{array}{\|l\|} \hline \times 223.380 .2330 \mathrm{A.N3.010} \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.380.2330A.N3.020 | N3 | OTHER SUBSCRIBER ADDRESS |  | 1 | s | 2330A |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330A.N3 is allowed. |  |
| X223.380.2330A.N301.010 | N301 | $\begin{gathered} \hline \begin{array}{c} \text { Other Insured Address } \\ \text { Line } \end{array} \\ \hline \end{gathered}$ | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.N301 must be present. |  |
| X223.380.2330A.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | 1K403 = 6: "Invalid Character in Data Element" | 2330AN301 must contain at least one non-space character. |  |
| X223.380.2330A.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.N301 must be 1-55 characters. |  |
| X223.380.2330A.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" EIC: GB "Other Insured" |  |  |
| X223.380.2330A.N301.050 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.N301 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.380.2330A.N301.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l} \hline \begin{array}{l} \text { 2223.380.2330A.N302.010 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.380.2330A.N302.020 | N302 | Other Insured Address Line | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If present, 2330A.N302 must contain at least one non- space character. |  |
| X223.380.2330A.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.N302 must be 1-55 characters. |  |
| ×223.380.2330A.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" EIC: GB "Other Insured" |  |  |
| X223.380.2330A.N302.050 | N302 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2330A.N302 must be populated with accepted AN characters. |  |
| X223.380.2330A.N302.060edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l\|} \hline \text { 2223.381.2330A.N4.010 } \\ \text { edit deactivated } \\ \hline \text { Vnon } \end{array}$ | N4 |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.381.2330A.N4.010 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223A2.21.2330A.N4.020 | N4 | other subscriber CITYISTATEIZIP CODE |  | 1 | s | 2330A |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330A.N4 is allowed. |  |
| X223.381.2330A.N4.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.381.2330A.N401.010 | N401 | Other Insured City Name | AN | 2-30 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element | 2330A.N401 must be present. |  |
| X223.381.2330A.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK } 403=\text { = " "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2330A.N401 must contain at least two non-space characters. |  |
| X223.381.2330A.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2330A.N401 must be 2-30 characters. |  |
| X223.381.2330A.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" EIC: GB "Other Insured" |  |  |
| X223.381.2330A.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2330A.N401 must be populated with accepted AN characters. |  |
| X223.381.2330A.N401.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.381.2330A.N402.010 | N402 | Other Insured State Code | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data | If 2330A.N404 is not present, 2330A.N402 must be |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{array}{\|l\|} \hline \begin{array}{l} \text { 2223.381.2330A.N402.020 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.381.2330A.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 501: "Entity's State/Province" EIC: GB "Other Insured" | 2330A.N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.381.2330A.N403.010 | N403 | $\begin{array}{\|c\|} \hline \text { Other Insured Postal Zone } \\ \text { or ZIP Code } \\ \hline \end{array}$ | ID | 3-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2330A.N404 is not present, 2330A.N403 must be |  |
| X223.381.2330A.N403.020 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.381.2330A.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement Rejected for Invalid Information.. CSC 500: "Entity's Postal/Zip Code" EIC: GB "Other Insured" | 2330A.N403 must be a valid postal/zip Code when N404 equals US or blank. | Valid Zip Code reference must be available for this edit. |
| X223.381.2330A.N404.010 | N404 | Country Code | ID | 2-3 | s |  |  |  | 277 | C | CSCC A7: "Acknowledgement <br> 1Rejected for Invalid Information..." <br> CSC 680: "Entity's Country" <br> EIC: IL "Subscriber" | 2330A.N404 must be a valid 2 character Country Code. | Valid alpha-2 Country Code reference must be available for this edit. (from Part 1 of ISO 3166) |
| X223.381.2330A.N405.010 | N405 | LocationQualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.381.2330A.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.381.2330A.N407.010 | N407 | Location Identifier | AN | 1-30 | s |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..." } \\ \text { CSC 695: "Entity's Country Subdivision } \\ \text { Code" } \\ \text { EIC: IL "Subscriber" } \\ \hline \end{array}$ | 2330A.N407 must be a valid Country Subdivision Code. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.383.2330A.REF. 010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.383.2330A.REF.020 | REF | OTHER SUBSCRIBER SECONDARY IDENTIFICATION |  | 2 | s | 2330A |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330A.REF is allowed. | Guide says two iterations, but subscribers can't have two SSNs, so we used one here. |
| X223.383.2330A.REF01.010 | REF01 | $\begin{gathered} \hline \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | SY | 999 | R | 1K403 = 1: "Required Data Element | 2330A.REF01 must be present. |  |
| X223.383.2330A.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2330A.REF01 must be "SY". |  |
| X223.383.2330A.REF02.010 | REF02 | Other Insured Additional Identifier | AN | 1-50 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2330A.REF02 must be present. |  |
| X223.383.2330A.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | C | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { Rejected for Invalid Information..." } \\ \text { CSC 148: "Entity's Social Security } \\ \text { Number" "Other Insured" } \\ \text { EIC: GB "Ot } \\ \hline \end{array}$ | 2330A.REF02 must be 9 digits, with no punctuation. <br> The first 3 digits cannot be higher than 772 , and digits <br> $1-3,4-5$, and $6-9$ cannot be zeros. |  |
| X223.383.2330A.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.383.2330A.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.384.2330B.NM1.010 | NM1 | OTHER PAYER NAME |  | 1 | R | 2330B | 1 |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2320.SBR is present, 2330B.NM1 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.384.2330B.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2330B.NM1 is allowed. |  |
| $\begin{aligned} & \text { X223.384.2330B.NM1.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ | NM1 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 2330.NM1 is allowed. |  |
| X223.384.2330B.NM 101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | PR | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM101 must be present. |  |
| X223.384.2330B.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | $1 \mathrm{~K} 403=7$ : "Invalid Code Value" | 2330B.NM101 must be "PR". |  |
| X223.384.2330B.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM102 must be present. |  |
| X223.384.2330B.NM 102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330B.NM102 must be "2". |  |
| X223.384.2330B.NM103.010 | NM103 | Other Payer Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM103 must be present. |  |
| X223.384.2330B.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.NM103 must contain at least one non-space |  |
| X223.384.2330B.NM 103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300B. NM103 must be 1-60 characters. |  |
| X223.384.2330B.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | /Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 504: "Entity's Last Name" CSC 286: Other payer's Explanation of Benefits/payment information EIC: PR "Payer" |  |  |
| X223.384.2330B.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.NM103 must be populated with accepted AN characters. |  |
| X223.384.2330B.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.384.2330B.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.384.2330B.NM105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.384.2330B.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.384.2330B.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.384.2330B.NM108.010 | NM108 | Identlication CodeQualifier | ID | 1-2 | R |  |  | PI, XV | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM108 must be present. |  |
| X223.384.2330B.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2330B.NM108 must be valid values. |  |
| X223.384.2330B.NM109.010 | NM109 | Other Payer Primary Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM109 must be present. |  |
| $\begin{array}{\|l\|} \hline \text { 2223.384.2330B.. } 010 \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.384.2330B.NM109.020 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2330B.NM109 must = 2430.SVD01. |  |
| X223.384.2330B.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.384.2330B.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | $\begin{array}{\|c} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.384.2330B.NM112.010 | NM112 | $\underset{\text { Name }}{\substack{\text { Name Last or Organization } \\ \text { Name }}}$ | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.386.2330B.N3.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.386.2330B.N3.020 | N3 | OTHER PAYER ADDRESS |  | 1 | s | 2330B |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.N3 is allowed. |  |
| х223.386.2330B.N301.010 | N301 | Other Payer Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element | 2330B.N301 must be present. |  |
| X223.386.2330B.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.N301 must contain at least one non-space character. |  |
| х223.386.2330B.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 23308.N301 must be 1-55 characters. |  |
| X223.386.2330B.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" CSC 286: Other payer's Explanation of Benefits/payment information EIC: PR "Payer" |  |  |
| х223.386.2330B.N301.050 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2330B.N301 must be populated with accepted AN characters. |  |
| X223.386.2330B.N301.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.386.2330B.N302.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.386.2330B.N302.020 | N302 | Other Payer Address Line | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | If present, 2330B.N302 must contain at least one non- space character. |  |
| х223.386.2330B.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 23308. 302 must be 1-55 characters. |  |
| X223.386.2330B.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" CSC 286: Other payer's Explanation of Benefits/payment information EIC: PR "Payer" |  |  |
| х223.386.2330B.N302.050 | N302 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.N302 must be populated with accepted AN characters. |  |
| X223.386.2330B.N302.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.387.2330B.N4.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.387.2330B.N4.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { anx. } \end{gathered}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223A2.22.2330B.N4.020 | N4 | OTHER PAYER CITYISTATEIZIP CODE |  | 1 | s | 2330B |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.N4 is allowed. |  |
| $\begin{array}{\|l\|} \hline \text { 2223.387.2330B.N4.020 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.387.2330B.N401.010 | N401 | Other Payer City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.N401 must be present. |  |
| X223.387.2330B.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.N401 must contain at least two non-space characters. |  |
| X223.387.2330B.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2330B.N401 must be 2-30 characters. |  |
| X223.387.2330B.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | /Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 502: "Entity's City" <br> CSC 286: Other payer's Explanation of <br> Benefits/payment information <br> EIC: PR "Payer" |  |  |
| X223.387.2330B.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.N401 must be populated with accepted AN characters. |  |
| X223.387.2330B.N401.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.387.2330B.N402.010 | N402 | Other Payer State Code | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2330B.N404 is not present, 2330B.N402 must be present. |  |
| $\begin{aligned} & \text { X223.387.2330B.N402.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.387.2330B.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" CSC 286: Other payer's Explanation of Benefits/payment information EIC: PR "Payer" | 2330B. N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.387.2330B.N403.010 | N403 | Other Payer Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2330B.N404 is not present, 2330B.N403 must be present. |  |
| X223.387.2330B.N403.020 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.387.2330B.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 500: "Entity's Postal/Zip Code" CSC 286: Other payer's Explanation of Benefits/payment information EIC: PR "Payer" | 2330B.N403 must be a valid zip code. | Valid Zip Code reference must be available for this edit. |
| X223.387.2330B.N404.010 | N404 | Country Code | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.387.2330B.N405.010 | N405 | LocationQualifier | ID | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.387.2330B.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.387.2330B.N407.010 | N407 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\underset{\text { Elegment or }}{\text { Element }}$ | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.389.2330B.DTP. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.389.2330B.DTP.020 | DTP | CLAIM CHECK OR REMITTANCE DATE |  | 1 | s | 2330B |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.DTP is allowed. |  |
| X223.389.2330B.DTP.030 | DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 2: "Unexpected Segment" | If 2430 DTP with 573 is present, then 2330B DTP must not be present. |  |
| х223.389.2330B.DTP01.010 | DTP01 | Date TimeQualifier | ID | 3-3 | R |  |  | 573 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.DTP01 must be present. |  |
| X223.389.2330B.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330B.DTP01 must be "573" |  |
| X223.389.2330B.DTP02.010 | DTP02 | $\underset{\substack{\text { Date Time Period Format } \\ \text { Qualifier }}}{\text { at }}$ | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.DTP02 must be present. |  |
| X223.389.2330B.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330B.DTP02 must be "D8". |  |
| X223.389.2330B.DTP03.010 | DTP03 | $\begin{gathered} \hline \text { Adjudication or Payment } \\ \text { Date } \\ \hline \end{gathered}$ | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2330B.DTP03 must a valid date in CCYMMMDD |  |
| X223.389.2330B.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 516 "Adjudication or Payment Date" | 2330B.DTP03 must not be a future date. | companion guide note needed |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.390.2330B.REF. 010 | REF | OTHER PAYER SECONDARY IDENTIFIER |  | 2 | s | 2330B |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "2U", "EI", "FY" or "NF" may be present. |  |
| X223.390.2330B.REF.020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2330B.REF with REF01 = "2U", "El", "FY" or "NF" are allowed. |  |
| X223.390.2330B.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 2U, EI, FY, NF | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| X223.390.2330B.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK 403 = 7: "Invalid Code Value" | 2330B.REF01 must be valid values. |  |
| X223.390.2330B.REF02.010 | REF02 | Other Payer Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
| X223.390.2330B.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 128: "Entity's tax id" EIC: PR "Payer" | If 2330B.REF01 = "El", 2330B.REF02 must be 9 digits with no punctuation. |  |
| X223.390.2330B.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must be must be $1-50$ characters. |  |
| X223.390.2330B.REF02.040 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must be populated with accepted AN characters. |  |
| X223.390.2330B.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must contain at least one non-space character. |  |
| X223.390.2330B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | \|K403 = |10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.390.2330B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.392.2330B.REF. 010 | REF | OTHER PAYER PRIOR AUTHORIZATION NUMBER |  | 1 | s | 2330B |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "G1" may be present. |  |
| X223.392.2330B.REF. 020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "G1" is allowed. |  |
| X223.392.2330B.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| X223.392.2330B.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2330B.REF01 must be "G1". |  |
| X223.392.2330B.REF02.010 | REF02 | Other Payer Prior Authorization or Referral Number | AN | 1-50 | R |  |  |  | 999 | R | IK 403 = 1: "Required Data Element Missing" | 2330B.REFO2 must be present. |  |
| X223.392.2330B.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2330B.REF02 must be 1-50 characters. |  |
| X223.392.2330B.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must be populated with accepted AN characters. |  |
| X223.392.2330B.REF02.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.392.2330B.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.REFO2 must contain at least one non-space character. |  |
| X223.392.2330B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.392.2330B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.393.2330B.REF. 010 | REF | OTHER PAYER REFERRAL NUMBER |  | 1 | s | 2330B |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "9F" may be present. |  |
| X223.393.2330B.REF.020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "9F" is allowed. |  |
| X223.393.2330B.REF01.010 | REF01 | $\begin{gathered} \hline \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | 9 F | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| X223.393.2330B.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.REF01 must be "9F". |  |
| X223.393.2330B.REF02.010 | REF02 | Other Payer Referral Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
| X223.393.2330B.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2330B.REF02 must be $1-50$ characters. |  |
| X223.393.2330B.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330.REF02 must be populated with accepted AN characters. |  |
| X223.393.2330B.REF02.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.393.2330B.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.REF02 must contain at least one non-space character. |  |
| X223.393.2330B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.393.2330B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.394.2330B.REF.010 | REF | OTHER PAYER CLAIM ADJUSTMENT INDICATOR |  | 1 | s | 2330B |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 $=$ "T4" may be present. |  |
| X223.394.2330B.REF. 020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "T4" is allowed. |  |
| X223.394.2330B.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | T4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| X223.394.2330B.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330B.REF01 must be "T4". |  |
| X223.394.2330B.REF02.010 | REF02 | $\begin{gathered} \text { Other Payer Claim } \\ \text { Adjustment Indicator } \\ \hline \end{gathered}$ | AN | 1-50 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2330B.REFO2 must be present. |  |
| X223.394.2330B.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.REF02 must be = "Y". |  |
| X223.394.2330B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.394.2330B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.395.2330B.REF.010 | REF | OTHER PAYER CLAIM CONTROL NUMBER |  | 1 | s | 2330B |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "F8" may be present. |  |
| X223.395.2330B.REF. 020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "F8" is allowed. |  |
| X223.395.2330B.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | F8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| X223.395.2330B.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330B.REF01 must be "F8". |  |
| X223.395.2330B.REF02.010 | REF02 | Other Payer Claim Control Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
| X223.395.2330B.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2330B.REF02 must be 1-50 characters. |  |
| X223.395.2330B.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must be populated with accepted AN characters. |  |
| X223.395.2330B.REF02.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.395.2330B.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must contain at least one non-space character. |  |
| X223.395.2330B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.395.2330B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.396.2330C.. 010 |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{gathered} \text { Min. } \\ \text { anx. } \end{gathered}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х223.396.2330C.NM1.010 | NM1 | OTHER PAYER ATTENDING PROVIDER |  | 1 | s | 2330 C |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 562: "Entity's National Provider Identifier (NPI)." <br> EIC: 71 "Attending Physician" | 2330C.NM1 must not be present. |  |
| X223.398.2330C.REF. 010 | REF | OTHER PAYER ATTENDING PROVIDER SECONDRY IDENTIFICATION |  | 4 | R | 2330 C |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 71 "Attending Physician" | 2330C.REF must not be present. |  |
| X223.400.2330D.010 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.400.2330D.NM1.010 | NM1 | OTHER PAYER OPERATING PHYSICIAN |  | 1 | s | 2330D | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 562: "Entity's National Provider Identifier (NPI)." <br> EIC: 72 "Operating Physician" | 2330D.NM1 must not be present. |  |
| X223.402.2330D.REF. 010 | REF | $\qquad$ |  | 4 | R | 2330D |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 72 "Operating Physician" | 2330D.REF must not be present. |  |
| X223.404.2330E.. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.404.2330E.NM1.010 | NM1 | other payer other OPERATING PHYSICIAN |  | 1 | s | 2330E | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 562: "Entity's National Provider Identifier (NPI)." <br> EIC: 72 "Operating Physician" | 2330E.NM1 must not be present. |  |
| X223.406.2330E.REF. 010 | REF |  |  | 4 | R | 2330E |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 72 "Operating Physician" | 2330E.REF must not be present. |  |
| X223.408.2330F.. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.408.2330F.NM1.010 | NM1 | OTHER PAYER SERVICE FACILITY LOCATION |  | 1 | s | 2330F | 1 |  | 277 | T | CSCC A7: "Acknowledgement <br> IRejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." CSC 562: "Entity's National Provider Identifier (NPI)." <br> EIC: 77 "Service Location" | 2330F.NM1 must not be present. |  |
| X223.410.2330F.REF. 010 | REF | $\qquad$ |  | 3 | R | 2330F |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 77 "Service Location" | 2330F.REF must not be present. |  |
| $\begin{aligned} & \text { X223.412.2330G.. } 010 \\ & \text { eit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.412.2330G.NM1.010 | NM1 | OTHER PAYER RENDERING PROVIDER NAME |  | 1 | s | 2330 G | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 562: "Entity's National Provider Identifier (NPI)." <br> EIC: 82 "Rendering Provider" | 2330G.NM1 must not be present. |  |
| X223.414.2330G.REF. 010 | REF | OTHER PAYER RENDERING PROVIDER SECONDARY IDENTIFIER |  | 4 | R | 2330G |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's <br> Additional/Secondary Identifier." <br> EIC: $\mathbf{8 2}$ "Rendering Provider" | 2330G.REF must not be present. |  |
| X223.416.2330H..010 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.416.2330H.NM1.010 | NM1 | OTHER PAYER REFERRING PROVIDER |  | 1 | s | 2330 H | 1 |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." CSC 562: "Entity's National Provider Identifier (NPI)." <br> EIC: DN "Referring Provider" | 2330H.NM1 must not be present. |  |
| X223.418.2330H.REF. 010 | REF | OTHER PAYER REFERRING PROVIDER SECONDARY IDENTIFIER |  | 3 | R | 2330H |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: DN "Referring Provider" | 2330H.REF must not be present. |  |
| X223.420.23301.. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | $\begin{gathered} \text { Accept/ } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.420.23301.NM1.010 | NM1 | OTHER PAYER BILLING PROVIDER |  | 1 | s | 23301 | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 562: "Entity's National Provider Identifier (NPI)." <br> EIC: 85 "Billing Provider" | 23301.NM1 must not be present. |  |
| X223.422.23301.REF. 010 | REF | OTHER PAYER BILLING PROVIDER SECONDARY IDENTIFICATION |  | 2 | R | 23301 |  |  | 277 | T | CsCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 85 "Billing Provider" | 23301.REF must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.423.2400..010 |  | Service Line Loop |  |  |  | 2400 |  |  | 999 | E | IK304 = 4: "Loop Occurs Over | Only 449 iterations of the $\mathbf{2 4 0 0}$ loop are allowed. | CMS policy limit is 449 |
| X223.423.2400..015 |  | Service Line Loop |  |  |  | 2400 |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" CSC 121: "Service line number greater than maximum allowable for payer" |  | CMS policy limit is 449 |
| X223.423.2400.LX.010 | Lx | SERVICE LINE NUMBER |  | 1 | R | 2400 | 999 |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2400.LX must be present. |  |
| X223.423.2400.LX. 020 | LX |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2400 . \mathrm{LX}$ is allowed. |  |
| X223.423.2400.LX01.010 | LX01 | Assigned Number | N0 | 1-6 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | $2400 . L X 01$ must be present. |  |
| X223.423.2400.LX01.020 | LX01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.LX01 must be numeric. |  |
| X223.423.2400.LX01.030 | LX01 |  |  |  |  |  |  |  | 277 | c | CSCC A3: "Acknowledgement /Returned as unprocessable claim" CSC 121: "Service line number greater than maximum allowable for payer" | 2400.LX01 must be > 0 and << 449 . |  |
| X223.423.2400.LX01.040 | LX01 |  |  |  |  |  |  |  | 999 | R | \|K403 = l12: "Implementation Pattern Match Failure" | The first 2400.LX01 must be "1". |  |
| X223.423.2400.LX01.050 | LX01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | Subsequent 2400.LX01 values must increment by 1. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.424.2400.SV2.010 | SV2 | INSTITUTIONAL SERVICE LINE |  | 1 | R | 2400 |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2400.SV2 must be present. |  |
| X223.424.2400.SV2.020 | SV2 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $\mathbf{2 4 0 0 . S V 2}$ is allowed. |  |
| X223.424.2400.SV201.010 | SV201 | Revenue Code | AN | 1-48 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV201 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \begin{array}{c} \text { Loop } \\ \text { Repeat } \end{array} \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.424.2400.SV201.020 | SV201 |  |  |  |  |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A77: "ACknowledgement } \\ \text { RRejected for Invalid Information..." } \\ \text { CSC 455: "Revenue code for services } \\ \text { rendered" } \end{array}$ | 2400.SV201 must be a valid revenue code. | Valid Revenue Code reference must be available for this edit. |
| X223.424.2400.SV202.010 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.424.2400.SV202-1.010 | SV202-1 | $\begin{gathered} \hline \text { Product or Service } \\ \text { IDQualifier } \\ \hline \end{gathered}$ | ID | 2-2 | R |  |  | ER, HC, HP, IV, WK | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV202-1 must be present. |  |
| X223.424.2400.SV202-1.020 | SV202-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.SV202-1 must be "HP" or "HC". |  |
| X223.424.2400.SV202-2.010 | SV202-2 | Procedure Code | AN | 1-48 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV202-2 must be present. |  |
| X223.424.2400.SV202-2.020 | SV202-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 507: "HCPCS" | When 2400.SV202-1 = "HC", 2400.SV202-2 must be a valid HCPCS Code. | Valid HCPCS reference must be available for this edit. |
| X223.424.2400.SV202-2.025 | SV202-2 |  |  |  |  |  |  |  | 277 | T | CSCC AF: "ACKnoweagement CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 71 "Attending Physician" | If A0427, A0428 (with a QL modifier in SV202-3, SV202-4, SV202-5, or SV202-6), A0425, A0429, A0430, A0431, A0432, A0433, A0434, A0435 or A0436 (non-scheduled transportation claim) are the only codes present, 2310A.NM1 must not be present. Otherwise, 2310A.NM1 must be present. | A non-scheduled transportation claim shall not include 2310A NM1 data. |
| X223.424.2400.SV202-2.030 | SV202-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 513: "HIPPS Rate Code for services Rendered" | When 2400.SV202-1 = "HP", 2400.SV202-2 must be a valid HIPPS Code. | Valid HIPPS Code reference must be available for this edit. |
| X223.424.2400.SV202-3.010 | SV202-3 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV202-3 must be a valid HCPCS modifier Code. | Valid Procedure Code ModIfier reference must be available for this edit. |
| X223.424.2400.SV202-4.005 | SV202-4 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2400.SV202-4 is present, 2400.SV202-3 must be present. |  |
| X223.424.2400.SV202-4.010 |  |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV202-4 must be a valid HCPCS modifier Code. | Valid Procedure Code ModIfier reference must be available for this edit. |
| X223.424.2400.SV202-5.005 | SV202-5 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2400. SV202-5 is present, 2400.SV202-4 must be present. |  |
| X223.424.2400.SV202-5.010 |  |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV202-5 must be a valid HCPCS modifier Code. | Valid Procedure Code ModIfier reference must be available for this edit. |
| X223.424.2400.SV202-6.005 | SV202-6 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2400. SV202-6 is present, 2400. SV202-5 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { Accept } / \mid \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.424.2400.SV202-6.010 |  |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV202-6 must be a valid HCPCS modifier Code. | Valid Procedure Code Modifier reference must be available for this edit. |
| $\begin{aligned} & \text { X223.424.2400.SV202-7.010 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.424.2400.SV202-7.020 | SV202-7 | Description | AN | 1-80 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.SV202-7 must contain at least one non-space |  |
| X223.424.2400.SV202-7.025 |  |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" CSC 306 Detailed description of service | 2400.SV202-7 must be present. when 2400.SV202-2 contains a non-specific procedure code. | Valid CMS Proprietary table of Procedure Codes that require a description must be available for this edit. |
| X223.424.2400.SV202-7.030 | SV202-7 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.SV202-7 must be 1-80 characters. |  |
| X223.424.2400.SV202-7.040 | SV202-7 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 306: "Detailed description of service" |  |  |
| X223.424.2400.SV202-7.050 | SV202-7 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.SV202-7 must be populated with accepted AN |  |
| X223.424.2400.SV202-7.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.424.2400.SV203.010 | SV203 | Line Item Charge Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV203 must be present. |  |
| X223.424.2400.SV203.020 | SV203 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.SV203 must be numeric. |  |
| X223.424.2400.SV203.030 | SV203 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.SV203 must be <= 99,999,999.99. |  |
| X223.424.2400.SV203.040 | SV203 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 583: "Line Item Charge Amount" | 2400.SV203 must be >= 0 . |  |
| X223.424.2400.SV203.050 | SV203 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 583: "Line Item Charge Amount" | 2400.SV203 is limited to 0, 1 or 2 decimal positions. |  |
| X223.424.2400.SV203.060 | SV203 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 400: "Claim is out of balance: CSC 583:"Line Item Charge Amount" CSC 643: "Service Line Paid Amount" | SV203 must = the sum of all payer amounts paid found in 2430 SVD02 and the sum of all line adjustments found in 2430 CAS Adjustment Amounts. | Companion guide note needed. |
| X223.424.2400.SV204.010 | SV204 | Unit or Basis for Measurement Code | ID | 2-2 | R |  |  | DA, UN | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV204 must be present. |  |
| X223.424.2400.SV204.020 | SV204 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7 : "Invalid Code Value" | $2400 . \mathrm{SV} 204$ must be valid values. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.424.2400.SV205.010 | SV205 | Service Unit Count | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV205 must be present. |  |
| X223.424.2400.SV205.020 | SV205 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2400.SV205 must be numeric. |  |
| X223.424.2400.SV205.030 | SV205 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 402: "Amount must be greater than zero" CSC 476: "Missing or invalid units of service" | 2400.SV205 must be > 0 . | Companion guide note needed. |
| X223.424.2400.SV205.040 | SV205 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.SV205 must be <= 999,999.9. | 07/29: format is 9(6)V9 (per CR 7065). <br> Companion Guide Note needed |
| X223.424.2400.SV205.045 | SV205 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 258: "Days/units for procedure/revenue code." | 2400.SV205 must be <= 999,999.9. |  |
| X223.424.2400.SV205.050 | SV205 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 476: "Missing or invalid units of service" | 2400.SV205 is limited to 0 or 1 decimal position. | 3/26: Companion Guide Note needed. |
| X223.424.2400.SV206.010 | SV206 | Unit Rate | ID | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.424.2400.SV207.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.424.2400.SV207.020 | SV207 | Monetary Amount | R | 1-18 | S |  |  |  | 999 | R | 1K403 = 6: "Invalid Character in Data Element" | 2400.SV207 must be numeric. |  |
| x223.424.2400.SV207.030 | SV207 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.SV207 must be <= 99,999,999.99. |  |
| X223.424.2400.SV207.040 | SV207 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 596: "Non-covered Charge Amount" | 2400.SV207 must be >= 0 |  |
| X223.424.2400.SV207.050 | SV207 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 596: "Non-covered Charge Amount" | 2400.SV207 is limited to 0, 1 or 2 decimal positions. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.429.2400.PWK. 010 | PWK | LINE SUPPLEMENTAL INFORMATION |  | 10 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of 2400.PWK are allowed. | pass thru, syntax only |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.429.2400.PWK01.010 | PWK01 | Attachment Report Type Code | ID | 2-2 | R |  |  | $03,04,05,06,07,08,09,10$, $11,13,15,21, ~ A 3, ~ A 4, ~ A M, ~ A S$ B2, B3, B4, BR, BS, BT, CB, CK, CT, D2, DA, DB, DG, DJ, DS, EB, HC, HR, I5, IR, LA, M1, MT, NN, OB, OC, OD, OE, OX, OZ, P4, P5, PE, PN, PO, $\mathrm{PQ}, \mathrm{PY}, \mathrm{PZ}, \mathrm{RB}, \mathrm{RR}, \mathrm{RT}, \mathrm{RX}$, SG. V5. XP | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.PWK01 must be present. |  |
| X223.429.2400.PWK01.020 | PWK01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2400.PWK01 must be valid values. |  |
| X223.429.2400.PWK02.010 | PWK02 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Attachment Transmission } \\ \text { Code } \end{array} \\ \hline \end{array}$ | ID | 1-2 | R |  |  | AA, BM, EL, EM, FT, FX | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.PWK02 must be present. |  |
| X223.429.2400.PWK02.020 | PWK02 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2400.PWK02 must be valid values. |  |
| X223.429.2400.PWK03.010 | PWK03 | Report Copies Needed | No | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.429.2400.PWK04.010 | PWK04 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.429.2400.PWK05.010 | PWK05 | Identlication CodeQualifier | ID | 1-2 | s |  |  | AC | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | When 2400.PWK05 is present, 2400.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |  |
| X223.429.2400.PWK05.020 | PWK05 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2400.PWK05 must be "AC". |  |
| X223.429.2400.PWK06.010 | PWK06 | Identfication Code | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | When 2400.PWK06 is present, 2400.PWK02 must be "BM", "EL", "EM", "FX" or "FT" |  |
| X223.429.2400.PWK06.020 | PWK06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.PWK06 must contain at least two non-space characters. |  |
| X223.429.2400.PWK06.030 | PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2400.PWK06 must be $2-50$ characters. |  |
| X223.429.2400.PWK06.040 | PWK06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 489: "Attachment Control Number" |  |  |
| X223.429.2400.PWK06.050 | PWK06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.PWK06 must be populated with accepted AN characters. |  |
| X223.429.2400.PWK06.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.429.2400.PWK07.010 | PWK07 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.429.2400.PWK08.010 | PWK08 | ACTIONS INDICATED |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.429.2400.PWK09.010 | PWK09 | Request Category Code | ID | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.433.2400.DTP. 010 deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.433.2400.DTP. 020 | DTP | SERVICE LINE DATE |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400. DTP with DTP01 $=" 472 " 10$ is allowed is allowed. |  |
| X223.433.2400.DTP01.010 | DTP01 | Date TimeQualifier | ID | 3-3 | R |  |  | 472 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP01 must be "472". |  |
| X223.433.2400.DTP02.010 | DTP02 | Date Time Period FormatQualifier | ID | 2-3 | R |  |  | D8, RD8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP02 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. <br> Max | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.433.2400.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2400.DTP02 must be valid values. |  |
| X223.433.2400.DTP03.010 | DTP03 | Service Date | AN | 1-35 | R |  |  | CYYMMDD, CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP03 must be present. |  |
| X223.433.2400.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 8: "Invalid Date" | If 2400.DTP02 = "D8" then 2400.DTP03 must be a valid date in CCYYMMDD format. |  |
| X223.433.2400.DTP03.030 | DTP03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 8: "Invalid Date" | If 2400. DTP02 $=$ "RD8*" then 2400.DTP03 must be a valid date in CCYYMMDD-CCYYMMDD format. |  |
| X223.433.2400.DTP03.040 | DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 510: "Future date" <br> CSC 187: "Date(s) of service" | 2400. DPT03 may not be a future date. | CMS business edit. <br> 02/04: Companion Guide Note needed |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.435.2400.REF. 010 | REF | LINE ITEM CONTROL NUMBER |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400. REF with REF01 $=$ " 6 R" is allowed. |  |
| X223.435.2400.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 6 R | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |  |
| X223.435.2400.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2400.REF01 must be "6R". |  |
| X223.435.2400.REF02.010 | REF02 | Line Item Control Number | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |  |
| X223.435.2400.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REFO2 must contain at least one non-space character. |  |
| X223.435.2400.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-30 characters. |  |
| X223.435.2400.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 584: "Line Item Control Number" |  |  |
| X223.435.2400.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | $2400 . R E F O 2$ must be populated with accepted AN characters. |  |
| X223.435.2400.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.435.2400.REF02.070 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 584: "Line Item Control Number" | 2400.REF02 must be unique within a single iteration of 2300.CLM01. |  |
| X223.435.2400.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.435.2400.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.437.2400.REF. 010 | REF | REPRICED LINE ITEM REFERENCE NUMBER |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400 .REF with REF01 = "9B" is allowed. | pass through, syntax only |
| X223.437.2400.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9B | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |  |
| X223.437.2400.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2400.REF01 must be "9B". |  |
| X223.437.2400.REF02.010 | REF02 | Repriced Line Item Reference Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |  |



| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.439.2400.AMT01.010 | AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | GT | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.AMT01 must be present. |  |
| X223.439.2400.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2400.AMT01 must be "GT". |  |
| X223.439.2400.AMT02.010 | AMT02 | Service Tax Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.AMT02 must be present. |  |
| X223.439.2400.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.AMT02 must be numeric. |  |
| X223.439.2400.AMT02.025 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.439.2400.AMT02.030 | AMT02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2400.AMT02 must be $>=0$ and $<=99,999,999.99$. |  |
| X223.439.2400.AMT02.040 | AmT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 645: "Service Tax Amount" |  |  |
| X223.439.2400.AMT02.050 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 645: "Service Tax Amount" | 2400.AMT02 is limited to 0,1 or 2 decimal positions. | 2400.AMT02 is limited to 0,1 or 2 decimal positions. |
| X223.439.2400.AMT03.010 | AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.440.2400.AMT.010 | AMT | FACILITY TAX AMOUNT |  | 1 | s | 2400 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds | Only one iteration of 2400. AMT with AMT01 $=$ "N8" is allowed. | pass through, syntax only |
| X223.440.2400.AMT01.010 | AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | N8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.AMT01 must be present. |  |
| X223.440.2400.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | $1 \mathrm{~K} 403=7$ : "Invalid Code Value" | 2400.AMT01 must be "N8". |  |
| X223.440.2400.AMT02.010 | AmT02 | Facility Tax Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.AMT02 must be present. |  |
| X223.440.2400.AMT02.020 | AmT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.AMT02 must be numeric. |  |
| X223.440.2400.AMT02.025 | AmT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 563: "Entity's Tax Amount" EIC: FA Facility | 2400.AMT02 must be > $=0$. |  |
| X223.440.2400.AMT02.030 | AMT02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2400.AMTO2 must be <= 99,999,999.99. |  |
| X223.440.2400.AMT02.040 | AmT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 563: "Entity's Tax Amount" EIC: FA Facility |  |  |
| X223.440.2400.AMT02.045 | AmT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 563: "Entity's Tax Amount" EIC: FA Facility | 2400.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| X223.440.2400.AMT03.010 | AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\begin{gathered} \text { Segment or } \\ \text { Element } \end{gathered}$ | Description | ID | Min. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.441.2400.NTE. 010 | NTE | THIRD PARTY ORGANIZATION NOTES |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.NTE is allowed. | pass through, syntax only |
| X223.441.2400.NTE01.010 | NTE01 | Note Reference Code | ID | 3-3 | R |  |  | TPO | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.NTE01 must be present. |  |
| X223.441.2400.NTE01.020 | NTE01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2400.NTE01 must be "TPO". |  |
| X223.441.2400.NTE02.010 | NTE02 | Line Note Text | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.NTE02 must be present. |  |
| X223.441.2400.NTE02.020 | NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.NTE02 must contain at least one non-space character. |  |
| X223.441.2400.NTE02.030 | NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.NTE02 must be 1-80 characters. |  |
| X223.441.2400.NTE02.040 | NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 586: "Line Note Text" |  |  |
| X223.441.2400.NTE02.050 | NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2400.NTE02 must be populated with accepted AN characters. |  |
| $\begin{aligned} & \hline \begin{array}{l} \text { X223.441.2400.NTE02.060 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP. 015 | HCP | LINE PRICING/REPRICING information |  | 1 | s | 2400 |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 64: "Re-pricing information." | Segment must not be present. |  |
| X223.442.2400.HCP01.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.442.2400.HCP01.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP02.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.442.2400.HCP02.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.442.2400.HCP02.030 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.442.2400.HCP02.030 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP03.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP03.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP03.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.442.2400.HCP04.010 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |


| 8371 Edit Reference | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.442.2400.HCP04.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP04.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.442.2400.HCP04.040 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP04.050 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.442.2400.HCP05.010 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP05.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.442.2400.HCP06.010 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.442.2400.HCP06.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.442.2400.HCP06.030 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP06.040 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP06.050 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.442.2400.HCP07.010 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP07.020 ted |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.442.2400.HCP07.030 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.442.2400.HCP08.010 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP09.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP09.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP10.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP10.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP10.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP11.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP11.020 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.442.2400.HCP12.010 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.442.2400.HCP12.015 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP12.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.442.2400.HCP12.030 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP12.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{aligned} & \text { X223.442.2400.HCP13.010 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP14.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP15.010 |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.449.2410.LIN. 010 | LIN | drug identification |  | 1 | s | 2410 | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2410.LIN is allowed. |  |
| X223.449.2410.LIN01.010 | LIN01 | Assigned Identlfication | AN | 1-20 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN02.010 | LIN02 | $\begin{gathered} \hline \text { Product or Service } \\ \text { IDQualifier } \\ \hline \end{gathered}$ | ID | 2-2 | R |  |  | N4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.LINO2 must be present. |  |
| X223.449.2410.LIN02.020 | LIN02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | $2410 . L$ LINO2 must be "N4". |  |
| X223.449.2410.LIN03.010 | LIN03 | National Drug Code | AN | 1-48 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.LIN03 must be present. |  |
| X223.449.2410.LIN03.015 | LIN03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 218: "NDC Number" | 2410.LIN03 must be 11 bytes alpha-numeric |  |
| X223.449.2410.LINO3.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.449.2410.LIN04.010 | LIN04 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN05.010 | LIN05 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN06.010 | LIN06 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN07.010 | LIN07 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN08.010 | LIN08 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN09.010 | LIN09 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN10.010 | LIN10 | Produc/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN11.010 | LIN11 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK03 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN12.010 | LIN12 | Produc/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN13.010 | LIN13 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN14.010 | LIN14 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN15.010 | LIN15 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK03 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN16.010 | LIN16 | Produc/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK03 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN17.010 | LIN17 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN18.010 | LIN18 | ProductService IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN19.010 | LIN19 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | Min. <br> Max. | $\begin{array}{\|c} \text { Usage } \\ \text { R } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.449.2410.LIN20.010 | LIN20 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN21.010 | LIN21 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.449.2410.LIN22.010 | LIN22 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN23.010 | LIN23 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN24.010 | LIN24 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I 10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN25.010 | LIN25 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN26.010 | LIN26 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.449.2410.LIN27.010 | LIN27 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN28.010 | LIN28 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I } 10 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN29.010 | LIN29 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.449.2410.LIN30.010 | LIN30 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN31.010 | LIN31 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.452.2410.CTP. 010 | CTP | DRUG QUANTITY |  | 1 | R | 2410 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2410.LIN is present, 2410.CTP must be present. |  |
| X223.452.2410.CTP. 020 | CTP |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2410.CTP is allowed. |  |
| X223.452.2410.CTP01.010 | CTP01 | Class of Trade Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP02.010 | CTP02 | Price Identifier Code | ID | 3-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.452.2410.CTP03.010 | СTP03 | Unit Price | R | 1-17 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP04.010 | CTP04 | National Drug Unit Count | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.CTP04 must be present. |  |
| X223.452.2410.CTP04.030 | CTP04 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2410.CTP04 must be > 0 and < $<9,999,999.999$. | 03/27: format is 9(7)V999 (per CR 6330). <br> Companion Guide Note needed. |
| X223.452.2410.CTP04.040 | CTP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 697: "Invalid Decimal Precision" CSC 216: "Drug information" | 2410.CTP04 is limited to 3 decimal positions. | Companion Guide Note needed. |
| X223.452.2410.CTP05.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.452.2410.CTP05-1.010 | CTP05-1 | Unit or Basis For Measurement Code | ID | 2-2 | R |  |  | F2, GR, ME, ML, UN | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2410.CTP05-1 must be present. |  |
| X223.452.2410.CTP05-1.020 | CTP05-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2410.CTP05-1 must be valid values. |  |
| X223.452.2410.CTP05-2.010 | CTP05-2 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-3.010 | CTP05-3 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.452.2410.CTP05-4.010 | CTP05-4 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP05-5.010 | CTP05-5 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| Х223.452.2410.CTP05-6.010 | CTP05-6 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| х223.452.2410.CTP05-7.010 | CTP05-7 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-8.010 | CTP05-8 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-9.010 | CTP05-9 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-10.010 | CTP05-10 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-11.010 | CTP05-11 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP05-12.010 | CTP05-12 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-13.010 | CTP05-13 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP05-14.010 | CTP05-14 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-15.010 | CTP05-15 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP06.010 | CTP06 | Price MultiplierQualifier | ID | 3-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP07.010 | CTP07 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP08.010 | CTP08 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP09.010 | CTP09 | Basis of Unit Price Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP10.010 | CTP10 | Condition Value | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.452.2410.CTP11.010 | CTP11 | Multiple Price Quantity | N0 | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.454.2410.REF. 010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.454.2410.REF. 020 | REF | PRESCRIPTIONOR <br> COMPOUND DRUG <br> ASSOCIATION NUMBER |  | 1 | s | 2410 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2410.REF is allowed. | 06/04: Pass-through, syntax only. |
| X223.454.2410.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | VY, XZ | 999 | R | IK403 = 1: "Required Data Element Missing" Missing" | 2410.REF01 must be present. |  |
| X223.454.2410.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2410.REF01 must be valid values. |  |
| X223.454.2410.REF02.010 | REF02 | Prescription Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.REF02 must be present. |  |
| X223.454.2410.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2410.REF02 must contain at least one non-space character. |  |
| X223.454.2410.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2410.REF02 must be 1-50 characters. |  |
| X223.454.2410.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 219: "Prescription number" |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. Max. | Usage Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.454.2410.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2410.REF02 must be populated with accepted AN characters. |  |
| X223.454.2410.REF02.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.454.2410.REF03.010 | REF03 | Desciption | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.454.2410.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.456.2420A.NM1.010 | NM1 | OPERATING PHYSICIAN <br> NAME |  | 1 | s | 2420A | 1 |  | 999 | R | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \\ & \hline \end{aligned}$ | Only one iteration of 2420A.NM1 is allowed. | pass through, syntax only |
| X223.456.2420A.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2420A.NM1 is present, 2310B.NM1 must be present. |  |
| X223.456.2420A.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 72 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.NM101 must be present. |  |
| X223.456.2420A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | $1 \mathrm{~K} 403=7$ : "Invalid Code Value" | 2420A.NM101 must be "72". |  |
| X223.456.2420A.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.NM102 must be present. |  |
| X223.456.2420A.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2420A.NM102 must be "1". |  |
| X223.456.2420A.NM103.010 | NM103 | Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.NM103 must be present. |  |
| X223.456.2420A.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420A.NM103 must be 1-60 characters. |  |
| X223.456.2420A.NM103.030 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: 72 "Operating Physician" |  |  |
| X223.456.2420A.NM103.040 | NM103 |  |  |  |  |  |  |  | 999 | R | $\qquad$ | 2420A.NM103 must be populated with accepted AN characters. |  |
| X223.456.2420A.NM103.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.456.2420A.NM103.060 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2420A.NM103 must contain at least one non-space character. |  |
| X223.456.2420A.NM104.010 | NM104 | First Name | AN | 1-35 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2420A.NM104 must contain at least one non-space character. |  |
| X223.456.2420A.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420A.NM104 must be 1-35 characters. |  |
| X223.456.2420A.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: 72 "Operating Physician" |  |  |
| X223.456.2420A.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM104 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.456.2420A.NM104.050 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.456.2420A.NM105.010 | NM105 | Middle Name | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM105 must contain at least one non-space character. |  |
| X223.456.2420A.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420A.NM105 must be 1-25 characters. |  |
| X223.456.2420A.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC: 72 "Operating Physician" |  |  |
| X223.456.2420A.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM105 must be populated with accepted AN |  |
| X223.456.2420A.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 514: "Entity's Middle Name" EIC: 72 "Operating Physician" | The first position of 2420A.NM105 must be alphabetic (A...Z). |  |
| X223.456.2420A.NM105.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.456.2420A.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.456.2420A.NM107.010 | NM107 | Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM107 must contain at least one non-space character. |  |
| X223.456.2420A.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420A.NM107 must be 1-10 characters. |  |
| X223.456.2420A.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: 72 "Operating Physician" |  |  |
| X223.456.2420A.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM107 must be populated with accepted AN characters. |  |
| X223.456.2420A.NM107.050 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.456.2420A.NM108.010 | NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xX | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error" CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 72 "Operating Physician" | 2420A.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.456.2420A.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Physician" | 2420A.NM108 must be present. | Everyone but Trailblazer or JH (Texas). 01/20: Companion Guide Note needed. |
| X223.456.2420A.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420A.NM108 must be "XX". | Does not apply to Trailblazer or JH (Texas) VA claims. |
| X223.456.2420A.NM109.010 | NM109 | Identifier | AN | 2-80 | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Physician" | 2420A.NM109 must be valid according to the NPI algorithm. |  |
| X223.456.2420A.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Physician" | The first position of 2420A.NM109 must be a "1". |  |
| X223.456.2420A.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.456.2420A.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.456.2420A.NM112.010 | NM112 | $\underset{\text { Name }}{\substack{\text { Name Last or Organization } \\ \text { Nam }}}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.459.2420A.REF.010 | REF | OPERATING PHYSICIAN SECONDARY IDENTIFICATION |  | 20 | s | 2420A |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2420A.NM109 is not present, 2420A.REF with REF01 = "1G" must be present. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.459.2420A.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: Entity's Additional/Secondary Identifier EIC: 72 "Operating Physician" | Only 1 iteration of 2420A.REF with REF01 = "1G" is allowed. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.459.2420A.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420A.REF must not be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.459.2420A.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.REF01 must be present. |  |
| X223.459.2420A.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: Entity's Additional/Secondary Identifier EIC: 72 "Operating Physician" | 2420A.REF01 must be "1G". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.459.2420A.REF02.010 | REF02 | Reference Identifier | AN | 1-50 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 133: "Entity's UPIN EIC: 72 "Operating Physician" | 2420A.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| X223.459.2420A.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.459.2420A.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.461.2420B.NM1.010 | NM1 | OTHER OPERATING PHYSICIAN NAME |  | 1 | s | 2420B | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420B.NM1 is allowed. |  |
| X223.461.2420B.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2420B.NM1 is present, 2310C.NM1 must be present. |  |
| X223.461.2420B.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | zz | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420B.NM101 must be present. |  |
| X223.461.2420B.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420B.NM101 must be "ZZ". |  |
| X223.461.2420B.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420B.NM102 must be present. |  |
| X223.461.2420B.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420B.NM102 must be "1". |  |
| X223.461.2420B.NM103.010 | NM103 | Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420B.NM103 must be present. |  |
| X223.461.2420B.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM103 must contain at least one non-space |  |
| X223.461.2420B.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2420B.NM103 must be 1-60 characters. |  |
| X223.461.2420B.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: 72 "Operating Physician" |  |  |
| X223.461.2420B.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = $:$ : "Invalid Character in Data Element" | 2420B.NM103 must be populated with accepted AN characters. |  |
| X223.461.2420B.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.461.2420B.NM104.010 | NM104 | First Name | AN | 1-35 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM104 must contain at least one non-space |  |
| X223.461.2420B.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420B.NM104 must be 1-35 characters. |  |
| X223.461.2420B.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: 72 "Operating Physician" |  |  |
| X223.461.2420B.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM104 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.461.2420B.NM104.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.461.2420B.NM105.010 | NM105 | Middle Name | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM105 must contain at least one non-space |  |
| X223.461.2420B.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420B.NM105 must be 1-25 characters. |  |
| X223.461.2420B.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC: 72 "Operating Physician" |  |  |
| X223.461.2420B.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2420B.NM105 must be populated with accepted AN characters. |  |
| X223.461.2420B.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 514: "Entity's Middle Name" EIC: 72 "Operating Physician" | The first position of 2420B.NM105 must be alphabetic (A...Z). |  |
| X223.461.2420B.NM105.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.461.2420B.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.461.2420B.NM107.010 | NM107 | Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM107 must contain at least one non-space |  |
| X223.461.2420B.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2420B.NM107 must be 1-10 characters. |  |
| X223.461.2420B.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: 72 "Operating Physician" |  |  |
| X223.461.2420B.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403=6: "Invalid Character in Data | 2420B.NM107 must be populated with accepted AN characters. |  |
| X223.461.2420B.NM107.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.461.2420B.NM108.010 | NM108 | Identlfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error" CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Physician" | 2420B.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.461.2420B.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 72 "Operating Physician" | 2420B.NM108 must be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.461.2420B.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | $1 \mathrm{~K} 403=7$ : "Invalid Code Value" | 2420B.NM108 must be "XX". | Does not apply to Trailblazer or JH (Texas) VA claims. |
| X223.461.2420B.NM109.010 | NM109 | Identifier | AN | 2-80 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | 2420B.NM109 must be present when 2420B.NM108 is present. |  |
| X223.461.2420B.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 72 "Operating Physician" | 2420B.NM109 must be valid according to the NPI algorithm. |  |
| X223.461.2420B.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 562: "Entity's National Provider dentifier (NPI)" <br> EIC: 72 "Operating Physician" | The first position of 2420B.NM109 must be a "1". |  |
| X223.461.2420B.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = $110: ~ " I m p l e m e n t a t i o n ~ " N o t ~$ Used" Flement Present" | Must not be present. |  |
| X223.461.2420B.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.461.2420B.NM112.010 | NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.464.2420B.REF. 010 | REF | other operating PHYSICIAN SECONDARY IDENTIFICATION |  | 20 | s | 2420B |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2420B.NM109 is not present, then 2420B.REF with REF01 = " 1 G " must be present. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.464.2420B.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: Entity's Additional/Secondary Identifier EIC: 72 "Operating Physician" | Only 1 iteration of 2420 B. REF with REF01 $=$ " $1 \mathrm{G} "$ is allowed. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.464.2420B.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420B.REF must not be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.464.2420B.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420B.REF01 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\underset{\text { Elegment or }}{\text { Element }}$ | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.464.2420B.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: Entity's Additional/Secondary Identifier EIC: 72 "Operating Physician" | 2420B.REF01 must be "1G". | Trailblazer or JH (Texas) Only |
| X223.464.2420B.REF02.010 | REF02 | Reference Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420B.REF02 must be present. |  |
| X223.464.2420B.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 133: "Entity's UPIN" EIC: 72 "Operating Physician" | 2420B. REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| X223.464.2420B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.464.2420B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.466.2420C.NM1.010 | NM1 | RENDERING PROVIDER NAME |  | 1 | s | 2420C | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420C.NM1 is allowed. | 03/27: CR 6289 is analysis only (no changes) - no revisit needed until implementation CR |
| x223.466.2420C.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2420C.NM1 is present, 2310A.NM1 must be present. |  |
| X223.466.2420C.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 82 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420C.NM101 must be present. |  |
| X223.466.2420C.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420C.NM101 must be "82". |  |
| X223.466.2420C.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420C.NM102 must be present. |  |
| X223.466.2420C.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420C.NM102 must be "1". |  |
| X223.466.2420C.NM103.010 | NM103 | Rendering Provider Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2420C.NM103 must be present. |  |
| X223.466.2420C.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM103 must contain at least one non-space character. |  |
| X223.466.2420C.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420C.NM103 must be 1-60 characters. |  |
| X223.466.2420C.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: 82 "Rendering Provider" |  |  |
| X223.466.2420C.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM103 must be populated with accepted AN characters. |  |
| X223.466.2420C.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.466.2420C.NM104.010 | NM104 | Rendering Provider First Name | AN | 1-35 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM104 must contain at least one non-space character. |  |
| X223.466.2420C.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420C.NM104 must be 1-35 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. <br> Max. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.466.2420C.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: 82 "Rendering Provider" |  |  |
| X223.466.2420C.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \\ & \hline \end{aligned}$ | 2420C.NM104 must be populated with accepted AN characters. |  |
| X223.466.2420C.NM104.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.466.2420C.NM105.010 | NM105 | Rendering Provider Middle <br> Name | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2420C.NM105 must contain at least one non-space |  |
| X223.466.2420C.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420C.NM105 must be 1-25 characters. |  |
| х223.466.2420C.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC: 82 "Rendering Provider" |  |  |
| X223.466.2420C.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 =6: "Invalid Character in Data | 2420C.NM105 must be populated with accepted AN characters. |  |
| х223.466.2420C.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 514: "Entity's Middle Name" EIC: 82 "Rendering Provider" | The first position of 2420C.NM105 must be alphabetic (A...Z). |  |
| X223.466.2420C.NM105.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.466.2420C.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.466.2420C.NM107.005 | NM107 | $\begin{array}{\|c\|} \hline \text { Rendering Provider Name } \\ \text { Suffix } \\ \hline \end{array}$ | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM107 must contain at least one non-space character. |  |
| X223.466.2420C.NM107.010 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420C.NM107 must be 1-10 characters. |  |
| х223.466.2420C.NM107.020 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: 82 "Rendering Provider" |  |  |
| X223.466.2420C.NM107.030 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM107 must be populated with accepted AN characters. |  |
| X223.466.2420C.NM107.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | Min. <br> Max. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA111 } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.466.2420C.NM108.010 | NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error" CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 82 "Rendering Provider" | 2420C.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.466.2420C.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" EIC. 82 "Renderina Provider" | 2420 C .NM108 must be present. | Everyone but Trailblazer or JH (Texas). 01/20: Companion Guide Note needed. |
| X223.466.2420C.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420C.NM108 must be "XX". | Does not apply to Trailblazer or JH (Texas) VA claims. |
| X223.466.2420C.NM109.010 | NM109 | Rendering Provider Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2420C.NM109 must be present when 2420C.NM108 is present. |  |
| X223.466.2420C.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 82 "Rendering Provider" | 2420C.NM109 must be valid according to the NPI algorithm. |  |
| X223.466.2420C.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 82 "Rendering Provider" | The first position of 2420C.NM109 must be a "1". |  |
| X223.466.2420C.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.466.2420C.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.466.2420C.NM112.010 | NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.469.2420C.REF. 010 | REF | RENDERING PROVIDER SECONDARY IDENTIFICATION |  | 20 | s | 2420 C |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2420C.NM109 is not present, 2420C.REF with REF01 = "1G" must be present. | Trailblazeror JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.469.2420C.REF. 020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines. CSC 560: "Entity's Additional/Secondary Identifier." EIC: 82 "Rendering Provider" | Only 1 iteration of 2420C.REF with REF01 = " 1 G " is allowed. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.469.2420C.REF. 030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420C.REF must not be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.469.2420C.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420C.REF01 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. <br> Max | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.469.2420C.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 82 "Rendering Provider" | 2420C.REF01 must be "1G". |  |
| X223.469.2420C.REF02.010 | REF02 | Rendering Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420C.REF02 must be present. |  |
| X223.469.2420C.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 133: "Entity's UPIN" CSC 560: "Entity's Additional/Secondary Identifier" EIC: 82 "Rendering Provider" | 2420C.REF02 must be in format ANNNNN or AAANNN (where $A$ is an alpha character and $N$ is a numeric digit). |  |
| X223.469.2420C.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.469.2420C.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.471.2420D.NM1.010 | NM1 | REFERRING PROVIDER NAME |  | 1 | s | 2420D | 1 |  | 999 | R | $\begin{array}{\|l} \hline \text { IK304 = 4: "Loop Occurs Over } \\ \text { Maximum Times" } \\ \hline \end{array}$ | Only one iteration of 2420D.NM1 is allowed. |  |
| X223.471.2420D.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420D.NM1 is allowed. |  |
| X223.471.2420D.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | DN | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.NM101 must be present. |  |
| X223.471.2420D.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420D.NM101 must be "DN". |  |
| X223.471.2420D.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.NM102 must be present. |  |
| X223.471.2420D.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420D.NM102 must be "1". |  |
| X223.471.2420D.NM103.010 | NM103 | Referring Provider Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.NM103 must be present. |  |
| X223.471.2420D.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM103 must contain at least one non-space |  |
| X223.471.2420D.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2420D.NM103 must be 1-60 characters. |  |
| X223.471.2420D.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: DN "Referring Provider" |  |  |
| X223.471.2420D.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "IIvalid Character in Data Element" | 2420D.NM103 must be populated with accepted AN characters. |  |
| X223.471.2420D.NM103.060 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.471.2420D.NM104.010 | NM104 | Referring Provider First Name | AN | 1-35 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM104 must contain at least one non-space |  |
| x223.471.2420D.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2420D.NM104 must be 1-35 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { T99/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.471.2420D.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: DN "Referring Provider" |  |  |
| X223.471.2420D.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2420D.NM104 must be populated with accepted AN characters. |  |
| X223.471.2420D.NM104.050 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.471.2420D.NM105.010 | NM105 | Referring Provider Middle Name or Initial | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2420D.NM105 must contain at least one non-space character. |  |
| X223.471.2420D.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420D.NM105 must be 1-25 characters. |  |
| X223.471.2420D.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC: DN "Referring Provider" |  |  |
| X223.471.2420D.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = } 6: \text { "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2420D.NM105 must be populated with accepted AN characters. |  |
| X223.471.2420D.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 514: "Entity's Middle Name" EIC: DN "Referring Provider" | The first position of 2420D.NM105 must be alphabetic (A...Z). |  |
| X223.471.2420D.NM105.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.471.2420D.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.471.2420D.NM107.010 | NM107 | Referring Provider Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM107 must contain at least one non-space character. |  |
| X223.471.2420D.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420D.NM107 must be 1-10 characters. |  |
| X223.471.2420D.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: DN "Referring Provider" |  |  |
| X223.471.2420D.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM107 must be populated with accepted AN characters. |  |
| X223.471.2420D.NM107.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.471.2420D.NM108.010 | NM108 | Identlfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: DN "Referring Provider" | 2420D.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.471.2420D.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Missing Information..." <br> CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" EIC: DN "Referring Provider" | 2420D.NM108 must be present. | Everyone but Trailblazer or JH (Texas). 01/20: Companion Guide Note needed. |
| X223.471.2420D.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420D.NM108 must be "XX". | Does not apply to Trailblazer or JH (Texas) VA claims. |
| X223.471.2420D.NM109.010 | NM109 | Referring Provider Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2420D.NM109 must be present when 2420D.NM108 is present. |  |
| X223.471.2420D.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" EIC: DN "Referring Provider" | 2420D.NM109 must be valid according to the NPI algorithm. |  |
| X223.471.2420D.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: DN "Referring Provider" | The first position of 24200.NM109 must be a "1". |  |
| X223.471.2420D.NM109.050 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2420D. NM 109 must not $=2310 \mathrm{~A} . \mathrm{NM109}$. |  |
| X223.471.2420D.NM109.060 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2420D. $\mathrm{NM109}$ must not $=$ 2310F.NM109. |  |
| X223.471.2420D.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.471.2420D.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.471.2420D.NM112.010 | NM112 | $\underset{\text { Name }}{\text { Name Last or Organization }}$ | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.474.2420D.REF. 010 | REF | REFERRING PROVIDER SECONDARY IDENTIFICATION |  | 20 | s | 2420D |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2420D.NM109 is not present, 2420D.REF with REF01 = " 1 G " must be present. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |
| X223.474.2420D.REF. 020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: DN "Referring Provider" | Only 1 iteration of 2420D.REF with REF01 = "1G" is allowed. | Trailblazer or JH (Texas) Only 01/20: Companion Guide Note needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\underset{\text { Elegment or }}{\text { Element }}$ | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.474.2420D.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420D.REF must not be present. | Everyone but Trailblazer or JH (Texas). <br> 01/20: Companion Guide Note needed. |
| X223.474.2420D.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.REF01 must be present. |  |
| X223.474.2420D.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information. <br> CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: DN "Referring Provider" | 2420E.REF01 must be"1G". |  |
| X223.474.2420D.REF02.010 | REF02 | Referring Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.REF02 must be present. |  |
| X223.474.2420D.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 133: "Entity's UPIN" CSC 560: "Entity's Additional/Secondary Identifier" EIC: DN "Referring Provider" | 2420D.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| X223.474.2420D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.474.2420D.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.476.2430.010 |  | LINE ADJUDICATION LOOP |  |  |  | 2430 | 15 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only 15 iterations of the 2430 loop are allowed. |  |
| X223.476.2430.SVD. 010 | svd | line adjudication INFORMATION |  | 1 | s | 2430 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2430.SVD is allowed. |  |
| X223.476.2430.SVD01.010 | SVD01 | Payer Identifier | AN | 2-80 | R |  |  |  | 999 | R | KK403 = 1: "Required Data Element Missing" | 2430.SVD01 must be present. |  |
| X223.476.2430.SVD01.020 | SVD01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2430.SVD01 must = 2330B.NM109 (for the same payer). |  |
| X223.476.2430.SVD02.010 | SVD02 | Service Line Paid Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.SVD02 must be present. |  |
| X223.476.2430.SVD02.020 | SVD02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD02 must be numeric. |  |
| X223.476.2430.SVD02.030 | SVD02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.SVD02 must be >= 0 and < $=99,999,999.99$. |  |
| X223.476.2430.SVD02.040 | SVD02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system |  |  |
| $\begin{aligned} & \text { X223.476.2430.SVD02.050 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.476.2430.SVD02.060 | SVD02 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 643: "Service Line Paid Amount" CSC 697: "Invalid Decimal Precision" | 2430.SVD02 is limited to 0, 1 or 2 decimal positions. |  |
| X223A2.25.2430.SVD03.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{array}{\|l} \hline \begin{array}{l} \text { X223.476.2430.SVD03.010 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.476.2430.SVD03-1.010 | SVD03-1 | $\begin{gathered} \hline \text { Product or Service } \\ \text { IDQualifier } \\ \hline \end{gathered}$ | ID | 2-2 | R |  |  | ER, HC, HP, IV, WK | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2430.SVD03-1 must be present. |  |
| X223.476.2430.SVD03-1.020 | SVD03-1 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2400.SVD03-1 must be "HP" or "HC". |  |
| X223.476.2430.SVD03-2.010 | SVD03-2 | Procedure Code | AN | 1-48 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element | 2430.SVD03-2 must be present. |  |
| X223.476.2430.SVD03-2.020 | SVD03-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement 1Rejected for Invalid Information..." CSC 507: "HCPCS" CSC 710: "Line Adjudication Information" | When 2430.SVD03-1 = "HC", 2430.SVD03-2 must be a valid HCPCS Code. | Valid HCPCS reference must be available for this edit. <br> 11/21: Revised edit |
| X223.476.2430.SVD03-2.030 | SVD03-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 513: "HIPPS Rate Code for services Rendered" CSC 710: "Line Adjudication Information" | When 2430.SVD03-1 = "HP", 2430.SVD03-2 must be a valid HIPPS Skilled Nursing Facility Rate Code | Valid HIPPS Code reference must be available for this edit. |
| X223.476.2430.SVD03-3.010 | sVD03-3 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" CSC 710: "Line Adjudication Information" | 2430.SVD03-3 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| X223.476.2430.SVD03-4.010 | SVD03-4 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2430 . S V D 03-4$ is present, 2430.SVD03-3 must be present. |  |
| X223.476.2430.SVD03-4.020 | SVD03-4 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" CSC 710: "Line Adjudication Information" | 2430.SVD03-4 must be valid procedure modifier. | Valid Procedure Code Modifier reference must be available for this edit. |
| X223.476.2430.SVD03-5.010 | SVD03-5 | Procedure Modlifier | AN | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data | 2430.SVD03-5 is present, 2430.SVD03-4 must be present. |  |
| X223.476.2430.SVD03-5.020 | SVD03-5 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" CSC 710: "Line Adjudication Information" | 2430.SVD03-5 must be valid procedure modifier. | Valid Procedure Code Modifier reference must be available for this edit. |
| X223.476.2430.SVD03-6.010 | SVD03-6 | Procedure Modlier | AN | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2430.SVD03-6 is present, 2430.SVD03-5 must be present. |  |
| X223.476.2430.SVD03-6.020 | SVD03-6 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" CSC 710: "Line Adjudication Information" | 2430.SVD03-6 must be valid procedure modifier. | Valid Procedure Code Modifier reference must be available for this edit. |
| X223.476.2430.SVD03-7.010 | SVD03-7 | Procedure Code Description | AN | 1-80 | s |  |  |  | 999 | R | 1K403 = 6: "Invalid Character in Data | 2430.SVD03-7 must contain at least one non-space character. |  |
| x223.476.2430.SVD03-7.020 | SVD03-7 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2430.SVD03-7 must be 1-80 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\begin{gathered} \begin{array}{c} \text { Loop } \\ \text { Repeat } \end{array} \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.476.2430.SVD03-7.030 | SVD03-7 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 306: "Detailed description of service" CSC 710: "Line Adjudication Information" |  |  |
| X223.476.2430.SVD03-7.040 | SvD03-7 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD03-7 must be populated with accepted AN |  |
| X223.476.2430.SVD03-7.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.476.2430.SVD03-8.010 | SVD03-8 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223A2.26.2430.SVD04.010 | SvD04 | Product or Service ID | AN | 1-48 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.SVD04 must be present. |  |
| X223.476.2430.SVD04.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223A2.26.2430.SVD04.020 | SVD04 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 455: "Revenue code for services rendered" | 2430.SVD04 must be a valid revenue code. | Valid Revenue Code reference must be available for this edit. |
| X223.476.2430.SVD05.010 | SVD05 | Paid Service Unit Count | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.SVD05 must be present. |  |
| X223A2.26.2430.SVD05.020 | SVD05 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD05 must be numeric. |  |
| $\begin{aligned} & \text { X223.476.2430.SVD05.030 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.476.2430.SVD05.040 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.476.2430.SVD05.045 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.476.2430.SVD05.050 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.476.2430.SVD05.060 | SVD05 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 402: "Amount must be greater than zero" <br> CSC 476: "Missing or invalid units of service" | 2430.SVD05 must be > 0 . | Companion guide note needed. |
| X223.476.2430.SVD05.065 | SvD05 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.SVD05 must be <= 999,999.9. | format is 9(6)V9 (per CR 7065). Companion Guide Note needed. |
| X223.476.2430.SVD05.070 | SVD05 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 608: "Paid Service Unit Count" CSC 710: "Line Adjudication Information" |  |  |
| $\begin{aligned} & \text { X223.476.2430.SVD05.075 } \\ & \text { edit deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\begin{gathered} \begin{array}{c} \text { Loop } \\ \text { Repeat } \end{array} \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { T999/ } \\ \text { 277CA } \end{gathered}$ | Accept Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.476.2430.SVD06.010 | SVD06 | Bundled or Unbundled Line <br> Number | N0 | 1-6 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD06 must be numeric. |  |
| X223.476.2430.SVD06.020 | SVD06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD06 must be a integer (no decimals). | Companion Guide Note needed. |
| $\begin{aligned} & \text { X223.476.2430.SVD06.030 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.476.2430.SVD06.040 | SVD06 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2430.SVD06 must $1-6$ digits. |  |
| X223.476.2430.SVD06.050 | SVD06 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { lRejected for Invalid Information..." } \\ & \text { CsC 522: "Length invalid for receiver's } \\ & \text { application system" } \\ & \hline \end{aligned}$ |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS. 010 | CAS | LINE ADJUSTMENT |  | 5 | s | 2430 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" <br> OR <br> IK304 = 2: "Unexpected Segment" | If 2430.CAS is present, 2430.SVD must be present. |  |
| X223.480.2430.CAS. 020 | CAS |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 5 iterations of 2430.CAS are allowed. |  |
| X223.480.2430.CAS01.010 | CAS01 | $\begin{gathered} \text { Claim Adjustment Group } \\ \text { Code } \\ \hline \end{gathered}$ | ID | 1-2 | R |  |  | $\mathrm{CO}, \mathrm{CR}, \mathrm{OA}, \mathrm{Pl}, \mathrm{PR}$ | 999 | R | IK403 = 1: "Required Data Element | 2430.CAS01 must be present. |  |
| X223.480.2430.CAS01.020 | CAS01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2430.CAS01 must be valid values. |  |
| X223.480.2430.CAS01.030 edit deactivated | CAS01 |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS02.010 | CAS02 | Adjustment Reason Code | ID | 1-5 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.CAS02 must be present. |  |
| X223.480.2430.CAS02.020 | CAS02 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | 2430.CAS02 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS03.010 | CAS03 | Adjustment Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.CAS03 must be present. |  |
| X223.480.2430.CAS03.020 | CAS03 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2430.CAS03 must be numeric. |  |
| $\begin{array}{\|l\|} \hline \text { X223.480.2430.CAS03.030 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS03.040 | CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2430.CAS03 is limited to 0, 1 or 2 decimal positions. |  |
| X223.480.2430.CAS03.050 | CAS03 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.CASO3 must be $>=-99,999,999.99$ and $<=99,999,999.99$ |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{array}{\|c} \text { Usage } \\ \text { Reg. } \end{array}$ | Loop | Loop Repeat <br> Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.480.2430.CAS03.060 | CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" EIC: GB "Other Insured" |  |  |
| X223.480.2430.CAS03.065 | CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2430.CAS03 must not $=0$. |  |
| X223.480.2430.CAS04.010 | CAS04 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.CAS04 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.480.2430.CAS04.015 | CAS04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" |  |  |
| X223.480.2430.CAS04.020 | CAS04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" | 2430. CAS04 must not $=0$. |  |
| X223.480.2430.CAS05.010 | CAS05 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS05 is present, 2430.CAS02 must be present. |  |
| X223.480.2430.CAS05.020 | CAS05 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB "Other Insured" | 2430.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS06.010 | CAS06 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430. CAS06 is present, 2430.CAS05 must be present. |  |
| X223.480.2430.CAS06.020 | CAS06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS06 must be numeric. |  |
| X223.480.2430.CAS06.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS06.040 | CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2320.CAS06 is limited to 0,1 or 2 decimal positions. |  |
| X223.480.2430.CAS06.050 | CAS06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS06 must be >= -99,999,999.99 and } \\ & <=99,999,999.99 \end{aligned}$ |  |
| X223.480.2430.CAS06.060 | CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { anx. } \end{gathered}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.480.2430.CAS06.065 | CAS06 |  |  |  |  |  |  |  | 277 | T | $\qquad$ IReierted for Invalid Informatio CSC 694: "Amount must not be equal \|to zero" EIC: GB "Other Insured" | 2430.CAS06 must not $=0$. |  |
| X223.480.2430.CAS07.010 | CAS07 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If $2430 . \mathrm{CAS07}$ is present, 2430.CAS05 must be present. |  |
| X223.480.2430.CAS07.020 | CAS07 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS07 must be $1-15$ digits. |  |
| X223.480.2430.CAS07.025 | CAS07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 520: "Adjustment Quantity" <br> EIC. GB "Other Insured" |  |  |
| X223.480.2430.CAS07.030 | CAS07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" | 2430.CAS07 must not $=0$. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.480.2430.CAS08.010 | CAS08 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | If 2430.CAS08 is present, 2430.CAS05 must be present. |  |
| X223.480.2430.CAS08.020 | CAS08 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | 2430.CAS08 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS09.010 | CAS09 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | 1K403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS09 is present, 2430.CAS08 must be present. |  |
| X223.480.2430.CAS09.020 | CAS09 |  |  |  |  |  |  |  | 999 | R | $\underset{\substack{\text { IK403 }=6: ~ " I n v a l i d ~ C h a r a c t e r ~ i n ~ D a t a ~}}{\substack{\text { Element" }}}$ | 2430.CAS09 must be numeric. |  |
| X223.480.2430.CAS09.030 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS09.040 | CAS09 |  |  |  |  |  |  |  | 277 | T | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { 1Rejected for Invalid Information..." } \\ \text { CSC 697: "Invalid Decimal Precision" } \\ \text { CSC 519: "Adjustment Amount" } \\ \text { EIC: GB "Other Insured" } \end{array}$ | 2430.CAS09 is limited to 0,1 or 2 decimal positions. |  |
| X223.480.2430.CAS09.050 | CAS09 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS09 must be >=-99,999,999.99 and } \\ & <=99,999,999.99 \end{aligned}$ |  |
| X223.480.2430.CAS09.060 | CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> Rejected for Invalid Information..." <br> CS 512 " "Length invalid for receiver's <br> application system" <br> CSC 199: "Adustment Amount" <br> EIC: GB "Other Insured" <br> CSC |  |  |
| X223.480.2430.CAS09.065 | CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> 1Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal <br> to zero" <br> CSC 519: "Adjustment Amount" <br> EIC: GB "Other Insured" | 2430.CAS09 must not $=0$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.480.2430.CAS09.070 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS10.010 | CAS10 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS10 is present, 2430.CAS08 must be present. |  |
| X223.480.2430.CAS10.020 | CAS10 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.CAS10 must be $1-15$ digits. | 01/08: Not brought into Core <br> System, so no Medicare size limit is needed. |
| X223.480.2430.CAS10.025 | CAS10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" |  |  |
| X223.480.2430.CAS10.030 | CAS10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" | $2430 . \mathrm{CAS10}$ must not $=0$. |  |
| X223.480.2430.CASO11.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS11.010 | CAS011 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS11 is present, 2320.CAS08 must be present. |  |
| X223.480.2430.CAS11.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS11.020 | CAS11 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB "Other Insured" | 2430.CAS11 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS12.010 | CAS12 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS12 is present, 2430.CAS11 must be present. |  |
| X223.480.2430.CAS12.020 | CAS12 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | $2430 . \mathrm{CAS} 12$ must be numeric. |  |
| 2223.480.2430.CAS12.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS12.040 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2430.CAS12 is limited to 0,1 or 2 decimal positions. |  |
| X223.480.2430.CAS12.050 | CAS12 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.CAS12 must be $>=-99,999,999.99$ and $<=99,999,999.99$ |  |
| X223.480.2430.CAS12.060 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.480.2430.CAS12.065 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" <br> EIC: GB "Other Insured" | $2430 . \mathrm{CAS12}$ must not $=0$. |  |
| X223.480.2430.CAS13.010 | CAS13 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS13 is present, 2430.CAS11 must be present. |  |
| X223.480.2430.CAS13.020 | CAS13 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | $2430 . \mathrm{CAS13}$ must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.480.2430.CAS13.025 | CAS13 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" |  |  |
| X223.480.2430.CAS13.030 | CAS13 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" | 2430.CAS13 must not $=0$. |  |
| X223.480.2430.CAS14.010 | CAS14 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS14 is present, 2430.CAS11 must be present. |  |
| X223.480.2430.CAS14.020 | CAS14 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB "Other Insured" | 2430.CAS14 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS15.010 | CAS15 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS15 is present, 2430.CAS14 must be present. |  |
| X223.480.2430.CAS15.020 | CAS15 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data <br> Element" | 2430.CAS15 must be numeric. |  |
| X223.480.2430.CAS15.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS15.040 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2430.CAS15 is limited to 0, 1 or 2 decimal positions. |  |
| X223.480.2430.CAS15.050 | CAS15 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS15 must be >=-99,999,999.99 and } \\ & <=99,999,999.99 \end{aligned}$ |  |
| X223.480.2430.CAS15.060 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  |
| X223.480.2430.CAS15.065 | CAS15 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement <br> Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal <br> to zero": <br> CSC 519: "Adjustment Amount" <br> EIC: GB "Other Insured" | $2430 . \mathrm{CAS15}$ must not $=0$. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.480.2430.CAS16.010 | CAS16 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS16 is present, 2430.CAS14 must be present. |  |
| X223.480.2430.CAS16.020 | CAS16 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2430.CAS16 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.480.2430.CAS16.025 | CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" |  |  |
| X223.480.2430.CAS16.030 | CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" | $2430 . \mathrm{CAS16}$ must not $=0$. |  |
| X223.480.2430.CAS17.010 | CAS17 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | 1K403 = 2: "Conditional Required Data | If 2430.CAS17 is present, 2430.CAS14 must be |  |
| X223.480.2430.CAS17.020 | CAS17 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement/ Rejected for relational field in error." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | 2430.CAS17 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS18.010 | CAS18 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS18 is present, 2430.CAS17 must be present. |  |
| X223.480.2430.CAS18.020 | CAS18 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | $2430 . \mathrm{CAS} 18$ must be numeric. |  |
| $\begin{aligned} & \begin{array}{l} \text { 223.480.2430.CAS18.030 } \\ \text { edit deactivated } \\ \hline \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS18.040 | CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2430.CAS18 is limited to 0, 1 or 2 decimal positions. |  |
| X223.480.2430.CAS18.050 | CAS18 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2430.CAS18 must be $>=-99,999,999.99$ and $<=99,999,999.99$ |  |
| X223.480.2430.CAS18.060 | CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  |
| X223.480.2430.CAS18.065 | CAS18 |  |  |  |  |  |  |  | 277 | T | ```CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" CSC 519: "Adjustment Amount" EIC:GB "Other Insured"``` | $2430 . \mathrm{CAS18}$ must not $=0$. |  |
| X223.480.2430.CAS19.010 | CAS19 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | 1K403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS19 is present, 2430.CAS17 must be present. |  |
| X223.480.2430.CAS19.020 | CAS19 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2430.CAS19 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed System, so no Medicare size limit is needed |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11/ } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.480.2430.CAS19.025 | CAS19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" |  |  |
| X223.480.2430.CAS19.030 | CAS19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" EIC: GB "Other Insured" | 2430.CAS19 must not $=0$. |  |
| X223.486.2430.DTP. 010 | DTP | LINE CHECK OR REMITTANCE DATE |  | 1 | R | 2430 |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2430.SVD is present, 2430.DTP must be present. |  |
| X223.486.2430.DTP. 015 | DTP |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | If 2330B.DTP is present, 2430.DTP must not be present. |  |
| X223.486.2430.DTP. 020 | DTP |  |  |  |  |  |  |  | 999 | R | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2430.DTP is allowed. |  |
| X223.486.2430.DTP01.010 | DTP01 | Date /TimeQualifier | ID | 3-3 | R |  |  | 573 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.DTP01 must be present. |  |
| X223.486.2430.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2430.DTP01 must be "573". |  |
| X223.486.2430.DTP02.010 | DTP02 | Date /Time FormatQualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.DTP02 must be present. |  |
| X223.486.2430.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2430.DTP02 must be "D8". |  |
| X223.486.2430.DTP03.010 | DTP03 | Adjudication or Payment Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2430.DTP03 must be present. |  |
| X223.486.2430.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 8: "Invalid Date" | 2430.DTP03 must be a valid date in CCYYMMDD format. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.487.2430.AMT. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.487.2430.AMT. 020 | AMt | REMAINING PATIENT LIABILITY |  | 1 | s | 2430 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2430.AMT is allowed | pass-through, syntax only |
| X223.487.2430.AMT. 025 | AMT |  |  |  |  |  |  |  | 277 | T | CSCC A8: "Acknowledgement / Rejected for relational field..." CSC 6: Balance due from the subscriber EIC: GB "Other Insured" | If 2320 AMT (EAF) is present for the same payer, the 2430 AMT (EAF) must not be present. |  |
| X223.487.2430.AMT01.010 | AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | EAF | 999 | R | IK03 = 1: "Required Data Element Missing" | 2430.AMT01 must be present. |  |
| Х223.487.2430.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2430.AMT01 must be "EAF". |  |
| X223.487.2430.AMT02.005 | AMT02 | Non-Covered Amount | R | 1-18 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element Missing" Missing" | 2430.AMT02 must be present. |  |
| X223.487.2430.AMT02.010 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 =6: "Invalid Character in Data Element" | 2430 .AmT02 must be numeric. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.487.2430.AMT02.015 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 596: "Non-covered Charge Amount" | 2430.AMT02 must be > $=0$. |  |
| X223.487.2430.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.AMTO2 must be <= 99,999,999.99. |  |
| X223.487.2430.AMT02.025 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC AT: ACKnowleagement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 596: "Non-covered Charge Amount" |  |  |
| X223.487.2430.AMT02.030 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 596: "Non-covered Charge Amount" | 2430.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| X223.487.2430.AMT03.010 | AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.488..SE. 010 | SE | $\underset{\substack{\text { TRANSACTION SET } \\ \text { TRAILER }}}{ }$ |  | 1 | R |  |  |  | 999 | R | IK502 = 2: "Transaction Set Trailer Missing". | SE must be present. |  |
| X223.488.SE.SE. 020 | SE |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.488..SE01.010 | SE01 | Ttansaction Segment | No | 1-10 | R |  |  |  | 999 | R | IK502 = 4: "Number of Included Segments Does Not Match Actual Count". | SE01 must be present. |  |
| X223.488..SE01.020 | SE01 |  |  |  |  |  |  |  | 999 | R | IK502 = 4: "Number of Included Segments Does Not Match Actual Count". | SE01 must be numeric. |  |
| X223.488..SE01.030 | SE01 |  |  |  |  |  |  |  | 999 | R | IK502 = 4: "Number of Included Segments Does Not Match Actual Count". | SE01 must = the transaction segment count. |  |
| X223.488..SE01.040 | SE01 |  |  |  |  |  |  |  | 999 | R | IK502 = 4: "Number of Included Segments Does Not Match Actual Count". | SE01 must be > 0 . |  |
| X223.488..SE02.010 | SE02 | Transaction Set Control Number | AN | 4-9 | R |  |  |  | 999 | R | IK502 = 3: "Transaction Set Control Number in Header and Trailer Do Not Match". | SE02 must be present. |  |
| X223.488..SE02.020 | SE02 |  |  |  |  |  |  |  | 999 | R | IK502 = 3: "Transaction Set Control Number in Header and Trailer Do Not Match". | SE02 must = ST02. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.C9..GE. 010 | GE | Functional Group Trailer |  | 1 | R | - |  |  | 999 | R | AK905: 3 "Functional Group Trailer Missing" | GE must be present. |  |
| X223.C9..GE. 020 deactivated | GE |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.C9..GE01.010 | GE01 | Number of Transaction Sets Included | No | 1-6 | R |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be present. |  |
| X223.C9..GE01.020 | GE01 |  |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be numeric. |  |
| X223.C9..GE01.030 | GE01 |  |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must = the number of transaction sets included in the functional group. |  |
| X223.C9..GE01.040 | GE01 |  |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be > 0 . |  |
| X223.C9..GE02.010 | GE02 | Group Control Number | No | 1-9 | R |  |  |  | 999 | R | AK905: 4 "Group Control Number in the Functional Group Header and Trailer Do Not Agree" | GE02 must be present. |  |
| X223.C9..GE02.020 | GE02 |  |  |  |  |  |  |  | 999 | R | AK905: 4 "Group Control Number in the Functional Group Header and Trailer Do Not Agree". | GE02 must = GS06. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.C10.IEA. 005 | IEA | Interchange Control Trailer |  | 1 | R |  |  |  | TA1 | R | TA105 = 023: "Improper (Premature) End-of-File (Transmission)" | IEA must be present. |  |
| X223.C10..IEA. 010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 223$ C10 IEA 015 | IEA |  |  |  |  |  |  |  | TA1 | R | TA105 = 022: "Invalid Control Structure" | Only one iteration of IEA is allowed. <br> -OR- | Contractors are free to choose the |
|  |  |  |  |  |  |  |  |  | TA1 | R | TA105 = 023: "Improper (Premature) End-of-File (Transmission)" | Only one iteration of IEA is allowed. | unctionalit |
| X223.C10.IIEA. 020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.C10..IEA01.010 | IEA01 | Number of Included Functional Groups | No | 1-5 | R |  |  |  | TA1 | R | TA105 = 021: "Invalid Number of Included Groups Value". | IEA01 must be present. |  |
| X223.C10..IEA01.020 | IEA01 |  |  |  |  |  |  |  | TA1 | R | TA105 = 021: "Invalid Number of Included Groups Value". | IEA01 must be numeric. |  |
| X223.C10..IEA01.030 | IEA01 |  |  |  |  |  |  |  | TA1 | R | TA105 = 021: "Invalid Number of Included Groups Value". | IEA01 must = the number of functional groups |  |
| X223.C10..IEA01.040 | IEA01 |  |  |  |  |  |  |  | TA1 | R | TA105 = 021: "Invalid Number of Included Groups Value". | IEA01 must be > 0 . |  |
| X223.C10..IEA02.010 | IEA02 | Interchange Control Number | No | 9-9 | R |  |  |  | TA1 | R | TA105 = 001: "The Interchange Contro Number in the Header and Trailer Do Not Match" | IEA02 must be present. |  |
| X223.C10..IEA02.020 | IEA02 |  |  |  |  |  |  |  | TA1 | R | TA105 = 001: "The Interchange Contro Number in the Header and Trailer Do Not Match" | IEA02 must = ISA13 |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Color Coding |  | Indicates a CSC or EIC code is TBD |  |  |  |  |  |  |  |  |  |  |  |
| Color Coding |  | ICD-9 Only period |  |  |  |  |  |  |  |  |  |  |  |
| Color Coding |  | ICD-10 Only period assumes no dual-use after mandated date. |  |  |  |  |  |  |  |  |  |  |  |
| Color Coding |  | Not Used or Must Not be Present |  |  |  |  |  |  |  |  |  |  |  |
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| Edit Reference |
| :--- |
| X223.424.2400.SV202-4.005 | X223.424.2400.SV202-5.005 X223.424.2400.SV202-6.005 X223.364.2320.AMT01.030

X223.174.2300.REF02.050
X223.084.2010AA.NM108.010 X223.084.2010AA.NM108.020 X223.084.2010AA.NM108.030 X223.129.2010BB.REF. 010 X223.129.2010BB.REF. 020 X223.129.2010BB.REF. 030 X223.319.2310A.NM108.010 X223.319.2310A.NM108.020 X223.319.2310A.NM108.030 X223.324.2310A.REF. 010 X223.324.2310A.REF. 020 X223.324.2310A.REF. 030 X223.324.2310A.REF. 040 X223.326.2310B.NM108.010 X223.326.2310B.NM108.020 X223.326.2310B.NM108.030 X223.329.2310B.REF. 010 X223.329.2310B.REF. 020 X223.329.2310B.REF. 030 X223.331.2310C.NM108.010 X223.331.2310C.NM108.020 X223.331.2310C.NM108.030 X223.334.2310C.REF. 010 X223.334.2310C.REF. 020 X223.334.2310C.REF. 030 X223.336.2310D.NM108.010 X223.336.2310D.NM108.020 X223.336.2310D.NM108.030 X223.339.2310D.REF. 010 X223.339.2310D.REF. 020 X223.339.2310D.REF. 030 X223.349.2310F.NM108.010 X223.349.2310F.NM108.020 X223.349.2310F.NM108.030 X223.352.2310F.REF. 005 X223.352.2310F.REF. 020 X223.352.2310F.REF. 030 X223.456.2420A.NM108.010 X223.456.2420A.NM108.020 X223.456.2420A.NM108.030 X223.459.2420A.REF. 010 X223.459.2420A.REF. 020 X223.459.2420A.REF. 030 X223.461.2420B.NM108.010 X223.461.2420B.NM108.020 X223.461.2420B.NM108.030 X223.464.2420B.REF. 010 X223.464.2420B.REF. 020

Change new 999R edit to ensure the second modifier exists before the third modifier can be submitted new 999R edit to ensure the third modifier exists before the fourth modifier can be submitted added a 277C edit to ensure if 2000B.SBR01 = P then 2320.AMT01 must not = D

## edit revised

added JH (Texas) to "Misc. Notes" column language
added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language added JH (Texas) to "Misc. Notes" column language

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| $9 / 4 / 2012$ | Reason |
|  | to align with the 837P |
| $9 / 4 / 2012$ | to align with the 837P |
| $9 / 4 / 2012$ | to align with the 837P |
| $9 / 4 / 2012$ | medicare business edit |
| $9 / 5 / 2012$ | edit revised for additional VA edits (JH) per HP <br> poc comment |
| $9 / 5 / 2012$ | JH (Texas) will also handle VA claims |
| $9 / 5 / 2012$ | JH (Texas) will also handle VA claims |
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| X223.464.2420B.REF.030 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| :---: | :---: | :---: | :---: |
| X223.464.2420B.REF01.020 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.466.2420C.NM108.010 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.466.2420C.NM108.020 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.466.2420C.NM108.030 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.469.2420C.REF. 010 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.469.2420C.REF. 020 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.469.2420C.REF. 030 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.471.2420D.NM108.010 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.471.2420D.NM108.020 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.471.2420D.NM108.030 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.474.2420D.REF. 010 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.474.2420D.REF. 020 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.474.2420D.REF. 030 | added JH (Texas) to "Misc. Notes" column language | 9/5/2012 | JH (Texas) will also handle VA claims |
| X223.324.2310A.REF. 030 | edit deactivated | 9/6/2012 | edit replaced by X223.324.2310A.REF. 035 |
| X223.324.2310A.REF. 035 | removed actual VA demo code. Replaced with generic demo reference. | 9/6/2012 | medicare business edit |
| X223.071.1000A.NM105.065 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.112.2010BA.NM105.045 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.319.2310A.NM105.055 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.326.2310B.NM105.045 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.331.2310C.NM105.045 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.336.2310D.NM105.045 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.349.2310F.NM105.045 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.377.2330A.NM105.055 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.456.2420A.NM105.045 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.461.2420B.NM105.045 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.466.2420C.NM105.045 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.471.2420D.NM105.045 | added 277C edit for 1st character of middle name | 9/6/2012 | Medicare business edit |
| X223.474.2420D.REF. 020 | added the proposed 5010 edit that was inadvertantly deleted | 9/24/2012 | restore edit |
| X223.319.2310A.NM1.010 | added HCPCS to "Misc. Notes" column language to correspond to X223.424.2400.SV202-2.025 | 10/4/2012 | FCSO's 9/18/12 e-mail |
| X223.184.2300.HI01-2.020 | removed date check from edit | 10/11/2012 | HP FISS POC comment |
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## Spreadsheet Details

- An Edit Identifier is used to uniquely identify each row in an Edit Spreadsheet. It consists of the following fields separated by periods
* TR3 Identifier.
* TR3 Page reference for the segment identified
* TR3 Loop ID (if there is no loop ID there will be two periods together)
* Segment ID and Element Position.
* Edit Number (within the Segment ID / Element Position).
- The "Accept/Reject" Column will be populated with one of the following values as indicated below:
* R - The transaction set (ST-SE) is rejected back to the submitter
* E - The transaction set (ST-SE) is passed to the CEM where additional validation occurs. Rejections for both syntax and business reasons will occur at the claim level within the CEM.
* T - The error is identified in the translator and an STC record is added to the 837 flat file following the segment that had the error.
* C - The error is identified in the CEM, a 277CA flat file, including the business error information, will be generated.
- Acronyms:
* CSC - Claim Status Code.
* CSCC - Claim Status Category Code.
* EIC - Entity Identifier Code.
- Edit inclusion methodology:
* If a segment/element/composite is required, based on either guide usage or by situational rule interpretation, there will be an edit that indicates it must be present.
* If a segment/element/composite is not used, based on either guide usage or by situational rule interpretation, there will be an edit that indicates that it must not be present.
* If a segment/element/composite does not have either of those explicit notations, the edits listed will apply when the segment/element/component is present.


## - Assumptions:

* The edits included in the spreadsheet are intended to clarify the X12N Implementation Guide instructions or add Medicare specific requirements. Unless otherwise explicitly specified in the EDITS worksheet, all X12 IG instructions must be followed.
* Segments noted as "Pass through, syntax only" will not include CMS specific edits based on system constraints or business rules. This notation indicates that the information is stored on the repository but not used in any CMS system processing.
* Front End processing will determine billing criteria (inpatient, outpatient, POA, etc.) based on the NUBC manual. Specific criteria will not be included in this document * Conditional statements regarding inclusion or exclusion of segment/element/composites will be included when they can be consistently enforced by a transaction receiver. In the absence of consistently enforceable criteria, no edit will be included to control inclusion/exclusion.
Example: 2320 COB Payer Amt Paid - there is no way for the receiver to determine whether the claim has been adjudicated by the payer in Loop 2330 B , so no edit will be included for that criteria.
* Format definitions, rules, restrictions, guidance, or instructions published by the code set owner of an external code set must be met for a code from an external code set to be noted as "valid".
* If a segment is repeated at the same location with different qualifiers, the segment edit will include a qualifier clause (Only one iteration of $2300 . \mathrm{HI}$ with $\mathrm{HIO1}-1=$ "DR" is allowed), otherwise the segment edit will just include the number of iterations allowed (Only one iteration of 2310C.NM1 is allowed).
- Valid dates - dates must be valid according to the calendar for the specific year.
* Only 01-12 are valid for the month positions of the date field.
* If month is "01", the day positions may be populated with 01-31
* If month is "02", the day positions may be populated with $01-28$, except during leap years (2008 was a leap year, leap years occur every 4 years) when the day positions may be populated with 01-29.
* If month is " 03 ", the day positions may be populated with 01-31
* If month is "04", the day positions may be populated with 01-30
* If month is " 05 ", the day positions may be populated with 01-31.
* If month is " 06 ", the day positions may be populated with 01-30
* If month is "07", the day positions may be populated with 01-31
* If month is "08", the day positions may be populated with 01-31
* If month is "09", the day positions may be populated with 01-30
* If month is "10", the day positions may be populated with 01-31
* If month is " 11 ", the day positions may be populated with $01-30$
* If month is " 12 ", the day positions may be populated with 01-31

Future Date edits:

* Edits restricting a date field from being a "future date" should be evaluated against the date the file was received.
- ICD Codes:
* Edits that are specific to the period when ICD-9 is allowed are highlighted in pink.
* Edits that are specific to the period when ICD-10 is allowed are highlighted in turquoise.
. Numeric edits:
* Positive/Negative/Zero


## - Any numeric value with an edit that indicates it must be $>=0$ means that negative numbers are not allowed

- Any numeric value with an edit that indicates it must be >0 means that neither zero nor negative numbers are allowed.


## - If neither of these explicit edit are present, negative, zero, and positive numbers are allowed.

* If an edit references a numeric value (must be $>=,<=$ or $=$ with a numeric limitation) implies a numeric content requirement so the standard numeric check will not be included.
* The words "digit" or "digits" in an edit implies numeric content.
- Alphanumeric edits:
* The words "character" or "characters" in an edit implies alphanumeric content.
* If the data of an AN element or composite is from an external code list, the standard AN edits will not be included
- If an edit contains a bracketed clause, [clause], each contractor must supply the information noted in the edit (e.g. receiver code).


## Terms and Definitions

The flow of the transactions is:

* Front end processing - commercial translator edits, specific to each contractor.
- EDI syntax integrity validation

Valid Segments (e.g. valid segment identifier, number of elements, delimiters)
Segment order (as defined by the X12 / NCPDP standard)
Element Attributes (e.g. X12 usage, repetitions, data type, and min/max size)
Numeric element validation (e.g. leading minus signs, decimal points for R data types)

X12 / NCPDP syntactical rules

- HIPAA syntax integrity validation based upon adopted specifications (X12 / NCPDP)

Repeat maximums for segments, loops, elements (when repeating element are used)
Used and un-used qualifiers, (internal) codes, elements, and segments
Intra-segment situational data elements (e.g. DTP for auto accident becomes required when CLM011-1 or CLM11-2 is "AA" or "OA")

* Common edit module - identical processing across contractors

External code source validation

- All CMS business rule validation that is evaluated post-translation
- Balancing edits
- Situation based edits
- Code Set edits
- Product Type/Type of Service edits
* Shared system - CMS claims processing system.
. 277 - Denotes that a 277 acknowledgement will be returned to the submitter.
* 277 T - This designation is used when an error is identified in front end processing (before the common edit module is invoked). When this type of error is identified an STC record is added to the 837 flat file following the segment with the identified error.
* 277 C - This designation is used when an error is identified in the common edit module. When this type of error is identified an STC record is added to the 277 flat file following the segment with the identified error

999 - Denotes that a 999 acknowledgement will be returned to the submitter.

* 999R - This designation is used when an identified error causes the transaction set (ST-SE) to be rejected back to the submitter. If multiple transaction sets are included in one functional group, only the transaction set with an identified 999 R error will be rejected, not all the transaction sets in the functional group.
* 999E - This designation is used when processing continues after an error is identified; the transaction set (ST-SE) will continue to be evaluated against the translator errors before being passed to the CEM for additional validation. When an error is identified an STC record is added to the 837 flat file following the segment with the identified error. Exception: If the 999E is based on usage of a "Not Used" element only a 999E will be generated and sent back to the submitter. No corresponding 277 will be created in the flat file for this type of error


## Assumptions

277 acknowledgements and 999 acknowledgements are not mutually exclusive.

## General Edit Rules:

Duplicate ST-SE transaction sets shall be rejected as follows:
CSCC A8: Acknowledgement / Rejected for relational field in error
CSC 746: Duplicate Submission. Note: use only at the information receiver level in the Health Care Claim Acknowledgement transaction
EIC: 40: Receive
These are the priority rules. They supersede the secondary rules whenever there is a conflict between the instructions.
999R edits stand alone. They are not associated with a corresponding 277 error

999E edits are always followed by a 277 T edit.

* Exception: a 999E based on usage of a "Not Used" element stands alone.
. 277C edits stand alone. They are not associated with a corresponding 999 error.
277T edits are usually preceded by a 999E edit but can stand alone.
* Special Case: When an element has more than one error that can be identified in the translator, there can be multiple 277Ts following one 999E. Envelope edits - if a transaction is recognized as an X12 transaction with envelope errors, it must be acknowledged as shown in the spreadsheet. If envelope errors result in a transaction not being recognized as an X12 transaction, contractors have flexibilty on how to acknowlege the transaction.

All Table 1 edits result in a 999R or TA1 rejection.

* Exception: "Not Used" elements will be associated with stand-alone 999E edits.

All Table 2 edits related to CMS business constraints will be associated with a 277 edit.

* EDI Syntax Integrity Validation (WEDI Level 1) or HIPAA Syntax Integrity Validation, which includes Situational Rule Validation (WEDI Level 2) edits will be associated with a 277T edit.
* Common Edit Module validation (WEDI Levels 3 through 6) edits will be associated with a 277C edit.

All Table 2 edits related to CMS technical constraints will be associated with a 999E followed by a 277T edit.

* Examples: amounts or quantities for which CMS's internal system size is smaller than the IG allowed maximum.


## Specific Edit Rules:

## These are the secondary rules. They apply only when they do not violate the priority rules.

- Segments that are not accepted based on Medicare business rules will be associated with a stand-alone 277T edit.
. All "... must be populated with accepted AN characters" edits will be associated with a 999R (IK403=6).
. All "...must be \# - \#\# characters" edits will be associated with a 999E (IK403=4 or IK403=5)/277T edit combination.
- All "...must be $\{<,>,=,<=,>=\}$ " edits that establish element length will be associated with a 999E (IK403=4 or IK403=5)/277T edit combination

All "...must contain at least \#\# non-space characters" edits will be associated with a 999R edit (IK403=6).
All "...must be present" edits at the segment level will be associated with a 999R edit (IK304=3).
Exception: if the edit reflects Medicare business rules instead of X 12 syntax rules, the edit will be associated with a 277T edit. All "...must be present" edits at the element level will be associated with a 999R edit (IK403=1).

Exception: if the edit reflects Medicare business rules instead of X12 syntax rules, the edit will be associated with a 277T edit.
All "If ... is not present, ... must be present" edits at the segment level will be associated with a 999R edit (IK304=16).
All "If ... is present, ... must be present" edits referring to a relationship between two elements within the same segment will be associated with a 999R edit (IK403=2).
All "If ... is present, ... must be present" edits referring to a relationship between two different segments will be associated with a 277 C edit.

- All "If ...is present, ....may be present" edits referring to a relationship between two elements within the same segment will be associated with a 999R edit (IK403=10).
- All "If ... is present, ... may be present" edits referring to a relationship between two different segments will be associated with a 999R edit (IK304=I9).
. All "...must be valid values" edits will be associated with a 999R edit (IK403=7).
- All "...must be \{explicit value\}" edits will be associated with a 999R edit (IK403=7).
- All "...must be numeric" edits will be associated with a 999R edit (IK403=6).
- All external code source edits will be associated with a 277 C edit.
. All "must be an integer" edits will be associated with a 999R edit (IK403=6).
- All "must be a valid date" edits will be associated with a 999R edit (IK403=8).
- All "must be a valid time" edits will be associated with a 999R edit (IK403=8).

All "must not be present" edits at the segment level will be associated with a 277 T edit.

- All "must not be present" edits at the element level will be associated with a 999E edit (IK403=I10).

All "If ...NM102 is " 2 ", ... must not be present" edits will be associated with a 999R edit (IK403=I13).
. All dollar amounts or numeric elements that use $<,>,=,<=$, or $>=$ to establish value limits will be associated with a 277T edit.
All edits limiting the number of iterations of a segment will be associated with a 999R (IK304=5).

* Exception: All edits limiting the number of iterations of the first segment of a loop will be associated with a 999R (IK304=4).


## Segment or Element Specific Edit Rules:

## These are the tertiary rules. They apply only when they do not violate the priority or secondary rules

In Loops 1000A and 2010AA, NM109 edits referring to "approved electronic submitter" (trading partner management edits) will be associated with a 999R edit (trading partner management edits).

Elements that are situational in the TR3 but listed as "must not be present" and shaded gray on the edits spreadsheets are not to be mapped to the flat file.

| If alternative formats of the 5010 Edits spreadsheet are required, please use the "Submit Feedback" feature at the bottom of the T $\epsilon$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| http://www.cms.gov/MFFS5010D0/20 TechnicalDocumentation.asp\#TopOfPage |  |  |  |  |  |  |  |  | 2009, Data Interchange Standards Association on behalf of ASC X12. Format (c) 2009, |  |  |  |  |  |
| The Data Interchange Standards Association(DISA) holds a copyright on the TR3 documents: Copyright (c) 20 |  |  |  |  |  |  |  |  |  |  |  |  | Outbound Mapping <br> Instructions <br> (Flat file and/or 277) <br> Not Found Condition | Triggering Event |
| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | Loop Repeat | (c) |  | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X212.C3. ISA. 010 | ISA | INTERCHANGE CONTROL HEADER |  | 1 | R |  | 1 | TA1 | R | TA105: 024 "Invalid Interchange Content". | ISA must be present. | ISA must be present. |  |  |
| X212.C3. ISA.020 | ISA |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | Only one iteration of ISA is allowed. | Only one iteration of ISA is allowed. |  |  |
| X212.C3. ISA01.010 | ISA01 | Authorization Information Qualifier | ID | 2-2 | R |  |  | TA1 | R | TA105: 010 "Invalid Authorization Information Qualifier Value". | ISA01 must be present. | ISA01 must be present. |  |  |
| X212.C3. ISA01.020 | ISA01 |  |  |  |  |  |  | TA1 | R | TA105: 010 "Invalid Authorization Information Qualifier Value". | ISA01 must be "00" or "03". | ISA01 must be "00" or "03". |  |  |
| X212.C3. ISA02.010 | ISA02 | Authorization Information | AN | $\begin{array}{\|c} 10- \\ 10 \end{array}$ | R |  |  | TA1 | R | TA105: 011 "Invalid <br> Authorization Information <br> Value". <br> TA10 | ISA02 must be present. | ISA02 must be present. |  |  |
| X212.C3. ISA02.020 | ISA02 |  |  |  |  |  |  | TA1 | R | TA105: 011 "Invalid Authorization Information Value". | ISA02 must be 10 characters. | ISA02 must be 10 characters. |  |  |
| X212.C3. ISA02.030 | ISA02 |  |  |  |  |  |  | TA1 | R | TA105: 011 "Invalid Authorization Information Value". | ISA02 must be populated with accepted AN characters. | ISA02 must be populated with accepted AN characters. |  |  |
| X212.C3. ISA03.010 | ISA03 | Security Information Qualifier | ID | 2-2 | R |  |  | TA1 | R | TA105: 012 "Security Information Qualifier Value". | ISA03 must be present. | ISA03 must be present. |  |  |
| X212.C3. ISA03.020 | ISA03 |  |  |  |  |  |  | TA1 | R | TA105: 012 "Security Information Qualifier Value". | ISA03 must be "00" or "01". | ISA03 must be "00" or "01". |  |  |
| X212.C3. ISA04.010 | ISA04 | Security Information | AN | $\begin{array}{\|c} 10- \\ 10 \\ \hline \end{array}$ | R |  |  | TA1 | R | TA105: 013 "Security Information Value". | ISA04 must be present. | ISA04 must be present. |  |  |
| X212.C3. ISA04.020 | ISA04 |  |  |  |  |  |  | TA1 | R | TA105: 013 "Security Information Value". | ISA04 must be 10 characters. | ISA04 must be 10 characters. |  |  |
| X212.C3. ISA04.030 | ISA04 |  |  |  |  |  |  | TA1 | R | TA105: 013 "Security Information Value". | ISA04 must be populated with accepted AN characters. | ISA04 must be populated with accepted AN characters. |  |  |
| X212.C3. ISA05.010 | ISA05 | Interchange ID Qualifier | ID | 2-2 | R |  |  | TA1 | R | TA105: 005 "Invalid <br> Interchange ID Qualifier for <br> Sender". | ISA05 must be present. | ISA05 must be present. |  |  |
| X212.C3. ISA05.020 | ISA05 |  |  |  |  |  |  | TA1 | R | TA105: 005 "Invalid Interchange ID Qualifier for Sender". | ISA05 must be valid values. | ISA05 must be "ZZ". |  |  |
| X212.C3. ISA06.010 | ISA06 | Interchange Sender ID | AN | $\begin{array}{\|c\|} \hline 15- \\ 15 \\ \hline \end{array}$ | R |  |  | TA1 | R | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must be present. | ISA06 must be present. |  |  |
| X212.C3. ISA06.020 | ISA06 |  |  |  |  |  |  | TA1 | R | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must be a valid sender id. | ISA06 must be a valid sender id. |  |  |
| X212.C3. ISA07.010 | ISA07 | Interchange ID Qualifier | ID | 2-2 | R |  |  | TA1 | R | TA105: 007 "Invalid <br> Interchange ID Qualifier for Receiver". | ISA07 must be present. | ISA07 must be present. |  |  |
| X212.C3. ISA07.020 | ISA07 |  |  |  |  |  |  | TA1 | R | TA105: 007 "Invalid Interchange ID Qualifier for Receiver". | ISA07 must be valid values. | ISA07 must be "ZZ". |  |  |
| X212.C3. ISA08.010 | ISA08 | Interchange Receiver ID | AN | $\begin{array}{\|l\|} \hline 15- \\ 15 \\ \hline \end{array}$ | R |  |  | TA1 | R | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must be present. | ISA08 must be present. |  |  |
| X212.C3. ISA08.020 | ISA08 |  |  |  |  |  |  | TA1 | R | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must be a valid receiver id. | $\begin{aligned} & \text { ISA08 must be a valid receiver } \\ & \text { id. } \end{aligned}$ |  |  |
| X212.C3. ISA09.010 | ISA09 | Interchange Date | DT | 6-6 | R |  |  | TA1 | R | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be present. | ISA09 must be present. |  |  |
| X212.C3. ISA09.020 | ISA09 |  |  |  |  |  |  | TA1 | R | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be a valid date in YYMMDD format. | ISA09 must be a valid date in YYMMDD format. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 9991 \\ 277 \end{gathered}$ | $\begin{gathered} \hline 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{gathered} \hline \text { Outbound Mapping } \\ \text { Instructions } \\ \text { (Flat file and/or 277) } \\ \text { Found Condition } \\ \hline \end{gathered}$ | Outbound Mapping <br> Instructions <br> (Flat file and/or 277) <br> Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.C3. ISA09.030 | ISA09 |  |  |  |  |  |  | TA1 | R | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be a the date of the interchange; must not be a future date. | ISA09 must be a the date of the interchange; must not be a future date. |  |  |
| X212.C3. .ISA10.010 | ISA10 | Interchange Time | тм | 4-4 | R |  |  | TA1 | R | TA105: 015 "Invalid <br> Interchange Time Value". | ISA10 must be present. | ISA10 must be present. |  |  |
| X212.C3. .ISA10.020 | ISA10 |  |  |  |  |  |  | TA1 | R | $\begin{array}{\|l\|} \hline \text { TA105: } 015 \text { "Invalid } \\ \text { Interchange Time Value". } \\ \hline \end{array}$ | ISA10 must be a valid time in HHMM format. | ISA10 must be a valid time in HHMM format. |  |  |
| X212.C3. .ISA11.010 | ISA11 | Repetition Seperator | AN | 1-1 | R |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | ISA11 must be present. | ISA11 must be present. |  |  |
| X212.C3. .ISA11.020 | ISA11 |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content" | ISA11 must be 1 character. | ISA11 must be 1 character. |  |  |
| X212.C3. .ISA11.030 | ISA11 |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | ISA11 must contain at least one non-space character. | ISA11 must contain at least one non-space character. |  |  |
| X212.C3. .ISA12.010 | ISA12 | Interchange Control Version Number | ID | 5-5 | R |  |  | TA1 | R | TA105: 017 "Invalid Interchange Version ID Value". | ISA12 must be present. | ISA12 must be present. |  |  |
| X212.C3. .ISA12.020 | ISA12 |  |  |  |  |  |  | TA1 | R | TA105: 017 "Invalid Interchange Version ID Value". | ISA12 must be "00501". | ISA12 must be "00501". |  |  |
| X212.C3. .ISA13.010 | ISA13 | Interchange Control Number | No | 9-9 | R |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be present. | ISA13 must be present. |  |  |
| X212.C3. .ISA13.020 | ISA13 |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be numeric. | ISA13 must be numeric. |  |  |
| X212.C3. .ISA13.030 | ISA13 |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be 9 characters. | ISA13 must be 9 characters. |  |  |
| X212.C3. .ISA13.040 | ISA13 |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be > 0 . | ISA13 must be >0. |  |  |
| X212.C3. .ISA13.050 | ISA13 |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be unsigned. | ISA13 must be unsigned. |  |  |
| X212.C3. .ISA14.010 | ISA14 | Acknowledgement Requested | ID | 1-1 | R |  |  | TA1 | R | TA105: 019 "Invalid Acknowledgment Requested Value". | ISA14 must be present. | ISA14 must be present. |  |  |
| X212.C3. .ISA14.020 | ISA14 |  |  |  |  |  |  | TA1 | R | TA105: 019 "Invalid Acknowledgment Requested Value". | ISA14 must be valid values. | ISA14 must be valid values. |  |  |
| X212.C3. ISA15.010 | ISA15 | Usage Indicator | ID | 1-1 | R |  |  | TA1 | R | TA105: 020 "Invalid Test Indicator Value". | ISA15 must be present. | ISA15 must be present. |  |  |
| X212.C3. .ISA15.020 | ISA15 |  |  |  |  |  |  | TA1 | R | TA105: 020 "Invalid Test Indicator Value". | ISA15 must be"P" or "T". | ISA15 must be"P" or "T". |  |  |
| X212.C3. .ISA16.010 | ISA16 | Component Element Separator | AN | 1-1 | R |  |  | TA1 | R | TA105: 027 "Invalid Component Element Separator" | ISA16 must be present. | ISA16 must be present. |  |  |
| X212.C3. .ISA16.020 | ISA16 |  |  |  |  |  |  | TA1 | R | TA105: 027 "Invalid Component Element Separator" | ISA16 must be 1 character. | ISA16 must be 1 character. |  |  |
| X212.C3. ISA16.030 | ISA16 |  |  |  |  |  |  | TA1 | R | TA105: 027 "Invalid Component Element Separator" | ISA16 must contain at least one non-space character. | ISA16 must contain at least one non-space character. |  |  |
| X212.C3. .ISA16.040 | ISA16 |  |  |  |  |  |  | TA1 | R | TA105: 027 "Invalid Component Element Separator" | ISA16 must be populated with accepted AN characters. | ISA16 must be populated with accepted AN characters. |  |  |
| X212.C7. .GS. 010 | GS | FUNCTIONAL GROUP HEADER |  | 1 | R |  | >1 | 999 | R | AK905: 1 "Functional Group Not Supported". | GS must be present within a single Functional group boundary (GS-GE) pairing. | GS must be present within a single Functional group boundary (GS-GE) pairing. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{aligned} & \text { TA1/1 } \\ & 999 / \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.C7. .GS. 020 | GS |  |  |  |  |  |  | 999 | R | AK905: 1 "Functional Group Not Supported". | Only one iteration of GS is allowed within a single Functional group boundary (GSGE) pairing. | Only one iteration of GS is allowed within a single Functional group boundary (GS-GE) pairing. |  |  |
| X212.C7. . GS01.010 | GS01 | Functional Identifier Code | ID | 2-2 | R |  |  | 999 | R | AK905: 1 "Functional Group Not Supported". | GS01 must be present. | GS01 must be present. |  |  |
| X212.C7. . GS01.020 | GS01 |  |  |  |  |  |  | 999 | R | AK905: 1 "Functional Group Not Supported". | GS01 must be "HR". | GS01 must be "HN". |  |  |
| X212.C7. . GS02.010 | GS02 | Application Sender Code | AN | 2-15 | R |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must be present. | GS02 must be present. |  |  |
| X212.C7. . GS02.020 | GS02 |  |  |  |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must be a valid sender id. | GS02 must be a valid sender id. |  |  |
| X212.C7. . GS03.010 | GS03 | Application Receiver Code | AN | 2-15 | R |  |  | 999 | R | AK905: 13 "Unknown Security Recipient". | GS03 must be present. | GS03 must be present. |  |  |
| X212.C7. . GS03.020 | GS03 |  |  |  |  |  |  | 999 | R | AK905: 13 "Unknown Security Recipient". | GS03 must be a valid receiver id. | GS03 must be a valid receiver id. |  |  |
| X212.C7. . GS04.010 | GS04 | Date | DT | 8-8 | R |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GSO4 must be the date the functional group is created; must not be a future date. | GS04 must be the date the functional group is created; must not be a future date. |  |  |
| X212.C7. . GS04.020 | GS04 |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS04 must be a valid date in CCYYMMDD format. | GS04 must be the current (system) date in CCYYMMDD format. |  |  |
| X212.C7. . GS04.030 | GS04 |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS04 must be a the date the functional group is created; must not be a future date. |  |  |  |
| X212.C7. . GS05.010 | GS05 | Time | тм | 4-8 | R |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS05 must be present. | GS05 must be present. |  |  |
| X212.C7. . GS05.020 | GS05 |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS05 must be a valid time in a valid value format. | GS05 must be the current (system) time in a valid value format. |  |  |
| X212.C7. . GS06.010 | GS06 | Group Control Number | No | 1-9 | R |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be present. | GS06 must be present. |  |  |
| X212.C7. . GS06.020 | GS06 |  |  |  |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax" | GS06 must be numeric. | GS06 must be numeric. |  |  |
| X212.C7. . GS06.030 | GS06 |  |  |  |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | $\begin{aligned} & \begin{array}{l} \text { GS06 must be >0 and < } \\ =999,999,999 \end{array} \end{aligned}$ | $\begin{aligned} & \begin{array}{l} \text { GS06 must be }>0 \text { and }< \\ =999,999,999 \end{array} \end{aligned}$ |  |  |
| X212.C7. . GS06.040 | GS06 |  |  |  |  |  |  | 999 | R | AK905: 19 "Functional Group Control Number not Unique within Interchange. | GS06 must be unique within the interchange. | GS06 must be unique within the interchange. |  |  |
| X212.C7. . GS07.010 | GS07 | Responsible Agency Code | ID | 1-2 | R |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS07 must be present. | GS07 must be present. |  |  |
| X212.C7. . GS07.020 | GS07 |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS07 must be "X". | GS07 must be "X". |  |  |
| X212.C7. . GS08.010 | GS08 | Version Identifier Code | AN | 1-12 | R |  |  | 999 | R | AK905: 2 "Functional Group Version Not Supported" | GS08 must be present. | GS08 must be present. |  |  |
| X212.C7. . GS08.020 | GS08 |  |  |  |  |  |  | 999 | R | AK905: 2 "Functional Group Version Not Supported" | GS08 must be "005010X212". | GS08 must be "005010x212". |  |  |
| X212.36/106. .ST. 010 | ST | TRANSACTION SET HEADER |  | 1 | R |  | >1 | 999 | R | IK502: 1 "Transaction Set Not Supported". | ST must be present. | ST must be present. |  |  |
| X212.36/106. . ST. 020 | ST |  |  |  |  |  |  | 999 | R | IK502: 1 "Transaction Set Not Supported". | Only one iteration of ST is allowed. | Only one iteration of ST is allowed. |  |  |
| X212.36/106. . ST01.010 | ST01 | Transaction Set Identifier Code | ID | 3-3 | R |  |  | 999 | R | IK502: 6 "Missing or Invalid Transaction Set Identifier". | ST01 must be present. | ST01 must be present. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{array}{\|c} \text { Loop } \\ \text { Repeat } \\ \hline \end{array}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & 277 \end{aligned}$ | $\begin{gathered} \hline 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{gathered} \hline \text { Outbound Mapping } \\ \text { Instructions } \\ \text { (Flat file and/or 277) } \\ \text { Found Condition } \\ \hline \end{gathered}$ | Outbound Mapping <br> Instructions <br> (Flat file and/or 277) <br> Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.36/106. . ST01.020 | ST01 |  |  |  |  |  |  | 999 | R | IK502: 6 "Missing or Invalid Transaction Set Identifier". | ST01 must be "276". | ST01 must be "277". |  |  |
| X212.36/106. . ST02.010 | ST02 | Transaction Set Control Number | AN | 4-9 | R |  |  | 999 | R | IK502: 7 "Missing or Invalid Transaction Set Control Number". | ST02 must be present. | ST02 must be present. |  |  |
| X212.36/106. . ST02.020 | ST02 |  |  |  |  |  |  | 999 | R | IK502: 7 "Missing or Invalid Transaction Set Control Number". | ST02 must be 4-9 characters. | ST02 must be the concatenated value of three zeroes and a sequential number, the sequential portion will start with 1 and increment by 1 . <br> Example: "0001" followed by "0002".."0010". |  |  |
| X212.36/106. . ST02.030 | ST02 |  |  |  |  |  |  | 999 | R | IK502: 7 "Missing or Invalid Transaction Set Control Number". | ST02 must contain at least four non-space characters. |  |  |  |
| X212.36/106. . ST02.040 | ST02 |  |  |  |  |  |  | 999 | R | IK502: 7 "Missing or Invalid Transaction Set Control Number". | ST02 must be populated with accepted AN characters. |  |  |  |
| X212.36/106. . ST02.050 | ST02 |  |  |  |  |  |  | 999 | R | IK502: 23 "Transaction Set Control Number Not Unique within the Functional Group". | ST02 must be a unique number within the ISA-IEA envelope. |  |  |  |
| X212.36/106. . ST03.010 | ST03 | Implementation Convention Reference | AN | 1-35 | R |  |  | 999 | R | IK502: 16 "Implementation Convention Not Supported". | ST03 must be present. | ST03 must be present. |  |  |
| X212.36/106. . ST03.020 | ST03 |  |  |  |  |  |  | 999 | R | IK502: 16 "Implementation Convention Not Supported". | ST03 must be "005010X212". | ST03 must be "005010X212". |  |  |
| X212.37/107. . BHT. 010 | BHT | BEGINNING OF HIERARCHICAL TRANSACTION |  | 1 | R |  | 1 | 999 | R | IK304 = 3: "Required Segment Missing" | BHT must be present. | BHT must be present. |  |  |
| X212.37/107. . BHT. 020 | BHT |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment <br> Exceeds Maximum Use" | Only one iteration of BHT is allowed. | Only one iteration of BHT is allowed. |  |  |
| X212.37/107. . BHT01.010 | BHTO1 | Hierarchical Structure Code | ID | 4-4 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT01 must be present. | BHT01 must be present. |  |  |
| X212.37/107. .BHT01.020 | BHTO1 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | BHT01 must be "0010". | BHT01 must be "0010". |  |  |
| X212.37/107. . BHT02.010 | BHTO2 | Transaction Set Purpose Code | ID | 2-2 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT02 must be present. | BHT02 must be present. |  |  |
| X212.37/107. . BHT02.020 | BHT02 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | BHT02 must be "13". | BHT02 must be "08". |  |  |
| X212.37/107. . BHT03.010 | вНтоз | $\begin{aligned} & \text { Reference } \\ & \text { Identification } \\ & \hline \end{aligned}$ | AN | 1-50 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT03 must be present. | BHT03 must be present. |  |  |
| X212.37/107. . BHT03.020 | BHT03 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | BHT03 must be 1-50 characters. | BHT03 must be the cycle date in CCYYDDD Julian date format concatenated with value from STO2. <br> Example: "20091560001" |  |  |
| X212.37/107. . BHT03.030 | BHT03 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | BHTO3 must contain at least one non-space character. |  |  |  |
| X212.37/107. .BHT03.040 | BHT03 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | BHT03 must be populated with accepted AN characters. |  |  |  |
| X212.37/107. . BHT04.010 | BHTO4 | $\begin{array}{\|l} \hline \text { Transaction Set } \\ \text { Creation Date } \\ \hline \end{array}$ | DT | 8-8 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT04 must be present. | BHT04 must be present. |  |  |
| X212.37/107. . BHT04.020 | BHT04 |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | BHT04 must be a valid date in CCYYMMDD format. | BHT04 must be the current (system) date in CCYYMMDD format. |  |  |
| X212.37/107. .BHT04.030 | BHT04 |  |  |  |  |  |  | 277 | c | CSC 510: "Future date" | BHT04 must not be a future date. |  |  |  |


| Edit Reference | Element Identifier | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{array}{\|c} \text { Loop } \\ \text { Repeat } \\ \hline \end{array}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & 277 \end{aligned}$ | $\begin{aligned} & 2 \mathrm{TT} \\ & 7 \mathrm{C} \\ & 6 \mathrm{E} \\ & \mathrm{R} \end{aligned}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{gathered} \hline \text { Outbound Mapping } \\ \text { Instructions } \\ \text { (Flat file and/or 277) } \\ \text { Found Condition } \\ \hline \end{gathered}$ | $\begin{aligned} & \hline \text { Outbound Mapping } \\ & \text { Instructions } \\ & \text { (Flat file and/or 277) } \\ & \text { Not Found Condition } \\ & \hline \end{aligned}$ | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.37/107. . BHT05.010 | BHT05 | Transaction Set Creation Time | тм | 4-8 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT05 must be present. | BHT05 must be present. |  |  |
| X212.37/107. .BHT05.020 | BHT05 |  |  |  |  |  |  | 999 | R | IK403 = 9: "Invalid Time" | BHT05 must a valid time in a valid time format. | BHT05 must be the current (system) time in HHMMSS format. |  |  |
| X212.37/107. .BHT06.010 | BHT06 | Transaction Type Code | ID | 2-2 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | BHT06 must be present. |  |  |
| X212.37/107. . BHT06.020 | BHT06 |  |  |  |  |  |  |  |  |  |  | BHT06 must be "DG". |  |  |
| X212.39/109.2000A.IS Loop. 010 | IS Loop | Information Source Loop |  |  |  | 2000A | >1 |  |  |  |  |  |  |  |
| X212.39/109.2000A.HL.010 | HL | INFORMATION SOURCE LEVEL |  | 1 | R | 2000A | 1 | 999 | R | IK304 = 3: "Required Segment Missing" | 2000A.HL must be present. | 2000A.HL must be present. |  |  |
| X212.39/109.2000A.HL.020 | HL |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment <br> Exceeds Maximum Use" | Only one iteration of 2000A.HL is allowed. | Only one iteration of 2000A.HL is allowed. |  |  |
| X212.39/109.2000A.HL01.010 | HL01 | Hierarchical ID Number | AN | 1-12 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.HL01 must be present. | 2000A.HL01 must be present. |  |  |
| X212.39/109.2000A.HL01.020 | HL01 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2000A. HL01 must be 1-12 characters. |  |  |  |
| X212.39/109.2000A.HL01.030 | HL01 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000A.HL01 must be numeric. |  |  |  |
| X212.39/109.2000A.HL01.040 | HL01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | The first HL01 must be "1". | The first HL01 must be "1". |  |  |
| X212.39/109.2000A.HL02.010 | HL02 | Hierarchical Parent ID Number | AN | 1-12 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.39/109.2000A.HL03.010 | HL03 | Hierarchical Level Code | ID | 1-2 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.HL03 must be present. | 2000A.HL03 must be present. |  |  |
| X212.39/109.2000A.HL03.020 | HL03 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000A.HL03 must be "20". | 2000A.HL03 must be "20". |  |  |
| X212.39/109.2000A.HL04.010 | HLO4 | Hierarchical Child Code | ID | 1-1 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.HL04 must be present. | 2000A.HL04 must be present. |  |  |
| X212.39/109.2000A.HL04.020 | HLO4 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000A.HL04 must be "1'. | 2000A.HLO4 must be "1'. |  |  |
| X212.41/111.2100A.NM1.010 | NM1 | PAYER NAME |  | 1 | R | 2100A | 1 | 999 | R | IK304 = 3: "Required Segment Missing" | 2100A.NM1 must be present. | 2100A.NM1 must be present. |  |  |
| X212.41/111.2100A.NM1.020 | NM1 |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2100A.NM1 with NM101 "PR" is allowed. | Only one iteration of 2100A.NM1 with NM101 "PR" is allowed. |  |  |
| X212.41/111.2100A.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100A.NM101 must be present. | 2100A.NM101 must be present. |  |  |
| X212.41/111.2100A.NM101.020 | NM101 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2100A.NM101 must be "PR". | 2100A.NM101 must be "PR". |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{aligned} & \text { TA11 } \\ & 999 / \\ & 297 \end{aligned}$ | $\begin{gathered} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{gathered} \hline \text { Outbound Mapping } \\ \text { Instructions } \\ \text { (Flat file and/or 277) } \\ \text { Found Condition } \\ \hline \end{gathered}$ | Outbound Mapping <br> Instructions <br> (Flat file and/or 277) <br> Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.41/111.2100A.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100A.NM102 must be present. | 2100A.NM102 must be present. |  |  |
| X212.41/111.2100A.NM102.020 | NM102 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2100A.NM102 must be "2". | 2100A.NM102 must be "2". |  |  |
| X212.41/111.2100A.NM103.010 | NM103 | Payer Name | AN | 1-60 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100A.NM103 must be present. | 2100A.NM103 must be present. |  |  |
| X212.41/111.2100A.NM103.020 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100A.NM103 must be 1 - 60 characters. | 2100A.NM103 is pulled from the system reference file that designates the workload. |  |  |
| X212.41/111.2100A.NM103.030 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100A.NM103 must contain at least one non-space character |  |  |  |
| X212.41/111.2100A.NM103.040 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100A.NM103 must be populated with accepted AN characters. |  |  |  |
| X212.41/111.2100A.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.41/111.2100A.NM105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.41/111.2100A.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.41/111.2100A.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.41/111.2100A.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100A.NM108 must be present. | 2100A..NM108 must be present. |  |  |
| X212.41/111.2100A.NM108.020 | NM108 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2100A.NM108 must be "PI". | 2100A..NM108 must be "PI". |  |  |
| X212.41/111.2100A.NM109.010 | NM109 | Payer Identifier | AN | 2-80 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100A.NM109 must be present. | 2100A..NM109 must be present. |  |  |
| X212.41/111.2100A.NM109.020 | NM109 |  |  |  |  |  |  | 277 | T/C | CSC26: "Entity not found" | 2100A..NM109 must be a valid payer id according to the trading partner management system. | 2100A..NM109 must be the transmitted value from the associated 276. |  |  |
| X212.41/111.2100A.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.41/111.2100A.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.41/111.2100A.NM112.010 | NM112 | Last Name | AN | 1-60 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{aligned} & \text { TA1/1 } \\ & 999 / \\ & 297 \end{aligned}$ | $\begin{gathered} 2 \mathrm{TT} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | PER | PAYER CONTACT INFORMATION |  | 1 | s | 2100A |  |  |  |  |  | Only one iteration of 2100A.PER is allowed. |  |  |
| X212.NA/113.2100A.PER. 010 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X212.NA/113.2100A.PER01.010 | PER01 | Contact Function Code | ID | 2-2 | R |  |  |  |  |  |  | 2100A.PER01 must be present. |  |  |
| X212.NA/113.2100A.PER01.020 | PER01 |  |  |  |  |  |  |  |  |  |  | 2100A.PER01 must be "IC". |  |  |
| X212.NA/113.2100A.PER02.010 | PER02 | Payer Contact Name | AN | 1-60 | s |  |  |  |  |  |  | For Part A: 2100A.PER02 must be the value in Parm 01022. <br> For VMS - 2100A.PER02 must be the value in VANS/277 Contact. <br> For MCS - 2100A.PER02 must |  |  |
| X212.NA/113.2100A.PER03.010 | PER03 | Communication Number Qualifier | ID | 2-2 | R |  |  |  |  |  |  | 2100A.PER03 must be present. |  |  |
| X212.NA/113.2100A.PER03.020 | PERO3 |  |  |  |  |  |  |  |  |  |  | 2100A.PER03 must be "TE". |  |  |
| X212.NA/113.2100A.PER04.010 | PER04 | Communication Number | AN | $\begin{gathered} 1- \\ 256 \end{gathered}$ | R |  |  |  |  |  |  | 2100A.PER04 must be present. |  |  |
| X212.NA/113.2100A.PER04.020 | PER04 |  |  |  |  |  |  |  |  |  |  | 2100A.PER04 must be 10 digits. |  |  |
| X212.NA/113.2100A.PER05.010 | PER05 | Communication Number Qualifier | ID | 2-2 | s |  |  |  |  |  |  | 2100A.PER05 must be "EM". |  |  |
| X212.NA/113.2100A.PER06.010 | PER06 | Communication Number | AN | $\begin{gathered} 1- \\ 256 \end{gathered}$ | s |  |  |  |  |  |  | If 2100A.PER06 is present, 2100A.PER05 must be present. |  |  |
| X212.NA/113.2100A.PER06.020 | PER06 |  |  |  |  |  |  |  |  |  |  | 2100A.PER06 must be 1-256 characters. |  |  |
| X212.NA/113.2100A.PER07.010 | PER07 | Communication Number Qualifier | ID | 2-2 | s |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/113.2100A.PER08.010 | PER08 | Communication Number | AN | $\begin{gathered} 1- \\ 256 \end{gathered}$ | s |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/113.2100A.PER09.010 | PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.43/116.2000B.IR Loop. 010 | IR Loop | Information Receiver <br> Loop |  |  |  | 2000B | >1 |  |  |  |  |  |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{aligned} & \text { TA11 } \\ & 999 / \\ & 297 \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.43/116.2000B.HL. 010 | HL | INFORMATION RECEIVER LEVEL |  | 1 | R | 2000B | 1 | 999 | R | IK304 = 3: "Required Segment Missing" | 2000B.HL must be present. | 2000B.HL must be present. |  |  |
| X212.43/116.2000B.HL.020 | HL |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000B.HL is allowed. | Only one iteration of 2000B.HL is allowed. |  |  |
| X212.43/116.2000B.HL01.010 | HL01 | Hierarchical ID Number | AN | 1-12 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.HL01 must be present. | 2000B.HL01 must be present. |  |  |
| X212.43/116.2000B.HL01.020 | HL01 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2000B. HL01 must be 1-12 characters. |  |  |  |
| X212.43/116.2000B.HL01.030 | HL01 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000B.HL01 must be numeric. |  |  |  |
| X212.43/116.2000B.HL01.040 | HL01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000B.HLO1 must equal the value of the previous HL01 plus one. | 2000B.HLO1 must equal the value of the previous HL01 plus one. |  |  |
| X212.43/116.2000B.HLO2.010 | HL02 | Hierarchical Parent ID Number | AN | 1-12 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.HLO2 must be present. | 2000B.HL02 must be present. |  |  |
| X212.43/116.2000B.HLO2.020 | HL02 |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2000B.HLO2 must be equal the value of the HL01 (2000A.HL01) of the parent HL . | 2000B.HLO2 must be equal the value of the HLO1 (2000A.HLO1) of the parent HL. |  |  |
| X212.43/116.2000B.HL03.010 | HL03 | Hierarchical Level Code | ID | 1-2 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.HL03 must be present. | 2000B.HL03 must be present. |  |  |
| X212.43/116.2000B.HL03.020 | HLO3 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000B.HL03 must be "21". | 2000B.HL03 must be "21". |  |  |
| X212.43/116.2000B.HL04.010 | HLO4 | Hierarchical Child Code | ID | 1-1 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.HL04 must be present. | 2000B.HL04 must be present. |  |  |
| X212.43/116.2000B.HL04.020 | HLO4 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000B. HL04 must be "1". | 2000B.HL04 must be "0" when rejecting the status request for errors at the Information Source or Information Receiver levels. Otherwise, 2000B.HLO4 must be "1". |  | Triggering error example: <br> 2100B.NM109 NE ISA06. |
| X212.45/118.2100B.NM1.010 | NM1 | INFORMATION RECEIVER NAME |  | 1 | R | 2100B | 1 | 999 | R | IK304 = 3: "Required Segment Missing" | 2100B.NM1 must be present. | 2100B.NM1 must be present. |  |  |
| X212.45/118.2100B.NM1.020 | NM1 |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2100B.NM1 is allowed with NM101="41". | Only one iteration of 2100B.NM1 is allowed with NM101="41". |  |  |
| X212.45/118.2100B.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100B.NM101 must be present. | 2100B.NM101 must be present. |  |  |
| X212.45/118.2100B.NM101.020 | NM101 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2100B.NM101 must be "41". | 2100B.NM101 must be the transmitted value from the associated 276. |  |  |
| X212.45/118.2100B.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100B.NM102 must be present. | 2100B.NM102 must be present. |  |  |
| X212.45/118.2100B.NM102.020 | NM102 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2100B.NM102 must be valid values | 2100B.NM102 must be the transmitted value from the associated 276. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{aligned} & \hline \text { Outbound Mapping } \\ & \text { Instructions } \\ & \text { (Flat file and/or 277) } \\ & \text { Found Condition } \\ & \hline \end{aligned}$ | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.45/118.2100B.NM103.010 | NM103 | Information Receiver <br> Last Name or <br> Organization Name | AN | 1-60 | s |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100B.NM103 must be present. | 2100B.NM103 must be present. |  |  |
| X212.45/118.2100B.NM103.020 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100B.NM103 must be 1-60 characters. | 2100B.NM103 must be the transmitted value from the associated 276 |  |  |
| X212.45/118.2100B.NM103.030 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100B.NM103 must be populated with accepted $\mathrm{A} / \mathrm{N}$ characters. |  |  |  |
| X212.45/118.2100B.NM103.040 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100B.NM103 must contain at least one non-space character. |  |  |  |
| X212.45/118.2100B.NM104.010 | NM104 | Information Receiver First Name | AN | 1-35 | s |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 2100B.NM102 is "2", 2100B.NM104 must not be present | 2100B.NM104 must be the transmitted value from the associated 276. |  |  |
| X212.45/118.2100B.NM104.020 | NM104 |  |  |  |  |  |  | 277 | c | CSC 505: "Entity's First Name" | If 2100B.NM102 is " 1 ", <br> 2100B.NM104 must be present. |  |  |  |
| X212.45/118.2100B.NM104.030 | NM104 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100B.NM104 must be 1 - 35 characters. |  |  |  |
| X212.45/118.2100B.NM104.040 | NM104 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100B.NM104 must contain at least one non-space character. |  |  |  |
| X212.45/118.2100B.NM104.050 | NM104 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100B.NM105 must be populated with accepted AN characters. |  |  |  |
| X212.45/118.2100B.NM105.010 | NM105 | Information Receiver Middle Name | AN | 1-25 | s |  |  | 999 | R | IK403 = I13: "Implementation <br> Dependent 'not used' Data Element Present" | If 2100B.NM102 is " 2 ", 2100B.NM105 must not be present | 2100B.NM105 must be the transmitted value from the associated 276. |  |  |
| X212.45/118.2100B.NM105.020 | NM105 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100B.NM105 must be 1-25 characters. |  |  |  |
| X212.45/118.2100B.NM105.030 | NM105 |  |  |  |  |  |  | 999 | R | K403 = 6: "Invalid Character in Data Element" | 2100B.NM105 must contain at least one non-space character. |  |  |  |
| X212.45/118.2100B.NM105.040 | NM105 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100B.NM105 must be populated with accepted AN characters. |  |  |  |
| X212.45/118.2100B.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.45/118.2100B.NM107.010 | NM107 | Information Receiver Name Suffix | AN | 1-10 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.45/118.2100B.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100B.NM108 must be present. | 2100B.NM108 must be present. |  |  |
| X212.45/118.2100B.NM108.020 | NM108 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2100B.NM108 must be "46". | 2100B.NM108 must be the transmitted value from the associated 276. |  |  |
| X212.45/118.2100B.NM109.010 | NM109 | Information Receiver Identification Number | AN | 2-80 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100B.NM109 must be present. | 2100B.NM109 must be present. |  |  |
| х212.45/118.2100B.NM109.020 | NM109 |  |  |  |  |  |  | 277 | T/C | CSC26: "Entity not found" | 2100B.NM109 must be the same as GS02. | 2100B.NM109 must be the transmitted value from the associated 276. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{array}{\|c} \text { Loop } \\ \text { Repeat } \\ \hline \end{array}$ | $\begin{gathered} \text { TA11 } \\ 9991 \\ 277 \end{gathered}$ | $\begin{gathered} \hline 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{gathered} \hline \text { Outbound Mapping } \\ \text { Instructions } \\ \text { (Flat file and/or 277) } \\ \text { Found Condition } \\ \hline \end{gathered}$ | Outbound Mapping <br> Instructions <br> (Flat file and/or 277) <br> Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.45/118.2100B.NM109.030 | NM109 |  |  |  |  |  |  | 277 | T/C | CSC 24: "Entity not approved as an electronic submitter " | 2100B..NM109 must be a valid submitter id according to the trading partner management system. | 2100A..NM109 must be the transmitted value from the associated 276. |  |  |
| X212.45/118.2100B.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.45/118.2100B.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.45/118.2100B.NM112.010 | NM112 | Last Name | AN | 1-60 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.NA/120.2200B.TRN. 010 | TRN | Receiver CLAIM STATUS TRACKING NUMBER |  | 1 | s | 2200B | 1 |  |  |  |  | Translator level: <br> When 2000B.HL04 = " 0 ", one iteration of 2200B.TRN is required. <br> Otherwise, 2200B.TRN is not allowed. |  |  |
| X212.NA/120.2200B.TRN01.010 | TRN01 | Trace Type Code | ID | 1-2 | R |  |  |  |  |  |  | 2200B.TRNO1 must be present. |  |  |
| X212.NA/120.2200B.TRN01.020 | TRN01 |  |  |  |  |  |  |  |  |  |  | 2200B.TRN01 must be "2". |  |  |
| X212.NA/120.2200B.TRN02.010 | TRN02 | Trace Number | AN | 1-50 | R |  |  |  |  |  |  | 2200B.TRNO2 must be present. |  |  |
| X212.NA/120.2200B.TRN02.020 | TRN02 |  |  |  |  |  |  |  |  |  |  | 2200B.TRN02 must be the BHTO3 value from the associated 276. |  |  |
| X212.NA/120.2200B.TRN03.010 | TRN03 | Originating Company Identifier | AN | $\begin{aligned} & 10- \\ & 10 \end{aligned}$ | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/120.2200B.TRN04.010 | TRN04 | Reference Identifier | AN | 1-50 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/121.2200B.STC. 010 | STC | INFORMATION RECEIVER STATUS INFORMATION |  | 1 | R | 2200B |  |  |  |  |  | Translator level: When 2000B.HL04 = " 0 ", one iteration of 2200B.STC is required. <br> When not triggered, 2200B.STC is not allowed. |  |  |
| X212.NA/121.2200B.STC01.010 | STC01 | HEALTH CARE CLAIM STATUS |  |  | R |  |  |  |  |  |  |  |  |  |
| X212.NA/121.2200B.STC01-1.010 | STC01-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | 2200B.STC01-1 must be "DO" or "E". |  |  |
| X212.NA/121.2200B.STC01-2.010 | STC01-2 | Health Care Claim Status Code | AN | 1-30 | R |  |  |  |  |  |  | 2200B.STC01-2 must be present. |  |  |
| X212.NA/121.2200B.STC01-2.020 | STC01-2 |  |  |  |  |  |  |  |  |  |  | 2200B.STC01-2 must be a valid Claim Status Code. |  |  |
| X212.NA/121.2200B.STC01-3.010 | STC01-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | 2200B.STC01-3 must be "41". |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{array}{l\|l\|} \hline \text { TA11 } \\ 999 / 1 \\ 2977 \\ \hline \end{array}$ | $\begin{gathered} 2 \mathrm{TT} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.NA/121.2200B.STC01-4.010 | STC01-4 | Code List Qualifier Code | ID | 1-3 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/121.2200B.STC02.010 | STC02 | Status Information Effective Date | DT | 8-8 | R |  |  |  |  |  |  | 2200B.STC02 must the current (system) date in CCYYMMDD format |  |  |
| X212.NA/121.2200B.STC03.010 | STC03 | Action Code | ID | 1-2 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/121.2200B.STC04.010 | STC04 | Monetary Amount | R | 1-18 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/121.2200B.STC05.010 | STC05 | Monetary Amount | R | 1-18 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/121.2200B.STC06.010 | STC06 | Date | DT | 8-8 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/121.2200B.STC07.010 | STC07 | Payment Method Code | ID | 3-3 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/121.2200B.STC08.010 | STC08 | Date | DT | 8-8 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/121.2200B.STC09.010 | STC09 | Check Number | AN | 1-16 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/121.2200B.STC10.010 | STC10 | HEALTH CARE CLAIM STATUS |  |  | S |  |  |  |  |  |  |  |  |  |
| X212.NA/121.2200B.STC10-1.010 | STC10-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | 2200B.STC10-1 may be present if 2200B.STC01-1 is present |  |  |
| X212.NA/121.2200B.STC10-1.020 | STC10-1 |  |  |  |  |  |  |  |  |  |  | 2200B.STC01-1 must be "DO" or "E". |  |  |
| X212.NA/121.2200B.STC10-2.010 | STC10-2 | Health Care Claim Status Code | AN | 1-30 | R |  |  |  |  |  |  | 2200B.STC10-2 must be present. |  |  |
| X212.NA/121.2200B.STC10-2.020 | STC10-2 |  |  |  |  |  |  |  |  |  |  | 2200B.STC10-2 must be a valid Claim Status Code. |  |  |
| X212.NA/121.2200B.STC10-3.010 | STC10-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | 2200B.STC10-3 must be present. |  |  |
| X212.NA/121.2200B.STC10-3.020 | STC10-3 |  |  |  |  |  |  |  |  |  |  | 2200B.STC10-3 must be valid values. |  |  |
| X212.NA/121.2200B.STC10-4.010 | STC10-4 | Code List Qualifier Code | ID | 1-3 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/121.2200B.STC11.010 | STC11 | HEALTH CARE CLAIM STATUS |  |  | s |  |  |  |  |  |  |  |  |  |
| X212.NA/121.2200B.STC11-1.010 | STC11-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | 2200B.STC11-1 may be present if 2200B.STC01-1 is present |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{aligned} & \text { TA1/1 } \\ & 999 / \\ & 297 \end{aligned}$ | $\begin{gathered} 2 \mathrm{TT} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.NA/121.2200B.STC11-1.020 | STC11-1 |  |  |  |  |  |  |  |  |  |  | 2200B.STC11-1 must be "D0" or "E". |  |  |
| X212.NA/121.2200B.STC11-2.010 | STC11-2 | Health Care Claim Status Code | AN | 1-30 | R |  |  |  |  |  |  | 2200B.STC11-2 must be present. |  |  |
| X212.NA/121.2200B.STC11-2.020 | STC11-2 |  |  |  |  |  |  |  |  |  |  | 2200B.STC11-2 must be a valid Claim Status Code. |  |  |
| X212.NA/121.2200B.STC11-3.010 | STC11-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | 2200B.STC11-3 must be present. |  |  |
| X212.NA/121.2200B.STC11-3.020 | STC11-3 |  |  |  |  |  |  |  |  |  |  | 2200B.STC11-3 must be valid values. |  |  |
| X212.NA/121.2200B.STC11-4.010 | STC11-4 | Code List Qualifier Code | ID | 1-3 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/121.2200B.STC12.010 | STC12 | Free-Form Message Text | AN | $\begin{aligned} & 1- \\ & 264 \end{aligned}$ | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.47/124.2000C.SP Loop. 010 | SP Loop | Service Provider Loop |  |  |  | 2000C | >1 |  |  |  |  |  |  |  |
| X212.47/124.2000C.HL. 010 | HL | $\begin{aligned} & \text { SERVICE PROVIDER } \\ & \text { LEVEL }\end{aligned}$ |  | 1 | R | 2000C | 1 | 999 | R | IK304 = 3: "Required Segment Missing" | 2000C.HL must be present. | 2000C.HL must be present. |  |  |
| X212.47/124.2000C.HL.020 | HL |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $\mathbf{2 0 0 0}$ C.HL is allowed. | Only one iteration of 2000 C . HL is allowed. |  |  |
| X212.47/124.2000C.HL01.010 | HL01 | Hierarchical ID Number | AN | 1-12 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000C.HL01 must be present. | 2000C.HL01 must be present. |  |  |
| X212.47/124.2000C.HL01.020 | HL01 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2000C. HL01 must be 1-12 characters. |  |  |  |
| X212.47/124.2000C.HL01.030 | HL01 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000C.HL01 must be numeric. |  |  |  |
| X212.47/124.2000C.HL01.040 | HL01 |  |  |  |  |  |  | 999 | R | IK403 = $7:$ : "Invalid Code Value" | 2000C.HL01 must equal the value of the previous HL01 plus one. | 2000C.HLO1 must equal the value of the previous HLO1 plus one. |  |  |
| X212.47/124.2000C.HL02.010 | HL02 | Hierarchical Parent ID Number | AN | 1-12 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000C.HL02 must be present. | 2000C.HL02 must be present. |  |  |
| X212.47/124.2000C.HL02.020 | HL02 |  |  |  |  |  |  | 999 | R | K403 = I12: "Implementation Pattern Match Failure" | 2000C.HL02 must equal the value of the HLO1 (2000B.HLO1) of the parent HL. | 2000C.HL02 must equal the value of the HLO1 of the parent HL. |  |  |
| X212.47/124.2000C.HL03.010 | HL03 | Hierarchical Level Code | ID | 1-2 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000C. HL03 must be present. | 2000C.HL03 must be present. |  |  |
| X212.47/124.2000C.HL03.020 | HLO3 |  |  |  |  |  |  | 999 | R | IK403 $=7:$ "Invalid Code Value" Value" | 2000C. HL03 must be "19". | 2000C.HL03 must be "19". |  |  |
| X212.47/124.2000C.HL04.010 | HLO4 | Hierarchical Child Code | ID | 1-1 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000C.HL04 must be present. | 2000C.HL04 must be present. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} \text { TA11 } \\ 999 / 1 \\ 277 \\ \hline \end{gathered}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.47/124.2000C.HL04.020 | HLO4 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000C.HL04 must be "1". | 2000C. HL04 must be "0" when rejecting because the provider is not found. <br> Otherwise, 2000C.HLO4 must be "1". |  | Triggering erro example: 2100C.NM109 not matched in the internal system. |
| X212.49/126.2100C.PN Loop. 010 | PN Loop | Provider Name Loop |  |  |  | 2100 C | 2 | 277 | T | CSCC - E4 "Trading partner agreement specific requirement not met: Data correction required: CSC: 504" Entity's Last Name " DE98 = 1P Provider CSC: 505" Entity's First Name " DE98 = 1P Provider CSC: 153" Entity's ID " DE98 = 1P - Provider | Only one iteration of 2100 C is allowed. |  |  |  |
| X212.49/126.2100C.NM1.010 | NM1 | PROVIDER NAME |  | 1 | R | 2100 C | 1 | 999 | R | IK304 = 3: "Required Segment Missing" | 2100C.NM1 must be present. | 2100C.NM1 must be present. |  |  |
| X212.49/126.2100C.NM1.020 | NM1 |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment <br> Exceeds Maximum Use" | Only one iteration of 2100C.NM1 is allowed with NM101="1P". | Only one iteration of 2100C.NM1 is allowed with NM101="1P". |  |  |
| X212.49/126.2100C.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100C.NM101 must be present. | 2100C.NM101 must be present. |  |  |
| X212.49/126.2100C.NM101.020 | NM101 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2100C.NM101 must be "1P". | 2100C.NM101 must be the transmitted value from the associated 276 |  |  |
| X212.49/126.2100C.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100C.NM102 must be present. | 2100C.NM102 must be present. |  |  |
| X212.49/126.2100C.NM102.020 | NM102 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2100C.NM102 must be valid values | 2100C.NM102 must be the transmitted value from the associated 276. |  |  |
| X212.49/126.2100C.NM103.010 | NM103 | Provider Last or Organization Name | AN | 1-60 | s |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100C.NM103 must be present. | 2100C.NM103 must be present. |  |  |
| X212.49/126.2100C.NM103.020 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100C.NM103 must be 1-60 characters. | 2100C.NM103 must be the transmitted value from the associated 276. |  |  |
| X212.49/126.2100C.NM103.030 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100C.NM103 must contain at least one non-space character. |  |  |  |
| X212.49/126.2100C.NM103.040 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100C.NM103 must be populated with accepted AN characters. |  |  |  |
| X212.49/126.2100C.NM104.010 | NM104 | Provider First Name | AN | 1-35 | s |  |  | 999 | R | IK403 = I13: "Implementation <br> Dependent 'not used' Data Element Present" | If 2100C.NM102 is "2" 2100C.NM104 must not be present | 2100C.NM104 must be the transmitted value from the associated 276. |  |  |
| X212.49/126.2100C.NM104.020 | NM104 |  |  |  |  |  |  | 277 | T | CSC 505: "Entity's First Name" | If $2100 \mathrm{C} . \mathrm{NM} 102$ is " 1 ", <br> 2100C.NM104 must be present. |  |  |  |
| X212.49/126.2100C.NM104.030 | NM104 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100C.NM104 must be 1-35 characters. |  |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{aligned} & \text { TA1/1 } \\ & 999 / \\ & 297 \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{aligned} & \hline \text { Outbound Mapping } \\ & \text { Instructions } \\ & \text { (Flat file and/or 277) } \\ & \text { Found Condition } \\ & \hline \end{aligned}$ | Outbound Mapping <br> Instructions <br> (Flat file and/or 277) <br> Not Found Condition${ }^{2}$. | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.49/126.2100C.NM104.040 | NM104 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100C.NM104 must contain at least one non-space character. |  |  |  |
| X212.49/126.2100C.NM104.050 | NM104 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100C.NM104 must be populated with accepted AN characters. |  |  |  |
| X212.49/126.2100C.NM105.010 | NM105 | Provider Middle Name | AN | 1-25 | s |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 2100C.NM102 is "2", 2100C.NM105 must not be present | 2100C.NM105 must be the transmitted value from the associated 276. |  |  |
| X212.49/126.2100C.NM105.020 | NM105 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100C.NM105 must be 1-25 characters. |  |  |  |
| X212.49/126.2100C.NM105.030 | NM105 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100C.NM105 must contain at least one non-space character. |  |  |  |
| X212.49/126.2100C.NM105.040 | NM105 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100C.NM105 must be populated with accepted AN characters. |  |  |  |
| X212.49/126.2100C.NM106.010 | NM106 | Provider Name Prefix | AN | 1-10 | N/U |  |  | 999 | R | IK403 = 110: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.49/126.2100C.NM107.010 | NM107 | Provider Name Suffix | AN | 1-10 | s |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 2100C.NM102 is "2", 2100C.NM107 must not be present | 2100C.NM107 must be the transmitted value from the associated 276 . |  |  |
| X212.49/126.2100C.NM107.020 | NM107 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100C.NM107 must be 1-10 characters. |  |  |  |
| X212.49/126.2100C.NM107.030 | NM107 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100C.NM107 must contain at least one non-space character. |  |  |  |
| X212.49/126.2100C.NM107.040 | NM107 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100C.NM107 must be populated with accepted AN characters. |  |  |  |
| X212.49/126.2100C.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100C.NM108 must be present. | 2100C.NM108 must be present. |  |  |
| X212.49/126.2100C.NM108.020 | NM108 |  |  |  |  |  |  | 277 | T/C | CSCC - E4 "Trading partner agreement specific requirement not met: Data correction required: CSC:745 "Identifier qualifier" \& CSC 562: "Entity's National Provider Identifier (NPI)" \& DE98 $=1 \mathrm{P}$ | For everyone except VA, 2100C.NM108 must be "XX" | 2100C.NM108 must be the transmitted value from the associated 276 |  |  |
| X212.49/126.2100C.NM108.030 | NM108 |  |  |  |  |  |  | 277 | T/C | CSCC - E4 "Trading partner agreement specific requirement not met: Data correction required: CSC:745 "Identifier qualifier" \& CSC 562: "Entity's National Provider Identifier (NPI)" \& DE98 $=1 \mathrm{P}$ | For VA, 2100C.NM108 must be "XX" or "SV" |  |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{aligned} & \text { TA11 } \\ & 9991 \\ & 277 \end{aligned}$ | $\begin{gathered} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{gathered} \hline \text { Outbound Mapping } \\ \text { Instructions } \\ \text { (Flat file and/or 277) } \\ \text { Found Condition } \\ \hline \end{gathered}$ | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.49/126.2100C.Nm109.010 | NM109 | Provider Identifier | AN | 2-80 | R |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2100C.NM108 is present, 2100C.NM109 must be present. | 2100C.NM109 must be present. |  | If the NPI in the 276 2100C NM109 is not found on the NPI crosswalk, then build the 277 response up to and including 2200C TRN and 2200C STC, do not build additional loops after the 2200C STC segment. |
| X212.499126.2100C.Nm109.020 | NM109 |  |  |  |  |  |  | 277 | c | CSC 562: "Entity's National Provider Identifier (NPI)" | 2100C.NM109 must be valid according to the NPI algorithm. | 2100C.NM109 must be the transmitted value from the associated 276. |  |  |
| X212.49/126.2100C.NM109.030 | NM109 |  |  |  |  |  |  | 277 | c | CSC 562: "Entity's National Provider Identifier (NPI)" | The first position of 2100C.NM109 must be a "1". |  |  |  |
| X212.49/126.2100C.NM109.040 | NM109 |  |  |  |  |  |  | 277 | T/C | CSCC - E4 "Trading partner agreement specific requirement not met: Data correction required:CSC 562: "Entity's National Provider Identifier (NPI)" | 2100C.NM109 must be a valid NPI on the Crosswalk. |  |  |  |
| X212.49/126.2100C.NM109.050 | NM109 |  |  |  |  |  |  | 277 | T/C | CSC 496: "Submitter not approved for electronic claim submission on behalf of this entity" | 2100C..NM109 must be associated with a valid submitter from 2100B NM109 according to the trading partner management system | 2100A..NM109 must be the transmitted value from the associated 276. |  |  |
| X212.49/126.2100C.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  | 999 | R | IK403 = 110: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.49/126.2100C.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.49/126.2100C.NM112.010 | NM112 | Last Name | AN | 1-60 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.NA/129.2200C.TRN. 010 | TRN | Provider CLAIM STATUS TRACKING NUMBER |  | 1 | s | 2200 C | 1 |  |  |  |  | When 2000C.HLO4 = " 0 ", one iteration of 2200C.TRN is allowed. Otherwise, 2200B.TRN is not allowed. |  |  |
| X212.NA/129.2200C.TRN01.010 | TRN01 | Trace Type Code | ID | 1-2 | R |  |  |  |  |  |  | 2200C.TRN01 must be present. |  |  |
| X212.NA/129.2200C.TRN01.020 | TRN01 |  |  |  |  |  |  |  |  |  |  | 2200C.TRN01 must be "1". |  |  |
| X212.NA/129.2200C.TRN02.010 | TRN02 | Trace Number | AN | 1-50 | R |  |  |  |  |  |  | 2000C.TRN02 must be present. |  |  |


| Edit Reference | Element Identifier | Description | ID | Min. <br> Max. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} \hline 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.NA/129.2200C.TRN02.020 | TRN02 |  |  |  |  |  |  |  |  |  |  | 2200C.TRN02 must be "0". |  |  |
| X212.NA/129.2200C.TRN03.010 | TRN03 | Originating Company Identifier | AN | $\begin{aligned} & 10- \\ & 10 \end{aligned}$ | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/129.2200C. TRN04.010 | TRN04 | Reference Identifier | AN | 1-50 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/130.2200C.STC. 010 | STC | Provider STATUS INFORMATION |  | 1 | R | 2200C |  |  |  |  |  | When 2000C. HL $04=$ " 0 ", 2200C.STC must be present. Otherwise, 2200C.STC is not allowed. |  |  |
|  | STC |  |  |  |  |  |  |  |  |  |  | Five iterations of 2200C.STC |  |  |
| X212.NA/130.2200C.STC01.010 | STC01 | HEALTH CARE CLAIM STATUS |  |  | R |  |  |  |  |  |  |  |  |  |
| X212.NA/130.2200C.STC01-1.010 | STC01-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | 2200C.STC01-1 must be "D0" or "E". |  |  |
| X212.NA/130.2200C.STC01-2.010 | STC01-2 | Health Care Claim Status Code | AN | 1-30 | R |  |  |  |  |  |  | 2200C.STC01-2 must be present. |  |  |
| X212.NA/130.2200C.STC01-2.020 | STC01-2 |  |  |  |  |  |  |  |  |  |  | 2200C.STC01-2 must be a valid Claim Status Code. |  |  |
| X212.NA/130.2200C.STC01-3.010 | STC01-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | 2200C.STC01-3 must be "1P". |  |  |
| X212.NA/130.2200C.STC01-4.010 | STC01-4 | Code List Qualifier | ID | 1-3 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/130.2200C.STC02.010 | STC02 | Status Information Effective Date | DT | 8-8 | R |  |  |  |  |  |  | 2200C.STC02 must the current (system) date in CCYYMMDD format. |  |  |
| X212.NA/130.2200C.STC03.010 | STC03 | Action Code | ID | 1-2 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/130.2200C.STC04.010 | STC04 | Monetary Amount | R | 1-18 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/130.2200C.STC05.010 | STC05 | Monetary Amount | R | 1-18 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/130.2200C.STC06.010 | STC06 | Date | DT | 8-8 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/130.2200C.STC07.010 | STC07 | Payment Method Code | ID | 3-3 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/130.2200C.STC08.010 | STC08 | Date | DT | 8-8 | N/U |  |  |  |  |  |  | Must not be present. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{array}{l\|l\|} \hline \text { TA11 } \\ 999 / 1 \\ 2977 \\ \hline \end{array}$ | $\begin{gathered} 2 \mathrm{TT} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.NA/130.2200C.STC09.010 | STC09 | Check Number | AN | 1-16 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/130.2200C.STC10.010 | STC10 | HEALTH CARE CLAIM STATUS |  |  | s |  |  |  |  |  |  |  |  |  |
| X212.NA/130.2200C.STC10-1.010 | STC10-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | 2200C.STC10-1 may be present if 2200C.STC01-1 is present |  |  |
| X212.NA/130.2200C.STC10-1.020 | STC10-1 |  |  |  |  |  |  |  |  |  |  | 2200C.STC01-1 must be "D0" or "E". or "E". |  |  |
| X212.NA/130.2200C.STC10-2.010 | STC10-2 | Health Care Claim Status Code | AN | 1-30 | R |  |  |  |  |  |  | 2200C.STC10-2 must be present. |  |  |
| X212.NA/130.2200C.STC10-2.020 | STC10-2 |  |  |  |  |  |  |  |  |  |  | 2200C.STC10-2 must be a valid Claim Status Code. |  |  |
| X212.NA/130.2200C.STC10-3.010 | STC10-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | 2200C.STC10-3 must be valid values. |  |  |
| X212.NA/130.2200C.STC10-4.010 | STC10-4 | Code List Qualifier Code | ID | 1-3 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/130.2200C.STC11.010 | STC11 | HEALTH CARE CLAIM STATUS |  |  | S |  |  |  |  |  |  |  |  |  |
| X212.NA/130.2200C.STC11-1.010 | STC11-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | 2200C.STC11-1 may be present if 2200C.STC10-1 is present |  |  |
| X212.NA/130.2200C.STC11-1.020 | STC11-1 |  |  |  |  |  |  |  |  |  |  | 2200C.STC11-1 must be "DO" or "E". |  |  |
| X212.NA/130.2200C.STC11-2.010 | STC11-2 | Health Care Claim Status Code | AN | 1-30 | R |  |  |  |  |  |  | 2200C.STC11-2 must be present. |  |  |
| X212.NA/130.2200C.STC11-2.020 | STC11-2 |  |  |  |  |  |  |  |  |  |  | 2200C.STC11-2 must be a valid Claim Status Code. |  |  |
| X212.NA/130.2200C.STC11-3.010 | STC11-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | 2200C.STC11-3 must be valid values. |  |  |
| X212.NA/130.2200C.STC11-4.010 | STC11-4 | Code List Qualifier Code | ID | 1-3 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/130.2200C.STC12.010 | STC12 | Free-Form Message Text | AN | $\begin{gathered} 1- \\ 264 \end{gathered}$ | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.52/133.2000D.Sub Loop. 010 | Sub Loop | Subscriber Loop |  |  |  | 2000D | >1 |  |  |  |  |  |  |  |
| X212.52/133.2000D.HL.010 | HL | SUBSCRIBER LEVEL |  | 1 | R | 2000D | 1 | 999 | R | IK304 = 3: "Required Segment Missing" | 2000D.HL must be present. | If status information was not reported in the 2200B or 2200C loop, 2000D.HL must be present. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{aligned} & \text { TA11 } \\ & 999 / 1 \\ & 277 \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{aligned} & \hline \text { Outbound Mapping } \\ & \text { Instructions } \\ & \text { (Flat file and/or 277) } \\ & \text { Found Condition } \\ & \hline \end{aligned}$ | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.52/133.2000D.HL.020 | HL |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment <br> Exceeds Maximum Use" | Only one iteration of 2000D.HL is allowed. | Only one iteration of 2000D.HL is allowed. |  |  |
| X212.52/133.2000D.HL01.010 | HL01 | Hierarchical ID Number | AN | 1-12 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000D.HL01 must be present. | 2000D. HL01 must be present. |  |  |
| X212.52/133.2000D.HL01.020 | HL01 |  |  |  |  |  |  | 999 | R | K403 = 5: "Data Element Too Long" | 2000D.HL01 must be 1-12 characters. |  |  |  |
| X212.52/133.2000D.HL01.030 | HL01 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000D. HL01 must be numeric value. |  |  |  |
| X212.52/133.2000D.HL01.040 | HL01 |  |  |  |  |  |  | 999 | R | IK403 $=7:$ "Invalid Code Value" Value" | 2000D.HL01 must equal the value of the previous HLO1 plus one. | 2000D. HL01 must equal the value of the previous HL01 plus one |  |  |
| X212.52/133.2000D.HL02.010 | HL02 | Hierarchical Parent ID Number | AN | 1-12 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000D.HL02 must be present. | 2000D.HLO2 must be present. |  |  |
| X212.52/133.2000D.HL02.020 | HL02 |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2000D.HLO2 must be equal the value of the HLO1 (2000C.HL01) of the parent HL . | 2000D.HL02 must be equal the value of the HLO1 (2000C.HLO1) of the parent HL. |  |  |
| X212.52/133.2000D.HL03.010 | HLO3 | Hierarchical Level Code | ID | 1-2 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000D. HL03 must be present. | 2000D. HL03 must be present. |  |  |
| X212.52/133.2000D.HL03.020 | HLO3 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000D.HL03 must be "22". | 2000D.HL03 must be "22". |  |  |
| X212.52/133.2000D.HL04.010 | HLO4 | Hierarchical Child Code | ID | 1-1 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000D.HL04 must be present. | 2000D.HL04 must be present. |  |  |
| X212.52/133.2000D.HL04.020 | HLO4 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000D.HL04 must be valid values. | 2000D. HL04 must be "0". |  |  |
| X212.54/NA.2000D.DMG. 010 | DMG | SUBSCRIBER DEMOGRAPHIC INFORMATION |  | 1 | s | 2000D |  | 999 | R | IK304=5: "Segment <br> Exceeds Maximum Use" | Only one iteration of 2000D.DMG is allowed. |  |  |  |
| X212.54/NA.2000D.DMG01.010 | DMG01 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 20000.DMG01 must be present. |  |  |  |
| X212.54/NA.2000D.DMG01.020 | DMG01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000D.DMG01 must be "D8". |  |  |  |
| X212.54/NA.2000D.DMG02.010 | DMG02 | Subscriber Birth Date | AN | 1-35 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 20000.DMG02 must be present. |  |  |  |
| X212.54/NA.2000D.DMG02.020 | DMG02 |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2000D.DMG02 must be a valid date in format CCYYMMDD format. |  |  |  |
| X212.54/NA.2000D.DMG02.030 | DMG02 |  |  |  |  |  |  | 277 | c | CSC 510: "Future date" <br> CSC 158: "Entity's date of birth" | 2000D.DMG02 must not be a future date. |  |  |  |
| X212.54/NA.2000D.DMG03.010 | DMG03 | Subscriber Gender Code | ID | 1-1 | s |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 20000.DMG03 must be present. |  |  |  |
| X212.54/NA.2000D.DMG03.020 | DMG03 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000D.DMG03 must be valid values. |  |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / 1 \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} \hline 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) <br> Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.54/NA.2000D.DMG04.010 | DMG04 | Marital Status Code | ID | 1-1 | N/U |  |  | 999 | R | IK403 = 110: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. |  |  |  |
| X212.54/NA.2000D.DMG05.010 | DMG05 | Race or Ethnicity Code | ID | 1-1 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |  |  |
| X212.54/NA.2000D.DMG06.010 | DMG06 | Citizenship Status Code | ID | 1-2 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. |  |  |  |
| X212.54/NA.2000D.DMG07.010 | DMG07 | Country Code | ID | 2-3 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |  |  |
| X212.54/NA.2000D.DMG08.010 | DMG08 | Basis of Verification Code | ID | 1-2 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |  |  |
| X212.54/NA.2000D.DMG09.010 | DMG09 | Quantity | R | 1-15 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. |  |  |  |
| X212.54/NA.2000D.DMG10.010 | DMG10 | Code List Qualifier Code | ID | 1-3 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. |  |  |  |
| X212.54/NA.2000D.DMG11.010 | DMG11 | Industry Code | AN | 1-30 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. |  |  |  |
| X212.56/135.2100D.NM1.010 | NM1 | SUBSCRIBER NAME |  | 1 | R | 2100D | 1 | 999 | R | IK304 = 3: "Required Segment Missing" | 2100D.NM1 must be present. | 2100D.NM1 must be present. |  |  |
| X212.56/135.2100D.NM1.020 | NM1 |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2100D.NM1 allowed. | Only one iteration of 2100D.NM1 allowed. |  |  |
| X212.56/135.2100D.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100D.NM101 must be present. | 2100D.NM101 must be present. |  |  |
| X212.56/135.2100D.NM101.020 | NM101 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2100D.NM101 must be "LL". | 2100D.NM101 must be "LL". |  |  |
| X212.56/135.2100D.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100D.NM102 must be present. | 2100D.NM102 must be present. |  |  |
| X212.56/135.2100D.NM102.020 | NM102 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2100D.NM102 must be "1". | 2100D.NM102 must be "1". |  |  |
| X212.56/135.2100D.NM103.010 | NM103 | Subscriber Last Name | AN | 1-60 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100D.NM103 must be present. | 2100D.NM103 must be present. |  |  |
| X212.56/135.2100D.NM103.020 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100D.NM103 must be 1-60 characters. | 2100D.NM103 must be the transmitted value from the associated 276. |  |  |
| X212.56/135.2100D.NM103.030 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100D.NM103 must contain at least one non-space character. |  |  |  |
| X212.56/135.2100D.NM103.040 | NM103 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100D.NM103 must be populated with accepted AN characters |  |  |  |
| X212.56/135.2100D.NM104.010 | NM104 | Subscriber First Name | AN | 1-35 | s |  |  | 277 | C | CSC 505: "Entity's First Name" | 2100D.NM104 must be present. | 2100D.NM104 must be present. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} \hline 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.56/135.2100D.NM104.020 | NM104 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100D.NM104 must be 1-35 characters. | 2100D.NM104 must be the transmitted value from the associated 276. |  |  |
| X212.56/135.2100D.NM104.030 | NM104 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100D.NM104 must contain at least one non-space character. |  |  |  |
| X212.56/135.2100D.NM104.040 | NM104 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100D.NM104 must be populated with accepted AN characters. |  |  |  |
| X212.56/135.2100D.NM105.010 | NM105 | Subscriber Middle Name | AN | 1-25 | s |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100D.NM105 must be 1-25 characters. | 2100D.NM105 must be the transmitted value from the associated 276 . |  |  |
| X212.56/135.2100D.NM105.020 | NM105 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100D.NM105 must contain at least one non-space character. |  |  |  |
| X212.56/135.2100D.NM105.030 | NM105 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100D.NM105 must be populated with accepted AN characters. |  |  |  |
| X212.56/135.2100D.NM106.010 | NM106 | Subscriber Name Prefix | AN | 1-10 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.56/135.2100D.NM107.010 | NM107 | Subscriber Name Suffix | AN | 1-10 | s |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2100D.NM107 must be 1-10 characters. | 2100D.NM107 must be the transmitted value from the associated 276. |  |  |
| X212.56/135.2100D.NM107.020 | NM107 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100D.NM107 must contain at least one non-space character. |  |  |  |
| X212.56/135.2100D.NM107.030 | NM107 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2100D.NM107 must be populated with accepted AN characters. |  |  |  |
| X212.56/135.2100D.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100D.NM108 must be present. | 2100D.NM108 must be present. |  |  |
| X212.56/135.2100D.NM108.020 | NM108 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2100D.NM108 must be "MI". | 2100D.NM108 must be the transmitted value from the associated 276. |  |  |
| X212.56/135.2100D.NM109.010 | NM109 | Subscriber Identifier | AN | 2-80 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2100D.NM109 must be present. | 2100D.NM109 must be present. |  |  |
| X21256/135210م NM109020 | 10 |  |  |  |  |  |  | 277 | c. | CSC 164: "Entity's | For Medicare IDs: 2100D.NM109 must be 10-11 positions in the format of NNNNNNNNNA or NNNNNNNNNAA or NNNNNNNNNAN where " A " represents an alpha character and " N " represents a numeric digit. <br> -OR- | 2100D.NM108 must be the trancmitted value from the |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |  | contract/member number" | For Railroad IDs: <br> 2100D.NM109 must be 7-12 positions in the format of ANNNNNN or AANNNNNN or AAANNNNNN or ANNNNNNNNN or AANNNNNNNNN or AAANNNNNNNNN where "A" represents an alpha character and " N " represents a numeric digit. | associated 276. |  |  |
| X212.56/135.2100D.NM109.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X212.56/135.2100D.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.56/135.2100D.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.56/135.2100D.NM112.010 | NM112 | Last Name | AN | 1-60 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.58/137.2200D.SCST Loop.010 | $\begin{aligned} & \text { SCST } \\ & \text { Loop } \end{aligned}$ | Subscriber Claim Status Tracking Loop |  |  |  | 2200D | >1 |  |  |  |  |  |  |  |
| X212.58/137.2200D.TRN. 010 | TRN | Subscriber CLAIM StATUS TRACKING NUMBER |  | 1 | s | 2200D | 1 | 999 | R | IK304 = 16: <br> "Implementation Dependent Segment Missing" | 2200D.TRN must be present. | 2200D.TRN must be present. |  |  |
| X212.58/137.2200D.TRN. 020 | TRN |  |  |  |  |  |  | 999 | R | IK304=5: "Segment <br> Exceeds Maximum Use" | Only one iteration of 2200D.TRN with TRN01 = "1" is allowed. | Only one iteration of 2200D.TRN with TRN01 = "1" is allowed. |  |  |
| X212.58/137.2200D.TRN01.010 | TRN01 | Trace Type Code | ID | 1-2 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.TRN01 must be present. | 2200D.TRN01 must be present. |  |  |
| X212.58/137.2200D.TRN01.020 | TRN01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2200D.TRN01 must be "1". | 2200D.TRN01 must be "2". |  |  |
| X212.58/137.2200D.TRN02.010 | TRN02 | Trace Number | AN | 1-50 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D. TRN02 must be present. | 2000D.TRN02 must be present. |  |  |
| X212.58/137.2200D.TRN02.020 | TRN02 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2200D.TRNO2 must be 1-50 characters. | 2000D.TRN02 must be the transmitted value from the associated 276 . |  |  |
| X212.58/137.2200D.TRN02.030 | TRN02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D.TRN02 must be populated with accepted AN characters. |  |  |  |
| X212.58/137.2200D.TRN02.040 | TRN02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D.TRNO2 must contain at least one non-space character. |  |  |  |
| X212.58/137.2200D.TRN03.010 | TRN03 | Originating Company Identifier | AN | $\begin{array}{\|l\|l\|} \hline 10- \\ 10 \end{array}$ | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.58/137.2200D.TRN04.010 | TRN04 | Reference Identifier | AN | 1-50 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / 1 \\ 277 \\ \hline \end{gathered}$ | $\begin{array}{r} \hline 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{aligned} & \hline \text { Outbound Mapping } \\ & \text { Instructions } \\ & \text { (Flat file and/or 277) } \\ & \text { Found Condition } \\ & \hline \end{aligned}$ | Outbound Mapping Instructions (Flat file and/or 277) <br> Not Found Conditio | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.NA/138.2200D.STC. 010 | STC | Claim STATUS INFORMATION |  | 1 | R | 2200D |  |  |  |  |  | Claim found: 2200D.STC must be present. | Claim not found: 2200D.STC must be present. |  |
| X212.NA/138.2200D.STC. 020 | STC |  |  |  |  |  |  |  |  |  |  | Claim found: <br> Five iterations of 2200D.STC are allowed. | Claim not found: <br> Five iterations of <br> 2200D.STC are allowed. |  |
| X212.NA/138.2200D.STC01.010 | STC01 | health care claim STATUS |  |  | R |  |  |  |  |  |  |  |  |  |
| X212.NA/138.2200D.STC01-1.010 | STC01-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | Claim found: <br> 2200D. STC01-1 must be present. | Claim not found: <br> 2200D. STC01-1 must be present. |  |
| X212.NA/138.2200D.STC01-1.020 | STC01-1 |  |  |  |  |  |  |  |  |  |  | Claim found: 2200D.STC01-1 must be any valid Health Care Claim Status Code Category, except "R". | Claim not found: <br> 2200D.STC01-1 must be "A4". |  |
| X212.NA/138.2200D.STC01-2.010 | STC01-2 | Health Care Claim Status Code Status Code | AN | 1-30 | R |  |  |  |  |  |  | Claim found: <br> 2200D.STC01-2 must be present. | Claim not found: 2200D.STC01-2 must be present. |  |
| X212.NA/138.2200D.STC01-2.020 | STC01-2 |  |  |  |  |  |  |  |  |  |  | Claim found: 2200D.STC01-2 must be a valid Claim Status Code. | Claim not found: 2200D.STC01-2 must be "35". |  |
| X212.NA/138.2200D.STC01-3.010 | STC01-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | Claim found: <br> 2200D.STC01-3 must be valid values. | Claim not found: 2200D.STC01-3 must be valid values. |  |
| X212.NA/138.2200D.STC01-4.010 | STC01-4 | Code List Qualifier Code | ID | 1-3 | s |  |  |  |  |  |  | Must not be present. | Must not be present. |  |
| X212.NA/138.2200D.STC02.010 | STC02 | Status Information Effective Date | DT | 8-8 | R |  |  |  |  |  |  | Claim found: <br> 2200D. STC02 must be the date the claim moved to the current location status from the internal system, in | Claim not found: 2200D. STC02 must be the current (system) date, in CCYYMMDD format. |  |
| X212.NA/138.2200D.STC03.010 | STC03 | Action Code | ID | 1-2 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/138.2200D.STC04.010 | STC04 | Total Claim Charge Amount | R | 1-18 | s |  |  |  |  |  |  | Claim found: If available, 2200D.STC04 must be the claim charge amount from the internal svstem. | Claim not found (if the flat file value is zero): 2200D. STC04 must not be present. |  |
| X212.NA/138.2200D.STC05.010 | STC05 | Claim payment Amount | R | 1-18 | s |  |  |  |  |  |  | Claim found: If available, 2200D.STC05 must be the claim payment amount from the internal system. | Claim not found: <br> 2200D.STC05 must not be present. |  |
| X212.NA/138.2200D.STC06.010 | STC06 | Adjudication or Payment Date | DT | 8-8 | s |  |  |  |  |  |  | If available, 2200D.ST06 must be the final adjudication date from the internal system, in CCYYMMDD format. | Claim not found: <br> 2200D. STC06 must not be present. |  |
| X212.NA/138.2200D.STC07.010 | STC07 | Payment Method Code | ID | 3-3 | N/U |  |  |  |  |  |  | Must not be present. | Must not be present. |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{array}{\|l\|} \hline \text { TA1/ } \\ 999 / \\ 277 \end{array}$ | $\begin{gathered} \hline 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{aligned} & \hline \text { Outbound Mapping } \\ & \text { Instructions } \\ & \text { (Flat file and/or 277) } \\ & \text { Found Condition } \\ & \hline \end{aligned}$ | $\begin{aligned} & \hline \text { Outbound Mapping } \\ & \text { Instructions } \\ & \text { (Flat file and/or 277) } \\ & \text { Not Found Condition } \\ & \hline \end{aligned}$ | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.NA/138.2200D.STC08.010 | STC08 | Remittance Date | DT | 8-8 | s |  |  |  |  |  |  | Claim found: If available, 2200D.STC08 must be the payment date from the internal system, in CCYYMMDD format. | Claim not found: <br> 2200D.STC07 must not be present. |  |
| X212.NA/138.2200D.STC09.010 | STC09 | Remittance Trace Number | AN | 1-16 | s |  |  |  |  |  |  | Claim found: If available, 2200D.STC09 must be the check or EFT Trace Number from the internal system. | Claim not found: <br> 2200D.STC08 must not be present. |  |
| X212.NA/138.2200D.STC10.010 | STC10 | HEALTH CARE CLAIM STATUS |  |  | s |  |  |  |  |  |  |  |  |  |
| X212.NA/138.2200D.STC10-1.010 | STC10-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | Claim found: <br> 2200D.STC10-1 must be any valid Health Care Claim Status Code Category, except "R". | Claim not found: <br> 2200D.STC10-1 must be any valid Health Care Claim Status Code Category, except "R". |  |
| X212.NA/138.2200D.STC10-2.010 | STC10-2 | $\begin{array}{\|l} \text { Health Care Claim } \\ \text { Status Code } \end{array}$ | AN | 1-30 | R |  |  |  |  |  |  | Claim found: <br> 2200D.STC10-2 must be present. | Claim found: <br> 2200D.STC10-2 must be present. |  |
| X212.NA/138.2200D.STC10-2.020 | STC10-2 |  |  |  |  |  |  |  |  |  |  | Claim found: 2200D.STC10-2 must be a valid Claim Status Code. | Claim not found: <br> 2200D.STC10-2 must be a valid Claim Status Code. |  |
| X212.NA/138.2200D.STC10-3.010 | STC10-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | Claim found: <br> 2200D.STC10-3 must be valid values. | Claim not found: <br> 2200D.STC10-3 must be valid values. |  |
| X212.NA/138.2200D.STC10-4.010 | STC10-4 | Code List Qualifier Code | ID | 1-3 | s |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/138.2200D.STC11.010 | STC11 | HEALTH CARE CLAIM STATUS |  |  | s |  |  |  |  |  |  |  |  |  |
| X212.NA/138.2200D.STC11-1.010 | STC11-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | Claim found: <br> 2200D.STC11-1 must be any valid Health Care Claim Status Code Category, except "R". | Claim not found: <br> 2200D.STC11-1 must be any valid Health Care Claim Status Code Category, except "R". |  |
| X212.NA/138.2200D.STC11-2.010 | STC11-2 | Health Care Claim Status Code | AN | 1-30 | R |  |  |  |  |  |  | Claim found: 2200D.STC11-2 must be present. | Claim not found: 2200D.STC11-2 must be present. |  |
| X212.NA/138.2200D.STC11-2.020 | STC11-2 |  |  |  |  |  |  |  |  |  |  | Claim found: <br> 2200D.STC11-2 must be a valid Claim Status Code. | Claim not found: <br> 2200D.STC11-2 must be a valid Claim Status Code. |  |
| X212.NA/138.2200D.STC11-3.010 | STC11-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | Claim found: <br> 2200D.STC11-3 must be valid values. | Claim not found: <br> 2200D.STC11-3 must be valid values. |  |
| X212.NA/138.2200D.STC11-4.010 | STC11-4 | Code List Qualifier Code | ID | 1-3 | s |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/138.2200D.STC12.010 | STC12 | Free-Form Message Text | AN | $\stackrel{1-}{264}$ | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.59/149.2200D.REF. 010 | REF | PAYER CLAIM <br> CONTROL NUMBER |  | 1 | s | 2200D |  | 999 | R | IK304=5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2200D.REF with REF01 = "IK' is allowed. | Claim found: <br> Only 1 iteration of 2200D.REF with REF01 = "IK' is allowed. | Claim not found: <br> 2200D.REF with REF01 = <br> "IK' must not be present. |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & \text { 297 } \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.59/149.2200D.REF. 020 | REF |  |  |  |  |  |  |  |  |  |  | Claim found: 2200D.REF must be present when the claim is found in the internal system. |  |  |
| X212.59/149.2200D.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF01 must be present. | Claim found: <br> 2200D.REF01 must be present. |  |  |
| X212.59/149.2200D.REF01.020 | REF01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2200D.REF01 must be "1K". | Claim found: 2200D.REF01 must be " 1 K ". |  |  |
| X212.59/149.2200D.REF02.010 | REF02 | Payer Claim Control Number | AN | 1-50 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF02 must be present. | Claim found: <br> 2000D.REF02 must be present. |  |  |
| X212.59/149.2200D.REF02.020 | REF02 |  |  |  |  |  |  | 277 | T | CSC 464: "Payer Assigned Claim Control Number" <br> CSC 512: "Length invalid for receiver's application system" | For VMS, 2200D.REF02 must be 14 digits. | Claim found: <br> 2000D.REF02 must be the payer claim control number from the internal system. |  |  |
| X212.59/149.2200D.REF02.030 | REF02 |  |  |  |  |  |  | 277 | T | CSC 464: "Payer Assigned Claim Control Number" <br> CSC 512: "Length invalid for receiver's application system" | For MCS 2200D.REF02 must be 13 digits. |  |  |  |
| X212.59/149.2200D.REF02.040 | REF02 |  |  |  |  |  |  | 277 | T | CSC 464: "Payer Assigned Claim Control Number" <br> CSC 512: "Length invalid for receiver's application system" | For FISS, 2200D.REF02 must be 14-23 characters. |  |  |  |
| X212.59/149.2200D.REF02.050 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D.REF02 must be populated with accepted AN characters. |  |  |  |
| X212.59/149.2200D.REF02.060 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D. REF02 must contain at least one non-space character |  |  |  |
| X212.59/149.2200D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. |  |  |  |
| X212.59/149.2200D.REF04.010 | REF04 | Reference Identifier |  |  | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. |  |  |  |
| X212.60/150.2200D.REF. 010 | REF | Institutional bill TYPE IDENTIFICATION |  | 1 | s | 2200D |  | 999 | R | IK304=5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2200D.REF with REF01 = "BLT' is allowed for Part A. | Claim found: Only 1 iteration of 2200D.REF with REF01 = "BLT' is allowed. | Claim not found: <br> 2200D.REF with REF01 = <br> "BLT' must not be present. |  |
| X212.60/150.2200D.REF.020 | REF |  |  |  |  |  |  | 277 | c | For Part B and CEDI the CSCC = E3 and the CSC(1) $=535 \& \operatorname{CSC}(2)=228 \&$ $\operatorname{CSC}(3)=138$ and DE98 = MR | 2200D.REF with REF01 = "BLT' is not allowed for Part B and CEDI. | Claim found: <br> 2200D. REF must not be present for non-institutional claims. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \hline \text { Min. } \\ \text { Max. } \end{array}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & \text { 999/ } \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) <br> Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.60/150.2200D.REF. 030 | REF |  |  |  |  |  |  |  |  |  |  | Claim found: <br> 2200D. REF must be present on Part A claims when the internal system value is different than the transmitted value from the associated 276. |  |  |
| X212.60/150.2200D.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF01 must be present. | Claim found: 2200D.REF01 must be present. |  |  |
| X212.60/150.2200D.REF01.020 | REF01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2200.REF01 must be "BLT". | Claim found: <br> 2200.REF01 must be "BLT". |  |  |
| X212.60/150.2200D.REF02.010 | REF02 | Bill Type Identifier | AN | 1-50 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF02 must be present. | Claim found: 2200D.REF02 must be present. |  |  |
| X212.60/150.2200D.REF02.020 | REF02 |  |  |  |  |  |  | 277 | C | CSC = 228: "Type of bill for UB claim" | The first two positions of 2200D.REF02 must be a valid Facility Type Code and the third position must contain a valid Claim Frequency Code. | Claim found: 2200D.REF02 must be the concatenated value of the Facility Type Code and Claim Frequency Code from the internal system. |  |  |
| X212.60/150.2200D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.60/150.2200D.REF04.010 | REF04 | Reference Identifier |  |  | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.61/NA.2200D.REF. 010 | REF | APPLICATION OR LOCATION SYSTEM IDENTIFIER |  | 1 | s | 2200D |  | 999 | R | IK304=5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2200D.REF with REF01 = "LU' is allowed. |  |  |  |
| X212.61/NA.2200D.REF. 020 | REF |  |  |  |  |  |  | 277 | c | CSCC:E4 "Trading partner agreement specific requirement not met: Data correction required" and CSC = 560 "Entity's Additional/Secondary Identifier" and DE98 = QC - Patient | For VA, 2200D.REF with REF01 = "LU' must be present. |  |  |  |
| X212.61/NA.2200D.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF01 must be present. |  |  |  |
| X212.61/NA.2200D.REF01.020 | REF01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2200D.REF01 must be "LU". |  |  |  |
| X212.61/NA.2200D.REF02.010 | REF02 | Application or Location System Identifier | AN | 1-50 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF02 must be present. |  |  |  |
| X212.61/NA.2200D.REF02.020 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | For everyone except VA, 2200D.REF02 must be 1-50 characters. |  |  |  |
| X212.61/NA.2200D.REF02.030 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | For everyone except VA, 2200D.REF02 must contain at least two non-space characters. |  |  |  |
| X212.61/NA.2200D.REF02.040 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | For everyone except VA, 2200D.REF02 must be populated with accepted AN characters. |  |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping <br> Instructions <br> (Flat file and/or 277) <br> Found Condition | Outbound Mapping Instructions <br> (Flat file and/or 277) <br> Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.61/NA.2200D.REF02.050 | REF02 |  |  |  |  |  |  | 277 | c | CSCC:E4 "Trading partner agreement specific requirement not met: Data correction required" and CSC = 560 "Entity's Additional/Secondary Identifier" and DE98 = QC - Patient | For VA, 2200.REF02 must be a code authorized by the VA. |  |  |  |
| X212.61/NA.2200D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |  |  |
| X212.61/NA.2200D.REF04.010 | REF04 | Reference Identifier |  |  | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |  |  |
| X212.62/NA.2200D.REF. 010 | REF | GROUP NUMBER |  | 1 | s | 2200D |  | 999 | R | IK304=5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2200D.REF with REF01 = " 6 P ' is allowed. |  |  |  |
| X212.62/NA.2200D.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF01 must be present. |  |  |  |
| X212.62/NA.2200D.REF01.020 | REF01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2200.REF01 must be "6P". |  |  |  |
| X212.62/NA.2200D.REF02.010 | REF02 | Group Number | AN | 1-50 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF02 must be present. |  |  |  |
| X212.62/NA.2200D.REF02.020 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2200D.REF02 must be 1-50 characters. |  |  |  |
| X212.62/NA.2200D.REF02.030 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D.REFO2 must contain at least two non-space characters. |  |  |  |
| X212.62/NA.2200D.REF02.040 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D.REF02 must be populated with accepted AN characters. |  |  |  |
| X212.62/NA.2200D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present | Must not be present. |  |  |  |
| X212.62/NA.2200D.REF04.010 | REF04 | Reference Identifier |  |  | N/U |  |  | 999 | R | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |  |  |
| X212.63/151.2200D.REF. 010 | REF | PATIENT CONTROL NUMBER |  | 1 | s | 2200D |  | 999 | R | IK304=5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2200D.REF with REF01 = "EJ' is allowed. | Only 1 iteration of 2200D.REF with REF01 = "EJ' is allowed. |  |  |
| X212.63/151.2200D.. 010 |  |  |  |  |  |  |  |  |  |  |  | 2200D.REF with REF01 = "EJ' must be present when the Patient Control Number was transmitted on the associated 276 or when available in the internal system. |  |  |
| X212.63/151.2200D.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF01 must be present. | 2200D.REF01 must be present. |  |  |
| X212.63/151.2200D.REF01.020 | REF01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2200D.REF01 must be "EJ". | 2200.REF01 must be "EJ". |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{aligned} & \text { TA11 } \\ & 999 / \\ & 297 \end{aligned}$ | $\begin{aligned} & 2 \mathrm{TV} \\ & 7 \mathrm{C} \\ & 6 \mathrm{E} \\ & \mathrm{R} \end{aligned}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.63/151.2200D.REF02.010 | REF02 | Patient Account Number | AN | 1-50 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF02 must be present. | 2200D.REF02 must be present. |  |  |
| X212.63/151.2200D.REF02.020 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2200D.REF02 must be 1-50 characters. | 2200D. REF02 must be the transmitted value from the associated 276. <br> If not transmitted from the 276 and claim found, must be the patient account number from the internal system. |  |  |
| X212.63/151.2200D.REF02.030 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D. REFO2 must contain at least two non-space characters. |  |  |  |
| X212.63/151.2200D.REF02.040 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D.REF02 must be populated with accepted AN characters. |  |  |  |
| X212.63/151.2200D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |  |
| X212.63/151.2200D.REF04.010 | REF04 | Reference Identifier |  |  | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.64/152.2200D.REF. 010 | REF | PHARMACY PRESCRIPTION NUMBER |  | 1 | s | 2200D |  | 999 | R | IK304=5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2200D.REF with REF01 = "XZ' is allowed. | Only 1 iteration of 2200D.REF with REF01 = " XZ ' is allowed. |  |  |
| X212.64/152.2200D..010 |  |  |  |  |  |  |  |  |  |  |  | 2200D.REF with REF01 = "XZ' must be present when the Pharmacy Prescription Number was transmitted on the associated 276 or when available in the internal system. |  |  |
| X212.64/152.2200D.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF01 must be present. | 2200D. REF01 must be present. |  |  |
| X212.64/152.2200D.REF01.020 | REF01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2200D.REF01 must be "XZ". | 2200.REF01 must be "XZ". |  |  |
| X212.64/152.2200D.REF02.010 | REF02 | Pharmacy Prescription Number | AN | 1-50 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF02 must be present. | 2200D.REF02 must be present. |  |  |
| X212.64/152.2200D.REF02.020 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2200D.REF02 must be 1-50 characters. | 2200D.REF02 must be the transmitted value from the associated 276. <br> If not transmitted from the 276, must be the pharmacy prescription number from the internal system. |  |  |
| X212.64/152.2200D.REF02.030 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D.REF02 must contain at least two non-space characters. |  |  |  |
| X212.64/152.2200D.REF02.040 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D.REF02 must be populated with accepted AN characters. |  |  |  |
| X212.64/152.2200D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. |  |  |  |


| Edit Reference | Element Identifier | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{array}{\|c} \text { Loop } \\ \text { Repeat } \\ \hline \end{array}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & 277 \end{aligned}$ | $\begin{gathered} \hline 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{gathered} \hline \text { Outbound Mapping } \\ \text { Instructions } \\ \text { (Flat file and/or 277) } \\ \text { Found Condition } \\ \hline \end{gathered}$ | Outbound Mapping <br> Instructions <br> (Flat file and/or 277) <br> Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.64/152.2200D.REF04.010 | REF04 | Reference Identifier |  |  | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. |  |  |  |
|  | REF | VOUCHER IDENTIFIER |  | 1 | s | 2200D |  |  |  |  |  | 2200D.REF with REF01 = "VV" must not be present. |  |  |
| X212.NA/153.2200D.REF01.010 | REFO1 | Reference Identification Qualifier | ID | 2-3 | R |  |  |  |  |  |  |  |  |  |
|  | REF02 | Voucher Identifier | AN | 1-50 | R |  |  |  |  |  |  |  |  |  |
|  | REF03 | Description | AN | 1-80 | N/U |  |  |  |  |  |  |  |  |  |
|  | REF04 | Reference Identifier |  |  | N/U |  |  |  |  |  |  |  |  |  |
| X212.65/154.2200D.REF. 010 | REF | CLAIM ID FOR CLEARINGHOUSES AND OTHER TRANSMISSION INTERMEDIARIES |  | 1 | s | 2200D |  | 999 | R | IK304=5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2200D.REF with REF01 = "D9' is allowed. | Only 1 iteration of 2200D.REF with REF01 = "D9' is allowed. |  |  |
| X212.65/154.2200D.REF.020 | REF |  |  |  |  |  |  |  |  |  |  | 2200D.REF with REF01 = "D9' must be present when Clearinghouse Trace number was transmitted on the associated 276. |  |  |
| X212.65/154.2200D.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF01 must be present. | 2200D.REF01 must be present. |  |  |
| X212.65/154.2200D.REF01.020 | REF01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2200D.REF01 must be "D9". | 2200.REF01 must be "D9". |  |  |
| X212.65/154.2200D.REF02.010 | REF02 | Clearinghouse Trace Number | AN | 1-50 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF02 must be present. | 2200D.REF02 must be present. |  |  |
| X212.65/154.2200D.REF02.020 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2200D.REF02 must be 1-50 characters. | 2200D.REF02 must be the transmitted value from the associated 276. |  |  |
| X212.65/154.2200D.REF02.030 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D.REF02 must contain at least two non-space characters. |  |  |  |
| X212.65/154.2200D.REF02.040 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D.REF02 must be populated with accepted AN characters. |  |  |  |
| X212.65/154.2200D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |  |  |
| X212.65/154.2200D.REF04.010 | REF04 | Reference Identifier |  |  | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |  |  |
| X212.66/NA.2200D.AMT. 010 | AMT | CLAIM SUBMITTED CHARGES |  | 1 | s | 2200D |  | 999 | R | IK304=5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2200D.AMT with AMT01 = "T3' is allowed. |  |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{aligned} & \text { TA1/ } \\ & \text { 999/ } \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.66/NA.2200D.AMT01.010 | AMT01 | Amount Qualifier Code | ID | 1-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.REF01 must be present. |  |  |  |
| X212.66/NA.2200D.AMT01.020 | AMT01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2200D.REF01 must be "T3". |  |  |  |
| X212.66/NA.2200D.AMT02.010 | AMT02 | Total Claim Charge Amount | R | 1-18 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.AMT02 must be present. |  |  |  |
| X212.66/NA.2200D.AMT02.020 | AMT02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2200D.AMT02 must be numeric |  |  |  |
| X212.66/NA.2200D.AMT02.030 | AMT02 |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSC = 178: "Submitted } \\ & \text { charges" } \end{aligned}$ | 2200D.AMT02 must be <= 99,999,999.99. |  |  |  |
| X212.66/NA.2200D.AMT03.010 | AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. |  |  |  |
| X212.67/155.2200D.DTP. 010 | DTP | CLAIM SERVICE DATE |  | 1 | s | 2200D |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | For institutional claims, 2200D.DTP with DTP01 = "472" must be present. | For Part A, 2200D.DTP with DTP01 = "472" must be present. |  |  |
| X212.67/155.2200D.DTP.020 | DTP |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | For professional claims, 2200D.DTP with DTP01 = "472" must be present when 2210D.DTP with DTP01 = "472" is not present. | For professional claims, 2200D.DTP with DTP01 = "472" must be present when 2210D.DTP with DTP01 = "472" is not present. |  |  |
| X212.67/155.2200D.DTP. 030 | DTP |  |  |  |  |  |  | 999 | R | IK304=5: "Segment Exceeds Maximum Use" | Only one iteration of 2200D.DTP with DTP01 = "472" is allowed. | $\begin{aligned} & \text { Only one iteration of } \\ & \text { 2200D.DTP with DTP01 = } \\ & \text { "472" is allowed. } \end{aligned}$ |  |  |
| X212.67/155.2200D.DTP01.010 | DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D...DTP01 must be present. | 2200D..DTP01 must be present. |  |  |
| X212.67/155.2200D.DTP01.020 | DTP01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2200D.DTP01 must be "472". | 2200D.DTP01 must be "472". |  |  |
| X212.67/155.2200D.DTP02.010 | DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.DTP02 must be present. | 2200D.DTP02 must be present. |  |  |
| X212.67/155.2200D.DTP02.020 | DTP02 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2200D.DTP02 must be valid values. | 2200D.DTP02 must be the transmitted value from the associated 276. |  |  |
| X212.67/155.2200D.DTP03.010 | DTP03 | Claim Service Period | AN | 1-35 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2200D.DTP03 must be present. | 2200D.DTP03 must be present. |  |  |
| X212.67/155.2200D.DTP03.020 | DTP03 |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | If 2200D.DTP02 = "D8" then 2200D.DTP03 must be a valid date in CCYYMMDD format | 2200D.DTP03 must be the transmitted value from the associated 276. |  |  |
| X212.67/155.2200D.DTP03.030 | DTP03 |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | If 2200D.DTP02 = "RD8" then 220D.DTP03 must be a valid date in CCYYMMDD-CCYYMMDD format. |  |  |  |
| X212.67/155.2200D.DTP03.040 | DTP03 |  |  |  |  |  |  | 277 | c | CSC 187: "Date(s) of service" | If 2200D.DTP02 = "RD8" then the 2nd date listed in 2200.DTP03 must be $>=$ the 1 st date listed in 2200.DTP03. |  |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|} \hline \text { Usage } \\ \text { Reg. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{aligned} & \text { TA11 } \\ & 9991 \\ & 277 \end{aligned}$ | $\begin{gathered} 2 \mathrm{CT} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{gathered} \hline \text { Outbound Mapping } \\ \text { Instructions } \\ \text { (Flat file and/or 277) } \\ \text { Found Condition } \\ \hline \end{gathered}$ | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.69/157.2210D.SSL Loop. 010 | SSL Loop | Subscriber Service Line Loop |  |  |  | 2210D | >1 | 277 |  | CSCC = E4 "Trading partner agreement specific requirement not met: Data correction required: CSC = 247: "Line Information" |  | Claim found: Part A: do not create the 2220D loop. Otherwise: Create the 2220D loop for each service line. | Claim not found: <br> Part A: does not perform line level 276 editing and will therefore also never return line level 276 errors in a 2220D loop. <br> Otherwise: If the $\mathbf{2 7 6}$ did not contain line info, do not create 2220D loop <br> If the 276 did contain line info, create the 2220D loop for each service line. |  |
| X212.69/157.2210D.sVC. 010 | svc | service line information |  | 1 | s | 2210D | 1 | 999 | R | CSC: 504" Entity's Last Name " | One iteration of 2210D.SVC is allowed per 2210D loop. | Claim found: <br> One iteration of 2220D.SVC is allowed per 2220D loop. | Claim not found: <br> One iteration of 2220D.SVC is allowed per 2220D loop. |  |
| X212.69/157.2210D.SVC.020 | svc |  |  |  |  |  |  |  |  |  |  | Claim found: <br> 2220D.SVC must be present for each service line for which status is being transmitted. | Claim not found: <br> If the $\mathbf{2 7 6}$ did contain line info, 2220D.SVC must be present for each service line for which status is being transmitted. |  |
| X212.69/157.2210D.SVC01.010 | SvC01 | Composite Medical Procedure Identifier |  |  | R |  |  |  |  |  |  |  |  |  |
| X212.69/157.2210D.SVC01-1.010 | SVC01-1 | Product/Service ID Qualifier | ID | 2-2 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2210D.SVC01-1 must be present. | Claim found: 2220D.SVC01-1 must be present. | Claim not found: 2220D.SVC01-1 must be present. |  |
| X212.69/157.2210D.SVC01-1.020 | SVC01-1 |  |  |  |  |  |  | 277 | C | CSCC = EO:":Response not possible - error on submitted request data" CSC = 745: "Identifier Qualifier" CSC = 455: "Revenue code for services rendered: | For Part A, 2210D.SVC01-1 must be 'HC', "HP", or NU". | Claim found: <br> 2220D.SVC01-1 must be the transmitted value from the associated 276. | Claim not found: <br> 2220D.SVC01-1 must be the transmitted value from the associated 276. |  |
| X212.69/157.2210D.SVC01-1.030 | SVC01-1 |  |  |  |  |  |  | 277 | c | CSCC = EO:": Response not possible - error on submitted request data" <br> CSC = 745: "Identifier Qualifier" <br> 454 CSC "Procedure code for services rendered: | For Part B, 2210D.SVC01-1 must be 'HC'. |  |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{aligned} & \text { TA11 } \\ & 9991 \\ & 277 \end{aligned}$ | $\begin{gathered} 2 \mathrm{TT} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{gathered} \hline \text { Outbound Mapping } \\ \text { Instructions } \\ \text { (Flat file and/or 277) } \\ \text { Found Condition } \\ \hline \end{gathered}$ | Outbound Mapping <br> Instructions <br> (Flat file and/or 277) <br> Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.69/157.2210D.SVC01-1.040 | SVC01-1 |  |  |  |  |  |  | 277 | c | CSCC = EO:":Response not possible - error on submitted request data" <br> CSC = 745: "Identifier Qualifier" <br> CSC = 454: "Procedure code for services rendered: (CEDI ONLY For Drugs: CSC = 218:"NDC Number" instead of CSC = 454) | For CEDI, 2210D.SVC01-1 must be 'HC' or "N4". |  |  |  |
| X212.69/157.2210D.SVC01-2.010 | SVC01-2 | Procedure Code | AN | 1-48 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2210D.SVC01-2 must be present. | Claim found: <br> 2220D.SVC01-2 must be present. | Claim not found: <br> 2220D.SVC01-2 must be present. |  |
| X212.69/157.2210D.SVC01-2.020 | SVC01-2 |  |  |  |  |  |  | 277 | c | CSC 507: "HCPCS" | When 2210D.SVC01-1 = "HC", 2210D.SVC01-2 must be a valid HCPCS Code. | Claim found: <br> 2220D.SVC01-2 must be the procedure code used to adjudicate the claim (from the internal system) | Claim not found: <br> 2220D.SVC01-2 must be the transmitted value from the associated 276. |  |
| X212.69/157.2210D.SVC01-2.030 | SVC01-2 |  |  |  |  |  |  | 277 | c | CSC = 513: "HIPPS Rate Code for services Rendered" | When 2210D.SVC01-1 = "HP", 2210D.SVC01-2 must be a valid HIPPS Skilled Nursing Facility Rate Code. |  |  |  |
|  | SVC01-2 |  |  |  |  |  |  | 277 | c | CSC 454: "Procedure code for services rendered." | When 2210D.SVC01-1 = "NU", 2210D.SVC01-2 must be a valid National Uniform Billing Committee (NUBC) UB92 Code. |  |  |  |
| X212.69/157.2210D.SVC01-2.050 | SVC01-2 |  |  |  |  |  |  | 277 | T | CSC = 218: "NDC number" | When 2210D.SVC01-1 = "N4", 2210D.SVC01-2 must be 1-11 digits. |  |  |  |
|  | SVC01-3 | Procedure Modifier | AN | 2-2 | s |  |  | 277 | c | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2210D.SVC01-3 must be valid procedure modifier. | Claim found: <br> If applicable, 2220D.SVC01-3 must be the first procedure modifier used to adjudicate the claim (from the internal system) | Claim not found: <br> 2220D.SVC01-3 must be the transmitted value from the associated 276. |  |
| X212.69/157.2210D.SVC01-4.010 | SVC01-4 | Procedure Modifier | AN | 2-2 | s |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2210D.SVC01-4 is present, 2210D. $\mathrm{SVC01-3}$ must be present. | Claim found: If 2220D.SVC01-4 is present, 2220D.SVC01-3 must be present. | Claim not found: If 2220. SVCO1-4 is present, 2220D.SVC01-3 must be present. |  |
| X212.69/157.2210D.SVC01-4.020 | SVC01-4 |  |  |  |  |  |  | 277 | C | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2210D.SVC01-4 must be valid procedure modifier. | Claim found: <br> If applicable, 2220D.SVC01-4 must be the second procedure modifier used to adjudicate the claim (from the internal system) | Claim not found: <br> 2220D.SVC01-4 must be the transmitted value from the associated 276. |  |
| X212.69/157.2210D.SVC01-5.010 | SVC01-5 | Procedure Modifier | AN | 2-2 | s |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2210D.SVC01-5 is present, 2210D.SVC01-4 must be present. | Claim found: If 2220D.SVC01-5 is present, 2220D.SVC01-4 must be present. | Claim not found: If 22200.SVCO1-5 is present, 2220D.SVC01-4 must be present. |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \text { Min. } \\ \text { Max. } \end{array}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & 277 \end{aligned}$ | $\begin{gathered} 2 \mathrm{TT} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping <br> Instructions <br> (Flat file and/or 277) <br> Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.69/157.2210D.SVC01-5.020 | SVC01-5 |  |  |  |  |  |  | 277 | C | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2210D.SVC01-5 must be valid procedure modifier. | Claim found: <br> If applicable, 2220D.SVC01-5 must be the third procedure modifier used to adjudicate the claim (from the internal system) | Claim not found: <br> 2220D.SVC01-5 must be the transmitted value from the associated 276. |  |
| X212.69/157.2210D.SVC01-6.010 | SVC01-6 | Procedure Modifier | AN | 2-2 | s |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2210 D. SVC01-6 is present, $2210 \mathrm{D} . \mathrm{SVC01}-5$ must be present. | Claim found: <br> If 2220D.SVC01-6 is present, 2220D.SVC01-5 must be present. | Claim not found: <br> If 2220D. SVC01-6 is present, 2220D.SVC01-5 must be present |  |
| X212.69/157.2210D.SVC01-6.020 | SVC01-6 |  |  |  |  |  |  | 277 | c | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2210D.SVC01-6 must be valid procedure modifier. | Claim found: <br> If applicable, 2220D.SVC01-6 must be the third procedure modifier used to adjudicate the claim (from the internal system) | Claim not found: <br> 2220D.SVC01-6 must be the transmitted value from the associated 276. |  |
| X212.69/157.2210D.SVC01-7.010 | SVC01-7 | Description | AN | 1-80 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.69/157.2210D.SVC01-8.010 | SVC01-8 | Product Service ID | AN | 1-48 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.69/157.2210D.SVC02.010 | SVC02 | Line Item Charge Amount | R | 1-18 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2210D.SVC02 must be present. | Claim found: 2220D.SVC02 must be present. | Claim not found: 2220D.SVC02 must be present. |  |
| X212.69/157.2210D.SVC02.020 | SVC02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2210D.SVC02 must be numeric. | Claim found: 2220D. SVC02 must be the line charge amount from the internal system. | Claim not found: 2220D. SVC02 must be the transmitted value from the associated 276. |  |
| X212.69/157.2210D.SVC02.030 | SVC02 |  |  |  |  |  |  | 277 | T | CSCC = E4 "Trading partner agreement specific requirement not met: Data correction required CSC = 583: "Line Item Charge Amount" | $\begin{aligned} & \text { 2200D.SVC02 must be <= } \\ & 99,999,999.99 \text {. } \end{aligned}$ |  |  |  |
| X212.69/157.2210D.SVC02.040 | SVC02 |  |  |  |  |  |  | 277 | T | CSCC $=$ E4 "Trading partner agreement specific requirement not met: Data correction required CSC = 583: "Line Item Charge Amount" CSC = 402:"Amount must be greater than zero" | 2210D.SVC02 must be >= 0 |  |  |  |
| X212.69/157.2210D.SVC03.010 | SVC03 | Line Item Payment Amount | R | 1-18 | R |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Claim found: 2220D.SVC03 must be present. | Claim not found: 2220D.SVC03 must be present. |  |
| X212.69/157.2210D.SVC03.020 | SVC03 |  |  |  |  |  |  |  |  |  |  | Claim found: 2220D.SVC03 must be the line payment amount from the internal system. | Claim not found: <br> 2220D.SVC03 must be zero. |  |
| X212.69/157.2210D.SVC04.010 | SVC04 | Revenue Code | AN | 1-48 | s |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | If 2210D.SVC01-2 is present then SVC04 may be present. | Claim found: <br> If 2220D.SVC01-2 is present then SVC04 may be present. | Claim not found: <br> If 2220D.SVC01-2 is present then SVC04 may be present. |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \hline \operatorname{Min} . \\ \text { Max. } \end{array}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { TA11 } \\ & 999 / \\ & 277 \end{aligned}$ | $\begin{gathered} 2 \mathrm{TT} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{aligned} & \hline \text { Outbound Mapping } \\ & \text { Instructions } \\ & \text { (Flat file and/or 277) } \\ & \text { Found Condition } \\ & \hline \end{aligned}$ | $\begin{aligned} & \hline \text { Outbound Mapping } \\ & \text { Instructions } \\ & \text { (Flat file and/or 277) } \\ & \text { Not Found Condition } \\ & \hline \end{aligned}$ | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.69/157.2210D.SVC04.020 | SVC04 |  |  |  |  |  |  | 277 | c | CSC 507: "National Uniform Billing Committee (NUBC) UB92 Codes" | 2210D.SVC04 must be a valid NUBC Code. | Claim found: <br> If applicable, 2220D.SVC04 must be the Revenue Code from the internal system, used in addition to the listed Procedure Code. | Claim not found: <br> 2220D.SVC04 must be the transmitted value from the associated 276. |  |
| X212.69/157.2210D.SVC05.010 | SVC05 | Quantity | R | 1-15 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. |  |  |  |
| X212.69/157.2210D.SVC06.010 | SVC06 | Composite Medical Procedure Identifier |  |  | N/U |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |  |  |
| X212.69/157.2210D.SVC07.010 | SVC07 | Units of Service Count | R | 1-15 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2210D.SVC07 must be present. | Claim found: 2220D.SVC07 must be present. | Claim not found: <br> 2220D.SVC07 must be present. |  |
| X212.69/157.2210D.SVC07.020 | SVC07 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2210D.SVC07 must be numeric. | Claim found: <br> 2220D. SVC07 must be Units from the internal system. | Claim not found: 2220D.SVC07 must be the transmitted value from the associated 276. |  |
| X212.NA/161.2220D.STC. 010 | STC | Service Line STATUS INFORMATION |  | 1 | R | 2220D |  |  |  |  |  | Line found: <br> 2220D.STC must be present. | Line not found: 2220D.STC must be present. |  |
| X212.NA/161.2220D.STC. 020 | STC |  |  |  |  |  |  |  |  |  |  | Line found: <br> Five iterations of 2220D.STC are allowed. | Line not found: <br> Five iterations of 2220D.STC are allowed. |  |
| X212.NA/161.2220D.STC01.010 | STC01 | HEALTH CARE CLAIM STATUS |  |  | R |  |  |  |  |  |  | Line found: <br> 2220D.STC01-1 must be present. | Line not found: <br> 2220D.STC01-1 must be present. |  |
| X212.NA/161.2220D.STC01-1.010 | STC01-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | Line found: <br> 2220D.STC01-1 must be any valid Health Care Claim Status Code Category, except "R". | Line not found: <br> 2220D.STC01-1 must be "A4". |  |
| X212.NA/161.2220D.STC01-2.010 | STC01-2 | $\begin{array}{\|l} \text { Health Care Claim } \\ \text { Status Code } \end{array}$ | AN | 1-30 | R |  |  |  |  |  |  | Line found: 2220D.STC01-2 must be present. | Line not found: 2220D.STC01-2 must be present. |  |
| X212.NA/161.2220D.STC01-2.020 | STC01-2 |  |  |  |  |  |  |  |  |  |  | Line found: <br> PART A: 2220D.STC01-2 <br> must be " 247 ". <br> Otherwise, 2220D.STC01-2 must be a valid Claim Status Code. | Line not found: <br> PART A: 2220D.STC01-2 <br> must be "247". <br> PARTB \& CEDI: <br> 2220D.STC01-2 must be "35". |  |
| X212.NA/161.2220D.STC01-3.010 | STC01-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | Line found: <br> 2200D.STC01-3 must be valid values. | Line not found: <br> 2220D.STC01-3 must be valid values. |  |
| X212.NA/161.2220D.STC01-4.010 | STC01-4 | Code List Qualifier Code | ID | 1-3 | s |  |  |  |  |  |  | Must not be present. | Must not be present. |  |
| X212.NA/161.2220D.STC02.010 | STC02 | Status Information Effective Date | DT | 8-8 | R |  |  |  |  |  |  | Line found: <br> 2220D.STC02 must be the date the claim moved to the current location status from the internal system, in CCYYMMDD format. | Line not found: <br> 2220D. STC02 must be the current (system) date, in CCYYMMDD format. |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|c\|} \hline \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{array}{\|l\|} \hline \text { Loop } \\ \text { Repeat } \end{array}$ | $\begin{aligned} & \text { TA1/1 } \\ & 999 / \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} \hline 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | $\begin{aligned} & \hline \text { Outbound Mapping } \\ & \text { Instructions } \\ & \text { (Flat file and/or 277) } \\ & \text { Found Condition } \\ & \hline \end{aligned}$ | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.NA/161.2220D.STC03.010 | StC03 | Action Code | ID | 1-2 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/161.2220D.STC04.010 | STC04 | Monetary Amount | R | 1-18 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/161.2220D.STC05.010 | STC05 | Monetary Amount | R | 1-18 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/161.2220D.STC06.010 | STC06 | Date | DT | 8-8 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/161.2220D.STC07.010 | STC07 | Payment Method Code | ID | 3-3 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/161.2220D.STC08.010 | STC08 | Date | DT | 8-8 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/161.2220D.STC09.010 | STC09 | Check Number | AN | 1-16 | N/U |  |  |  |  |  |  | Must not be present. |  |  |
| X212.NA/161.2220D.STC10.010 | STC10 | health care claim STATUS |  |  | s |  |  |  |  |  |  |  |  |  |
| X212.NA/161.2220D.STC10-1.010 | STC10-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | Line found: <br> 2220D.STC10-1 must be any valid Health Care Claim Status Code Category, except "R". | Line not found: 2220D.STC10-1 must be any valid Health Care Claim Status Code Category, except "R". |  |
| X212.NA/161.2220D.STC10-2.010 | STC10-2 | $\begin{array}{\|l} \text { Health Care Claim } \\ \text { Status Code } \end{array}$ | AN | 1-30 | R |  |  |  |  |  |  | Line found: <br> 2220D.STC10-2 must be present. | Line found: <br> 2220D.STC10-2 must be present. |  |
| X212.NA/161.2220D.STC10-2.020 | STC10-2 |  |  |  |  |  |  |  |  |  |  | Line found: 2220D.STC10-2 must be a valid Claim Status Code. | Line not found: 2220D.STC10-2 must be a valid Claim Status Code. |  |
| X212.NA/161.2220D.STC10-3.010 | STC10-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | Line found: 2220D.STC10-3 must be valid values. | Line not found: 2220D.STC10-3 must be valid values. |  |
| X212.NA/161.2220D.STC10-4.010 | STC10-4 | Code List Qualifier Code | ID | 1-3 | s |  |  |  |  |  |  |  |  |  |
| X212.NA/161.2220D.STC11.010 | STC11 | health care claim STATUS |  |  | s |  |  |  |  |  |  |  |  |  |
| X212.NA/161.2220D.STC11-1.010 | STC11-1 | Health Care Claim Status Category Code | AN | 1-30 | R |  |  |  |  |  |  | Line found: <br> 2220D.STC11-1 must be any valid Health Care Claim Status Code Category, except "R". | Line not found: <br> 2220D.STC11-1 must be any valid Health Care Claim Status Code Category, except "R". |  |
| X212.NA/161.2220D.STC11-2.010 | STC11-2 | $\begin{array}{\|l} \text { Health Care Claim } \\ \text { Status Code } \end{array}$ | AN | 1-30 | R |  |  |  |  |  |  | Line found: <br> 2220D.STC11-2 must be present. | Line not found: <br> 2220D.STC11-2 must be present. |  |
| X212.NA/161.2220D.STC11-2.020 | STC11-2 |  |  |  |  |  |  |  |  |  |  | Line found: 2220D.STC11-2 must be a valid Claim Status Code. | Line not found: <br> 2220D.STC11-2 must be a valid Claim Status Code. |  |
| X212.NA/161.2220D.STC11-3.010 | STC11-3 | Entity Identifier Code | ID | 2-3 | s |  |  |  |  |  |  | Line found: <br> 2220D.STC11-3 must be valid values. | Line not found: 2220D.STC11-3 must be valid values. |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{array}{\|l\|l} \hline \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{array}{\|c\|} \hline \text { Usage } \\ \text { Reg. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & \text { 999/ } \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.NA/161.2220D.STC11-4.010 | STC11-4 | Code List Qualifier Code | ID | 1-3 | s |  |  |  |  |  |  |  |  |  |
| X212.NA/161.2220D.STC12.010 | STC12 | Free-Form Message Text | AN | $\begin{gathered} 1- \\ 264 \end{gathered}$ | N/U |  |  |  |  |  |  |  |  |  |
| X212.73/171.2210D.REF. 010 | REF | SERVICE LINE ITEM IDENTIFICATION |  | 1 | s | 2210D |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2210D.REF with REF01 = "FJ" is allowed. | Only 1 iteration of 2220D.REF with REF01 = "FJ" is allowed. |  |  |
| X212.731171.2210D.. 010 |  |  |  |  |  |  |  |  |  |  |  | 2220D.REF with REF01 = "FJ" must be present when Line Item Control number was transmitted on the associated 276 and service level status is being returned. |  |  |
| X212.73/171.2210D.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2210D.REF01 must be present. | 2220D.REF01 must be present. |  |  |
| X212.73/171.2210D.REF01.020 | REF01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2210DREF01 must be "FJ". | 2220DREF01 must be "FJ". |  |  |
| X212.73/171.2210D.REF02.010 | REF02 | Line Item Control Number | AN | 1-50 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2210D.REF02 must be present. | 2220D.REF02 must be present. |  |  |
| X212.73/171.2210D.REF02.020 | REF02 |  |  |  |  |  |  | 277 | C | CSC 584: "Line Item Control Number" | 2210D.REFO2 must be 1 - 50 characters. | 2220D.REF02 must be the transmitted value from the associated 276. |  |  |
| X212.73/171.2210D.REF02.030 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2210D.REF02 must be populated with accepted AN characters. |  |  |  |
| X212.73/171.2210D.REF02.040 | REF02 |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2210D.REF02 must contain at least one non-space character |  |  |  |
| X212.73/171.2210D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.73/171.2210D.REF04.010 | REF04 | Reference Identifier |  |  | N/U |  |  | 999 | R | IK403 = I10: "Implementation <br> "Not Used" Element <br> Present" | Must not be present. | Must not be present. |  |  |
| X212.74/172.2210D.DTP. 010 | DTP | SERVICE LINE DATE |  | 1 | R | 2210D |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2210D.DTP must be present. | 2220D.DTP must be present. |  |  |
| X212.74/172.2210D.DTP. 020 | DTP |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2210D.DTP are allowed. | Only one iteration of 2220D.DTP are allowed. |  |  |
| X212.74/172.2210D.DTP01.010 | DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2210D.DTP01 must be present. | 2220D.DTP01 must be present. |  |  |
| X212.74/172.2210D.DTP01.020 | DTP01 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2210D.DTP01 must be "472". | 2220D.DTP01 must be "472". |  |  |
| X212.74/172.2210D.DTP02.010 | DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2210D.DTP02 must be present. | 2220D.DTP02 must be present. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{aligned} & \text { TA1/ } \\ & \text { 999/ } \\ & 277 \\ & \hline \end{aligned}$ | $\begin{array}{r} 2 \mathrm{~T} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \\ \hline \end{array}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.74/172.2210D.DTP02.020 | DTP02 |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2210D.DTP02 must be valid values. | 2220D.DTP02 must be the transmitted value from the associated 276. |  |  |
| X212.74/172.2210D.DTP03.010 | DTP03 | Service Line Date | AN | 1-35 | R |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2210D.DTP03 must be present. | 2220D.DTP03 must be present. |  |  |
| X212.74/172.2210D.DTP03.020 | DTP03 |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | If 2210D.DTP02 = "D8" then 2210D.DTP03 must be a valid date in CCYYMMDD format | 2220D.DTP02 must be the transmitted value from the associated 276. |  |  |
| X212.74/172.2210D.DTP03.030 | DTP03 |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | If 2210D.DTP02 = "RD8" then 2210D.DTP03 must be a valid date in CCYYMMDD-CCYYMMDD format. |  |  |  |
| X212.74/172.2210D.DTP03.040 | DTP03 |  |  |  |  |  |  | 277 | C | CSC 187: "Date(s) of service" | If 2210D.DTP02 = "RD8" then the 2nd date listed in 2210.DTP03 must be $>=$ the 1st date listed in 2210.DTP03 |  |  |  |
| X212.75/173.2200E.Dep Loop. 010 | Dep Loop | Dependent Loop |  |  |  | 2200E | >1 | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Loop must not be present. | Loop must not be present. |  |  |
| X212.75/173.2000E.HL.010 | HL | DEPENDENT LEVEL |  | 1 | s | 2000E | 1 | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.77/NA.2000E.DMG. 010 | DMG | DEPENDENT DEMOGRAPHIC INFORMATION |  | 1 | R | 2000E |  | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.79/175.2100E.NM1.010 | NM1 | dependent name |  | 1 | R | 2100E | 1 | 999 | R | IK304 = 19 "Implementation <br> Dependent Not Used <br> Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.81/177.2200E.TRN. 010 | TRN | Dependent CLAIM STATUS TRACKING NUMBER |  | 1 | R | 2200E | 1 | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.82/189.2200E.REF. 010 | REF | PAYER CLAIM CONTROL NUMBER |  | 1 | s | 2200E |  | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.83/190.2200E.REF. 020 | REF | INSTITUTIONAL BILL TYPE IDENTIFICATION |  | 1 | s | 2200E |  | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.84/NA.2200E.REF. 030 | REF | APPLICATION OR LOCATION SYSTEM IDENTIFIER |  | 1 | s | 2200E |  | 999 | R | IK304 = 19 "Implementation <br> Dependent Not Used <br> Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.85/NA.2200E.REF. 040 | REF | GROUP NUMBER |  | 1 | s | 2200E |  | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.86/191.2200E.REF. 050 | REF | PATIENT ACCOUNT NUMBER |  | 1 | s | 2200E |  | 999 | R | IK304 = 19 "Implementation <br> Dependent Not Used <br> Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.87/192.2200E.REF. 060 | REF | PHARMACY PRESCRIPTION NUMBER |  | 1 | s | 2200E |  | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |


| Edit Reference | Element Identifier | Description | ID | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{aligned} & \text { TA11 } \\ & 999 / \\ & 277 \end{aligned}$ | $\begin{gathered} 2 \mathrm{TV} \\ 7 \mathrm{C} \\ 6 \mathrm{E} \\ \mathrm{R} \end{gathered}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | $\begin{aligned} & \hline \text { Outbound Mapping } \\ & \text { Instructions } \\ & \text { (Flat file and/or 277) } \\ & \text { Not Found Condition } \\ & \hline \end{aligned}$ | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.88/194.2200E.REF. 070 | REF | CLAIM ID FOR CLEARINGHOUSES AND OTHER TRANSMISSION INTERMEDIARIES |  | 1 | s | 2200E |  | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.89/NA.2200E.AMT. 010 | AMT | CLAIM SUBMITTED CHARGES |  | 1 | s | 2200E |  | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.90/195.2200E.DTP. 010 | DTP | CLAIM SERVICE DATE |  | 1 | s | 2200E |  | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.92/197.2210E.SVC. 010 | svC | SERVICE LINE INFORMATION |  | 1 | s | 2210E | 1 | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.96/211.2210E.REF. 010 | REF | SERVICE LINE ITEM IDENTIFICATION |  | 1 | s | 2210E |  | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.97/212.2210E.DTP. 010 | DTP | SERVICE LINE DATE |  | 1 | R | 2210E |  | 999 | R | IK304 = 19 "Implementation Dependent Not Used Segment Present" | Segment must not be present. | Segment must not be present. |  |  |
| X212.98/213..SE. 010 | SE | TRANSACTION SET TRAILER |  | 1 | R |  |  | 999 | R | IK502: 2 "Transaction Set Trailer Missing". | SE must be present. | SE must be present. |  |  |
| X212.98/213..SE.020 | SE |  |  |  |  |  |  | 999 | R |  | Only one iteration of SE is allowed. | Only one iteration of SE is allowed. |  |  |
| X212.98/213..SE01.010 | SE01 | Transaction Segment Count | No | 1-10 | R |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be present. | SE01 must be present. |  |  |
| X212.98/213..SE01.020 | SE01 |  |  |  |  |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be numeric. | SE01 must be numeric. |  |  |
| X212.98/213..SE01.030 | SE01 |  |  |  |  |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must equal the transaction segment count. | SE01 must equal the transaction segment count. |  |  |
| X212.98/213..SE01.040 | SE01 |  |  |  |  |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be > 0 . | SE01 must be > 0 . |  |  |
| X212.98/213..SE02.010 | SE02 | Transaction Set Control | AN | 4-9 | R |  |  | 999 | R | IK502: 3 "Transaction Set Control Number in Header and Trailer Do Not Match" | SE02 must be present. | SE02 must be present. |  |  |
| X212.98/213..SE02.020 | SE02 |  |  |  |  |  |  | 999 | R | IK502: 3 "Transaction Set Control Number in Header and Trailer Do Not Match" | SE02 must = ST02. | SE02 must = ST02. |  |  |
| X212.C9..GE.010 | GE | FUNCTIONAL GROUP TRAILER |  | 1 | R |  | 1 | 999 | R | AK905: 3 "Functional Group Trailer Missing" | GE must be present within a single Functional group boundary (GS-GE) pairing. | GE must be present within a single Functional group boundary (GS-GE) pairing. |  |  |
| X212.C9..GE.020 | GE |  |  |  |  |  |  |  |  |  | Only one iteration of GE is allowed within a single Functional group boundary (GS-GE) pairing | Only one iteration of GE is allowed within a single Functional group boundary (GS-GE) pairing. |  |  |
| X212.C9..GE01.010 | GE01 | Number of Transaction Sets Included | No | 1-6 | R |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be present. | GE01 must be present. |  |  |
| X212.C9..GE01.020 | GE01 |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be numeric. | GE01 must be numeric. |  |  |


| Edit Reference | Element Identifier | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{aligned} & \text { TA11 } \\ & 999 / \\ & 297 \end{aligned}$ | $\begin{aligned} & 2 \mathrm{TV} \\ & 7 \mathrm{C} \\ & 6 \mathrm{E} \\ & \mathrm{R} \end{aligned}$ | Disposition / Error Code | Proposed 2765010 Edits | Outbound Mapping Instructions (Flat file and/or 277) Found Condition | Outbound Mapping Instructions (Flat file and/or 277) Not Found Condition | Triggering Event |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X212.C9..GE01.030 | GE01 |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must equal the number of transaction sets included in the functional group. | GE01 must equal the number of transaction sets included in the functional group. |  |  |
| X212.C9..GE01.040 | GE01 |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be > 0 . | GE01 must be > 0 . |  |  |
| X212.C9..GE02.010 | GE02 | Group Control Number | No | 1-9 | R |  |  | 999 | R | AK905: 4 "Group Control Number in the Functional Group Header and Trailer Do Not Agree". | GE02 must be present. | GE02 must be present. |  |  |
| X212.C9..GE02.020 | GE02 |  |  |  |  |  |  | 999 | R | AK905: 4 "Group Control Number in the Functional Group Header and Trailer Do Not Agree". | GE02 must = GS06. | GE02 must = GS06. |  |  |
| X212.C10..IEA. 010 | IEA | INTERCHANGE CONTROL TRAILER |  | 1 | R |  | 1 | TA1 | R | TA105: 024 "Invalid <br> Interchange Content". <br> -OR- <br> TA105: TA105: 023 <br> Improper (Premature) End-of <br> File (Transmission) | IEA must be present. | IEA must be present. |  |  |
| X212.C10..IEA. 020 | IEA |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid <br> Interchange Content". <br> -OR- <br> TA105: 022 Invalid Control <br> Structure | Only one iteration of IEA is allowed. | Only one iteration of IEA is allowed. |  |  |
| X212.C10..IEA01.010 | IEA01 | Number of Included Functional Groups | No | 1-5 | R |  |  | TA1 | R | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must be present. | IEA01 must be present. |  |  |
| X212.C10..IEA01.020 | IEA01 |  |  |  |  |  |  | TA1 | R | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must be numeric. | IEA01 must be numeric. |  |  |
| X212.C10..IEA01.030 | IEA01 |  |  |  |  |  |  | TA1 | R | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must equal the number of functional groups included in the interchange. | IEA01 must equal the number of functional groups included in the interchange. |  |  |
| X212.C10..IEA01.040 | IEA01 |  |  |  |  |  |  | TA1 | R | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must be > 0 . | IEA01 must be > 0 . |  |  |
| X212.C10..IEA02.010 | IEA02 | Interchange Control Number | No | 9-9 | R |  |  | TA1 | R | TA105: 001 "The Interchange Control Number in the Header and Trailer Do Not Match". | IEA02 must be present. | IEA02 must be present. |  |  |
| X212.C10..IEA02.020 | IEA02 |  |  |  |  |  |  | TA1 | R | TA105: 001 "The Interchange Control Number in the Header and Trailer Do Not Match". | IEA02 must = ISA13. | \|EA02 must = ISA13. |  |  |


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| Misc. Notes |
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| Misc. Notes |
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| 6/16: edit revised. |
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| Misc. Notes |
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| O6/18: The telephone number <br> will always be transmitted in the <br> first communication number set, <br> an emaii address will be sent in <br> the 2nd communication number <br> set, if the information is <br> applicable and available. The <br> 3rd communication number set <br> will not be transmitted. <br> For DME the value "FX" will not <br> be used |
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| Misc. Notes |
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| Misc. Notes |
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| Part A (T) <br> Part B Either (PCF) T/C |
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| Misc. Notes |
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| Misc. Notes |
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| Valid Claim Status Request <br> reference must be available for <br> this edit. |
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| Misc. Notes |
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| O4/20: Medicare limitation, 276 |
| Companion Guide note needed. |
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| Misc. Notes |
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| O4/21: 276: VA only exception. |
| 276 Companion Guide note |
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| Misc. Notes |
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| Misc. Notes |
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| Misc. Notes |
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| For CEDI only the contractor |
| must allow valid HC |
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| Misc. Notes |
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| and RRB contigured HICs to <br> enter the system. <br>  <br>  <br>  <br>  <br>  |
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| Misc. Notes |
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| 5/12: 276 Companion Guide <br> note needed. Part A will be <br> returning claim level status <br> information, but not line level <br> status information. |
| o4/23: Medicare limitation: Up <br> to five iterations of the STC will <br> be allowed for all occurrences in <br> these transactions. |
|  |
| Valid Health Care Claim Status <br> Code Category reference must <br> be available for this edit. |
| Valid Health Care Claim Status <br> Code Category reference must <br> be available for this edit. |
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| Misc. Notes |
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| Misc. Notes |
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| Misc. Notes |
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| 04/21: Noted as a non-VA edit. |
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| Misc. Notes |
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| Misc. Notes |
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| 07/02: 277 Companion Guide |
| note needed, this segment not |
| used by Medicare FFS. |



| Misc. Notes |
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| Note: This loop is 2210D in <br> the 276 and 2220D in the 277. <br> Note: The appropriate Part A <br> Cllaim Level Only Processing <br> =E4 Cat \& 247 - Claim Status <br> Code to indicate only claim <br> level processing to occur. |
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| Misc. Notes |
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| O5/05: 276 Companion Guide |
| note needed. |
| Needs group confirmation. |


| Misc. Notes |
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| 276: Valid Procedure Code <br> Modifier reference must be <br> available for this edit. |
|  |
| 276: Valid Procedure Code <br> Modifier reference must be <br> available for this edit. |
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| Misc. Notes |
| :--- |
| 276: Valid NUBC reference <br> must be available for this edit. <br> FISS Edit <br>  <br>  |


| Misc. Notes |
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## Assumptions

| 10 | The response to a 005010X12 276.request will always be the paired 005010X12 277 response. The 005010X214 277 Claim Acknoledgement will never be used to respond to a 005010X12 276.request. |
| :---: | :---: |
| 20 | III-formed transactions, those that do not meet the syntax/semantic/situational rules of the IG, will return a 999 and cause rejection of the entire transaction set (ST/SE). |
| 100 | If a segment/element/composite is required, based on either guide usage or by situational rule interpretation, there will be an edit that indicates it must be present. If a segment/element/composite is not used, based on either guide usage or by situational rule interpretation, there will be an edit that indicates that it must not be present. If a segment/element/composite does not have either of those explicit notations, the edits listed will apply when the segment/element/component is present. |
| 101 | Any numeric value with an edit that indicates it must be $>=0$ means that negative numbers are not allowed. Any numeric value with an edit that indicates it must be $>0$ means that neither zero nor negative numbers are allowed. If neither of these explicit edit are present, negative, zero, and positive numbers are allowed. |
| 102 | If a segment is repeated at the same location with different qualifiers, the segment edit will include a qualifier clause (Only one iteration of $2300 . \mathrm{HI}$ with HIO1-1 = "DR" is allowed), otherwise the segment edit will just include the number of iterations allowed (Only one iteration of 2310 C . NM1 is allowed). |
| 103 | The Front End translators will determine billing criteria (inpatient, outpatient, POA, etc.) based on the NUBC manual. Specific criteria will not be included in this document. |
| 104 | The 999 will be used whenever possible; the 277 will be used when there is no 999 error code and for external code set messages. |
| 105 | When CMS does not use a segment for internal processing the spreadsheet will include basic syntax edit and the segment will be processed as "store and forward", except for the Patient Level loop. A submission that includes the Patient Level loop will be rejected at the translator level. |
| 106 | Conditional statements regarding inclusion or exclusion of segment/element/composites will be included when they can be consistently enforced by a trasaction receiver. In the absence of a consistently enforceable critera, no edit will be included to control inclusion/exclusion. <br> Example: 2320 COB Payer Amt Paid - there is no way for the receiver to determine whether the claim has been adjudicated by the payer in Loop |


| 107 | If the data for an AN element/composite is from an external code list, the standard AN edits will not be included. |
| :---: | :---: |
| 108 | Format definitions, rules, restrictions, guidance, or instructions published by the code set owner of an external code set must be met for a code from an external code set to be noted as "valid". |
| 109 | Valid dates - dates must be valid according to the calendar for the specific year. Only 01-12 are valid for the month positions of the date field. If month is "01", the day positions may be populated with $01-31$. If month is " 02 ", the day positions may be populated with $01-28$, except during leap years (2008 was a leap year, leap years occur every 4 years) when the day positions may be populated with $01-29$. If month is "03", the day positions may be populated with $01-31$. If month is " 04 ", the day positions may be populated with $01-30$. If month is "05", the day positions may be populated with $01-31$. If month is " 06 ", the day positions may be populated with $01-30$. If month is " 07 ", the day positions may be populated with $01-31$. If month is "08", the day positions may be populated with $01-31$. If month is " 09 ", the day positions may be populated with $01-30$. If month is " 10 ", the day positions may be populated with $01-31$. If month is " 11 ", the day positions may be populated with $01-30$. If month is " 12 ", the day positions may be populated with 01-31. |
| 110 | Edits restricting a date field from being a "future date" should be evaluated against the current date (processing date). |
| 111 | The words "digit" or "digits" in an edit implies numeric content. The words "character" or "characters" in an edit implies alphanumeric content. |
| 112 | If an edit references a numeric value (must be $>=,<=$ or $=$ with a numeric limitation) implies a numeric content requirement so the standard numeric check will not be included. |
| 113 | Edits that are specific to the period when ICD-9 is allowed are highlighted in pink. Edits that are specific to the period when ICD-10 is allowed are highlighted in turquoise. |
| 114 | Segments noted as "Pass through, syntax only" will not include CMS specific edits based on system constraints or business rules. This notation indicates that the information is stored on the repository but not used in any CMS system processing. |
| 115 | Acknowledgement information in columns I and J (titled "TA1/999/277CA" and "Disposition / Error Code") qualify the edit information found in column K (titled "'") and do not apply to information in any other column in the spreadsheet. |
| 116 | In column " N " of the spreadsheet: <br> T - Translator Edit <br> C - CEM Edit |
| 117 | return a CSCC D0 [Data Search Unsuccessful...] and CSC 275 [Claim] in the error-free 2220D (service line level) STC segment. <br> The Part B System will continue to report the 2200D (claim level) edit in the 277's 2200D (claim level) STC and will continue to report any applicable 2210D (service line level) loops that generated edits in the applicable 277 2220D STC (service line level). |



ASC X12 005010
Edits Spreadsheet

## Usage

Must not be present per the
implementation guide situational rules. Example - Must not be present.
$1 \mathrm{~K} 304=19$

| Element level edits |  |  |  |
| :---: | :---: | :---: | :---: |
| Cat | Desc. | Edit text | Edit \# |
| Attributes | Invalid character in element. | Must be numeric. | IK403 = 6 |
| Attributes | No significant character in the element. | Must contain at least one non-space character. | IK403 $=6$ |
| Attributes | Invalid character in the element. | Must be populated with accepted AN characters. | IK403 = 6 |
| Attributes | Invalid code value. | When there are multiple qualifiers use the generic statement. "Must be valid values." | IK403 = 7 |
| Attributes | Invalid code value. | When there is only one qualifier, list the qualifier: Example: 1000A.NM108 must be "46". | IK403 = 7 |
| Content | Implementation pattern match failure. (Format doesn't match expected format.) |  | IK 403 = I12 |
| Date/Time | Invalid date or format. | If DTP02 equals D8, then DTP03 must be a valid date in CCYYMMDD format | IK403 = 8 |
| Date/Time | Invalid date or format. | If DTP02 equals RD8, then DTP03 must be a valid date in CCYYMMDD-CCYYMMDD format | IK403 = 8 |
| Date/Time | Invalid date/time or format. | If DTP02 equals DT, then DTP03 must be a valid date/time in CCYYMMDDHHMM format | IK403 = 8 |
| Date/Time | Invalid date/time or format. | If DTP02 equals DT, then DTP03 must be a valid date/time in CCYYMMDDHHMM format | IK403 = 9 |
| Dollar Amt | Dollar amount must be greater than or equal to aero. | Must be >= 0 | 277 |
| Dollar Amt | Dollar amount must be greater than zero. | Must be > 0 | 277 |
| Dollar Amt | Dollar amount exceeded. | Must be <= 99999999.99 | IK403 = 5 |
| Dollar Amt | Non-numeric data in a numeric element. | Must be numeric | IK403 $=6$ |
| Dollar Amt | dollar amounts with decimal values allowed. | Limited to 0, 1 or 2 decimal positions. | 277 |
| Non Dollar Numeric | Numeric element must be greater than or equal to aero. | Must be >= 0 | 277 |
| Non Dollar Numeric | Numeric element must be greater than zero. | Must be > 0 | 277 |
| Non Dollar Numeric | Numeric element exceeds maximum length. | must be \# - \#\# digits. | IK403 = 4 |

ASC X12 005010
Edits Spreadsheet

| Non Dollar Numeric | Numeric element less than minumim length. | must be \#- \#\# digits. | IK403 = 5 |
| :---: | :---: | :---: | :---: |
| Non Dollar Numeric | Numeric element not formatted correctly, or invalid length. | must be \#- \#\# digits, excluding the decimal. | IK403 $=5$ |
| Non Dollar Numeric | Numeric element not formatted correctly. | When a decimal is used in <<field name>>, the maximum digits to the right of the decimal is \#. | IK403 = 5 |
| Non Dollar Numeric | Non-numeric data in a numeric element. | Must be numeric | IK403 = 6 |
| Sizing | Element less than minumim length. | Must be X - X characters | IK403 = 4 |
| Sizing | Element exceeds maximum length. | Must be X - X characters | IK403 = 5 |
| Usage | Required element missing. | Must be present. | IK403 = 1 |
| Usage | Must be present per the implementation guide situational rules. | Must be present. | IK403 = 1 |
| Usage | Conditional Requied Data Element missing. |  | IK403 = 2 |
| Usage | Too many data elements |  | IK403 = 3 |
| Usage | Exclusion Condition Violated |  | IK403 = 10 |
| Usage | Too many repetitions |  | IK403 = 12 |
| Usage | Too many components |  | IK403 = 13 |
| Usage | Must not be present - not used element. | Must not be present | IK403 = I10 |
| Usage | Must not be present per the implementation guide situational rules. | Must not be present | IK403 = I10 |
| Usage | Implementation too few repetitions. |  | IK403 = I11 |
| Usage | Implementation Dependent "not used" element present. |  | IK403 = I13 |
| External Code Source |  | Valid <code set name>> reference must be available for this edit. <br> Example: Valid Procedure Code Modifier reference must be available for this edit. |  |
|  |  |  |  |

Transaction Set ID: 276/277
ASC X12 005010
Edits Spreadsheet

| Location | Change | Date | Reason for Change |
| :---: | :---: | :---: | :---: |
| Change Log Worksheet | Added change log | 04/07/2020 |  |
| Column A | Added "Edit Reference" to Column A <br> This Edit Reference is a calculated value that is stored in hidden columns B through E | 04/07/2010 |  |
| Column N | Added to designate the disposition of the edit if it is going to Reject / CEM edit / translator edit | 04/07/2010 |  |
| X212.C7. .GS04.020 | Added the "TA1" and "R" for consistency with the 837 edit worksheets for these elements. | 04/07/2010 |  |
| X212.C7. .GS04.030 | Added the "TA1" and "R" for consistency with the 837 edit worksheets for these elements. | 04/07/2010 |  |
| X212.C7. .GS05.010 | Added the "TA1" and "R" for consistency with the 837 edit worksheets for these elements. | 04/07/2010 |  |
| X212.C7. .GS05.020 | Added the "TA1" and "R" for consistency with the 837 edit worksheets for these elements. | 04/07/2010 |  |
| X212.C7. .GS07.010 | Added the "TA1" and "R" for consistency with the 837 edit worksheets for these elements. | 04/07/2010 |  |
| X212.C7. .GS07.020 | Added the "TA1" and "R" for consistency with the 837 edit worksheets for these elements. | 04/07/2010 |  |
| X212.C3. .ISA06.010 | Removed misc. note "04/09: Need to create a canned 277 to flip back if rejected here." |  |  |
| X212.45/118.2100B.NM104.020 | Changed to CEM edit | 04/27/2010 |  |
| X212.45/118.2100B.NM109.020 | Added comment to clarify when translator vs. CEM edit | 04/27/2010 |  |
| X212.45/118.2100B.NM109.030 | Added comment to clarify when translator vs. CEM edit | 04/27/2010 |  |
| X212.49/126.2100C.NM109.020 | Changed to CEM edit | 04/27/2010 |  |
| X212.49/126.2100C.NM109.030 | Changed to CEM edit | 04/27/2010 |  |
| X212.49/126.2100C.NM109.040 | Added comment to clarify when translator vs. CEM edit | 04/27/2010 |  |
| X212.49/126.2100C.NM109.050 | Added comment to clarify when translator vs. CEM edit | 04/27/2010 |  |
| X212.56/135.2100D.NM104.010 | Changed to CEM edit | 04/27/2010 |  |
| X212.69/157.2210D.SVC01-2.040 | Added comment to clarify this is a FISS only edit | 04/27/2010 |  |
| X212.74/172.2210D.DTP03.040 | Changed to CEM edit | 04/27/2010 |  |
| X212.61/NA.2200D.REF. 020 | Changed to CEM edit | 04/27/2010 |  |
| X212.NA/113.2100A.PER. 010 | Add to Comment column for DME and value of "FX" not used | 04/27/2010 |  |
| X212.41/111.2100A.NM109.010 | Changed 2010BB to 2100A | 09/24//2010 |  |
| X212.45/118.2100B.NM104.030 | Changed NM105 to NM104 | 09/24//2010 |  |
| X212.45/118.2100B.NM104.040 | Changed NM105 to NM104 | 09/24//2010 |  |
| X212.45/118.2100B.NM104.050 | Changed NM105 to NM104 | 09/24//2010 |  |
| X212.66/NA.2200D.AMT. 010 | Changed qualifier value reference from "D9" to "T3" | 09/24//2010 |  |
| X212.69/157.2210D.SVC07.010 | Changed reference from "SV104" to "SVC07" | 09/24//2010 |  |
| X212.69/157.2210D.SVC07.020 | Changed reference from "SV104" to "SVC07" | 09/24//2010 |  |
| X212.C7. .GS. 010 | Added clarification to only allow 1 GS segment per GS-GE pairing | 09/24//2010 |  |
| X212.C7. .GS. 020 | Added clarification to only allow 1 GS segment per GS-GE pairing | 09/24//2010 |  |

Transaction Set ID: 276/277
ASC X12 005010
Edits Spreadsheet

| X212.C9..GE. 010 | Added clarification to only allow 1 GE segment per GS-GE pairing | 09/24//2010 |  |
| :---: | :---: | :---: | :---: |
| X212.C9..GE. 020 | Added clarification to only allow 1 GE segment per GS-GE pairing | 09/24//2010 |  |
| entry 117 on the assumptions tab | Added entry to document to explain usage of D0 275 in the 2220D loop of 277 transaction when level contained no error | 12/22/2010 |  |
| entry 118 on the assumptions tab | Added entry to document to explain usage of D0 247 in the 2200D loop of 277 transaction when level contained no error | 12/22/2010 |  |
| X212.49/126.2100C.NM109.040 | Requested commentary for 2100C NM109 NPI Crosswalk edit | 03/21/2011 |  |
| X212.73/171.2210D.REF02.020 | Changed edit requirements to 999R from 277 of Service Line Information for Service Line Control Number | 03/21/2011 |  |
| X212.49/126.2100C.PN Loop. 010 | Changed edit required added E4 CSCC and Codes to Identify provider information | 04/11/2011 |  |
| X212.49/126.2100C.NM108.020 | Changed edit required added E4 CSCC and Codes to Identify provider Information | 04/11/2011 |  |
| X212.49/126.2100C.NM109.040 | Changed edit required added E4 CSCC and Codes to Identify provider information | 04/11/2011 |  |
| X212.69/157.2210D.SSL Loop. 010 | Changeed for Part A only edit | 04/11/2011 |  |
| X212.69/157.2210D.SVC01-1.020 | Changeed for Invalid Qualifier Edit | 04/11/2011 |  |
| X212.69/157.2210D.SVC01-1.030 | Changeed for Invalid Qualifier Edit | 04/11/2011 |  |
| X212.69/157.2210D.SVC01-1.040 | Changeed for Invalid Qualifier Edit | 04/11/2011 |  |
| X212.69/157.2210D.SVC02.030 | Changed edit requirements to 999R from 277 of Service Line Information for Amount Reversed decision back to 277 because the 999 messages do not support this | 04/11/2011 |  |
| X212.69/157.2210D.SVC02.040 | Changed edit requirements to 999R from 277 of Service Line Information for Amount Reversed decision back to 277 because the 999 messages do not support this | 04/11/2011 |  |
| X212.61/NA.2200D.REF. 020 | Correction to code(s)/message should have had Claim Status Category Code E4 | 12/12/2011 |  |
| X212.73/171.2210D.REF02.020 | Correction should have been 277 not a 999 IN Column M | 12/12/2011 |  |
| X212.61/NA.2200D.REF02.050 | Correction to code(s)/message should have had Claim Status Category Code E4 | 12/12/2011 |  |
| X212.56/135.2100D.NM109.030 | Clarification note that the CEDI contractor must allow both Part B and RRB formated HIC numbers on valid 276 Inquires. | 03/01/2012 |  |
| X212.56/135.2100D.NM109.020 | Combined NM109.020 with NM109.030 to become an "or" edit between Medicare and Railroad HICN | 09/27/2012 |  |
| X212.56/135.2100D.NM109.030 | Deactivated this edit | 09/27/2012 |  |
| X212.C10..IEA. 010 | Added additional Error Code | 09/27/2012 |  |
| X212.C10..IEA. 020 | Added additional Error Code | 09/27/2012 |  |
| X212.56/135.2100D.NM109.020 | Corrected the Railroad ID format from ANNNNNNNNNNN (11 numeric) to now be ANNNNNNNNN (9 numeric) | 10/22/2012 |  |
| X212.69/157.2210D.SSL Loop.010 | Added clarifying Part A language | 10/22/2012 |  |


| Version EB20132V01 | If alternative formats of the 5010 Edits spreadsheet are required, please use the "Submit Feedback" feature at the bottom of the Technical Documentation web page, from which these documents were downloaded. |  |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | http://www.cms.gov/MFFS5010D0/20 TechnicalDocumentation.asp\#TopOfPage |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | The Data Interchange Standards Association(DISA) holds a copyright on the TR3 documents: Copyright (c) 2009, Data Interchange Standards Association on behalf of ASC X12. Format (c) 2009, http://store.x12.org/ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { min. } \\ \text { ana. } \end{gathered}$ | $\begin{array}{\|c\|c\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | $5010 A_{1}$ Values |  | $\left\|\begin{array}{c} \text { Acceptreej } \\ \text { ect } \end{array}\right\|$ | Disposition / Error Code | $\underset{\substack{\text { Proposed } 501001 \text { Eadits } \\ \text { Part }}}{ }$ Part | $\underset{\substack{\text { Proposed 501001 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| x222.C3.15A.010 | ISA | $\begin{array}{\|c\|c\|} \hline \text { INTERCHANGE CONTROL } \\ \text { HEADER } \end{array}$ |  | 1 | R |  | 1 |  | tA1 | R | TA105 $=024$ : "Invalid interchange Content. | ISA must be present. | ISA must be present. |  |
|  |  |  |  |  |  |  |  |  | ta1 | R | TA105 = 022: "Invalid Control Structure" | Only one iteration of ISA is allowed. <br> or- | Only one iteration of ISA is allowed. OR |  |
| x222.c3. .15.015 | ISA |  |  |  |  |  |  |  | tA1 | R | TA105 = 023: "Improper (Premature) End-of-File (Transmission)" | Only one iteration of ISA is allowed. | Only one iteration of ISA is allowed. | Contractors are free to choose the edit that best fits their translator functionality. |
| $\begin{aligned} & \begin{array}{l} \text { x222.C3. IsA.020 } \\ \text { Edit Deactivated } \end{array} \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.C3.15A001.010 | ISA01 | $\begin{aligned} & \text { Authorzation Informaion } \\ & \text { Qualifier } \end{aligned}$ | 10 | 2-2 | R |  |  | 00, 03 | TA1 | R | $\begin{aligned} & \text { TA105 = 010: "Invalid Authorization } \\ & \text { Information Qualifier Value". } \end{aligned}$ | \|SA01 must be present. | ${ }^{1 S A 011 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| х222.C3. .1.14001.220 | IsA01 |  |  |  |  |  |  |  | TA1 | R | TA105 $=010:$ "Invalid Authorization intormaion Nualifer value". | ISA01 must be valid values. | ISA01 must be valid values. |  |
| $\times \times 222 . C 3.1$ ISAO2.010 | ISA02 | Authrization Information | AN | 10-10 | R |  |  |  | tA1 | R | TA105 = $011:$ "IIvalid Authorization intormation Vave". | 1 ISA02 must be present. | 1 ISA02 must be present. |  |
| x222.C3.1.15A02.220 | ISA02 |  |  |  |  |  |  |  | ${ }^{\text {ta } 1}$ | R |  | 1 ISA02 must be 10 characters. | 1 ISA02 must be 10 characters. |  |
| х222.C3. 1 ISAO2.030 | ISA02 |  |  |  |  |  |  |  | TA1 | R | TAAOS $=011: ~ " I n v a l i d ~ A u t h o r i z a t i o n ~$ information Value". information Value": | isAO2 must be populated with accepled AN characters isAO2 must be poovalated with all spaces. |  |  |
| $\times \times 222 . \mathrm{C3} .1$ IA A 3.010 | ISAO3 | Security Informaion Qualifier | 10 | 2.2 | R |  |  | 00, 01 | ta1 | R |  | IsA03 must be present. | ISAO3 must be present. |  |
| х222.C3. .1.1403. 220 | ISAO3 |  |  |  |  |  |  |  | ${ }^{\text {tal }}$ | R |  | ISAO3 must be valid values. | ISA03 must be vaid values. |  |
| x222.C3.1/1.004.010 | ISA04 | Security Intormation | AN | 10-10 | R |  |  |  | ta1 | R | TA105" = 013: "Securitiy Intormation value. | 1 IA04 must be present. | ISA04 must be present. |  |
| x222.C3.15A04.020 | IsA04 |  |  |  |  |  |  |  | tA1 | R | TA105 = 013: "Security Information Value". | ISA04 must be 10 characters. | ISA04 must be 10 characters. |  |
| x222.C3. 115004.030 | ISA04 |  |  |  |  |  |  |  | TA1 | R | TA105 = 013: "Security Information Value". | ISA04 must be populated with accepled $A N$ characters is $A 04$ mus be populated with all spaces. |  |  |
| х2222.C3.154005.010 | ISA05 | Interchange ID Quaifier | 10 | 2.2 | R |  |  | $\begin{gathered} 01,14, .20,27,28, \\ 29.30,3 z_{1}, 27 \end{gathered}$ | TA1 | R | TA105 $=005$ :" Invalid Inerchange ID | Isaos must be present. | ISAOO5 must be present. |  |
| х222.C3. 1.14005 .220 | ISA05 |  |  |  |  |  |  |  | TA1 | R | TA105 = 0055 : ITvalid Interchange 1 D oualifie for sender". | ISA05 must be "27", "28" or "zz". | 1SA05 must be "27", "28" or "2z". | Companion guide note needed |
| x222.C3.1.14006.010 | ISA06 | Interchange Sender ID | AN | 15-15 | R |  |  |  | ${ }^{\text {tal }}$ | R | ${ }^{\text {TA105 }}=0006$ " IIvaidid Inerchange Sender $10^{\circ}$. | ISA06 must be present. | ISA06 must be present. |  |
| х222.C3. 1.1 AA06.020 | ISA06 |  |  |  |  |  |  |  | ${ }_{\text {tal }}$ | R | TA105 = 006: "Invalid Interchange Sender ID". | 1 ISA06 must be 15 characters. | 1 SAO06 must be 15 characters. |  |
| $\times \times 222 . \mathrm{C3.1.15A06.030}$ | ISA06 |  |  |  |  |  |  |  | TA1 | R | TA105 = 006: "Invalid Interchange Sender ID". | ${ }^{1 \text { SAOO6 must contain a t least one non-space }}$ | ${ }^{\text {ISAO60 }}$ must contain at least one non-space |  |
| х222.C3. 1.14006 .040 | ISA06 |  |  |  |  |  |  |  | TA1 | R | TA105 = 006: "Invalid Interchange Sender ID". | ${ }^{1 \text { SAOO6 must be populated with accepted } \mathrm{AN}}$ | ISA06 must be populated with accepted AN characters. |  |
| х222.C3.1.14A07.010 | 15407 | Interchange ID Quaifier | 10 | 2.2 | R |  |  | 01, 14, 20, 27, 28, $29,30,33,72$ | TA1 | R | TA105 $=0.07$ :"Invalid Interchange ID Oualifer for Receiver. | 1 ISA07 must be present. | 1 ISA07 must be present. |  |
| $\times \times 222 . C 3.154007 .020$ | ${ }^{\text {ISAOT }}$ |  |  |  |  |  |  |  | TA1 | R | TA105 = 007: "Invalid Interchange ID Oualifier for Receiver". | 15A07 must be "27", "88" or "zz". | 1SA07 must be "27", "28" or "zz". | Companion guide note needed |
| х222.C3. .1/A00. 110 | ISAOB | Interchange Receiver ID | AN | 15-15 | R |  |  |  | TA1 | R | TA105 = 008: "Invalid Interchange Receiver ID". | ISA08 must be present. | ISA088 must be present. |  |
| X222.C3.15A08. 220 | ISAOB |  |  |  |  |  |  |  | ${ }^{\text {TA1 }}$ | R | ${ }^{\text {TA }}$ | 1 ISA08 must be 15 characters. | 15 IS08 must be 15 characters. |  |
| $\times \times 22 . \mathrm{C3} .1 .15 A 08.030$ | ISA08 |  |  |  |  |  |  |  | ta1 | R | $\begin{aligned} & \text { TA105 = } 008 \text { : "Invalid Interchange } \\ & \text { Receiver ID". } \end{aligned}$ | ${ }_{\text {character }}^{\text {ISAOB must contain at least one non-space }}$ | ISAOB must contain at least one non-space character. |  |
| х2222.C3.154A08.040 | ISA08 |  |  |  |  |  |  |  | TA1 | R | TA105 = $008:$ " "Invalid Interchange Receiver ID". | ISAOB must be populated with accepled $A N$ characters. | ISA08 must be populated with accepted AN characters. |  |
| X2222.C3.15A09.010 | ISA09 | Interchange Date | DT | ${ }^{6.6}$ | R |  |  | YYMMDD | TA1 | R |  | ISA09 must be present. | 1 ISAO9 must be present. |  |
| $\times$ х222.C3.15A09. 220 | ISAO9 |  |  |  |  |  |  |  | ${ }^{\text {tal }}$ | R |  | ${ }_{\text {Iformat }}^{\text {ISAOO must be e valid date in YYMMDD }}$ | ${ }_{\text {ITrat }}^{\text {ISAO9 m must be avalid date in YYMMDD }}$ |  |
| х222.C3.15A00.030 | ISAO9 |  |  |  |  |  |  |  | TA1 | R | TA105 = $14:$ "IIvaid Interchange Oate Value: | ISAOOO must be a the date of the interchange: must not be a tuure date. | ISAOO9 must be a the date of the interchange; must not be a turue date. |  |
| х222.C3.1.1sA10.010 | ISA10 | Interchange Time | тм | 4.4 | R |  |  | ннмм | ${ }_{\text {tal }}$ | R | TA105 = 015: "Invalid Interchange Time Value" | ISA10 must be present. | ISA10 must be present. |  |
| x222.C3.15A10.020 | ISA10 |  |  |  |  |  |  |  | TA1 | R | TA105 = 015:" "Invalid Interchange Time Value". Then | 1 ISA10 must be a vaid time in HHMM format. | ISA10 must be a vaid dime in HHMM format. |  |
| x222.C3. 1 ISA11.010 | ISA11 | Repetition Separator |  | ${ }^{1-1}$ | R |  |  |  | tal | R | TA105 = 024: "Invalid Interchange Content". | ISA11 must be present. | ISA11 must be present. | 01/20: Companion Guide Note needed. |
| х2222.C3.115A11.020 | ISA11 |  |  |  |  |  |  |  | TA1 | R | TA105 = 024: "Invalid Interchange | ISA11 must be 1 character. | ISA11 must be 1 character. |  |
| X222.C3.15A11.030 | ISA11 |  |  |  |  |  |  |  | TA1 | R | TA105 = 024: "IInvalid Interchange Content". | ${ }_{\text {chanacter }}^{\text {ISA11 must contain a t least one non-space }}$ | ISA11 must contain at least one non-space |  |
| X2222.C3.15A12.010 | ISA12 | $\begin{aligned} & \text { Interchange Control Version } \\ & \text { Number } \end{aligned}$ | 10 | 5.5 | R |  |  | 00501 | tA1 | R | TA105 = 017: "Invalid Interchange | 1SA12 must be present. | ISA12 must be present. |  |
| $\times 2$ | ISA12 |  |  |  |  |  |  |  | ${ }_{\text {tal }}$ | R |  | ISA12 must be "00501". | ISA12 must be "00501". |  |

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| Edit Reference | Segment or Element | Description | 10 | Min. Max. | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 values | $\begin{gathered} \mathrm{TAII} \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.C3.15A13.010 | ISA13 | Interchange Control Number | No | 9.9 | R |  |  |  | TA1 | R | TA105 = 018 :"Invaid Inerchange Conrol Number value". | 1 ISA13 must be present. | 1 ISA13 must be present. |  |
| х2222.C3. $115 \mathrm{SA3.020}$ | ISA13 |  |  |  |  |  |  |  | tal | R |  | ISA13 must be numeric. | ISA13 must be numeric. |  |
| X222.C3.15A13.030 | ISA13 |  |  |  |  |  |  |  | tA1 | R |  | 1SA13 must be 9 characters. | ISA13 must be 9 characters. |  |
| х2222.C3.1.15A13.040 | ISA13 |  |  |  |  |  |  |  | ta1 | R | (tatios = 018: "IIvaid Interchange | ISA13 must be > 0 . | ISA13 must be $>0$. |  |
| х2222.C3. $115 \mathrm{SA3} .050$ | ISA13 |  |  |  |  |  |  |  | tA1 | R | TA105 = 018: "Invalid Interchange Conrol Number Value". | ISA13 must be unsigned. | 1 ISA13 must be unsigned. |  |
| x222.C3.15A14.010 | ISA14 | Acknowedgement Requested | 10 | ${ }^{1-1}$ | R |  |  | 0,1 | ta1 | R | TA105 = 019: "Invalid Acknowledgment Requested Value" | ISA14 must be present. | ISA14 must be present. |  |
| x222.C3. 11514.020 | ISA14 |  |  |  |  |  |  |  | TA1 | R | TA105 = 019: "Invalid Acknowledgment Requested Value" | ISA14 must be valid values. | ISA14 must be vaid values. |  |
| x222.C3. 1 ISA15.010 | ISA15 | Usage indicator | 10 | 1-1 | R |  |  | P. T | tA1 | R | TA105 = 020 :" "Invalid Test Indiciator value". | ISA15 must be present. | ISA15 must be present. |  |
| х222.C3. 1 ISA15.020 | ISA15 |  |  |  |  |  |  |  | TA1 | R | TA105 = 020: "Invalid Test Indicator value" | ISA15 must be valid values. | ISA15 must be valid values. |  |
| x222.C3. 115161.010 | ISA16 | Component Element Separator |  | ${ }^{1-1}$ | R |  |  |  | TA1 | R | TA105 = 027: "Invalid Component Element Separator" | ISA16 must be present. | ISA16 must be present. |  |
| х2222.C3.15416.020 | ISA16 |  |  |  |  |  |  |  | TA1 | R | TA105 = 027: "Invalid Component Element Separator" | ISA16 must be 1 character. | ISA16 must be 1 character. |  |
| x222.C3. 1151616.030 | ISA16 |  |  |  |  |  |  |  | TA1 | ${ }^{\text {R }}$ | TA105 = 027: "Invalid Component Element Separator" | ${ }^{\text {ISA16 must Contain at least one non-space }}$ | isA16 must contain a a teast one non-space |  |
| $\begin{aligned} & \text { K222.C....ISA16.040 } \\ & \text { Edit Deactivaled } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | Gs | Functional Groups |  |  |  |  | ${ }^{2}$ |  |  |  |  |  |  |  |
| x222.c7. .6s.010 | gs | $\underset{\text { HEADER }}{\substack{\text { FUNCTIONAL GROUP }}}$ |  | 1 | R |  | 1 |  | ta1 | R | $T \mathrm{~T} 105=\mathbf{0 2 4 4 :}$ IIvalid Interchange Content. | GS must be present. | GS must be present. |  |
| x222.c7. .6s.020 | gs |  |  |  |  |  |  |  | 999 | R | AK905 = 1: "Functional Group Not supported". | Only one iteration of GS is allowed. | Only one iteration of GS is allowed. |  |
| x222.c7.6501.010 | 6s01 | Functional Identifier Code | 10 | 2.2 | R |  |  | нс | 999 | R | AK905 = 1: "Functional Group Not Supported". | GS01 must be present. | GS01 must be present. |  |
| x222.c7. .6501.020 | 6s01 |  |  |  |  |  |  | нс | 999 | R | AK905 = 1:"Functional Group Not Supported". | GS01 must be "HC". | GS01 must be present. |  |
| x222.c7. .6502.010 | GS02 | Appication Sender Code | AN | 2.15 | R |  |  |  | 999 | R | AK9005 = 14: "Unknown Security Orianator" | GS02 must be present. | GSO2 must be present. |  |
| x222.c7.6s02.020 | 6s02 |  |  |  |  |  |  |  | 999 | R |  | GS02 must be 2 - 15 characters. | GS02 must be 2-15 characters. |  |
| x222.c7...602.030 | GS02 |  |  |  |  |  |  |  | 999 | R | AKP05 5 14 : "Unknown Security | ${ }^{6.502 \text { must } \text { Onlain a t least two non-space }}$ | GSO2 must Contain a t least wo non-space |  |
| x222.c7..6s02.040 | GS02 |  |  |  |  |  |  |  | 999 | R |  | GS02 must be populated with accepted AN characters. | GS02 must be populated with accepted AN characters. |  |
| x222.c7.6s03.010 | 6s03 | Application Reeceiver Code | An | 2.15 | R |  |  |  | 999 | R | AK905 $=13$ : UNknown Security | GS03 must be present. | GS03 must be present. |  |
| x222.c7. 6 S03.020 | 6s03 |  |  |  |  |  |  |  | 999 | R | AkP905 = 13 : "Unknown Security Recipient: | GS03 must be 2 - 15 characters. | GS03 must be 2-15 characters. |  |
| x222.c7. 6 S03.030 | 6s03 |  |  |  |  |  |  |  | 999 | R | AK905= $=13:$ "Unknown Security | Chanacters. | GS03 must contain at least two non-space characters. |  |
| x222.c7.6s03.040 | 6s03 |  |  |  |  |  |  |  | 999 | R | AKR905 = 13 : "Unknown Security Reciient: | ${ }^{\text {GSO33acters. }}$ mus populated with accepted AN | GS03 must be populated with accepted AN characters. |  |
| x222.c7. .6504.010 | 6s04 | Date | DT | 8.8 | R |  |  | сСуrмmdo | TA1 | R | TA105 = 024: "Invalid Interchange Content". | GS04 must be present. | GS04 must be present. |  |
| $\times \times 222.77 .6504 .020$ | GS04 |  |  |  |  |  |  |  | TA1 | R | TA105: $=024:$ "Ilvaid Interchange Content: | ${ }_{\text {tormat }}^{\text {GSO4 must be a valid date in CCYYMMDD }}$ | Tormat |  |
| x222.C7. 6504.030 | 6S04 |  |  |  |  |  |  |  | TA1 | R | TA105 = 024: "Invalid Interchange Content". | GS04 must be the date the functional group is created; must not be a future date. | GS04 must be the date the functional group is created; must not be a future date. |  |
| x222.c7.6s05.010 | GS05 | Time | тM | 4.8 | R |  |  | ннмМ | TA1 | R | TA105 = 024: "Invalid Interchange Content". | GSo5 must be present. | GSo5 must be present. |  |
| x222.c7. 6 S05.020 | 6s05 |  |  |  |  |  |  |  | TA1 | R | TA105: $=$ 024: "IIvalid Interchange Content. | GSo5 must be a vaid dime in a valid format. | GSo5 must be a vaid dime in a valid format. |  |
| x222.c7.6s06.010 | 6506 | Group Contro Number | No | 1.9 | R |  |  |  | 999 | R | AKPO5 = 6: "Group Control Number violates Symax: | GS06 must be present. | GS06 must be present. |  |
| x222.c7. 6 S06.020 | G506 |  |  |  |  |  |  |  | 999 | R | AK9055 =6: "Group Control Number Violates Symax'. | GS06 must be numeric. | GS06 must be numeric. |  |
| x222.c7. 6506.030 | 6s06 |  |  |  |  |  |  |  | 999 | R | AK905 =6: "Group Control Number violates Symax: | GS06 must be $>0$. | GSO6 must be $>0$. |  |
| x222.c7. 6 S06.040 | 6506 |  |  |  |  |  |  |  | 999 | R |  | GS06 must be < $=999,999,999$. | GS066 must be <= 999,999,999. |  |
| x222.C7..6S06.050 | GS06 |  |  |  |  |  |  |  | 999 | R | AK905 = 19: "Functional Group Contro Number not Unique within Interchange. | GSO66 mus be unique within the iterchange. | GSO66 mus be unique within the iterchange. |  |
| x222.c7.6s07.010 | 6S07 | Responsible Agency Code | 10 | 1-2 | R |  |  | x | TA1 | R |  | GS07 must be present. | GS07 must be present. |  |
| x222.c7..6s07.020 | GS07 |  |  |  |  |  |  |  | TA1 | R | TA105: $=024:$ "Invalid Interchange content. Content. | GS07 must be " x ". | GS07 must be "x". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222A1.60.6508.010 | 6s08 | Version Identifier Code | AN | 1-12 | R |  |  | 005010×222A1 | 999 | R | $\mid$ | GS08 must be present. | GS08 must be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Exit Deacitated | 6s08 |  |  |  |  |  |  |  | 999 | R | AK905 = 2: "Functional Group Version Not Supported" | GS08 must be "005010x222A1" | GS08 must be "005010x222A1" |  |
|  | ST | Transaction Sets |  |  |  |  | $>1$ |  |  |  |  |  |  |  |
| X222.070.ST.010 | st | TRANSACTIon Set header |  | 1 | R |  | ${ }^{1}$ |  | 999 | R | IK502 = 6: "Missing or Invalid Transaction Set Identifier". | ST must be present. | ST must be present. |  |

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| Edit Reference | Segment or Element | Description | ID | $\min _{\text {max. }}$ | Usage <br> Req. | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> Values | $\begin{gathered} \mathrm{TAII} \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part B } \end{gathered}$ | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.070..st.020 | st |  |  |  |  |  |  |  | 999 | R | IK502 = 1: "Transaction Set Not Supported" <br> OR <br> AK905 = 5: "Number Included Transaction Sets Does Not Match Actual Count" <br> OR <br> IK502 = 6: "Missing or Invalid Transaction Set Identifier" <br> OR <br> IK502 = 15: "Implementation One or More Segments in Error" | Only one iteration of ST is allowed. | Only one iteration of ST is allowed. | This error means there can't be more than one ST segment in this set, not that there can't be more than 1 within the GS |
| X222.070. 5 ST01.010 | stor | Transaction Set Idenitifer Code | 10 | 3.3 | R |  |  | 837 | ${ }^{999}$ | R | IK502 = 6: "Missing or Invalid Transaction Set Identifier" | ST01 must be present. | ST01 must be present. |  |
| $\times \times 222.070$. STT1.020 | stor |  |  |  |  |  |  |  | 999 | R | IK502 = 6: "Missing or Invalid | STo1 must be "837. | STo1 must be "837." |  |
| $\times$ x222.070. STTo2.010 | STO2 | Transaction Set Control Number | AN | 4.9 | R |  |  |  | 999 | R | IK502 = 7. "Missing or Invalid | STo2 must be present. | STo2 must be present. |  |
| x222.070. STTo2.020 | ST02 |  |  |  |  |  |  |  | 999 | R |  | STo2 must be 4.9 characters. | STo2 must be 4.9 characters. |  |
| х222.070. STт2.030 | sto2 |  |  |  |  |  |  |  | 999 | R |  | STO2 must contain at teast tour non-space characters. | STO2 must contain at teast four non-space characters. |  |
| X222.070..sT02.040 | ST02 |  |  |  |  |  |  |  | 999 | R | IK502 = 7: "Missing or Invalid Transaction Set Control Number". | ST02 must be populated with accepted AN characters. | ST02 must be populated with accepted AN characters. |  |
| x222.070. 5 STo2.050 | sTo2 |  |  |  |  |  |  |  | 999 | R | IK502 = 23: "Transaction Set Control Number Not Unique within the Functional Group". | ST02 must be a unique number within the ISA-IEA envelope. ISA-IEA envelope. | ST02 must be a unique number within the ISA-IEA envelope. ISA-IEA envelope. |  |
| X222.070..sto3.010 | sto3 |  | an | ${ }^{1-35}$ | R |  |  |  | 999 | R | IK502 = 16: "Implementation Convention Not Supported". | STO3 must be present. | STO3 must be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222A1.014.ST03.020 | sto3 |  |  |  |  |  |  |  | 999 | R | IK502 = 19: "Invalid Transaction Set Implementation Convention Reference | ST03 must be "005010x222A1". | ST03 must be "005010X222A1". |  |
| $\times$ х222.071..B4T.010 | внт | HIERARCHICAL TRANSACTION |  | 1 | R |  | 1 |  | ${ }^{999}$ | R | $\left\lvert\, \begin{aligned} & \left\|\begin{array}{l} \mid 3304=3: ~ " R e q u i r e d ~ S e g m e n t ~ \\ \text { Missing" } \end{array}\right\| \end{aligned}\right.$ | BHT must be present. | BHT must be present. |  |
| х222.077..B4T.020 | внт |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of BHT is allowed. | Only one iteration of BHT is allowed. |  |
| $\times 222.071 . \mathrm{BH}$ ¢01.010 | внто1 | Hierarchica Structure Code | 10 | 4.4 | R |  |  | 0019 | 999 | R | IK403 = 1: "Required Data Element Missing" | BHTO1 must be present. | BHTO1 must be present. |  |
| $\times 222.071 . \mathrm{BH}$ ¢01.020 | внто1 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | BHTO1 must be "0019". | BHTO1 must be "0019". |  |
| $\times 222.071 .1$.8HT02.010 | в ${ }^{\text {¢ }}$ O2 | Transaction Set Purpose Code | 1 D | 2-2 | R |  |  | 00, 18 | 999 | R | $\begin{array}{\|l} \text { IK403 = } \\ \text { Missing" } \end{array}$ | BHTO2 must be present. | BHTO2 must be present. |  |
| х222.071..8HT02.020 | в ${ }^{\text {¢ }}$ |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | BHTO2 must be valid values. | BHTo2 must be valid values. |  |
| $\times 222.011 . \mathrm{BHT} \mathbf{3}$.010 | внтоз | $\underset{\substack{\text { Oigignator Application } \\ \text { Transaction } 10}}{\text { Io }}$ | AN | 1.50 | R |  |  |  | 999 | R | K $403=1:$ "Required Data Element Missing" | BHTO3 must be present. | BHTO3 must be present. |  |
| $\times 222.071 . \mathrm{BH}$ ¢о3.020 | внтоз |  |  |  |  |  |  |  | 999 | R | 1K003 = 5: "Data Element Too Long" | BHTO3 must be 1-30 characters. | BHTO3 must be 1 - 30 characters. |  |
| $\times 222.071$. .8нто3.030 | внтоз |  |  |  |  |  |  |  | 999 | R |  | BhTOO must be populated with accepled $A N$ characters. | BHTO3 must be populated with accepled $A N$ characters. |  |
| х222.071..8H 04.010 | BHTO4 | Transaction Set Creation Date | DT | ${ }^{8.8}$ | R |  |  | CCYYMMD | 999 | R |  | BHTO4 must be present. | BHTO4 must be present. |  |
| х222.071.ВнНт04.020 | вHTO4 |  |  |  |  |  |  |  | 999 | R | 1 \|K403 $=8$ : "Invalid Date" | ${ }_{\text {format }}^{\text {BHTO }}$ must be a valid date in CCYYMMDD | ${ }_{\text {tormat }}^{\text {tormat }}$ |  |
| х222.071.BHT05.010 | внто5 | Transaction Set Creation Time | тм | 4.8 | R |  |  | HHMM, HHMMSS, HHMMSSD, HHMMSSDD | 999 | R | IK403 = 1: "Required Data Element Missing" | BHTO5 must be present. | BHTO5 must te present. |  |
| $\times 2$ 22.071..84T05.020 | BHT05 |  |  |  |  |  |  |  | ${ }^{999}$ | R | \|K403 = 9: "Invalid Time" | BHT05 must a valid time in a valid time format. | BHT05 must a valid time in a valid time format. |  |
| х222.071..8Нто6.010 | внтоб | Claim or Encounter ID | 10 | 2.2 | R |  |  | 31, CH, RP | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | BHTO6 must be present. | BHTO6 must be present. |  |
| х222.071..8Нто6.020 | внтоб |  |  |  |  |  |  |  | 999 | R | 1K003 =7: "Invalid Code Value" | BHTO6 must be"CH". | BHTO6 must be"CH". |  |
| $\times 222.074 .1000 \mathrm{~A} .010$ |  | Submitter name loop |  | 1 | R | 1000A | 1 |  | ${ }^{999}$ | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 1000A is allowed. | Only one iteration of 1000A is allowed. |  |
| $\times 222.074 .1000 \mathrm{~A}$.NM1.010 | NM1 | SUBMITTER NAME |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 1000A.NM1 must be present. | 1000A.NM1 must be present. |  |
| x222.074.1000A.NM101.010 | NM101 | Enity Identifer Code | 10 | ${ }^{2.3}$ | R |  |  | 41 | 999 | R | $\begin{aligned} & \text { \|K403 = } \\ & \text { Missing" } \end{aligned}$ | 1000AA.NM101 must be present. | 1000A.NM101 must be present. |  |
| X222.074.1000A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 1000A.NM101 must be "41". | 1000A.NM101 must be "41". |  |
| X222.074.1000A..NM102.010 | NM102 | Entity Type Qualifier | 10 | ${ }^{1-1}$ | R |  |  | 1,2 | 999 | R | IK403 = 1: "Required Data Element Missing" | $1000 A$ A.NM102 must be present. | 1000 A .NM102 must be present. |  |
| x222.074.1000A.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 1000 A.NM102 must be valid values. | 1000 A.NM102 must be valid values. |  |
| X222.074.1000A.NM103.010 | NM103 |  | AN | ${ }^{1.60}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.NM103 must be present. | 1000A.NM103 must be present. |  |
| X222.074.1000A.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | \|K403 =5: "Data Element Too Long" | 1000A.NM103 must be 1-60 characters. | 11000 A.NM103 must be 1-60 characters. |  |


| Edit Reference | Segment or Element | Description | 10 | $\operatorname{Min}_{\substack{\text { Min. } \\ \text { Max. }}}$ | Usage Req. | Loop | $\underset{\text { Repeat }}{\substack{\text { Loop }}}$ | 5010A values | $\begin{gathered} \text { TAAl/ } \begin{array}{c} \text { TA9/ } \\ 2777 \mathrm{~A} \end{array} \end{gathered}$ | ${ }_{\text {Acteptrej }}^{\text {Act }}$ | Disposition /Error Code | $\underset{\text { Proart B }}{\text { Prosed 501ts }}$ | Proposed 5010A1 Edits <br> CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.074.1000A.NM103.025 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.074.10000.NM103.030 | nм103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM103 must contain at least one non- space character. | 1000A.NM103 must contain at least one nonspace character. |  |
| X222.074.1000A.NM103.040 | NM103 |  |  |  |  |  |  |  | 999 | R | (14003 =6: "Invalid Character in Data | 1000A.NM103 must be populated with accepted AN characters. | 1000A.NM103 must be populated with accepted AN characters. |  |
| X222.074.1000A.NM103.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.074.1000A.NM104.010 | NM104 | Submiter First Name | an | ${ }^{1.35}$ | s |  |  |  | 999 | R | Dependent "Not Used" Data Element | If 1000A..NM102 is " 2 ", 1000A.NM104 must not te peresent. | If 1000A.NM102 is " 2 ", 1000A.NM104 must not be present. |  |
| X222.074.1000A.NM104.020Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.074.1000A.NM104.030 | nM104 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 1000A.NM104 must be 1-35 characters. | 1000A.NM104 must be 1-35 characters. |  |
| X222.074.1000A.NM104.040Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.074.1000A.NM104.050 | NM104 |  |  |  |  |  |  |  | 999 | R |  | $1{ }^{1000 A . N M 104 \text { must contain at least one non- }}$ space characte. | Ioter |  |
| X222.074.1000A.NM104.060 | nM104 |  |  |  |  |  |  |  | 999 | R | \|K403 =6: "IIvalid Character in Data Element | 1000A.NM104 must be populated with accepted AN characters. | 1000A.NM104 must be populated with accepted AN characters |  |
| X222.074.1000A.NM104.070Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.074.1000A.NM105.010 | nM105 | Submiter Middle Name | AN | 1.25 | s |  |  |  | 999 | R |  | 1000A.NM105 must contain at least one non- space character. | 1000A.NM105 must contain at least one non- space character. |  |
| $\times$ X222.074.1000A.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | $\begin{aligned} & \text { If 1000A.NM102 is " } 2 \text { ", 1000A.NM105 must } \\ & \text { not be present. } \end{aligned}$ | $\begin{aligned} & \text { If 11000A.NM102 is " } 2 \text { ", 1000A.NM105 must } \\ & \text { not be peresent. } \end{aligned}$ |  |
| X222.074.1000A.NM105.030Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.074.1000A.NM105.040 | nM105 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | $1000 \mathrm{ANM105}$ must be $1-25$ characters. | $1000 A . N M 105$ must be $1-25$ characters. |  |
| X222.074.1000A.NM105.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.074.1000A.NM105.060 | 105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM105 must be populated with accepted AN characters. | 1000A.NM105 must be populated with accepted AN characters. |  |
| X222.074.1000A.NM105.065 | nM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: Acknowledgement /Rejected for Invalid Information CSC 514: "Entity's Middle Name" EIC: 41 "Submitter" | The first position of 1000A.NM105 must be alphabetic (A...Z). | The first position of 1000A.NM105 must be alphabetic (A...Z). | To prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.074.1000A.NM105.070 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.074.1000A.NM106.010 | NM106 | Name Prefix | an | 1-10 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be peresent. |  |
| ×222.074.1000A.NM107.010 | NM107 | Name Suffix | an | 1-10 | nu |  |  |  | 999 | E | IK403 = 110 : "Implementa Used" Flement Present" | Must not te present. | Must not be present. |  |
| ×222.074.1000A.NM108.010 | NM108 | Identification Code Qualifier | 10 | 1-2 | R |  |  | 46 | 999 | R | (1) | 1000A.NM108 must be present. | 1000A.NM108 must be present. |  |
| x222.074.1000A.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 1000A.NM108 must be "46". | 10000 A.NM108 must be "46". |  |
| x222.074.1000A.NM109.010 | NM109 | Submitter Identifier | AN | 2.80 | R |  |  |  | ${ }^{999}$ | R |  | 1000A.NM109 must be present. | 1000A.NM109 must be present. |  |
| 2222.074.1000A.NM109.020 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM109 must contain at least two non- space characters. | 1000A.NM109 must contain at least two non- space characters. |  |
| ×222.074.1000A.NM109.030 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 1000 A.NM109 must te 2 -80 characters. | 1000 A.NM109 must be 2-80 characters. |  |


| Edit Reference | Segment or Element | Description | 10 | $\min _{\text {max. }}^{\text {Max. }}$ | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> values | $\begin{gathered} \text { TT1/ } \\ \substack{999 / \\ 277 c \mathrm{C}} \end{gathered}$ | ${ }_{\text {Acceptrej }}^{\text {ect }}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.074.1000A.NM109.040 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.074.1000A.NM109.050 | nM109 |  |  |  |  |  |  |  | 999 | R | \|K403 $=6$ : "Invalic Character in Data Element" | 1000A.NM109 must be populated with accepted AN characters. | 1 Iacon..NM109 must be populated with |  |
| X222.074.1000A.NM109.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.074.1000A.NM109.070 | Nм109 |  |  |  |  |  |  |  | 999 | R |  | 1000A.NM109 must be an approved <br> electronic submitter | 1000A.NM109 must be an approved electronic submitter. |  |
| x222.074.1000A.NM110.010 | NM110 | Entity Relationstip Code | 10 | 2.2 | nu |  |  |  | 999 | E | (12403: 10.4 "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.074.1000A.NM11.010 | NM111 | Enity Idenifier Code | 10 | 2.3 | nu |  |  |  | 999 | E | (1403) 10.0 "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.074.1000A.NM112.010 | NM112 | Name Last or Organization Name | AN | ${ }^{1.60}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.076.1000A.PER. 010 | PER | SUBMITTER EDI CONTACT INFORMATION |  | 2 | R | 1000A |  |  | ${ }^{99}$ | R | IK304 = 3: "Required Segment Missing" Missing" | 1000A.PER must be present. | 1000A.PER must be present. |  |
| x222.076.1000A.PER.020 | PER | SUBMITTER EDI CONTACT INFORMATION |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 1000A.PER are allowed. | Only two iterations of 1000A.PER are allowed. |  |
| X222.076.1000A.PERR11.010 | PER01 | Contact Function Code | 10 | 2-2 | R |  |  | 10 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.PER01 must be peesent. | $1000 A$ PERR01 must be present. |  |
| X222.076.1000A.PERR01.020 | PER01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{7}$ : "Invalid Code Value" | 1000A.PER01 must be "IC". | 1000A.PER01 must be "C". |  |
| X222.076.1000A.PERRO2.010 | PERO2 | Submiter Contact Name | AN | ${ }^{1.60}$ | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 1000A.PER02 must contain at least one nonspace character. | 1000A.PER02 must contain at least one nonspace character. |  |
| X222.076.1000.PERPO2.020 | PER02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & 1 \text { K003 }=122 " \text { "Implementation Pateen } \\ & \text { Mach Failure" }\end{aligned}$ | For the 1st 1000A.PER transmited 1000A.PERO2 must not $=1000 \mathrm{~A}$.NM103. | For the 1st 1000A.PER transmited. 1000A.PERO2 must not $=1000$ A.NM103. |  |
| X222.076.1000A.PER02.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.076.10000.PERRO2.040 | PERO2 |  |  |  |  |  |  |  | 999 | R | IK403 = 113: "Implementation Dependent "Not Used" Data Element Present" | For the 2nd 1000 A.PER transmitted, 1000 A.PER02 must not be present. | For the 2nd 1000A.PER transmitted, 1000A.PER02 must not be present. |  |
| X222.076.1000A.PER02.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.076.1000A.PERRO2.060 | PER02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 1000A.PERO2 must be 1-60 characters. | 1000 A.PERO2 must be 1-60 characters. |  |
| X222.076.1000A.PER02.070Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.076.10000.PERR02.080 | PERO2 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 1000A.PER02 must be populated with accepted AN characters. | 1000A.PER02 must be populated with accepted AN characters. |  |
| X222.076.1000A.PERO2.090Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.076.10000.PER03.010 | PER03 | Communication Number | 10 | 2.2 | R |  |  | EM, FX. TE | 999 | R |  | 1000A.PERO3 must be present. | 1000A.PER03 must be present. |  |
| X222.076.1000A.PER03.020 | PERO3 |  |  |  |  |  |  |  | 999 | R | 1 14003 $=7$ : "Ilvalid Code Value" | 1000A.PER03 must be valid values. | $1000 A . P E R 03$ must be valid values. |  |
| X222.076.1000A.PERR04.010 | PER04 | Communication Number | AN | ${ }^{1.256}$ | R |  |  |  | 999 | R |  | $1000 A$.PER04 must be present. | 1000A.PER04 must be present. |  |
| X222.076.1000A.PERR4.020 | PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element | 1000A.PER04 must contain at least one non- space character. | 1000A.PER04 must contain at least one non- |  |
| X222.076.10000.PERR04.030 | PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.PER04 must be 1 - 256 characters. | 1000A.PER04 must be $1-256$ characters. |  |
| X222.076.1000A.PER04.040 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.076.1000A.PERR04.050 | PER04 |  |  |  |  |  |  |  | 999 | R |  | 1000A.PER04 must be populated with accepted AN characters. | 1000A.PER04 must be populated with accepted AN characters. |  |


| Edit Reference | Segment or Elemen | Description | 10 | $\underset{\substack{\text { Min. } \\ \text { Max. }}}{\text { and }}$ | Usage Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010a1 values | $\begin{gathered} \text { TA11 } \\ \substack{9991 \\ 277 C A} \end{gathered}$ | $\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array}$ | Disposition /Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.076.1000A.PER04.060 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.076.1000A.PERP4.070 | PER04 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 127: "Entity's Communication Number <br> EIC. 41 " | 1000A.PER04 must be populated with exactly ten numeric characters when 1000A.PER03 equals $T E$ or $F X$. | 1000A.PER04 must be populated with exactly ten numeric characters when 1000A.PER03 equals TE or FX . |  |
| X222.076.1000A.PER05.010 | PERO5 | Communication Number Qualifier | 10 | 2-2 | s |  |  | EM, EX, FX, TE | 999 | R | 1K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 11000 A.PER05 must be valid values. | 1000 A.PER05 must be valid values. |  |
| X222.076.1000A.PER 05.020 | PER05 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code value" | If 1000A.PER05 is "EX", 1000A.PER03 must <br> be "TE" | If 1000A.PERO5 is "EK", 1000A.PERO3 must |  |
| X222.076.1000A.PER06.010 | PER06 | Communication Number | an | 1-256 | s |  |  |  | ${ }^{999}$ | R | IK403 = 2: "Conditional Required Data <br> Element Missinq" | If 1000A. PERRO6 is present, 1000A.PERO5 must be resesent. |  |  |
| X222.076.1000A.PERR6.022 | PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 1000A.PER06 must contain at least one nonspace character | 1000A.PER06 must contain at least one nonspace character. |  |
| X222.076.1000A.PER06.030 | Perob |  |  |  |  |  |  |  | 999 | R | \|K403 = 5: "Data Element Too Long" | 1000A.PERO6 must be 1-256 characters. | 1000A.PERO6 must be 1-256 characters. |  |
| X222.076.1000A.PER06.040 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.076.1000A.PER06.050 | PERo6 |  |  |  |  |  |  |  | 999 | R |  | A.PER06 must be p pted AN characters. | 1000A.PER06 must be pop accepted AN characters. |  |
| X222.076.1000A.PER06.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.076.1000A.PER06.070 | PER06 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 127: "Entity's Communication Number | 1000A.PER06 must be populated with exactly ten numeric characters when 1000A.PER05 equal $T \mathrm{TE}$ or FX . | 1000A.PER06 must be populated with exactly ten numeric characters when 1000A.PER05 equals $T E$ or $F X$. |  |
| X222.076.10000.PERR07.010 | PER07 | Communicaion Number Ouafifier | 10 | 2.2 | s |  |  | Em, EX, FX, TE | ${ }^{999}$ | R | K403 = 2: "Conditional Required Data Element Missing | If 1000A.PERO7 is present, 1000A.PERO5 | ${ }^{\text {If } 1000 A . P E R O V \text { i is present, 1000A.PERRO5 }}$ |  |
| X222.076.1000A.PERR7.020 | PER07 |  |  |  |  |  |  |  | ${ }^{999}$ | R | \|K403 $\mathbf{~ 7}$ : "Invalid Code Value" | 1000 A.PER07 7 must be valid values. | 1000 A.PER07 must be valid values. |  |
| X222.076.1000A.PERR7.030 | PER07 |  |  |  |  |  |  |  | ${ }^{999}$ | R | 1K403 =7: "Invalid Code value" | If 1000A.PERO7 is "EE", 1000A.PERO5 must <br> be "TE" | If 1000A.PER07 is "EX", 1000A.PER05 must |  |
| X222.076.1000..PER88.010 | PERO8 | Communication Number | AN | 1-256 | s |  |  |  | 999 | R | KK003 $=2:$ "Conditional Required Data Element Missing" | It 1000 A . PEROB i i p present, 1000 A. .ERRO7 must be present |  |  |
| X222.076.1000A.PER88.020 | PERO8 |  |  |  |  |  |  |  | 999 | R | \|K403 =6: "Invalid Character in Data Element" | 1000A.PERO8 must contain at least one nonspace character. | 1000A.PERRO8 must contain at least one nonspace character. |  |
| X222.076.1000A.PERR88.030 | PERO8 |  |  |  |  |  |  |  | 999 | R | \|K403 = 5: "Data Element Too Long" | 1000A.PER08 must be 1-256 characters. | 1000 .PER08 must be 1 - 256 characters. |  |
| X222.076.1000A.PER08.040Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.076.1000A.PERR88.050 | PERO8 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER08 must be populated with accepted AN characters. | 1000A.PER08 must be populated with accepted AN characters. |  |
| X222.076.1000A.PER08.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.076.1000A.PER08.070 | PERO8 |  |  |  |  |  |  |  | 277 | T | 'Acknowedgementrejected for Invalic Intormation..." <br> CSC 127: "Enitiys Communication Number" | 1000A.PER08 must be populated with exactly ten numeric characters when 1000A.PER07 equals TE or FX. | 1000A.PER08 must be populated with exactly ten numeric characters when 1000A.PER07 equals TE or FX. |  |
| X222.076.1000A.PER09.010 | PER09 | Contact Inquiry Reference | an | 1-20 | NU |  |  |  | 999 | E | \|14033 = 110: "Impleme | Must not be present. | Must not be present. |  |
| $\times 222.079 .10008 .010$ |  | RECEIVER NAME Loop |  | 1 | R | 10008 | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 10008 is allowed. | Only one iteration of 10008 is allowed. |  |
| x222.079.1000..nm1.010 | NM1 | RECEIVER NAME |  |  |  |  |  |  | 999 | R | \|icke | 10008.NM1 must be present. | 10008..NM1 must be present. |  |
| X222.079.10008.NM101.010 | NM101 | Enity Identifier Code | 10 | 2.3 | R |  |  | 40 | 999 | R | \|K403 = 1: "Required Data Element | 10008.NM101 must be present. | 10008.NM101 must be present. |  |
| X222.079.10008.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | IK403 =7: "Invalid Code Value" | 10008 . NM101 must be "400". | 10008. NM101 must be "00". |  |
| X222.079.10008. . M 102.010 | NM102 | Enity Type Quadifier | 10 | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element | $10008 . \mathrm{NM102}$ must be present. | $10008 . \mathrm{NM102}$ must be present. |  |
| ×222.079.10008. . 1102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 10008.NM102 must be "2". | 10008.NM102 must be "2". |  |

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Professional Edits

| Edit Reference | Segment or Element | Description | 10 | Min. Max. | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \\ \hline \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { cog } \\ \text { 277CA } \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.079.10008.NM103.010 | nM103 | Receiver Name | ${ }^{\text {an }}$ | 1.60 | R |  |  |  | 999 | R | $\left.\right\|_{\text {Missing' }}$ Katequired Data Element | $10008 . \mathrm{NM103}$ must be peesent. | 10008.NM103 must be present. |  |
| x222.079.10008.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | \|K403 =5: "Data Element Too Long" | 10008.NM103 must be $1-60$ characters. | 10008. .n 103 must be 1-60 characters. |  |
| х222.079.10008.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | R |  | 1000B. NMIO3 must be populated with accepied $A \mathrm{~A}$ characters. | 1000B. NM MO3 must be populated with accepeded $A \mathrm{~A}$ characters. |  |
| x222.079.10008.NM103.040 | NM103 |  |  |  |  |  |  |  | 999 | R |  | $1000 \mathrm{~B} . \mathrm{NM1033}$ must contain at teast one non- space character. | 10008 .NM103 must contain a a teast one non- space character. |  |
| <222.079.10008.NM104.010 | NM104 | Name First | AN | 1.35 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.079.10008.NM105.010 | NM105 | Name Midale | AN | 1.25 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| <222.079.10008.NM106.010 | NM106 | Name Prefix | AN | 1-10 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| <222.079.10008.NM107.010 | NM107 | Name Suffix | AN | 1-10 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.079.10008.NM108.010 | NM108 | Identificaion Code Qualifier | 10 | 1-2 | R |  |  | ${ }^{46}$ | 999 | R |  | $10008 . \mathrm{NM108}$ must be present. | 11008. NM108 must be pesesent. |  |
| <222.079.10008.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 10008. NM108 must be "66". | 10008. NM108 must be "66". |  |
| <222.079.10008.NM109.010 | NM109 | Receiver Primary Identifier | AN | 2.80 | R |  |  |  | 999 | R |  | 10008. NM109 must be present. | 1000..NM109 must be present. |  |
| $\begin{aligned} & \text { K22.079.1000B.NM109.020 } \\ & \text { Editioeacaivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X222.079.1000B.NM109.030 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.079.1000B.NM109.040 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.079 .10008$. .NM 109.050 | NM109 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = I12: "I } \\ & \text { Match Failure" } \end{aligned}$ | 1000B.NM109 must be [contractor put receiver code here] | 1000B.NM109 must be [contractor put receiver code here] |  |
| <222.079.10008.NM110.010 | NM110 | Enity Relationstip Code | 10 | 2.2 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| x222.079.10008.NM111.010 | NM111 | Enity Identifier Code | 10 | 2.3 | nu |  |  |  | 999 | E | (10403 = 110.4 "Implemenenation "Not | Must not be present. | Must not be present. |  |
| х222.079.10008.NM112.010 | NM112 | Name Last or Organization Name | AN | 1-60 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.01.2.2000. 010 Edit Deacivivate |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.081.2000A.. 020 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.081.2000A.HL.010 | HL | BILLING PROVIDER HIERARCHICAL LEVEL |  | 1 | R | 2000 A | 1 |  | 999 | R | $\begin{aligned} & \text { IK304 = 3: "Required Segment } \\ & \text { Missing" } \end{aligned}$ | 2000A.HL must be present. | 2000A.AL must be present. |  |
| х222.081.2000А.HL.O20 | HL |  |  |  |  |  |  |  | 999 | R |  | Only one iteration of 2000A.HL is allowed. | Only one iteration of 2000A.HL is allowed. | This error means there can only be one HL in each iteration of the loop. |
| X222.081.2000A.HLL01.010 | HL01 | Hierarchical II Number | AN | ${ }^{1-12}$ | R |  |  |  | 999 | R | K403 $=1:$ : Required Data Element Missing" | 20000. HL01 must be present. | $20000 . H$ HLO1 must be present. |  |
| X222.081.2000A.H.L01.020 | HLO1 |  |  |  |  |  |  |  | 999 | R | \|K403 =5: "Data Element Too Long" | 2000 A HL01 must be 1 - 12 characters. | 20000. HLL0 must be 1 - 12 characters. |  |
| X222.081.2000A.HLL01.030 | HL01 |  |  |  |  |  |  |  | 999 | R | IK403 =6: "Invalid Character in Data | 2000 .HL01 must be umeeric. | 20000. HL01 must be numeric. |  |
| X222.081.2000A.HLL1.040 | HL01 |  |  |  |  |  |  |  | 999 | R | IK403 =7: "Invalid Code Value" | The first HL01 must be "1". | The first HL01 must be "1". |  |
| $\times 222.081 .2000 \mathrm{~A}$.HLO2.010 | HLO2 | Hierachical Parent ID Number | AN | ${ }^{1.12}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. | Must not be present. |  |
| $\times 222.081 .2000$ A.HL03.010 | HLO3 | Hierachical Level Code | 10 | 1-2 | R |  |  | 20 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000 . HLO 03 must be present. | 2000A.HLO3 must be present. |  |
| X222.081.2000A.HL03.020 | HL03 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2000A.H.L03 must be "20". | 2000A.H.LO3 must be "20". |  |
| X222.081.2000A.HLO4.010 | HLO4 | Hierachical Child Code | 10 | ${ }^{1-1}$ | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000 .HLO4 must be present. | 2000A.HLO4 must be present. |  |
| X222.081.2000A.HL04.020 | HL04 |  |  |  |  |  |  |  | 999 | R | 11403 $\mathbf{~ 7 : ~ " I I v a l i d ~ C o d e ~ V a l u e " ~}$ | 2000 .HL04 must be "1. | 2000 A.HLO4 must be "1. |  |
| x222.083.2000A.PRV. 010 | PRV | BILLING PROVIDER SPECIALTY INFORMATION |  | 1 | s | 2000 A |  |  | 999 | ${ }^{\text {R }}$ | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000A.PRV is allowed. | Only one iteration of 2000A.PRV is allowed. |  |
| X222.083.2000A.PRVV1.010 | PRV01 | Provider Code | 10 | ${ }^{1-3}$ | R |  |  | ${ }^{81}$ | 999 | R | K403 1: 1: Required Data Element Missing" | $2000 A$ PRV01 must be present. | $2000 A$ PRV01 must be present. |  |
| X222.083.2000A.PRV01.020 | PRV01 |  |  |  |  |  |  |  | 999 | R | \|K403 =7:"Invalid Code Value" | 20000. PRV01 must be "BrI. | 2000 A.PRVV1 must be "Bl]. |  |
| X222.083.2000A.PRVV2.010 | PRVO2 | Reference Identificaion Qualifer | 10 | 2-3 | R |  |  | Pxc | 999 | R | IK403 = 1: "Required Data Element Missing" | $2000 A$.PRV02 must be present. | 2000A.PRV02 must be present. |  |
| х222.083.2000A.PRVO2.020 | PRVO2 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7}$ : "Invalid Code Value" | 2000A.PRV02 must be "PXC". | $2000 A . P R V 02$ must be "PXC". |  |
| ×222.083.2000A.PRV03.010 | PRV03 | Provider Taxoonomy Code | AN | 1.50 | R |  |  |  | 999 | R | $\left\lvert\, \begin{aligned} & \text { \|K403 = } \\ & \text { Missing" } \end{aligned}\right.$ | 2000A.PRV03 must be present. | 2000A.PRV03 must be present. |  |
| X222.083.2000A.PRV03.020 | PRV03 |  |  |  |  |  |  |  | 277 | c | Acknowledgement/Rejected for Invalid Information..." CSC 145: "Entity's specialty/taxonomy code" $\qquad$ | 2000A.pRyO3 must be a valid Provider Taxonomy Code | 2000A. PRVO3 must be a valid Provider Taxonomy Coode | Valid Provider Taxonomy Code reference must be available for this edit. |
| X222.083.2000A.PRV04.010 | PRV04 | State or Province Code | 10 | 2-2 | nu |  |  |  | 999 | E | K403 = 110: "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.083.2000A.PRV05.010 | PRV05 | PROVIIER SPECIALTY INFORMATION |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.083.2000A.PRV06.010 | PRVO6 | Provide Organization Code | 10 | ${ }^{3} 3$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.084.2000A.CUR.010 | CUR | FOREIGN CURRENCY INFORMATION |  | 1 | s | 2000 A |  |  | 999 | E | $\begin{aligned} & \text { IK304 = 14: "Implementation "Not } \\ & \text { Used" Segment Present" } \end{aligned}$ | 2000.CUR must not be present. | 2000A.CUR must not te present. | Medicare does not support submisssion of foreign <br> currency. <br> $01 / 20$ : Companion Guide Note needed. |


| Edit Reference | Segment or Element | Descripion | 10 | $\min _{\text {max. }}^{\text {Max. }}$ | $\begin{array}{\|l\|l\|l\|l} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\substack{\text { Loop } \\ \text { Repeat }}$ | $5010 A 1$ Values | $\begin{gathered} \text { TA11 } \\ 9991 \\ 277 C A \end{gathered}$ | ${ }^{\text {Acceptreje }}$ ect | Disposition / Error Code | $\underset{\text { Part B }}{\substack{\text { Proposed 5010A1 Edits }}}$ | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.084.2000A.CUR.020 | CUR |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information <br> CSC 681: "Claim Currency Not <br> Sunborted" |  |  |  |
| X222.087.2010AA.010 |  | Billing Provider Name Loop |  | 1 | R | 2010AA | 1 |  | ${ }^{999}$ | R |  | Only one iteration of 2010AA is allowed. | Only one iteration of 2010AA is allowed. |  |
| X222.087.2010AA.NM1.010 | NM1 | Billing Provider Name |  |  |  |  |  |  | 999 | R |  | 2010AA.NM1 must be present. | 2010AA.NM1 must be present. |  |
| X222.087.2010AA.NM101.010 | Nm101 | Enity Identifier Code | 10 | $2 \cdot 3$ | R |  |  | 85 | 999 | R |  | 2010 A. .NM101 must be present. | 2010 A. .NM101 must be present. |  |
| X222.087.2010AA.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalic Code Value" | 2010AA.NM101 must be "55". | 2010AA.NM101 must be "85 |  |
| X222.087.2010AA.NM102.010 | NM102 | Entity Type Qualifier | 10 | ${ }^{1-1}$ | R |  |  | 1,2 | 999 | R | \|ikusi 1. "Required Data Element | 2010 A A.NM102 must be present. | 2010 AA .NM102 must be present. |  |
| X222.087.2010AA.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2010 A.AM102 must be valid values. | 2010 AA.NM102 must be valid values. |  |
| x222.087.2010AA.NM103.010 | NM103 | Biling Provider Last | an | ${ }^{1.60}$ | R |  |  |  | 999 | R |  | 2010 A A.NM103 must be present. | 2010AA.NM103 must be present. |  |
| X222.087.2010AA.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA. NM103 must contain a a teast one | 2010AA.NM103 must contain at least one |  |
| x222.087.2010AA.NM103.030 | nM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010 AA .NM103 must be 1-60 characters. | 2010AA.NM103 must be 1-60 characters. |  |
| X222.087.2010AA.NM103.040 | nM103 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: <br> "Acknowledgement/Rejected for Invalid <br> Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 504: "Entity's Last Name" <br> EIC: 85 "Billina Provider" |  |  |  |
| $\times$ X222.087.2010AA.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | ${ }^{\text {Elementic }}$ | $2010 \mathrm{AA.NM103}$ must be populated with accened AN characters. | 2010AA.NM103 must be populated with acceneded AN characters |  |
| X222.087.2010AA.NM103.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.087.2010AA.NM104.010 | nM104 | Billing Provider first Name | an | ${ }^{1.35}$ | s |  |  |  | 999 | E | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" Present" | \|f 2010AA.NM102 is "2", 2010AA.NM104 must not be present | $\begin{aligned} & \text { If } 2010 \text { AA.NM102 is " } 2 \text { ", 2010AA.NM104 } \\ & \text { must not be present. } \end{aligned}$ |  |
| X222.087.2010AA.NM104.020 | NM104 |  |  |  |  |  |  |  | 277 | T | "AcknowledgementrRejected for reational field in error." CSC 505: "Enity's First Name" |  |  |  |
| $\times$ x22.087.2010AA.NM104.030 | NM104 |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM104 must contain at least one non-space character. | 2010AA.NM104 must C Ontain a a teast one |  |
| X222.087.2010AA.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2010 AA .NM104 must be 1-35 characters. | 2010 AA .NM104 must be 1-35 characters. |  |
| ×222.087.2010AA.NM104.050 | nM104 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ |  |  |  |  |
| X222.087.2010AA.NM104.060 | nM104 |  |  |  |  |  |  |  | 999 | R |  | $2010 \mathrm{AA.NM104}$ must be populated with acceneded AN characters. | 2010AA.NM104 must be populated with accepted AN characters. |  |
| X222.087.2010AA.NM104.070Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.087.2010AA.NM105.010 | nм105 | Billing Provider Midide Name | AN | 1-25 | s |  |  |  | 999 | E | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | If 2010AA.NM102 is " 2 ", 2010AA.NM105 must not be present. |  |  |
| X222.087.2010AA.NM105..220 | nM105 |  |  |  |  |  |  |  | 277 | T | dgement/Rejected for relational field in error. "Entit's Middle Name" EIC: 85 "Billing Provider" |  |  |  |
| х222.087.2010AA.NM105.030 | NM105 |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM105 must contain at least one non-space character. | 2010AA.NM105 must contain at least one non-space character. |  |
| ×222.087.2010AA.NM105.040 | nM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.NM105 must be $1-25$ characters. | 2010 AA.NM105 must be 1-25 characters. |  |
| X222.087.2010AA.NM105.050 | nM105 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ |  |  |  |  |
| X222.087.2010AA.NM105.060 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | $2010 \mathrm{~A} A \mathrm{NM105}$ must be populated with accepeed $A \mathrm{~N}$ characters. | $2010 A A . N M 105$ must be populated with accereted $A N$ characters. |  |
| X222.087.2010AA.NM105.065 | nM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 514: "Entity's Middle Name" EIC: 85 "Billing Provider" | The first position of 2010AA.NM105 must be alphabetic (A...Z). | The first position of 2010AA.NM105 must be alphabetic (A...Z). | To prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |



| Edit Reference | Segment or Element | Description | 10 | Min. Max. | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> values | $\begin{gathered} \text { Thal } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition /Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.091.2010AA.N3.020 | N3 |  |  |  |  |  |  |  | 999 | R |  | Only one iteration of 2010AA.N3 is allowed. | Only one iteration of 2010AA.N3 is allowed. |  |
| X222.091.2010AA...301.010 | N301 | Biling Provider Address Line | AN | ${ }^{1-55}$ | R |  |  |  | 999 | R | (Ka03 =1:"Requited Data Element | 2010AA.N301 must be present. | 2010AA.N301 must be present. |  |
| X222.091.2010AA...301.020 | N301 |  |  |  |  |  |  |  | 999 | R | (14003 =6: "Invalid Character in Data | 2010AA.N301 must contain at least one non- space character. | 2010AA.N301 must contain at least one non- space character. |  |
| X222.091.2010AA..N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2010AA. 301 must be $1-55$ characters. | $22010 A$. . 301 must be 1 - 55 characters. |  |
| X222.091.2010AA..N301.040 | N301 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> Acknowledgement/Rejected for Invalid information <br> CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" EIC: 85 "Billina Provider" |  |  |  |
| X222.091.2010AA.N301.050 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA. N301 must be populated with accepted AN characters. | 2010AA.N301 must be populated with accepted AN characters. |  |
| X222.091.2010AA.N301.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.091.2010AA.N301.070 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." CSC 503: "Entity's Street Address" EIC: 85 "Billing Provider" |  | 2010AA.N301 must not contain the following exact phrases (not case sensitive): "Post Box', "Lock Box', "Lock Bin", | N301 must be a street address, not a post office box or lock box. |
| X222.091.2010AA.N302.005 | N302 | Biling Provider Address Line | ${ }^{\text {AN }}$ | 1.55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N302 must contain at least one non- space character. | 2010AA.N302 must contain at least one non- space character. |  |
| X222.091.2010AA.N302.010 | N302 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2010 AA. 3 302 must be $1-55$ characters. | $2010 \mathrm{AA}$. . 302 must be 1 - 55 characters. |  |
| х222.091.2010AA..N302.020 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7 Acknowledgement/Rejected for Invalid information. CSC 512: "Length invalid for receiver's application system Entity's Address" EIC: 85 "Billing Provider" |  |  |  |
| X222.091.2010AA.N302.030 | N302 |  |  |  |  |  |  |  | 999 | R |  | 2010AAA.N302 must be poppulated with acceneed $A N$ characters. | 2010AAA.N302 must be poppulated with acceneed AN characters. |  |
| X222.091.2010AA.N302.040Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.091.2010AA.N302.050 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.091.2010AA.N302.060 | N302 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information.. CSC 503: "Entity's Street Address" EIC: 85 "Billing Provider | 2010AA. .302 must not contain the following exact phrases (not case sensitive)" "Post <br>  | 2010AA. .302 must not contain the following exact phrases (not case sensitive) "Post Box" "Lock Box", "Lock Bin". | N302 must be a street address, not a post office box or lock box. |
| ×222.092.2010AA.N4.010 | N4 | BILLING PROVIDER |  | 1 | R | 2010AA |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.N4 must be present. | 2010AA.N4 must be present. |  |
| ×222.092.2010AA..N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AA.N4 is allowed. | Only one iteration of 2010AA.N4 is allowed. |  |
| X222.092.2010AA..N401.010 | N401 | Biling Provider City Name | AN | ${ }^{2.30}$ | R |  |  |  | ${ }^{999}$ | R | $\qquad$ | 2010AA..N401 must be present. | 2010AA. . 401 must be present. |  |
| X222.092.2010AA.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA. N401 must contain at least two non- space characeres. | $2010 \mathrm{~A} A . \mathrm{N} 401$ must contain at least two non- spoce characters. |  |
| X222.092.2010AA..N01.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010AA.N401 must be 2 -30 characters. | 20100A.N401 must be 2.30 characters. |  |
| X222.092.2010AA.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" EIC: 85 "Billing Provider |  |  |  |
| X222.092.2010AA..N01.050 | N401 |  |  |  |  |  |  |  | 999 | R | KT403= $=$ : "Invalid Character in Data Element | $2010 \mathrm{~A} A$, NOO1 must be populated with acceneded AN charactess. | 2010 A. .NOOI must be populated with |  |
| X222.092.2010AA.N401.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.092.2010AA...402.010 | N402 | Billing Provider State or Province <br> Code | 10 | 2.2 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \text { CSCC A7: } \end{aligned}$ | $\begin{aligned} & \text { If 2010AA.N404 is not present, } \\ & \text { 2010AA.N402 must be present. } \end{aligned}$ | $\begin{aligned} & \text { If 2010AA.N404 is not present, } \\ & \text { 2010AA.N402 must be present. } \end{aligned}$ |  |
| X222.092.2010AA.N402.020 | N402 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information..." CSC 501: "Entity's State/Province" EIC. 85 "Billing Provider" | 2010AA.N022 must be a valid State Code. | 2010AA.N002 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| x222.092.2010AA...403.010 | N403 | $\begin{array}{\|l\|l\|l\|l\|l\|l\|l\|} \hline \text { Brovider Postal Zone or } \\ \text { Z code } \end{array}$ | 10 | 3.15 | s |  |  |  | 999 | R |  | 1 If 2010AA.N404 is not present, 2010AA N403 must be resesent. | $1 \begin{aligned} & 1 \text { If 2010AA.N404 is not present } \\ & \text { 2010AA N.N03 must be resesent. }\end{aligned}$ |  |


| Edit Reference | Segment or Element | Description | ID | Min. <br> Max. | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 values | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.092.2010AA.N403.020 | N403 |  |  |  |  |  |  |  | 277 | c | Cscc A7 <br> Acknowledgement/Rejected for Invalid information 500: "Entity's Postal/Zip Code" EIC: 85 "Billing Provider" | $2010 A A . . N 03$ must be a valid 9 digit Zip Code. | 2010 A. .N403 must be a valid 9 digit Zip Code. | Valid Zip Code reference must be available for this edit. |
| x222.092.2010AA...404.010 | N404 | Country Code | ID | ${ }^{2.3}$ | s |  |  |  | 999 | E | \|K403 = 110.7 "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.092.2010AA..N405.010 | N405 | Location Qualifier | ID | 1-2 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.092.2010AA.N406.010 | N406 | Location Identifier | AN | 1.30 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.092.2010AA..N407.005 | N407 | Country Subdivision Code | ID | ${ }^{1.3}$ | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.092.2010AA.N407.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.092.2010AA.N407.020 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.094.2010AA.REF.010 | REF | BIILLIN PROVIDER TAX IDENTIFICATION |  | 1 | R | 2010AA |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.REF must be present. | 2010AA.REF must be present. |  |
| X222.094.2010AA.REF.020 | Ref |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" Maximum Use" | Only one iteration of 2010AA.REF with REF01 = "EI" or "SY" is allowed. | Only one iteration of 2010AA.REF with REF01 = "EI" or "SY" is allowed. |  |
| X222.094.2010AA.REFF0.010 | REFO1 | Reference Identification Qualifier | 10 | ${ }^{2.3}$ | R |  |  | El, SY | 999 | R | K403 $=1:$ : Required Data Element Missing" | $2010 A A . R E F 01$ must be present. | $2010 A A . R E F 01$ must be present. |  |
| X222.094.2010AA.REFF0.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2010AA.REF01 mus be valid values. | 2010 A. REF01 must be valid values. |  |
| X222.094.2010AA.REFF2.010 | REFO2 |  | ${ }^{\text {an }}$ | 1.50 | R |  |  |  | 999 | R | K403 = 1: Required Data Element Missing" | 2010 AA . REFO2 must be present. | 2010 AA. REFO2 must be present. |  |
| X222.094.2010AA.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R |  | 2010 AA. REFO2 must be populated with acceped AN characters. | $2010 \mathrm{~A} A . R E F O 2$ must be populated with acceneed $A \mathrm{~N}$ characters. |  |
| X222.094.2010AA.REF02.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.094.2010AA.REF02.040 | REFO2 |  |  |  |  |  |  |  | 277 | c |  | $2010 A A . R E F 02$ must be nine digits with no punctuation. punctuation. | 2010AA.REF02 must be nine digits with no punctuation. |  |
| X222.094.2010AA.REFF2.050 | REFO2 |  |  |  |  |  |  |  | 277 | c | Acknowledgement/Rejected for relational field in error" CSC 562. "Entity's National Provider dentifier (NPI) <br> EIC: 85 "Billity's tax id" <br> E. 85 "Billing Provider" | 2010AA.REF must be associated with the provider identified in 2010AA.NM109 | 2010AA.REF must be associated with the provider identified in 2010AA.NM109 | Valid NPI Crosswalk must be available for this edit. The NPI crosswalk is used to validate the tax information submitted in this loop |
| X222.094.2010AA.REFFo3.010 | REFO3 | Descripion | AN | 1.80 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.094.2010AA.REFF4.010 | REFO4 | REFERENCE IDENTIFIER |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.096.2010AA.REF.010 | REF |  |  | 2 | s | 2010AA |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2010AA.REF with REF01 = "1G" may be present when 2010AA.NM1 is present and 2010AA.NM109 is not present. |  | Trailbazer or JH (Texas) only, as appropriate for current MAC contract fur 01/20: Companion A Proje |
| X222.096.2010AA.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | cscc A7: <br> AcknowledgementRejected for nvvalid Information..." <br> CsC 732: "Information submitted goonsisten <br> CSC 560: "Entity's Additional/Secondary Identifier." EIC: 85 "Billing Provider" | Only one iteration of 2010AA.REF with REF01 = "1G" is allowed. |  | Trailblazer or JH (Texas) only as appropriate for current MAC contract for VA MRA Project 01/20: Companion Guide Note needed. |
| X222.096.2010AA.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2010AA.REF must not be present. | 2010AA.REF must not be present. | Everyone but Trailblazer or JH (Texas); as Project claims <br> 01/20: Companion Guide Note needed. |
| X222.096.2010AA.REF01.010 | REF01 | Reference Identification Qualifier | 10 | 2-3 | R |  |  | 0B, 1 l | 999 | R | IK403 $=1:$ "Required Data Element Missing" | 2010AA.REF01 must be present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| X222.096.2010AA.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ 7 ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2010AA.REFF01 must be "16". |  | Traiblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| X222.096.2010AA.REF02.010 | REF02 | Biling Provider Additional Identifier | an | ${ }^{1.50}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.REF02 must be present. |  | Traillazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 0120: Companion Guide Note needed. |

\begin{tabular}{|c|c|c|c|c|c|c|c|c|c|c|c|c|c|c|}
\hline Edit Reference \& Segment or Element \& Description \& 10 \& Min. Max. \& \[
\begin{aligned}
\& \begin{array}{l}
\text { Usage } \\
\text { Req. }
\end{array}
\end{aligned}
\] \& Loop \& \[
\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }
\] \& 5010A1 values \& \[
\begin{gathered}
\text { TAAI } \\
\text { g999 } \\
277 C A
\end{gathered}
\] \& \({ }_{\text {Acceptrej }}^{\text {ect }}\) \& Disposition / Error Code \& \[
\begin{aligned}
\& \text { Proposed 5010A1 Edits } \\
\& \text { PartB }
\end{aligned}
\] \& Proposed 5010A1 Edits CEDI \& Misc. Notes \\
\hline X222.096.2010AA.REF02.020 \& REF02 \& \& \& \& \& \& \& \& 277 \& c \&  \& \begin{tabular}{l}
When 2010AA.REF01 = "16", \\
2010AA.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and \(N\) is a numeric digit)
\end{tabular} \& \& Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. \\
\hline \multicolumn{15}{|l|}{X222.096.2010AA.REFF2.030 Edit Deactivated} \\
\hline X222.096.2010AA.REFFo3.010 \& ReFo3 \& Descripion \& AN \& 1.80 \& nu \& \& \& \& 999 \& E \& IK403 = I10: "Implementation "Not Used" Element Present" \& Must not be present. \& Must not be present. \& \\
\hline X222.096.2010AA.REFF4.010 \& REFO4 \& REFERENCE IDENTIFIER \& \& \& Nu \& \& \& \& 999 \& E \& (1) \& Must not be pesent. \& Must not be present. \& \\
\hline \multicolumn{15}{|l|}{X222.098.2010AA.PER. 010
Edit Deactivated} \\
\hline X222.098.2010AA.PER.020 \& PER \& BILLING PROVIDER CONTACT INFORMATION \& \& 2 \& s \& 2010AA \& \& \& 999 \& R \& IK304 = 5: "Segment Exceeds Maximum Use" \& Only two iterations of 2010AA.PER are allowed. \& Only two iterations of 2010AA.PER are allowed. \& \\
\hline X222.098.2010AA.PER01.010 \& PER01 \& Contact Function Code \& 10 \& 2.2 \& R \& \& \& c \& 999 \& R \& IK403 = 1: "Required Data Element Missing" \& \(2010 \mathrm{AA} . \mathrm{PER01}\) must be present. \& 2010 A.PER01 must be present. \& \\
\hline X222.098.2010AA.PER01.020 \& PER01 \& \& \& \& \& \& \& \& 999 \& R \& |1403 =7: "Invalid Code Value" \& 2010AA.PER01 must be "CC". \& 2010AA.PERO1 must be "IC". \& \\
\hline X222.098.2010AA.PER02.010 \& PERO2 \& Billing Provider Contact Name \& \({ }^{\text {an }}\) \& 1.60 \& s \& \& \& \& 999 \& R \& K403 \(=2:\) " "nditional Required Data
Element Missing \& For the 1 It 2010AA. PER ransmited,
2010AA.PERPO2 must be resesent \& For the 1 Is 2010AA. PER R transmited.
2010AA.PERPO2 must be present \& \\
\hline X222.098.2010AA.PER02.020 \& PER02 \& \& \& \& \& \& \& \& 999 \& R \& IK403 = I13. "Implementation Dependent "Not Used" Data Element Present" \& For the 2nd 2010AA.PER transmitted, 2010AA.PER02 must not be present. \& For the 2nd 2010AA.PER transmitted, 2010AA.PER02 must not be present. \& \\
\hline X222.098.2010AA.PER02.030 \& PER02 \& \& \& \& \& \& \& \& 999 \& R \& IK403 = 10: "Exclusion Condition Violated" \& 2010AA.PERR22 must not \(=1000 \mathrm{~A}\). PERO2. \& 2010AA.PERR2 must not \(=1000 \mathrm{~A} . \mathrm{PERO} 2\). \& \\
\hline X222.099.2010AA.PERO2.040 \& PER02 \& \& \& \& \& \& \& \& 999 \& R \& IK403 = 6: "Invalid Character in Data
Element" \& 2010AA.PER02 must contain at least one
non-space character. \& 2010AA.PER02 must contain at least one
non-space character. \& \\
\hline X222.098.2010AA.PER02.050 \& PER02 \& \& \& \& \& \& \& \& 999 \& E \& IK403 = 5: "Data Element Too Long" \& 2010 A.PERO2 must be 1-60 characters. \& 2010 A.PERO2 must be 1-60 characters. \& \\
\hline X222.098.2010AA.PER02.060 \& PER02 \& \& \& \& \& \& \& \& 277 \& \({ }^{\top}\) \& \begin{tabular}{l}
Acknowledgement/Rejected for Invalid Information..." \\
CSC 512: "Length invalid for receiver's application system" CSC 561: "Entity's Contact Name" EIC. 85 "Billing Provider"
\end{tabular} \& \& \& \\
\hline X222.098.2010AA.PERO2.070 \& PER02 \& \& \& \& \& \& \& \& 999 \& R \& IK403 = 6: "Invalid Character in Data Element" \& 2010AA.PER02 must be populated with
accepted AN characters. \& 2010AA.PER02 must be populated with
accepted AN characters. \& \\
\hline \multicolumn{15}{|l|}{X222.098.2010AA.PER02.080
Edit Deactivated} \\
\hline X222.098.2010AA.PER03.010 \& Pero3 \& Communication Number
Qualifier \& 10 \& 2.2 \& R \& \& \& EM, FX, TE \& 999 \& R \& IK403 = 1: "Required Data Element Missing" \& 2010AA.PERO3 must be present. \& 2010AA.PERO3 must be present. \& \\
\hline X222.098.2010AA.PERO3.022 \& PER03 \& \& \& \& \& \& \& \& 999 \& R \& |1403 =7: "Invalid Code Value" \& 2010 AA.PERO3 must be valid values. \& 2010 A. PEROO3 must be valid values. \& \\
\hline X222.098.2010AA.PER04.010 \& PER04 \& Communication Number \& AN \& 1-256 \& R \& \& \& \& \({ }^{999}\) \& R \& IK403 = 1: "Required Data Element Missing" \& 2010AA.PERO4 must be present. \& 2010AA.PERO4 must be present. \& \\
\hline х222.098.2010AA.PER04.020 \& PER04 \& \& \& \& \& \& \& \& 999 \& R \& IK403 = 6: "Invalid Character in Data Element" \& 2010AA.PER04 must contain at least one
non-space character. \& 2010AA.PER04 must contain at least one
non-space character. \& \\
\hline х222.098.2010AA.PER04.030 \& PER04 \& \& \& \& \& \& \& \& 999 \& E \& 1K403 =5: "Data Element Too Long" \& 2010AA.PERO4 must be 1 - 256 characters. \& 2010AA.PER04 must be 1-256 characters. \& \\
\hline X222.098.2010AA.PER04.040 \& PERO4 \& \& \& \& \& \& \& \& 277 \& T \&  \& \& \& \\
\hline X222.098.2010AA.PER04.050 \& PER04 \& \& \& \& \& \& \& \& 999 \& R \& IK403 = 6: "Invalid Character in Data Element" \& 2010AA.PER04 must be populated with
accepted AN characters. \& \(2010 \mathrm{~A} \cdot \mathrm{PERO}\) O must be populated with
accented \(A \mathrm{~N}\) characters. \& \\
\hline \multicolumn{15}{|l|}{\begin{tabular}{l}
X222.098.2010AA.PER04.060 \\
Edit Deactivated
\end{tabular}} \\
\hline X222.098.2010AA.PER04.070 \& PER04 \& \& \& \& \& \& \& \& 277 \& \({ }^{\top}\) \& \begin{tabular}{l}
CSCC A7:
"Acknowledgement/Rejected for Invalid \\
information..." \\
CSC 127: "Entity's Communication \\
EIC: 85 "Billing Provider"

\end{tabular} \& 2010AA.PER04 must be populated with exactly ten numeric characters when 2010AA.PER03 equals TE or FX. \& 2010AA.PER04 must be populated with exactly ten numeric characters when 2010AA.PER03 equals TE or FX. \& <br>

\hline $\times$ X22.098.2010AA.PER05.010 \& PER05 \& Communication Number
Qualifier \& $1{ }^{10}$ \& 2-2 \& s \& \& \& EM, EX, FX, TE \& 999 \& R \& 1K403 =7: "Invalid Code Value" \& 2010 AA.PER05 must be valid values. \& $2010 A A . P E R 05$ must be valid values. \& <br>
\hline X222.098.2010AA.PER05.020 \& PER05 \& \& \& \& \& \& \& \& 999 \& R \& 1K003 =7: "Invalid Code value" \&  \& ${ }^{\text {It 2010AAA.PERO5 }}$ is "EX" 2010AA. PERO \& <br>
\hline X222.098.2010AA.PER06.010 \& Pero6 \& Communication Number \& AN \& 1-256 \& s \& \& \& \& 999 \& R \& KK403 $=2$ : "Conditional Required Data
Element \&  \&  \& <br>
\hline ×222.098.2010AA.PER06.015 \& Perob \& \& \& \& \& \& \& \& 999 \& R \&  \& 2010AA.PER06 must contain at least one non-space character \& 2010AA.PER06 must contain at least one non-space character. \& <br>
\hline
\end{tabular}

| Edit Reference | Segment or Element | Description | 10 | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repereat } \end{gathered}$ | 5010A1 Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.098.2010AA.PER06.020 | Pero6 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2010AA.PERO6 must be 1-256 characters. | 2010AA.PER06 must be 1-256 characters. |  |
| x222.098.2010AA.PER06.025 | Pero6 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" Number" <br> EIC: 85 "Billing Provider" |  |  |  |
| $\begin{aligned} & \text { X222.098.2010AA.PERO6.030 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.098.2010AA.PER06.040 | PER06 |  |  |  |  |  |  |  | 999 | R | $\left.\right\|_{\mid} ^{\text {KK403 }=6: \text { "IIvalid Character in Data }}$ | 2010AA.PER06 must be populated with accepted AN characters. | 20.20 P. PR Ro6 must be populated with |  |
| X222.098.2010AA.PER06.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.098.2010AA.PER06.060 | PER06 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information.. <br> CSC 127: "Entity's Communication Number <br> EIC: 85 "Billing Provider" | 2010AA.PER06 must be populated with exactly ten numeric characters when 2010AA. PER05 equals TE or FX. | 2010AA.PER06 must be populated with exactly ten numeric characters when 2010AA.PER05 equals TE or FX. |  |
| X222.098.2010AA.PER07.010 | PER07 | Communication Number Qualifier | 10 | 2.2 | s |  |  | Em, EX, FX, TE | 999 | R | IK403 = 2: "Conditional Required Data Element Missinq" | If 2010AA.PERO7 is present, 2010AA. PER05 must be present. | If 2010AA.PERO7 is present, 2010AA.PER05 must be present. |  |
| X222.098.2010AA.PER07.020 | PER07 |  |  |  |  |  |  |  | 999 | R | \|K403 $\mathbf{~ 7}$ : "Invalid Code Value" | 2010 A. P. PR 07 must be valid values. | 2010 A. PERR07 must be valid values. |  |
| X222.098.2010AA.PER07.030 | PER07 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | If 2010AA.PERO7 is "EX", 2010AA.PERO5 | If 2010AA.PERO7 is "EX"; 2010AA.PERO5 |  |
| X222.098.2010AA.PER08.010 | PERO8 | Communication Number | ${ }^{\text {an }}$ | ${ }^{1-256}$ | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AA.PERO7 is present, 2010AA.PER08 must be present. | If 2010AA.PER07 is present, 2010AA.PER08 must be present. |  |
| X222.098.2010AA.PERO8.015 | PERO8 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | ${ }^{2010 \text { A. Per ROB must ontain at least one }}$ | ${ }^{2010 A A P . P E R O B ~ m u s t ~ c o n t a i n ~ a ~ t ~ l e a s t ~ o n e ~}$ |  |
| ×222.098.2010AA.PER08.020 | PERO8 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | 2010AA. PER R08 must be 1-256 characters. | 2010AA. PER R08 must be 1-256 characters. |  |
| X222.098.2010AA.PER08.025 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.098.2010AA.PER08.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.098.2010AA.PER08.040 | PERO8 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2010AA.PERO8 must be populated with | 2010AA.PER08 must be populated with accepted AN characters |  |
| X222.098.2010AA.PER08.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.098.2010AA.PER08.060 | PERO8 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | Acknowledgement/Rejected for Invalid Information..." <br> CSC 127: "Entity's Communication Number | 2010AA.PER08 must be populated with exactly ten numeric characters when 2010AA.PER07 equals TE or FX. | 2010AA.PER08 must be populated with exactly ten numeric characters when 2010AA.PER07 equals TE or FX |  |
| X222.099.2010AA.PER09.010 | PER09 | Contact Inquiry Reference | AN | 1-20 | NU |  |  |  | 999 | E | (1) | Must not be present. | Must not be present. |  |
| X222.101.2010AB.NM1.010 | NM1 | PAY-TO ADDRESS NAME |  | 1 | s | 2010AB | 1 |  | 999 | R | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 2010AB.NM1 is allowed. | Only one iteration of 2010AB.NM1 is allowed. |  |
| X222.101.2010AB.NM101.010 | NM101 | Enity ldentifier Code | 1 D | ${ }^{2 \cdot 3}$ | R |  |  | 87 | 999 | R | (1403 =1: "Required Data Element | 2010 AB .NM101 must be present. | 2010AB.NM101 must be present. |  |
| X222.101.2010AB.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 7 7: "Invalid Code Value" | 2010AB.NM101 must be "87". | 2010AB,NM101 must be "87". |  |
| X222.101.2010AB.NM102.010 | NM102 | Enity Type Quadifier | 10 | ${ }^{1-1}$ | R |  |  | 1,2 | 999 | R |  | 2010 AB .NM102 must be present. | 2010AB.NM102 must be present. |  |
| $\times \times 22.101 .2010 \mathrm{AB}$.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2010 AB . NM102 must be valid values. | 2010 AB . NM102 must be valid values. |  |
| $\times$ х222.101.2010AB.NM103.010 | NM103 | Pay-to Provider Last or Organization Name | ${ }_{\text {an }}$ | 1.60 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.101.2010AB.NM104.010 | NM104 | Payto Provider Fist Name | AN | ${ }^{1.35}$ | vu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.101.2010AB.NM105.010 | NM105 | Pay-to Provider Midide Name | AN | $1-25$ | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| х2222.101.2010AB.NM106.010 | NM106 | Name Prefix | ${ }_{\text {an }}$ | 1-10 | vu |  |  |  | 99 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х2222.101.2010AB...M1107.010 | NM107 | Pay-to Provider Name Suffix | ${ }^{\text {an }}$ | 1-10 | NU |  |  |  | ${ }^{999}$ | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.101.2010AB.NM108.010 | NM108 | Identifacaion Code Qualifier | ID | 1-2 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.101.2010AB.NM109.010 | NM109 | Pay-to Pronider Identifier | AN | 2.80 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times \times 222.101 .2010 A B$.NM110.010 | NM110 | Entit Pelationship Code | 10 | 2.2 | nu |  |  |  | 999 | E | (12403: 120 " "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.101.2010AB.NM111.010 | NM111 | Enity Identifier Code | 10 | 2.3 | NU |  |  |  | 999 | E | (14033 $=10.0$ "Implementation "Not | Must not be present. | Must not be present. |  |
| $\times \times 222.101 .2010 A B$.NM112.010 | NM112 | $\begin{aligned} & \hline \text { Name Last or organization } \\ & \text { Name } \end{aligned}$ | an | 1.60 | vu |  |  |  | 999 | E | IK403 = 110 : "Implementataion "Not Used" Element Present" | Must not be present. | Must not te peresent. |  |


| Edit Reference | Segment or Element | Description | ID | min. <br> Max. | $\begin{aligned} & \begin{array}{c} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.103.2010ab.n3. 010 | N3 | PAY-TO Adoress |  | 1 | R | ${ }^{2010 A B}$ |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2010AB.NM1 is present, 2010AB.N3 must be present. | If 2010AB.NM1 is present, 2010AB.N3 must be present. |  |
|  | N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010 AB . Na is allowed. | Only one iteration of 2010AB. .3 is is allowed. |  |
| X222.103.2010AB.N301.010 | N301 | Pay-to Provider Address Line | AN | ${ }^{1.55}$ | R |  |  |  | 999 | R |  | 2010AB. n301 must be present. | 2010AB. 3 301 must be present. |  |
| X222.103.2010АВ...301.020 | N301 |  |  |  |  |  |  |  | 999 | R |  | 2010 AB . $\mathrm{N301}$ must contain at least one non- space character. |  |  |
| X222.103.2011AB.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | 2010AB. 3 301 must be 1 - 55 characters. | 2010 AB . 3301 must be $1-55$ characters. |  |
| X222.103.2010AB..N301.440 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7 Acknowledgement/Rejected for Invalid Information.. CSC 512: "Length invalid for receiver's application system" EIC. 87" Entity's Address" EIC: 87 "Pav-to Provider" |  |  |  |
| X222.103.2010AB.N301.050 | N301 |  |  |  |  |  |  |  | 999 | R |  |  | 2010 ABB . N301 must be poppulated with acceneded $A \mathrm{~N}$ character |  |
| X222.103.2010AB.N301.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.103.2010AB.N302.010 | N302 | Pay-to Provider Address Line | AN | ${ }^{1.55}$ | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | $\left.\right\|_{\text {space character. }} ^{2010 .}$. . . | $\left.\right\|_{\text {space c character. }} ^{2010 \mathrm{~S}}$. contain a t least one non- |  |
| $\begin{aligned} & \times 222.103 .2010 \text { ABB.N302.020 } \\ & \text { Editideactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.103.2010AB.N302.030 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.103.2010AB.N302.040 | N302 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2010 AB . N 302 must be 1-55 characters. | 2010 AB . 302 must be $1-55$ characters. |  |
| X222.103.2010AB...302.045 | N302 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" . 87 Pav-to Provider" |  |  |  |
| $\times 222.103 .201010 \mathrm{AB}$. N302.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.103.2010AB.N302.060 | N302 |  |  |  |  |  |  |  | 999 | R | KK003 $=6$ : "Ivalid Character in Data Element:" | $\int_{\text {accepted AN character. }}^{2010 \mathrm{~A} . \text {. } 302 \text { must bet with }}$ |  |  |
| $\times 222.103 .2010 \mathrm{AB}$. . м32.070 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.104.2010AB. M4.010 | N4 | PAY-TO ADDRESS CITYISTATEIZIP CODE |  | 1 | R | 2010AB |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2010AB.NM1 is present, 2010AB.N4 must be present. | If 2010AB.NM1 is present, 2010AB.N4 must be present. |  |
| $\times 222.104 .2010 \mathrm{AB}$.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | 1K304 = 5 : "Segment Exceeds Maximum Use" | Only one iteration of 2010AB.N4 is allowed. | Only one iteration of 2010AB.N4 is allowed. |  |
| X222.104.2010AB.N401.010 | N401 | Pay-to Address City Name | ${ }^{\text {AN }}$ | 2.30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Mising" | 2010AB. . 4011 must be present. | 2010AB. N401 must be present. |  |
| X222.104.2010AB..N401.020 | N401 |  |  |  |  |  |  |  | 999 | R |  | $2010 \mathrm{AB}$. . 401 must t ontain at least two non- space characters. | 2010 AB . N401 must contain a a least wo non- space characters. |  |
| X222.104.2010AB...401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long | 2010AB. .4001 must be 2 -30 characters. | 2010 AB . 4001 must be 2 2.30 characters. |  |
| X222.104.2010AB.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: Acknowledge <br> CSC 512: "Length invalid for receiver' application system" CSC 502: "Entity's City" EIC. 87 "Pavit EIC: 87 "Pav-to Provider" |  |  |  |
| X222.104.2010AB..N401.050 | N401 |  |  |  |  |  |  |  | 999 | R |  | 2010ABB.NA01 must be populated with accented $A N$ characers. | 2010 ABB . N401 must be poppulated with acceneded AN characters. |  |
| X222.104.2010AB.N401.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.104.2010AB..N002.010 | N402 | Pay-to Address State Code | 10 | 2.2 | s |  |  |  | 999 | R | $\begin{aligned} & \text { 1K403 = 2: "Conditional Required Data } \\ & \text { Element Missina" } \end{aligned}$ | If 2010AB.N404 is not present, 2010AB.N402 must be present. | $\begin{aligned} & \text { If 2010AB.N404 is not present, } \\ & \text { 2010AB.N402 must be present. } \end{aligned}$ |  |


| Edit Reference | Segment or Element | Descripion | ID | min. <br> Max. | ( $\begin{gathered}\text { Usage } \\ \text { Req. }\end{gathered}$ | Loop | $\substack{\text { Loop } \\ \text { Repeat }}$ | 5010A Values | $\begin{gathered} \text { TAAl } \\ \text { a999 } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | $\underset{\text { Pratr B }}{\text { Proposed 5010A1 Edits }}$ | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.104.2010AB..N402.020 | N402 |  |  |  |  |  |  |  | 277 | c | Acknowledgement/Rejected for Invalid Information... <br> SS 501: "Entity's State/Province code | 2010aB. . 4022 must be a valid State Code. | 2010AB. . N402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| X222.104.2010AB. .N403.010 | N403 | $\begin{gathered} \text { Pay-to Address Postal Zone or } \\ \text { ZIP Code } \end{gathered}$ | 10 | 3.15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AB.N404 is not present, 2010AB.N403 must be present. | If 2010AB.N404 is not present, 2010AB.N403 must be present. |  |
| X222.104.2010AB..N403.020 | N003 |  |  |  |  |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for Invalid information..." CSC 500: "Entity's Postal/Zip Code" EIC: 87 "Pay-to Provider" | 2010AB. . 403 must be a vaid Zip Code. | $2010 A B$. N403 must be a vaid Zip Code. | Valid Zip Code reference must be available for this edit. |
| X222.104.2010AB.N403.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.104.2010AB. .N04.010 | N404 | Country Code | 10 | ${ }^{2.3}$ | s |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.104.2010AA..N405.010 | N405 | Location Qualifer | 10 | 1-2 | nu |  |  |  | 999 | E | (K4033 $=110$. "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.104.2010AB. . 406.010 | N406 | Location Identifer | AN | ${ }^{1.30}$ | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.104.2010AB. . N07.005 | N407 | Country Subdivision Code | 10 | ${ }^{1-3}$ | s |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\left\lvert\, \begin{array}{\|l\|l} \begin{array}{l} \text { 2222.104.2010AB. .N07.020 } \\ \text { Edit Deactivated } \end{array} \end{array}\right.$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.106.2010AC.. 010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.106.2010AC. .nn1.010 | NM1 | pay-to plan name |  | 1 | s | 2010AC |  |  | 277 | T | CSCC A3: <br> Acknowledgement/Returned as unprocessable claim" CSC 732: "Information submitted inconsistent with billing guidelines." CSC 125: "Entity's name." EIC: 87 "Pay-to Provider" | 2010AC.NM1 must not be present | 2010aC.NM1 must not be present | Loop not accepted by Medicare. 11/20: Companion Guide Note needed. |
| x222.108.2010aC..n3.010 | N3 | PAY-TO PLAN ADDRESS |  | 1 | R | 2010AC |  |  | 277 | T | $\operatorname{cscc}$ A3: <br> Acknowiedgement/Rejected as unprocessable claim" CSC 732: "Information submitted guidelines." CSC 503: "Entity's Street Address." EIC: 87 "Pay-to Provider" | 2010AC.N3 must not be present. | 2010AC.N3 must not be present. | Loop not accepted by Medicare. <br> 11/20: Companion Guide Note needed. |
| x222.109.2010AC.N4.010 | N4 | PAY-TO PLAN CITYISTATEIIIP CODE |  | 1 | R | 2010AC |  |  | 277 | T | $\operatorname{cscc}$ Аз: <br> Acknowiedgement/Rejected as unprocessable claim" CSC 732: "Information submitted inconsistent <br> CSC 126: "Entity's Address." <br> EIC: 87 "Pay-to Provider" | 2010AC.N4 must not be present. | 2010AC.N4 must not be present. | Loop not accepted by Medicare <br> 11/20: Companion Guide Note needed |
| X222.111.2010AC.REF.010 | REF | PAY-TO PLAN SECONDARY IDENTIFICATION NUMBER |  | 1 | R | 2010AC |  |  | 277 | T | $\operatorname{cscc}$ A3: <br> "Acknowledgement/Rejected as <br> unprocessable claim" <br> CSC 732: "Information submitted <br> inconsistent with billing <br> guidelines. <br> CSC 560: "Entity's <br> EIC. 87 "Pay/Secondary Identifier. <br> EIC: 87 "Pay-to Provider" | 2010AC.REF must not be present. | 2010aC.REF must not be present. | Loop not accepted by Medicare. <br> 11/20: Companion Guide Note needed |


| Edit Reference | Segment or Element | Description | 10 | $\underset{\text { max. }}{\substack{\text { min. } \\ \text { Max. }}}$ | Usage <br> Req. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | 5010A1 <br> Values |  | $\left\|\begin{array}{c} \text { Acceptreej } \\ \text { ect } \end{array}\right\|$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.113.2010AC.REF.020 | REF | PAY-TO PLAN TAX IDENTIFICATION NUMBER |  | 1 | R | 2010AC |  |  | 277 | T | cscc A3: <br> AcknowledgementRejected as unprocessable claim" CSC 732: "Information submitted inconsistent with billing guidelines." csc 128: "Entity's tax id." EIC: 87 "Pay-to Provider" | 2010aC.REF must not be present. | 2010AC.REF must not be present. | Loop not accepted by Medicare. <br> 11/20: Companion Guide Note needed. |
| $\times 222.114 .20008 .010$ |  | subscriber Loop |  |  |  | 20008 | >1 |  | 999 | R | 1K304 = 17: "Implementation Loop Occurs Under Minimum Times" | 20008 must be present. | ${ }^{20008}$ must be present. |  |
| х222.114.2000в.'L.010 | HL |  |  | 1 | R | 20008 | 1 |  | 999 | R | $\left\lvert\, \begin{aligned} & \mid 1 \times 304=3: \text { "Required Segment } \\ & \text { missing: }\end{aligned}\right.$ | 20008.HL must be present. | 20008.HL must be present. |  |
| х222.114.20008.fL.020 | HL |  |  |  |  |  |  |  | ${ }^{999}$ | R | ${ }^{1130304=5 \text { " } \text { Segment Exceeds }}$ | Only one iteration of 20008.HL is allowed. | Only one iteration of 20008.HL is allowed. | This error means there can only be one HL in each iteration of the loo. |
| X222.114.20008.HL01.010 | HLO1 | Hierachical II Number | AN | ${ }^{1-12}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element | 20008. HL01 must be present. | 20008. HL01 must be present. |  |
| х222.114.2000в.н101.020 | HL01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element too Long" | 20008. HL01 must be 1 - 12 characters. | 2000..HL01 must be 1-12 characters. |  |
| $\times \times 222.114 .2000$.HL01.030 | HL01 |  |  |  |  |  |  |  | 999 | R | KiK03 =6:" "Invalid Character in Data | 2000B.HL01 must be numeric. | 20008. HL01 must be numeric. |  |
| х222.114.20008.HL01.040 | нL01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2000B. HL01 must be equal the value of the previous HL01 (2000A.HL01) plus one. | 2000B.HL01 must be equal the value of the previous HL01 (2000A.HL01) plus one. |  |
| X222.114.20008.HL02.010 | HL02 | Hieracchical Parent II Number | ${ }^{\text {an }}$ | 1-12 | R |  |  |  | 999 | R | $\left\lvert\, \begin{aligned} & \text { K403 } \\ & \text { Missing" } \\ & 1\end{aligned}\right.$ "Required Data Element | $20008 . H$ H02 must be present. | 20008.HLLO2 must be present. |  |
| х222.114.20008.H102.020 | нLO2 |  |  |  |  |  |  |  | 999 | R |  | 2000B.HL02 must be equal to the value of the HL01 (2000A.HL01) of the parent HL. | 2000B.HL02 must be equal to the value of the HL01 (2000A.HL01) of the parent HL. |  |
| X222.114.20008.HLо3.010 | нLоз | Hierachical Level Code | 1 D | 1-2 | R |  |  | 22 | 999 | R | K403 $=1$ : Required Data Element | 20008. HLO3 must be present. | 20008. HLO 3 must be present. |  |
| х222.114.20008.H1L03.020 | HL03 |  |  |  |  |  |  |  | 999 | R | 14403 $=7$ : "Invalid Code Value" | 20008.HLLO3 must be "22". | 2000. H.LLO3 must be "22". |  |
| х222.114.20008..1204.010 | нL04 | Hierachical Child Code | 10 | ${ }^{1-1}$ | R |  |  | 0,1 | 999 | R | \|K403 1: : "Required Data Element Missing" | 20008.HL04 must be peresent. | 20008.HLLO4 must be present. |  |
| х222.114.20008.H104.015 | HL04 |  |  |  |  |  |  |  | 999 | R | \|1403 $=7$ : "Invalid Code Value" | 20008. HL04 must be "O". | 20008. HL04 must be "O", |  |
| X222.114.2000B.HL04.020Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.116.2008.S88.010 | SBR | SUBSCRIBER INFORMATION |  | 1 | R | 20008 | 1 |  | 999 | R | $\left.\right\|_{\text {Missing: }} ^{1 \text { K304 }}$ : "Required Segment | 2000.SBR must be present. | 2000B.SBR must be present. |  |
| x222.116.20008.S88.020 | SBR |  |  |  |  |  |  |  | 999 | R |  | Only one iteration of 20008.SBR is allowed | Only one iteration of 20008. SBR is aalowed. |  |
| x222.116.20008.S8R01.010 | SBR01 | $\begin{array}{l}\text { Payer Responsibitily Sequence } \\ \text { Number Coode }\end{array}$ | 10 | ${ }^{1-1}$ | R |  |  | $\begin{gathered} \text { A, B, C, D, E, F, G, G } \\ H, P, S, T, U \\ \hline \end{gathered}$ | 999 | R |  | 20008.SBR01 must be present. | 20008. SBR01 must be present. |  |
| X222.116.20008.S8RR01.020 | S8R01 |  |  |  |  |  |  |  | 999 | E | \|1K003 =7: "Invalid Code Value" | $20008 . S$ SRR01 must be "S" or "P". | $20008 . S 8 R 01$ must be "S" or "P". |  |
| X222.116.20008.S8R01.030 | SBR01 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 732 "Information submitted inconsistent with billing guidelines." CSC 742 "Payer Responsibility Sequence Number Code." |  |  |  |
| $\begin{aligned} & \text { X22:.116.2000B.SBRO1.040 } \\ & \text { Edit Deaciviated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.116.20008.S8R02.010 | SBRo2 | Individual Relaionstip Code | 10 | 2.2 | s |  |  | 18 | 999 | R |  | 20008.SBRO2 must be present. | 20008.SBRO2 must be present. | Companion Guide Note needed. |
| x222.116.20008.SBRO2.020 | SBR02 |  |  |  |  |  |  |  | 999 | R | 14403 =7: "Invalid Code Value" | 2000.SSRR02 must be "18". | 20008.S8R02 must be "18". |  |
| X222.116.20008.S8R03.004 | S8Ro3 | Subscriber Group or Policy Number | an | ${ }^{1.50}$ | s |  |  |  | 999 | E | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | 20008.SBR03 must not be present | 2000b.SBRO3 must not be present |  |
| х222.116.20008.S8R03.006 | S8R03 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A8: "Acknowledgement/Rejected for relational field in error" CSC 163 : "Entity's Policy Number" CSC 732 "Information submitted inconsistent with billing guidelines." EIC: IL "Subscriber" |  |  |  |
| X222.116.20008.SBR03.010 <br> Eidi Deacaivated <br> X222.16.2000.SBRO3.020 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.116.2000B. SBR03.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\operatorname{lin}_{\text {Max. }}^{\text {Max. }}$ | Usage | Loop | $\underset{\text { Repat }}{\substack{\text { Loop } \\ \text { Reat }}}$ | 5010101 values | $\begin{gathered} \text { TaAl } \\ \substack{999 / 1 \\ 277 C A} \end{gathered}$ | $\begin{gathered} \text { Acceptrejej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\underset{\text { Part B }}{\text { Proposed 5010A1 Edits }}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.116.2000B.SBR03.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.116.20008.S8RR04.005 | SBR04 | Insured Group Name | an | 1.60 | s |  |  |  | 999 | E |  | 20008.SBR04 must not be present | 2000.SBR04 must not be present |  |
| X222.116.20008.S8R04.007 |  |  |  |  |  |  |  |  | 277 | T | "AcknowledgementRejected for ${ }^{\circ} \mathrm{CSC} 663^{3}$. CSC $733^{\prime \prime}$ Ins Group Name inconsistent with bill sumitted EIC: IL "Subscriber" |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.116.2000B.SBR04.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.116.2000B.SBR04.040 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.116.2000B.SBR04.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.116.2000B.SBR04.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.116.2000B.SBR04.070Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.116.2000.SSRR05.010 | S8R05 | Insurance Type Code | 10 | 1-3 | s |  |  | 13, 14, 15, 16, | 999 | R | \|K403 =7: "Invalid Code Value" | $20008 . S$ Sro5 must be valid values. | $20008 . S$ SR05 must be valid values. |  |
| $\begin{aligned} & \begin{array}{l} \text { X222.112.20000.SBR05.020 } \\ \text { Edit Deactivated } \end{array} \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.116.2000B.SBR05.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.116.20008.S8R05.040 | SBR05 |  |  |  |  |  |  |  | 999 | E |  | If 2000B.SBR01 is "P", 2000B.SBR05 must not be present. | If 2000B.SBR01 is "P", 20008. SBRO5 must not be present. |  |
| X222.116.20008.S8R05.045 | SBR05 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| x222.116.20008.S8R05.050 | SBR05 |  |  |  |  |  |  |  | 999 | E |  | It 2 2000B.SERO1 i is not "P", 2000B. SBRO5 must be eresent. | If 2000B.SBRO1 i s not "P", 2000B.SBRO5 must be present. |  |
| X222.116.20008.S8R05.055 | SBR05 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC AG: "ACkowedgementiRejected for "Missing Information" CSC 58. "Insurance Type Code" EIC: IL "Subscriber" |  |  |  |
| X222.116.20008.S8R06.010 | SBR06 | Coordination of Benefits Code | 10 | 1-1 | nu |  |  |  | 999 | E | (12403= 110. "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.116.20008.S8RR7.010 | SBR07 | Yes/No Condition or Response Code | 10 | 1-1 | vu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.116.20008.S8R08.010 | SBR08 | Employment Staus Code | 10 | 2.2 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.116.20008.S8R09.010 | SBR09 | Claim Filing Indicator Code | 10 | 1-2 | s |  |  | 11, 12, 13, 14, 15, 16, 17, AM, BL, CH MA, MB, MC OL TV, va, wc, zz | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." CSC 732 "Information submitted inconsistent with billing guidelines." CSC 480 "Entity's claim filing EIC: PR "Payer" | 20008.S8R09 must be "MB". | 20008.SBR09 must be "MB". |  |
| х222.119.2000.PA. 010 | PAT | PATIENT INFORMATION |  | 1 | s | 20008 |  |  | 999 | R | 1K304 =5: "Segment Exceeds Maximum Use" | Only one iteration of 20008.PAT is allowed. | Only one iteration of 2000B.PAT is allowed. |  |
| х222.119.2000..PAT01.010 | Patol | Individual Realitonstip Code | 10 | 2-2 | nu |  |  |  | 999 | E |  | Must not be present. | Must not te present. |  |
| х222.119.20008.PATT02.010 | Patoz | Patient Location Code | 10 | 1-1 | nu |  |  |  | 999 | E | (Ka03 = 10.0 "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.119.20008.PAT03.010 | Pato ${ }^{\text {a }}$ | Employment Status Code | 10 | 2.2 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.119.20008.PAT04.010 | Pato 4 | Student Status Code | 10 | 1-1 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |

$\xrightarrow{837-}$

| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { Min. } \\ \hline \end{gathered}$ Max. | $\begin{gathered} \text { Usage } \\ \text { Rea. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repereat } \end{gathered}$ | 5010A1 Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.119.20008.PAT05.010 | Patos | Date Time Period Format Qualifier | 10 | 2-3 | s |  |  | D8 | 999 | R | IK403 =7: "Invalid Code value" | 20008. PAT05 must be "D8" | 20008. PATO5 must be "D8" |  |
| х222.119.20008.PATO6.010 | Pato6 | Patient Death Date | ${ }^{\text {an }}$ | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 =2: "Conditional Required Data |  | 1 It 200B.PAROOS is present, 2000B.PATO6 |  |
| X222.119.20008.PAT06.020 | Patob |  |  |  |  |  |  |  | 999 | R | 1K403 $=8$ : "Invalid Date" | 2000B.PAT06 must be a valid date in CCYYMMDD format. | 2000B.PAT06 must be a valid date in CCYYMMDD format. |  |
| х222.119.2000..PAT07.010 | Patot | Unitor Basis for Measurement | 10 | 2-2 | s |  |  | 01 | 999 | R | 1K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ |  | 20008.PATO7 must be "11". |  |
| х222.119.2000..PAT07.015 | Patot |  |  |  |  |  |  |  | 999 | R | K403 = $110:$ "Implementation "Not Used" Element Present" | Must not te present. |  |  |
| х222.119.2000.PAT08.005 | Patob | Patient Weight | R | ${ }^{1-10}$ | s |  |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |  |
| х222.119.20008.PAT08.010 | Patob |  |  |  |  |  |  |  | 999 | R | K403 $=2:$ " "nonditional Required Data Element Missing |  | ${ }^{\text {II 2000B. PATOO i is present, 2000B.PATOB }}$ |  |
| х222.119.2000..PAT08.015 | Patob |  |  |  |  |  |  |  | 999 | E | IK403 5 : "Data Element Too Long" |  | 20008.PATO8 must be > 0 and <= 9,999.99 |  |
| х222.119.20008.PAT0.020 | Pato8 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 273: "Weight" EIC: IL "Subscriber" |  |  |  |
| $\begin{aligned} & \text { X222.119.2000B.PAT08.022 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.119.20008.PAT0.025 | Pato8 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 697: "Invalid Decimal Precision" CSC 273: "Weight" <br> EIC: IL "Subscriber" |  | 2000B.PAT08 is limited to 0,1 or 2 decimal positions. |  |
| X222.119.20008.PATO9.010 | PAT09 | Pregnancy Indicator | ID | 1-1 | s |  |  | Y | 999 | R | 1K403 $\mathbf{~ 7}$ : "Invalid Code Value" | 20008.PATO9 must be "Y". | 20008.PATO9 must be "Y". |  |
| X222.121.20108A.NM1.010 | NM1 | SUBSCRIBER NAME |  | 1 | R | 2010BA | 1 |  | 999 | R | 1K304 $=3$ : "Required Segment | 2010BA.NM1 must be present. | 20108A.NM1 must be present. |  |
| X222.121.20108A.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IISOO4 = 4: "Loop Occurs Over } \\ & \text { IINaximum Times" } \\ & \text { Man } \end{aligned}$ | Only one iteration of 2010BA.NM1 | Only one iteration of 2010BA.NM1 allowed. |  |
| X222.121.20108A.Nn101.010 | NM101 | Enity Identifier Code | 10 | ${ }^{2 \cdot 3}$ | R |  |  | I | 999 | R |  | 2010BA.NM101 must be present. | 20108A.NM101 must be present. |  |
| X222.121.20108A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 20108A.NM101 must be "LI", | 20108 A .NM101 must be "ll", |  |
| X222.121.20108A.NM102.010 | NM102 | Enity Type Qualifier | 10 | ${ }^{1-1}$ | R |  |  | 1,2 | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 20108 A ..NM102 must be present. | $20108 A$. NM102 must be present. |  |
| x222.121.20108A.Nm102.020 | NM102 |  |  |  |  |  |  |  | 277 | c | CSCC A7 Acknowledgement/Rejected for Invalid Mformation... CSC 732: "Information submitted CSC741 "Entity must be a person." | 20108A. .NM102 must be "1". | $20108 A . N$ N102 must be "1". |  |
| x222.121.20108A.NM103.010 | nM103 | Subscriber Last Name | ${ }^{\text {an }}$ | 1.60 | R |  |  |  | ${ }^{999}$ | R | IK403 = 1: "Required Data Element | 20108 A . .NM103 must be present. | 2010BA.NM103 must be present. |  |
| X222.121.201088.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA. NM103 must Contain at least one | 2010BA.NMIO3 must oontain at least one non-space character. |  |
| X222.121.20108A.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | \|K403 5 5: "Data Element Too Long" | 20108A.NM103 must be 1-60 characters. | 20108A.NM103 must be 1 - 60 characters. |  |
| х222.121.20108A.NM103.040 | nM103 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 Acknowled CSC 512: .." application system" CSC 504: "Entity's Last Name" EIC: IL "Subscriber" |  |  |  |
| X222.121.20108A.NM103.050 | nм103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM103 must be populated with accepted AN characters. | 2010BA.NM103 must be populaled with |  |
| X222.121.2010BA.NM103.060 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.121.20108A.NM104.010 | NM104 | Subscriber Fist Name | an | ${ }^{1-35}$ | s |  |  |  | 277 | c | CSCC A6: "Acknowledgementrejected for Missing Information..." CSC 505: "Entitys First Name" | 2010BA.NM104 must be present. | 2010BA.NM104 must te pesest. |  |
| X222.121.20108A.NM104.020 | NM104 |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK403 = 6: "Invalid Character in Data Element" | 20108A. NM104 must Contain a t least one | 2010 BA. .NMIO4 must ontain at least one non-space character. |  |
| x222.121.20108A.NM104.030 | nM104 |  | An | 1-35 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.NM 104 must be 1-35 characters. | 20108 A.NM104 must be 1-35 characters. |  |
| x222.121.20108A.NM104.040 | NM104 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information.. <br> CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: $1 /$ "Subscriber" |  |  |  |
| х222.121.20108A.NM104.050 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM104 must be populated with accepted AN characters. | 2 |  |


| Edit Reference | Segment or Element | Description | ID | Min. Max. | $\begin{aligned} & \begin{array}{c} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { cog } \\ \text { 277CA } \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.121.2010BA.NM104.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.121.20108A.NM105.010 | NM105 | Suscriber Midale Name or Initial | AN | ${ }^{1-25}$ | s |  |  |  | 999 | R |  | ${ }^{20108 A . N M 105 ~ m u s t ~ C o n t a i n ~ a ~ t ~ l e a s t ~ o n e ~}$ | ${ }^{20108 A . N M 105 ~ m u s t ~ o o n t a i n ~ a t ~ l e a s t ~ o n e ~}$ |  |
| X222.121.20108A.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 20108 A.NM 105 must be 1-25 characters. | 20108 A.NM105 must be 1-25 characters. |  |
| ×222.121.20108A.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | Acknowledg CSC 512: ". " application system" CSC 514: "Entity's Middle Name" EIC: IL "Subscriber" |  |  |  |
| X222.121.20108A.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | KKLO3 =6: "Invalid Character in Data Element" | $2010 B A$. NM105 must be populated with acceted AN charactes. | 210 IOA.NM105 must be populated with |  |
| X222.121.20108A.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 514: "Entity's Middle Name" EIC: IL "Subscriber" | The first position of 2010BA.NM105 must be alphabetic (A...Z). | The first position of 2010BA.NM105 must be alphabetic (A...Z). | To prevent continued processing and later ejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.121.2010BA.NM105.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.121 .20108 \mathrm{~A} . \mathrm{Nm106.010}$ | NM106 | Name Pefix | AN | 1-10 | nu |  |  |  | 999 | E | \|iK403 = 10. "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.121.20108A.NM107.010 | NM107 | Subscriber Name Suffix | ${ }^{\text {AN }}$ | ${ }^{1-10}$ | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data <br> Element" | 2010BA. NM107 must contain at least one non-space character. | 2010BA.NM107 must contain at least one non-space character. |  |
| X222.121.20108A.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 20108 A.NM107 must be 1-10 characters. | 20108A.NM107 must be $1-10$ characters. |  |
| X222.121.20108A.NM107.030 | nM107 |  |  |  |  |  |  |  | 277 | T | Acknowledg CSC 512: ". " application system" CSC 125: "Entity's Name" EIC: IL "Subscriber" |  |  |  |
| X222.121.20108A.NM107.040 | nM107 |  |  |  |  |  |  |  | 999 | R |  | lacen | 2010BA.NM107 must be populaled with |  |
| X222.121.2010BA.NM107.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.121.2010BA.NM108.010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222A1.015.2010BA.NM108.010 | NM108 | Identificaion Code Qualifier | 10 | ${ }^{1-2}$ | s |  |  | ॥, M1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM108 must be present. | 20108A.NM108 must be present. |  |
| (1) |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222AA.016.2010BA.NM109.010 | nM109 | Subscriber Primay Identifier | AN | 2.80 | s |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | $20108 \mathrm{~A} . \mathrm{Nm109}$ must be present. | 20108A.NM109 must be present. |  |
| ×222.121.20108A.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CsCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 164: "Entity's contract/member | If Medicare IDs: <br> 2010BA.NM109 must be 10-11 positions in the format of NNNNNNNNNA or NNNNNNNNNAA or NNNNNNNNNAN where " $A$ " represents an alpha character and " N " represents a numeric digit. <br> -or. | If Medicare IDs: <br> 2010BA.NM109 must be $10-11$ positions in the format of NNNNNNNNNA or NNNNNNNNNAA or NNNNNNNNNAN where " A " represents an alpha character and N" represents a numeric digit. <br> or- | 01/20: Companion Guide Note needed. |
|  |  |  |  |  |  |  |  |  |  |  | number" <br> EIC: IL "Subscriber" | If Railroad IDs: <br> 2010BA.NM109 must be $7-12$ positions in the format of ANNNNNN, AANNNNNN, ANNNNNNNNN, AANNNNNNNNN, AAANNNNNN, or AAANNNNNNNNN where A " represents an alpha character and " N " represents a numeric digit. | If Railroad IDS: <br> 2010BA.NM109 must be $7-12$ positions in the format of ANNNNNN, AANNNNNN, ANNNNNNNNN, AANNNNNNNNN AAANNNNN, or AAANNNNNNNNN where $A$ " represents an alpha character and " $N$ " represents a numeric digit. |  |
| X222.121.20108A.NM110.010 | NM110 | Enity Relationstip Code | 10 | 2.2 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.121.20108A.NM111.010 | NM111 | Enity Identifier Code | 10 | 2.3 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.121.20108A.NM112.010 | NM112 | Name Last or organization Name | AN | 1.60 | vu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.124.20108A.N3.005 | N3 | SUBSCRIBER AdDRESS |  | 1 | s | 2010BA |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing | 2010BA.N3 must be present when 2000B.SBRO2 is "18". 2000B.SBR02 is "18". | 2010BA.N3 must be present when 2000B.SBRO2 is "18". |  |
| X222.124.20108A.N3.010 |  |  |  |  |  |  |  |  | ${ }^{999}$ | R |  | $\begin{aligned} & \text { only one iteration of } 20108 A . N 3 \text { is } \\ & \text { allowed. } \end{aligned}$ | $\begin{aligned} & \text { Only one iteration of 2010BA.N3 is } \\ & \text { allowed. } \end{aligned}$ |  |
| х222.124.20108A..N301.010 | N301 | Subscriber Address Line | AN | 1.55 | R |  |  |  | 999 | R |  | 20108A. 3 301 must be present. | 20108A.N301 must be present. |  |


| Edit Reference | Segment or Element | Descripion | ID | min. <br> Max. | Usage Req. | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | $\begin{gathered} \text { 5010A1 } \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { a999/ } \\ 277 c \mathrm{~A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.124.20108A...301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK203 =6:"Invalid Character in Data | $2010 B A . N 301$ must contain at least one non- space character. | $2010 B A . N 301$ must contain at teast one non- space character. |  |
| x222.124.20108A..301.030 | N301 |  |  |  |  |  |  |  | 999 | E | \|K403 5 : "Data Element Too Long" | $20108 A$. . 301 must be $1-55$ characters. | $22108 A$. 301 must be $1-55$ characters. |  |
| ×222.124.20108A...301.040 | N301 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7 Acknowledgement/Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street Address" Elc:ll. "Subscriber" |  |  |  |
| ×222.124.20108A...301.050 | N301 |  |  |  |  |  |  |  | 999 | R |  |  | 2010 A. .NOOI must be populated with |  |
| X222.124.2010BA..n301.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l\|} \hline \text { X222.124.2010BA.N302.010 } \\ \text { Edit Deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.124.20108A..330.020 | N302 | Subscriber Address Line | ${ }_{\text {AN }}$ | ${ }^{1.55}$ | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |  |  |
| х222.124.20108A...302.030 | N302 |  |  |  |  |  |  |  | ${ }^{999}$ | E | \|K403 = 5: "Data Element Too Long" | 20108 A. 3 302 must be 1-55 characters. | 20108 A . 3302 must be 1 - 55 characters. |  |
| ×222.124.20108A...302.040 | N302 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ |  |  |  |  |
| х222.124.20108A...302.050 | N302 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N302 must be populated with accepted AN characters. | 2010BA.N302 must be populated with accepted AN characters. |  |
| X222.124.2010BA.N302.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.125.2010BA.N4.010 <br> Edit Deactivated <br> X222.225. <br> Editit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222A1.017.2010BA.N4.005 | N4 | $\begin{gathered} \text { SUBSCRIBER } \\ \text { CITY/STATEIIIP CODE } \end{gathered}$ |  | 1 | s | 2010BA |  |  | 999 | ${ }^{\text {R }}$ | IK304 = I6: "Implementation Dependent Segment Missing" | 2010BA.N4 must be present when 2000B.SBR02 is " 18 ". | 2010BA.N4 must be present when 2000B.SBR02 is " 18 ". |  |
| X222A1.017.2010BA.N4.010 |  |  |  |  |  |  |  |  | 999 | R | 1 K304 $=5$ " " Segment Exceeds Maximum Use" | Only one iteration of 2010BA.N4 is allowed. | Only one iteration of 2010BA.N4 is allowed. |  |
| х222.125.20108A..4401.010 | N401 | Subscriber Ciy Name | ${ }^{\text {AN }}$ | 2.30 | R |  |  |  | 999 | R | (kisu3 1. "Required Data Element | 20108A. . 401 must be present. | 20108A.N401 must be present. |  |
| ×222.125.20108A..N401.020 | N401 |  |  |  |  |  |  |  | 999 | R |  |  | $2010 B A$. N4011 must contain at teast two non- space charactes. |  |
| ×222.125.20108A..N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 20108A.N401 must be 2 -30 characters. | 20108A.N401 must be $2-30$ characters. |  |
| ×222.125.20108A...401.040 | N401 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 "Acknowle information " <br> CSC 512: "Length invalid for receiver's application system CSC 502: "Entity's City" EIC: IL "Subscriber" |  |  |  |
| х222.125.20108A.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R |  |  | 20108A.NOOI must be populated with |  |
| X222.125.2010BA.N401.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.125.20108A..N402.010 | N402 | Subscriber State Code | 10 | 2.2 | s |  |  |  | 999 | R | IK403 $=2$ : "Conditional Required Data Element Missing" | If 2010BA.N404 is not present, 2010BA.N402 must be present. | If 2010BA.N404 is not present, 2010BA.N402 must be present. |  |
| X222.125.2010BA.N402.020 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.125.20108A...402.030 | N402 |  |  |  |  |  |  |  | 277 | c |  CSC 501 " "Enitys Statelprovince" EIC: 1 ll "Subscriber" $\qquad$ | 2010BA.N402 must be a valid state or province code. | 2010BA.N402 must be a valid state or province code. | Valid State Code reference must be available for this edit. |
| х222.125.20108A..N403.010 | N403 | Subscriber Postal Zone or ZIP Code | 10 | 3 3-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | \|t 20108BA.N404 is not present. 2010BA.N403 must be present. | If 2010BA.N404 is not present, 2010BA.N403 must be present, |  |
| ×222.125.20108A...403.020 | N403 |  |  |  |  |  |  |  | 277 | c | Cscc A7: Acknowledgement/Rejected for Invalid information..." CSC 500: "Entity's Postal/Zip Code" EIC: IL."Su EIC: IL "Subscriber" | 2010BA.N403 must be a valid postal/zip Code when N404 equals US or blank | 2010BA.N403 must be a valid postal/zip Code when N404 equals US or blank | Valid Zip Code reference must be available for this edit. |


| Edit Reference | Segment or Element | Description | 10 | $\underset{\text { Min. }}{\substack{\text { Min. } \\ \text { Max. }}}$ | Usage Req. | Loop | $\underset{\text { Repeat }}{\substack{\text { Loop }}}$ | 5010A1 values |  | $\begin{array}{\|c} \text { Acceptrei } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\underset{\substack{\text { Proposed 501001 Edits } \\ \text { Part }}}{ }$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.125.20108A.N403.030Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.125.20108A..N04.010 | N404 | Country Code | 10 | 2.3 | s |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information... CSC 680: "Entity's Country EIC: IL "Subscriber" | 2010BA. N404 must be a valid 2 character Country Code. | 20108A.N404 must be a valid 2 character Country Code. | Valid alpha-2 Country Code reference must be available for this edit. (from Part 1 of ISO 3166) |
| X222.125.20108A...405.010 | N405 | Location Qualfier | 10 | 1-2 | nu |  |  |  | 999 | E |  | Must not te present. | Must not be present. |  |
| x222.125.20108A...406.010 | N406 | Location Identifier | an | 1.30 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.125.20108A...407.010 | N407 | Countr Subdivision Code | 10 | ${ }^{1.3}$ | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid <br> Acknowled <br> Information... <br> CSC 695: "Entity's Country Subdivision <br> Code <br> EIC: IL "Subscriber | 2010BA.N407 must be a valid Country Subdivision Code. | 2010BA.N407 must be a valid Country Subdivision Code. | Valid Country Subdivision Code reference must be available for this edit. (from Part 2 of ISO 3166) |
| x222.127.2010BA.DMG. 010 | DMG | $\underset{\substack{\text { SUBSCRIERR DEMOGRAPHIC } \\ \text { INFORMATION }}}{ }$ |  | 1 | s | 2010BA |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | 2010BA.DMG must te present. | 2010BA.DMG must be present. |  |
| x222.127.20108A..dMG.020 | DMG |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.DMG is allowed. | Only one iteration of 2010BA.DMG is allowed. |  |
| X222.127.20108A.DMG01.010 | DMG01 | Date Time Period Format $\begin{gathered}\text { Oualifer }\end{gathered}$ | 10 | ${ }^{2.3}$ | R |  |  | D8 | 999 | R |  | 20108A.OMG01 must be present. | 20108A.OMG01 must be present. |  |
| $\times 222.127 .20108$ A.DM 601.020 | DM601 |  |  |  |  |  |  |  | 999 | R | 1K403 -7: "Invalid Code Value" | 20108A.DMG01 must be "D8". | 20108A.DMG01 must be "D8". |  |
| X222.127.20108A.DMG02.010 | DMG02 | Subscriber Birth Date | AN | ${ }^{1-35}$ | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 20108A.OMG02 must be present. | $2010 B A . D M G 02$ must be present. |  |
| X222.127.20108A.OMG02.020 | 602 |  |  |  |  |  |  |  | 999 | R | \|K403 =8: "Invaid Date" | 2010BA.DMG02 must be a valid date in format CCYYMMDD | 2010BA.DMG02 must be a valid date in format CCYYMMDD |  |
| ×222.127.20108A.DMG02.030 | DMG02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid Information... CSC 510: "Future date" CSC 158: "Entity's date of birth" EIC: IL "Subscriber" | 2010BA.DMG02 must not be a future date. | $20108 A . D M G 02$ must not be a future date. | 06/04: Companion Guide Note needed. |
| х222.127.20108A.DMG03.010 | ом603 | Subscriber Gender Code | 10 | 1-1 | R |  |  | F, M, U | 999 | R | IK403 = 1: "Required Data Element Missing" | 20108A.DMG03 must be present. | 20108A.OMG03 must be present. |  |
| $\times 222.127 .20108 \mathrm{BADMG03.020}$ | DM603 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | $2010 B A . D M G 03$ must be valid values. | 2010BA.DMG03 must be valid values. |  |
| х222.127.20108A.DMG04.010 | DM604 | Martal Staus Code | 10 | 1-1 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.127.2010BA.DMG04.020 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.127.20108A.DMG05.010 | DmG05 | Race or Ettricity Code | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.127.20108A.DMG06.010 | DMG06 | Citizenship Staus Code | 10 | 1-2 | NIU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.127.20108A.DMG07.010 | DM607 | County Code | 10 | 2.3 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.127.20108A.DMG08.010 | dм608 | Basis of Verification Code | 10 | 1-2 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.12.7.20108A.OMG09.010 | DMGO9 | Quantily | R | 1-15 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.12.7.20108A.DMG10.010 | DMG10 | Code List Quaifier Code | 10 | 1-3 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.127.20108A.DMG11.010 | DMG11 | Industry Code | AN | 1.30 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.129.2010BA.REF.010 | REF | $\underset{\substack{\text { SUBSCRIBER SECONDARY } \\ \text { IDENTIFICATION }}}{\text { STM }}$ |  | 1 | s | 2010BA |  |  | 277 | T | Cscc A7: <br> "Acknowledgement/Rejected for Invalid Information... CSC 732: "Information submitted inconsistent with billing guidelines. CSC 560: "Entity's Additional/Secondary Identifier." EIC: HK "Subscriber" | 2010BA.REF with REF01 = "SY" must not be present. | 2010BA.REF with REF01 = "SY" must not be present. | Medicare doesn't support this segment. Companion Guide Note needed |
| X222.130.2010BA.REF.010 | REF | PROPERTY AND CASUALTY CLAIM NUMBER |  | 1 | s | 2010BA |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.REF with REF01 = "Y4" is allowed. | Only one iteration of 2010BA.REF with REF01 = "Y4" is allowed. | Pass through, syntax only. |
| X222.130.2010BA.REF01.010 | ReFor | Referencel Identification Qualifier | 10 | 2.3 | R |  |  | Y4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.REF01 must be present. | 2010BA.REF01 must be present. |  |
| X222.130.20108A.REFF0.1.220 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 20108A.REF01 must be 'Y4". | 20108 A . EEF01 must be 'Y4". |  |
| X222.130.20108A.REFFO2.010 | REFO2 | Property Casualy Claim Number | ${ }^{\text {an }}$ | 1.50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element | $20108 A . R$ RFO2 must be present. | 2010BA.REFO2 must be present. |  |
| X222.130.20108A.REFO2.020 | ReFoz |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" El |  | 2010AA.REFO2 must contain at leas tone |  |
| X222.130.20108A.REFO2.030 | REF02 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2010BA.REFO2 must be 1-50 characters. | 2010BA.REFO2 must be 1-50 characters. |  |


| Edit Reference | $\begin{aligned} & \text { Segment or } \\ & \text { Element } \end{aligned}$ | Description | 10 | Min <br> max. | $\begin{array}{\|l\|l} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { Th11 } \\ \substack{9997 \\ 277 c a} \end{gathered}$ | $\begin{array}{\|l\|l\|} \text { Acceptree } \\ \text { eet } \end{array}$ | Disposition / Error Code | Proposed 5010A1 Edits Part B | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.130.2010BA.REF02.040 | REFO2 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information.... <br> CSC 512: "Length invalid for receiver's application system" CSC 629: "Property Casualty Claim |  |  |  |
| X222.130.20108A.REF02.050 | REFO2 |  |  |  |  |  |  |  | 999 | R |  | $2010 \mathrm{~A} . \mathrm{REFO2}$ must be populated with accented AN characters. | 2010 A. $R$ EFFO2 must be populated with accented $A$ N characters. |  |
| X222.130.2010BA.REF02.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.130.20108A.REFFo3.010 | ReFo3 | Desscripion | AN | 1-80 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| ×222.130.20108A.REFF4.010 | REFO4 | REFERENCE IDENTIFIER |  |  | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.131.2010BA.PER.010 | PER | PROPERTY AND CASUALTY SUBSCRIBER CONTACT INFORMATION |  | 1 | s | 2010BA |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.PER is allowed. | Only one iteration of 2010BA.PER is allowed. | Pass trough, syntax only. |
| X222.131.20108A.PER01.010 | PER01 | Contact Function Code | ID | 2-2 | R |  |  | ${ }^{1 c}$ | 999 | R | IK403 -7: "Invalid Code Value" | $20108 \mathrm{~A} . \mathrm{PER}$ R01 must be "IC". | 20108 A. PERR01 must be "IC". |  |
| X222.131.20108A.PER02.010 | PERO2 | Informaion Contact Name | an | 1.60 | s |  |  |  | 999 | E | 1K403 5 5: "Data Element Too Long" | $2010 B A . P E R O 2$ must be 1-60 characters. | 20108A.PERO2 must be 1-60 characters. |  |
| X222.131.20108A.PER02.020 | PER02 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> "Acknowledgement/Rejected for Invalid information application system" CSC 561: "Entity's Contact Name" EIC: IL "Subscriber" |  |  |  |
| X222.131.20108A.PER02.030 | PER02 |  |  |  |  |  |  |  | 999 | R |  | $2010 B A . P$ RRO2 must be populated with accented $A$ N characters. | $2010 \mathrm{BA} \cdot \mathrm{PERO2}$ must be populated with accented $A \mathrm{~N}$ characters. |  |
| X222.131.2010BA.PER02.040 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.131.20108A.PERO3.010 | PERO3 | Communication Number Qualifier | ${ }^{10}$ | 2-2 | R |  |  | TE | 999 | R | $\left.\right\|_{\text {Missing" }} ^{\text {Kin }}$ | $20108 \mathrm{~A} . \mathrm{PERO3}$ must be present. | 20108A.PER03 must be present. |  |
| $\times 222.131 .20108 \mathrm{~A} . \mathrm{P}$ RRO30.020 | PERO3 |  |  |  |  |  |  |  | 999 | R | 1 1403 $=7$ : "Invalid Code Value" | 20108A.PER03 must be "TE". | 20108A.PERO3 must be "TE". |  |
| $\times$ X222.131.20108A.PER04.010 | PERO4 | Communication Number | AN | ${ }^{1-256}$ | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.PER04 must contain at least one non-space character. |  |  |
| X222.131.20108A.PERO4.020 | PERO4 |  |  |  |  |  |  |  | 999 | R | K403 1 : " Required Dotat Element Missing" | 2010BA.PERO4 must be present. | 2010BA.PERO4 must be present. |  |
| X222.131.2010BA.PER04.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.131.2010BA.PER04.040 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.131.2010BA.PER04.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.131.20108A.PER04.060 | PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" $\qquad$ | 2010BA.PER04 must be populated with accepted AN characters. | 2010BA.PER04 must be populated with accepted AN characters. |  |
| X222.131.20108A.PER04.070 | PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 127: "Entity's Communication Number" <br> EIC: IL "Subscriber" | 2010BA.PER04 must be populated with exactly ten numeric characters. | 2010BA.PER04 must be populated with exactly ten numeric characters |  |
| x222.131.2010BA.PERR4.070Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.131.20108A.PER05.010 | PER05 | Communication Number Ouafifier | 10 | 2-2 | s |  |  | Ex | 999 | R | 1K403 = 7: "nvalid Code Value" | 20108A.PERO5 must be "EX". | 20108 A.PER05 must be valid values. |  |
| X222.131.20108A.PER06.010 | Pero6 | Communication Number | AN | ${ }^{1-256}$ | s |  |  |  | 999 | R |  | 20108A.PERO6 must onltain a teast one | 20108A.PER06 must oontain at least one |  |
| X222.131.20108A.PER06.020 | Pero6 |  |  |  |  |  |  |  | 999 | R |  |  | tit |  |


| Edit Reference | Segment or Element | Description | 10 | $\underset{\text { min. }}{\substack{\text { min. }}}$ | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repereat } \end{gathered}$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { cog } \\ \text { 277CA } \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.131.2010BA.PER06.030Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.131.20108A.PER06.040 | PER06 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 20108A.PER06 must be 1-256 characters. | 20108A.PER06 must be 1-256 characters. |  |
| ×222.131.20108A.PER06.050 | PER06 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Communication Number" Number |  |  |  |
| X222.131.20108A.PER06.060 | PER06 |  |  |  |  |  |  |  | 999 | R |  | 2010 A.PERO6 must be populated with accented $A N$ characters. |  |  |
| X222.131.2010BA.PER06.070 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.131.20108A.PER07.010 | PER07 | Communication Number Qualifier | 10 | 2-2 | Nu |  |  |  | 99 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.131.20108A.PRR08.010 | Perob | Communication Number | an | $1-256$ | vu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.131.20108A.PER09.010 | PER09 | Contact Inquiry Reference | AN | ${ }^{1.20}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.133.20108B.NN1.010 | NM1 | Payer name |  | 1 | R | 20108B | 1 |  | ${ }^{999}$ | R | IK304 = 3: "Required Segment Missing" | 20108B.NM1 must be present. | 20108B.NM1 must be present. |  |
| X222.133.20108B.NM1.020 | NM1 |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2010BB.NM1 is allowed. | Only one iteration of 2010BB.NM1 is allowed. |  |
| х222.133.20108B. NM101.010 | nм101 | Enity Identifer Code | 10 | 2-3 | R |  |  | PR | 999 | R | IK403 = 1: "Required Data Element Missing" | $20108 B$. NM101 must be present. | $20108 B$. NM101 must be present. |  |
| X222.133.20108B.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 20108B.NM101 must be "PR". | 20108B.NM101 must be "PR". |  |
| х222.133.20108B. NM102.010 | NM102 | Entity Type Qualfier | 10 | ${ }^{1-1}$ | R |  |  | 2 | 999 | R |  | $20108 B$. NM102 must be present. | $20108 B$. NM102 must be present. |  |
| X222.133.20108B.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 201088. . NM102 must be " 2 ". | 201088. NM102 must be 2 " 2 . |  |
| х222.133.201088. мn103.010 | NM103 | Payer Name | AN | ${ }^{1.60}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 20108B.NM103 must be present. | 20108B.NM103 must be present. |  |
| х222.133.20108в. мм103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM103 must contain at least one non-space character. | 20108B. NMIO3 must oontain at least one non-space character. |  |
| х222.133.20108в. мм103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | 20108 B. .NM103 must be 1-60 characters. | 20108B. NM103 must be 1 - 60 characters. |  |
| х222.133.20108B. .nn103.040 | nM103 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" EIC: PR "Payer" |  |  |  |
| х222.133.201088. NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010 BB. NM103 must be populated with accented $A \mathrm{~N}$ characters. | 2010BB.NM103 must be populated with accepted AN characters. |  |
| X222.133.2010BB.NM103.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.133.20108в. мм104.010 | NM104 | Name First | AN | 1.35 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.133.20108в. мм105.010 | NM105 | Name Middle | an | 1.25 | nu |  |  |  | 999 | E | (12403 =10: "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.133.201088. мn106.010 | NM106 | Name Prefix | AN | ${ }^{1.10}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be pesesent. | Must not be present. |  |
| х222.133.20108в. мм107.010 | NM107 | Name Sufix | AN | ${ }^{1.10}$ | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.133.201088. .n 108.010 | NM108 | ${ }^{\text {Identifation Code Qualifer }}$ | 1 D | ${ }^{1-2}$ | R |  |  | Pl, xV | 999 | R |  | $20108 B . N M 108$ must be present. | 20108B.NM108 must be present. |  |
| X222.133.20108B.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 20108 B. NM108 must be "Pr'. | 20108 B. NM108 must be "Pr". |  |
| х222.133.20108в. мм109.010 | NM109 | Payer Identifier | AN | 2.80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | $20108 B$. NM109 must be present. | $20108 B$. NM109 must be present. |  |
| х222.133.20108в. мм109.020 | NM109 |  |  |  |  |  |  |  | 99 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM109 must contain at least two non-space characters. |  |  |
| х222.133.20108B. мM109.025 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> Acknowledgement/Rejected for Invalid <br> Information..." <br> CSC 21: "Missing or Invalid information <br> EIC. "PR" "Entity ID Number" <br> EIC: "PR" Payer <br> CSC 153: "Entity ID Number" <br> EIC: 40 "Receiver" | 20108B. NM109 must be the same value as 1000B. NM109. 1000B.NM109. | 2010BB.NM109 must be the same value as 10008.NM109. |  |
| х222.133.20108B. мм109.030 | nм109 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 20108B.NM109 must be 2-80 characters. | 20108B.NM109 must be 2-80 characters. |  |


| Edit Reference | Segment or Element | Description | 10 | $\min _{\text {Max. }}$ | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TAAI } \\ \text { a999/ } \\ 277 C A \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | Proposed 5010A1 Edits Part B | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.133.20108B.Nn109.040 | nM109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement/Rejected for Invalid Information. CSC 512: "Length invalid for receiver's application system" CSC 153: "Entity ID Number" ElC: PR "Paver" |  |  |  |
| х222.133.20108B.Nм1109.050 | NM109 |  |  |  |  |  |  |  | 999 | R | KKa03 = 6: "Invalid Character in Data Element" | 2010 BE . NM109 must be populated with | 2010 B. NM109 must be populated with acceneded AN characters. |  |
| X222.133.2010BB.NM109.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.133.201088.лм110.010 | NM110 | Enity Relaioioship Code | 10 | 2.2 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.133.201088.лм111.010 | NM111 | Enity Identifier Code | 10 | ${ }^{2.3}$ | nu |  |  |  | 999 | E | \|K403 = 110.7 "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.133.20108B.лм112.010 | NM112 | Name Last or organization Name | AN | ${ }^{1.60}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.135.201088. л3.010 | N3 | payer adoress |  | 1 | s | 20108B |  |  | 999 | R | $\begin{aligned} & \text { IK304 =5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of $20108 B$. N is allowed. | Only one iteration of $20108 B . N 3$ is allowed. |  |
| х222.135.201088..N301.010 | N301 | Payer Adrress Line | an | ${ }^{1.55}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 20108B. N301 must be pesesent. | 20108B. . 3011 must be present. |  |
| х222.135.201088...301.1220 | N301 |  |  |  |  |  |  |  | 999 | R | K $\mathrm{K} 403=6$ : "IIvalid Character in Data Element" | 2010 BB . 3 301 must contain at least one non- space character. | 2010BB.N301 must contain at least one non- space character. |  |
| х222.135.201088.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | 1K403 =5: "Data Element Too Long" | 201088. . 301 must be 1 - 55 characters. | 201088. . 301 must be 1 - 55 characters. |  |
| х222.135.20108B.N301.040 | N301 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> "Acknowledgement/Rejected for Invalid nformation. <br> 512: "Length invalid for receiver's application system" CSC 503. "Entity's Street Address" EIC: PR "Paver" |  |  |  |
| х222.135.201088..^301.050 | N301 |  |  |  |  |  |  |  | 999 | R |  | $20108 B$.N301 must be populated with accepeled $A \mathrm{~A}$ charactes. | 2010 Be. .n301 must be poppulated with accepted $A \mathrm{~N}$ charactes. |  |
| $\times 222.135 .20108 B$. .n31.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.135.201008B..N302.010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.135.201088. .3302.020 | N302 | Payer Address Line | AN | ${ }^{1.55}$ | s |  |  |  | ${ }^{999}$ | R | IK403 = 6: "Invalid Character in Data Element" |  | $\left.\right\|_{\text {space character. }} ^{2010 \text {. }}$. |  |
|  | N302 |  |  |  |  |  |  |  | ${ }^{999}$ | E | \|K403 = 5: "Data Element Too Long" | 201088. . 302 must be 1 - 55 characters. | 20108B. 3302 must be 1 - 55 characters. |  |
| х222.135.201088. .330.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information. <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 503: "Entity's Street Address" EIC: PR "Paver" |  |  |  |
| х222.135.201088.N302.050 | N302 |  |  |  |  |  |  |  | 999 | R |  |  | ${ }_{\text {accented } A N}^{2010 \text { characteres. }}$ |  |
| X222.135.2010BB.N302.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | N4 | PAYER CITYISTATEZIIP COOE |  | 1 | s | 20108B |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2010BB.N4 is allowed. | Only one iteration of 2010BB.N4 is allowed. |  |
| х222.136.20108B..N401.010 | N401 | Payer City Name | AN | 2.30 | R |  |  |  | 999 | R | (Missing: 1. Required Data Element | 20108B.N401 must be present. | 20108B.N401 must be pesenent. |  |
| x222.136.20108B.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | $2010 B 8$. N401 must contain at teast two non- soace characters. |  |  |
| X222.136.20108B..N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 201088. N401 must be 2 -30 characters. | 20108B. N401 must be 2 -30 characters. |  |
| X222.136.20108B. .N01.040 | N401 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement/Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" EIC. PR "Paver" |  |  |  |
| х222.136.20108B..N00.1.55 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010 BB. NA01 must be popplated with accepeled $A \mathrm{~N}$ characters. | 2010 BB. N401 must be poppulated with accented AN characters. |  |
| $\underset{\substack{\text { x222.136.2010BB. } . \operatorname{N401.060} \\ \text { Edit Deactivaed }}}{ }$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | Min. Max. | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> values | $\begin{gathered} \text { TAAI } \\ \text { g999 } \\ 277 C A \end{gathered}$ | $\begin{gathered} \text { Acceptrej } \\ \text { ect } \end{gathered}$ | Disposition /Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\times \times 222.136 .20108 B$. 4002.010 | N402 | Payer State Code | 10 | 2.2 | s |  |  |  | ${ }^{999}$ | R | 1 IK403 $=2:$ "Conditional Required Data <br> Element Missing" | If 2010BB. N404 is not present, 20108B. 402 must be present. | If 2010BB.N404 is not present, 2010BB.N402 must be present. |  |
| x222.136.20108B. .400.020 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid information..." <br> . <br> EIC: PR "Payer" | 20108B. N402 must be a valid State Code. | 20108B. N402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| х222.136.20108B. N 03.010 | N403 | Payer Posta Zone or zIP Code | $1{ }^{10}$ | 3 3-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" |  | If 2010BB.N404 is not present, 2010BB.N403 must be present. |  |
| x222.136.20108B..N403.020 | N403 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement Rejected for Invalid nation... CSC 500: "Entity's PostalZZip Code" EIC: PR "Payer" | 20108B.N403 must be a vaid Zip Code. | 20108B. N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| х222.136.20108B..N404.010 | N404 | Payer Country Code | 10 | 2.3 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesesent. |  |
| х222.136.20108B..N405.010 | N405 | Location Qualifer | 10 | 1-2 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.136.20108B..N406.010 | N406 | Location Identifier | an | ${ }^{1.30}$ | vu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.136.20108B..N407.005 | N407 | County Subdivision Code | 10 | 1-3 | s |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.136.2010BB.N407.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.138.2010BB.REF.010 | REF | PAYER SECONDARY IDENTIFICATION |  | 3 | s | 20108B |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines. Addition. Entity's EIC: PR "Payer" | Non-VA claims: 2010BB.REF with REF01 ="2U", "El", "FY" or "NF" must not be present. <br> VA clains: "EY: 2010BB.REF with REF01 = <br> El", "FY" or "NF" must not be present. | Non-VA claims: 2010BB.REF with REF01 = "2U", "EI", "FY" or "NF" must not be present . EI", "FY" or "NF" must not be present. |  |
| X222.138.2010BB.REF. 015 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.140.20108B.REF.010 | REF | BILLING PRovider SECONDARY IDENTIFICATION |  | 2 | s | 20108B |  |  | 999 | R | 1K304 = 2: "Unexpected Segment" | 2010BB.REF with REF01 = "G2" must be present when 2010AA.NM109 is not present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims, 01/20: Companion Guide Note needed. |
| X222.140.20108B.REF.020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2010BB.REF with REF01 = "G2" or "LU" are allowed. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| X222.140.2010BB.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 20108B.REF must not be present. | 20108B.REF must not be present. | Everyone but Trailblazer or JH (Texas; as appropriate for current MAC contract for VA MRA Project claims.) |
| х222.140.20108B.REFF1.010 | ReFou | Reference Identification Qualifier | 10 | $2 \cdot 3$ | R |  |  | 62, LU | 999 | R | IK403=1: "Required Data Element Missing" | 20108B.REF01 must be present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims) 01/20: Companion Guide Note needed. |
| x222.140.20108B.REFF0.020 | ReFou |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ \% ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $20108 B$. REF01 must be valid values. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims) 01/20: Companion Guide Note needed. |
| x222.140.20108B.REFFO2.010 | ReFo2 | Payer Additional ldentifier | an | 1-50 | R |  |  |  | 999 | R | 1 K403 $=1:$ : "Required Data Element Misssing" | $20108 B$. REFO2 must be present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims) 01/20: Companion Guide Note needed |
| х222.140.20108B.REFFO.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 20108B.REFF22 must contain at least one. none space character. |  | Traillazer or JH (Texas) only, as appropitiate for carrent MAC contract for VA MR AP Project claims). o1/20: Companion Guide Note needed. |
| X222.140.20108B.REFFO.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BB.REFO2 must be 1-50 characters. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims) 01/20: Companion Guide Note needed. |
| ×222.140.20108B.REFFO2.040 | REFO2 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 560: "Entity's Additiona//Secondary Identifier" |  |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims) 01/20: Companion Guide Note needed. |



| Edit Reference | Segment or Element | Description | 10 | Min. Max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | $\begin{aligned} & \text { 5010A1 } 1 \\ & \text { Yolac } \end{aligned}$ Values | $\begin{gathered} \mathrm{TAAl} \\ 9991 \\ 27 \mathrm{CA} \end{gathered}$ | ${ }_{\text {Acceptrej }}^{\text {ect }}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.152.2010CA.DMG.010 | dmg | PATIENT DEMOGRAPHIC INFORMATION |  | 1 | R | 2010CA |  |  | 277 | T | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." CSC 732: "Information submitted guidelines." <br> CSC 157:"Entity's Gender." CSC 158: "Entity's date of birth." EIC: QC "Patient | Segment must not te present. | Segment must not be present. | O1/20: Companion Guide Note needed. |
| x222.154.2010CA.REF. 010 | REF | PROPERTY AND CASUALTY CLAIM NUMBER |  | 1 | s | 2010CA |  |  | 277 | T |  | 2010CA.REF must not be present. | 2010CA.REF must not be present. | O120: Companion Guide Note needed. |
| X222A1.019.2010CA.REF.010 | REF | PROPERTY AND CASUALTY PATIENT IDENTIFIER |  | 1 | s | 2010CA |  |  | 277 | T | Cscc A7: <br> AcknowledgementRejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CsC 560: "Entity's Adational/Secondary Identifier." EIC: EIC: QC "Patient" | 2010CA.REF must not be present. | 2010CA.REF must not be present. | New errat segment |
| X222.155.2010CA.PER.010 | PER | PROPERTY AND CASUALTY <br> PATIENT CONTACT INFORMATION |  | 1 | s | 2010CA |  |  | 277 | T | CsCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." $\qquad$ <br> EIC: QC "Patient" | Segment must not be present. | Segment must not be present. | O1/20: Companion Guide Note needed. |
| X222.157.2300.CLM Loop.010 | CLM Loop | CLAMM INFORMATION Loop |  |  |  | 2300 | 100 |  | 999 | R | $\begin{array}{\|l\|l\|} \hline \text { \|r304=4: "Loop Occurs over } \\ \text { Maximum Times. } \end{array}$ | Only one 00 iterations of the 2300 loop are allowed. | Only one00 iterations of the $\mathbf{2 3 0 0}$ loop are allowed. |  |
| х222.157.2300.CLM. 010 | CLM | CLAIM Information |  | 1 | R | 2300 | 1 |  | 999 | R | ${ }^{1 K 204=3: ~ " R e q u i r e d ~ S e g m e n t ~}$ | ${ }^{2300 . C L M ~ m u s t ~ b e ~ p r e s e n t . ~}$ | ${ }^{2300 . C L M ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| х222.157.2300.CLM. 220 | cLM |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CLM is allowed. | Only one iteration of 2300.CLM is allowed. |  |
| X222.157.2300.CLM01.010 | cım01 | Patient Control Number | AN | ${ }^{1.38}$ | R |  |  |  | 999 | R | \|K403 =1: Required Data Element | 2300.CLM01 must be present. | 2300.CLM01 must be present. |  |
| X222.157.2300.CLм01.1.20 | CLm01 |  |  |  |  |  |  |  | 999 | R |  | ${ }^{2300 . C L M O 1 ~ m u s t ~ c o n t a i a ~ a ~ a t ~ l e a s t ~ o n e ~ n o n-~}$ | 2300. CLMO1 must contain at least one non- space character |  |
| х222.157.2300.CLмо1.030 | cımo1 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | $2300 . C L M 01$ must be $1-38$ characters. | $23300 . C$ LM01 must be 1 - 38 characters. | Companion Guide Note Needed - only positions 1 20 will be stored/returned |
| х222.157.2300.CLM01.040 | clmo1 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| $\times 222.157 .2300 . C L$ мо1.050 | cım01 |  |  |  |  |  |  |  | 999 | R |  | accencted $A N$ n characteres. |  |  |
| X222.157.2300.CLM01.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.157.2300.CLMo2.010 | CLmo2 | Total Claim Charge Amount | R | 1-18 | R |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 1: "Required Data Element } \\ & \text { Missing" } \end{aligned}$ | 2300.CLM02 must be present. | 2300.CLM02 must be present. |  |
| X222.157.2300.CLM02.020 | CLM02 |  |  |  |  |  |  |  | 999 | R |  | 2300.CLM02 must be numeic. | 2300.CLM02 must be numeric. |  |
| $\begin{aligned} & \text { X222.157.2300.CLM02.030 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.157.2300.CLMo2.040 | CLM02 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2300.CLM02 must be }>=0 \text { and }<= \\ & 99,999.99 \text {. } \end{aligned}$ | $\begin{aligned} & \text { 2300.CLM02 must be }>=0 \text { and }<= \\ & 99,999.99 \text {. } \end{aligned}$ | 11/25: Medicare specific limitation 01/20: Companion Guide Note needed |
| х222.157.2300.CLMO2.050 | CLM02 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |

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Professional Edits

| Edit Reference | Segment or Element | Description | 10 | $\underset{\substack{\text { Min. } \\ \text { Max. }}}{\text { a }}$ | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010101 values | $\begin{gathered} \text { TAII } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | $\begin{array}{\|c} \text { Acceptrei } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\underset{\text { Prat B }}{\text { Proposed 5010A1 Edits }}$ | $\underset{\substack{\text { Proposed 501001 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ×222.157.2300.CLMO2.060 | cım02 |  |  |  |  |  |  |  | 277 | T |  | 2300. CLMO2 is limited to 0,1 or 2 decimal positions. | 2300.CLM02 is limited to 0,1 or 2 decimal positions. |  |
| ×222.157.2300.CLMO2.070 | CLM02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid Information..." <br> Information. <br> CSC 178. "Submitted Charges" | 2300.CLMo2 must equal the sum of al 2400.SV102 amounts. | 2300.CLM02 must equal the sum of all 2400.SV102 amounts. |  |
| X222.157.2300.CLM02.080 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.157.2300.CLMO2.090 | CLM02 |  |  |  |  |  |  |  | 277 | c |  | 2300.CLM02 must equal the sum of all 2320 $\& 2430$ CAS amounts and the 2320 AMT02 (AMT01=D). | 2300.CLM02 must equal the sum of all 2320 (AMT01=D) |  |
| х222.157.2300.CLмо3.010 | CLM03 | Claim Filing Indicator Code | 10 | 1-2 | NU |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. | Must not be present. |  |
| X222.157.2300.CLM04.010 | CLM04 | ${ }_{\text {Non-Instituional Claim Type }}^{\text {Code }}$ | 10 | 1-2 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| $\begin{aligned} & \text { X222.157.2300.CLM05.010 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.157.2330.CLM05-1.010 | CLM05-1 | Faciliy Type Code | AN | 1-2 | R |  |  |  | 999 | R | ${ }^{\text {K4033 }} \mathbf{1 :}$ : Required Data Element Missing" | 2300.CLM05-1 must be present. | 2300.CLM05-1 must be present. |  |
| х222.157.2300.CLM05-1.020 | CLM05-1 |  |  |  |  |  |  |  | 277 | c | ment/Rejected for Invalid Information..." CSC 249: "Place of service" | 2300.CLM05-1 must be a valid POS code Code must be valid for the transaction set creation date (BHT04). | 2300.CLm05-1 must be a vaid POS code. | Valid Place of Service reference must be available for this edit. |
| X222.157.2330.CLLM05-2.010 | CLM05-2 | Faciliy Code Quaififer | 10 | 1-2 | R |  |  | в | 999 | R |  Missina" | 2300.CLMos-2 must be present. | 2300.CLM05-2 must be present. |  |
| X222.157.2300.CLM05-2.020 | CLM05-2 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7: "Ivalid Code Value" | $2300 . C$ M05-2 must be "B". | $2300 . C L M 05-2$ must be "B". |  |
| х2222.157.2300.CLM05-3.010 | CLм05-3 | Claim Frequency Code | 10 | 1-1 | R |  |  |  | 999 | R | ${ }^{1 K 4033}=1:$ : Required Data Element | 2300.CLM05-3 must be present. | 2300.CLM05-3 must be present. |  |
| X222.157.2300.CLM05-3.020 | CLM05-3 |  |  |  |  |  |  |  | 277 | c | ${ }^{\text {PAcknowledgementRejected for Invalid }}$ Information... | 2300.CLM05-3 must be "1". | 2300.CLM05-3 must be "1". | Medicare Part B only accepts original claims 01/20: Companion Guide Note needed. |
| X222.157.2300.CLM06.010 | CLm06 | Provider or Supplier Signature Indicator | 10 | 1-1 | R |  |  | N, Y | 999 | R | KK403 =1:"Required Data Element Missing" | 2300.CLM06 must be present. | ${ }^{2300 . C L M 06}$ must be present. |  |
| X222.157.2300.CLM06.020 | CLM06 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | $2300 . \mathrm{CL}$ M06 must be vaid values. | $2300 . C$ M06 must be vaid values. |  |
| X222.157.2300.CLM07.010 | CLm07 | Medicare Assignment Code | 10 | ${ }^{1-1}$ | R |  |  | A, B, C | 999 | R | IK403 = 1: "Required Data Element | 2300.CLM07 must be present. | $2300 . C$ LM07 must be present. |  |
| X222.157.2300.CLM07.020 | CLM07 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7."Invalid Code Value" | $2300 . C$ LM07 must be valid values. | $2300 . C$ LM07 must be valid values. |  |
| X222.157.2300.CLM08.010 | cLm08 | Benefits Assignment Certification <br> Indicator | 10 | ${ }^{1-1}$ | R |  |  | N, w, Y | 999 | R | \|K403 =1: "Required Data Element Missing" | 2300.CLM08 must be present. | 2300.CLM08 must be present. |  |
| X222.157.2300.CLM08.020 | CLM08 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7."Invid Code Value" | $2300 . C$ LM08 must be valid values. | $2300 . \mathrm{CL}$ M08 must be valid values. |  |
| х222.157.2300.CLмо9.010 | CLM09 | Release of thormation Code | $1{ }^{1}$ | 1-1 | R |  |  | I, Y | 999 | R |  | 2300.CLM09 must be present. | ${ }^{2300 . C L M 099 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| X222.157.2300.CLM09.020 | CLM09 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | $2300 . C L$ 099 must be valid values. | $2300 . \mathrm{CLM09}$ must be vaid values. |  |
| X222.157.2300.CLM10.010 | CLm10 | Patient Signature Source Code | 10 | 1-1 | s |  |  | P | 999 | R | \|1403 $\mathbf{~ 7 ~} 7$ : "Invalid Code Value" | 2300.CLM10 must be "P". | 2300.CLM10 must be "P". |  |
| X222.157.2300.CLM11.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.157.2300.CLM11-1.010 | CLM11-1 | Related Causes Code | 10 | 2.3 | R |  |  |  | 999 | R | \|K403 = 2: "Conditional Required Data Element Missing" | If 2300. DTP with DTP01 $=439$ is present, then 2300. CLM11 must be present. | If 2300. DTP with DTP01 $=439$ is present, then 2300. CLM11 must be present. |  |
| $\times \times 222.157 .2300 . C$ LM11-1.020 | CLM11-1 | Related Causes Code | 10 | 2.3 | R |  |  | ${ }^{\text {AA, EM, OA }}$ | 999 | R | 1K403 $=7$ 7. "Invalid Code Value" | 2300.CLM11-1 must be valid values. | $2300 . C L$ L11-1-1 must be valid values. |  |
| X222.157.2300.CLM11-2.010 | CLM11-2 | Related Causes Code | $1{ }^{1}$ | 2.3 | s |  |  |  | 999 | R |  | 2300.C.CM11-2 is present 2300.CLM11-1 must be resent. | 2300.CLM11-2 is present 2300.CLM11-1 must be present. |  |
| x222.157.2300.CLM11-2.020 | CLM11-2 |  |  |  |  |  |  | ${ }^{\text {AA, EM, OA }}$ | 999 | R | 1K403 $=7$ : "Invalid Code Value" | $2300 . C L M 11-2$ must be valid values. | 2300.CLM1-2 must be valid values. |  |
| X222.157.2300.CLIM11-3.010 | CLM11-3 | Related Causes Code | 10 | 2.3 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| $\times \times 222.157 .2300 . C L M 11-4.010$ | CLM11-4 | Auto Accident State or Province Code | $1{ }^{10}$ | 2-2 | s |  |  |  | 999 | R |  |  | It |  |
| X222.157.2300.CLM11-4.020 | CLM11-4 |  |  |  |  |  |  |  | 277 | c |  | It 2300.CLM11-4 mus be a valid State Code. | It 2300.CLM11-4 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| X222.157.2330.CLM11-5.010 | CLM11-5 | Country Code | 10 | 2.3 | s |  |  |  | 999 | R | $\begin{aligned} & \text { EC:13 = 2uscriber "Contional Required Data } \\ & \text { Klement Missing" } \\ & \text { Ela } \end{aligned}$ | If 2300.CLM11-1 or 2300. CLM11- 2 is "AA" and $2300 . \mathrm{CLM11-4}$ is not present, then | If 2300.CLM11-1 or 2300. CLM11-2 is "AA" and 2300. CLM11-4 is not present, then 2300.CLM11-5 must be present. |  |
| X222.157.2300.CLM11-5.020 | CLM11-5 |  |  |  |  |  |  |  | 277 | c |  | 2300.CLM11-5 must be a valid Country | 2300.CLM11-5 must be a valid Country code. | Valid Country Code reference must be available for this edit. |
| $\times 222.157 .2300 . C L M 12.010$ | CLM12 | Special Program Indicator | 10 | 2.3 | s |  |  | 02, 03, 05, 09 | 999 | R | 1 K403 $=7$ : "Invalid Code Value" | $2300 . C L M 12$ must be valid values. | $2300 . C$ LM12 must be valid values. |  |
| X222.157.2300.CLM13.010 | CLM13 | YesiNo Condition or Response Code | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.157.2300.CLM14.010 | CLM14 | Level of Serice Code | 10 | 1-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.157.2300.CLM15.010 | CLM15 | Yes/No Condition or Response <br> Code | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.157.2300.CLM16.010 | CLM16 | Paricication Agreement | 10 | ${ }^{1-1}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |

Professional Edits

| Edit Reference | Segment or Element | Description | ID | Min <br> max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010101 values | $\begin{gathered} \text { TAII } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | $\left\|\begin{array}{c} \text { Acceptreej } \\ \text { ect } \end{array}\right\|$ | Disposition / Error Code | $\underset{\text { Prat B }}{\text { Proposed 5010A1 Edits }}$ | $\underset{\text { CED }}{\text { Proposed 5010A1 Edits }}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.157.230.CLM17.010 | CLM17 | Claim Staus Code | 10 | ${ }^{1-2}$ | nu |  |  |  | 999 | E | 1 K403 $=10$, "Implementation "Not Used" Element Presente | Must not be present. | Must not be present. |  |
| X222.157.230.CLIM18.010 | CLM18 | YesNo Condition or Response Code | $1{ }^{10}$ | ${ }^{1-1}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.157.230.CLIM19.010 | CLM19 | Claim Submission Reason Code | 10 | 2-2 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.157.230.CLIM20.010 | CLM20 | Delay Reason Code | 10 | 1-2 | s |  |  | $\begin{gathered} \hline 1,2,3,4,5,6,7,8, \\ 9,10.11,15 \\ \hline \end{gathered}$ | 999 | R |  | $2300 . C L$ LM20 must be valid values. | $2300 . C L$ LM20 must be valid values. |  |
| ×222.164.2300.0TP. 010 | गTP | $\begin{aligned} & \text { DATE - ONSET OF CURRENT } \\ & \text { ILLNESS OR SYMPTOM } \end{aligned}$ |  | 1 | s | 2300 |  |  | 999 | R | $\begin{array}{\|l} \begin{array}{l} \text { IK304 = 5: "Segment Exceeds } \\ \text { Maximum Use" } \end{array} \\ \hline \end{array}$ | Only one iteration of 2300.DTP with DTP01 = "431" is allowed. | Only one iteration of 2300.DTP with DTP01 = "431" is allowed. |  |
| X222.164.230.0.tP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | 431 | 999 | R | ${ }_{\text {Missinan }}^{1 K 20: " R e q u i r e d ~ D a t a ~ E l e m e n t ~}$ | 2300.0TP01 must be pesesent. | 2300.0TP01 must be present. |  |
| X222.164.2300.0TPP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 =7:"Invalid Code Value" | 2300.0 DP01 must be "431". | 2300.0TP01 must be "431". |  |
| X222.164.2300.0тP02.010 | DTP02 |  | 10 | ${ }^{2.3}$ | R |  |  | D8 | ${ }^{999}$ | R | K403 = 1: "Required Data Element Missing" | 2300.0 TP02 must be peresent. | 2300. TrP02 must be present. |  |
| X222.164.2300.0TPP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2300.0 TPO2 must be "D8". | 2300. DTPO2 must be "D8". |  |
| Х222.164.2300.0тР03.010 | DтP03 | ${ }^{\text {Onset of Current Illeses or Injury }}$ Date | ${ }^{\text {an }}$ | 1-35 | R |  |  | сСуүммDD | 999 | R | Ma03 1: "Required Data Element | 2300.DTP03 must be peresen. | 2300.0TP03 must be present. |  |
| X222.164.2300.0тP03.220 | DтP03 |  |  |  |  |  |  |  | 999 | R | 1 K4003 $=8$ : "Invalid Date" | $2300 . \mathrm{DTPO3}$ must be a valid date in ccryMMMO tormat. | $\begin{aligned} & \text { 2300.DTPO3 must be a valid date in } \\ & \text { ccryMMDD tormat. } \end{aligned}$ |  |
| х222.164.2300.0тP03.030 | DTP03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid formation..." CSC 397: "Date of onsetexacerbation of illness/condition" CSC 510: "Future date" | 2300.DTP03 must not be a future date. | 2330.0 DPP03 must not be a future date. |  |
| х222.165.2300.0TP. 010 | DTP | DATE - Intilal treatment |  | 1 | s | 2300 |  |  | 999 | R | $\begin{array}{\|l\|l\|} \substack{1 K 304=5: \text { " Segment Exceeds } \\ \text { Maximum Use" }} \end{array}$ | Only one iteration of 2300.DTP with DTP01 = "454" is allowed. |  |  |
| X222.165.2300.0тP01.010 | DTP01 | Date Time Qualfier | 10 | 3.3 | R |  |  | 454 | 999 | R | IK403 $=1$ : "Required Data Element Missing" | 2300.0 TP01 must be present. | 2300.0 TP01 must be pesent. |  |
| X222.165.230.0.0TP01.220 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|k403 =7: "Invalic Code Value" | 2300.0 PP01 must be "454". | 2300.DTP01 must be "454". |  |
| X222.165.2300.0TP02.010 | DTP02 | $\underset{\substack{\text { Date Time Peiiod Format } \\ \text { Oualifer }}}{\text { N. }}$ | 10 | ${ }^{2.3}$ | R |  |  | ${ }^{08}$ | 999 | R |  | 2300.0 TP02 must be present. | 2300. TrP02 must be peresent. |  |
| X222.165.2300.0TPP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2300.0 DTP02 must be "D8". | 2300. TPP02 must be "D8". |  |
| Х222.165.2300.0тР03.010 | DTP03 | Intital Treament Date | AN | 1.35 | R |  |  | ССуүммDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.0 TP03 must be present. | 2300.0 TP03 must be pesent. |  |
| X222.165.2300.0TP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | \|K403 = 8: "IIvaid Date" | $2300 . \mathrm{DTPO3}$ must be a valid date in cCryMMDD tormat | 2300. TTPO3 must be a valid date in cciryMMod tormat. |  |
| х222.165.2300.0тP03.030 | ${ }_{\text {dTP03 }}$ |  |  |  |  |  |  |  | 277 | c |  | 2300. TPO3 must not be a tuture date. | 2330.0 DTP03 must not be a future date. |  |
| х222.166.2300.0tP. 010 | DTP | date - date last seen |  | 1 | s | 2300 |  |  | 999 | R |  | Only one iteration of 2300.0TP with OTPO1 $=$ "304 is allowed. | Only one iteration of 2300.0TP with DTP01 $=304$ is is alowed. |  |
| X222.166.2300.0TP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | 304 | 999 | R |  | 2300.0 DTP01 must be present. | 2300.0 DTP01 must be present. |  |
| X222.166.2300.0TP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 =7:"Invalid Code Value" | 2300.0TP01 must be"304". | 2300.0 DP01 must be"304". |  |
| X222.166.2300.0тP02.010 | DTP02 | Date Time Period Format Qualifier | 1 D | ${ }^{2.3}$ | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.0 TP02 must be pesent. | $2300 . \mathrm{TTP02}$ must be peresent. |  |
| X222.166.2300.0TP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2300.0 DP02 must be "D8". | 2300. TPP02 must be "D8". |  |
| х222.166.2300.0тP03.010 | отро3 | Last Seen Date | AN | ${ }^{1.35}$ | R |  |  | ССууммDD | 999 | R | \|K403 1 : "Required Data Element Missing" | 2300.0 TP03 must be present. | 2300.0TP03 must be present. |  |
| X222.166.230.0.tP03.020 | DтP03 |  |  |  |  |  |  |  | 999 | R | 1 \|K003 $=8$ : "Invalid Date" | 2300.0 TPO3 must be a valid date in ccryMMDO tormat | 230.0 TrPO3 must be a valid date in ccrrMMMD tormat |  |
| x222.167.2300.0TP. 010 | DTP | DATE - ACUTE MANIFESTATION |  | 1 | s | 2300 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 16: "Implementation } \\ & \text { Dependent Segment Missing" } \\ & \hline \end{aligned}$ | $\begin{array}{\|l\|} \text { If } 2300 . \mathrm{CR208}=\text { "A" or "M" then } 2300 . \mathrm{DTP} \\ \text { with DTP01 }=\text { "453" must be present. } \end{array}$ | $\begin{aligned} & \text { If } 2300 . C R 208=\text { " } \mathrm{A} \text { " or " } \mathrm{M} \text { " then } 2300 . \mathrm{DTP} \\ & \text { with DTP01 = " } 453 \text { " must be present. } \end{aligned}$ |  |
| х222.167.2300.0тP.020 | DTP |  |  |  |  |  |  |  | 999 | R | ${ }^{11304=5: \text { : } \text { Segment Exceeds }}$ | Only one iteration of 2300.DTP with DTP01 = "453" is allowed. | Only one iteration of 2300. DTP with OTPO1 $=$ " $455^{4}$ is allowed. |  |
| х222.167.2300.0тP01.010 | DTP01 | Date Time Qualifier | 1 D | ${ }^{3.3}$ | R |  |  | 453 | 999 | R | ${ }^{1 K 003}=1$ :"Required Data Element | 2300.0 TP01 must be pesesent. | 2300.0 TP01 must be pesesent. |  |
| X222.167.230.0.tP01.220 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Ivaid Code Value" | 2300.0 PP01 must be "453". | 2300.0TP01 must be "453". |  |
| X222.167.2300.0тP02.010 | DTP02 | Date Time Period Format Ouadifier | 10 | ${ }^{2.3}$ | R |  |  | ${ }^{\text {D8 }}$ | ${ }^{999}$ | R | ${ }_{\text {Missing }}^{\text {Kat }}$ : :Required Data Element | 2300.0 TP02 must be present. | 2300. TrP02 must be present. |  |
| X222.167.2300.0TP02.020 | ${ }^{\text {DTP02 }}$ |  |  |  |  |  |  |  | 999 | R | \|1K403 =7: "Invalid Code Value" | 2300.0 TP02 must be "D8". | 2300. TPP02 must be "D8". |  |
| х222.167.2300.0тP03.010 | отP03 | Acute Maniestation Date | ${ }^{\text {an }}$ | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element | 2300.0 TP03 must be present. | 2300.0tP03 must be present. |  |
| X222.167.2300.0тP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | 1 K403 =8: "Invalid Date" | 2300.DTPO3 must be a valid date in ccryMMOD tormat. | 2300.DTPO3 must be a valid date in ccryMMD tormat. |  |
| X222.167.2300.0TP03.030 | ${ }^{\text {dTP03 }}$ |  |  |  |  |  |  |  | 277 | c |  | 2300. TTP03 must not be a future date. | $2300.0 T$ P03 must not be a future date. |  |
| х222.166.2300.0тP. 010 | DTP | date - aclident |  | 1 | s | 2300 |  |  | 999 | ${ }^{8}$ | IK304 = 16: "Implementation Dependent Segment Missing" | $\begin{aligned} & \text { If 2300.CLM11-1 or CLM11-2 }=\text { "AA" or } \\ & \text { "OA" then 2300.DTP with DTP01 }=\text { " } 439 " \\ & \text { must be present. } \end{aligned}$ | $\begin{aligned} & \text { If 2300.CLM11-1 or CLM11-2 = "AA" or } \\ & \text { "OA" then 2300.DTP with DTP01 }=" 439 " \\ & \text { must be present. } \end{aligned}$ |  |
| $\times \times 22.168 .2300 .0$ गP.020 | DTP |  |  |  |  |  |  |  | 999 | R |  | Only one iteration of 2300.DTP with DTP01 = "439" is allowed. | Only one iteration of 2300.0TP with OTPO1 $=4339$ is allowed. |  |
| X222.168.230.0.tP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | 439 | 999 | R |  | 2300.0 TP01 must be pesesent. | 2300.DTP01 must be pesest. |  |
| X222.168.230.0.tP01.220 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Ivaid Code Value" | $2300.0 \mathrm{DP01}$ must be "439". | 2300.0 PP01 must be "439". |  |
| X222.168.230.0.tP02.010 | DTP02 | Date ${ }^{\text {Time Period Format }}$ Oualier | ID | 2.3 | R |  |  | D8, | 999 | R | $\begin{aligned} & \left\lvert\, \begin{array}{l} \text { \|K403 = } 1: \text { "Required Data Element } \\ \text { Misssing" } \end{array}\right. \end{aligned}$ | 2300.0 TP02 must be pesent. | 2300.0 TP02 must be peresent. |  |

$\xrightarrow{837-}$

| Edit Reference | Segment or Element | Description | 10 | Min. <br> Max. | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | Loop Repeat | 5010A1 values | $\begin{gathered} \text { TAAl } \\ \text { cas } \\ 277 \mathrm{CA} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition /Error Code | $\underset{\text { Prat B }}{\text { Proposed 5010A1 Edits }}$ | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.168.230.0.tP02.020 | DTPR |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2300. DTP02 must be | O.DTP02 must |  |
| х222.168.2300.0тро3.010 | DTP03 | Accident Date | ${ }^{\text {an }}$ | ${ }^{1.35}$ | R |  |  | сСपуммd | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2300.0 TP03 must be pesent. | 2300.0 TPO3 must be present. |  |
| х222.168.2300.0тP03.020 | ${ }^{\text {отP03 }}$ |  |  |  |  |  |  |  | 999 | R | 1 1400 $=8$ 8 "Invalid Date" | ${ }^{2300 . D T P 03 ~ m u s t ~ b e ~ a ~ v a l i d ~ d a t e ~ i n ~}$ | 2300.DTPO3 must be a valid date in CCYMMDD format |  |
| X222.168.2300.0тP03.030 | DTP03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information.. <br> CSC 510: "Future date" <br> CSC 248: "Accident date, state, | 2300.DTP03 must not be a future date. | 2300.DTP03 must not be a tuture date. |  |
| X222.169.2300.0TP.010 | DTP | $\underset{\substack{\text { DATE-LAST MENSTRUAL } \\ \text { PERIOD }}}{\text { den }}$ |  | 1 | s | 2300 |  |  | 999 | R | ${ }^{1 / 2304=5: ~ " J e g m e n t ~ E x c e e d s ~}$ | Only one iteration of 2300.DTP with DTP01 $=$ " 4844 i i allowed. | Only one iteration of 2300.DTP with DTP01 $=$ " 4844 is allowed. |  |
| X222.169.230.0.tP01.010 | DTP01 | Date Time Qualifier | 10 | 3.3 | R |  |  | 484 | 999 | R | (kas = 1 "Required Data Element | 2300.0TP01 must be present. | 2300.0TP01 must be present. |  |
| X222.169.2300.0TPP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2300.0 TP01 must be "484". | 2330.0 .TP01 must be "484". |  |
| X222.169.2300.0TP02.010 | DTP02 | Date Time Period Format Oualifer | 10 | ${ }^{2.3}$ | R |  |  | D8 | 999 | R | IK403 $=1$ : "Required Data Element Missing" | 2300.0 TP02 must be peresent. | 2300.0 TP02 must be present. |  |
| X222.169.2300.0TP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invaid Code Value" | 2300.DTP02 must be "D8". | 2300.DTP02 must be "D8". |  |
| х222.169.230.0.tт03.010 | ${ }^{\text {отPо3 }}$ | Last Menstrual Period Date | an | ${ }^{1.35}$ | R |  |  | сСууммdD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.0TP03 must be pesent. | 2300.0TP03 must be present. |  |
| X222.169.230.0.tP03.020 | DтP03 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 8: "IIvaidid Date" | $2300 . \mathrm{DTPO3}$ must be a valid date in ccryMMD tormat. | ${ }^{2300.0 T P O 3 ~ m u s t ~ b e ~ a ~ v a l i d ~ d a t e ~ i n ~}$ CCYYMMD format. |  |
| х222.169.2300.0тP03.030 | ${ }^{\text {DTP03 }}$ |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 510: "Future date" <br> CSC 191: "Date of Last Menstrual Period (LMP)" | 2300.DTP03 must not be a future date. | 2300.DTP03 must not be a tuture date. |  |
| X2222.170.2300.0TP.010 | DTP | DATE-LAST X-RAY |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. DTP with DTP01 $=$ " 455 " is allowed. | Only one iteration of 2300.DTP with DTP01 $=$ " 455 " is allowed |  |
| X222.170.2300.0тP01.010 | отP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | 455 | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.0 TP01 must be pesesent. | 2300.0 TP01 must be resent. |  |
| X222.170.2300.0.tP01.220 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2300.0TP01 must be "455". | 2330.0 .TP01 must be "455". |  |
| X222.170.2300.0TP02.010 | DTP02 | $\xrightarrow[\substack{\text { Dale Time Period Format } \\ \text { Oualifer }}]{\text { ate }}$ | 10 | ${ }^{2.3}$ | R |  |  | D8 | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.0 TP02 must be peresent. | 2300.0 TP02 must be pesent. |  |
| X222.170.2300.0TP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 7: "Invalid Code Value" | 2300.0 TPO2 must be "D8". | 2300.DTP02 must be "D8". |  |
| X222.170.2300.0TP03.010 | DTP03 | Last C -Ray Date | AN | 1-35 | R |  |  | ссууммдD | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.0TP03 must be present. | 2300. DTP03 must be present. |  |
| X222.170.2300.0тP03.220 | ${ }^{\text {DTP03 }}$ |  |  |  |  |  |  |  | 999 | R | 1 14003 $=8$ : "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. | 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
| х222.170.2300.0тP03.030 | dтP03 |  |  |  |  |  |  |  | 277 | c |  | 2300.DTP03 must not be a future date. | 2300.DTP03 must not be a tuture date. |  |
| $\times 222.171 .2300$. TPP. 010 | DTP | DATE - HEARING AND VISION PRESCRIPTION DATE |  | 1 | s | 2300 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2300.DTP with DTP01 = "471" is allowed. | Only one iteration of 2300.DTP with DTP01 = "471" is allowed. |  |
| X222.171.2300.0TPP01.010 | DTP01 | Date Time Qualifier | 10 | 3.3 | R |  |  | ${ }^{471}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300. TTP01 must be present. | 2300.0 TP01 must be pesent. |  |
| X222.171.2300.0TPP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2300.0TP01 must be "471". | 2330.0 .0 PP01 must be "471". |  |
| X222.171.2300.0tP02.010 | DTP02 | $\underset{\substack{\text { Date Time Period Format } \\ \text { Oualifer }}}{\text { Din }}$ | 10 | ${ }^{2.3}$ | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300. DTP02 must be present. | 2300.0 TP02 must be present. |  |
| X222.171.2300.0TPP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2300. DTPO2 must be "D8". | 2300.0 TP02 must be "D8". |  |
| X222.171.2300.0тP03.010 | DтP03 | Prescripion Date | ${ }^{\text {AN }}$ | ${ }^{1.35}$ | R |  |  | сСууммdD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. | 2300.0 TP03 must be present. |  |
| X222.171.2300.0TP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invaid Date" | 2300.DTPO3 must be a valid date in ccryMMOD tormat. | $2300.0 \mathrm{TPO3}$ must be a valid date in ccryMMD tormat. |  |
| х222.171.2300.0тP03.030 | ${ }_{\text {отP03 }}$ |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 510: "Future date" <br> CSC 214: "Original date of <br> prescription/orders/referral | 2300.DTP03 must not be a future date. | $2300 . \mathrm{T}$ P03 must not be a tuture date. |  |
| ×222.172.2300.0TP. 010 | dTP | date- disability dates |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "314", " 360 " or " 361 " is allowed. | Only one iteration of 2300.DTP with DTP01 = "314", "360" or "361" is allowed. | Future dates are allowed in this situation 01/20: Companion Guide Note needed. |
| X222.172.2300.0TPP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | 314, 360, 361 | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2300.0 TP01 must be peresent. | 2300.0 TP01 must be pesent. |  |
| х222.172.2300.0TP001.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | $2300 . \mathrm{DTP01}$ must be valid values. | 2300. DTP01 must be evalid values. |  |
| X222.172.2300.0TPP2.010 | DTP02 | Date Time Perioc Format Ouatifier | 10 | 2.3 | R |  |  | D8, RD8 | 999 | R | $\begin{array}{\|l} \hline \text { IK403 = } \\ \text { Missing" } \end{array}$ | 2300.0 TP02 must be present. | 2300.0 TP02 must be present. |  |
| X222.172.2300.0TPP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|Kene | 2300. TTP02 must be valid values. | $2300 . \mathrm{TTP02} \mathrm{must} \mathrm{t} \mathrm{e} \mathrm{valid} \mathrm{values}$. |  |
| X222.172.2300.0tP02.030 | DTP02 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information.... <br> CSC 195: "Unable to work dates/Disability Date." | If 2300. DTP01 $=$ " 314 " then 2300.DTP02 must = "RD8". | If 2300. DTP01 $=$ " 314 " then 2300.DTP02 must $=$ "RD8". |  |
| X222.172.2300.0тP03.010 | dTP03 | Disabiliy From Date | an | ${ }^{1-35}$ | R |  |  | CCYYMMDDCCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.0TP03 must be present. | 2300.0TP03 must be present. |  |
| X222.172.230.0.tP03.220 | DTP03 |  |  |  |  |  |  |  | 999 | R | 1K403 $=8$ : "Invalid Date" | If 2300.DTP02 = "D8" then 2300.DTP03 must be a valid date in CCYYMMDD format. | If 2300.DTP02 = "D8" then 2300.DTP03 must be a valid date in CCYYMMDD format |  |
| х222.172.2300.0тP03.030 | dTP03 |  |  |  |  |  |  |  | 999 | ${ }^{\text {R }}$ | IK003 $=8$ : "Invalid Date" | If 2300.DTP02 = "RD8" then 2300.DTP03 must be a valid date in CCYYMMDD- CCYYMMDD format. | If 2300. DTP02 $=$ "RD8" then 2300.DTP03 must be a valid date in CCYYMMDD- CCYYMMDD format. |  |
| х222.174.2300.DTP. 010 | DTP | DATE-LAST WORKED |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with <br> DTP01 = "297" is allowed. | Only one iteration of 2300. DTP with DTP01 = " 297 " is allowed. |  |

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| Edit Reference | Segment or Element | Descripion | 10 | min. max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 values | $\begin{gathered} \text { TAA1 } \\ \text { Ta99 } \\ \text { 277CA } \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptree } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\underset{\text { Part B }}{\text { Proposed 5010A1 Edits }}$ | $\underset{\substack{\text { Proposed 501001 Edits } \\ \text { CEDI }}}{\text { E. }}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.174.2300.DTP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | 297 | 999 | R |  | ${ }^{2300.0 \text { DTP01 }}$ must be present. | 2300.0TP01 must be pesesent. |  |
| X222.174.2300.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2300.0 TP001 must be "297". | 23300.0 TP01 must be "297". |  |
| X222.174.2300.0TP02.010 | DTP02 | Date Time Period Format Oualifier | 10 | 2.3 | R |  |  | ${ }^{\text {D8 }}$ | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2300.0 TP02 must be pesent. | 2300.0 TP02 must be present. |  |
| X222.174.2300.0TP02.020 | ${ }^{\text {DTP02 }}$ |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2300.0 TPO2 must te "D8". | 2300.0TP02 must be "D8". |  |
| х222.174.2300.0тP03.010 | ${ }^{\text {отP03 }}$ | Last Worked Date | AN | ${ }^{1.35}$ | R |  |  | cСırımıd | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.0 TP03 must be present. | 2300.0 TP03 must be present. |  |
| X222.174.2300.DTP03.020 | DтP03 |  |  |  |  |  |  |  | 999 | R | 1 14003 $=8$ : "Invalid Date" | ${ }^{2300.0 T P O 3 ~ m u s t ~ b e ~ a ~ v a l i d ~ d a t e ~ i n ~}$ CCYYMMDD tormat. | 2300.DTP03 must be a valid date in CCYMMDD format. |  |
| х222.174.2300.0tP03.030 | отP03 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 510: "Future date" <br> CSC 581: "Last Worked Date" | 2300.DTP03 must not be a future date. | 2300.DTP03 must not be a tuture date. |  |
| X2222.175.2300.0tP.010 | DTP | DATE AUTHORRIZD |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = " 296 " is allowed. | Only one iteration of 2300.DTP with DTP01 = " 296 " is allowed. |  |
| X222.175.2300.DTP01.010 | DTP01 | Date Time Qualifer | 10 | ${ }^{3} 3$ | R |  |  | 296 | 999 | R |  | 2300.0 TP01 must be peresen. | 2300.0 TP01 must be present. |  |
| X222.175.2300.0TP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2300.0TP01 must be "296". | 2300.0TP01 must be "296". |  |
| X222.175.2300.0TP02.010 | DTP02 | $\underset{\substack{\text { Date Time Period Format } \\ \text { Oualifier }}}{ }$ | 10 | ${ }^{2 \cdot 3}$ | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.0 TP02 must be pesent. | 2300.0 TP02 must be present. |  |
| X222.175.2300.0TP02.020 | ${ }^{\text {DTP02 }}$ |  |  |  |  |  |  |  | 999 | R | 1K403 7 7: "Invalid Code Value" | 2300.0 TPP2 must be "D8". | 2300.DTP02 must be "D8". |  |
| X222.175.2300.0тP03.010 | ${ }^{\text {¢TP03 }}$ | Work Reum Date | AN | 1-35 | R |  |  | c¢YYMmDD | 999 | R | (K03) 1. "Required Data Element | 2300.0tP03 must be present. | 2300.0 TP03 must be present. |  |
| X222.175.2300.DTP03.020 | отP03 |  |  |  |  |  |  |  | 999 | R | 1K403 $=8$ : "Invalid Date" | ${ }^{2300 . D T P O 3}$ must be a valid date in | 2300.0 TPO3 must be a valid date in CCYYMMDD format |  |
| ×222.176.2300.0TP. 010 | DTP | date - admission |  | 1 | s | 2300 |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for <br> Invalid Information..." <br> CSC 189: "Facility admission date" | If 2300.CLM05-1 or 2400.SV105 = "21", " 51 " or " 61 " then 2300.DTP with DTP01 $=$ "435" must be present | If 2400.SV105 = "21", "51" or "61" then 2300.DTP with DTP01 = "435" must be present. | Comparion Guide Note needed. |
| X222.176.2300.07P.020 | DTP |  |  |  |  |  |  |  | 999 | R | $\begin{array}{\|l} \mid \text { \|K304 = } 5 \text { : "Segment Exceeds } \\ \text { Maximum Use" } \end{array}$ | Only one iteration of 2300.DTP with DTP01 = "435" is allowed. | Only one iteration of 2300.DTP with DTP01 $=$ " 435 " is allowed. |  |
| X222.176.2300.0TP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | 435 | ${ }^{999}$ | R | \|K403 = 1: "Required Data Element Missing" | 2300.0 TP01 must be present. | 2300.0 TP01 must be present. |  |
| X222.176.2300.0TP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2300.DTP01 must be "435". | 2330.0 DTP01 must be "435". |  |
| X222.176.2300.0TP02.010 | DTP02 | $\underset{\substack{\text { Dale } \\ \text { Time Perioc Format } \\ \text { Ouatifer }}}{ }$ | 10 | ${ }^{2.3}$ | R |  |  | D8 | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300. TPP02 must be present. | 2300.0 TP02 must be present. |  |
| X222.176.2300.0TP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2300.DTP02 must be "D8". | 2300.0 DP02 must be "D8". |  |
| х222.176.2300.0TP03.010 | ${ }^{\text {DTP03 }}$ | Related Hospitalization Admission Date | AN | ${ }^{1.35}$ | R |  |  | сСууммd | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.07P03 must be present. | 2300.0 TP03 must be present. |  |
| х222.176.2300.0тP03.020 | ${ }^{\text {DTP03 }}$ |  |  |  |  |  |  |  | 999 | R | 1 14003 $=8$ : "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. | $2300 . \mathrm{DTPO3}$ must be a valid date in čryMMDO tormat |  |
| х222.176.2300.0tP03.030 | ${ }^{\text {DTP03 }}$ |  |  |  |  |  |  |  | 277 | c |  | 2300.DTP03 must not be a future date. | 2300. TTP03 must not be a tuture date. | Companion Guide note needed |
| $\times \times 22.177 .2300 .0$ TP. 010 | DTP | DATE- DISCHARGE |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with | Only one iteration of 2300.DTP with DTP01 = "096" is allowed. |  |
| X222.177.2300.0tP01.010 | DTP01 | Date Time Qualifier | 10 | 3.3 | R |  |  | 096 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300. TTP01 must be peresent. | 2300.0 TP01 must be present. |  |
| X222.177.2300.0TP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2300.0 PTP01 must be "096". | 2300.0 PTP01 must be "096". |  |
| X222.177.2300.0TP02.010 | DTP02 | $\underbrace{}_{\substack{\text { Date Time Period Format } \\ \text { Oualifer }}}$ | 10 | ${ }^{2.3}$ | R |  |  | D8 | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missina" | 2300.0 TP02 must be present. | 2300.0 TP02 must be present. |  |
| X222.177.2300.0TP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 $=$ 7: "Invalid Code Value" | 2300. TPP02 must be "D8". | 2300.0TP02 must be "D8". |  |
| X222.177.2300.DTP03.010 | отро3 | Related Hospitalization Discharge Date | AN | ${ }^{1.35}$ | R |  |  | сСууммDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be pesent. | 2300. TrP03 must be present. |  |
| X222.177.2300.0тP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | 1 K4003 $=8$ : "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. | 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
| х222.177.2300.0tP03.030 | ${ }_{\text {dTP03 }}$ |  |  |  |  |  |  |  | 277 | c |  | 2300.DTP03 must not be a future date. | 2300. TPO3 must not be a future date. |  |
| ×222.178.2300.0TP.010 | отP | $\begin{array}{\|c\|} \hline \text { DATE - ASSUMED AND } \\ \text { RELINQUISHED CARE DATES } \\ \hline \end{array}$ |  | 2 | s | ${ }^{2300}$ |  |  | 999 | R | IK304: 5: "Segment Exceeds Maximu Use" | Only two iteration of 2300.DTP with DTP01 = "090" or "091" are allowed. | Only two iteration of 2300.DTP with DTP01 = "090" or "091" are allowed. |  |
| X222.178.2300.DTP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | 090, 091 | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be pesent. | 2300.0 TP01 must be pesesent. |  |
| X222.178.2300.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2300. DTP01 must be evaid values. | 2300. DTP01 must be evaid values. |  |
| X222.178.2300.0TP02.010 | DTP02 | $\underset{\substack{\text { Date Time Period Format } \\ \text { Oualifier }}}{ }$ | 10 | ${ }^{2.3}$ | R |  |  | D8 | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2300.0 TP02 must be peresent. | 2300.0 TP02 must be present. |  |
| х222.178.2300.0TP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2300. DTPO2 must be "D8". | 2300.0TP02 must te "D8". |  |
| X222.178.2300.0тP03.010 | DTP03 | Assumed or Relinquished Care Date | ${ }^{\text {an }}$ | 1.35 | R |  |  | сСууммd | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.0 TP03 must be peresent. | 2300.0 TP03 must be present. |  |
| X222.178.2300.DTP03.020 | DтP03 |  |  |  |  |  |  |  | 999 | R | 1 \|K403 $=8$ : "Invalid Date" | 2300. TTPO3 must be a valid date in ccryMMD tormat | ${ }^{2300.0 T T O 3}$ must be a valid date in |  |
| $\times 222.180 .2300 .0$ TP. 010 | DTP | $\qquad$ |  | 1 | s | 2300 |  |  | 999 | R | $\left\lvert\, \begin{aligned} & \text { 11304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}\right.$ | Only one iteration of 2300.DTP with DTP01 = "444" is allowed. | Only one iteration of 2300.DTP with DTP01 = "444" is allowed. | Pass throug, syntax only. |
| X222.180.2300.0TP01.010 | DTP01 | Date Time Qualifier | $1{ }^{1}$ | 3.3 | R |  |  | 444 | 999 | R | (ka03 1: "Required Data Element | 2300.0 TP01 must be pesent. | 2300.0 TP01 must be present. |  |
| х222.180.2300.0TP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2300.DTP01 must be "444". | 2300.0 DP01 must be "444". |  |
| х222.180.2300.0TP02.010 | DTP02 | Date Time Period Format | 10 | $2 \cdot 3$ | R |  |  | D8 | 999 | R |  | 23300. TTPO2 must be present. | 2300.0TP02 must be present. |  |

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| Edit Reference | Segment or Element | Description | ID | Min. Max. | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \\ \hline \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TAAI } \\ \text { a990 } \\ 277 C A \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.180.2300.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2300. DTP02 must be "88". | 2300.07 P02 must be "D8". |  |
| х222.180.2300.DTP03.010 | ${ }^{\text {DTP03 }}$ | Order Date | AN | ${ }^{1.35}$ | R |  |  | сСуrмmd | ${ }^{999}$ | R | \|ick | 2300.0 TP03 must be present. | 2300.0 TP03 must be present. |  |
| х222.180.2300.DTP03.020 | DтP03 |  |  |  |  |  |  |  | 999 | R | \|K403 8 8: "Invalid Date" | ${ }^{2300.0 T P 03 ~ m u s t ~ b e ~ a ~ v a l i d ~ d a t e ~ i n ~}$ CCYYMMDD format. | 2300.DTPO3 must be a valid date in CCYYMMD format |  |
| х222.181.2300.0тP. 010 | DTP | DATE-REPRICER RECEVVED <br> DATE |  | 1 | s | 2300 |  |  | 999 | R | $\begin{aligned} & \text { \|k304=5: "Segment Exceeds } \\ & \text { Naximum Use" } \\ & \text { Max } \end{aligned}$ | Only one iteration of 2300.0TP with OTPO1 $=$ ". 50 is is allowed. |  | Pass through, symax only. |
| x222.181.2300.DTP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3} 3$ | R |  |  | 050 | 999 | R |  | 2300.0 TP01 must be present. | 2300. DTP01 must be present. |  |
| x222.181.2300.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|k403 $=7$ : "Invalid Code Value" | 2300.0 PP01 must be "050". | 2300.0 PP01 must be "050". |  |
| X222.181.2300.0.tP02.010 | DTP02 | $\underset{\substack{\text { Date Time Period Format } \\ \text { Oualifier }}}{ }$ | 10 | ${ }^{2 \cdot 3}$ | R |  |  | D8 | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.0 TP02 must be pesest. | 2300.0 TP02 must be pesesent. |  |
| X222.181.2300.DTPO2.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7."Invalid Code Value" | 2300.0 DP02 must be "D8". | 2300.0 DP02 must be "D8". |  |
| х222.181.2300.DTPO3.010 | סтP03 | Order Date | AN | ${ }^{1-35}$ | R |  |  |  | 999 | R |  | 2300.0TP03 must be present. | 2300.0TP03 must be present. |  |
| $\times$ x222.181.2300.DTP03.020 | DтP03 |  |  |  |  |  |  |  | 999 | R | 1 \|K403 $=8$ : "Invalid Date" | ${ }^{2300.0 T T P O 3 ~ m u s t ~ b e ~ a ~ v a l i d ~ d a t e ~ i n ~}$ | 2300. .TPO3 must be a valid date in CCYYMMD format. |  |
| X222.182.2300.PWK.010 | PWK | CLAIM SUPPLEMENTAL INFORMATION |  | 10 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of 2300.PWK are allowed. | Only ten iterations of 2300.PWK are allowed. |  |
| x222.182.2300.PWK01.010 | PWK01 | Atachment Report Type Code | 10 | 2.2 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.PwK01 must be present. | 2300.PwK01 must be present. |  |
| X222.182.2300.PWK01.020 | PWK01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | ${ }^{2300 . P W K 01 ~ m u s t ~ b e ~ v a i d ~ v a l u e s . ~}$ | $2300 . \mathrm{PWK01}$ must be vaid values. |  |
| x222.182.2300.PWK02.010 | PWK02 | Atachment Transmission Code | 10 | 1-2 | R |  |  | ${ }^{\text {AA, BM, EL, EM, FT, }}$ EX | ${ }^{999}$ | R | $\left.\right\|_{\text {Missina" }} ^{1 \text { K03 }}=1$ : Required Datata Element | $2300 . \mathrm{Pw}$ K02 must be pesent. | 2300.PWK02 must be present. |  |
| x222.182.2300.PWK02.020 | PWK02 |  |  |  |  |  |  |  | 999 | R | \|k403 $=7$ : "Invalid Code Value" | $2300 . \mathrm{PWK02} \mathrm{must} \mathrm{be} \mathrm{vaid} \mathrm{values}$. | $2300 . \mathrm{PWK02} \mathrm{must} \mathrm{be} \mathrm{vaid} \mathrm{values}$. |  |
| x222.182.2300.PWK03.010 | PWK03 | Repor Copies Needed | No | 1-2 | NU |  |  |  | 999 | E | 1 K403 $=110 . "$ "Implementation "Not Usedr" lemenen Present | Must not be present. | Must not be present. |  |
| x222.182.2300.PWK00.010 | PWK04 | Enity Identifer Code | 10 | ${ }^{2 \cdot 3}$ | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.182.2300.PwK05.010 | PwK05 | Identification Code Qualifier | 10 | ${ }^{1-2}$ | s |  |  | AC | 999 | R |  | When $2300 . \mathrm{PWK} 05$ is present, $2300 . \mathrm{PWK} 02$ must be "BM", "EL", "EM", "FX" or "FT" | When 2300.PWK05 is present, 2300.PWK02 must be "BM", "EL", "EM", "FX" or "FT" |  |
| X222.182.2300.PWK05.020 | PWK05 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $2330 . P W K 05$ must be "AC". | 2300.PWK05 must be "AC". |  |
| x222.182.2300.PWK06.010 | PWK06 | Attachment Contro Number | AN | 2.80 | s |  |  |  | 999 | R | IK403 $=2$ : "Conditional Required Data Element Missing" | When 2300.PWK06 is present, $2300 . P W K 02$ must be "BM", "EL", "EM", "FX" or "FT". | When 2300.PWK06 is present, $2300 . \mathrm{PWK02}$ must be "BM", "EL", "EM", "FX" or "FT". |  |
| X222.182.2300.PWK06.020 | PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | ${ }^{2300 . P W K 06 ~ m u s t ~ b e ~ 2-50 ~ c h a r a c t e r s . ~}$ | ${ }^{2300 . P W K 06 ~ m u s t ~ b e ~ 2-50 ~ c h a r a c t e r s . ~}$ | 16 note limiting to 50 |
| x222.182.2300.PwK06.030 | PWK06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: Acknowledge Information CSC 512: "Length invalid for receiver's application system CSC 489: "Attachment Control Number" |  |  |  |
| X222.182.2300.PWK06.040 | PwK06 |  |  |  |  |  |  |  | 999 | R |  | accen accented $A N$ churacteres. | 2300. PWKO6 must be populated with accepeed $A N$ charactes. |  |
| X222.182.2300.PWK06.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.182.2300.PWK06.060 | PWK06 |  |  |  |  |  |  |  | 999 | R | $\left.\right\|_{\text {Element:" IIvaid Character in Data }} ^{\text {K403 }}$ | $\left.\right\|_{\text {space characters. }} ^{2300 \text {. }}$. | $\left.\right\|_{\text {space characters. }} ^{2330 \text {. }}$. |  |
| X222.182.2300.PWK06.070 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.182.2300.PWK07.010 | PWK07 | Descripion | AN | 1.80 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.182.2300.PWK08.010 | PWK08 | ACTIONS Indicated |  |  | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| x222.182.2300.PWK09.010 | pwko9 | Request Categoy Code | 10 | 1-2 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. | Must not be present. |  |
| ×222.186.2300.CN1.010 | CN1 | COntract information |  | 1 | s | 2300 |  |  | 999 | R | Dependent "Not Used" Segment Present" | 2300.CN1 must not be present. | 2300.CN1 must not be present. | 16 note that CN1 is not for HIPAA claims. |
| х222.188.2300.AMT. 010 | AMT | PATIENT AMOUNT PAID |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.AMT is allowed. | Only one iteration of 2300.AMT is allowed. |  |
| X222.188.2300.AмTT01.010 | AmT01 | Amount Qualifier Code | 10 | ${ }^{1-3}$ | R |  |  | F5 | 999 | R |  | 2300. AMTO1 must be present. | 2300. AMTO1 must be present. |  |
| X222.188.2300.AMTTO1.020 | AMTO1 |  |  |  |  |  |  |  | 999 | R | 11403 $=7$ : "Invalid Code Value" | 2300.AMT01 must be "F5". | 2300.AMT01 must be "F5". |  |


| Edit Reference | $\begin{aligned} & \text { Segment or } \\ & \text { Element } \end{aligned}$ | Description | 10 | Min <br> max. | $\begin{array}{\|l\|l} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{aligned} & 501001 \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TAAI } \\ \text { a999 } \\ 277 C A \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | Proposed 5010A1 Edits Part B | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.188.2300.AмTт2.005 | Aмто2 | Patient Amount Paid | R | ${ }^{1.18}$ | R |  |  |  | ${ }^{999}$ | R |  | 2300.AMT02 must be present. | 2300. AmTo2 must be present. |  |
| x222.188.2300.Aмt02.010 | Amто2 |  |  |  |  |  |  |  | 999 | R | \|KLens 6:" "Invalid Character in Data Element" | $2300 . A$ ATO2 must be numeric. | $2300 . A M T 02$ must be numeric. |  |
| X222.188.2330.AMTT02.015 | Aмто2 |  |  |  |  |  |  |  | 999 | E | 1K403 $=5$ : "Data Element Too Long" | ${ }_{9}^{230,999.99 .} 2$ | ${ }^{2300.999 .99 .2 \text {. }}$ 2ust be $>=0$ and $<=$ |  |
| x222.188.2330.AmT02.020 | Aмто2 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 183: "Amount entity has paid" EIC: OC "Patient" |  |  | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed. |
| X222.188.2300.AMT02.030Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.188.2330.AmT02.050 | Aмто2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 697: "Invalid Decimal Precision" CSC 183: "Amount entity has paid" EIC: QC "Patient" |  | 2300.AMTO2 is limited to 0,1 or 2 decimal positions. |  |
| X222.188.2300.AмTт3.010 | Амто3 | Crediulebit Flag Code | ID | 1-1 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.189.2300.REF. 010 | REF | SERVICE AUTHORIZATION EXCEPTION CODE |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $\mathbf{2 3 0 0}$.REF with REF01 = " 4 N " is allowed. | Only one iteration of 2300.REF with REF01 = " 4 N " is allowed. | pass thru, syntax only |
| x222.189.2300.REFF01.010 | REF01 | Reference Identification Qualifier | 10 | 2-3 | R |  |  | ${ }^{4 N}$ | 999 | R |  | 2300.REF01 must be present. | $2300 . \mathrm{REF}$ F1 must be present. |  |
| x222.189.2300.REFF0.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | $2300 . R E F 01$ must be "4N". | $2300 . R E F 01$ must be "4N". |  |
| X222.189.2300.REFF2.010 | REFO2 | ${ }_{\text {Service Authorizaion Exceplion }}^{\text {Code }}$ | AN | ${ }^{1.50}$ | R |  |  | ${ }_{1,2,3,4,5,6,7}$ | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2300.REFO2 must be pesent. | $2300 . \mathrm{REF} \mathrm{F}$ must be pesest. |  |
| X222.189.2300.REFFO2.020 | REFO2 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2330. REFO2 must be valid values. | 2300. REFO2 must be valid values. |  |
| X222.189.2300.REFFO3.010 | REFO3 | Descripion | AN | 1-80 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.189.2300.REFF4.010 | REFO4 | REFERENCE IDENTIFIER |  |  | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.191.2300.REF.010 | REF | MANDATORY MEDICARE (SECTION 4081) CROSSOVER INDICATOR |  | 1 | s | 2300 |  |  | ${ }^{999}$ | E | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300.REF with REF01 $=$ "F5" must not be present. | 230.REF with REF01 = "F5" must not be present. |  |
| X222.192.2300.REF.010 | REF | MAMMOGRAPHY CERTIFICATION NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "EW" is allowed. | Only one iteration of 2300.REF with REF01 = "EW" is allowed. |  |
| x222.192.2300.REFF0.010 | REF01 | Reference Idenification Quaifier | 10 | ${ }^{2.3}$ | R |  |  | Ew | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be pesent. | ${ }^{2300 . R E F 011}$ must be present. |  |
| X222.192.2300.REFF0.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{7}$ : "Invalid Code Value" | $2300 . R E F 011$ must be"EW". | $2300 . R E F 01$ must be"EW". |  |
| x222.192.2300.REFFO2010 | REFO2 | $\xrightarrow{\text { Mammography Cerification }}$ | AN | ${ }^{1.50}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missina" | 2300.REF02 must be present. | 2300. REFO2 must be present. |  |
| X222.192.2300.REFFo2.020 | REFO2 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  | 2300.REFO2 must contain at least one non- space character. |  |
| X222.192.2300.REFFO2.030 | ReFor |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" |  | 2300 .REFO2 must be 1-50 characeres. |  |
| X222.192.2300.REFFO.035 | REF02 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's CSC 252 system CSC 252: "Entity's EIC: MSC "Mammog umber" EIC. MSC Marmography Screening |  |  | 12-9-11 New CSC requested for "Mammography Certification number" |
| x222.192:2300.REFO2.040 | REF02 |  |  |  |  |  |  |  | 999 | R |  |  | 2300.REFO2 must be populated with accereed AN characters. |  |
| X222.192.2300.REF02.050 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.192.2300.REFFO2.060 | REF02 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 252: "Entity's <br> authorization/certification number" EIC: MSC "Mammography Screening | 2300.REF02 must be a valid Mammography Certification Number. |  | Valid MQSA reference must be available for this edit. 12-9-11 New CSC requested for "Mammography Certification number" |
| X222.192.2300.REFFO.010 | ReFo3 | Descripion | ${ }^{\text {an }}$ | 1-80 | N/U |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.192.2300.REFF04.010 | REFO4 | REFERENCE IDENTIFIER |  |  | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.193.2300.REF.010 | REF | Referral number |  | 1 | s | 2300 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2300.REF with REF01 = "9F" is allowed. | Only one iteration of 2300.REF with REF 0 = 9 "FF is illowed |  |
| X222.193.2300.REFF0.010 | REF01 | Reference Identification Quaifier | 10 | 2.3 | R |  |  | ${ }^{9 F}$ | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2300. REF01 must be present. | ${ }^{2300 . R E F 01 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |

$\xrightarrow{837-}$

| Edit Reference | Segment or Element | Description | ID | Min. Max. | Usage <br> Req. | Loop | Loop Repeat | 5010A1 <br> Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.193.230.REEF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 $\mathbf{\text { 7 : "Invalid Code Value" }}$ | 2300.REF01 must be"9F". | 2300.REF01 must be"9F". |  |
| X222.193.2300.REFFO2.010 | REFO2 | Prior Authorization or Referral Numbe | ${ }^{\text {an }}$ | ${ }^{1.50}$ | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | $2300 . \mathrm{REFO2}$ must be present. | ${ }^{2300 . R E F 02 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| X222.193.230.REFF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | KK403 =6: "Invalid Character in Data | 230..REFO2 must contain at least one non- space character. | ${ }^{2300 . R E F O 2 \text { must contain at least one non- }}$ space character. |  |
| X222.193.230.REEFO2.030 | REF02 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2300. REFO2 must be 1 - 50 characters. | 2300. REFO2 must be 1 - 50 characters. |  |
| X222.193.230.REFF02.040 | REF02 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" EIC: PR "Entity's referral number" EIC: PR "Payer" |  |  |  |
| X222.193.230.REEF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 230. REFO2 must be populated with accepeled $A N$ characters. | 230. REF O2 must be populated with accented $A N$ characters. |  |
| $\times 222.193 .2300 . \mathrm{REF} 02.060$ Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.193.2300.REFO3.010 | REFO3 | Descripion | AN | 1-80 | nu |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be pesent. | Must not be present. |  |
| X222.193.230.R.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.194.2300.REF.010 | REF | Prior authorization |  | 1 | s | 2300 |  |  | 999 | R |  Maximum Use" | Only one iteration of 2300.REF with REF01 = "G1" is allowed | Only one iteration of 2300.REF with REF01 = "G1" is allowed. |  |
| X222.194.2300.REF00.010 | REF01 | Referencel Identificaion Qualifier | 10 | 2.3 | R |  |  | 61 | 999 | R |  | 2300.REF01 must be present. | 2300.REF01 must be present. |  |
| X222.194.2300.REFF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2300.REF01 must be "G1". | $2300 . R E F 011$ must be "G1". |  |
| X222.194.230.REEF02.010 | ReFo2 | Prior Authorization or | AN | ${ }^{1.50}$ | R |  |  |  | ${ }^{999}$ | R | K4033 1 : Required Data Element | 2300.REF02 must be present. | ${ }^{2300 . R E F 02 ~ m u s t ~ b e ~ p e r e s e n t . ~}$ |  |
| X222.194.230.REEFO2.020 | REF02 |  |  |  |  |  |  |  | 999 | R |  | 2300.REF02 must contain at least one non- space character. | 2300.REF02 must contain at least one non- space character. |  |
| X222.194.230.REEF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300 .REFO2 must be 1.50 characters. | 2300 .REFO2 must be 1 - 50 characters. |  |
| X222.194.2300.REFFO2.040 | REFO2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | Acknowledgement/Rejected for Invalid Information. <br> CSC 512: "Length invalid for receiver's application system CSC 252: "Entity's <br> authorization/certification number" |  |  |  |
| X222.194.2300.REFFO2.050 | REF02 |  |  |  |  |  |  |  | 999 | R | ${ }^{1 \mathrm{~K} \text { Elemenent:" }}$ (Invalid Charactere in Data | 2300.REF02 must be populated with accepted AN characters. | 2300.REF02 must be populated with accepted AN characters. |  |
| X222.194.2300.REF02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.194.2300.REFFO3.010 | REFO3 | Descripion | AN | 1.80 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.194.2300.REFF04.010 | REFO4 | REFERENCE IDENTIFIER |  |  | NU |  |  |  | 999 | E | (10403 = 110.4 "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.196.2300.REF.010 | REF | $\underset{\substack{\text { Payer claim control } \\ \text { NUMBER }}}{ }$ |  | 1 | s | 2300 |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 464: "Payer Assigned Claim Control Number." | 230.REF with REF01 $=$ "F8" must not be present. | 2300.REF with REF01 = "F8" must not be present. | Medicare only accepts ORIGINAL claim (CLM05- <br> 3=1) <br> 01/20: Companion Guide Note needed |
| X222.197.2300.REF.010 | REF | CLINICAL LABORATORY IMPROVEMENT AMENDMENT (CLIA) NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "X4" is allowed. | Only one iteration of 2300.REF with REF01 = "X4" is allowed. |  |
| x222.197.2300.REF00.010 | ReFor | Reference Idenification Qualifer | 10 | ${ }^{2.3}$ | R |  |  | x4 | 999 | R | K403 1 : : Required Data Element Missing" | ${ }^{2300 . R E F F 01 ~ m u s t ~ b e ~ p r e s e n t . ~}$ | ${ }^{2300 . R E F 01 ~ m u s t ~ b e ~ p e s e s t . ~}$ |  |
| X222.197.2300.REFF0.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|k403 =7: "Invalid Code Value" | $2300 . R E F 01$ must be "X4". | 2300.REF01 must be "X4". |  |
| x222.197.2300.REF02.010 | ReFoz | Clinical Laboratory Improvement Amendment Number | an | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | ${ }^{2300 . R E F 022 ~ m u s t ~ b e ~ p r e s e n t . ~}$ | 2300.REF02 must be present. |  |
| X222.197.2300.REF02.020 | Refor |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { K4030 = } 6 \text { "Invalid Character in Data } \\ & \text { Flement" } \end{aligned}$ | 2300. REFO2 must contain a t least one non- space character. | ${ }^{2300 . R E F O 2 \text { must contain at least one non- }}$ space character. |  |
| x222.197.2300.REFFO.030 | REFO2 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2300. REFF2 must be 1 - 50 characters. | 2300. REFF2 must be 1 - 50 characters. |  |
| X222.197.230.REFF02.040 | refor |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 512: "Length invalid for receiver's pplication system" CSC 630: "Referring CLIA Number" |  |  |  |
| X222.197.2300.REFF2.050 | REF02 |  |  |  |  |  |  |  | 999 | R | ${ }^{1 \mathrm{~K} 403=6: " \text { " }}$ Elemalid Chanacter in Data | 2300.REF02 must be populated with accepted AN characters. | 2300.REF02 must be populated with accepted AN characters. |  |


| Edit Reference | Segment or Element | Description | 10 | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\underset{\substack{\text { Loop } \\ \text { Repat }}}{\text { cor }}$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { c979 } \\ 277 c \mathrm{C} \end{gathered}$ | Acceptrej ect | Disposition / Error Code | $\underset{\text { Part B }}{\text { Proposed 5010 Edits }}$ | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.197.2300.REF02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.197.2300.REF03.010 | REFO3 | Descripion | AN | 1.80 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.197.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | nu |  |  |  | 999 | E | (1) | Must not be present. | Must not be present. |  |
| х222.199.2300.REF.010 | REF | REPRICED CLAIM NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. REF with REF01 = "9A" is allowed. | Only one iteration of 2300. REF with REF01 $=$ " 9 A " is allowed. | Pass through, syntax only |
| $\times 222.199 .2300 . \mathrm{REF01.010}$ | REF01 | Reference Identification Qualifier | 10 | 2.3 | R |  |  | 9A | 999 | R |  | 2300.REF01 must be present. | 2300.REF01 must be present. |  |
| X222.199.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2300. REF01 must be "9A". | $2300 . R E F 01$ must be "9A". |  |
| X222.199.2300.REF02.010 | REFO2 | Repriced Claim Reference Number | an | ${ }^{1.50}$ | R |  |  |  | 999 | R | \|ik03 1: "Required Data Element | 2300. REFO2 must be present. | 2300.REF02 must be present. |  |
| X222.199.2300.REFF2.020 | REF02 |  |  |  |  |  |  |  | 999 | R | \|14003 $=6$ :"Invalid Character in Data Element" | 2300. REFO2 must contain at least one nonspace character | Sno.. 2 EFFO2 must contain at least one non- |  |
| X222.199.2300.REFF2.030 | REF02 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2330. REFO2 must be 1-50 characters. | 2300. REFO2 must be 1-50 characters. |  |
| X222.199.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 702: "Repriced Claim Reference Number" |  |  |  |
| X222.199.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. | 2300. REF 2 must be populated with accereed AN characters. |  |
| X222.199.2300.REF02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.199.2300.REF03.010 | REFO3 | Descripition | AN | 1.80 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.199.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | nu |  |  |  | 999 | E | (12403 =10. "Implementation " | Must not be present. | Must not be present. |  |
| $\times{ }^{\text {x222.200.2300.REF. } 010}$ | REF | ADJUSTED REPRICED CLAIM NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. REF with REF01 $=$ " 9 C " is allowed. | Only one iteration of 2300. REF with REF $01=" 9 \mathrm{C}$ " is allowed. | Pass through, syntax only |
| X222.200.2300.REF01.010 | ReFol | Reference Identification Qualifier | 10 | 2.3 | R |  |  | 9 C | 999 | R | (Missing" | 2300. REF01 must be present. | 2400. REF01 must be present. |  |
| X222.200.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 $=7$ : "Invalid Code Value" | 2300. REF01 must be "9C". | 2300. REF01 must be "9C". |  |
| X222.200.2300.REFO2.010 | REFO2 | Adjusted Repiced Line tem Reference Number | an | ${ }^{1.50}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300. REFO2 must be present. | 2300. REFO2 must be present. |  |
| X222.200.2300.REF02.020 | REFO2 |  |  |  |  |  |  |  | ${ }^{999}$ | R | 1K403 $=6$ : "Invalid Character in Data Element" | 2300.REF02 must contain at least one nonspace character | 2300.REF02 must contain at least one nonspace character. |  |
| X222.200.2300.REF02.030 | ReFor |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2330. REFO2 must be 1-50 characters. | 2330. REFO2 must be 1-50 characters. |  |
| X222.200.230.REFF02.040 | REF02 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 517: "Adjusted Repriced Claim Reference Number" |  |  |  |
| X222.200.2300.REF02.050 | ReFor |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. | 2300.REF02 must be populated with accepted AN characters. |  |
| x222.200.2300.REF02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222,200.2300.REF03.010 | REFO3 | Descripion | AN | 1-80 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.200.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.201.2300.REF. 010 | REF | INVESTIGATIONAL DEVICE EXEMPTION NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "LX" is allowed. | Only one iteration of 2300.REF with REF01 = "LX" is allowed. |  |
| X222.201.2300.REF01.010 | REF01 | Reference Idenification Qualifier | 10 | ${ }^{2.3}$ | R |  |  | Lx | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300. REF01 must be present. | 2300. REF01 must be present. |  |
| X222.201.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 $=7$ : "Invalid Code Value" | 2300.REF001 must be "LX". | 2300.REF001 must be "LX". |  |
| X222.201.2300.REF02.010 | REFO2 | ${ }^{\text {Invesigational Device Exemplion }}$ Number | an | ${ }^{1.50}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REFO2 must be present. | 2300. REFO2 must be present. |  |
| X222.201.2300.REFF2.020 | ReFo2 |  |  |  |  |  |  |  | 999 | R | KK403 $=6$ : "IIvaidid Character in Data Element | 2300. REFO2 must contain at least one nonspace character | 2300 REFO2 must conlain at least one nonspace character. |  |
| X222.201.2300.REF02.030 | ReFoz |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | $2300 . \mathrm{REFO2}$ must be 1.50 characters. | $2300 . \mathrm{REF} \mathrm{O}$ must be $1-50$ characters. |  |
| X222.201.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7 Acknowledgement/Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 579: "Investigational Device Exemntion Identifier" |  |  |  |
| X222.201.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. | 2300.REF02 must be populated with |  |


| Edit Reference | Segment or Element | Description | 10 | $\mathrm{M}_{\substack{\text { min. } \\ \text { Max. }}}^{\text {a }}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repat }}}{\text { den }}$ | 5010A1 Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { AcceptIRe } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.201.2300.REF02.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.201.2300.REFO3.010 | REFO3 | Descripion | AN | 1-80 | Nu |  |  |  | 999 | E | (K4033 $=100$ " "mplementation "Not | Must not be present. | Must not be present. |  |
| x222.201.2300.REFF0.010 | REF04 | Reference IIENTIFIER |  |  | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.202.2300.REF. 010 | REF | CLAIM IDENTIIIER FOR TTANSISIIN |  | 1 | s | 2300 |  |  | 999 | R |  | Only one iteration of 2300.REF with REF01 = "D9" is allowed. | Only one iteration of 2300.REF with REF01 = "D9" is allowed. | Pass trough, syntax only |
| x222.202.2300.REFF0.010 | REF01 | Reference Identification Qualifier | 10 | 2.3 | R |  |  | D9 | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. | $2300 . \mathrm{REFF01}$ must be present. |  |
| X222.202.2300.REFF0.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{7}$ : "Invalid Code Value" | 2300. REF001 must be "D9". | 2300. REF01 must be "D9". |  |
| X222.202.2300.REFFO.010 | REFO2 | Clearinghouse Trace Number | AN | ${ }^{1.50}$ | R |  |  |  | 999 | R |  | 2300.REFO2 must be present. | ${ }^{2300 . R E F 02 ~ m u s t ~ b e ~ p e s e s t . ~}$ |  |
| X222.202.2300.REFFO2.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 230..REFO2 must conlain at least one non- space character. | 2300. REFO2 must contain at least one non- space character. |  |
| X222.202.230.REEFO2.030 | ReFor |  |  |  |  |  |  |  | 999 | E | IK403 5 : "Data Element Too Long" | 2330. REFO2 must be $1-20$ characters. | 2300. REFO2 must be $1-20$ characters. |  |
| X222.202.2300.REFFO2.040 | ReFor |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7 Acknowled CSC 512. application system" CSC 543: "Clearinghouse or Value Added Network Trace" |  |  |  |
| X222.202.230.REFF02.050 | ReFo2 |  |  |  |  |  |  |  | 999 | R | IK403 =6:" "Ivalid Character in Data Element" | 2300. REFO2 must be populated with accepeed AN characters. |  |  |
| X222.202.2300.REF02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.202.230.REE03.010 | REFO3 | Description | AN | 1-80 | NU |  |  |  | 999 | E | 1 K003 $=110:$ "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.202.230.REEF04.010 | REFO4 | REFERENCE IIENTIFIER |  |  | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.204.2300.REF.010 | REF | MEIICAL RECORD NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "EA" is allowed. | Only one iteration of 2300. REF with REF01 = "EA" is allowed. |  |
| X222.204.230.REEF01.010 | ReFor | Reference Idenification Qualifier | 10 | $2 \cdot 3$ | R |  |  | EA | 999 | R | (ka03 = 1: "Required Data Element | 2300. REF01 must be present. | ${ }^{2300 . R E F F 01 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| X222.204.230. ${ }^{\text {ReFF01.020 }}$ | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{7}$ : "IIvalid Code Value" | $2300 . \mathrm{REF01}$ must be "EA". | $2300 . R E F 01$ must be "EA". |  |
| X222.204.2300.REFFO2.010 | Refo2 | Medical Record Number | AN | 1.50 | R |  |  |  | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2300.REFO2 must be present. | 2300.REFO2 must be present. |  |
| X222.204.230.REEF02.020 | REFO2 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 230..REFO2 must contain at least one non- space character. | 2300. REFO2 must contain at least one non- space character. |  |
| X222.204.230.REEFO2.030 | REFO2 |  |  |  |  |  |  |  | 999 | E | IK403 5 : "Data Element Too Long" | 2300. REFO2 must be $1-50$ characters. | $2330 . R$ EFO2 must be 1 - 50 characters. |  |
| X222.204.2300.REFFO2.040 | REF02 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> application CSC 588. "Medica <br> CSC 588: "Medical Record Number" |  |  |  |
| X222.204.2300.REFO2.050 | REFO2 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { Ka403 = } 6 \text { " } \\ & \text { Elemvalid Character in Datata } \end{aligned}$ | 230. REFO2 must be populated with accepeled $A N$ characters. | 2300. REFO2 must be populated with accepered AN characters. |  |
| x222.200.230.REF02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222, 204.2300.REF03.010 | Refo3 | Descripion | AN | 1-80 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.204.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.205.2300.REF.010 | REF | $\underset{\substack{\text { DEMONSTRATION PROJECT } \\ \text { IDENTIFIER }}}{\text { Ren }}$ |  | 1 | s | 230 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only one iteration of 2300.REF with REF $=01=$ "P4 is allowed. | Only one iteration of 2300.REF with REFO1 = $\mathrm{P4}$ " is allowed. |  |
| X222.205.2300.REF01.010 | ReFor | Reference Identification Qualifier | 10 | 2.3 | R |  |  | P4 | 999 | R | (ka03 = 1: "Required Data Element | 2300. REF01 must be present. | $2300 . \mathrm{REF01}$ must be pesent. |  |
| X222.205.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{7}$ : "Invalid Code Value" | $2300 . R E F 01$ must be "P4". | 2300. REF01 must be "P4". |  |
| X222.205.2300.REFF2.010 | REFO2 | Demonstration Project Identifer | AN | ${ }^{1.50}$ | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.REFO2 must be present. | 2300. REF02 must be present. |  |
| X222.205.2300.REFF02.020 | ReFo2 |  |  |  |  |  |  |  | ${ }^{999}$ | R |  | 2300. REFO2 must contain at least one non- | $230 . R E=02$ must contain at least one non- space character. |  |
| X222.205.2300.REF02.030 | REFO2 |  |  |  |  |  |  |  | 999 | E | IK403 5 : "Data Element Too Long" | $2330 . R$ EFO2 must be 1-50 characters. | 2330. REFO2 must be 1-50 characters. |  |
| X222.205.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system Identifier" |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | min. Max. | $\begin{array}{\|l\|l} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TAII } \\ \text { T } 979 / 1 \end{gathered}$ | $\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part } \mathrm{B} \end{gathered}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.205.2300.REFF2.050 | REFO2 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 732: Information submitted inconsistent with billing guidelines CSC 556: Demonstration Project | If 2300.REF02 (REF01=P4) is a valid VA demonstration project identifier <br> 1000B.NM109 must be 04402 or 04412 | If 2300.REF02 (REF01=P4) is a valid VA demonstration project identifier 1000B.NM109 must be 04402 or 04412 . | TrailBlazer or JH (Texas), only, as appropriate for current MAC contract for VA MRA Project claims. current MAC contract for VA MRA Project claims. |
| X222.205.2300.REFF3.010 | Refo3 | Descripition | AN | 1-80 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.205.2300.REFF0.010 | REFO4 | REFERENCE IDENTIFIER |  |  | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.206.2300.REF.010 | REF | CARE PLAN OVERSIGHT |  | 1 | s | 2300 |  |  | ${ }^{999}$ | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. REF with REF01 = " 1 J " is allowed. | Only one iteration of 2300. REF with REF01 $=430$ is allowed. |  |
| X222.206.2330.REFF0.010 | ReFor | Reference Idenificiation Qualifer | 10 | 2-3 | R |  |  | ${ }^{11}$ | -99 | R | IK403 = 1: "Required Data Element Missing" | 2300. REF01 must be present. | ${ }^{2300 . R E F 01 ~ m u s t ~ b e ~ p e r e s e n t . ~}$ | 02/10: VA will not use this segment, so there are no issues with requiring NPI. |
| X222.206.2300.REFF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 7 7: "Invalid Code Value" | $2300 . R E F 01$ must be "1J". | $2300 . R E F 01$ must be "IJ". |  |
| X222.206.2330.REFFO2.010 | REF02 | Care Plan Oversight Number | AN | ${ }^{1.50}$ | R |  |  |  | ${ }^{999}$ | R | \|K403 = 1: : Required Data Element Missina" | 2300.REFO2 must be present. | $2300 . R E F 02$ must be present. |  |
| x222.206.2300.REFFO.020 | ReFor |  |  |  |  |  |  |  | 277 | c |  | 2300.REFO2 must be valid according to the NPI algorithm. | 2300.REF02 must be valid according to the NPI algorithm. |  |
| x222.206.2300.REFFO2.030 | REFO2 |  |  |  |  |  |  |  | 277 | c | AcknowledgementRejected for Invalid Information..." CsC 14 <br> Care Plan Oversight | The first position of 2300 . REF02 must be a "1". | The first position of 2300 . REF02 must be a "1". |  |
| X222.206.2300.REFFO.010 | REFO3 | Descripion | AN | 1-80 | n/ |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.20. 2300. REF04.010 | REF04 | REFERENCE IIENTIFIER |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.207.230.к..010 | к3 | FILE INFORMATION |  | 10 | s | 2300 |  |  | 999 | R |  | Only ten iterations of K 3 are allowed. | Only ten iterations of K 3 are alowed. |  |
| X222.207.2300.K301.010 | к301 | Fixed Format Intormation | AN | 1-80 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | $2330 . \mathrm{k} 301$ must be present. | 2300. K301 must be present. |  |
| X2222.207.2300.K301.020 | к301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. K301 must contain at least one non- space character. | 2300. K301 must contain at least one non- space character. |  |
| X222.207.2300.к301.030 | к301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.1301 must be 1.88 characters. | 2300.1301 must be 1.80 characters. |  |
| X222.207.230..K301.040 | к301 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's applcation system <br> CSC 569: "Fixed Format Information" |  |  |  |
| X222.207.2300.K301.050 | K301 |  |  |  |  |  |  |  | 999 | R | (K403=6:"Invalid Character in Data | 230. . 3311 must be populated with accepled AN characters. | 2300.3301 must be populated with accepped AN characers. |  |
| x222.207.2300.K301.060Edit Deactivaeded |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.207.2300.K302.010 | к302 | Record Format Code | 10 | 1.2 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times$ х222.207.2300.к303.010 | к303 | COMPOSTIE UNIT OF <br> MEASURE |  |  | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.209.2300.NTE.010 | NTE | CLAIM Note |  | 1 | s | 2300 |  |  | 999 | R | $1 K 304=5: ~ " S e g m e n t ~ E x c e e d s ~$ <br> Maximum Use" | Only one iteration of 2300.NTE is allowed. | Only one iteration of 2300.NTE is allowed. |  |
| X222.209.2300.NTE01.010 | NTE01 | Note Reference Code | 10 | ${ }^{3} 3$ | R |  |  | $\begin{gathered} \begin{array}{c} \text { ADD, CER, DCP, } \\ \text { DGN, TPO } \end{array} \\ \hline \end{gathered}$ | 999 | R | (Kasi 1: "Required Data Element | 2300. NTE01 must be pesent. | 2300 NTE01 must be present. |  |
| X222.209.2300.NTE01.020 | NTE01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | $2300 . \mathrm{NTE01}$ must be ealid values. | $2300 . \mathrm{NTE01}$ must be evaid values. |  |
| x222.209.2300.NTE02.010 | NTE02 | Claim Note Text | AN | 1-80 | R |  |  |  | 999 | R | \|K403 1 : "Required Data Element Missing" | 2300.NTE02 must be present. | ${ }^{2300 . N T E 02 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| х222.209.2300.NTE02.020 | NTE02 |  |  |  |  |  |  |  | ${ }^{999}$ | R |  Element" | 2300.NTEO2 must contain at least one non- space character. | 2300.NTEO2 must contain at least one non- space character. |  |
| X222.209.2330.NTE02.030 | NTE02 |  |  |  |  |  |  |  | ${ }^{999}$ | E | IK403 = 5: "Data Element Too Long" | 2300 .NTE02 must be 1-80 characters. | 2300.NTE02 must be 1 - 80 characters. |  |
| x222.209.2300.NTE02.040 | nteor |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid nformation..." <br> application systh invalid for receiver's CSC 297: "Medical Notes/Report" |  |  |  |
| х222.209.2300.NTE02.050 | NTE02 |  |  |  |  |  |  |  | 999 | R |  | 2300.NTEO2 must be poppulated with accepted AN characters. | 2300.NTEO2 must be populated with accepete AN characters. |  |
| X222.209.2300.NTE02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.211.2300.CR1.010 | CR1 | AMBULANCE TRANSPORT NFORMATION |  | 1 | s | 2300 |  |  | ${ }^{999}$ | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2300.CR1 is allowed. | Only one iteration of 2300.CR1 is allowed. |  |
| ×222.211.2300.CR1.020 | CR1 |  |  |  |  |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for Invalid Information. CSC 337: "Ambulanc certification/documentation | It 2300.CR1 is present. 230.CLM05-1 must te 41 " or "42". | If 2300.CR1 is present, 2300.CLM05-1 must be "41" or "42". | 02/04: Companion Suide Note needed. |

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| Edit Reference | Segment or Element | Description | 10 | Min <br> max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010101 values | $\begin{gathered} \text { TAII } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | $\begin{array}{\|c} \text { Acceptrei } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\underset{\text { Prat B }}{\text { Proposed 5010A1 Edits }}$ | $\underset{\substack{\text { Proposed 501001 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.211.2300.CR101.010 | CR101 | Unit or Basis for Measurement <br> Code | 10 | 2.2 | s |  |  | LB | 999 | R | 1K003 $=7$ : "Invalid Code Value" | 2300.CR101 must be "LB". | $2300 . C R 101$ must be "LE". |  |
| X222.211.2300.CR102.010 | CR102 | Patient Weight | R | 1-10 | s |  |  |  | 999 | R | IKAO3 $=2:$ "Conditional Required Data <br> Element Missing | It 2300. CR101 i i p present, then 2300.CR102 must be present | ${ }^{\text {It } 2300 . C R 101 \text { in spesent, then 2300.CR102 }}$ |  |
| X222.211.230.CR102.015 | CR102 |  |  |  |  |  |  |  | 999 | E | 1K403 =5: "Data Element Too Long" | 2380. CR102 must be $>0$ and $<=9,999.99$ | 2300.CR102 must be $>0$ and $<=9,999.99$ |  |
| ×222.211.2300.CR102.220 | CR102 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid nformation..." <br> CSC 512: "Length invalid for receiver's application system" CSC 337: "Ambulance |  |  | 12/2: Companion Guide note needed - instruct submitters to send <TBD> if transport was not actually conducted. <br> $02 / 11$ : Submitted a HIR to X12 to clarify the around. |
| X222.211.2300.CR103.010 | CR103 | Ambulance Transpor Code | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not te present. | Must not be present. |  |
| X222.211.2300.CR104.010 | CR104 | Ambulance Transport Reason Code | 10 | ${ }^{1-1}$ | R |  |  | A, B, C, D, E | 999 | R |  | 2300.CR104 must be present. | 2300.CR104 must be present. |  |
| X222.211.230.CR104.020 | CR104 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | $2300 . C R 1044$ must be valid values. | $2300 . C$ CR104 must be evaid values. |  |
| X222.211.2300.CR105.010 | CR105 |  | 10 | 2.2 | R |  |  | DH | 999 | R |  | $2330 . C R 105$ must be present. | $2300 . C R 105$ must be present. |  |
| X222.211.230.CR105.020 | CR105 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | $2300 . C R 105$ must be "DH". | $2300 . C R 105$ must be "DH". |  |
| X222.211.2300.CR106.010 | CR106 | Transport istance | R | ${ }^{1-15}$ | R |  |  |  | 999 | R | ${ }^{1 K 4033}=1:$ "Required Data Element | $2300 . C R 106$ must be present. | $2330 . C R 106$ must te present. | 03/31: Medicare specific limitation. |
| X222.211.2300.CR106.020 | CR106 |  |  |  |  |  |  |  | 999 | R |  | $2300 . C R 106$ must be numeric. | $2300 . C R 106$ must be numeric. |  |
| X222.211.230.CR106.025 | CR106 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | $2300 . C$ R106 must be $\Rightarrow>0$ and $<=9999$. | $2300 . C R 106$ must be => 0 and < $=9999$. |  |
| X222.211.2300.CR106.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.211.2300.CR106.040 | CR106 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 267 "Number of miles patient was transported |  |  |  |
| X222.211.2300.CR107.010 | CR107 | Address intormation | AN | 1.55 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.211.2300.CR108.010 | CR108 | Address intormaion | AN | ${ }^{1.55}$ | NU |  |  |  | ${ }^{999}$ | E |  | Must not be present. | Must not be present. |  |
| X222.211.2300.CR109.010 | CR109 | Round Trip Purpose Descripion | AN | 1.80 | s |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | $2300 . C$ CR109 must be 1 - 80 characters. | $2330 . C$ CR109 must be 1-80 characters. |  |
| x222.211.2300.CR109.020 | CR109 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 266: "Facility point of origin and |  |  |  |
| X222.211.2300.CR109.030 | CR109 |  |  |  |  |  |  |  | 999 | R | $\begin{array}{l}\text { IK403 = 6: "Invalid Character in Data } \\ \text { Element" }\end{array}$ | 230.CR109 must be populated with accepped $A N$ characters. | 2300.CR109 must be populated with accepeed AN haracters. |  |
| X222.211.2300.CR109.040 | CR109 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | Acknowedgementrejected for Invalid Intormation... <br> CSC 266: "Facility point of origin and <br> destination antuace |  |  |  |
| X222.211.2300.CR109.050 | CR109 |  |  |  |  |  |  |  | 999 | R |  | 2300. CR109 must contain at least one non- | 2300. CR109 must contain at least one non- space character |  |
| X222.211.2300.CR110.010 | CR110 | Strecther Purpose Descripion | AN | 1.80 | s |  |  |  | 999 | R |  | 2300.CR110 IU ust contain at least one non- space character. | 2300. CR110 must contain at least one non- space character. |  |
| X222.211.2300.CR110.020 | CR110 |  |  |  |  |  |  |  | 999 | E | IK003 = 5: "Data Element Too Long" | $2300 . C$ R110 must be 1-80 characters. | 2300. CR110 must be 1.80 characters. |  |
| X222.211.2300.CR111.030 | CR110 |  |  |  |  |  |  |  | 277 | T | CSCC A7: Acknowledge Information CSC 512: "Length invalid for receiver's application system CSC 711:: "Stretcher Purbose: |  |  |  |
| X222.211.2300.CR111.040 | CR110 |  |  |  |  |  |  |  | 999 | R |  | 230. CR110 must be populated with accented AN charactess. | 2300. CR110 must be populated with accepered $A \mathrm{~N}$ characters. |  |
| X222.211.2300.CR110.050 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.214.2300.CR2.010 | CR2 | SPINAL MANIPULATION SERVICE INFORMATION |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . C R 2$ is allowed. | Only one iteration of 2300.CR2 is allowed. |  |
| X222.214.2300.CR201.010 | CR201 | Treatment Series Number | No | 1.9 | NU |  |  |  | 999 | E | K4033 $=110:$ "Implementaion "Not | Must not be pesesent. | Must not be present. |  |
| X222.214.2300.CR202.010 | CR202 | Treament Count | R | 1.15 | nu |  |  |  | 999 | E | IK403 = 110.7 "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.214.2300.CR203.010 | CR203 | Subluxation Level Code | ${ }^{10}$ | ${ }^{2 \cdot 3}$ | Nu |  |  |  | 999 | E | (K403 = 110.7 "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.214.2300.CR204.010 | CR204 | Subluxation Level Code | 10 | ${ }^{2 \cdot 3}$ | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.214.230.CR2005.010 | CR205 | Unito or Basis for Measurement <br> Code | 10 | 2.2 | nu |  |  |  | 99 | E | (K403 = 110.7 "Implemenenation "Not | Must not be present. | Must not be present. |  |

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| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { min. } \\ \text { max. } \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\substack{\text { Loop } \\ \text { Repeat }}$ | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TAAl } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.214.2300.CR206.010 | CR206 | Treament Period Count | R | 1-15 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| X222.214.2330.CR200.010 | CR207 | Mornhy Treatment Count | R | ${ }^{1.15}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.214.2330.CR208.010 | CR208 | Patient Condition Code | 10 | ${ }^{1-1}$ | R |  |  | A, C, D, E, , , G, M | 999 | R |  | $2300 . C R 208$ must be pesent. | $2300 . C R 208$ must be pesest. |  |
| X222.214.2330.CR208.020 | CR208 |  |  |  |  |  |  |  | 999 | R | 1K403 =7:"Invalid Code Value" | $2300 . C R 208$ must be valid values. | $2300 . C$ 2208 must be valid values. |  |
| x222.214.2300.CR209.010 | CR209 | Complication Indicator | ID | ${ }^{1-1}$ | NU |  |  |  | 999 | E | 1 K403 $=10:$ "Implementation "Not Used Ele Element Present | Must not be present. | Must not be present. |  |
| x222.214.2300.CR210.010 | CR210 | Patient Condition Descripion | AN | 1-80 | s |  |  |  | 999 | R |  |  | 2300. CR210 must contain at least one non- space character. |  |
| x222.214.2300.CR210.020 | CR210 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | $2300 . C R 210$ must be 1-80 characters. | 2300. CR210 must be 1 - 80 characters. |  |
| x222.214.2330.CR210.030 | CR210 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 713:: "Patient Condition Descriotion" |  |  |  |
| X222.214.2330.CR210.040 | CR210 |  |  |  |  |  |  |  | 999 | R |  | 2300. CR210 must be populated d with accepted AN characters. | 2300. CR210 must be populated with accepeded AN characters. |  |
| X222.214.2300.CR210.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x2222.214.2300.CR211.010 | CR211 | Patient Condtion Descripion | AN | 1-80 | s |  |  |  | 999 | R | $\begin{gathered} \text { KK03 = } 6 \text { " "Ivaid Character in Data } \\ \text { Flement: } \end{gathered}$ | 2300.CR211 must contain at least one non- space character. | 2300. CR211 must contain at least one non- space character. |  |
| x222.214.2300.CR211.020 | CR211 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2300. CR211 must be 1 - 80 characters. | $2330 . C$ CR211 must be 1-80 characters. |  |
| x222.214.2330.CR211.030 | CR211 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| ×2222.214.2300.CR211.040 | CR211 |  |  |  |  |  |  |  | 999 | R |  | 2300. CR211 must be populated d with accepted AN characters. | 2300. CR211 must be populated with accepeted $A \mathrm{~N}$ characters. |  |
| X222.214.2300.CR211.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.214.2300.CR212.010 | CR212 | YesNo Condition or Response Code | 10 | ${ }^{1-1}$ | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.216.2300.CRC.010 | CRC | ambulance certification |  | 3 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only three iterations of 2300.CRC with CRC01 = "07" are allowed. | Only three iterations of 2300.CRC with CRC01 = "07" are allowed. |  |
| X222.216.230.CRC.020 | CRC |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowiedgement/Rejected for Invalid Information.. CSC 337: "Ambulanc certification/documentation | It 2300.CRC is present, 2300.CLM05-1 must be "41" or "42". | If 2300.CRC is present, 2300.CLM05-1 must be "41" or "42". |  |
| X222.216.2330.CRC01.010 | CRCO1 | Code Calegory | 1 D | 2.2 | R |  |  | 07 | 999 | R | K403 $=1$ : "Required Data Element Missing" | $2300 . C R C 01$ must be present. | $2300 . C R C 01$ must be present. |  |
| X222.216.2330.CRC01.020 | CRC01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7."Invid Code Value" | 2300.CRC01 must be "07". | $2300 . C R C 01$ must be "O7". |  |
| X222.216.2330.CRC02.010 | CRC02 | Cerificaion Condition Indicator | 10 | ${ }^{1-1}$ | R |  |  | N, ${ }^{\text {r }}$ | 999 | R | \|K403 =1: "Required Data Element Missina" | $2300 . C R C 02$ must be pesent. | $2300 . C R C 02$ must be present. |  |
| X222.216.2330.CRC02.020 | CRC02 |  |  |  |  |  |  |  | 999 | R | 1/403 =7: "Invalid Code Value" | $2300 . C R C 02$ must be valid values. | $2300 . C R C 02$ must be vaid values. |  |
| x222.216.2300.CRC03.010 | CRCO3 | Condition Code | 10 | ${ }^{2.3}$ | R |  |  | 01, 04, 05, 06, 07, $08,09,12$ | 999 | R | K403 $=1$ : "Required Data Element Missing" | 2300.CRC03 must be present. | 2300.CRCO3 must be present. |  |
| x222.216.2330.CRC03.020 | CRCO3 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invali Code Value" | $2300 . C R C 03$ must be valid values. | $2330 . C R C 03$ must be vaid values. |  |
| K222.216.230..CRC04.005Edit Deacivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.216.2330.CRC04.010 | CRC04 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | ${ }^{2300 . C R C 04 ~ m u s t ~ b e ~ v a l i d ~ v a l u e s . ~}$ | $2300 . C R C 04$ must be valid values. |  |
| x2222.216.2300.CRC05.010 | CRC05 | Condition Code | 10 | ${ }^{2.3}$ | s |  |  | $\begin{array}{\|c} \hline 01,04,05,06,07, \\ 08,09,12 \\ \hline 08,0,12 \end{array}$ | 999 | R | IKA03 $=2:$ " "nonditional Required Data EElement Missing" | $\begin{aligned} & 2330 . C R C \text { CO5 can only be present if } \\ & 2300 . C R C 04 \text { is present. } \end{aligned}$ | $\begin{aligned} & 2330 . C R C O 5 \text { can only be present if if } \\ & 2300 \mathrm{CRCO} 04 \text { is present. } \end{aligned}$ |  |
| X222.216.2330.CRC05.020 | CRC05 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | ${ }^{2300 . C R C 05 ~ m u s t ~ b e ~ v a l i d ~ v a l u e s . ~}$ | ${ }^{2300 . C R C 05 ~ m u s t ~ b e ~ v a l i d ~ v a l u e s . ~}$ |  |
| x2222.216.2300.CRC006.010 | CRC06 | Condition Code | 10 | 2.3 | s |  |  | 01, 04, 05, 06, 07, $08,09,12$ | 999 | R | $1 K 403=2:$ "Conditional Required Data Element Missing and | $230 . C R C O 6$ cal onlly be present if $2300 . C R C 05$ is present. |  |  |
| x222.216.2300.CRC06.020 | CRC06 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | ${ }^{2300 . C R C O 6 ~}$ must be valid values. | $2300 . C R C 06$ must be vaid values. |  |
| x2222.216.2300.CRC07.010 | CRC07 | Condition Code | 10 | ${ }^{2.3}$ | s |  |  | $\begin{gathered} 01,04,05,06,07 \\ 08,09,12 \\ \hline \end{gathered}$ | ${ }^{999}$ | R | 1 K403 $=2:$ " " Nonditional Required Data Element Missing | ${ }_{230}^{230 . C R C O T C}$ can only be present if | $\begin{aligned} & 2330 . C R \text { COT can only be present if if } \\ & 2300 . \mathrm{CRCO} \text { is present. } \end{aligned}$ |  |
| X222.216.2330.CRC07.020 | CRC07 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invali Code Value" | ${ }^{2300 . C R C 07 ~ m u s t ~ b e ~ v a l i d ~ v a l u e s . ~}$ | $2300 . C R C 07$ must be vaid values. |  |
| X222.219.2300.CRC. 010 | CRC | PATIENT CONDItION INFORMATION: VISION |  | ${ }^{3}$ | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only three iterations of 2300.CRC with CRC01 = "E1", "E2" or "E3" are allowed | Only three iterations of 2300. CRC with CRC01 = "E1", "E2" or "E3" are allowed |  |
| x222.219.2300.CRC01.010 | CRCO1 | Code Category | ID | 2.2 | R |  |  | E1, E2, E3 | 999 | R |  | 2300.CRC01 must be present. | 2300.CRC01 must be present. |  |
| X222.219.2300.CRC01.020 | CRCO1 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | $2300 . C R C 01$ must be valid values. | $2300 . C R$ C01 must be vaid values. |  |
| x222.219.2300.CRC02.010 | CRC02 | Cerification Condition Indicator | 10 | ${ }^{1-1}$ | R |  |  | N, Y | 999 | R | ${ }_{\text {Missina }}^{\text {K403 }} 1$ : "Required Data Element | $2300 . C R$ C02 must te present. | $2300 . C R C 02$ must be present. |  |

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Professional Edits

| Edit Reference | Segment or Element | Description | 10 | ${ }^{\text {min }}$ <br> max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 values | $\begin{gathered} \text { TAMI } \\ \text { 27991 } \\ 297 \mathrm{CA} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.219.2300.CRC02.020 | CRC02 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Invalid Code Value" | $2300 . C R C 02$ must be valid values. | $2300 . C R C 02$ must be valid values. |  |
| X222.219.2300.CRC03.010 | CRC03 | Condition Code | 10 | 2-3 | R |  |  | L1, L2, L3, L4, L5 | 999 | R |  | 2300.CRC03 must be present. | 2300.CRC03 must be present. |  |
| х222.219.2300.CRC03.020 | CRC03 |  |  |  |  |  |  |  | 999 | R | \|k403 $=7$ : "Invalid Code Value" | $2300 . C R C 03$ must be valid values. | $2300 . C R C 03$ must be valid values. |  |
| X2222.219.2300.CRC04.010 | CRC04 | Condition Code | ID | 2.3 | s |  |  | L1, L2, L3, L4, L5 | 999 | R | 1 K403 $=2:$ : Conditional Required Data Elemert Hissing" | 2300.CRC04 can only be present if $2300 . \mathrm{CRC03}$ is present. | 2300.CRC04 can only be present if $2300 . \mathrm{CRC03}$ is present. |  |
| X222.219.2300.CRC04.020 | CRC04 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | $2300 . C R C 04$ must be valid values. | $2300 . C R C 04$ must be valid values. |  |
| X222.219.2300.CRC05.010 | CRC05 | Condition Code | 10 | ${ }^{2 \cdot 3}$ | s |  |  | LL, L2, L3, L4, L5 | 999 | R | 1 K403 = $2:$ "Conditional Required Data Element Missing | 2300.CRC05 can only be present if 2300.CRC04 is present. | 2300.CRC05 can only be present if 2300.CRC04 is present. |  |
| X222.219.2300.CRC05.020 | CRC05 |  |  |  |  |  |  |  | 999 | R | \|k403 =7: "Invaid Code Value" | $2300 . \mathrm{CRCO5}$ must be evaid values. | $23000 . \mathrm{CRCO5}$ must be valid values. |  |
| X222.219.2300.CRC06.010 | CRC06 | Condition Code | 10 | ${ }^{2.3}$ | s |  |  | L1, L2, L3, L4, L5 | 999 | R | 1 K003 $=2:$ " " Conditional Required Data Element Missing | 2300.CRC06 can only be present if 2300.CRC 05 is present. | 2300.CRCO6 can only be present if $2300 . \mathrm{CRC} 05$ is present. |  |
| X222.219.2300.CRC06.020 | CRC06 |  |  |  |  |  |  |  | 999 | R | \|k403 $=7$ : "Invalid Code Value" | $2300 . C R C 06$ must be valid values. | $2300 . C R C 06$ must be valid values. |  |
| X222.219.2300.CRC07.010 | CRC07 | Condition Code | $1{ }^{1}$ | ${ }^{2 \cdot 3}$ | s |  |  | LL, L2, L3, L4, L5 | 999 | R | 1K403 =2: "Conditional Required Data Element Missing | 2300.CRC07 can only be present if 2300. CRC06 is present. | 2300.CRC07 can only be present if |  |
| X222.219.2300.CRC07.020 | CRC07 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Ivalid Code Value" | $2300 . C R C 07$ must be valid values. | $2300 . C R C 07$ must be valid values. |  |
| х222.221.2300.CRC. 010 | CRC | homebound inoicator |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CRC with CRC01 = "75" is allowed | Only one iteration of 2300.CRC with CRC01 = "75" is allowed |  |
| X222.221.2300.CRC01.010 | CRC01 | Code Category | 10 | 2-2 | R |  |  | 75 | 999 | R | IK403 = 1: "Required Data Element | 2300.CRC01 must be present. | 2300.CRC01 must be present. |  |
| X222.221.2300.CRC01.020 | CRC01 |  |  |  |  |  |  |  | 999 | R | \|K403 $\mathbf{7}$ 7."Ivalid Code Value" | 2300.CRC01 must be "75". | 2300.CRC01 must be "75". |  |
| X222.221.2300.CRC02.010 | CRC02 | Cerificaion Condition Indicator | $1{ }^{1}$ | ${ }^{1-1}$ | R |  |  | Y | 999 | R |  | $2300 . C$ CRC02 must be present. | $2300 . C$ CRC02 must be pesent. |  |
| X222.221.2300.CRCO2.020 | CRCO2 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | $2300 . C R C 02$ must be "Y". | $2300 . C$ CRCO2 must be "Y". |  |
| X222.221.2300.CRCO3.010 | CRC03 | Homebound Indicator | $1{ }^{1}$ | ${ }^{2 \cdot 3}$ | R |  |  | ${ }^{1+}$ | 999 | R |  | 2300.cRC03 must be present. | 2300.CRC03 must be present. |  |
| X222.221.2300.CRC03.020 | CRC03 |  |  |  |  |  |  |  | 999 | R | 14403 =7: "Invalid Code Value" | 2300.CRC03 must be "HH". | $2300 . C R C 03$ must be "HH": |  |
| X2222.212.2300.CRC04.010 | CRC04 | Condition Indicator | 1 D | $2 \cdot 3$ | NU |  |  |  | 999 | E | (14033 $=110$. "Implemenataion "Not | Must not be present. | Must not be present. |  |
| x222.221.2300.CRC05.010 | CRC05 | Condition Indicator | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not te present. | Must not be present. |  |
| X222.221.2300.CRC06.010 | CRC06 | Condtion Indicator | 10 | 2.3 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present | Must not be pesent. | Must not be pesent. |  |
| X2222.221.2300.CRC07.010 | CRC07 | Condition Indicator | 10 | 2.3 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.223.2300.CRC. 010 | CRC | EPSDt REFERRAL |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CRC with CRC01 = "ZZ" is allowed | Only one iteration of 2300.CRC with CRC01 $=$ "ZZ" is allowed. | Pass Through Symax Only |
| X222.223.2300.CRC01.010 | CRCO1 | Code Category | ID | 2-2 | R |  |  | zz | ${ }^{999}$ | R | ${ }^{1 K 4033}=1:$ :Required Data Element | $2300 . C$ cra0 must be present. | $2300 . C$ crco1 must be pesent. |  |
| X222.223.2300.CRC01.020 | CRCO1 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invid Code Value" | 2300.CRC01 must be "ZZ". | 2300.CRC01 must te "ZZ". |  |
| X222.223.2300.CRC02.010 | CRC02 | Cerificaion Condition Indicator | ID | ${ }^{1-1}$ | R |  |  | N, Y | 999 | R | ${ }^{\text {Kand }}$ Missing $=1$ : :Required Data Element | $2300 . C$ CRC02 must be present. | $2300 . C R C 02$ must be present. |  |
| X222.223.2300.CRC02.020 | ${ }^{\text {CRCO2 }}$ |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Invalid Code Value" | $2300 . C R C 02$ must be valid values. | $2300 . C R C 02$ must be valid values. |  |
| X222.223.2300.CRCO3.010 | CRC03 | Condition Code | 10 | ${ }^{2 \cdot 3}$ | R |  |  | $\mathrm{AV}, \mathrm{NU}, \mathrm{S2}, \mathrm{ST}$ | 999 | R | K403 1: Reequired Data Element | 2300.cRC03 must be present. | 2300.CRC03 must be present. |  |
| x222.223.2300.CRC03.020 | CRC03 |  |  |  |  |  |  |  | 999 | R | 11403 $\mathbf{~ 7 ~ : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ |  |  |  |
| X2222.223.2300.CRC03.030 | CRC03 |  |  |  |  |  |  |  | 999 | R | 11403 $=7$ : "Invalid Code Value" |  |  |  |
| X222.223.2300.CRC04.010 | $\mathrm{CrCO}^{4}$ | Condition Code | 10 | 2.3 | s |  |  | $\mathrm{AV}, \mathrm{NU}, \mathrm{S} 2, \mathrm{ST}$ | 999 | R | 1K403 =7: "Invalid Code Value" | $2300 . \mathrm{CRCO} 4$ must be valid values. | $2300 . C R C 04$ must be valid values. |  |
| X222.223.2300.CRC05.010 | CRCO5 | Condition Code | ID | $2 \cdot 3$ | s |  |  | $\mathrm{AV}, \mathrm{NU}, \mathrm{S} 2, \mathrm{ST}$ | 999 | R | 1K403 =7: "Invalic Code Value" | $2300 . C R C 05$ must be valid values. | $2300 . C R C 05$ must be valid values. |  |
| X222.223.2300.CRC06.010 | CRC06 | Condtion Indicator | 10 | 2.3 | NU |  |  |  | 999 | E |  | Must not be pesest. | Must not be pesest. |  |
| ×222:223.2300.CRC07.010 | CRC07 | Condtion Indicator | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | Sed Kitene = "Impesenentation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.226.2300.11.010 | H | health care diagnosis CODE |  | 1 | R | 2300 |  |  | 999 | R | $\begin{array}{\|l\|l\|} \mid \text { \|к304 = 3: "Required Segment } \\ \text { Missing" } \end{array}$ | 2300. HI with HI01-1 = "BK" must be present. | 2300.HI with HI01-1 = "BK" must be present. | ICD-9 Only period |
| X222.226.2300.HI.020Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.H1.030 | H |  |  |  |  |  |  |  | 999 | R | $\left.\right\|_{\mid} ^{\mid 1 K 304=3: ~ " R e q u i r e d ~ S e g m e n t ~}$ | 230..स with H101-1 = "ABK" must be | 230.Hा with H101-1 $=$ "ABK" must be | $\left.\right\|^{\text {ICD-10 Only period } \text { - assumes no dual-use atter }}$ |
| х222.226.2300.11.040 | ${ }^{\text {H }}$ |  |  |  |  |  |  |  | 999 | R | $113504=5:$ : "segment Exceeds <br> Maximum Use" | Only one iteration of $\mathbf{2 3 0 0}$. HI with $\mathrm{HI01-1}=$ "BK" is allowed. | Only one iteration of $230 . \mathrm{H}$ W with H101-1 "BK" is allowed. | 1 CD -9 Only period |
| $\begin{aligned} & \mathrm{X} 222.226 .2300 . \mathrm{HI} .050 \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.22.2300.11.060 | н |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. HI with HI01-1 = "ABK" is allowed. | Only one iteration of $2300 . \mathrm{H}$ with H H01-1 $=$ "ABK" is allowed. | $]_{\text {ICD-10 only period - assumes no dual-use ater }}^{\text {mandered date }}$ |
| х222.226.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |  |
| x222.226.2300.1101-1.010 | H01-1 | Code List Quadifier Code | 10 | ${ }^{1-3}$ | R |  |  | АВk, вK | 999 | R | \|K403 1: 1:Required Data Element Missing" | 2300. H101-1 must be present. | 2300. H101-1 must be present. |  |
| X222.226.2300.H101-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | \|1K003 =7: "Invalid Code Value" | 2300.H101-1 must $=$ "Bk" | 2300.H101-1 must $=$ "8K" | 1 CD -9 Only period |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.H101-1.040 | H101-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 101-1$ must = "ABK" | $2300 . \mathrm{HIOT-1}$ must = "ABK" | $\left.\right\|_{\text {mandated date }} ^{\text {ICD-10 }}$. |
| X222.226.2300.H101-2.010 | н101-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 999 | R | \|K403 $=1:$ :"Required Data Element Missing" | 2300. H01-2 must be present. | 2300. H01-2 must be present. |  |
| $\begin{aligned} & \text { x222.226.2300.H01-2.020 } \\ & \text { E2it Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\mathrm{min}_{\substack{\text { min. } \\ \text { Max. }}}^{\text {a }}$ | ( $\begin{gathered}\text { Usage } \\ \text { Req. }\end{gathered}$ | Loop |  | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TaAl } \\ \substack{999 \\ 277 c a} \end{gathered}$ | ${ }_{\text {Act }}^{\text {Acceptrej }}$ ect | Disposition / Error Code | Proposed 5010A1 Edits Part B | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\times 222.226 .2300 .1$ H01--2.030 | H01-2 | Diagnosis Code | an | 1-30 | R |  |  |  | 277 | c |  Information. CSC 254: "Principal diagnosis code" |  |  | ICD-9 only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.H101-2.040Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.226 .2300 . H 101-2.050$ | н101-2 | Diagnosis Code | an | 1-30 | R |  |  |  | 277 | c | cscc A7 <br> "Ackowedgementreejected for Invalic Intormation.... CSC 254: "Pinicipal diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 1 " and 2300 .HI01-1 is "ABK" then 2300.HI01-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in DTP03 when DTPO1 $=$ " 472 ", based on the ICD-10-CM Diagnosis Codes | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 1 " and $2300 . \mathrm{HIO1}-1$ is "ABK" then 2300.HI01-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-10-CM Diagnosis Codes | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.H01-2.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.226 .2300 .1101-2.070$ | H01-2 | Diagnosis Code | an | 1-30 | R |  |  |  | 277 | c | $\operatorname{cscc}$ A7: <br> "Acknowledgement/Rejected for Invalid Information. CSC 254: "Principal diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not "1" and 2300.H101-1 is "BK", 2300.HI01-2 must be a valid ICD-9the DOS range for this claim., based on the ICD-9-CM Diag list. | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not "1" and 2300.H101-1 is "BK", 2300.H101-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diag list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.226 .2300 . \mathrm{H101-2.090}$ | H01-2 | Diagnosis Code | an | 1-30 | R |  |  |  | 277 | c | Cscc A7 <br> "Acknowledgement/Rejected for Invalid Information.. <br> CSC 254: "Principal diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not "1" (all lines) and 2300.HI01 1 is "ABK", 2300. HI01-2 must be a valid ICD 10-CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD-10-CM Diaq list. | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not " 1 " (all lines) and 2300.HI01 1 is "ABK", 2300. HI01-2 must be a valid ICD 10-CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD-10-CM Diaa list. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| $\times 2$ 222.226.2300.H101-2.100 | H101-2 |  |  |  |  |  |  |  | 999 | E |  | 2300.H101-2 must not contain a .". |  | REMOVE PERIODS FROM DIAG CODES IN translation |
| $\times 222.226 .2300 . H 101-2.110$ | H01-2 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| $\times 222.226 .2300 . H 101-2.120$ | H01-2 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid <br> Information... <br> CSC 254. "Principal diagnosis code" <br> nal Cause of Injury | If $2300 . \mathrm{HOL1-1}$ equals BK , then 2300.H101-2 must not begin with EF ". must not begin with "E". | If 2300.H101-1 equals BK, then 2300. H101-2 must not begin with "E". | ICD-9 only edit. |
| $\times 222.226 .2300 .100-2.125$ | H01-2 |  |  |  |  |  |  |  | 277 | c | Cscc A7: Acknowledgement/Rejected for Invalid $\left\lvert\, \begin{aligned} & \text { Information. } \\ & \text { CSC } \\ & \text { CSC }\end{aligned}\right.$ CSC 254: "Principal diagnosis code CSC 509: External Cause of Injury | If 2300.H101-1 equals ABK, then 2300.H1012 must not begin with a "V", "W", "X" or "Y". | If 2300.H101-1 equals ABK, then 2300.H1012 must not begin with a "V", "W", "X" or "Y". | ICD-10 only edit |
| x222.226.2300.H101-3.010 | H01-3 | Date Time Period Format Qualifier | ID | 2.3 | nu |  |  |  | 999 | E | \|K403 = $110:$ "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.226.2300.H101-4.010 | H101-4 | Date Time Period | AN | 1 1.35 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.226.2300.H101-5.010 | H101-5 | Monetay Amount | R | 1-18 | NU |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.226.2300.H10-6.6.010 | H01-6 | Quantiy | R | ${ }^{1-15}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesest. |  |
| $\times 2$ 222.226.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.226.2300.H10-8.8.010 | H01-8 | Industry code | an | 1-30 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesent. |  |
| X222.226.2300.H10-9.9.010 | H101-9 | Yesino Condition or response Code | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E |  | Must not te present. | Must not te present. |  |
| X222.226.2300.HI02.010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ( ${ }_{\text {X22 }}$ | H02 | HEALTH CARE CODE INFORMATION |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.226.2300.H102-..010 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2330.H102-1.020 | H102-1 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2300. ${ }^{\text {H102-1 }}$ must $=$ "BF" | 2300.H102-1 must = "BF" | \|cD-9 Only period |
| x222.226.2300.1102-1.030 | H102-1 |  |  |  |  |  |  |  | 999 | R | IK403 =7: "Invalid Code Vaue" | 2300.H102-1 must = "ABF" | 2300.H102-1 must = "ABF" | ICD-10 Only period - assumes no dual-use after mandated date. |
| $\begin{aligned} & \text { X222.226.2300.HIO2-2.010 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\mathrm{M}_{\substack{\text { min. } \\ \text { Max. }}}^{\text {a }}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.226.2300.H102-2.020 | H102-2 | Diagnosis Code | an | 1-30 | R |  |  |  | 277 | c |  |  |  | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be avaiable for this edit. |
| X222.226.2300.HIO2-2.030 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.H102-2.040 | H102-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | c | Cscc A7 <br> "Acknowledgement/Rejected for Invalid Information. CSC 255: "Diagnosis code" |  | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 2 " 2300 HIO2-1 is "ABF" then 2300.HI02-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in the ICD-10-CM Diagnosis Codes. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| $\begin{aligned} & \text { X222.226.2300.HIO2-2.050 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.230.H102-2.060 | H102-2 | Diagnosis Code | AN | ${ }^{1-30}$ | R |  |  |  | 277 | c | Cscc A7 <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 255: "Diagnosis code" | If $2400 . \mathrm{SV} 107-1, \mathrm{SV} 107-2, \mathrm{SV107-3}$ and SV107-4 are not "2" and 2300.HIO2-1 is "BF", 2300.HIO2-2 must be a valid ICD-9- CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diag list. | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not " 2 " and 2300.H102-1 is "BF", 2300.HI02-2 must be a valid ICD-9 CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diag list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| $\left\lvert\, \begin{aligned} & x 222.226 .2300 . H 102-2.070 \\ & \text { Edit Deacivivated } \end{aligned}\right.$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.H102-2.080 | H102-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | c | Cscc A7: <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 255: "Diagnosis code" | If $2400 . \mathrm{SV} 107-1, \mathrm{SV} 107-2, \mathrm{SV} 107-3$ and $\mathrm{SV} 107-4$ are not "2" and $2300 . \mathrm{HIO2-1}$ is "ABF", $2300 . \mathrm{HIO2-2}$ must be a valid ICD-10- CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD- 10-CM Diaa list. | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not "2" and 2300. $\mathrm{HIO} 2-1$ is "ABF" $2300 . \mathrm{HIO2}-2$ must be a valid ICD CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD-10-CM Diaa list. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| x2222.226.2300.H102-2.090 | H102-2 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300. H102-2 must not contain a"." | 2300.H102-2 must not contain ${ }^{\text {a }}$." |  |
| x222.226.2300.H102-2.100 | H102-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement/Rejected for Invalid Information... CSC 511: "Invalid character" CSC 255: "Diaqnosis code" |  |  |  |
| х2222.226.2300.H102-3.010 | H102-3 | Date Time Period Format Qualifier | 10 | 2.3 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.226.2300.H102-4.010 | H102-4 | Date Time Period | AN | ${ }^{1-35}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.226.2300.H102.5.010 | H102.5 | Monetay Amount | R | ${ }^{1-18}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.226.2300.H102-6.010 | H102.6 | Quantily | R | ${ }^{1-15}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.226.2300.H102-7.010 | H102-7 | version Identifier | AN | 1-30 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x2222.226.2300.H102-8.010 | H102-8 | Industy code | AN | ${ }^{1.30}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х2222.226.2300.H102-9.010 | H102-9 | YesINo Condition or response Code | 10 | ${ }^{1.1}$ | NU |  |  |  | ${ }^{999}$ | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| <2222.226.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R |  | ${ }_{\text {lis }}^{2300 . \text { HIO3 }}$ can only be presentif 2300. H102 | ${ }_{2}^{2300 . \text { HIO3 can only be present if } 2300 . \text { Hil }}$ |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.226.2300.H103-1.020 | H03-1 |  |  |  |  |  |  |  | 999 | R | \|K403 $\mathbf{7}$ 7. "Invalid Code Value" | 2300.H103-1 must "BF" | 2300.H103-1 must "BF" | \|CD-9 Only period |
| $\times 2 \times 22.226 .2300 .1103 .1 .030$ | н103-1 |  |  |  |  |  |  |  | 999 | R | IK403 =7: "Invalid Code Value" | 2300.H103-1 must = "ABF" | 2300.H103-1 must = "A8F" | ICD-10 Only period - assumes no dual-use after mandated date |
| X222.226.2300.HI03-2.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.1103-2.020 | н103-2 | Diagnosis Code | AN | ${ }^{1-30}$ | R |  |  |  | 277 | c | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 3 " and 2300.HI03-1 is "BF" then 2300.HI03-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 CM Diaanosis Code list | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 3 " and $2300 . \mathrm{HIO3-1}$ is "BF" then 2300. HI03-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTPO1 $=472$ ", based on the ICD-9 CM Diaanosis Code list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be avalable for this edit. |
| x222.226.2300.H103-2.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | ID |  | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\underset{\text { Acceptrej }}{\text { ect }}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\times 222.226 .2300 .1103-2.040$ | н103-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | c | cscc A7: <br> -Acknowedgementrefected for Invalid Intormation.... <br> CSC 2555 "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 3 " and 2300. HI03-1 is "ABF" hen 2300.HIO3-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-10-CM Diagnosis Codes | f 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 3 " and 2300. HI03-1 is "ABF" hen 2300.HI03-2 must be a valid ICD-10-CM rincipal Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-10-CM Diagnosis Codes | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.HI03-2.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.226 .2300 .1103-2.060$ | н103-2 | Diagnosis Code | an | 1-30 | R |  |  |  | 277 | c | Cscc A7 <br> "Acknowledgement/Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not "3" and 2300. $\mathrm{HIO} 3-1$ is "BF", 2300.HIO3-2 must be a valid ICD-9 CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diaa list. |  | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| $\begin{aligned} & \text { X222.226.2300.H103-2.070 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.226 .2300 .1$ H10-2.080 | н103-2 | Diagnosis Code | an | 1-30 | R |  |  |  | 277 | c | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 255: "Diagnosis code" | If 2400. SV107-1, SV107-2, SV107-3 and SV107-4 are not 3 and $2300 . \mathrm{H} 03-1$ is ABF", 2300.HI03-2 must be a valid ICD-10 DOS range for this claim., based on the ICD 10-CM Diaq list. | If 2400.SV107-1, SV107-2, SV107-3 and "ABF", 2300.HI03-2 must be a valid ICD-10 CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD CM Diag list | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| $\times 202.226 .2300 .1$ H13-2.090 | н103-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H103-2 must not contain a.". | 2300.H10.2.2 must not contain $\mathrm{a}^{\text {"., }}$ |  |
| $\times 222.226 .2300 .1103-2.100$ | н103-2 |  |  |  |  |  |  |  | 277 | T | CSCC AT "Acknowledgement/Rejected for Invalid Information..." CSC 511. "Invalid character" CSC 255: "Diagnosis code" |  |  |  |
| ×222.226.2300.H103-3.010 | н103-3 | Date Time Period Format Qualifier | 10 | ${ }^{2.3}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.226.2300.1103.4.010 | н103-4 | Date Time Period | AN | 1.35 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| ×222.226.2300.1103.5.010 | н103.5 | Monetay Amount | R | 1-18 | NU |  |  |  | 999 | E | (124033 $=10.0$ "Implementation "Not | Must not be present. | Must not be present. |  |
| ×222.226.2300.1103.6.010 | н103-6 | Quantiy | R | $1-15$ | NU |  |  |  | 999 | E | (124033 $=10.0$ "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.226.2300.1103.7.010 | н103-7 | Version Identifier | AN | 1-30 | NU |  |  |  | 999 | E | (1/403 =10: "Implementation "Not | Must not be present. | Must not be present. |  |
| x222.22.2300.H103.8.010 | н103-8 | Industry code | AN | 1.30 | NU |  |  |  | 999 | E | (104033 $=10.0$ "mplementation "Not | Must not be present. | Must not be present. |  |
| х222.226.2300.1103.9.010 | н103-9 | Yes/No Condition or response Code | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.226.2300.H104.010 | H104 | ( HEALTH CARE CODE |  |  | s |  |  |  | 999 | R | K403 $=2$ : "Conditional Required Data Element Missing" | $2300 . \mathrm{H} 104$ can only be present if $2300 . \mathrm{H} 103$ is present. |  |  |
| X222.226.2300.HI04-1.010$\square$Lemendusinn |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.226 .2300 .1 \mathrm{HO4}+1.020$ | H104-1 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2300.H04-1 must $=$ "BF" | 2300. H 位-1 must $=$ "BF" | \|CD-9 Only period |
| $\times 2.22 .226 .2300 .1104 .1 .030$ | H104-1 |  |  |  |  |  |  |  | 999 | R | IK403 =7: "Invalid Code Value" | 2300.H104.1 must = "ABF" | 2300.H104.1 must = "ABF" | ICD-10 Only period - assumes no dual-use after mandated date |
| X222.226.2300.HI04-2.010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.226 .2300 .1104-2.020$ | H104-2 | Diagnosis Code | AN | ${ }^{1-30}$ | R |  |  |  | 277 | c | Cscc A7 <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "4" and 2300.HIO4-1 is "BF" th Diagnosis code on the date in 2400.DTP03 when DTP01 = " $472^{\prime \prime}$, based on the ICD-9 CM Diagnosis Code list | If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is " 4 " and $2300 . \mathrm{HIO4-1}$ is "BF" then 2300.HI04-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9 CM Diagnosis Code list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be avaiable for this edit. |
| X222.226.2300.HI04-2.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.226 .2300 .1104-2.040$ | H104-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | c | Cscc A7 <br> Acknowedgementrefecected for Invalid Intormation..." <br> CSC 255: "Diagnosis code" | If $2400 . \mathrm{SV} 107-1$, SV107-2, SV107-3, or SV107-4 is " 4 " and $2300 . \mathrm{HI} 04-1$ is "ABF" then $2300 . \mathrm{HI04-2}$ must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400. DTP03 when DTP01 = "472", based on the ICD-10-CM Diagnosis Codes. |  | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X222.226.2300. HIO4-2.050 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\min _{\text {max. }}^{\text {Max. }}$ | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | Loop Repeat | 5010A1 <br> values | $\begin{gathered} \text { TaAl } \\ \substack{9991 \\ 277 C A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.226.2300.H104-2.060 | H104-2 | Diagnosis Code | AN | 1.30 | R |  |  |  | 277 | c |  <br> Information... <br> CSC 255: "Diagnosis code | If 2400.SV107-1, SV107-2, SV107-3 and "BF", 2300.HIO4-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diag list. |  | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X222.226.230..H104-2.070 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.4104-2.080 | H104-2 | Diagnosis Code | an | 1.30 | R |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not "4" and 2300.H104-1 is "ABF", 2300.HIO4-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD- 10-CM Diaa list. | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not " 4 " and 2300.H104-1 is "ABF", 2300.HIO4-2 must be a valid ICD-10 CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD 10-CM Diaa list. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X222.226.2300. 1104.2 .090 | H104-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | ${ }^{2300 . H 104-2 ~ m u s t ~ n o t ~ c o n t a i n ~ a . " . ~}$ | ${ }^{2300 . H 104-2 ~ m u s t ~ n o t ~ c o n t a i n ~ a " . " ~}$ |  |
| х222.226.2300.1104-2.100 | H104-2 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| х222.226.2300.1104.3.010 | H104-3 | Date Time Period Format Qualifier | 10 | ${ }^{2.3}$ | NU |  |  |  | ${ }^{999}$ | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.226.2330. H 1044.4010 | H104-4 | Date Time Period | AN | 1.35 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.226.2300.1104.5.010 | H104.5 | Monetay Amount | R | ${ }^{1.18}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.226.2300. 11044.01010 | H104.6 | Quantiy | R | ${ }^{1-15}$ | nu |  |  |  | ${ }^{999}$ | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.226.2300. 1104.7 .010 | H104-7 | Version Identifier | an | ${ }^{1.30}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.226.230..1104.8.010 | H104.8 | Industry code | AN | ${ }^{1.30}$ | NU |  |  |  | 999 | E | K | Must not te present. | Must not te present. |  |
| х222.226.2300. 1104.9 .010 | H104.9 | YesiNo Condition or response ${ }_{\text {code }}$ | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E | (12403 $=10.0$ "Implementation "Not | Must not be present. | Must not be present. |  |
| ×222.226.2300.H105.010 | H05 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R |  | 230. . 105 can only be presentit $2300 . \mathrm{H104}$ is resent. |  |  |
| $\begin{aligned} & \text { X222.226.2300.HI05-1.010 } \\ & \text { Edit Deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.226.230.H105-1.020 | H105-1 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2300.H105-1 must $=$ "BF" | $2300 \cdot \mathrm{H} 105-1$ must $=$ "BF" | ICD.9 Only period |
| X2222.226.2300.H105-1.030 | H105-1 |  |  |  |  |  |  |  | 999 | R | IK403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2300.H105-1 must = "ABF" | 2300.H105-1 must = "ABF" |  |
| $\times 222.226 .2300 . H 105-2.010$ <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1105-2.020 | H105-2 | Diagnosis Code | AN | ${ }^{1.30}$ | R |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid nformation... CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 5 " and $2300 . \mathrm{HI05-1}$ is "BF" then 2300. HI05-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9 CMDiaanosis Code list. | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 5 " and $2300 . \mathrm{HI} 05-1$ is "BF" then Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9 CM Diannosis Codelist. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.HI05-2.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.H105-2.040 | H105-2 | Diagnosis Code | AN | ${ }^{1.30}$ | R |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 255: "Diagnosis code" | If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is " 5 " and $2300 . \mathrm{HI} 05-1$ is "ABF" then 2300. HI05-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in the ICD-10-CM Diagnosis Codes. |  | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit |
| x222.226.2300.H105-2.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1105-2.060 | H105-2 | Diagnosis Code | AN | ${ }^{1.30}$ | R |  |  |  | 277 | c | cscc A7: <br> 'Acknowledgement/Rejected for Invalid information... <br> CSC 255: "Diagnosis code" | \|f 2400. SV107-1, SV107-2, SV107-3 and SV107-4 are not " 5 " and 2300.HI05-1 is "BF", 2300.HI05-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diaa list | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not " 5 " and 2300. HI05-1 is "BF", 2300.HIO5-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diaal list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be avaiable for this edit. |
| X222.226.2300.HI05-2.070 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\min _{\text {max. }}^{\text {Max. }}$ | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | Loop Repeat | 5010A1 <br> values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.226.2300.1105-2.080 | H105-2 | Diagnosis Code | an | 1.30 | R |  |  |  | 277 | c |  |  |  | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| х222.226.2300.1105-2.090 | H105-2 |  |  |  |  |  |  |  | 999 | E | ${ }_{\text {a }}^{\text {a }}$ | 2300. H105-2 must not contain a ${ }^{\text {a }}$." | 2300. H105-2 must not contain a ${ }^{\text {a/." }}$ |  |
| х222.226.2300.1105-2.100 | H105-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaqnosis code" |  |  |  |
| х222.226.230..1105-3.010 | H105-3 | Date Time Period Format Qualifier | 10 | ${ }^{2.3}$ | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.226.230..1105-4.010 | н105-4 | Date Time Period | AN | ${ }^{1.35}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.226.2300. 1105.5 .010 | H105-5 | Monetay Amount | R | ${ }^{1.18}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.226.2300. 1105.6 .010 | H105-6 | Quantiy | R | ${ }^{1.15}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.226.2300.1105-7.010 | H105-7 | Version Identifier | AN | ${ }^{1.30}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| х222.226.2300.1105.8.010 | H105-8 | Industry code | AN | ${ }^{1.30}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.226.2300. 1105.9 .910 | H105-9 | Yes/No Condition or response Code | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.226.2300.-1106.010 | н106 |  |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missinq" | $2300 . \mathrm{HI} 06$ can only be present if $2300 . \mathrm{HIO5}$ is present. | $2300 . \mathrm{HI} 06$ can only be present if $2300 . \mathrm{HIO5}$ is present. |  |
| X222.226.2300. HI06-1.010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.226.230.H106-1.020 | H106-1 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2300. H06-1 must "BF" | 2300.H106-1 must "BF" | \|cD-9 Only period |
| $\times 222.226 .2330 .1106-1.030$ | H106-1 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalic Code Value" | 2300.H106-1 must = "ABF" | 2300.H106-1 must= "ABF" | ICD-10 Only period - assumes no dual-use ater mandated date. |
| $\begin{array}{\|l\|l\|} \begin{array}{\|l\|l\|l\|} \text { x22:226.230..H106-2.010 } \\ \text { Edit Deacivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1106-2.020 | H106-2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | cscc A7: <br> 'Acknowledgement/Rejected for Invalid information... <br> CSC 255: "Diagnosis code" | 400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 6 " and $2300 . \mathrm{HIO6-1}$ is "BF" then 2300.HI06-2 must be a valid ICDDiagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-9CM Diagnosis Code list. | If 2400.SV107-1, SV107-2, SV107-3, or 2300.HI06-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9 CM Diagnosis Code list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.HIO6-2.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1106-2.040 | H106-2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | Cscc A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 6 " and 2300 . HI06-1 is "ABF" then 2300.HI06-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-10-CM Diagnosis Codes. | If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is " 6 " and 2300 .HI06-1 is "ABF" then 2300.HI06-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in the ICD-10-CM Diagnosis Codes. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.HI06-2.050 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1106-2.060 | H106-2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for Invalid information.... <br> CSC 255: "Diagnosis code" | If 2400. SV107-1, SV107-2, SV107-3 and SV107-4 are not " 6 " and $2300 . \mathrm{HI} 06-1$ is SV107-4 are not " 6 " and 2300.HI06-1 is "BF", 2300.HI06-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diag list. | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not " 6 " and $2300 . \mathrm{HIO6-1}$ is "BF", 2300.HI06-2 must be a valid ICD-9 CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diag list ICD-9-CM Diag list | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be avalable for this edit |
| X222.226.2300.HI06-2.070Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1106-2.080 | H106-2 | Diagnosis Code | AN | ${ }^{1.30}$ | R |  |  |  | 277 | c | Cscc A7 <br> Acknowledgement/Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400. SV107-1, SV107-2, SV107-3 and SV107-4 are not " 6 " and 2300. HI06-1 is "ABF", 2300.HIO6-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD-10-CM Diaa list. | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not " 6 must be a valid ICD CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD 10-CM Diaa list. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| х222.226.2300.4106-2.090 | H106-2 |  |  |  |  |  |  |  | 999 | E | \|K403 = 6: "Invalid Character in Data Element" | 2300. H106-2 must not contain a"." | ${ }^{2300}$-H106-2 must not contain a .". |  |
| х222.226.2300.1106-2.100 | H106-2 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> 11. "Invalid character" CSC 255: "Diagnosis code" |  |  |  |
| х222.226.2330.1106-3.010 | H106-3 | $\underset{\substack{\text { Date Time Perioo Format } \\ \text { Oualifier }}}{ }$ | 10 | ${ }^{2 \cdot 3}$ | NU |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |


| Edit Reference | Segment or Element | Description | 10 | min. max. | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | Loop Repeat | 5010A1 <br> values | $\begin{gathered} \text { TaAl } \\ \substack{9991 \\ 277 C A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.226.2300. 1106 -4.010 | H106-4 | Date Time Period | AN | ${ }^{1.35}$ | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be peresent. | Must not be peresent. |  |
| X222.226.2300. 1106 -5.010 | H106-5 | Monetay Amount | R | 1.18 | nu |  |  |  | 999 | E | (1) | Must not be present. | Must not be present. |  |
| X222.226.2300. 1106 -6.010 | H106-6 | Quantiy | R | 1-15 | Nu |  |  |  | 999 | E | (K4033 $=110.7$ "mplenenenation "Not | Must not be present. | Must not be present. |  |
| х222.226.230..1106-7.010 | H106-7 | Version Identifier | AN | 1-30 | Nu |  |  |  | 999 | E | (K603 $=110 . "$ "mplemenenation "Not | Must not be present. | Must not be present. |  |
| X222.226.230..1106-8.010 | H100-8 | Industry code | AN | ${ }^{1.30}$ | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.226.230..1106-9.010 | H106-9 | Yes No Condition or response | 10 | 1-1 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.226.2300.H107.010 | н107 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | K403 = 2: "Conditional Required Data Element Missing" | ${ }_{\text {is }}^{230 . \text { Hesent. }}$. an only be presentit $2300 . \mathrm{H106}$ | ${ }_{\text {is }}^{230 . \text { Hesent. }}$. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.226.2300.H107-1.020 | H107-1 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2300. H107-1 must $=$ "BF" | $2300 \cdot \mathrm{H} 107-1$ must $=$ "BF" | \|CD-9 Only period |
| х222.226.2300. 1107 -1.030 | н107-1 |  |  |  |  |  |  |  | 999 | R | \|K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2300.H107-1 must = "ABF" | 2300.H107-1 must = "ABF" | ICD-10 Only period - assumes no dual-use afte mandated date |
| ${ }_{\substack{\text { X222.226.230..H107-2010 } \\ \text { Edit Deactivated }}}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1107-2.020 | н107-2 | Diagnosis Code | an | ${ }^{1-30}$ | R |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 255: "Diagnosis code" | 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 7 " and 2300.H107-1 is "BF" then 2300. HI07-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 CM Diaanosis Code list. | 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 7 " and 2300.HI07-1 is "BF" then 2300. HI07-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 CM Diaanosis Code list $\qquad$ | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1107-2.040 | н107-2 | Diagnosis Code | an | ${ }^{1-30}$ | R |  |  |  | 277 | c | Cscc A7 <br> Acknowedgementrejected for Invalid Intormation...' CSC 255: "Diagnosis code" | If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is "7" and 2300.H107-1 is "ABF" then 2300.HI07-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in the ICD-10-CM Diagnosis Codes. | If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is "7" and 2300. H107-1 is "ABF" then 2300.HI07-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in the ICD-10-CM Diagnosis Codes. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.HI07-2.050 Edit Deactivated <br> - |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1107-2.060 | H107-2 | Diagnosis Code | an | 1.30 | R |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not "7" and 2300.HI07-1 is "BF", 2300.HI07-2 must be a valid ICD-9 CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diaa list. | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not "7" and 2300.H107-1 is "BF", 2300.HI07-2 must be a valid ICD-9 CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diaa list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be avaiable for this edit. |
| $\begin{aligned} & \text { X222.226.2300.HIO7-2.070 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1107-2.080 | H107-2 | Diagnosis Code | AN | ${ }^{1-30}$ | R |  |  |  | 277 | c | cscc A7: <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 255: "Diagnosis code" | If 2400. SV107-1, SV107-2, SV107-3 and SV107-4 are not "7" and 2300.H107-1 is "ABF", 2300.HI07-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD-10-CM Diag list. | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not "7" and 2300.HI07-1 is ABF", 2300. HI07-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD 10-CM Diaa list. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| х222.226.230..1107-2.090 | H107-2 |  |  |  |  |  |  |  | 999 | E |  | 2300. H107-2 must not contain ${ }^{\text {a }}$." | ${ }^{2300}$. H107-2 must not contain a.". |  |
| x222.226.2300.1107-2.100 | н107-2 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| х222.226.2300. 1107 -. 010 | H107-3 | Date Time Period Format Qualifier | 10 | 2.3 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.226.2300.1107-4.010 | H107-4 | Date Time Period | an | 1.35 | nu |  |  |  | 999 | E |  | Must not be present. | Must not te present. |  |
| х222.226.2300.1107-5.010 | H107.5 | Monetay Amount | R | 1.18 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| х222.226.2300.1107-6.010 | н107-6 | Quantity | R | ${ }^{1-15}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not <br> Used" Element Present | Must not be present. | Must not be present. |  |
| х222.226.2300.1107-7.010 | н107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present | Must not be present. | Must not be present. |  |
| х222.226.230..1107-8.010 | н107-8 | Industry code | AN | ${ }^{1.30}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.226.230..1107-9.010 | н107-9 | YesNo Condition or response | 10 | ${ }^{1-1}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times \times 222.226 .2300 . \mathrm{H108.010}$ | H108 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 $=2$ : "Conditional Required Data Element Missinq" | $2300 . \mathrm{HIO8}$ can only be present if $2300 . \mathrm{HIO7}$ is present. | $2300 . \mathrm{HI} 08$ can only be present if $2300 . \mathrm{HIO}$ is present. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. Max. | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> values | $\begin{gathered} \text { Thal } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | ${ }_{\substack{\text { Acceptrej } \\ \text { ect }}}^{\text {at }}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.226.2300. HI08-1.010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1108-1.020 | H108-1 |  |  |  |  |  |  |  | 999 | R | \|K403 $\mathbf{~ 7}$ : "Invalid Code Value" | 2300.H108-1 must "BF" | 2300.H108-1 must "BF" | \|cD-9 Only period |
| $\times 222.226 .2300 .1108-1.030$ | H108-1 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2300.H108-1 must = "ABF" | 2300.H108-1 must = "ABF" | $\left.\right\|_{\text {mandated date }} ^{\text {ICD }}$. ${ }^{\text {Oniod }}$ - assumes no dual-use ater |
| X222.226.2300.H108-2.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1108-2.020 | H108-2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, o SV107-4 is " 8 " and $2300 . \mathrm{HIO8-1}$ is "BF" then 2300.HIO8-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 CM Diaanosis Code list. | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 8 " and $2300 . \mathrm{Hl08-1}$ is " BF " then 2300.HI08-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9Diaanosis Code list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be avaiable for this edit. |
| X222.226.2300.HI08-2.030Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1108-2.040 | H108-2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | Cscc A7: <br> 'Acknowledgement/Rejected for Invalid Information..." <br> CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 8 " and $2300 . \mathrm{HI} 08-1$ is "ABF" then 2300.HI08-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-10-CM Diagnosis Codes. | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "8" and 2300.HI08-1 is "ABF" then 2300.H108-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-10-CM Diagnosis Codes. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.HI08-2.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.4108-2.060 | H108-2 | Diagnosis Code | an | ${ }^{1-30}$ | R |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for Invalid information. CSC 255: "Diagnosis code" |  |  | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be avaiable for this edit. |
| X222.226.2300.HI08-2.070Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.4108-2.080 | н108-2 | Diagnosis Code | an | ${ }^{1-30}$ | R |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information.... <br> CSC 255: "Diagnosis code" | If 2400. SV107-1, SV107-2, SV107-3 and SV107-4 are not " 8 " and 2300.H108-1 is "ABF", 2300. HI08-2 must be a valid ICD-10 CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD 10-CM Diag list. | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not " 8 " and 2300. H108-1 is "ABF", 2300. HI08-2 must be a valid ICD-10 CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD 10-CM Diag list. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.1108-2.090 | н108-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H108-2 must not contain a ${ }^{\text {"." }}$ | 2300. H108-2 must not contain a ${ }^{\text {a/." }}$ |  |
| х222.226.2300.4108-2.100 | H108-2 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> SC 511. "Invalid character" CSC 255: "Diaqnosis code" |  |  |  |
| X222.226.2300.1108.3.010 | H108-3 | Date Time Period Format Qualifier | 10 | 2.3 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.226.230..4108-4.010 | н108-4 | Date Time Period | AN | ${ }^{1.35}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.226.2300.1108.5.010 | H108.5 | Monetay Amount | R | 1-18 | N/U |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.226.2300.1108.6.010 | н108-6 | Quantiy | R | ${ }^{1-15}$ | Nu |  |  |  | 999 | E | IK4033 $=110$. "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.226.230..1108-7.010 | H108-7 | Version Identifier | an | ${ }^{1-30}$ | nu |  |  |  | 999 | E | (1003 110. "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.226.230..1108.8.010 | H108-8 | Incustry code | AN | ${ }^{1-30}$ | Nu |  |  |  | 999 | E | (K403 $=110$. "Implementation "Not | Must not be pesent. | Must not be present. |  |
| х222.226.230..1108-9.010 | н108-9 | YesiNo Condition or response | 10 | ${ }^{1.1}$ | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| ×222.226.2300.H109.010 | H109 | HEALTH Codere Coin <br> INEORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HI} 09$ can only be present if $2300 . \mathrm{HIO8}$ is present | isone.flog can only be present if 2300 .HIO8 |  |
| X222.226.2300.H090-1.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300. 1109.1 .020 | н109-1 | Diagnosis Type Code | 10 | ${ }^{1.3}$ | R |  |  | ABF, BF | 999 | R | \|K403 =7: "Invalid Code Value" | 2300. H109-1 must = "BF" | 2300. H109-1 must = "BF" | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X222.226.230..1109-1.030 | H109-1 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2300.H109-1 must = "ABF" | 2300.H109-1 must = "ABF" |  |
| X222.226.2300.HI09-2.010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\left\lvert\, \begin{aligned} & x_{222}^{2226.2300 .109-2020} \\ & \text { Edit Deactivated } \end{aligned}\right.$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | ID | Min. Max. | Usage <br> Req. | Loop | Loop Repeat | 5010A1 <br> Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | ${ }_{\text {Acceptrej }}^{\text {ect }}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\times 222.226 .2300 .1109-2.030$ | н109-2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c |  |  |  | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be avaiable for this edit. |
| X222.226.230.-H109-2.040Edit Deacivivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.226 .2300$. H109.-.050 | H109-2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | cscc A7 <br> Acknowledgement/Rejected for Invalid Aformation <br> CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "9" and 2300.HI09-1 is "ABF" then 2300.HI09-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in the ICD-10-CM Diagnosis Codes. |  | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| $\begin{aligned} & \text { X222.226.2300.HIO9-2.060 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1109-2.070 | н109.2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 255: "Diagnosis code" | $\begin{aligned} & \text { If } 2400 . \mathrm{SV} 107-1, \text { SV107-2, SV107-3 and } \\ & \text { SV107-4 are not "9" and } 2300 . \mathrm{HI} 09-1 \text { is } \\ & \text { "BF", } 2300 . \mathrm{HIO9-2} \text { must be a valid ICD-9- } \\ & \text { CM Principal Diagnosis code for every date in } \\ & \text { the DOS range for this claim., based on the } \\ & \text { ICD-9-CM Diag list. } \end{aligned}$ |  | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be avaiable for this edit. |
| X222.226.2300.HI09-2.080Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.1109-2.090 | н109-2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c |  | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not "1" and 2300.H109-1 is CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD 10-CM Diag list. | If 2400.SV107-1, SV107-2, SV107-3 and SV107-4 are not "1" and 2300.H109-1 is CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD 10-CM Diag list. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| х222.226.2300.H109.2.100 | н109-2 |  |  |  |  |  |  |  | 999 | E | ${ }_{\text {a }}^{\text {a }}$ | 2300. H109-2 must not contain a.". | 2300.H109-2 must not contain a".: |  |
| х222.226.2300.1109-2.110 | н109-2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement/Rejected for Invalid Information. CSC 511. "Invalid character CSC 255: "Diaqnosis code" |  |  |  |
| х222.226.2300.1109.3.010 | H109-3 | Date Time Period Format Qualifier | 10 | 2.3 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| х222.226.2300.4109-4.010 | н109-4 | Date Time Period | AN | ${ }^{1.35}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.226.2300.1109.5.010 | H109.5 | Monetay Amount | R | ${ }^{1-18}$ | NU |  |  |  | 999 | E | K403 = $10:$ "Implementation "Not Used " Element Present" | Must not be present. | Must not be present. |  |
| х222.226.2300.1109.6.010 | H109-6 | Quantiy | R | ${ }^{1-15}$ | nu |  |  |  | 999 | E | \|K403 = 110 : "Implementation "Not Used" Element Present | Must not be present. | Must not te present. |  |
| х222.226.2300.H109.7.010 | H109-7 | Version Identifier | AN | ${ }^{1.30}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not te present. |  |
| х222.226.230..1109.8.010 | H109-8 | Industry code | AN | 1.30 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.226.2300. 1109.9 .010 | H109-9 | Yes/No Condition or response Code | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.226.2300.H110.010 | ${ }^{H 110}$ | $\underset{\substack{\text { HEALTH CAAE } \\ \text { INFORMATION }}}{\text { code }}$ |  |  | s |  |  |  | 999 | R |  |  | ${ }_{\text {lis }}^{2300 . \text { H110 can only be present if } 2300 . \text { H109 }}$ |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.H110-1.020 | H10.1 | Diagnosis Type Code | 10 | 1-3 | R |  |  | ABF, BF | 999 | R | K4003 =7: "Invalid Code Value" | $2300 . \mathrm{H110}=1$ must $=$ "BF" | 2300.H110=1 must = "BF" | P-9 Only. Valid ICD-9 Diagnosis Code reference st be avalable for this edit |
| X222.226.2300.H110-1.030 | H10-1 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Vaue" | 2300.H110-1 must = "ABF" | 2300.H110-1 must = "ABF" |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.H110-2.020Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.1110-2.030 | H10-2 | Diagnosis Code | AN | ${ }^{1.30}$ | R |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 255: "Diagnosis code" | 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "10" and $2300 . \mathrm{HI} 10-1$ is "BF" then 2300.HI10-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 CM Diaanosis Code list. | 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "10" and 2300 . HI $10-1$ is "BF" 2300. HI10-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 CM Diaanosis Code list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.HI10-2.040 Edit Deactivated <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Descripion | 10 | Min. Max. | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> values | $\begin{gathered} \text { TAAI } \\ \text { g999 } \\ 277 C A \end{gathered}$ | ${ }_{\text {Acceptrej }}^{\text {ect }}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.226.2300.1110-2.050 | H10-2 | Diagnosis Code | an | ${ }^{1-30}$ | R |  |  |  | 277 | c | $\operatorname{cscc}$ A7: <br> "AcknowledgementRejected for Invalid Information... CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "10" and $2300 . \mathrm{HI} 10-1$ is "ABF" hen 2300.HI10-2 must be a valid ICD-10Principal Diagnosis code on the date in the ICD-10-CM Diagnosis Codes. | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "10" and 2300. H110-1 is "ABF" then 2300.H110-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-10-CM Diagnosis Codes. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X222.2266.2300.H110-2.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.4110-2.070 | H10-2 | Diagnosis Code | an | ${ }^{1-30}$ | R |  |  |  | 277 | c | Cscc A7: <br> Ackoowedgementrejected for Invalid niformation..." CSC 255: "Diagnosis code" |  |  | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.H110-2.080Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.1110-2.090 | H10-2 | Diagnosis Code | an | ${ }^{1-30}$ | R |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 255: "Diagnosis code" |  | If 2400.SV107-1, SV107-2, SV107-3 and "ABF", $2300 . \mathrm{HI} 10-2$ must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD- 10-CM Diaq list. 10-CM Diaq list. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| х222.226.2300. $1110-2.100$ | H10.2 |  |  |  |  |  |  |  | 999 | E | 1 K403 $=6: "$ "Invalid Character in Data <br> Element | $2300 . \mathrm{H110} \mathrm{-}$ must not contain a ".: | 2300. H10-2 must not contain a ${ }^{\text {a/." }}$ |  |
| х222.226.2300.4110-2.110 | H10-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: Information..." CSC 511: "IIvalid character" CsC 255; "Diagnosis code" |  |  |  |
| х222.226.230..1110-3.010 | H10-3 | Date Time Period Format Qualifier | 10 | 2.3 | NU |  |  |  | 999 | E | K4033 = 110:" "mplementaion "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.226.2300. $1110-4.010$ | H10-4 | Date Time Period | AN | ${ }^{1.35}$ | nu |  |  |  | 999 | E |  | Must tot be present. | Must not be present. |  |
| X222.226.230..1110-5.010 | H110.5 | Monetay Amount | R | 1-18 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must tot be present. | Must not be present. |  |
| X222.226.2300. $1110 \cdot 6.010$ | H10-6 | Quantiy | R | ${ }^{1-15}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.226.2300. $1110 \cdot 7.010$ | H110.7 | Version Identifier | AN | ${ }^{1 / 30}$ | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be peresent. |  |
| X222.226.2300. 1110.8 .010 | H10.8 | Industry code | AN | ${ }^{1-30}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.226.230..110-9.010 | H10-9 | Yes/No Condition or response Code | 1 D | ${ }^{1.1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times \times 22.226 .2300 . \mathrm{H111.010}$ | H111 | $\underbrace{}_{\substack{\text { HEALTH COARE CODE } \\ \text { INFORMATION }}}$ |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data <br> Element Missing" | ${ }^{2300 . \text { H111 can only be presentif } 2300 . \mathrm{HIT10}}$ | ${ }^{2} 230 . \mathrm{HII11}$ can only be present if $2300 . \mathrm{H}$ H10 |  |
| X222.226.2300.HI11-1.010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.230..1111-1.020 | H111-1 | Diagnosis Type Code | 10 | ${ }^{1-3}$ | R |  |  | ABF, BF | 999 | R | 1K403 =7: "Ivaid Code Value" | 2300.H111=-1 must = "BF" | 2300.H111=-1 must = "BF" |  |
| x222.226.230..1111-1.030 | H11-1 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2300.H111-1 must = "ABF" | 2300.H111-1 must = "ABF" | ${ }^{\text {a }}$ |
| X222,226.230..H11-2.010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.226.2300. H I11-2.020Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.226.2300.4111-2.030 | H11-2 | Diagnosis Code | an | ${ }^{1-30}$ | R |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid nformation.... CSC 255: "Diagnosis code" | 2400 SV107-1, SV107-2, SV107-3, or VV107-4 is "11" and 2300. HI11-1 is "BF" then 2300 .HI11-2 must be a valid ICD-9-CM Dia CM Diaanosis Code list. | If 2400 SV107-1 SV107-2, SV107-3, or SV107-4 is "11" and $2300 . \mathrm{HI} 11-1$ is "BF" then 2300.HI11-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 CM Diaanosis Code list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit |
| $\begin{aligned} & \text { X222.226.2300.HI11-2.040 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.226.2300.4111-2.050 | H111-2 | Diagnosis Code | an | ${ }^{1-30}$ | R |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 255: "Diagnosis code" |  | If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is "11" and 2300.HI11-1 is "ABF" then 2300.HI11-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in the ICD-10-CM Diagnosis Codes. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| $\begin{aligned} & \text { x222.226.2300.H111-2.060 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { min. } \\ \text { max. } \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & 5010 A_{1} \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { Th11 } \\ \substack{9997 \\ 277 c a} \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | Proposed 5010A1 Edits Part B | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.226.2300.H111-2.070 | H111-2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c |  |  |  | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.HI11-2.080Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.H11-2.090 | H111-2 | Diagnosis Code | an | 1.30 | R |  |  |  | 277 | c | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 255: "Diagnosis code" | If 2400 SV107-1, SV107-2, SV107-3 and SV107-4 are not "111 and 2300.H111-1 is SV107-4 are not "11" and 2300 .HI11-1 is CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD-10-CM Diaa list. | If 2400. SV107-1, SV107-2, SV107-3 and SV107-4 are not " 11 " and 2300 HI11-1 is "ABF", 2300. HI11-2 must be a valid ICD-10 CM Principal Diagnosis for every date in the DOS range for this claim., based on the ICD- 10-CM Diaa list. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.H11-2.100 | H111-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H11-2 must not contain a.". | 2300.H11-2 must not contain a "." |  |
| x222.226.2300.411-2.110 | H111-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7 Acknowledgement/Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaqnosis code |  |  |  |
| x222.226.2300.4111-3.010 | H111-3 | Date Time Period Format Qualifier | 18 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| x222.226.2300.4111-4.010 | H111-4 | Date Time Period | AN | 1.35 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.226.2300.1111-5.010 | H111-5 | Monetay Amount | R | 1.18 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.226.2300.1111-6.010 | H111-6 | Quantiy | R | 1.15 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.226.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1.30 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.226.2300.H11-8.010 | H11-8 | Industry code | AN | 1.30 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.226.2300.4111-9.010 | H111-9 | Yes/No Condition or response Code | 1 D | ${ }^{1-1}$ | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.226.2300.H112.010 | H112 | ( HEALTH CARE CODE |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $2300 . \mathrm{H112}$ can only be present if 2300. H111 is rosesent | ${ }_{\text {lis }}^{2300 . \text { H12 } 12 \text { can only be present if } 2300 . \text { H111 }}$ |  |
| x222.226.230...1112-1.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.H112-1.020 | H112-1 | Diagnosis Type Code | 10 | ${ }^{1.3}$ | R |  |  | ABF, BF | 999 | R | 1K403 =7: "Invalid Code value" | 2300.H112-1 must = "BF" | 2300.H112=1 must = "BF" | ICD-9 Only. Valid ICD-9 Diagnosis Code reference |
| x222.226.2300.1112-1.030 | H112-1 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2300.H112-1 must ="ABF" | 2300.H112-1 must = "ABF" |  |
| X222.226.2300.HI12-2.010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.226.2300.HI12-2.020 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.H112-2.030 | H112-2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | cscc A7: <br> "Acknowledgement/Rejected for Invalid Information. CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or $\mathrm{SV} 107-4$ is "12" and $2300 . \mathrm{HI} 12-1$ is "BF" then 2300 HI12-2 must be a valid ICD-9Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9 CM Diagnosis Code list CM Diagnosis Code list. | If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is " 12 " and $2300 . \mathrm{HI} 12-1$ is "BF" SV107-4 is "12" and 2300 .HI12-1 is "BF" then 2300 .HI12-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9CM Diagnosis Code list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.HI12-2.040Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.H112-.2.050 | H112-2 | Diagnosis Code | AN | ${ }^{1.30}$ | R |  |  |  | 277 | c | CscC A7: <br> -AcknowedgementrRejected for Invalid Intormation..." <br> CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "12" and 2300. H112-1 is "ABF" then 2300.HI12-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 $=$ " 472 ", based on the ICD-10-CM Diagnosis Codes. | \|t 2400.SV107-1. SV107-2, sv107.3. or SV107-4 is "12" and $2300 . \mathrm{HI} 12-1$ is "ABF" Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-10-CM Diagnosis Codes. | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| X222.226.2300.HI12-2.060 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.226.2300.H112-2.070 | H112-2 | Diagnosis Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 255: "Diagnosis code" | If $2400 . \mathrm{SV} 107-1, \mathrm{SV} 107-2$, SV107-3 and SV107-4 are not "12" and $2300 . \mathrm{HI} 12-1$ is "BF", $2300 . \mathrm{HI} 12-2$ must be a valid ICD-9- CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diag list. | If $2400 . \mathrm{SV} 107-1, \mathrm{SV} 107-2$, SV107-3 and $\mathrm{SV} 107-4$ are not "12" and $2300 . \mathrm{HI} 12-1$ is "BF", $2300 . \mathrm{HI} 12-2$ must be a valid ICD-9- CM Principal Diagnosis code for every date in the DOS range for this claim., based on the ICD-9-CM Diag list. | ICD-9 Only. Valid ICD-9 Diagnosis Code reference must be available for this edit. |
| X222.226.2300. $\mathrm{HI} 12-2.080$ Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { min. } \\ \text { Max. } \end{gathered}$ | Usage Req. | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TA11 } \\ \text { a999/ } \\ 277 c \mathrm{~A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { Part B }}}{\text { E. }}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.226.2300.1112-2.090 | H112-2 | Diagnosis Code | AN | ${ }^{1.30}$ | R |  |  |  | 277 | c |  |  |  | ICD-10 only. Valid ICD-10 Diagnosis Code reference must be available for this edit. |
| х222.226.2300.H112-2.100 | H112-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H112-2 must not contain a ".: | 2300.H112-2 must not contain a ${ }^{\text {a/." }}$ |  |
| x222.226.230..1112-2.110 | H112-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information. <br> CSC 511. "Invalid character" <br> CSC 255."Diagnosis code" |  |  |  |
| X222.226.2300.4112-3.010 | H112-3 | $\begin{gathered} \text { Date Time Period Format } \\ \text { Qualifier } \end{gathered}$ | 10 | 2.3 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.226.2300.1112-4.010 | H112-4 | Date Time Period | An | ${ }^{1.35}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.226.2300.H11-5.010 | H112.5 | Moneary Amount | R | 1-18 | NU |  |  |  | 999 | E | (1) | Must not be present. | Must not be peresent. |  |
| x222.226.2300.1112-6.010 | H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | (104033 10.0 "Implementation "Not | Must not be present. | Must not be present. |  |
| x222.226.2300.1112-7.010 | H112-7 | Version Identifier | AN | 1-30 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.226.2300.1112-8.010 | H112-8 | Industry code | AN | 1.30 | nu |  |  |  | 999 | E | K403 $=110:$ " Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.226.2300.4112-9.010 | H112-9 | Yessino Condition or response Code | 1 D | 1-1 | NU |  |  |  | 999 | E | \|K403 = $110:$ "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesent. |  |
| x222.239.2300.H1.010 | н | ANESTHESIA RELATED PROCEDURE |  | 1 | s | 2300 |  |  | 999 | R | 1K304=5: "Segment Exceeds | Only one iteration of 2300 . HI with HI01-1 = " BP " is allowed. | Only one iteration of $\mathbf{2 3 0 0}$. HI with H101-1 = "BP" is allowed. |  |
| х2222.239.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |  |
| X222.239.2300.H101-1.010 | н101-1 | Code List Qualifier | 10 | ${ }^{1-3}$ | R |  |  | ${ }^{\text {BP }}$ | ${ }^{999}$ | R | \|K403 = 1: "Required Data Element Missing" | ${ }^{2300 . H 101-1 ~ m u s t ~ b e ~ p e s e n t . ~}$ | 2300.H01-1 must be present. |  |
| x222.239.2300.H101-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | IK403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $2300 . \mathrm{H001-1}$ must be "BP". | $2300 . \mathrm{HOT} 1-1 \mathrm{must} \mathrm{be} \mathrm{"BP"}$. |  |
| X222.239.2300.H101-2.010 | H01-2 | Anesthesia Related Surgical Procedure | an | ${ }^{1.30}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | ${ }^{2300 .}$ H101-2 must be present. | 2300. H101-2 must be present. | Valid HCPCS reference must be available for this edit. |
| X222.239.230.H101-2.020 | H101-2 |  |  |  |  |  |  |  | 277 | c |  | 2300. HI01-2 must be a valid HCPCS Principle Procedure code. | 2300.HIO1-2 must be a valid HCPCS Principle Procedure code. Principle Procedure code. |  |
| х222:239.2300.H101-3.010 | H101-3 | Date Time Period Format Qualifier | 10 | 2.3 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.239.2300.H101-4.010 | H01-4 | Date Time Period | an | ${ }^{1.35}$ | nu |  |  |  | 999 | E | (14033 $=10$. "Implementation "Not | Must not be present. | Must not be peresent. |  |
| X222.239.2300.H101-5.010 | H01-5 | Monetary Amount | R | ${ }^{1.18}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be peresent. |  |
| x222.239.2300.H101-6.0.010 | H101-6 | Quantit | R | 1-15 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.239.2300.1101-7.010 | H101-7 | Version Identifier | AN | 1.30 | N/U |  |  |  | 999 | E | (1/4033 $=100$ " "mplementation "Not | Must not be present. | Must not be present. |  |
| x222.239.2300.1101-8.010 | H101-8 | Industry code | an | ${ }^{1.30}$ | nu |  |  |  | 999 | E |  | Must not be present. | Must not be peresent. |  |
| X222.239.2300.H101-9.010 | H101-9 | YesiNo Condition or response ${ }_{\text {Code }}$ | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not te present. | Must not te present. |  |
|  | ${ }_{\text {H102 }}$ | HEALTH CARE CODE IFOOMATITN Codelist | 10 | 1 1-3 | R |  |  | во | 999 | R | \|K403 = 7: "Invalid Code Vause" | 2300.H102-1 must be "BO". | 230..H102-1 must be "BO". |  |
| X222.239.230..H102-2.010 | H102-2 | Anesthesia Related Surgical Procedure | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid Information..." CSC 454: "Procedure code for CSC 454: "Procedure code for services rendered | 2300.HI02-2 must be a valid HCPCS Principle Procedure code. | $2300 . \mathrm{HIO2}-2$ must be a valid HCPCS Principle Procedure code. | Valid HCPCS reference must be available for this edit. |
| X222.239.2300.1102-3.010 | H102-3 | Date Time Period Format Qualifier | 10 | 2.3 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222. 239.2300.H102-4.010 | H102-4 | Date Time Period | AN | ${ }^{1.35}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.239.2300.H102.5.010 | H102-5 | Monetay Amount | R | 1-18 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be pesenent. |  |
| X222.239.2300.H102-6.010 | H102-6 | Quantit | R | ${ }^{1-15}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be peresent. | Must not be pesent. |  |
| x222.239.2300.H102-7.010 | H102-7 | Version Identifier | an | ${ }^{1.30}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesent. |  |
| x222.239.2300.1102-8.010 | H102-8 | Industry code | AN | ${ }^{1.30}$ | NU |  |  |  | 999 | E | K403 $=110:$ "Implementation "Not Used" Element Present | Must not be present. | Must not be pesesent. |  |
| x222.239.2300.1102-9.010 | H102-9 | YesiNo Condition of response | 10 | 1-1 | NU |  |  |  | 999 | E | (10403 $=110$. "Implementation "Not | Must not be present. | Must not be present. |  |
| х2222.239.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | n/U |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.239.2300.H104.010 | H104 | HEALTH CARE CODE NFORMATION |  |  | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.239.2300.H105.010 | H105 | HEALTH CARE CODE NFORMATION |  |  | N/U |  |  |  | 999 | E | (Kene | Must not be present. | Must not be pesesent. |  |
| х2222.239.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be peresent. | Must not be present. |  |
| X222.239.230..H107.010 | H107 | HEALTH CARE CODE NFORMATION |  |  | n/u |  |  |  | 999 | E | IK403 = 110: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be peresent. |  |
| X222.239.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |

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| Edit Reference | Segment or Element | Description | 10 | Min. <br> Max | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TAA1 } \\ 999 / \\ 277 C A \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.233.2300.H109.010 | H09 | HEALTH CARE CODE INFORMATION |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.239.2300.H110.010 | H110 | HEALTH CARE CODE INFORMATION |  |  | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.239.2300.H11.010 | H111 | HEALTH CARE CODE INEORMATION |  |  | nu |  |  |  | 999 | E | (K403 = 110. "Implementation "Not | Must not be present. | Must not be present. |  |
| x2222.239.2300.H112.010 | H12 | HEALTH CARE CODE INFORMATION |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.242.2300.11.010 | H1 | CONDITION INFORMATION |  | 2 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iteration of 2300.HI with HI01-1 = "BG" are allowed. | Only two iteration of 2300.HI with HI01-1 = "BG" are allowed. | 1224: Pass-trrough, syntax only |
| х2222.244.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |  |
| х222.242:2300.H101-1.010 | H101-1 | Code List Qualifier | 10 | ${ }^{1-3}$ | R |  |  | B6 | 999 | R | (K003 1.1 Requiried Data Element | 2300. H101-1 must be present. | 2300.H101-1 must be present. |  |
| X222.242.2300. 11011.1 .020 | H01-1 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalic Code Value" | $2300 . \mathrm{H101-1}$ must be "BG". | 2300.H101-1 must be "BG". |  |
| X222.242.2300. $1101-2.010$ | H101-2 | Condition Code | AN | ${ }^{1.30}$ | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missina" | 2300. H101-2 must be present. | 2300. H01-2 must be present. |  |
| x222.242.2300.4101-2.020 | H01-2 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowedgementrejected for Invalid Information..." <br> CSC 460: "NuBC Condition Code(s)" | 2300.H101-2 must be a valid Condition code. | 2300 H101-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| X222.242.2300.H101-3.010 | H101-3 | Date Time Period Format Qualifier | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| х222.242.2300.H101-4.010 | H01-4 | Date Time Period | an | ${ }^{1.35}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.242.2300.101-5.5010 | H101-5 | Monetay Amount | R | ${ }^{1.18}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.242.2300. $\mathrm{H} 101-6.010$ | H101-6 | Quantit | R | 1-15 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not <br> Used" Element Present | Must not be present. | Must not be present. |  |
| X222.242.2300. $1011-7.010$ | н101-7 | Version Identifier | AN | ${ }^{1.30}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be peresent. | Must not be present. |  |
| x222.242.2300. 1011 -8.010 | H01-8 | Industry code | AN | 1.30 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| X222.242.2300. 11019.9 .010 | H101-9 |  | 10 | ${ }^{1.1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not te present. | Must not te present. |  |
|  | H102 | HEALTH CARE CODE INFORMATION |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.242.2300.1102-1.010 | H102-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | \|K403 $\mathbf{~ 7}$ : "Invalid Code Value" | $2300 . \mathrm{HO2}-1$ must be "EG". | $2300 . \mathrm{HO2-1}$ must be "BG". |  |
| х222.242.2300.1102-2.010 | H102-2 | Condition Code | AN | ${ }^{1.30}$ | R |  |  |  | 277 | c | Cscc A7: <br> Acknowleggement Rejected for Invalid <br> fifrmation... <br> CSC 460: "NUBC Condition Code(s)" | 2300. H102-2 must be a valid Condition code. | 2300 H102-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| X222.242.2300. $1102 \cdot 3.010$ | H102-3 | Date Time Period Format Qualifier | $1{ }^{\text {I }}$ | ${ }^{2.3}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300. 1102 -4.010 | H102-4 | Date Time Period | AN | ${ }^{1.35}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300. 1102.5 .010 | H102-5 | Monetay Amount | R | ${ }^{1-18}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| X222.242.2300.H102.6.010 | H102-6 | Quantiy | R | ${ }^{1-15}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.242.2300. 1102 -7.010 | H102-7 | Version Identifier | AN | ${ }^{1.30}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.242.2300.1102-8.010 | H102-8 | Industy code | AN | ${ }^{1.30}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.242.2300. 1102.9 .9010 | H102-9 | YesiNo Condition or response Code | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times \times 222.242 .2300 . \mathrm{H103.010}$ | H03 | HEALTHH CARE CODE <br> INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missina" | $2300 . \mathrm{HI} 03$ can only be present if $2300 . \mathrm{HI} 02$ is present. | $2300 . \mathrm{HI} 03$ can only be present if $2300 . \mathrm{HIO} 2$ is present. |  |
| х222.242.2300.1103-1.010 | H103-1 | Code List Qualifier | ID | ${ }^{1-3}$ | R |  |  | BG | 999 | R | \|K403 $\mathbf{\text { 7 }}$ : "Invalid Code Value" | 2300.H103-1 must be "BG". | $2300 . \mathrm{HO} 3$-1 must be "BG". |  |
| х222.242.2300.1103-2.010 | н103-2 | Condition Code | AN | ${ }^{1.30}$ | R |  |  |  | 277 | c | cscc A7: <br> AcknowedgementRRejected for Invalid fitomation..." <br> CSC 460: "NUBC Condition Code(s)" | 2300. H103-2 must be a valid Condition code. | 2300. H103-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| х222.2422.2300.1103.3.010 | н103-3 | Date Time Period Format Qualifier | 10 | 2.3 | nu |  |  |  | ${ }^{999}$ | E | K403 $=110$ " "Implementataion "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.242.2300. 1103.4 .010 | н103-4 | Date Time Period | AN | ${ }^{1.35}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300. 1103.5 .010 | н103-5 | Monelay Amount | R | ${ }^{1-18}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.242.2300. 1103 -6.010 | ноз-6 | Quantiy | R | ${ }^{1-15}$ | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.242.2300. 1103.7 .010 | н103.7 | Version Idenifier | an | ${ }^{1.30}$ | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H103.8.010 | н103.8 | Industry code | an | ${ }^{1.30}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be pesent. | Must not be peresent. |  |
| х222.242.2300. 1103.9 .910 | н103-9 | Yes/No Condition or response Code | ID | ${ }^{1-1}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.244.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | ${ }^{999}$ | R | IK403 $=2$ : "Conditional Required Data Element Missing: |  |  |  |
| х222.242.2300.11041.010 | H104-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | \|K403 =7: "Invalid Code Value" | 2300.4104 .1 must be "BG". | 2300.1 HO 4.1 must be "BG". |  |
| х222.242.2300.4104-2.010 | H104-2 | Condition Code | AN | ${ }^{1-30}$ | R |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for Invalid ation..." <br> CSC 460: "NUBC Condition Code(s)" | 2300. H104-2 must be a valid Condition code. | 2300. H104-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| ×222.242.2300.H104.3.010 | H1043 | $\begin{gathered} \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{gathered}$ | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Flement Present" | Must not be present. | Must not be present. |  |

${ }_{\text {Professional Edits }}^{837}$

| Edit Reference | Segment or Element | Description | 10 | Min. <br> Max | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Acceptree } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\times 2$ 222.242.2300.H104-4.010 | H1044 | Date Time Period | AN | ${ }^{1.35}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H104.5.010 | H104.5 | Monetay Amount | R | ${ }^{1-18}$ | nu |  |  |  | 999 | E |  | Must not be present. | Must not be pesenent. |  |
| X222.242.2300.H104.6.010 | H104.6 | Quantiy | R | ${ }^{1.15}$ | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.242.2300.H1047.010 | H104.7 | Version Identifier | AN | 1.38 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.242.2300.H104.8.010 | H104.8 | Industry code | AN | 1-30 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times 222.242 .2300 . \mathrm{H104} \cdot 9.010$ | H104-9 | YesiNo Condition of response | 10 | 1-1 | NU |  |  |  | 999 | E | (10403 $=10.7$ "mplementitaion "Not | Must not be present. | Must not be present. |  |
| $\times \times 222.242 .2300 . \mathrm{H105.010}$ | H105 | $\underset{\substack{\text { HEALTHOCARE CODE } \\ \text { INFORMATION }}}{ }$ |  |  | s |  |  |  | 999 | R |  | 2300.105 can only be presentift $2300 . \mathrm{HIO4}$ is resesent. | 230. IIO5 can only be present it $2300 . \mathrm{HIO} 4$ |  |
| X222.242.2300.H105-1.010 | H105-1 | Code List Qualifier | 10 | ${ }^{1-3}$ | R |  |  | BG | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2300.H105-1 must be "BG". | 230.H105-1 must be "BG". |  |
| ×222.242.2300.H105-2.010 | H105-2 | Condition Code | AN | ${ }^{1.30}$ | R |  |  |  | 277 | c | Cscc A7: <br> "AcknowedgementrRejected for Invalid Information..." <br> CSC 460: "NUBC Condition Code(s)" | 2300 H105-2 must be a valid Condition code. | 2300.H105-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| X222.242.2300.H105.3.010 | H105-3 | Date Time Period Format Qualifier | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be peresent. | Must not be peresent. |  |
| X222.242.2300.H105-4.010 | H105-4 | Date Time Period | an | ${ }^{1.35}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be pesent. |  |
| ×222.242.2300.H105.5.010 | H105-5 | Monetay Amount | R | ${ }^{1-18}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.242.2300.H105.6.0.010 | H105-6 | Quantity | R | ${ }^{1-15}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H105-7.010 | H105-7 | Version Identifier | an | 1.30 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H105-8.010 | H105-8 | Industry code | AN | ${ }^{1.30}$ | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesesent. |  |
| х222.242.2300.H105.9.010 | H105-9 | Yes/No Condition or response Code | 10 | ${ }^{1.1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times \times 222.242 .2330 . \mathrm{H} 106.010$ | H106 | $\begin{gathered} \text { HEALTH COAR } \\ \text { INFORMATION } \\ \hline \end{gathered}$ |  |  | s |  |  |  | ${ }^{999}$ | R |  | ${ }^{2} \mathbf{i s}$ is resesent. | $\begin{aligned} & 2300 . \mathrm{H106} \text { can only be presestit i 2300.H105 } \\ & \text { is present } \end{aligned}$ |  |
| $\times 2.22 .242 .2300 .1106-1.010$ | H106-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | \|K403 $=7$ 7 "Invalid Code Value" | $2300 . \mathrm{H106-1} \mathrm{must} \mathrm{be} \mathrm{"BG"}$. | $2330 . \mathrm{H106-1} \mathrm{must} \mathrm{be} \mathrm{"BG"}$. |  |
| ×222.242.2300.H106-2.010 | H106-2 | Condition Code | AN | ${ }^{1.30}$ | R |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid CSC 460 . <br> CSC 460: "NUBC Condition Code(s)" | 2300 H106-2 must be a valid Condition code. | 2300 H106-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit |
| X222.242.2300.H106.3.010 | H106-3 | Date Time Period Format Qualifier | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H106-4.010 | H106-4 | Date Time Period | AN | ${ }^{1.35}$ | nu |  |  |  | 999 | E | KS403 $=110$ : "Implementatation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H106.5.010 | H106-5 | Monetay Amount | R | ${ }^{1.18}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be peresent. |  |
| X222.242.2300.H106.6.010 | H106-6 | Quantiy | R | ${ }_{1} 115$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be peresent. |  |
| X222.242.2300.H106-7.010 | H106.7 | Version Identifier | an | ${ }^{1-30}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesent. |  |
| х222.242.2300.H106.8.010 | H106-8 | Industry code | an | ${ }^{1.30}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be peresent. |  |
| X222.242.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | $1{ }^{1}$ | ${ }^{1.1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times \times 222.242 .2330 . \mathrm{H107.010}$ | H107 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | ${ }^{999}$ | R |  | 2300. H107 can only be present it $2300 . \mathrm{HIO6}$ | 230... 107 can only be present if 2300 .HIO6 |  |
| $\times 2$ 222.242.2300.H107-1.010 | H107-1 | Code List Qualifier | 10 | ${ }^{1-3}$ | R |  |  | BG | 999 | R | \|K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $2300 . \mathrm{H107-1}$ must be "BG". | $2300 . \mathrm{H107-1}$ must be "BG". |  |
| ×222.242.2300.H107-2.010 | H107-2 | Condition Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 460: "NUBC Condition Code(s)" | 2300. H107-2 must be a valid Condition code. | 2300. H107-2 must be a valid Condition code. | Valid NUBC Condition Code efererence must be avaiable for this editit |
| $\times 2 \times 22.242 .2300 . H 107-3.010$ | H107-3 | $\begin{gathered} \text { Date Time Period Format } \\ \text { Qualifier } \end{gathered}$ | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. | Must not be present. |  |
| $\times 2 \times 22.242 .2300 . \mathrm{H107}-4.010$ | H107-4 | Date Time Period | AN | 1.35 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H107.5.010 | H107-5 | Monetay Amount | R | ${ }^{1-18}$ | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242:2300.H107-6.010 | H107-6 | Quantit | R | ${ }^{1-15}$ | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H107.7.010 | н107-7 | Version Identifier | an | ${ }^{1.30}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H107.8.010 | н107-8 | Industry code | AN | ${ }^{1.30}$ | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times 2.22 .242 .2300 . \mathrm{H10} 7.9 .010$ | н107-9 | Yes/No Condition or response Code | 10 | ${ }^{1.1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х2222.242.2330.H108.010 | H08 | HEALTH CARER CODE INFORMATION |  |  | s |  |  |  | 999 | R |  |  | ${ }_{\text {is }}^{2300 . \text { Hesent. }}$. |  |
| $\times 2$. | H108-1 | Code List Qualifier | 10 | ${ }^{1-3}$ | - |  |  | BG | 999 | R | \|K403 $=$ 7: "Invalid Code Value" | $2300 . \mathrm{HOP-1}$ must be "BG". | $2300 \cdot \mathrm{H108-1}$ must be "EG". |  |
| X222.242:2300.H108-2.010 | H108-2 | Condition Code | AN | ${ }^{1-30}$ | R |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 460: "NUBC Condition Code(s)" | 2300. H108-2 must be a valid Condition code. | 2300. H108-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit |
| X2222.242.2300.H108-3.010 | H108-3 | Date Time Period Format Qualifier | 10 | ${ }^{2.3}$ | NU |  |  |  | ${ }^{999}$ | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H108-4.010 | H108-4 | Date Time Period | an | ${ }^{1.35}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.242.2300.H108.5.010 | H108.5 | Monetary Amount | R | 1-18 | NU |  |  |  | 999 | E | (14030 $=100$ "mplementation "Not | Must not be present. | Must not be present. |  |

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| Edit Reference | Segment or Element | Description | 10 | $\min$. <br> Max. | $\begin{array}{\|l\|l\|l} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{\text {. }}$ | $\begin{aligned} & 5010 \mathrm{A1} \\ & \text { values } \end{aligned}$ | $\begin{gathered} \text { TA Al } \\ \text { a99 } \\ 277 C A \end{gathered}$ | $\begin{gathered} \text { Accept } / R \mathrm{Rej} \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part B } \end{aligned}$ | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.242.2300.H108.6.010 | H108-6 | Quantiy | R | ${ }^{1.15}$ | NU |  |  |  | 999 | E |  | Must not be present. | Must not be pesesent. |  |
| X222.242.2300.H108.7.010 | H108.7 | Version Identifier | an | 1.30 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesenent. |  |
| X222.242.2300.H108.8.010 | н108-8 | Industry code | an | ${ }^{1.30}$ | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesent. |  |
| X222.242.2300.H108.9.010 | н108-9 | Yes/No Condition or response Code | 10 | 1-1 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times \times 22.242 .2330 . \mathrm{H109.010}$ | H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | ${ }^{230 . \mathrm{H} \text { HIO9 can only be presentit } 12300 . \mathrm{HIO8}}$ | 230...1099 can only be present if 2300 .HIO8 |  |
| X222.242.2300.H109.1.010 | H109-1 | Code List Qualifier | ID | ${ }^{1.3}$ | R |  |  | BG | 999 | R | \|K403 $=7$ : "Invalid Code Value" | $2300.1 \mathrm{HO} 9.1 \mathrm{must} \mathrm{be} \mathrm{"BG"}$. | 2300.H109-1 must be "BG". |  |
| х222.242:2300.H109-2.010 | н109.2 | Condition Code | ${ }^{\text {an }}$ | 1.30 | R |  |  |  | 277 | c | Cscc A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 460: "NUBC Condition Code(s)" | 2300. H109-2 must be a valid Condition code. | 2300. H109-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit |
| $\times 2$ 222.242:2300.H109.3.010 | H109.3 | Date Time Period Format Oualifier | 10 | 2.3 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.242.2300.H109.4.010 | H109-4 | Date Time Period | AN | 1.35 | Nu |  |  |  | 999 | E | \|K403 = 110: "Implementataion "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H109.5.010 | H109-5 | Monetay Amount | R | 1.18 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesesent. |  |
| X222.242.2300.H109.6.010 | н109.6 | Quantiy | R | 1-15 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.242.2300.H109.7.010 | н109-7 | Version Identifier | AN | 1.30 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesent. |  |
| X222.242.2300.H109.8.010 | н109-8 | Industry code | AN | 1.30 | nu |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times 222.242 .2300 . \mathrm{H109.9.010}$ | H109-9 | Yes/No Condition or response Code | 1 D | ${ }^{1-1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.242.2300. H 110.010 | H110 | HEALTHH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R |  |  |  |  |
| X222.242.2300.H110-1.010 | H10-1 | Code List Qualifier | ID | ${ }^{1.3}$ | R |  |  | BG | 999 | R | 1K403 $\mathbf{7}$ 7: "lnvalid Code Value" | $2300.110-1$ must be "BG". | $2330 . \mathrm{H110-1}$ must be "GG". |  |
| ×222.242.2300.H110-2.010 | H10-2 | Condition Code | an | 1.30 | R |  |  |  | 277 | c | Cscc A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 460: "NUBC Condition Code(s)" | 2300. H110-2 must be a valid Condition code. | 2300. H110-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| $\times 222.242 .2300 . H 110 \cdot 3.010$ | H10:3 | $\underbrace{\substack{\text { Time Period Format } \\ \text { Oualifer }}}_{\text {Date }}$ | 10 | ${ }^{2.3}$ | NU |  |  |  | ${ }^{999}$ | E | \|K403 = $110:$ "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H110-6.010 | H10.6 | Quantiy | R | 1-15 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.242.2300.H110-7.010 | H10.7 | Version Identifier | AN | 1.30 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.242.2300.H110-8.010 | H110-8 | Industry code | AN | 1.30 | nu |  |  |  | 999 | E | LK403 $=110:$ "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H110.9.010 | H10-9 | Yes/No Condition or response Code | 10 | ${ }^{1-1}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Flement Present" | Must not be present. | Must not be present. |  |
| $\times \times 22.242 .23300 . \mathrm{H11.010}$ | H111 |  |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ |  | is 230. .H111 can only be presentit 2300 .H110 |  |
| X222.242.2300.H111-1.010 | H111-1 | Code List Qualifier | ID | ${ }^{1-3}$ | R |  |  | BG | 999 | R | \|K403 $=$ 7: "Invalid Code Value" | 2300. H11-1 must be "BG". | 2300.H111-1 must be "BG". |  |
| ×222.242.2300.H111-2.010 | H111-2 | Condition Code | an | ${ }^{1.30}$ | R |  |  |  | 277 | c | Cscc A7: <br> "AcknowledgementRejected for Invalid Information..." <br> CSC 460: "NUBC Condition Code(s)" | 2300. H111-2 must be a valid Condition code. | 2300.H11-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| $\times 2 \times 22.242 \cdot 2300 . H 111-3.010$ | H111-3 | Date Time Period Format Qualifier | $1{ }^{10}$ | ${ }^{2.3}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.242.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1.35 | vu |  |  |  | 999 | E | K4033 $=100:$ "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H111-5.010 | H111-5 | Monelay Amount | R | ${ }^{1.18}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be peresent. |  |
| X222.242.2300.H111-6.010 | H11-6 | Quantiy | R | 1.15 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesent. |  |
| x222.242.2300.H111-7.010 | H111-7 | Version Identifier | ${ }_{\text {AN }}$ | 1.30 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H111-8.010 | H11-8 | Industry code | ${ }^{\text {AN }}$ | 1.30 | nu |  |  |  | 999 | E | (12403 $=10.0$ "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.242.2300.H111-9.010 | H11-9 | Yes/No Condition or response Code | $1{ }^{10}$ | ${ }^{1-1}$ | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesesent. |  |
| X222.242.2330.H112.010 | ${ }^{H 112}$ |  |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | 2300.H112 can only be present if 2300. H111 | 230. H112 can only be presentit $2300 . \mathrm{H111}$ is is resent |  |
| X222.242.2300.H112-1.010 | H112-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | \|K403 $\mathbf{7}$ 7: "Invalid Code Value" | $2300 . H 12-1$ must be "BG". | 2300.H112-1 must be "BG". |  |
| ×222.242.2300.H112-2.010 | H112-2 | Condition Code | ${ }^{\text {an }}$ | ${ }^{1.30}$ | R |  |  |  | 277 | c | Cscc A7: <br> 'AcknowledgementRejected for Invalid Intormation..." <br> CSC 460: "NUBC Condition Code(s)" | 2300. H112-2 must be a valid Condition code. | 2300.H112-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be avaiable for this edit. |
| X222.242.2300.H112-3.010 | H12-3 | Date Time Period Format Qualifier | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H112-4.010 | H12-4 | Date Time Period | an | 1.35 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not te present. | Must not be present. |  |
| X222.242.2300.H112.5.010 | H112-5 | Monetay Amount | R | 1.18 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.242.2300.H112.6.010 | H112-6 | Quantiy | R | 1.15 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesesent. |  |
| X222.242.2300.H112-7.010 | H122-7 | Version Identifier | AN | 1.30 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesent. |  |
| X222.242.2300.H112.8.010 | H122-8 | Industry code | ${ }_{\text {AN }}$ | 1.30 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be pesent. |  |
| х222.242.2300.H112.9.010 | H112-9 | Yes/No Condition or response Code | 10 | 1-1 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |


| Edit Reference | $\underset{\substack{\text { Segment or } \\ \text { Element }}}{\substack{\text { a }}}$ | Description | 10 | min. Max. | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repat }}}{ }$ | $\begin{gathered} 5010 A_{1} \\ \text { values } \end{gathered}$ | $\begin{gathered} \text { Th11 } \\ \substack{9997 \\ 277 c a} \end{gathered}$ | ${ }_{\text {Acteptrej }}^{\text {ect }}$ | Disposition /Error Code | Proposed 5010A1 Edits Part B | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.255.2300.HCP.005 | нсР | CLAIM PRICING/REPRICING INFORMATION |  | 1 | s | 2300 |  |  | 277 | ${ }^{\top}$ | cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." CSC 732: "Information submitted guidelines." CSC 64: "Re-pricing information." | Segment must not be present. | Segment must not be present. |  |
| X222.252.230..HCP. 010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X222.252.2300.HCP01.010 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.252.2300.HCP02.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X222.252.2300.HCPO3.010 } \\ \text { Edit Deactivated } \end{array} \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.252.230..HCPO3.020 Editi Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.252.2300.HCP04.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \times 222.252,2300 . \mathrm{HCP} \text { P4.040 } \\ \text { Editideactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.255.2300.HCP04.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X222.252.230..HCPO5.010 } \\ \text { Editideactivated } \end{array} \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.252.2300.HCP05.020 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.252.2300.HCP06.010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.252.230. 2 .HCPO6.020 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.252.2300.HCP06.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| (ex |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.252.2300.HCP06.050 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.252.2300.HCP07.010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |



| Edit Reference | Segment or Element | Description | 10 | Min. max | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 <br> Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition /Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.257.2310A.NM105.040 | NM105 |  |  |  |  |  |  |  | ${ }^{999}$ | R | ${ }^{\text {Kitement }}$ | ${ }^{23100 . N M 105 ~ m u s t ~ b e ~ p o p p u l a t e d ~ w i t h ~}$ | ${ }^{23100 . . N M 105 ~ m u s t ~ b e ~ p o p p u l a t e d ~ w i t h ~}$ |  |
| X222.257.2310A.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 514: "Entity's Middle Nam EIC: DN "Referring Provider" "Referring Provider" | The first position of 2310A.NM105 must be alphabetic (A...Z). | The first position of 2310A.NM105 must be alphabetic ( $\mathrm{A} . . \mathrm{Z}$ ). | To prevent continued processing and later reiection of clams (CWF) having an incorrect character in this position, such as a a paren. |
| x222.257.2310A.NM105.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.257.2310A.NM106.010 | NM106 | Name Prefix | an | 1-10 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.257.2310A.NM107.010 | NM107 | Referering Provider Name Suffix | an | ${ }^{1-10}$ | s |  |  |  | 999 | R | IK403 =6:"IIvalid Character in Data Element" | 2310A.NM107 must contain at least one nonspace character. | 2310A.NM107 must contain at least one nonspace character. |  |
| x222.257.2310A.NM107.020 | nM107 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2310 A.NM107 must be 1-10 characters. | 2310A.NM107 must be 1-10 characters. |  |
| ×222.257.2310A.NM107.030 | nM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's CSC 125: "Entity's Name" EIC: DN "Referrina Provider" |  |  |  |
| ×2222.257.2310A.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2310A.NM107 must be populated with accepted AN characters. | 2310A.NM107 must be populated with accepted AN characters. |  |
| X222.257.2310A.NM107.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.257.2310A.NM108.010 | nм108 | Idenification Code Qualifier | 10 | 1-2 | s |  |  | xx | 277 | c | "Acknowledgement/Rejected for relational field in error." CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: DN "Refern Provider | 2310A.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier" |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Proje 01/20: Companion Guide Note neider 1/20: Companion Guide Note needed. |
| ×222.257.2310A.NM108.020 | nM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6 <br> "Acknowledgement/Rejected for Missing Information. <br> . Identifier Qualifier" <br> CSC 562: "Entity's National Provider <br> EIC: DN "Referring Provider" | 2310A.NM108 must be present. | 2310A.NM108 must be present. | Everyone but Trailblazer or JH (Texas); as appropriate for current MAC contract for VA MRA ct claims. <br> 01/20: Companion Guide Note needed |
| x222.257.2310A.NM108.030 | nM108 |  |  |  |  |  |  |  | ${ }^{999}$ | R | 1K403 =7: "Invalid Code Value' | 2310A.NM108 must be "XX | 2310A.NM108 must be "XX". | Does not apply to TrailBlazer or JH (Texas); as appropriate for current MAC contract for VA MRA Project claims) |
| X222.257.2310A.NM109.010 | nм109 | Referring Provider Identifier | AN | 2.80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2310A.NM109 must be present if 2310A.NM108 is present. | 2310A.NM109 must be present if 2310A.NM108 is present. |  |
| ×222.257.2310A.NM109.020 | nM109 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid information.." <br> CSC 562: "Entity's National Provider EIC: DN "Refe <br> EIC: DN "Referring Provider" | 2310A.NM109 must be valid according to the NPI algorithm. | 2310A.NM109 must be valid according to the NPI algorithm. |  |
| ×222.257.2310A.NM109.030 | nM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: DN "Referring Provider" | The first position of 2310A.NM109 must be a "1". | The first position of 2310A.NM109 must be a "1". |  |
| X222.257.2310A.NM109.040Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.257.2310A.NM110.010 | NM110 | Entity Relationship Code | 10 | 2.2 | NU |  |  |  | 999 | E | $\left\lvert\, \begin{aligned} & \text { K4033 }=110: ~ M m p l e m e n t a i o n ~ " N o t ~\end{aligned}\right.$ | Must not be present. | Must not be present. |  |
| x222.257.2310A.NM111.010 | NM111 | Enity Identifer Code | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X2222.257.2310A.NM112.010 | NM112 | Name Last or Organization Name | an | ${ }^{1.60}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.260.2310A.REF.010 | REF | REFERRING PROVIDER SECONDARY IDENTIFICATION |  | ${ }^{3}$ | s | 2310 A |  |  | ${ }^{999}$ | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2310A.NM1 is present, 2310A.REF with REF01 = "1G" or "0B" may be present when 2310A.NM109 is not present. |  | Traillazer or JH (Texas) only, as appropitiate for current MAC contract for VA MRA Project claims). o120: Companion Guide Note needed. |
| x222.260.2310A.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted guidelines." <br> CSC 560: "Entity's <br> Additional/Secondary Identifier." <br> EIC: DN "Referring Provider" | Only two iterations of 2310A.REF with REF01 = "0B"or "IG" are allowed. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims). 01/20: Companion Guide Note needed. |


| Edit Reference | Segment or Element | Descripion | 10 | $\min _{\text {max. }}$ | Usage <br> Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part B } \end{gathered}$ | Proposed 5010A1 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.260.2310A.REF.030 | REF |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310A.REF must not be present. | 2310A.REF must not be present. | $\begin{aligned} & \text { Everyone but Trailblazer or JH (Texas; as } \\ & \text { appropriate for current MAC contract for VA MRA } \\ & \text { Project clias). } \end{aligned}$ O1/20: Companion Guide Note needed. |
| X222.260.2310A.REF01.010 | REF01 | Reference Identification Qualifier | 10 | 2.3 | R |  |  | 0B, 16, G2 | 999 | R | $1 \mathrm{~K} 403=1$ : "Required Data Element Missing" | 2310A.REF01 must be present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims). 01/20: Companion Guide Note needed. |
| x222.260.2310A.REF01.020 | ReFou |  |  |  |  |  |  |  | ${ }^{999}$ | R | 1K403 $\mathbf{~ 7 ~ 7 ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $2310 A$.REF01 must be valid values. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims.) 01/20: Companion Guide Note needed. |
| X222.260.2310A.REFO2.010 | REF02 | Referring Provider Secondary Identifier | an | ${ }^{1.50}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" Missing" | 2310A.REF02 must be present. |  | Traiblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims) 01/20: Companion Guide Note needed. |
| X222.260.2310A.REFO2.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | When 2310A.REF01 = "0B", 2310A.REF02 must contain at least one non-space character |  | Traillazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims). 01/20: Companion Guide Note needed. |
| x222.260.2310A.REF02.030 | ReFo2 |  |  |  |  |  |  |  | 277 | T | CSCC A8 |  |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims) 01/20: Companion Guide Note needed |
| X222.260.2310A.REFO2.040 | ReFor |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | When 2310A.REF01 = "0B", 2310A.REF02 must be 1 - 50 characters. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims). 01/20: Companion Guide Note needed. |
| x222.260.2310A.REFO2.050 | REF02 |  |  |  |  |  |  |  | 277 | T |  |  |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims) 01/20: Companion Guide Note needed. |
| X222.260.2310A.REFO2.060 | ReFoz |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |  | Traillazer or H H (Texas) only, as appropiatia for 0120: Companion Guide Note needed. |
| $\times 222.260 .23100 . R E F 02.070$Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.260.2310A.REF03.010 | REFO3 | Descripion | AN | 1-80 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.260.2310A.REF04.010 | REF04 | REFERENCE IIENTIFIER |  |  | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.262.23108.NM1.010 | NM1 | $\begin{gathered} \text { RENDERRNG PROVIDER } \\ \hline \text { NAME } \\ \hline \end{gathered}$ |  | 1 | s | ${ }^{23108}$ | 1 |  | ${ }^{999}$ | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310B.NM1 is allowed. | Only one iteration of 2310B.NM1 is allowed |  |
| x222.262.23108. . 1 M101.010 | NM101 | Enity Identifier Code | 10 | 2.3 | R |  |  | 82 | 999 | R |  | 23108. NM101 must be present. | 23108.NM101 must be present. |  |
| X222.262.23108. M M101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | CsC 504: "Enitys Last Name" | 23108.NM101 must be "82". | 23108. NM101 must be "82". |  |
| X222.262.23108.NM102.010 | NM102 | Entity Type Quadifier | 10 | ${ }^{1-1}$ | R |  |  | 1,2 | 999 | R | ElC: 82 "Rendeing Provider" | 23108. NM 102 must be present. | 23108.NM102 must be present. |  |
| x222.262.23108.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7. "Invil Code Value" | 23108. NM102 must be valid values. | 23108. NM102 must be evalid values. |  |
| х222.262.23108. . 1103.1010 | nм103 | Rendering Provider Last or Orqanization Name | an | 1.60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missina | 23108.NM103 must be present. | 23108.NM103 must be present. |  |
| х222.262.2310B. ${ }^{\text {м } 1103.020}$ | NM103 |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM103 must contain at least one non- space character. | 2310B. NM103 must contain at least one non- space character. |  |
| х222.262.2310B. .м 103.030 | nM103 |  |  |  |  |  |  |  | 999 | E | 1K003 = 5: "Data Element Too Long" | 23108. .nM103 must be 1-60 characters. | 23108.NM103 must be 1-60 characters. |  |
| ×222.262.23108. . 1103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: 82 "Renderina Provider" |  |  |  |
| х222.266.23108. . 1103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  | $2310 B$. NM1O3 must be populated with acceneed AN characeres. |  |
| x222.262.23108.NM103.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X222.262.2310B.NM104.010 } \\ \text { Edit Deacavived } \end{array} \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.262.23108. .M104.015 | NM104 | Rendering Provider First Name | an | 1-35 | s |  |  |  | 999 | R | IK403 = 113. "Implementation Dependent "Not Used" Data Elemen Present" | $\begin{aligned} & \text { If 2310B.NM102 is " "2", 23108.NM104 must } \\ & \text { not be present. } \end{aligned}$ | $\begin{aligned} & \text { If 2310B.NM102 is " } 2 \text { ", 2310B.NM104 must } \\ & \text { not be present. } \end{aligned}$ |  |
| х2222.262.23108.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | ${ }_{\text {space character }}^{2318 \text {. }}$. | 2310B.NM104 must contain at least one non- space character. |  |
| х222.262.23108.NM104.030 | NM104 |  |  |  |  |  |  |  | 999 | E | \|K403 =5: "Data Element Too Long" | 23108. .NM104 must be 1-35 characters. | 2310B.NM104 must be $1-35$ characters. |  |


| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { Min. } \\ \hline \end{gathered}$ Max. | $\begin{array}{\|c\|c} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\left\|\begin{array}{c} \text { Acceptrej } \\ \text { ect } \end{array}\right\|$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.266.23108..nM104.040 | nM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" EIC: 82" "Renderina Provider" |  |  |  |
| х222.262.23108.NM104.050 | NM104 |  |  |  |  |  |  |  | 999 | R |  | ando. NM104 must be populated with acceneded AN churacters. | accepened AN characters. and |  |
| X222.262.2310B.NM104.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X222.262.2310B.NM105.010 } \\ & \text { Edit Deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.266.23108.NM105.015 | nм105 | Rendering Provider Mididle Name | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 113: "Implementation Dependent "Not Used" Data Element Present" | $\begin{array}{\|l} \begin{array}{l} \text { If 2310..NM102 is " } 2 ", 2308 . N M 105 ~ m u s t ~ \\ \text { not te pesesent } \end{array} \\ \hline \end{array}$ | $\begin{array}{\|l\|l} \text { If } 23108 . \text { nM102 is " } 2 \text { ", } 23108 \text {.NM105 must } \\ \text { not be pesesent } \end{array}$ |  |
| x222.262.23108.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM105 must contain at least one non- space character. | Space charascer. |  |
| x222.262.23108.NM105.030 | NM105 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 23108. NM105 must be $1-25$ characters. | 23108. . NM105 must be $1-25$ characters. |  |
| x222.266.23108.NM105.040 | nM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> EIC. 82." Entity's Middle Name" <br> EIC: 82 "Rendering Provider" |  |  |  |
| ×222.266.23108.NM105.050 | NM105 |  |  |  |  |  |  |  | 999 | R | EIC: 82 "Rendering Provider" | 2310B.NM105 must be populated with | 23108 .NM105 must be populated with |  |
| x222.266.23108.NM105.055 | nM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 514: "Entity's Middle Name" <br> CSC 514: "Entity's Middle Name" EIC: 82 "Rendering Provider" <br> ER: 82 "Rendering Provider" | The first position of 2310B.NM105 must be alphabetic (A...Z). | The first position of 2310B.NM105 must be alphabetic (A...Z). | To prevent continued processing and later reiection of claims (CW) having an incorrect character in this position, such as a paren. |
| $\begin{aligned} & \text { X222.262.2310B.NM105.060 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.262.23108.NM106.010 | NM106 | Name Prefix | AN | 1-10 | nu |  |  |  | 999 | E | (1) | Must not be present. | Must not be present. |  |
| х222.266.23108.NM107.010 | nм107 | Rendering Provider Name Suffix | an | 1-10 | s |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent "Not Used" Data Elemen Present" | \|f 23108.NM102 is "7", 23108. NM107 must not be present. | If 23108. .NM102 is " 2 ", 23108. .NM107 must not be present. |  |
| х222.262.23108..NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | R |  | 2310B.NM107 must contain at least one non- space character. | $23108 . . N M 107$ must contaia at teast one non- space character. |  |
| х222.266.23108.NM107.030 | NM107 |  |  |  |  |  |  |  | 999 | E | \|K403 $=5$ : "Data Element Too Long" | 1 t 23108 . .nm107 must be 1-10 characters. | If 23108. NM107 must be $1-10$ characters. |  |
| x222.266.23108..nM107.040 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's CSC 125: system "Entity's Name" ElC: 82 "Renderina Provider" |  |  |  |
| х222.266.23108.NM107.050 | NM107 |  |  |  |  |  |  |  | 999 | R |  | 23108. NM107 must be poppuated with accented AN characters. |  |  |
| $\begin{aligned} & \text { x22.262.23108.NM107.060 } \\ & \text { Edit Deaciviated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.266.23108.NM108.010 | nM108 | Identificaion Code Qualifier | 10 | $1-2$ | s |  |  | xx | 277 | c | CSCC A8 <br> "Acknowledgement/Rejected for relational field in error," <br> CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI) <br> FIC: 82 "Renderina Provider" | 2310B.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier" |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims) 01/20: Companion Guide Note needed. |
| x222.262.23108.NM108.020 | nM108 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Missing Information CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider EIC. 82 (NPI) <br> ElC: 82 "Rendering Provider" | 23108.NM108 must be present. | 23108.NM108 must be present. | Everyone except Trailblazer or JH (Texas), as appropriate for current MAC contract for VA MRA Project claims <br> 01/20: Companion Guide Note needed |
| ×222.262.23108.NM108.030 | nM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 23108. NM108 must be "XX". | 23108. .nM108 must be "XX". | Valid NPI Crosswalk must be available for this ediit Does not apply to TrailBlazer or $J H$ (Texas), as appropriat for current MAC contract for VA MRA Project claims. |
| $\times \times 22.266 .23108 . N$ NM109.010 | NM109 | Rendeeing Provider Identifier | AN | 2.80 | s |  |  |  | 999 | R | K403 = 2: "Conditional Required Data Element Missing" | 23108. NMMO9 must be present if | ${ }^{23108 . N M 109 \text { must be present if }}$ |  |
| x222.266.23108.NM109.020 | nM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowled Information... CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 82 "Renderina Provider" | 2310B.NM109 must be valid according to the NPI algorithm. | 2310B.NM109 must be valid according to the NPI algorithm. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. max. | Usage Req. | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TA11 } \\ \substack{9991 \\ 277 C A} \end{gathered}$ | $\begin{array}{\|c\|cc\|c\|c\|r\|} \hline \text { coct } \\ \text { eet } \end{array}$ | Disposition / Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part } \mathrm{B} \end{gathered}$ | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.262.23108.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid Information..."' <br> CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 82 "Rendering Provider" | 2310B.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | 2310B.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. |  |
| х222.262.23108. . 1109.040 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> 562. "Entity's National Provider Identifier (NPI)" <br> EIC: 82 "Rendering Provider" | The first position of 2310B.NM109 must be a "1". | The first position of 2310B.NM109 must be a "1". |  |
| X222.262.2310B.NM110.010 | NM110 | Enity Relationstip Code | 10 | 2.2 | NU |  |  |  | 999 | E | (14403= $=10 \cdot$ " Implementration "Not | Must not be present. | Must not be present. |  |
| X222.262.2310B.NM111.010 | NM111 | Enity Idenifier Code | 10 | 2.3 | NU |  |  |  | 999 | E | (14033 $=10.0$ "Implementation "Not | Must not be pesent. | Must not be present. |  |
| х222.262.2310B.NM112.010 | NM112 | Name Last or Organization Name | an | 1.60 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.265.2310B.PRV. 010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.265.23108.PRV.020 | PRV | RENDERING PROVIDER SPECIALTY INFORMATION |  | 1 | s | ${ }^{23108}$ |  |  | ${ }^{999}$ | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310B.PRV with PRV01 = "PE" is allowed. | Only one iteration of 2310B.PRV with PRV01 = "PE" is allowed. |  |
| X222.265.23108.PRV01.010 | PrV01 | Provider Code | 10 | 1-3 | R |  |  | PE | 999 | R | IK403 = 1: "Required Data Element Missing | 23108.PRV01 must be present. | 23108.PRV01 must be present. |  |
| X222.265.23108.PRVV1.020 | PRV01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{7}$ : "Ilvalid Code Value" | 23108. PRV01 must be "PE". | 23108.PRV01 must be "PE". |  |
| X222.265.23108.PRVV2.010 | PRV02 | Reference Identification Qualifier | $1{ }^{1}$ | ${ }^{2 \cdot 3}$ | R |  |  | PxC | 999 | R | (1) | 23108.PRV02 must be present. | 23108.PRV02 must be present. |  |
| X222.265.23108.PRVV2.020 | ${ }^{\text {PRV02 }}$ |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{7}$ : "Ilvalid Code Value" | 23108.PRV02 must be "PXC". | ${ }^{23108 . P R V 02 ~ m u s t ~ b e " P X C " . ~}$ |  |
| х222.266.23108.PRV03.010 | PRV03 | Provider Taxoonomy Code | AN | ${ }^{1.50}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" $\qquad$ | 23108.PRV03 must be present. | 23108.PRV03 must be present. |  |
| x222.265.23108.PRV03.020 | PRV03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid Information..." <br> CSC 145: "Entity's specialty/taxonomy code" <br> EIC: 82 "Renderina Provider" | 2310B.PRV03 must be a valid Provider Taxonomy Code | 2310B. Prvos must be a valid Provider Taxonomy Coode | Valid Taxonomy reference must be available for this edit. |
| X222.266.23108.PRV04.010 | PRV04 | State or Province Code | 10 | 2.2 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.265.2310B.PRV05.010 | PRV05 | PROVIDER SPECIALTY INFORMATION |  |  | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.265.2310B.PRV06.010 | PRVO6 | Provider Organization Code | ID | 3.3 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.267.23108.REF. 010 | REF | RENDERING PROVIDER SECONDARY IDENTIFICATION |  | 4 | s | ${ }^{23108}$ |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2310B.NM1 is present, 23108.REF with REF01 = "16", "OB", "G2" or "LU" may be present when 2310B.NM109 is not present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| x222.267.23108.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." <br> CSC 560: "Entity's Additional/Secondary Identifier." EIC: 82 "Rendering Provider" | Only four iterations of 2310B.REF with REF01 = "1G", "0B", "G2" or "LU" are allowed. |  | Traiblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01120: Companion Guide Note needed. |
| x222.267.23108.REF. .330 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310B.REF must not be present. | 23108.REF must not be present. | Everone but Traillazer or JH (Texass as appropriate ofo current MAC contract for VA MRA Project claims). <br> 01/20: Companion Guide Note needed |
| X222.267.2310B.REF01.010 | REF01 | Reference Identification Qualifier | 10 | 2.3 | R |  |  | 0B, 16, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 23108.REFF01 must be present. |  |  |
| X222.267.2310B.REF01.020 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.267.2310B.REF01.025 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 23108. REF01 must be vaid values. |  |  |
| X222.267.2310B.REFFO2.010 | REF02 | $\xrightarrow{\text { Rendering Provider Secondary }}$ Identifer | AN | 0 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | $23108 . R$ Reor must be present. |  |  |
| X222.267.2310B.REFO2.020 | ReFo2 |  |  |  |  |  |  |  | ${ }^{999}$ | R |  | When 2310B.REF01 $==$ = "0B", "G2" or "LU", 2310B.REF02 must contain at least one non- space character. |  |  |
| X222.267.23108.REFO2.030 | REFO2 |  |  |  |  |  |  |  | 277 | c |  | When 2310B.REF01=" "16", 23108. REFO2 must be in format ANNNNN or AAANNN numeric digit). |  |  |
| X222.267.2310B.REFFO2.040 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | When 2310B.REF01= "OB", "G2" or "Lu", |  |  |

$\xrightarrow{837-}$

| Edit Reference | Segment or Element | Description | ID | Min. Max. | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 values | $\begin{gathered} \text { TA11 } \\ \substack{9996 \\ 277 c \mathrm{C}} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.267.23108.REF02.050 | REFO2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 133: "Entity's UPIN" EIC: 82 "Rendering Provider" |  |  |  |
| X222.267.2310B.REFO2.060 | REF02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \begin{array}{l} \text { KKa03 }=6 \text { :"Invalid Character in Dota } \\ \text { Element" } \end{array} \end{aligned}$ | When 2310B.REF01 = = "OB", "G2" or "LU", 2310B.REF02 must be populated with accepted AN characters. |  |  |
| X222.267.2310B.REF02.070Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.267.23108.REFF03.010 | REFO3 | Descripion | AN | 1.80 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.267.23108.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | nu |  |  |  | 999 | E | (K4033 $=110$. "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.269.2310C.NM1.010 | NM1 | SERVICE FACILTTY LOCATION NAME |  | 1 | s | 2310 C | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310C.NM1 is allowed. | Only one iteration of 2310C.NM1 is allowed. |  |
| x222.269.2310C.NM101.010 | NM101 | Entity Identifier Code | 10 | 2.3 | R |  |  | 77 | 999 | R | (Kissing" | 2310C.NM101 must be present. | 2310C.NM101 must be present. |  |
| <222.269.23100. .M 101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2310C.NM101 must be"77". | 2310 C . $\mathrm{NM1011}$ must be"77". |  |
| x222.269.2310C.NM102.010 | NM102 | Entity Type Quadifier | 10 | ${ }^{1-1}$ | R |  |  | 2 | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" Missing" | 2310 C .NM102 must be present. | 2310C.NM102 must be present. |  |
| X222.269.2310C.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2310C.NM102 must be "2". | $2310 \mathrm{C}, \mathrm{NM102}$ must be " 2 ". |  |
| x222.269.2310C.NM103.010 | nı103 | Laborator of Facility Name | AN | ${ }^{1.60}$ | R |  |  |  | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2310C.NM103 must be present. | 2310 C .NM103 must be present. |  |
| X222.269.2310С.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R |  | 2310. NM103 must contain a a teast one non- space character. | $2310 \mathrm{C} . \mathrm{N} 103$ must contain at least one nom- space character. |  |
| х222.269.2310С. . 1103.030 | nM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310C.NM103 must be 1-60 characters. | ${ }^{2310 C . N M 103 ~ m u s t ~ b e ~ 1-60 ~ c h a r a c t e r s . ~}$ |  |
| ×222.269.2310C.NM103.440 | nM103 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: Acknowled Information $\qquad$ CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC. 77 "Service Location" |  |  |  |
| х222.269.2310C.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | K403 6 : :INvalid Character in Data Element" | 2310C.NM103 must be populated with accepted AN characters. | 2310C.NM103 must be populated with accepted AN characters. |  |
| X222.269.2310C.NM103.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.269.2310C.NM104.010 | NM104 | Name First | an | 1.35 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.269.2310C.NM105.010 | nM105 | Name Midode | an | ${ }^{1-25}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.269.2310C.NM106.010 | NM106 | Name Prefix | an | ${ }^{1-10}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.269.2310C. $\mathrm{NM107.010}$ | NM107 | Name Suffix | AN | ${ }^{1-10}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.269.2310C.NM108.010 | nм108 | Identification Code Qualifier | 10 | 1-2 | s |  |  | xx | 999 | R | 1K403 $\mathbf{~ 7 ~ : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2310C. NM108 must be "XX". | ${ }^{2310 C . N M 108 ~ m u s t ~ b e ~ " X X " . ~}$ | Does not apply to TrailBlazer or JH (Texas) as appropriate for current MAC contract for VA MRA Project claims. |
| X222.269.2310C.NM109.010 | NM109 | $\underset{\text { Laboratory of facility Primary }}{\text { Identifer }}$ | AN | 2.80 | s |  |  |  | 999 | R |  | If $2310 C$. NM108 is present, 2310C.NM 109 must be present. | If $2310 \mathrm{C} . \mathrm{NM} 108$ is present, 2310C.NM 109 must be present. |  |
| ×222.269.2310C.NM109.020 | nı109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 77 "Service Location" | 2310C.NM109 must be valid according to the NPI algorithm. NPI algorithm. | 2310C.NM109 must be valid according to the NPI algorithm. |  |
| ×222.269.2310C.NM109.030 | nM109 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information... <br> CSC 562: "Entity's National Provider dentifier (NPI)" <br> EIC: 77 "Service Location" | The first position of 2310C.NM109 must be a "1". | The first position of 2310C.NM109 must be a "1". |  |
| x222.269.2310C.NM110.010 | NM110 | Enity Relationstip Code | 10 | 2.2 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.269.2310C.NM111.010 | NM111 | Enity Idenifier Code | 10 | 2.3 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.269.2310C.NM112.010 | NM112 | Name Last or Organization Name | AN | 1.60 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.272.2310С.N3.010 | N3 | SERVICE FACILITY LOCATION ADDRESS LOCATION ADDRESS |  | 1 | R | 2310 C |  |  | 999 | ${ }^{\text {R }}$ | IK304 = 16: "Implementation Dependent Segment Missing" | If 2310 C .NM1 is present, 2310.N3 must be present. | If 2310 C .NM1 is present, $2310 . \mathrm{N} 3$ must be present. |  |
| х222.272.2310С.N3.020 | N3 |  |  |  |  |  |  |  | 999 | R | $1 \times 304=5:$ " Segment Exceeds Maximum Use" | Only one iteration of 2310C.N3 is allowed. | Only one iteration of 2310C.N3 is allowed. |  |
| x222.272.2310C...301.010 | N301 | Laboratory or Facility Address Line | AN | ${ }^{1.55}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310 C. N301 must be pesent. | ${ }^{2310 C .}$. 301 must be pesent. |  |
| х222.272.23100...301.020 | N301 |  |  |  |  |  |  |  | 999 | R | ${ }^{\text {K. }}$ KOO3 $=6$ : "Invalid Character in Data | space . 3 301 mustert contain at least one non- | Ssace character. Stontain at least one non- |  |
| x222.272.2310C.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | ${ }^{23100}$. 3301 must be 1.55 characters. | ${ }^{23100}$. 3301 must be 1.55 characters. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. Max. | $\begin{array}{\|c\|c} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 <br> values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.272.2310C..3301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid <br> Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 503: "Entity's Street address" <br> EIC: 77 "Service_ocation" <br> "S.as |  |  |  |
| X222.272.2310C...301.050 | N301 |  |  |  |  |  |  |  | 999 | R |  | 2310C. N301 must be populated with accented AN characters. | 2310C. N301 must be populated with accented AN characters. |  |
| X222.272.2310C.N301.060 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l\|l\|} \hline \text { 222:.272.2310. .302.010 } \\ \text { Edit Deactivated } \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | N302 | ${ }_{\text {Len }}^{\text {Laboratory or Faciliy Address }}$ Line | AN | 1-55 | s |  |  |  | 999 | R | KK03 = 6: "Invalid Character in Data Element" |  |  |  |
| х222.272.2310C. $\mathbf{3} 302.030$ | N302 |  |  |  |  |  |  |  | 999 | E | \|K403 5 5: "Data Element Too Long" | 2310 . N302 must be $1-55$ characters. | 23100. . 302 must be $1-55$ characters. |  |
| х222.272.2310C.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 512: "Length invalid for receiver's application system FIC. 77 " . EIC: 77 "Service Location" |  |  |  |
| X222.272.2310C. ${ }^{\text {N302.050 }}$ | N302 |  |  |  |  |  |  |  | 999 | R |  | 2310 C . $\mathrm{N302}$ must be populated with accented AN characters. | 2310C. ${ }^{2022}$ must be populated with acceneed AN characters. |  |
| X222.272.2310C.N302.060 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.273.2310C.N4.010 | N4 | SERVICE FACILITY OCATION CITYISTATEIZIP |  | 1 | R | ${ }^{2310 C}$ |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | $\begin{aligned} & \text { If } 2310 \mathrm{C} . \mathrm{NM} 1 \text { is present, } 2310 . \mathrm{N} 4 \text { must be } \\ & \text { present. } \end{aligned}$ | If $2310 \mathrm{C} . \mathrm{NM} 1$ is present, $2310 . \mathrm{N} 4$ must be present. present. |  |
| $\times \times 222.277 .2310 C . N 4.020$ | N4 |  |  |  |  |  |  |  | 999 | R | \|1304=5: "Segment Exceeds | Only one iteration of 2310C.N4 is alowed. | Only one iteration of 2310C.N4 is allowed. |  |
| X222.273.2310C.N401.010 | N401 | Laboratory or Facility City Name | AN | 2.30 | R |  |  |  | 999 | R | $1 \mathrm{~K} 403=1:$ "Required Data Element Missing" | ${ }^{2310 C . N 401 ~ m u s t ~ b e ~ p e s e n t . ~}$ | ${ }^{2310 C . N 4011 ~ m u s t ~ b e ~ p e r e s e n t . ~}$ |  |
| X222.273.2310C.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R |  | 23100. N401 must contain at least two non- space characters. | 2310. .N401 must contaia at teast two non- space characters. |  |
| X222.273.2310C. . 4001.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 - 4. "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2310C. N401 must be 2.30 characters. | ${ }^{2310 C .}$. 4001 must be 2.30 characters. |  |
| X222.273.2310C.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's CSC 502: system <br> CSC 502: "Entity's City" |  |  |  |
| X222.273.2310C. . 401.050 | N401 |  |  |  |  |  |  |  | 999 | R | KLAOB=6: "Ivalid Characacter in Data Element: |  |  |  |
| X222.273.2310C.N401.060 Edit Deactivated <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.273.2310C. N402.010 | N402 | Laboratory or Facility State or Province Code | 10 | 2.2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data <br> Element Missing" |  |  |  |
| X222.273.2310C.N402.220 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid Information... <br> CSC 501: "Entity's State/Province" EIC 77 "Service Location" | 2310 C.N002 must be a valid State Code. | $2310 C$. 4002 must be a vald State Code. | Valid State Code reference must be available for this edit. |
| X222.273.2310C. .403.010 | N403 | $\underset{\text { Laboratoy or Facility Postal Zone }}{\text { ZIP code }}$ | $1{ }^{1}$ | ${ }^{3-15}$ | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 1 I2310C. .N404 is not present, 2310C.N403 must be pesesent | 112310 C. N404 is not present, 2310 C .N403 must be present. |  |
| X222.273.2310C.N403.220 | N403 |  |  |  |  |  |  |  | 277 | c |  | $2310 C . N 403$ must be a valid 9 digit Zip Code. | 2310C. N003 must be a vaid 9 digit Ziip Code. | Valid Zip Code reference must be available for this edit. |
| X222.273.2310C.N404.010 | N404 |  | 10 | 2.3 | s |  |  |  | 999 | E | 1 K403 $=110: ~ " I m p l e m e n t a t a i o n ~ " N o t ~$ Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.273.2310C.N405.010 | N405 | Location Qualifer | 10 | 1-2 | NU |  |  |  | 999 | E | (14033 $=10.0$ "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.273.2310C.N406.010 | N406 | Location Identifier | an | 1-30 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.273.2310C. 1407.005 | N407 | Country Subdivision Code | ID | ${ }^{1-3}$ | s |  |  |  | 999 | E |  | Must not be present. | Must not te present. |  |
| X222.273.2310C.N407.010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | Min. | Ueq. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 values | $\begin{gathered} \text { TA11 } \\ \text { Ta99 } \\ 277 c \mathrm{Ca} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.275.2310C.REF.010 | REF | SERVICE FACILITY LOCATION SECONDARY IDENTIFICATION |  | 3 | s | oc |  |  | 277 | T | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted guidelines." <br> CSC 560: "Entity's <br> Additional/Secondary Identifier." <br> EIC: 77 "Service Location" | $2310 C$. REF must not be present. | 2310C.REF must not be present. | 01/06: This REF (2310C and 2420C) not accepted by Medicare. <br> 01/20: Companion Guide Note needed |
| X222.277.2310C.PER. 010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.277.2310C.PER. 020 | PER | SERVICE FACILITY CONTACT INFORMATION |  | 1 | s | ${ }^{2310} \mathrm{C}$ |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310C.PER is allowed. | Only one iteration of 2310C.PER is allowed. |  |
| X222.277.2310C.PER01.010 | Perol | Contact Function Code | 10 | 2-2 | R |  |  | c | 999 | R | IK403 = 1: "Required Data Element | ${ }^{2310 C . P E R R 01 ~ m u s t ~ b e ~ p r e s e n t . ~}$ | 2310C.PERR01 must be present. |  |
| X222.277.2310C.P.PR01.020 | PER01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2310 C, PER011 mus te "lC". | 2310 CP Per01 must be "C". |  |
| x222.277.2310C.PERR02.010 | PER02 | Submiter Contact Name | an | 1.60 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310C.PERO2 must be 1-60 characters. | 2310C.PERRO2 must be 1-60 characters. |  |
| X222.277.2310C.PERRO2.020 | PERO2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 "Acknowledgement/Rejected for Invalid Information... CSC 512: "Length invalid for receiver's application system" CSC 561: "Entity's Contact Name" EIC. 77 "Service Location" |  |  |  |
| х222.277.2310C.PERRO3.010 | PERO3 |  | 10 | 2-2 | R |  |  | TE | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2310C.PER03 must be present. | 2310C.PER03 must be present. |  |
| X222.277.2310C.P.PR03.020 | PER03 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 23100. Per03 must be "TE". | ${ }^{2310 C . P E R} 03$ must be "TE". |  |
| X222.277.2310C.PER04.010 | PER04 | Communication Number | AN | ${ }^{1-256}$ | R |  |  |  | 999 | R |  | 2310.PPER04 must be present. | 2310C.PERR04 must be present. |  |
| X222.277.2310C.PERR04.020 | PER04 |  |  |  |  |  |  |  | 999 | R | (14403=6: "Invalid Character in Data |  | $2310 C$. PRRO4 must contain a t least one non- |  |
| X222.277.2310C.PER04.030 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.277.2310C.PER04.040 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.277.2310C.PERR04.050 | PER04 |  |  |  |  |  |  |  | 999 | R |  | $l_{\text {accenied } A \text { A characters. }}^{2310 \text {. }}$. | 2310C.PER04 must be populated with acceoted AN characters. |  |
| X222.277.2310C.PERP04.060 | PER04 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 127: "Entity's Communication Number EIC. 77 <br> EIC: 77 " | 2310C.PER04 must be populated with exactly ten numeric characters | 2310C.PER04 must be populated with exactly ten numeric characters. |  |
| X222.277.2310C.PER04.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.277.2310C.PER05.010 | PERo5 | Communication Number Oudifier | 10 | 2.2 | s |  |  | Ex | 999 | R | 1K403 =7: "Invalid Code value" | 2310C.PER05 must be "EX". | 2310C.PER05 must be "EX'. |  |
| $\begin{array}{\|l\|} \begin{array}{\|} \times 222.277 .2310 c . P E R 05.020 \\ \text { Edit Deactivated } \end{array} \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.277.2310C.PERR06.010 | PER06 | Com | an | 1.256 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | \|If 2310C.PER06 is present, 2310C.PER05 | If 2310C.PER05 is present, 2310C.PER06 must be present. |  |
| X222.277.2310C.PERR06.020 | Pero6 |  |  |  |  |  |  |  | 999 | R | K K403 =6: "Invalid Character in Data Element" |  | 2310.PRRO6 space chasterter contain a a t least one non- |  |
| х222.277.2310C.PER06.030 | Pero6 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2310C.PER06 must be $1-256$ characters. | 2310 C .PER06 must be 1-256 characters. |  |
| X222.277.2310C.PER06.040 | PERO6 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid information..." application system" CSC 127: "Entity's Communication Number" |  |  |  |
| X222.277.2310C.PERR06.050 | PER06 |  |  |  |  |  |  |  | 999 | R |  | 2310 . PERO6 must be populated with accented $A \mathrm{~A}$ characters. | lat accenied $A$ A ch characters. |  |
| X222.277.2310C.PER06.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.277.2310C.P.PRR7.010 | PER07 | Communication Number Qualifier | 10 | 2.2 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be pesesent. |  |
| X222.277.2310C.PERR08.010 | PERO8 | Communication Number | AN | 1.256 | Nu |  |  |  | 999 | E | (1403 =10: "Implementation "Not | Must not be present. | Must not be present. |  |

$\stackrel{837-}{\text { - }}$

| Edit Reference | Segment or Element | Description | 10 | Min. max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { 9997 } \\ 277 c A \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.277.2310C.PER09.010 | PER09 | Contact Inquiry Reference | ${ }^{\text {an }}$ | 1-20 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.280.23100..NM1.010 | NM1 | $\underset{\text { NAME }}{\substack{\text { SUPERVIIING PROVIDER }}}$ |  | 1 | s | 23100 | 1 |  | 999 | R |  | Only one iteration 23100.NM1 is allowed. | Only one iteration 23100.NM1 is allowed. |  |
| x222.280.23100.NM101.010 | NM101 | Enity Identifier Code | 10 | 2.3 | R |  |  | DQ | 999 | R |  | 23100.NM101 must be present. | 23100.NM101 must be present. |  |
| x222.280.23100.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|k403 =7: "Invalid Code Value" | 23100.NM101 must be "DQ". | 23100.NM101 mus be "DQ". |  |
| х222.280.23100.NM102.010 | NM102 | Entily Type Quadifier | 10 | 1-1 | R |  |  | 1 | 999 | R | (Ka03 1. "Required Data Element | 23100.NM102 must be present. | 23100...M102 must be present. |  |
| X222.280.23100.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 23100.NM102 must be "19." | 23100.NM102 must be "1". |  |
| х222.280.23100.NM103.010 | NM103 | Supenising Provider Last Name | AN | ${ }^{1.60}$ | R |  |  |  | 999 | R | K403 =1: "Required Data Element Missing" | 23100.NM103 must be present. | 23100.NM103 must be present. |  |
| ×222.280.23100.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | Missing Elesement:"Invalid Character in Data Elemen | 23100. NM1O3 must Contain at teast one non- space character | 2310D.NM103 must contain at least one non- space character. |  |
| x222.280.23100.NM103.030 | NM103 |  |  |  |  |  |  |  | ${ }^{999}$ | E | \|K403 = 5: "Data Element Too Long" | 2310. NM103 must be 1-60 characters. | 23100 .NM103 must be 1 - 60 characters. |  |
| x222.280.23100.NM103.040 | nm103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system <br> CSC 504: "Entity's Last Name" <br> EIC: DO "Sunervisina Phvsician" |  |  |  |
| X222.280.23100.NM103.050 | nм103 |  |  |  |  |  |  |  | 999 | R | Kle Element" | 2310D.NM103 must be populated with accepted AN characters. | 2310D.NM103 must be populated with accepted AN characters. |  |
| X222.280.2310D.NM103.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×2222.280.23100.NM104.010 | NM104 | Supenising Provider First Name | ${ }^{\text {an }}$ | ${ }^{1-35}$ | s |  |  |  | 999 | R |  | [2300.NM104 must contain a t least one non- | ${ }_{\text {space chacen }}^{23100 . \mathrm{NM} 104 \text { must contain at least one non- }}$ |  |
| X222.280.23100.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2310. .NM104 must be 1-35 characters. | 23100 . .NM104 must be 1 - 35 characters. |  |
| x222.280.23100.NM104.030 | nM104 |  |  |  |  |  |  |  | 277 | T | Acknowled ation... CSC 512: "Length invalid for receiver's application system EIC. 505 . Entity's First Name" EIC: DO "Supervising Physician" |  |  |  |
| x222.280.23100.NM104.040 | nM104 |  |  |  |  |  |  |  | 999 | R |  | ${ }_{\text {accenter }}^{23100 . \text { NM } 104 \text { must be populated } \text { with }}$ | ${ }_{\text {accen }}^{23100 . \text {.NM } 104 \text { must be populated } \text { with }}$ |  |
| X222.280.2310D.NM104.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.280.23100.NM105.010 | NM105 | Supervising Provider Middle Name | AN | 1-25 | s |  |  |  | 999 | R |  | 2310D.NM105 must contain at least one non- space character. | 2310D.NM105 must contain at least one non- space character. |  |
| х222.280.23100.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 23100 . .NM105 must be 1-25 characters. | 23110. .NM105 must be 1-25 characters. |  |
| x222.280.23100.nm105.030 | nM105 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: Acknowledge <br> CSC 512: "Length invalid for receiver's application system" <br> SC 514: "Entity's Middle Name" <br> EIC: DQ "Supervising Physician" |  |  |  |
| ×222.280.23100.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { KK.0.3 }=6 \text { :"Invaid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310D.NM105 must be populated with accepted AN characters. | 2310D.NM105 must be populated with accepted AN characters. |  |
| X222.280.23100.NM105.045 | nM105 |  |  |  |  |  |  |  | 277 | c |  | The first position of 2310D.NM105 must be aphabetic (A.... $)$. | The first position of 2310D.NM105 must be aphabetic (A...Z). | To prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.280.2310D.NM105.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.280.23100.NM106.010 | NM106 | Name Prefix | AN | 1-10 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.280.23100.NM107.010 | NM107 | $\stackrel{\text { Supenising Provider Name }}{\text { suffix }}$ | an | ${ }^{1-10}$ | s |  |  |  | ${ }^{999}$ | R |  | 2310. NM107 must contain a t least one non- space character | 23100.NM107 must contain at least one non- space chacter. |  |
| х222.280.23100.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | 1K403 =5: "Data Element Too Long" | 23110 . .NM107 must be 1-10 characters. | 23100. NM107 must be $1-10$ characters. |  |
| x222.280.23100.nm107.030 | nM107 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ |  |  |  |  |
| x222.280.23100.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R |  | 2acceped $A$ A charasceres. | accented AN characters. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. Max. | Usage <br> Req. | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TAAI } \\ \text { g999 } \\ 277 C A \end{gathered}$ | ${ }_{\text {Acceptree }}^{\text {ect }}$ | Disposition /Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } B \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.280.2310D.NM107.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.280.23100.NM108.010 | NM108 | Identificaion Code Qualifer | 10 | $1-2$ | s |  |  | xx | 277 | c | CSCC A8: | 2310D.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier" |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| x222.280.23100.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | Acknowledgement/Rejected for Missing Information... <br> CSC 745: "Identifier Qualifier" <br> CSC 562: "Entity's National Provider Identifier (NPI) EIC: DO "Supe <br> EIC. DO "Supervising Physician" | 23100.NM108 must be present. | 23100.NM108 must be present. | Everyone but Trailblazer or JH (Texas); as appropriate for current MAC contract for VA MRA ct claims. <br> 1/20: Companion Guide Note needed |
| x222.280.23100.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7}$ 7. "Ivalid Code Value" | 23100.NM108 must be "XX' | 23100.NM108 must be "XX". | Does not apply to TrailBlazer or JH (Texas), as Project claims. 01/20: Companion Guide Note needed. |
| X222.280.23100.NM109.010 | NM109 | Supenising Provider Identifier | AN | 2.88 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing | If 2310D.NM108 is present, 2310D.NM109 must be present. | If 2310D.NM108 is present, 2310D.NM109 must be present. |  |
| x222.280.23100.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Acknowled formation CSC 562: "Entity's National Provider EIC: DO "Sup $\qquad$ | 2310D.NM109 must be valid according to the NPI algorithm. | 2310D.NM109 must be valid according to the NPI algorithm. NPI algorithm. |  |
| x222.280.23100.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 562: "Entity's National Provider Identifier (NPI) <br> EIC: DO "Sunervisina Phvsician" | The first position of 2310D.NM109 must be a "1". | The first position of 2310D.NM109 must be a "1". |  |
| X222.280.23100.NM110.010 | NM110 | Entit Relationship Code | 10 | 2.2 | NU |  |  |  | 999 | E | (104033 $=110.4$ Implementation "Not | Must not be present. | Must not be present. |  |
| X222.280.23100.NM111.010 | NM111 | Enity Identifier Code | $1{ }^{10}$ | 2.3 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. | Must not be present. |  |
| x222.280.23100.NM112.010 | NM12 | Name Last or Organization <br> Name | an | 1.60 | nu |  |  |  | 999 | E | (104033 $=110$. "Implementation "Not | Must not be present. | Must not be present. |  |
| x222.283.2310.REF. 010 | REF | SUPERVISING PROVIDER SECONDARY IDENTIFIER |  | 4 | s | ${ }^{23100}$ |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only three iterations of 2310D.REF are allowed. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| x222.283.23100.REF.015 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 23100.REF must not be present. | 23100.REF must not be present. | Everyone but Trailbazer or JH (Texas); as appropriate for current MAC contract for VA MRA Project claims. <br> 0120: Companion Guide Note needed |
| X222.283.23100.REF01.010 | REF01 | Reference Identificaion Qualifer | 10 | 2.3 | R |  |  | 0B, 16, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 23100.REFF01 must be present. |  | Trailblazer or JH (Texas) only as appropriate for <br> current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| X222.283.23100.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | Acknowledgement/Rejected for Invalid Information... <br> CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." ElC: DO "Sunervising Phvsician" | 23100.REFF01 must be "08, "1G"r" "LU". |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims 01/20: Companion Guide Note needed. |
| X222.283.23100.REFO2.010 | REF02 | Supervising Provider Secondary Identifier | an | ${ }^{1.50}$ | R |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 1: "Required Data Element } \\ & \text { Missing" } \end{aligned}$ | 23100.REFFO2 must be present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| x222.283.23100.REFFO2.020 | REF02 |  |  |  |  |  |  |  | 999 | R | 1K403 $=6:$ "Invalid Character in Data Element" | When 2310D.REF01 = "0B" or "LU" 2310D.REF02 must contain at least one nonspace character. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| X222.283.23100.REFO2.030 | REF02 |  |  |  |  |  |  |  | 277 | T |  | When 2310D.REF01 = "1G", 2310D.REFO2 must be in format ANNNNN or AAANNN numeric digit? |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| X222.283.23100.REFF02.040 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | When 23100.REFF11 = "OB" or "LU", 23100.REFO2 must be 1-50 characters. |  | Trailbazer or JH (Teexas) only, as appropiriat for cuurrent MAC contract for VAMMRA Mroject claims. o1/20: Companion Guide Note needed. |
| X222.283.23100.REFO2.050 | REF02 |  |  |  |  |  |  |  | 277 | T |  |  |  | Traiblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| X222.283.23100.REFO2.060 | REF02 |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK403 = 6: "Invalid Character in Data Element" | When 2310D.REF01 = "0B" or "LU", 2310D.REF02 must be populated with accepted AN characters. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims 01/20: Companion Guide Note needed. |


| Edit Reference | Segment or Element | Description | 10 | $\min _{\text {max. }}^{\text {Max. }}$ | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | Loop Repeat | 5010A1 <br> Values | $\begin{gathered} \text { TaAl } \\ \substack{9991 \\ 277 C A} \end{gathered}$ | ${ }_{\substack{\text { Acceptrej } \\ \text { ect }}}^{\text {at }}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.283.23100.REF02.070Edit Deacivivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.283.23100.REFF3.010 | REFO3 | Descripion | AN | 1-80 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.283.23100.REF04.010 | REF04 | REFERENCEIIENTIFIER |  |  | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.285.2310:.NM1.010 | NM1 | AMBULANCE PICK UP LOCATION |  | 1 | s | 2310 E | 1 |  | 999 | R | $\begin{aligned} & \text { IK304=4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration 2310E.NM1 is allowed. | Only one iteration 2310E.NM1 is allowed. |  |
| X222.285.2310E.NM101.010 | NM101 | Enity Identifier Code | 10 | ${ }^{2 \cdot 3}$ | R |  |  | PW | 999 | R |  | 2310E.NM101 must be present. | 2310E.NM101 must be present. |  |
| X222.285.2310E.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2310E.NM101 must be PPW". | 2310E.NM101 must be "PW". |  |
| X222.285.2310E.NM102.010 | NM102 | Enity Type Qualifier | 10 | ${ }^{1-1}$ | R |  |  | 2 | ${ }^{999}$ | R | \|ikusi 1. "Required Data Element | 2310E.NM102 must be present. | 2310E.NM102 must be present. |  |
| X222.285.2310E.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7}$ : "Invalid Code Value" | 2310E.NM102 must be "2". | 2310E.NM102 must be "2". |  |
| X222.285.2310E.NM103.010 | NM103 | Name Last or Organization Name | an | 1.60 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.285.2310E.NM104.010 | NM104 | Name First | an | ${ }^{1.35}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| X222.285.2310E.NM105.010 | NM105 | Name Midale | AN | ${ }^{1.25}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.285.2310E.NM106.010 | NM106 | Name Prefix | AN | ${ }^{1-10}$ | nu |  |  |  | 999 | E | IK403 = I 10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.285.2310E.NM107.010 | NM107 | Name Sufix | AN | ${ }^{1-10}$ | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.285.2310E.NM108.010 | NM108 | Identification Code Qualifier | 10 | 1-2 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.285.2310E.NM109.010 | NM109 | Identification Code | AN | 2.80 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.285.2310E.NM110.010 | NM110 | Entit Relationstip Code | 10 | 2.2 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.285.2310E.NM111.010 | NM111 | Enity Identifer Code | $1{ }^{10}$ | ${ }^{2.3}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.285.2310E.NM112.010 | NM12 | ${ }_{\text {Name Last or organization }}^{\text {Name }}$ | AN | 1.60 | NU |  |  |  | 999 | E | IK403 = $110:$ " "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.287.2310E.N3.010 | N3 | AMBULANCE PICK UP LOCATION ADDRESS |  | 1 | R | 2310 E |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing | If $2310 \mathrm{E} . \mathrm{NM} 1$ is present, 2310E.N3 must be present. | If 2310E.NM1 is present, 2310E.N3 must be present. |  |
| х222.287.2310E:N3.020 | N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310E.N3 is allowed. | Only one iteration of 2310E.N3 is allowed. |  |
| X222.287.2310E.N301.010 | N301 | Ambulance Pick Up Address Line | AN | ${ }^{1.55}$ | R |  |  |  | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | ${ }^{2310 E}$ : 301 must be present. | 2310E.N301 must be present. |  |
| X222.287.2310E.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N301 must contain at least one non- space character. | 2310E.N301 must contain at least one non- space character. |  |
| X222.287.2310E.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK003 = 5: "Data Element Too Long" | 2310E.N301 must be 1-55 characters. | 2310E.N301 must be 1 - 55 characters. |  |
| X222.287.2310E.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" 126: "Entity's Address" SCC 266 Facility point of origin and destination - ambulance |  |  |  |
| x222.287.2310E.N301.050 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N301 must be populated with accepted AN characters. | 2310E.N301 must be populated with accepted AN characters. |  |
| X222.287.2310E.N301.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.287.2310E.N302.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.287.2310E.N302.020 | N302 | Ambulance Pick Up Address Line | ${ }^{\text {AN }}$ | 1.55 | s |  |  |  | ${ }^{999}$ | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N302 must contain at least one non- space character. | 2310E.N302 must contain at least one non- space character. |  |
| X222.287.2310E.N30.030 | N302 |  |  |  |  |  |  |  | ${ }^{999}$ | E | IK403 = 5: "Data Element Too Long" | 2310E.N302 must be 1-55 characters. | ${ }^{23100 . N 302 ~ m u s t ~ b e ~ 1-55 ~ c h a r a c t e r s . ~}$ |  |
| X222.287.2310E. 330.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement/Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" CSC 266 "Facility point of origin and destination - ambulance" FIC. 77 "Service I ocation" |  |  |  |
| X222.287.2310:.N302.050 | N302 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N302 must be populated with accepted AN characters | 2310E.N302 must be poppulated with acceoped AN characters. |  |
| X222.287.2310E.N302.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\min _{\text {max. }}$ | $\begin{array}{\|c\|c\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { cil } \\ 277 \mathrm{CA} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\underset{\text { Part B }}{\text { Proposed 5010A1 Edits }}$ | Proposed 501001 Edits <br> CED CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.288.2310E.NA.010 | N4 | AMBULANCE PICK UP LOCATION CITYISTATEIZIP |  | 1 | R | 2310 E |  |  | ${ }^{999}$ | R | IK304 = 16: "Implementation Dependent Segment Missing | If 2310E.NM1 is present, 2310E.N4 must be present. | If 2310E.NM1 is present, 2310E.N4 must be present. |  |
| x222.288.2310..NA.020 | N4 |  |  |  |  |  |  |  | 999 | R | $1 \times 304=5:$ " Segment Exceeds Maximum Use" | Only one iteration of 2310:.N4 is allowed. | Only one iteration of 2310..N4 is allowed. |  |
| X222.288.2310E.N401.010 | N401 | Ambulance Pick Up City Name | ${ }^{\text {an }}$ | 2.30 | R |  |  |  | 999 | R | K 1 K043 $=1$ : "Required Data Element | 2310E.N401 must be present. | 2310E.N401 must be present. |  |
| X222.288.2310E.N400.020 | N401 |  |  |  |  |  |  |  | 999 | R |  | 2310E. N401 must contain at least two non- space characters. | 2310E. N401 must contain at least two non- space characters. |  |
| x222.28.2310E.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | K403 - 4. "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2310 E . 401 must be $2-30$ characters. | 2310 E . 401 must be 2 -30 characters. |  |
| $\times 2.22 .288 .2310 \mathrm{E}$..401.040 | N401 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" 5C 502: "Entity's City" CSC 266 "Facility point of origin and destination - ambulance" |  |  |  |
| X222.288.2310E.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R |  | 2310E.N401 must be populated with accepeted $A N$ characters. | 2310. Na01 must be populuted with accented $A N$ Characters. |  |
| X222.288.2310E.N401.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.288.2310E.N402.010 | N402 | $\begin{gathered} \text { Ambulance Pick Up State or } \\ \text { Province Code } \\ \hline \end{gathered}$ | 10 | 2.2 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ |  | $\begin{aligned} & \text { If } 2310 \mathrm{E} . \mathrm{N} 404 \text { is not present, 2310E.N402 } \\ & \text { must be present. } \end{aligned}$ |  |
| $\times 2.22 .288 .2310 \mathrm{E}$..402.020 | N402 |  |  |  |  |  |  |  | 277 | c |  | 2310e.N002 must be a valid State Code. | 2310 E.N002 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| X222.288.2310E.N403.010 | N003 | $\begin{array}{\|l\|} \hline \text { Ambulance Pick Up Postal Zone } \\ \text { ZIP Code } \end{array}$ | 10 | 3 3.15 | s |  |  |  | 999 | R |  | It 12310 . .N404 is not present, 2310E.N403 must be present. | IIt 2310E.N404 is not present. 2310E.N403 must be present |  |
| x222.288.2310E.N403.020 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> Acknowledgement/Rejected for Invalid nformation..." CSC 266 " F . destination and point of origin and EIC: 77 "Service Location" vice Location" | 2310:.N403 must be a valid Zip Code. | 2310 E.N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| X222.288.2310E.N404.010 | N404 | Ambulance Pick Up Country Code | 10 | ${ }^{2.3}$ | s |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.288.2310E.N405.010 | N405 | Locaion Qualifier | 10 | 1-2 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must tot be present. | Must not be present. |  |
| X222.28.2310E.N406.010 | N406 | Location Identifier | ${ }_{\text {AN }}$ | ${ }^{1.30}$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.288.2310E.N407.005 | N407 | Countr Subdivision Code | 10 | ${ }^{1.3}$ | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.288.2310E.N407.010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.290 .2310 \mathrm{~F}$.NM 1.010 | NM1 | $\begin{aligned} & \text { AMBULANCE DROP OOF } \\ & \text { LOCATION } \end{aligned}$ |  | 1 | s | 2310 F | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration 2310F.NM1 is allowed. | Only one iteration 2310F.NM1 is allowed. |  |
| X222.290.2310F:NM101.010 | NM101 | Enity Identifier Code | 10 | 2.3 | R |  |  | 45 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.NM101 must be present. | 2310F.NM101 must be present. |  |
| X222.290.2310F.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2310F.NM101 must be "45". | 2310F.NM101 must be "45". |  |
| x222.290.2310F.NM102.010 | NM102 | Enity Type Quadifier | 10 | 1-1 | R |  |  | 2 | 999 | R |  | 2310F.NM102 must be present. | 2310F.NM102 must be present. |  |
| x222.290.2310F.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R |  | 2310F.NM102 must be "2". | 2310F.NM102 must be "2". |  |
| X2222.290.2310F.NM103.010 | nM103 | Ambuance Drop off Location |  |  |  |  |  |  | 999 | R | IK003 $=6$ : "INvalid Character in Data | $2310 \%$ NM103 must contain at least one non- | 2310F.NM103 must contain at least one non- |  |
| x222.290.2310F.NM103.020 | NM103 |  | ${ }^{\text {an }}$ | ${ }^{1.60}$ | s |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2310F. .NM103 must be 1-60 characters. | 2310F. .M 103 must be 1-60 characters. |  |
| x222.290.2310F.NM103.030 | nM103 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system CSC 504. "Entity's Last Name" CSC 266 "Facility point of origin and destination - ambulance" |  |  |  |
| X222.290.2310F.NM103.040 | NM103 |  |  |  |  |  |  |  | 999 | R | Kikn | accenied AN characters. 230pulated with |  |  |
| X222.290.2310F.NM103.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | Min. max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Rea. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> Values | $\begin{gathered} \text { Talal } \\ \text { 297c } \end{gathered}$ | $\begin{gathered} \text { Acceptreej } \\ \text { ect } \end{gathered}$ | Disposition /Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part } \mathrm{B} \end{gathered}$ | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.290.2310F.NM104.010 | NM104 | Name First | AN | 1.35 | nu |  |  |  | 999 | E | (104033 110.7 "Implementation "Not | Must not be present. | Must not be present. |  |
| x222.290.2310F.NM105.010 | nm105 | Name Middle | AN | 1-25 | Nu |  |  |  | 999 | E | (1003 | Must not be present. | Must not be present. |  |
| x222.290.2310F.NM106.010 | NM106 | Name Prefix | an | 1-10 | nu |  |  |  | 999 | E | K4033 $=110$ :" Tmplementation "Not | Must not be present. | Must not be present. |  |
| x222.290.2310F.NM107.010 | NM107 | Name Suffix | an | 1-10 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.290.2310F.NM108.010 | NM108 | Idenification Code Qualifier | 10 | 1-2 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.290.2310F.NM109.010 | NM109 | Identification Code | AN | 2.80 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.290.2310F.NM110.010 | NM110 | Entity Relationstip Code | 10 | 2.2 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.290.2310F.NM111.010 | NM111 | Enity Idenifier Code | 10 | 2.3 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.290.2310F.NM112.010 | NM112 | Name Last or Organization Name | AN | 1.60 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| <222.292.23100.N3.010 | N3 | AMBULANCE DROP OFF LOCATION ADDRESS |  | 1 | R | 2310 F |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing | If 2310F.NM1 is present, 2310F.N3 must be present. be present. | It 2310 .NM1 is present, 2310F.N3 must |  |
| х222.292.23100.N3.020 | N3 |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310F.N3 is allowed. | Only one iteration of 23100.N3 is allowed. |  |
| х222.292.2310F.N301.010 | N301 | $\underset{\substack{\text { Ambulance Drop Off Address } \\ \text { Line }}}{ }$ | AN | ${ }^{1.55}$ | R |  |  |  | ${ }^{999}$ | R | $\begin{aligned} & \text { \|K403 = } \\ & \text { Missing" } \end{aligned}$ | 2310F.N301 must be present. | ${ }^{2310 F . N 301 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| х222.292.2310F...301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.N301 must contain at least one non- space character. | 2310F.N301 must contain at least one non- space character. |  |
| x222.292.2310F.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2310F. 301 must be 1 - 55 characters. | ${ }^{23109 . N 301 ~ m u s t ~ b e ~} 1-55$ characters. |  |
| ×222.292.2310F...301.040 | N301 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> 126: "Entity's Address" <br> CSC 266 Facility point of origin and destination - ambulance |  |  |  |
| X222.292.2310F-..301.050 | N301 |  |  |  |  |  |  |  | 999 | R |  | 2310. .N301 must be poppulated dith accepeed AN characters. | 2310. .N301 must be populated d with accepeted AN characters. |  |
| X222.292.2310...n301.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.292.2310F.N302.010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.292.2310F...302.020 | N302 | $\underbrace{}_{\substack{\text { Ambulace Drop off Address } \\ \text { Line }}}$ | an | 1.55 | s |  |  |  | 999 | R | $\left.\right\|_{\text {Element: }} ^{\text {Ka03 }}=$ " Invalid Character in Data | 2310F.N302 must contain at least one non- space character. | 2310F.N302 must contain at least one non- space character. |  |
| x222.292.2310F.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2310F. 302 must be 1 - 55 characters. | ${ }^{23109}$. 302 must be 1 - 55 characters. |  |
| ×222.292.2310F...302.040 | N302 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 126. Entity's Address" CSC 266 "Facility point of origin and destination - ambulance" |  |  |  |
| ×222.292.2310F...302.050 | N302 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | andor...302 must be populated with accented $A N$ characters. | 2310F.N302 must be populated with accepted AN characters. |  |
| X222.292.2310F.N302.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.293.2310F.N4.010 | N4 | AMBULANCE DROP OFF LOCATION CITYISTATEIZIP |  | 1 | R | ${ }^{2310 F}$ |  |  | ${ }^{99}$ | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2310F.NM1 is present, 2310F.N4 must be present. | If 2310F.NM1 is present, 2310F.N4 must be present. |  |
| x222.293.2310F.N4.020 | n4 |  |  |  |  |  |  |  | 999 | R | $110304=5:$ " Segment Exceeds Maximum Use" | Only one iteration of 2310F.NA is allowed. | Only one iteration of 2310F.N4 is allowed. |  |
| x222.293.2310F.N401.010 | N401 | ${ }^{\text {Ambulance D Drop Offf city Name }}$ | AN | 2.30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.N401 must be present. | 2310F.N401 must be present. |  |
| ×222.293.2310F.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R |  | 2310F. N401 must contain at least two non- space characters. | 2310F. N401 must contain at least two non- space characters. |  |
| x222.293.2310F...401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2310F.N401 must be $2 \cdot 30$ characters. | 2310F. .N401 must be $2 \cdot 30$ characters. |  |
| x222.293.2310F.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" CSC 266 "Facility point of origin and destination - ambulance" |  |  |  |
| X222.293.2310F.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R | ${ }^{1 \times 203=6: 9}$ | 2310. N401 must be populated with accented $A N$ Characters. | 2310..N401 must be populated with accented $A N$ characters. | Valid State Code reference must be available for this edit. |


| Edit Reference | Segment or Element | Description | 10 | $\mathrm{Min}_{\text {Min. }}^{\text {Max. }}$ | ( Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & 501001 \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TA11 } \\ \text { Ta99 } \\ 277 c \mathrm{Ca} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\underset{\text { Part B }}{\text { Proposed 5010 Edits }}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.293.2310F.N401.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.293.2310F.N402.010 | N402 | Ambulance Drop Off State or Province Code | 10 | 2-2 | s |  |  |  | 999 | R | IK403 $=2$ : "Conditional Required Data Element Missing" | If 2310 F.N404 is not present, 2310F.N402 must be present. | If 2310 F. N404 is not present, $2310 \mathrm{~F} . \mathrm{N} 402$ must be present. |  |
| x222.293.2310F.N402.020 | N402 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information... <br> CSC 501: "Entity's State/Province" CSC 266 "Facility point of origin and destination - ambulance" | 2310. N402 must be a valid State Code. | 2310. .N022 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| X222.293.2310F...403.010 | N403 | $\begin{array}{\|l\|} \hline \text { Ambuance Drop Off Postal Zone } \\ \text { zip Code } \end{array}$ | 10 | 3.15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | It 2310 . N404 is not present, 2310F.N403 must be present. | It 2310F.N040 is not present, 2310F:.N403 <br> must be resent. |  |
| ×222.293.2310F.N403.020 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 500: "Entity's Postal/Zip Code" CSC 266 "Facility point of origin and EIC: 77 "Service Location" EIC: 77 "Service Location" | 2310F. N403 must be a valid Zip Code. | 2310 F . 403 3 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| x222.293.2310F.N404.010 | N404 | Ambulance Drop Off Country Code | 10 | 2.3 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.293.2310F.N405.010 | N405 | Location Qualfier | 10 | 1.2 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.293.2310F.N406.010 | N406 | Location Idenififer | AN | 1-30 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.293.2310F.N407.005 | N407 | Country Subdivision Code | 10 | ${ }^{1-3}$ | s |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.293.2310F.N407.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.295.2320.010 |  | OTHER SUBSCRIBER LOOP |  |  |  | 2320 | 10 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" Maximum Times" | If 2000B.SBR01 = "P", then up to ten iterations of the $\mathbf{2 3 2 0}$ loop are allowed. | If 2000B.SBR01 = "P", then up to ten iterations of the $\mathbf{2 3 2 0}$ loop are allowed. |  |
| x2222.299.2320.S8R.010 | SBR | OTHER SUBSCRIBER information |  | 1 | s | 2320 |  |  | ${ }^{999}$ | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320. S8R is allowed. | Only one iteration of 2320. S8R is allowed. |  |
| X222.295.2320.S8R80.1.10 | s8R01 | Payer Responsibility Sequence <br> Number Coode | ID | ${ }^{1-1}$ | R |  |  | A, B, C, D, E, F, G, H. P, S, T, U | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.SBR01 must be pesent. | 2320.S8R01 must be pesent. |  |
| X222.295.2320.S8RR1. 220 | SBR01 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | $2320 . S 8 R 011$ must be valid values. | $2320 . S 8 R 011$ must be valid values. |  |
| x222.295.2320.S8RR1.030 | sbro1 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Vaue" | Each iteration of 2320. SBR01 must contain a different code value (each code value may appear in one and only one SBR01 element) | Each iteration of 2320.SBR01 must contain a different code value (each code value may appear in one and only one SBR01 element) |  |
| x222.295.2320.SBR01.040 | s8R01 |  |  |  |  |  |  |  | 277 | c | CSCC A6 Acknowledgement/Rejected for Missing Information CSC 286: "Other payer's Explanation of Benefits/payment information | If 2000B.SBR01 $=$ "S", 2320. SBR01 $=$ "P" must be present. | If 2000B.SBR01 $=$ "S", 2320. SBR01 $=$ "P" must be present. |  |
| x222.295.2320.S8P02.010 | SBRO2 | Individual Relaionstip Code | 10 | 2-2 | R |  |  | 01, 18, 19, 20, 21, 39, 40, 53. . 88 | 999 | R | $\frac{1}{1 K 003=1: " R e q u i r e d ~ D a t a ~ E l e m e n t ~}$ <br> Missing" | 2320.SSR02 must be present. | 2320.SER02 must be present. |  |
| x222.295.2320.SSRP0.020 | SBR02 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2320. SBRO2 must be valid values. | 2320. SBR02 must be valid values. |  |
| x222.295.2320.SBR03.004 | S8R03 | Insured Group of Poicy Number | an | 1.50 | s |  |  |  | 999 | E | . "Implementation Dependent "Not Used" Data Element Present | 2320.SBR03 must notequal 2330A.NM109 | 2320.SBR03 must notequa 2330A.Nm109 |  |
| x222.295.2320.SBR03.006 | SBR03 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error" CSC 163. "Entity's Policy Number" CSC 732 "Information submitted inconsistent with billing guider EIC: GB "Other Insured" |  |  |  |
| X222.295.2320.SERP3.010 | sहRo3 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR03 must contain at least one non- space character. | 2320. SBR03 must contain at least one non- space character. |  |
| x222.295.2320.SER03.020 | S8R03 |  |  |  |  |  |  |  | 999 | E | \|K403 5 5: "Data Element Too Long" | $2320 . S 8 R 03$ must be 1 - 50 characters. | $2320 . S 8 R 03$ must be 1 - 50 characters. |  |
| X222.295.2320.SBR03.030 | S8R03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 163: "Entity's policy number" EIC. GB "Other Insure EIC; GB "Other Insured" |  |  |  |
| X222.295.2320.SBR03.040 | SERo3 |  |  |  |  |  |  |  | 999 | R |  | 232.SERO3 must be populated with accented $A N$ charactes. | 232.SERO3 must be poppulated with accepered $A \mathrm{~N}$ charactes. |  |
| X222.295.2320.SBR03.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.295.2320.SERR0.010 | SBR04 | Other Insured Group Name | an | 1.60 | s |  |  |  | 999 | R | $\left.\right\|_{\text {Violated }} ^{\text {K403) }=10}$ "Exclusion Condition | $\begin{aligned} & \text { If } 2320 . \text { SERO3 i s present, } 2320 . \text { SBR04 must } \\ & \text { not be present } \end{aligned}$ | $\begin{aligned} & 1 \mathrm{If} 2320 . \text { SERO3 i is present, } 2320 . \mathrm{SBRO4} \text { must } \\ & \text { not be present } \end{aligned}$ |  |


| Edit Reference | Segment or Element | Description | 10 | $\underset{\substack{\text { Min. } \\ \text { Max. }}}{\text { and }}$ | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | p | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | $\begin{aligned} & 501001 \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \mathrm{TAl1} \\ \text { col } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010A1 Edits Part B | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.295.2320.S8R04.020 | SBR04 |  |  |  |  |  |  |  | 99 | R | Elene | ${ }^{23205 B R R O 4 \text { must contaia a t least one non- }}$ | 2320 SBR04 must contain at least one nonspace character. |  |
| x222.295.2320.SBR04.030 | sbro4 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2320.SBR04 must be 1-60 characters. | 2320. SBro4 must be 1 - 60 characters. |  |
| x222.295.2320.SBRo4.040 | SBR04 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 663: "Entity's Group Name" EC. GB "Other Insured" |  |  |  |
| x222.295.2320.SBRo4.050 | SBR04 |  |  |  |  |  |  |  | 999 | R | Elem =6:"Invalid Character in Data Element" | 2320.SBR04 must be populated with accepted AN characters. | 2320.SBR04 must be populated with accepted AN characters. |  |
| X222.295.2320.SBR04.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.295.2320.S8R05.010 | SERos | Insurance Type Code | 10 | 1-3 | s |  |  |  | 999 | E | \|TK4033 $=10$. "Implementaion "Not | Must not be present. | Must not be present. |  |
| x222.295.2320.SBR06.010 | s8R06 | Coordination of Benefitis Code | 10 | 1-1 | NU |  |  |  | 999 | E | (K403 =10: "Implementation "Not | Must not be present. | Must not be present. |  |
| $\times 2222.295 .2320 .58 \mathrm{SRO7} .010$ | SBR07 | Yesino Condition or Response Code | 10 | 1-1 | NU |  |  |  | 99 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.295.2320.S8R08.010 | S8R08 | Employment Staus Code | 10 | 2-2 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times 2$ 222.295.2320.SBR09.010 | S8R09 | Claim Filing Indicator Code | 10 | 1-2 | s |  |  | 11, 12, 13, 14, 15, 16, 17, AM, BL, CH, MA, MB MC , TV, VA, WC, ZZ | 999 | R | 1K403 $\mathbf{~ 7 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $2320 . S 8 R 09$ must be valid values. | 2320. SBR09 must be valid values. |  |
| x222.299.2320.SBRo9.020 | SBR09 |  |  |  |  |  |  |  | 277 | T | Cscc A7: <br> "AcknowledgementRejected for Invalid Intormation.." CSC 480: "Other Carrier Claim filing indicator is missing or invalid" | 2320.SBR09 must not "MA " or "MB". | 2320.SBRO9 must not "MA" or "MB". |  |
| ×222.299.2320.CAS.010 | cas | claim level adjustments |  | 5 | s | 2320 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" <br> OR <br> IK304 = 2: "Unexpected Segment" | 1 If $2320 . C A S$ is present, 2300.SBR must be present. | If 2320.CAS is present, 2320.SBR must be present. |  |
| х222.299.2320.CAs.020 | cas |  |  |  |  |  |  |  | 999 | R | $\begin{array}{\|l} \text { K K304 }=5: \text { " "Segment Exceeds } \\ \text { Maximum Use" } \end{array}$ | Only five iterations of 2320.CAS are allowed. | Only five ieterations of 2320. CAS are allowed. |  |
| x222.299.2320.CAS01.010 | CAS01 | Claim Ajusstment Group Code | 10 | 1-2 | R |  |  | $\mathrm{CO}, \mathrm{CR}, \mathrm{OA}, \mathrm{Pl}, \mathrm{PR}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.CAS01 must be pesent. | ${ }^{2320 . C A S 01 ~ m u s t ~ b e ~ p e r e s e n . ~}$ | Valid Claim Adiustment Reason Code reference must be available for this edit |
| x222.299.2320.CAS01.020 | CAS01 |  |  |  |  |  |  |  | 99 | R | IK403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $2320 . C A S 01$ must be evaid values. | $2320 . C A 501$ must be valid values. |  |
| X222.299.2320.CAS01.030Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.299. $2320 . C$ Caso2.010 | CAS02 | Adjustment Reason Code | 10 | 1.5 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.CAS02 must be present. | 2320.CAS02 must be present. |  |
| $\times 2$ 222.299.2320.CAS02.020 | CAS02 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error. <br> CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | If 2330B. DTP03 with DTP01 $=$ " 573 " is Adjustment Reason Code on the data in 2330B.DTP03 when DTP01 $=$ " 573 ". | If 2330B.DTP03 with DTP01 = " 573 " is present, 2320.CAS02 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = " 573 ". |  |
| $\times 2$ 222.299.2320.CASO2.025 | CAS02 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error <br> CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" |  |  |  |
| X222.299.2320.CAS02.030Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.299.2320.CAS03.010 | CAS03 | Adjustment Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 $=1$ : "Required Data Element Missing" | ${ }^{2320 . C A S O 3}$ must be present. | ${ }^{2320 . C A S O 33 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| x222,299.2320.CAS03.020 | CASO3 |  |  |  |  |  |  |  | 999 | R | Element" | 2320.CAS03 must be numeric. | 2320.CASO3 must be numeric. |  |

$\stackrel{837-}{8}$

| Edit Reference | Segment o Element | Description | $1{ }^{10}$ | Min. <br> Max. | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 501001 Values | $\begin{gathered} \text { Tq11 } \\ \substack{999 / \\ 277 c a} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { Part } B}}{ }$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.299.2320.CAS03.030 | CASO3 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" <br> ElC: GB "Other Insured" | 2320.CAS03 must not $=0$. | 2320.CAS03 must not $=0$. |  |
| X222.299.2320.CAS03.040 | CASO3 |  |  |  |  |  |  |  | 277 | T | Cscc AT: <br> Acknowledgement/Rejected for Invalid nformation..." CSC 697: "IIvalid Decimal Precision" EIC: GB "Other Inswent" <br> IC: GB "Other Insured" | 2320.CAS03 is limited to 0,1 or 2 decimal positions. | 2320.CASO3 is linited to 0,1 or 2 decimal positions. |  |
| X222.299.2320.CAS03.050 | CAS03 |  |  |  |  |  |  |  | 999 | E | 1 K 403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2320.CASO33 must be }>=-99,999.99 . \text { and } \\ & k=99.999 .99 . \end{aligned}$ | $\begin{aligned} & \begin{array}{l} 2320 . C A S 033 \text { must be }>=-99,999.99 . ~ a n d ~ \\ k=99.999 .99 . \end{array} \end{aligned}$ |  |
| X222.299.2320.CAS03.060 | CASO3 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed |
| X222.299.2320.CAS04.010 | CASO4 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | E | 1 K403 $=5$ : "Data Element Too Long" | 232.CAS04 must be 1-15 digits. | 2320.CAS04 must be 1-15 digits. | 11/25: Medicare specific limitation. $01 / 08:$ Not brought into Core System, so no Medicare size limit is needed. |
| X222.299.2320.CAS04.020 | CAS04 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> SC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount <br> 保 $\mathrm{GB}^{2}$ "Other Insured" |  |  |  |
| X222.299.2320.CAS04.030 | CASO4 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" <br> EIC: GB "Other Insured" | 2320.CAS04 must not 0 . | 2320.CAS04 must not $=0$. |  |
| X222.299.2320.CAS005.010 | CAso5 | Adjustment Reason Code | 10 | ${ }^{1.5}$ | s |  |  |  | 999 | R |  | ${ }_{\text {It }}^{1 \text { IT 3220.CASO5 is present, 2320.CASO2 }}$ | ${ }_{\text {It }}^{1 \text { tr 3230.CASO5 is present, 2320.CASO2 }}$ | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X222.299.2320.CAS05.020 | CASO5 |  |  |  |  |  |  |  | 277 | c |  | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2330B. DTP03 when DTP01 $=$ " 573 ". | If 2330B.DTP03 with DTP01 = " 573 " is present, 2320.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2330B. DTP03 when DTP01 $=$ " 573 ". |  |
| X222.299.2320.CAS05.030 | CAS05 |  |  |  |  |  |  |  | 277 | c | Cscc A8: <br> Acknowledgement/Rejected for elational field in error <br> CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | If 2330B. DTPO3 with DTP01 $=$ " 573 " is not present, $2320 . \mathrm{CASO5}$ must be a valid Cllam Adjustment Reason Code for the highlow date range of the 2430.DTPO3s when DTPO1 $=$ " 573 ". | If 2330B. DTPO3 with DTP01 $=$ " 573 " is not present, 2320.CASO5 must be a valid Claim Adjustment Reason Code for the highlow date range of the 2430.DTP03s when DTP01 $=$ " 573 . . |  |
| X222.299.2320.CA506.010 | CAS06 | Adustment Amount | R | ${ }^{1.18}$ | s |  |  |  | 999 | R |  | It 2320.CASO6 is present, 2320.CASO5 must be present. | $112320 . C A S 06$ is present, 2320.CAS05 must be resesent. |  |
| X222.299.2320.CAS006.020 | Casob |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2320.CAS06 must be numeic. | 2320.CAS06 must be numeic. |  |
| X222.299.2320.CAS06.030 | CAS06 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: Information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" <br> EIC: GB "Other Insured" | 2320.CAS06 must not 0 . | $2320 . C A S 06$ must not $=0$. |  |
| X222.299.2320.CAS06.040 | CAS06 |  |  |  |  |  |  |  | 277 | T | Cscc A7: <br> Acknowledgement/Rejected for Invalid nformation..." CSC 697: "IIvalid Decimal Precision" EIC: GB "Other Insured" <br> IC: GB "Other Insured" | 2320.CAS06 is limited to 0,1 or 2 decimal positions. | 2320.CASO6 is linited to 0,1 or 2 decimal postions. | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed |
| X222.299.2320.CAS06.050 | CAS06 |  |  |  |  |  |  |  | 999 | E | 1 K 403 = 5: "Data Element Too Long" | $\begin{aligned} & 2320 . \mathrm{CASO66} \text { must be }>=-99,999.99 . \text { and } \\ & k=99.99 .99 . \end{aligned}$ | $\begin{aligned} & \text { 2320.CASO33 must be }>=-99,999.99 . \text { and } \\ & k=99.999 .99 . \end{aligned}$ |  |
| X222.299.2320.CAS06.060 | CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" <br> EIC: GB "Other Insured" |  |  | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X222.299.2320.CAS07.010 | CAS07 | Adusiment Quantity | R | ${ }^{1-15}$ | s |  |  |  | 999 | R |  | II 2320.CASO7 i is present, 2320.CASO5 must be present | It 1 2320.CASAOT is present, 2320.CAS05 |  |
| X222.299.2320.CAS07.020 | CAS07 |  |  |  |  |  |  |  | 999 | E | \|K403 =5: "Data Element Too Long" | 2320.CAS07 must be $1-15$ digits. | 2320.CAS07 must be $1-15$ digis. |  |

$\stackrel{837-}{8}$

| Edit Reference | Segment or Element | Description | 10 | Min. max | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 <br> values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } B \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ×222.299.2320.CAS07.030 | CAS07 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | Acknowledgement/Rejected for Invalid information... <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" <br> EIC; GB "Other Insured" |  |  |  |
| x222.299.2320.CAS07.040 | CASO7 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." to zero" <br> CSC 520: "Adjustment Quantity" <br> EIC: $G B$ "Other Insured | 2320.CAS07 must not 0 . | 2320.CAS07 must not $=0$. |  |
| x222.299.2320.CAS08.010 | CAS08 | Adjustment Reason Code | 10 | ${ }^{1.5}$ | s |  |  |  | 999 | R |  | $112320 . \mathrm{CASO8}$ i is present, 2320.CASO5 must be present | $112320 . \mathrm{CASOB}$ i s present, 2320.CASO5 must be present | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| ×222.299.2320.CAS08.020 | CAS08 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> Acknowledgement/Rejected for elational field in error CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CASO8 must be avalid Clain $2330 B$. DTP03 when DTP01 $=$ " 573 ". | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS08 must be a valid Claim 2330B.DTP03 when DTP01 = "573". |  |
| ×222.299.2320.CAS08.030 | CAS08 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CAS08 must be a valid Claim Adjustment Reason Code for the high/low $=$ " $573^{\prime \prime}$. | If 2330B.DTP03 with DTP01 $=$ " 573 " is not peesent, 2320.CASO8 must be a valid Clain Adjustment Reason code for the highliow date range of the 2430.DTPO3s when DTPO $=$ " 573 ". |  |
| X2222.299.2320.CA509.010 | CAS09 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R |  | ${ }^{1 \text { It 2320.CASO9 is present, 2320.CAS08 must }}$ be resesent. | ${ }_{\text {be resent. }}^{112320 . C A S O 9 \text { is present, 2320.CASO88 must }}$. |  |
| $\times 2$ 222.299.2320.CAS09.020 | CASO9 |  |  |  |  |  |  |  | ${ }^{999}$ | R | \|k403 = 6: "Invalid Character in Data Element' | 2320.CAS09 must be numeric. | 2320.CAS09 must be numeric. |  |
| ×222.299.2320.CAS09.030 | CAS09 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid information... to zero" <br> CSC 519: "Adjustment Amount" <br> EIC: GB "Other Insured" | 2320.CAS09 must not 0 . | 2320.CAS09 must not $=0$. | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed |
| ×222.299.2320.CAS09.040 | CASO9 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid nformation..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2320.CASO9 is limited to 0,1 or 2 decimal positions. | 2320.CAS09 is limited to 0,1 or 2 decimal positions. |  |
| ×222.299.2320.CAS09.050 | casog |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | ${ }^{23220 . C A 509 \text { must be }>=-99,999.99 \text { and }} \begin{gathered}=99999.99 .\end{gathered}$ | 2320.CASO99 must be $>=-99,999.99$ and $k=99,999.99$. | 11/25: Medicare specific limitation 01/08: Not brought into Core System, so no Medicare size limit is needed |
| ×222.299.2330.CAS09.060 | CASO9 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid information... SSC 512: "Length invalid for receiver's application system AC:GB "Other Insured" |  |  |  |
| x222.299.2320.CAS10.010 | CAS10 | Adjustment Quantity | R | 1-15 | s |  |  |  | ${ }^{999}$ | R | IK403 $=2:$ "Conditional Required Data <br> Element Missing" | ${ }_{\text {It }}^{1 \text { It 2320.CAS10 is present, 2320.CASO8 }}$ | ${ }_{\text {It }}^{1 \text { It 2320.CAS10 is present, 2320.CASO8 }}$ |  |
| $\times 222.299 .2320 . C A S 10.020$ | CAS10 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2320.CAS10 must be $1-15$ digits. | 2320.CAS10 must be $1-15$ digits. |  |
| x222.299.2320.CAS10.030 | CAS10 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ |  |  |  |  |
| ×222.299.2320.CAS10.040 | CAS10 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | Acknowledgement/Rejected for Invalid Information..." to zero" <br> CSC 520: "Adjustment Quantity" <br> EIC: GB "Other Insured" | 2320.CAS10 must not $=0$. | 2320.CAS10 must not $=0$. |  |
| x222.299.2320.CAS11.010 | CAS11 | Adjustment Reason Code | 10 | 1.5 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | It 2320.CAS11 is present, 2320.CASO8 must beperesent | It 2320.CAS11 is present, 2320.CASO8 must be peresent. | Valid Claim Adiustment Reason Code reference must be availabe for this edit. |
| x222.299.2320.CAS11.020 | CAS11 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> Acknowledgement/Rejected for elational field in error <br> CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment <br> EIC: GB "Other Insured" | If 2330B. DTP03 with DTP01 $=$ " 573 " is Adiustment Reason Code on the date in 2330B. DTP03 when DTP01 $=$ " 573 ". | If 2330B.DTP03 with DTP01 = " 573 " is present, $2320 . \mathrm{CAS11}$ must be a valid Claim 2330B.DTP03 when DTP01 $=$ " 573 ". |  |

$\stackrel{837-}{8}$

| Edit Reference | Segment or Element | Description | 10 | Min. max | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 <br> values | $\begin{gathered} \text { TA11 } \\ \text { 9997 } \\ 277 c A \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } B \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.299.2320.CAS11.030 | CAS11 |  |  |  |  |  |  |  | 277 | c | cscc AB: <br> "Acknowledgement/Rejected for CSC 521: Ad in error CSC 516: Adjudication Re Pode Date <br> EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CAS11 must be avalid Clain Adiustment Reason Code for the highllow date range of the 2430.DTPO3s when DTPO1 $=$ " 573 ". | If 2330B. DTP03 with DTP01 $=$ " 573 " is not present. 2320.CAS11 must be a valid ClainAdjustment Reason Code for the highlow$\begin{array}{l}\text { date range of the 2430.DTP03s when DTP01 } \\ =\text { " } 573 " \text { ". }\end{array}$ |  |
| x222.299.2320.CAS12.010 | CAS12 | Adjustment Amount | R | 1-18 | s |  |  |  | ${ }^{999}$ | R | 1 K403 $=2:$ " Conditional Required Data Hement | If 2320.CAS12 is present, 2320.CAS11 must be present. | 112320. CAS1 12 is presest, $2320 . C A S 11$ must be resent |  |
| x222.299.2320.CAS12.020 | CAS12 |  |  |  |  |  |  |  | 999 | R |  | 2320.CAS12 must be numeric. | 2320.CAS12 must be numeric. |  |
| x222.299.2320.CAS12.030 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information to zero" <br> CSC 519: "Adjustment Amount" <br> EIC: GB "Other Insured" | 2320.CAS12 must not 0 . | 2320.CAS12 must not $=0$. | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed. |
| x222.299.2320.CAS12.040 | CAS12 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 697: "Invalid Decimal Precision" <br> EIC. GB. Adjustment Amount <br> EIC: GB "Other Insured | 2320.CAS12 is linited to 0,1 or 2 decimal postions. | 232.CAS12 is inited to 0,1 or 2 decimal positions. |  |
| x222.299.2320.CAS12.050 | CAS12 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2320.CAS12 must be }>=-99,999.99 . \text { and } \\ & \mathbb{K}=999999.99 . \end{aligned}$ | 2320.CAS12 must be $>=-99,999.99$ and <=99,999.99. |  Medicare size limit is needed. |
| x222.299.2320.CAS12.060 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" <br> EIC. GB "Other Amoun <br> EIC. GB "Other Insured" |  |  |  |
| x222.299.2320.CAS13.010 | CAS13 | Adjustment Quantity | R | 1-15 | s |  |  |  | ${ }^{999}$ | R | IK403 = 2: "Conditional Required Data Element Missing" | ${ }_{\text {It }}^{1 \text { It 2320.CAS13 is present, 2320.CAS11 }}$ | 1 It 2320.CAS13 is present, 2320.CAS11 must be peresent |  |
| x222.299.2320.CAS13.020 | CAS13 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2320.CAS13 must be $1-15$ digis. | $2320 . C A 513$ must be $1-15$ digits. |  |
| x222.299.2320.CAS13.030 | CAS13 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ |  |  |  |  |
| x222.299.2320.CAs13.040 | CAS13 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" <br> EIC: GB "Other Insured" | 2320.CAS13 must not 0 . | 2320.CAS13 must not $=0$. |  |
| x222.299.2320.CAS14.010 | CAS14 | Adjustment Reason Code | 10 | 1.5 | s |  |  |  | 999 | R |  | If 2320.CAS14 is present, 2320.CAS11 must be peresent | It 2320.CAS14is present, 2320.CAS11 must be present. | Valid Cliam Adiussment Reason Code efeference must be avalable for this edit |
| x222.299.2320.CAS14.020 | CAS14 |  |  |  |  |  |  |  | 277 | c | Cscc AB . <br> Acknowledgement/Rejected for relational field in error. <br> CSC 521: Adjustment Reason Code Date <br> EIC: GB "Other Insured" | If 2330B. DTP03 with DTP01 = "573" is present, $2320 . \mathrm{CAS14}$ must be a vaid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 $=$ " 573 ". | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, $2320 . C A S 14$ must be a valid Clain Adiustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573" |  |
| x222.299.2320.CAS14.030 | CAS14 |  |  |  |  |  |  |  | 277 | c | CSCC A8 <br> Acknowledgement/Rejected for relational field in error <br> CSC 521: Adjustment Reason Code Date <br> EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not Adiustment Reason Code for the highllow date range of the 2430.DTPO3s when DTPO1 $=$ " 573 ". | If 2330B.DTPO3 with DTP01 $=$ " $573^{2}$ is not Adjustment Reason Code for the highllow <br>  =" 573 " |  |
| x222.299.2320.CAS15.010 | CAS15 | Adjustment Amount | R | ${ }^{1-18}$ | s |  |  |  | ${ }^{999}$ | R | IK403 = 2: "Conditional Required Data Element Missing" | ${ }^{\text {If } 2320 . C A S 15 \text { is }}$ bresesnt, 2320.CAS14 must | It 2320.CAS15 is present, 2320.CAS14 must be present. |  |
| X222.299.2320.CAS15.020 | CAS15 |  |  |  |  |  |  |  | 999 | R | KKa03 $=6$ : "IIvaidid Character in Data Element | 2320.CAS15 must be numeric. | 2320.CAS15 must be numeric. |  |
| x222.299.2320.CAS15.030 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount <br> EIC: GB "Other Insured" | 2320.CAS15 must not $=0$. | 2320.CAS15 must not $=0$. | 11/25: Medicare specific limitation. <br> 01/20: Companion Guide Note needed. |
| x222.299.2320.CAS15.040 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 519: "Adjusinal Precision" EIC: GB "Other Insured" | 2320.CAS15 is linited to 0,1 or 2 decimal postions. | 2320.CAS15 is limited to 0,1 or 2 decimal positions. positions. |  |
| x222.299.2320.CAS15.050 | CAS15 |  |  |  |  |  |  |  | 999 | E | 1 14003 $=5$ : "Data Element Too Long" |  | $\begin{aligned} & \text { 2320.CAS15 must be > }=-99,999.99 \text { and } \\ & \mathrm{z=999999.99.} \end{aligned}$ | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed. |

$\stackrel{837-}{\stackrel{\text { - }}{\text { Professional Edits }}}$

| Edit Reference | Segment or Element | Descripion | 10 | $\min _{\text {Max. }}$ | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TAAI } \\ \text { a999/ } \\ 277 C A \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition /Error Code | Proposed 5010A1 Edits Part B | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.299.2320.CAS15.060 | CAS15 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid information... <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" <br> ElC: GB "Other Insured" |  |  |  |
| X222.299.2320.CAS16.010 | CAS16 | Adjustment Quantily | R | 1-15 | s |  |  |  | ${ }^{999}$ | R | IK403 $=2$ : "Conditional Required Data Element Missing" | $112320 . \mathrm{CAS161}$ is present, 2320.CAS14 must be pesent. | It $12320 . \mathrm{CAAL16}$ i is pesesent, 2320.CAS14 must be present |  |
| X222.299.232.CAS16.020 | cas16 |  |  |  |  |  |  |  | 999 | E | \|K403 $=5$ : "Data Element Too Long" | $2320 . C A S 16$ must be $1-15$ digits. | 2320.CAS16 must be $1-15$ digits. |  |
| ×222.299.2320.CAS16.030 | CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount <br> FIC: GB "Other Insured" |  |  |  |
| ×222.299.2320.CAS16.040 | CAS16 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal to zero <br> CSC 520: "Adjustment Quantity" <br> EIC. GB "Other Insured" | 2320.CAS16 must not $=0$. | 2320.CAS16 must not 0 . |  |
| X222.299.2320.CAS17.010 | CAS17 | Adjustment Reason Code | 10 | 1-5 | s |  |  |  | 999 | R | IK403 $=$ 2: "Conditional Required Data Element Missina | It 2320.CAS17 is present, 2320.CAS14 must be present. | It 2320.CAS17 is present, 2320.CAS14 must be resent. | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| ×222.299.2320.CAS17.020 | CAS17 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment <br> EIC: GB "Other Insured" | If 2330B.DTP03 with DTP01 = " 573 " is present, 2320.CAS17 must be a valid Claim 2330B. DTP03 when DTP01 = "573". | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS17 must be a valid Clair Adiusment Reason Code on the date in $2330 B$. DTP03 when DTP01 $=$ " 573 ". |  |
| ×222.299.2320.CAS17.030 | CAS17 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> Acknowledgement/Rejected for elational field in error <br> CSC 521: Adjustment Reason Code Date <br> EIC: GB "Other Insured" | If 2330B. DTPO3 with DTP01 $=$ " 573 " is not Adiustment Reason Code for the highlow Adjustment Reason Coded for ne highlow date ange of the 2430.DTPO3s when DTPO1 $=$ " 573 ". |  |  |
| X222.299.232.CAS18.010 | CAS18 | Adjustment Amount | R | ${ }^{1.18}$ | s |  |  |  | 999 | R | 1K403 = 2: "Conditional Required Data Element Missing" | If $12320 . \mathrm{CAS118}$ is present, $2320 . \mathrm{CAS17}$ mustbe present. | $112320 . C A S 18$ is present, 2320.CAS17 must be resent. |  |
| X222.299.2320.CAS18.020 | CAS18 |  |  |  |  |  |  |  | 999 | R | \|K403 =6: "INvalid Character in Data Element" | 2320.CAS18 must be numeric. | 2320.CAS18 must be numeric. |  |
| ×222.299.2320.CAS18.030 | CAS18 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount <br> EIC: GB "Other Insured" | 2320.CAS18 must not $=0$. | 2320.CAS18 must not $=0$. | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed |
| X222.299.232.CAS18.040 | CAS18 |  |  |  |  |  |  |  | 277 | T | CsCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2320.CAS18 is limited to 0,1 or 2 decimal positions. positions. | 2320.CAS18 is limited to 0,1 or 2 decimal positions. |  |
| x222.299.232.CAS18.050 | CAS18 |  |  |  |  |  |  |  | 999 | E | \|K403 5 5: "Data Element Too Long" | 2320.CAS18 must be $>=-99,999.99$ and $<=99,999.99$. | 2320.CAS18 must be $>=-99,999.99$. and $<=99,999.99$. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed |
| ×222.299.2320.CAS18.060 | CAS18 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | Acknowledg nformation... application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  |  |
| X222.299.2320.CAS19.010 | CAS19 | Adjustment Quantiy | R | ${ }^{1-15}$ | s |  |  |  | 999 | R |  | $112320 . \mathrm{CAS19}$ i is present, 2320.CAS17 must be present | It $12320 . \mathrm{CAS19}$ i is present, 2320.CAS17 must be pesent. |  |
| X222.299.232.CAS19.020 | CAS19 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | $2320 . C A S 19$ must be $1-15$ digits. | $2320 . C A S 19$ must be 1-15 digits. |  |
| x222.299.2320.CAS19.030 | CAS19 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ |  |  |  |  |
| x222.299.2320.CAS19.040 | CAS19 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid information..." <br> CSC 694: "Amount must not be equal to zero <br> CSC 520: "Adjustment Quantity" <br> EIC: GB "Other Insured" | 2320.CAS19 must not $=0$. | 2320.CAS19 must not $=0$. |  |
| X222.305.2320.AMT. 010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.305 .2320 . A M T .020$ | Amt | COB PAYER PAID AMOUNT |  | 1 | s | 2320 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.AMT with AMT01 = " $D$ " is allowed. | Only one iteration of 2320.AMT with AMTO1 = "D" is allowed |  |


| Edit Reference | Segment or Element | Descripion | 10 | $\begin{gathered} \text { min. } \\ \text { Max. } \end{gathered}$ | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 A_{1} \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { Ta99 } \\ 277 c \mathrm{Ca} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } B \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.305.2320.AmT. 330 | amt |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> Acknowledgement/Rejected for Missing Information..." CSC 286: "Other payer's Explanation of Benefits/payment information" | If 2000B.SBR01 = "S" then one 2320 loop with an AMT segment with AMT01 = "D" must be present. | If 2000B.SBR01 $=$ " $S$ " then one 2320 loop with an AMT segment with AMT01 = "D" must be present. |  |
| X222.305.2320.AmT.040 | amt |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 41: Special handling required at payer site <br> CSC 286: Other payer's Explanation of Benefits/payment information inconsistent with billing guidelines | If 2000B.SBR01 $=$ " S " then only one iteration of 2320 loop containing an AMT with AMT01 equal to $D$ is allowed. | $\begin{aligned} & \text { If 20008.SBR01 = "s" then only one } \\ & \text { iteration of 2320 Ioop containing an AMT } \\ & \text { with AMTO1 equal to D is allowed. } \end{aligned}$ | This edit prevents multiple primary payers to Medicare from being submitted electronically. |
| X222.305.2320.AмTT01.010 | Амто1 | Amount Quaifier Code | 10 | ${ }^{1-3}$ | R |  |  | D | 999 | R | (Ka03 1. "Required Data Element | ${ }^{2320 . A M T 01 ~ m u s t ~ b e ~ p r e s e n t . ~}$ | 2320.AmT01 must be present. |  |
| X222.305.2320.AMT01.020 | AmT01 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2320.AMT01 must be "D". | 2320.AMT01 must be "D". |  |
| х222.305.2320.Amto1.030 |  |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for nvalid Information..." <br> CSC 41: Special handling required at payer site <br> CSC 286: Other payer's Explanation of Benefits/payment information CSC 732: Information submitted inconsistent with billing guidelines | If 2000B.SBR01 $=$ "p" then 2320.AMT01 must not be present. | If 2000B.SBR01 = "P" then 2320.AMT01 must not be present. | Medicare cannot be both primary and secondary at the same time, as a "P" (for Primary) in 2000B.SBR01 and a value in indicate. |
| х222.305.2320.Anto2.015 | Амтог | Payer Paid Amount | R | ${ }^{1.18}$ | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2320.AMT02 must be present. | 2320.AMT02 must te peesent. |  |
| х222:305.2320.AMTт2..330 | Амтто |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2320 AmTO2 must be numeric. | 2320 . Anto2 must be numeric. |  |
| X222.355.2320.AMTT02.010 | Aмто2 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element too Long" | 2320.AMTO2 must be $>=0$ and $<=$ | 232.AMT02 must be $>=0$ and $<=$ | 11/25: Medicare specific limitation 01/20: Companion Guide Note needed |
| x222.305.2320.Amto2.020 | Amто2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ |  |  |  |  |
| x222.305.2320.AMT02.040Edit Deacivivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.305.2320.Aмtт2.050 | Aмто2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | cscc A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 697: "Invalid Decimal Precision" CSC 286: Other payer's Explanation of Benefits/payment information EIC: PR "Payer" | 2320.AMTO2 is limited to 0,1 or 2 decimal positions. | $\underbrace{2320 . A \text { antoz is linited to } 0,1 \text { or } 2 \text { decimal }}_{\text {postions. }}$ |  |
| х222.305.2320.Amto2.060 | Amто2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgementrejejected for Invalid ation. <br> CSC 672: "Other Payer's payment information is out of balance SSC 286: Other payer's Explanation of Benefits/payment information | 2320 AMT02 must $=$ the sum of all existing 2430.SVDo2 payer paid amounts (when the value in 2330B.NM109) minus the sum of all claim level adjustments ( 2320 CAS adjustment amounts) for the same payer NOTE: Perform this edit only when 2430 SVD iteration's payer. |  |  |
| х222.305.2320.AмTт0.010 | Амтоз | Credivoeitit Flag Code | 10 | ${ }^{1.1}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.306.2320.AMT 010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.306.2320.Aмt.020 | Amt | $\underset{\substack{\text { COB TOTAL NON-COVERED } \\ \text { AMOUNT }}}{\text { Cond }}$ |  | 1 | s | 2320 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | $\begin{aligned} & \text { Only one iteration of } 2320 . \text { AMT with } \\ & \text { AMT01 = "A8" is allowed. } \end{aligned}$ | $\begin{aligned} & \text { Only one iteration of } 2320 . \text { AMT with } \\ & \text { AMT01 = "A8" is allowed. } \end{aligned}$ | Pass through, symtax only. |
| X222.306.2320.AмTT01.010 | Амтто1 | Amount Qualifier Code | 10 | ${ }^{1-3}$ | R |  |  | ${ }^{\text {AB }}$ | ${ }^{999}$ | R | (Kissing: 1 "Required Data Element | 2320.AMT01 must be present. | ${ }^{2320 . A M T 011 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| X222.306.2320.AMTO1.020 | AMTO1 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invali Code Value" | 2320.AMT01 must be "A8". | 2320.AMT01 must be $\mathrm{ABP}^{\text {P }}$. |  |


| Edit Reference | Segment or Element | Description | 10 | $\mathrm{m}_{\text {Min. }}^{\text {Max. }}$ | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \\ \hline \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { cog } \\ \text { 277CA } \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.306.2320.AмTт02.005 | Амто2 | Non-Covered Amount | R | 1-18 | R |  |  |  | 999 | R | (ka03 1: "Required Data Element | 2320.AMT02 must be present. | ${ }^{2320 . A M T 02 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| х222.306.2320.AмTTo2.010 | Амто2 |  |  |  |  |  |  |  | 999 | R |  | 2320 AmT02 must be numeric. | 2320 . AmT02 must be numeric. |  |
| X222.306.2320.AмTто2.220 | AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.AMTO2 must be $>=0$ a and $<=$ | ${ }^{2320.999 .99 .2 \text { must be }>=0 \text { and }<=}$ | 11/25: Medicare specific limitation. $01 / 20:$ Companion Guide Note needed |
| х222.306.2320.AmT02.030 | Amto2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information. CSC 512: "Length invalid for receiver's application system" Amount" ElCi GB "Other Insured" |  |  |  |
| x222.306.2320.Amto2.040 | Amto2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> "Acknowledgement/Rejected for Invalid information..." <br> CSC 697: "Invalid Decimal Precision" CSC 596: <br> EIC: GB "Other Insured" | 2320. AMTO2 is limited to 0,1 or 2 decimal positions. | 2320. AmT02 is limited to 0,1 or 2 decimal positions. |  |
| x222.306.2320.AmT02.050 | Amто2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information. CSC 596: "Non-covered Charge Amount" <br> EIC: GB "Other Insured" | The sum of all 2320.AMT02 (with AMT01 = "A8") elements must $=2300$. CLM02. | The sum of all 2320.AMT02 (with AMT01 = "A8") elements must $=2300$. CLM02. |  |
| X222.306.2320.AMT02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.306.2320.Amт03.010 | Амтоз | Creditoebit Flag Code | 10 | 1-1 | Nu |  |  |  | 999 | E | K403 $=110:$ "Implementation "Not | Must not be present. | Must not be present. |  |
| $\begin{array}{\|l\|} \hline \text { X222.307.2320.AMT. } 010 \\ \text { Edit Deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.307.2320.AmT.020 | AMT | REMAINING PATIENT LABILITY |  | 1 | s | 2320 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only one iteration of 2320.AMT with AMT01 = "EAF" is allowed. | Only one iteration of 2320.AMT with AMT01 = "EAF" is allowed. | Pass through, symtax only. |
| х222.307.2320.AmT. 330 | amt |  |  |  |  |  |  |  | 277 | T | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error" CSC 6: "Balance due from the subscriber" <br> EIC: GB "Other Insured" | If 2430 AMT (EAF) is present for the same payer, the 2320 AMT (EAF) must not be present | If 2430 AMT (EAF) is present for the same payer, the 2320 AMT (EAF) must not be present |  |
| x222.307.2320.AmT01.010 | Амто1 | Amount Quaifier Code | 10 | ${ }^{1-3}$ | R |  |  | EAF | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2320.AmT01 must be present. | $2320 . A 4 T 011$ must be present. |  |
| X222.307.2320.AMT01.020 | AMTO1 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $2320 . A M T 01$ must be "EAF". | $2322 . A M T 01$ must be "EAFP. |  |
| х222.307.2320.AмTт02.02 | Амто2 | Remaining Patient Liability Amount | R | ${ }^{1-18}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.AMTO2 must be present. | ${ }^{2320 . A M T 02 ~ m u s t ~ b e ~ p e s e n t . ~}$ |  |
| х222.307.2320.AMTTO2.005 | amtor |  |  |  |  |  |  |  | 999 | R | K403 =6: "Invalid Character in Data Element" | 2320.AMTO2 must be numeric. | 2320.AMT02 must be numeric. |  |
| X222.307.2320.AMTT02.010 | Aмто2 |  |  |  |  |  |  |  | 999 | E | IK403 $=5$ : "Data Element Too Long" | 2320.AMT02 must be < $=99.999 .99$. | 2320.AMT02 must be $<=99.999 .99$. | 11/25: Medicare specific limitation. $01 / 20:$ Companion Guide Note needed |
| x222.307.2320.AmT02.020 | Amто2 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 6 Balance due from the subscriber <br> EIC: GB "Other Insured" |  |  |  |
| х222.307.2320.AmT02.025 | Amto2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 697: "Invalid Decimal Precision" CSC 6 Balance due from the subscriber. EIC: GB "Other Insured" | $\underbrace{2322 . A M T o z ~ i s ~ l i n i t e d ~ t o ~}_{\text {postions. }} 0,1$ or 2 decimal | 2320.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| X222.307.2320.AMTO2.030Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\left\lvert\, \begin{aligned} & \text { X222.307.2320.A4To2.040 } \\ & \text { Edit Deacivated } \end{aligned}\right.$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.307.2320.AмTт0.010 | Амтоз | Crediveeitit Flag Code | 10 | 1-1 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.308.2320.0.010 | 0 | OTHER INSURANCE COVERAGE INFORMATION |  | 1 | R | 2320 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If $2320 . S B R$ is present, 2320.01 must be present. | If 2320.SBR is present, 2320.01 must be present. |  |
| X222.308.2320.01.020 | 1 |  |  |  |  |  |  |  | 999 | R | 1 K304 $=5$ : " Segment Exceeds Maximum Use" | Only one iteration of 2320.01 is allowed. | Only one iteration of 2320.01 is allowed. |  |
| х222.308.2320.0101.010 | 0101 | Claim Filing Indicator Code | 10 | 1-2 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. max. | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | p | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TA11 } \\ \text { cog } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|c\|cc\|c\|r\|r\|} \text { Accepe } \\ \text { eet } \end{array}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } \mathrm{B} \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.308.2320.0102.010 | 0102 | Claim Submission Reason Code | 10 | 2.2 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not te present. | Must not be present. |  |
| x222.308.2320.0103.010 | 0103 | ${ }_{\text {Benefits Assignment Cersificaion }}^{\text {Indicator }}$ | $1{ }^{1}$ | ${ }^{1-1}$ | R |  |  | N, w, Y | 999 | R | (kas 1. "Required Data Element | 2320.0103 must be present. | 2320.0103 must be present. |  |
| $\times \times 222.308 .2320 .0103 .020$ | 0103 |  |  |  |  |  |  |  | 999 | R | IK 403 -7: "Invalid Code Value" | 2320.0103 must be valid values. | 2320.0103 must be valid values. |  |
| $\times \times 222.308 .2320 .104 .010$ | 0104 | Patient Signature Source Code | 10 | ${ }^{1-1}$ | s |  |  | P | 999 | R | 1K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a u e " ~}$ | 2320.0104 must be "P". | 2320.104 must be "p". |  |
| x222.308.2320.0105.010 | 0105 | Provider Agreement Code | 10 | ${ }^{1-1}$ | n/ |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be pesent. | Must not be present. |  |
| X2222.308.2320.0106.010 | 0106 | Release of Informaion Code | 10 | ${ }^{1-1}$ | R |  |  | 1, Y | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2320.0106 must be present. | 2320.0106 must be present. |  |
| x222.308.2320.0106.020 | 0106 |  |  |  |  |  |  |  | 999 | R | \|k403 =7: "Invalid Code Value" | 2320.0106 must be valid values. | 2322.0106 must be valid values. |  |
| X222.310.2320.MOA. 010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х2222.310.2320.MOA.020 | моА | OUTPATIENT ADJUDICATION INFORMATION |  | 1 | s | 2320 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.MOA is allowed on outpatient claims. | Only one iteration of $\mathbf{2 3 2 0}$.MOA is allowed on outpatient claims. |  |
| х222.310.2320.M0A00.010 | MOA01 | Reimbursement Rate | R | 1-10 | s |  |  |  | 999 | R | K4403 $=6$ : "Ivvalid Character in Data Element" | 2320.MOA01 must be numeric. | 2320.MOA01 must be numeric. |  |
| X222.310.2320.MOA00.020 | MOA01 |  |  |  |  |  |  |  | 999 | R | KKAO3 $=122$ " "Implementation Patem Match Failure" | 2320. MOA01 must be $>=0.0$ and $<=1.0$. | 2320. MOA01 must be $>=0.0$ and $<=1.0$. | $\begin{array}{l}\text { 232.MOAO1 must be a percentage expressed as } \\ \text { a decimal }\end{array}$ |
| х222.310.2320.MOA01.030 | MOAO1 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 697: "Invalid Decimal Precision" CSC 631: "Reimbursement Rate" | 2320.MOAO1 is limited to 0,1 or 2 decimal positions. | 2320.MOA01 is limited to 0,1 or 2 decimal positions. |  |
| х222.310.232.MOA02.010 | MOAO2 | HCPCS Payable Amount | R | 1-18 | s |  |  |  | 999 | R | (K403=6:"Invalid Charactere in Data | 2320.MOA02 must be numeric. | 2320.MOA02 must be numeric. |  |
| X222.310.2320.MOAO2.020 | MOAO2 |  |  |  |  |  |  |  | ${ }^{99}$ | E | ${ }^{1 \text { K403 }}$ = 5 " "Data Element Too Long" | ${ }^{2320.999 .99 .} 1$ | ${ }^{2320.909 .99 .} 2$ | 11/25: Medicare specific limitation. $01 / 20:$ Companion Guide Note needed. |
| х222.310.2320.MOAO2.030 | MOAO2 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| X222.310.2320.MOA02.040Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.310.232.MOA02.050 | MOA02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 697: "Invalid Decimal Precision" CSC 574: "HCPCS Payable Amount Home Health" | ${ }^{2320 . M O A O 2}$ is linited to 0,1 or 2 decimal | 2320.MOAO2 is limited to 0,1 or 2 decimal positions. |  |
| х222.310.2320.MоАоз.010 | моАоз | Remark Code | an | 1.50 | s |  |  |  | 277 | c |  | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.MOA03 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTPO1 = "573". |  | Valid Remittance Advice Remark Code reference must be available for this edit. |
| х222.310.2320.MOA03.020 | моАоз |  |  |  |  |  |  |  | 277 | c | CSCC AB: "ACKowedgementrejected for relational field in error." CSC 644 ."Remark Code" CSC 187: "Date(s) of service." CSC |  |  |  |
| х222.310.2320.MOA04.010 | MOAO4 | Remark Code | AN | 1.50 | s |  |  |  | 277 | c | CSCC AB: "ACknowedgementrejecected for relational field in error." CSC CSC 144:" Remark Code" CSC 187: "Date(s) of service." |  |  | Valid Remittance Advice Remark Code reference must be available for this edit. |
| х222.310.2320.MOA04.020 | MOAO4 |  |  |  |  |  |  |  | 277 | c |  | If 2330B.DTPO3 with DTP01 = "573" is not present. 2320.MAOA4 must be valid Remitance Advice Remark Code fort the hihhlow date range of the 2430. DTPO3s when DTP01 $=$ "573". |  |  |
| х222.310.2320.MOA05.010 | моА05 | Remar Code | an | ${ }^{1.50}$ | s |  |  |  | 277 | c | CSCC AB: "ACknowedgementrejejected for relational field in error." CSC 6 ." CSC 187: "Remark. Code" CSC |  |  | Valid Remittance Advice Remark Code reference must be available for this edit. |
| х222.310.2320.MOA05.020 | моА05 |  |  |  |  |  |  |  | 277 | c | CSCC AB: "ACkoweementrejejected for relational field in error." CSC 643 : Remark Code" CSC 187: "Date(s) of service." |  |  |  |
| х222.310.2320.MOA06.010 | MOA06 | Remak Code | an | ${ }^{1.50}$ | s |  |  |  | 277 | c |  | If 2330 B .DTP03 with DTP01 $=$ " 573 " is present, 2320.MOA06 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 $=$ " 573 ". |  | Valid Remittance Advice Remark Code reference must be available for this edit. |
| х222.310.2320.MOA00.020 | MOA06 |  |  |  |  |  |  |  | 277 | c |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\underset{\substack{\text { min. } \\ \text { Max. }}}{\text { mader }}$ | ( $\begin{gathered}\text { Usage } \\ \text { Req. }\end{gathered}$ | Loop | $\substack{\text { Loop } \\ \text { Repeat }}$ | 5010A1 Values | $\begin{gathered} \text { Th11 } \\ \substack{9997 \\ 277 c a} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010A1 Edits Part B | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.310.2320.MOA07.010 | моА07 | Remar Code | AN | ${ }^{1.50}$ | s |  |  |  | 277 | c |  |  |  | Valid Remitance Advice Remak Code efeference must be avalable for this eadit |
| х222.310.2320.M0A07.020 | MOA07 |  |  |  |  |  |  |  | 277 | c |  |  |  |  |
| х222.310.2320.M0А08.010 | моАов | End Stage Renal Disease Payment Amount | R | 1-18 | s |  |  |  | 999 | R | (1K403 =6: "Invalid Character in Data | 2320 . MOAO8 must be numeric. | 2320 . MOA08 must be numeric. |  |
| х222.310.2320.MOA08.020 | MOAOB |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | ${ }^{2320.999 .99}{ }^{23208 \text { must be }>=0 \text { and }<=}$ | ${ }^{2320.999 .99 .} 1$ | 11/25: Medicare specific limitation 01/20: Companion Guide Note needed |
| х222.310.2320.M0A08.030 | моАов |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." application system" CSC 534: "Claim ESRD Payment Amount" |  |  |  |
| X222.310.2320.MOA08.040 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.310.2320.MOA08.050 | моАов |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid information..." CSC 697: "Invalid Decimal Precision" CSC 534: "Claim ESRD Payment Amount" | ${ }_{\text {positions. }}^{2320 . \text { MOAO }}$ is inited to 0,1 or 2 decimal | ${ }^{23220 . \text { MOAOB is linited to } 0,1 \text { or } 2 \text { decimal }}$ |  |
| х222.310.2320.MOA09.010 | MOA09 | Non-Payable Professional Component Billed Amount | R | ${ }^{1-18}$ | s |  |  |  | 999 | R | IK203= 6:"Invalid Character in Data | 2320 . MOA09 must be nu | 2320. MOAO9 must be numeric | 11/25: Medicare specific limitation 01/20: Companion Guide Note needed |
| х222.310.2320.MOA09.020 | моАо9 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MOA09 must be $>=0$ and <= | 2320.MOA09 must be $>=0$ and $<=$ 99,999.99. |  |
| х222.310.2320.M0A09.030 | моАо9 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" Component Billed Amount" |  |  |  |
| X222.310.2320.MOA09.040Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.310.2320.M0A09.050 | моАо9 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid information..." CSC 697: "Invalid Decimal Precision" CSC 598: "Non-payable Professional Component Billed Amount" | 2320.MOAO9 is limited to 0,1 or 2 decimal positions. | 2320.MOA09 is limited to 0,1 or 2 decimal positions. |  |
| x222.313.2330A.NM1.010 | NM1 | Other subscriber name |  | 1 | R | 2330A | 1 |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing | If 2320SBR is present, 2330A.NM1 must be present. | If 2320SBR is present, 2330A.NM1 must be present. |  |
| x222.313.2330A.NM1.020 | NM1 |  |  |  |  |  |  |  | ${ }^{999}$ | R | $\begin{array}{\|l} \mid \text { K304 = 4: "Loop Occurs Over } \\ \text { Maximum Times" } \end{array}$ | Only one iteration of $2330 \mathrm{~A} . \mathrm{NM} 1$ is | Only one iteration of $2330 \mathrm{~A} . \mathrm{NM} 1$ is allowed. |  |
| X222.313.2330A.NM101.010 | NM101 | Enity Identifier Code | 10 | $2 \cdot 3$ | R |  |  | I | 999 | R | (Ka03 = 1 :"Requited Data Element | 2330A.NM101 must be present. | 2330AA.NM101 must be present. |  |
| х222.313.2330A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ :"Invalid Code Value" | 2330A.NM111 must be "LL" | 2330A.NM101 must be "LL". |  |
| х222.313.2330A.NM102.010 | nM102 | Entity Type Qualifier | 10 | ${ }^{1-1}$ | R |  |  | 1,2 | 999 | R |  | 2330A.NM102 must be present. | 2330A.NM102 must be present. |  |
| x222.313.2330A.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2330 A.NM102 must be valid values. | $23300 . N M 102$ must be valid values. |  |
| х222.313.2330A.NM103.010 | NM103 | Other Insured Last Name | an | 1.60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330AN.M103 must be present. | 2330AN.M103 must be present. |  |
| х222.313.2330A.NM103.020 | nM103 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5 "Data Element Too Long" | 2330AA.NM103 must be 1-60 characters. | 2330 A . NM103 must be 1-60 characters. |  |
| х222.313.2330A.NM103.030 | nM103 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" <br> EIC. GB "Entity's Last Name" <br> FIC: GB "Other Insured" |  |  |  |
| X222.313.2330A.NM103.440 | nм103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM103 must be populated with accepted AN characters. | acceopted $A$ N characters. |  |
| X222.313.2330A.NM103.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | Min. | Ueq. | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | $\begin{aligned} & 5010 A_{1} \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TAII } \\ \text { cas } \\ 277 c \mathrm{CA} \end{gathered}$ | $\begin{gathered} \text { Accept } / R \mathrm{Rej} \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.313.2330A.NM103.060 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM103 must contain at least one non- space character. | 2330A.NM103 must contain at least one non- space character. |  |
| X222.313.2330A.NM104.010 | NM104 | Other Insured First Name | an | ${ }^{1.35}$ | s |  |  |  | 999 | R | Implementation Dependent "Not Used" Data Element Present" | It 12330 A .NM102 is " "2", 2330A.NM104 must not be pesesent. | $\begin{aligned} & \text { If } 2 \text { 2330A.NM102 is " } 2 \text { ", 2330A.NM104 must } \\ & \text { not te present. } \end{aligned}$ |  |
| X222.313.2330A.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | R | K403 =6: "Invalid Character in Data Element" | 2330A.NM104 must contain at least one non- space character. | senad.NM104 must contain a a teast one non- space character. |  |
| X22.313.2330A.NM104.030 | NM104 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2330A.NM104 must be $1-35$ characters. | 2333 A.NM104 must be $1-35$ characters. |  |
| X222.313.2330A.Nm104.040 | nM104 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 505: "Entity's First Name" <br> EIC: GB "Other Insured" |  |  |  |
| X222.313.2330A.NM104.050 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM104 must be populated with | 2330A.NM104 must be populated with accepted AN characters. |  |
| X222.313.2330A.NM104.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.313.2330A.NM105.010 | nM105 | Other Insured Middle Name | an | ${ }^{1-25}$ | s |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present | If 2330A.NM102 is " 2 ", 2330A.NM105 must not be present | If 2330A.NM102 is " 2 ", 2330A.NM105 must not be present |  |
| X222.313.2330A.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | R | KK003 $\mathbf{6}$ :" "Invalid Character in Data | 2330A.NM105 must contain a a least one non- space character | Insoad NM105 must contain a a teast one non- space character. |  |
| х222.313.2330A.NM105.030 | NM105 |  |  |  |  |  |  |  | 999 | E | 1K403 =5: "Data Element Too Long" | 2330 A .NM105 must be $1-25$ characters. | 23330 A.NM105 must be 1-25 characters. |  |
| X222.313.2330A.Nn105.040 | nM105 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> ESC. 514: "Entity's Middle Name" <br> (IC. GB "Other Insured" |  |  |  |
| X222.313.2330A.NM105.050 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data <br> Element" | 2330. NM105 must be poppuated with accepeed $A N$ characers. | ${ }^{2330 A . N M 105 ~ m u s t ~ b e ~ p o p p u l a t e d ~ w i t h ~}$ |  |
| X222.313.2330A.Nm105.055 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 514: "Entity's Middle Name" EIC: GB "Other Insured" | The first position of 2330A.NM105 must be alphabetic (A...Z). | The first position of 2330A.NM105 must be alphabetic (A...Z). | To prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.313.2330A.NM105.060 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.313.2330A.NM106.010 | NM106 | Name Prefix | an | 1-10 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.313.2330A.NM107.010 | NM107 | Other Insured Name Suffix | an | ${ }^{1-10}$ | s |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | If $2330 \mathrm{~A} . \mathrm{NM} 102$ is " 2 ", $2330 \mathrm{~A} . \mathrm{NM107}$ must not te present. | It 12330 .NM102 is " 2 ", 2330A.NM107 must |  |
| X222.313.2330A.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | R | ${ }^{\text {K4K03 }}=6$ : "Invalid Character in Dota | 2330A.NM107 must contain a a teast one non- space character. | 2330A.NM107 must contain a a teast one non- space character. |  |
| х222.313.2330A.NM107.030 | NM107 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2330A.NM107 must be $1-10$ characters. | 23330 A.NM107 must be $1-10$ characters. |  |
| X222.313.2330A.Nm107.040 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: Acknowledge <br> CSC 512: "Length invalid application system" <br> CSC 125: "Entity's Name" <br> FIC. GB "Other Insured" |  |  |  |
| X222.313.2330A.NM107.050 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | ${ }_{\text {accent }}^{2330 A . N M 107 \text { must be poppuated with }}$ | ${ }_{\text {acen }}^{2330 A ., N M 107 ~ m u s t ~ b e ~ p o p p u l a t e d ~ w i t h ~}$ |  |
| X222.313.2330A.NM107.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.313.2330A.NM108.010 | NM108 | Idenification Code Qualifier | 10 | ${ }^{1-2}$ | R |  |  | I, M1 | 999 | R |  | 2330A.NM108 must be present. | 2330A.NM108 must be present. |  |
| X222.313.2330A.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | \|14003 $=7$ : "Invalid Code Value" | 2330 A.NM108 must te velid values. | 2330 A.NM108 must be valid values. |  |
| X222.313.2330A.NM109.010 | NM109 | Other Insured Identifier | AN | 2.80 | R |  |  |  | 999 | R | K4033 1: : Required Data Element | 2330A.NM109 must be present. | 2330A.NM109 must be present. |  |
| X222.313.2330A.NM109.020 | NM109 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { (llissing } \\ & \begin{array}{l} \text { K4033 }=6 \text { :"IIvalid Character in Data } \\ \text { Element" } \end{array} \\ & \hline \end{aligned}$ | I230A.NM109 must contain a a teast wo non- snace characeles. | Senad.NM109 must contain a a teast two non- snace characters. |  |
| X222.313.2330A.Nm109.030 | NM109 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 23300. NM109 must be 2 -80 characters. | 2330 A .NM109 must be 2 -80 characters. |  |
| X222.313.2330A.Nm109.040 | nM109 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 153: "Entity's ID Number" |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { min. } \\ \text { max. } \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TA11 } \\ \text { Ta99 } \\ 277 c \mathrm{Ca} \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.313.2330A.NM109.050 | NM109 |  |  |  |  |  |  |  | 999 | R |  | 2330A.NM109 must be populated with accepted AN characters. | 230A.,NM109 must be poppulated with acceneded $A N$ charactes. |  |
| X222.313.2330A.NM109.060 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.313.2330A.NM110.010 | NM110 | Enity Relationstip Code | 10 | 2-2 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.313.2330A.NM111.010 | NM111 | Enity Identifier Code | 10 | 2.3 | nu |  |  |  | 999 | E | (K4033 = 110.4 "Implementation "Not | Must not be pesest. | Must not be present. |  |
| х222.313.2330A.NM112.010 | NM112 | Name Last or Organization Name | AN | 1.60 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.316.2330A.N3.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.316.2330А.N3.020 | N3 | OTHER SUBSCRIEER ADDRESS |  | 1 | s | 2330A |  |  | ${ }^{999}$ | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330A.N3 is allowed. | Only one iteration of 23300.N3 is allowed. |  |
| х222.316.2330A...301.010 | N301 | Other Insured Address Line | AN | 1.55 | R |  |  |  | 999 | R | K403 1 : : Required Data Element Missing" | 2330A..N301 must be present. | 2330A.N301 must be present. |  |
| X222.316.2330A...301.015 | N301 |  |  |  |  |  |  |  | 999 | R |  | 2330A. N301 must contain at least one non- space character. | ${ }^{2330 A . N 301 ~ m u s t ~ c o n t a i a n ~ a t ~ l e a s t ~ o n e ~ n o n-~}$ |  |
| X222.31.2330A.N301.020 | N301 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2330 A. 301 must be $1-55$ charaters. | 2330 A. 301 must be 1 - 55 characters. |  |
| ×222.316.2330A..301.030 | N301 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> SC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" ElC: GB "Other Insured" |  |  |  |
| ×222.316.2330A..330.040 | N301 |  |  |  |  |  |  |  | 999 | R |  | 2330., 301 must be populated with accepeded $A N$ charactes. | $2330 A . N 301$ must be populuated with accepeed $A N$. characters. |  |
| X222.316.2330A.N301.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.316.2330A.N301.060 <br> EEtid Deactiveted <br> X222.36.233A.N302.010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.316.2330A.N302.020 | N302 | Other Insured Address Line | AN | 1.55 | s |  |  |  | 999 | R |  | 2330A.N302 must contain at least one nonspace character. | ${ }_{\text {space character. }}^{2330 \text {. contain at least one non- }}$ |  |
| X222.316.2330A.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 23300. . 302 must be $1-55$ characters. | 2330 A. 332 must be 1 - 55 characters. |  |
| ×222.316.2330A..332.040 | N302 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> EIC: GB "Entity's Street address" <br> IC: GB "Other Insured" |  |  |  |
| x222.316.2330A..302.050 | N302 |  |  |  |  |  |  |  | 999 | R |  | 2330A.N302 must be populated with accepted AN characters. |  |  |
| $\begin{array}{\|l\|l\|} \substack{\text { K222.31.2.2330....302.060 } \\ \text { Edit Deactivaled }} \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.317.2330.N4.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X22.2317.2330A.N4.020 } \\ & \text { Editiopeactivaed } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222A1.020.2330A.N4.010 | N4 | OTHER SUBSCRIBER CITYISTATEIZIP CODE |  | 1 | s | 2330A |  |  | 999 | R | \|K304 = 5: "Segment Exceeds | Only one iteration of 2330A.N4 is allowed. | Only one iteration of 2330A.N4 is allowed. |  |
| ×222.317.2330A.N401.010 | N401 | Other Subscriber City Name | AN | 2.30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.N401 must be present. | 2330A.N401 must be present. |  |
| X222.317.2330A. 4001.220 | N401 |  |  |  |  |  |  |  | 999 | R |  | 2330A. N401 Must contain at least two non- space characters. | 2330A, N401 must contaia at teast two non- space characters. |  |
| х222.317.2330A.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2330 A . 401 must be $2-30$ characters. | 2330 A . 4001 must be $2-30$ characters. |  |
| x222.317.2330A..400.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: Acknowledge Information CSC 512: "Length invalid for receiver's application system EIC: GB "Other Insury" EIC: GB "Other Insured" |  |  |  |
| X222.317.2330A..N401.050 | N401 |  |  |  |  |  |  |  | 999 | R |  | $2330 A$. N401 must be poppulated with accepeded AN characters. | $2330 A$. .N001 must be populuated with accepeted AN characters. |  |
| X222.317.2330A.N401.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\begin{aligned} & \operatorname{min.} . \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|c\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { Ta99 } \\ 277 c \mathrm{Ca} \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\underset{\text { Proposed 5010A1 Edits }}{\text { Pars }}$ | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.317.2330A.N402.010 | N402 | Other Subscriber State or Province Code | 10 | 2.2 | s |  |  |  | 999 | R | $\substack{\text { K4033 } \\ \text { E.2: Conditional Required Data } \\ \text { Element Missing }}$ |  |  |  |
| ×222.317.2330A.N402.020 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid information. <br> Entity's State/Province <br> IC: GB "Other Insured" | $2330 \mathrm{~A}, \mathrm{~N} 402$ must be a vald State Code. | 2330 A. . 402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| X222.317.2330A.N403.010 | N403 | Other Subscriber Postal Code | 10 | 3-15 | s |  |  |  | 999 | R | \|K403 = 2: "Conditional Required Data Element Missing | It $2330 \mathrm{~A} ., \mathrm{N} 404$ is not present, 2330A.N403 must be present. | It $2330 A . N 404$ is not present, 2330A.N403 must be present |  |
| $\times 222.317 .2330 A . N 403.020$ | N403 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid nformation. CSC 500: "Entity's Postal/Zip Code" EIC: GB "Other Insured | 2330A.N403 must be a valid postal/zip Code when N404 equals US or blank. | 2330A.N403 must be a valid postal/zip Code when N404 equals US or blank. | Valid Zip Code reference must be available for this edit. |
| x222.317.2330A..N040.010 | N404 | Other Subscriber County code | 10 | 2.3 | s |  |  |  | 277 | c |  | 2330A.N404 must be a valid 2 character Country Code. | 2330A.N404 must be a valid 2 character Country Code. | Valid alpha-2 Country Code reference must be available for this edit. (from Part 1 of ISO 3166) |
| x222.317.2330A.N05.010 | N405 | Location Qualifier | 10 | 1-2 | NU |  |  |  | 999 | E | (1) | Must not be present. | Must not be present. |  |
| x222.317.2330A.N06.010 | N406 | Location Identifer | AN | ${ }^{1-30}$ | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| $\times 222.317 .2330 A . N 407.010$ | N407 | Countr Subdivision Code | 10 | ${ }^{1-3}$ | s |  |  |  | 277 | c |  | 2330A.N407 must be a valid Country Subdivision Code. | 2330A.N407 must be a valid Country Subdivision Code. | Valid Country Subdivision Code reference must be available for this edit. (from Part 2 of ISO 3166) |
| X222.319.2330A.REF. 010Edit Deactivated Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.319.2330A.RE. 020 | REF | OTHER SUBSCRIBER SECONPAY IENTIICATION |  | 1 | s | 2330A |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330A.REF is allowed. | Only one iteration of 2330A.REF is allowed. |  |
| X222.319.23300.REFF0.010 | REF01 | Reference Idenifificaion Qualifier | 10 | $2 \cdot 3$ | R |  |  | sY | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missina" | 2330A.REF01 must be present. | 2330A.REFF01 must be present. |  |
| X222.319.2330A.REFF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 114003 $=7$ : "Invalid Code Value" | 2310 A .REF01 must be "YY": | 2310A.REF01 must be "SY": |  |
| X222, 319.2330A.REFO2.010 | REFO2 | Other Insured Addditional Identifier | an | ${ }^{1.50}$ | R |  |  |  | ${ }^{999}$ | R | $1 \mathrm{~K} 403=1$ : "Required Data Element Missing" | 2330A.REFFO2 must be present. | 2330A.REFO2 must be present. |  |
| x222.319.2330A.REFO2.020 | ReFo2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid Information.. CSC 148: "Entity's Social Security Number" EIC. GB EIC: GB "Other Insured | 2330A.REF02 must be 9 digits, with no punctuation. <br> The first tigits cannot be higher than 772 , and digits $1-3,4-5$, and $6-9$ cannot be zeros. | 2330A.REFO2 must be 9 digits, with no punctuation. <br> The first 3 digits cannot be higher than 772 , and digits $1-3,4-5$, and $6-9$ cannot be zeros. |  |
| X222.319.2330A.REF03.010 | REFO3 | Descripion | AN | 1-80 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.319.2330A.REF04.010 | REF04 | REFERENCE IIENTIFIER |  |  | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.320.23308..мM1.010 | NM1 | other payer name |  | 1 | R | ${ }^{23308}$ | 1 |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing | It 2320.SBR is present, 23308.NM1 must be present. | If 2320.SBR is present, 2330B.NM1 must be present. |  |
| x222.320.23308.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | 1 K304 $=4:$ "Loop Occurs over Maximum Times | Only one iteration of 2330 B . NM 1 is allowed. | Only one iteration of 2330 B. . $M 1$ is allowed. |  |
| х222.320.23308. .м 101.010 | nm101 | Enity Idenifier Code | 10 | $2 \cdot 3$ | R |  |  | PR | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 23308. .N101 must be present. | 23338.NM101 must be present. |  |
| X222.320.23308. NM 101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 23308. NM101 must be "PR". | 23308. NM101 must be "PR". |  |
| х222.320.2330B. . 1102.010 | nM102 | Enity Type Quadifier | ${ }^{10}$ | 1-1 | R |  |  | 2 | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missina" | 23308, NM102 must be present. | 23308. NM102 must be present. |  |
| x222.320.23308.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Invalid Code Value" | 23308.NM102 must be "2". | 23308.NM102 must be "2". |  |
| х222.320.23308. м 1103.010 | NM103 | Other Payer Last or Organization <br> Name | ${ }^{\text {an }}$ | ${ }^{1.60}$ | R |  |  |  | 999 | R | \|K403 = 1: Requiried Data Element Missing" | 23308.NM103 must be present. | 23308..nM103 must be present. |  |
| х222.320.23308. . 1103.020 | nM103 |  |  |  |  |  |  |  | 999 | R |  | Ins. space character. | 2330B.NM103 must contain at least one non- space character. |  |
| х222.320.23308. м 1103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 23008 . .NM103 must be 1-60 characters. | 23008 . .n 103 must be 1-60 characters. |  |
| х222.320.23308.NM103.440 | nM103 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ |  |  |  |  |
| х222.320.23308.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | ${ }_{\text {accernered }}^{2330 \mathrm{~N}} \mathrm{AN}$ churacters. |  |  |
| X222.320.2330B.NM103.060 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.320.23308. . 1104.010 | NM104 | Name First | An | 1-35 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.320.23308.NM105.010 | NM105 | Name Middle | an | 1 1-25 | nu |  |  |  | 999 | E | (K4033 = 110.7 "Implementation "Not | Must not be present. | Must not be present. |  |

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| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { min. } \\ \text { max. } \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TA11 } \\ \text { Ta99 } \\ 277 c \mathrm{Ca} \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\times \times 222.320 .23308$. .NM 106.010 | NM106 | Name Prefix | AN | 1-10 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.320.23308.NM107.010 | NM107 | Name Sufix | AN | 1.10 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.320.23308.NM108.010 | NM108 | Identificaion Code Qualifier | 10 | 1-2 | R |  |  | $\mathrm{Pl}, \mathrm{XV}$ | 999 | R |  | 23308.NM108 must be present. | 23308..nM108 must be present. |  |
| х222.320.23308.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{7}$ : "Invalid Code Value" | 23308. NM108 must be valid values. | 23308. NM108 must be evalid values. |  |
| х222.320.23308.NM109.010 | nM109 | Other Payer Primay Identifier | AN | 2.80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 23308.NM109 must be present. | 23308.NM109 must be present. |  |
| x222.320.23308.NM109.030 | nм109 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = I12: "Implementation Pattern } \\ & \text { Match Failure" } \end{aligned}$ | 23338.NM109 must $=2430$. SvD01. | When sending Line Adjudication Information for this payer, 2330 B. NM109 must $=$ 2430.SVD01. |  |
| х222.320.23308.NM110.010 | NM110 | Entit Relaioionship Code | 10 | 2.2 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.320.23308.NM111.010 | NM111 | Enity Identifier Code | 10 | 2.3 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.320.23308.NM112.010 | NM112 | Name Last or Organization Name | AN | 1.60 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.322.2330B.N3.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.322.23308.N3.020 | N3 | other Payer adoress |  | 1 | s | ${ }^{23308}$ |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 23308.N3 is allowed. |  |  |
| X222.322.23338. .300.010 | N301 | Other Payer Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element | 223308. . 301 must be present. | ${ }^{23308 .}$. 301 must be peresent. |  |
| X222.32.2.23308...301.020 | N301 |  |  |  |  |  |  |  | 999 | R | KK403 $=6$ : "Invalid Character in Data Element" | ${ }^{23308 . ~ N 301 ~ m u s t ~ c o n t a i n ~ a t ~ l e a s t ~ o n e ~ n o n-~}$ | ${ }^{2} 2308$. . 3 301 1 must contain at least one non- |  |
| х222.322.23308..3301.030 | N301 |  |  |  |  |  |  |  | ${ }^{999}$ | E | IK403 5 5: "Data Element Too Long" | ${ }^{23308}$. 301 must be 1.55 characters. | 23308. 3301 must be 1.55 characters. |  |
| ×222.322.23308..3301.040 | N301 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| $\times 2$. | N301 |  |  |  |  |  |  |  | 999 | R | \|K403 $=6$ : "Invalid Character in Data Element: | 2330., N301 must be populated $\begin{aligned} & \text { with } \\ & \text { accepeded } A N \text { characters. }\end{aligned}$ | 23308. . 301 must be populated with accepeded $A N$ characters. |  |
| X222.322.2330B.N301.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.322.23308.N302.020 | N302 | Other Payer Address Line | AN | 1.55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.N302 must contain at least one non- space character. | $2330 B . N 302$ must contain at least one non- space character. |  |
| х222.322.23308. .3020.030 | N302 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | ${ }^{23308 .}$. 302 must be 1.55 characters. | ${ }^{23308 .}$. 302 must be 1.55 characters. |  |
| ×222.322.23308...302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CsCC A7: <br> "Acknowledgement/Rejected for Invalid Information... application system" CSC 503: "Entity's Street address" CSC 286: Other payer's Explanation of Benefits/payment information EIC: PR "Payer" |  |  |  |
| ×222.322.23308...302.050 | N302 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { Kata3 = } 6 \text { " "Ivaid Character in Data } \\ & \text { Element: } \end{aligned}$ | accenter $A N$ n characceres. | 23308. N302 must be populated d with accented $A N$. characters. |  |
| x222.322.23308..N32.060 <br> Edit Deactivied |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.323.2330B.N4.010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X22.2.323.2330B.N4.020 } \\ \text { Edit Deacivived d } \end{array} \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222A1.021.23308.N4.010 | N4 | OTHER PAYER CITYYSTATEZIIP CODE |  | 1 | s | 233 |  |  | 999 | R | 1K304=5: "Segment Exceeds Maximum Use" | Only one iteration of 23308. Na is allowed. | Only one iteration of 23308. Na is allowed. |  |
| X222.323.23308. 1401.010 | N401 | Other Payer City Name | AN | 2.30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 23308.N401 must be present. | ${ }^{23300}$. N401 must be peresent. |  |
| х222.323.23308. . 400.1 .202 | N401 |  |  |  |  |  |  |  | 999 | R |  | ${ }^{2330 B . ~ N 401 ~ m u s t ~ c o n t a i n ~ a t ~ l e a s t ~ t w o ~ n o n-~}$ | I230B. N401 must contain at least two non- space characters. |  |
| X222.323.2330. ${ }^{\text {a } 401.030}$ | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 23308. . 4001 must be $2-30$ characters. | 2330B. . 4001 must be 2.30 characters. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. <br> max. | Usage <br> Req | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TAII } \\ \text { g990 } \\ 277 \mathrm{CA} \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part B } \end{gathered}$ | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\times 2.22 .323 .23308 . N 401.040$ | N401 |  |  |  |  |  |  |  | 277 | T | Cscc A7: <br> Accknowedgementrefecected for Invalic Information. CSC 512 : "Length ivalid for reeevers appication system" CSC 502" "Enitys city" CSC C86: Other payers Explanation or ${ }^{\text {Sichen PR PRyayert }}$ |  |  |  |
| х222.32.23308..4401.050 | N401 |  |  |  |  |  |  |  | 999 | R | KKa03 $=6$ : "Invalid Charactere in Data Element | acceponed AN characters. | accencen A401 must be poppulated with and |  |
| X222.323.2330B.N401.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.32.23330..N402.010 | N402 | $\begin{array}{\|c} \hline \text { Other Payer State or Province } \\ \text { Code } \\ \hline \end{array}$ | 10 | 2.2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $\left.\right\|_{\text {IT }} ^{1 \text { rez30B. N404 is not present, 2330B.N402 }}$ | $\left.\right\|_{\text {IT }} ^{1 \text { rez30B. N404 is not present, 2330B.N402 }}$ |  |
| х222.332.2330B. . 402.020 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 501: "Entity's State/Province" CSC 286. Other payer's Explanation of EIC: PR "Payer" | 23308. N402 must be a valid Stae Code. | 23308 . .N02 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| X222.323.23308..4403.010 | N403 | Other Payer Postal Code | 10 | 3.15 | s |  |  |  | 999 | R | IKK03 $=2:$ "Conditional Required Data Element Missing" |  | It 1230 BOB .N04 is is not present, 2330B. N403 must be eresent |  |
| x222.332.23308. .403.020 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 500: "Entity's Postal/Zip Code" CSC 286: Other payer's Explanation of EIC: PR "Payer" | 2330B. N 003 must be a valid Zip Code. | 23308. N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| х222.323.23308. м04.010 | N404 | Other Payer Countr Code | 10 | $2 \cdot 3$ | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.323.23308. N05.010 | N405 | Location Qualifier | ID | 1-2 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.332.23308. . 406.010 | N406 | Location Identifier | AN | ${ }^{1.30}$ | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.323.23308.N407.005 | N407 | Countr Subdivision Code | 10 | ${ }^{1-3}$ | s |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.323.2330B.N407.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.325.2330B.DTP. 010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.325.23308.DTP. 020 | отP | DATE - CLAIM CHECK OR REMITTANCE DATE |  | 1 | s | 23308 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.DTP is allowed. | Only one iteration of 2330B.DTP is allowed. |  |
| х222.325.23308.DTP. 030 | dTP |  |  |  |  |  |  |  | 999 | R | 1K304 = 2: "Unexpected Segment" | If 2330B.NM1 is present and 2430.DTP (with DTPO1 = "573" is not present, 2330B.DTP may be present. | If 2330B.NM1 is present and 2430.DTP with DTP01 $=$ " 573 " is not present 2330B.DTP may be present. |  |
| х222.325.23388.DTP01.010 | DTP01 | Date Time Qualifier | ID | ${ }^{3.3}$ | R |  |  | 573 | 999 | R | IK403 = 1: "Required Data Element Missing" | 23308.0TP01 must be present. | 23308.DTP01 must be present. |  |
| X222.355.23308.DTPP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 23308.DTP01 must be "573". | 23308.DTP01 must be "573". |  |
| X222.325.23308.DTP02.010 | DTP02 | Date Time Period Format Qualifier | 10 | ${ }^{2.3}$ | R |  |  | D8 | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 23308. DTP02 must be present. | 23338.DTP02 must be present. |  |
| X222.355.23308.DTPP2.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 23308.0 TPO2 must be "D8". | 23308. DTP02 must be "D8". |  |
| X222.325.23308.DTP93.010 | DтP03 | Adjucication or Payment Date | AN | ${ }^{1.35}$ | R |  |  | CCYYMMDD | 999 | R | 1 \|K003 $=8$ : "Invalid Date" | 2330B.DTP03 must a valid date in CCYYMMDD format. | 2330B.DTP03 must a valid date in CCYYMMDD format. |  |
| х222.325.23308.DTP03.020 | ${ }^{\text {dTP03 }}$ |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid Information. <br> CSC 510: "Future date" <br> CSC 516 "Adjudication or Payment Date" | ${ }^{23308.0 T P 03 ~ m u s t ~ n o t ~ b e ~ a ~ f u t u r e ~ d a t e . ~}$ | 23308.DTP03 must not be a tuture date. |  |
| X222.326.2330B.REF 010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.326.23308.REF.020 | REF | OTHER PAYER SECONDARY IDENTIFICATION |  | 2 | s | 23308 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2330B.REF with 2330B.REF01 = "2U", "EI", "FY" or "NF" are allowed | Only two iterations of 2330B.REF with 2330B.REF01 = "2U", "EI", "FY" or "NF" are allowed |  |
| х222.326.23308.REF01.010 | ReFor | Reference Identification Qualifer | 10 | ${ }^{2 \cdot 3}$ | R |  |  | 2U, EI, FY, NF | 999 | R | (kissin 1 "Required Data Element | 23308.REFF01 must be present. | 23308.REFF01 must be present. |  |
| X222.326.23308.REFF0.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|k403 =7: "Invalid Code Value" | $23308 . R$ EF01 must be valid values. | 23308.REF501 must be valid values. |  |

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| Edit Reference | Segment or Element | Description | 10 | Min <br> Max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | $\begin{gathered} \text { 5010A1 } \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { a999/ } \\ 277 c \mathrm{~A} \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptree } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.326.2330B.REF02.010 | REF02 | Other Payer Seconday Identifier | ${ }^{\text {an }}$ | ${ }^{1.50}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 23308.REFFO2 must be present. | 23308.REFFO2 must be peesent. |  |
| ×222.326.2330B.REF02.020 | ReFo2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." CSC 286. 'Entity's tax id payer's Explanation of EIC: PR "Payer" | If 2330B.REF01 = "EI", 2330B.REF02 must be 9 digits with no punctuation. <br> Cannot be zeros | If 2330B.REF01 = "El", 2330B.REF02 must be 9 digits with no punctuation. <br> Cannot be zeros |  |
| X222.326.2330B.REF02.030 | ReFor |  |  |  |  |  |  |  | 999 | E | IK003 = 5 : "Data Element Too Long" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must be must be $1-50$ characters. | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must be must be $1-50$ characters. |  |
| ×222.326.2330B.REF02.035 | ReFo2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid nformation CSC 512: "Length invalid for receiver's application system" CSC 128: "Entity's tax id CSC 286: Other payer's Explanation of EIC: PR "Payer" |  |  |  |
| X222.326.2330B.REFO2.040 | Refor |  |  |  |  |  |  |  | 999 | R | IK $403=6$ : "Invalid Character in Data Element" |  |  |  |
| X222.326.2330B.REF02.045 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.326.2330B.REFO2.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 $=6$ : "IIvalid Character in Data Element" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must contain at least one non- | If $2330 B . R E F 01=$ " 2 U ", "FY" or "NF", 2330B.REF02 must contain at least one non- |  |
| X222.326.2330B.REF03.010 | Refo3 | Descripion | AN | 1.80 | Nu |  |  |  | 999 | E | \|K403 = $110:$ : Implementation "Not | Must not be present. | Must not be present. |  |
| х222.326.23308.REFF04.010 | REFO4 | REFERENCE IDENTIFIER |  |  | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| $\begin{aligned} & \text { X222.328.2330B.REF. } 010 \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.328.2330.RE. ${ }^{\text {a }}$. 220 | REF | OTHER PAYER PRIOR AUTHORIZATION |  | 2 | s | ${ }^{23308}$ |  |  | 999 | R | $\left\lvert\, \begin{aligned} & 1 \text { K304 }=5 \text { " } \text { "egegment Exceeds } \\ & \text { Maximum Use" }\end{aligned}\right.$ | Only one iteration of 2330B.REF with REF01 = "G1" is allowed. | Only one iteration of 2330B.REF with REF01 = "G1" is allowed. |  |
| x222.328.23308.REFF01.010 | ReFor | Reference Identification Qualifier | 10 | 2.3 | R |  |  | 61 | 999 | R | (Kissing: 1 "Required Data Element | 23308.REF01 must be present. | $23308 . R$ EFF01 must be peesent. |  |
| х222.328.23300.REFF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ : ~ " I l v a l i d ~ C o d e ~ V a l u e " ~}$ | 23308. REF01 must be "G1". | 23308.REF01 must be "G1". |  |
| х222.328.2330B.REF02.010 | REFO2 | ${ }^{\text {Other Payer Prior Authorization }}$ Number | AN | ${ }^{1-50}$ | R |  |  |  | 999 | R | K $403=1$ : "Required Data Element Misssinq" | 23308.REF02 must be present. | 23308.REF02 must te present. |  |
| х222.328.23308.REFF02.020 | REFO2 |  |  |  |  |  |  |  | 999 | E | \|K403 =5: "Data Element Too Long" | 23388. REFO2 must be $1-50$ characters. | 23388. REFO2 must be $1-50$ characters. |  |
| ×222.328.2330B.REF02.025 | REF02 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 252: "Entity's <br> authorization/certification number" |  |  |  |
| X222.328.23300.REFF0.030 | REF02 |  |  |  |  |  |  |  | 999 | R |  | accepped $A N$ characters. and | acceneped $A \mathrm{AN} \mathrm{characters}$. 230) |  |
| X222.328.2330B.REF02.040 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.328.23300.REFF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R |  | 2330B.REF02 must contain at least one non- space character. | 2330B.REF02 must contain at least one nonspace character. |  |
| х222.328.23308.REF03.010 | Refo3 | Descripion | AN | 1.80 | nu |  |  |  | 999 | E | K $403=110: ~ " I m p l e m e n t a t i o n ~ " N o t ~$ Used" Element | Must not be present. | Must not be present. |  |
| x222.328.23308.REFF4.010 | REF04 | REFERENCE IIENTIFIER |  |  | NU |  |  |  | 999 | E | K4033 = $110:$ : "Implementation "Not Used" Element Presentr" | Must not be present. | Must not be present. |  |
| $\begin{aligned} & \text { X222.329.2330B.REF. } 010 \\ & \text { Edit Deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.329.23308.RE. 2020 | REF |  |  | 1 | s | ${ }^{23308}$ |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "9F" is allowed. | Only one iteration of 2330B.REF with REF01 = "9F" is allowed. |  |
| X222.329.23308.REFF0.010 | REF01 | Reference Identification Qualifier | 10 | 2.3 | R |  |  | 9 F | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | ${ }^{23308 . R E F F 01 ~ m u s t ~ b e ~ p r e s e n t . ~}$ | $23308 . R$ EFF01 must be present. |  |
| $\times 222.329 .23300$. REFF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 7: "Invalid Code Value" | 23308. REF01 must be "9F". | 2330B.REF01 must be "9F". |  |
| x222.329.23300.REF00.010 | REFO2 | Other Payer Referral Number | AN | 1-50 | R |  |  |  | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 23308.REFF2 must be present. | 23308.REFFO2 must be present. |  |
| X222.329.23308.REFF0.020 | REF02 |  |  |  |  |  |  |  | 999 | E | IK003 = 5: "Data Element Too Long" | 23308. REFO2 must be 1-50 characters. | 23338. REFO2 must be 1-50 characters. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. <br> Max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.329.23308.REFF02.025 | REFO2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's CSC 761 system EIC: PR "Payer" EIC: PR "Payer" |  |  |  |
| X222.329.23308.REFFO2.030 | REF02 |  |  |  |  |  |  |  | 999 | R | KK403 $=6$ : "Ivvaid Character in Data Element |  | ${ }^{2330 B . R E F O 2 \text { must be poppulated with }}$ |  |
| X222.329.2330B.REF02.040Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.329.23308.REFF02.050 | REFO2 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | $]_{\text {space character. }}^{2330 \text {. }}$. | $\left.\right\|_{\text {space character }} ^{2330 \text {. }}$. |  |
| X222.329.23308.REFF03.010 | REF03 | Descripion | AN | 1-80 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.329.23308.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | NU |  |  |  | 999 | E |  | Must not be present. | Must not te present. |  |
| X222.330.2330B.REF. 010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.330.23338.RE. ${ }^{\text {a }}$.20 | REF | OTHER PAYER CLAIM ADJUSTMENT INDICATOR |  | 1 | s | ${ }^{23308}$ |  |  | 999 | R | 1K304 $5:$ : "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "T4" is allowed. | Only one iteration of 2330B.REF with REF01 = "T4" is allowed. |  |
| X222.330.23308.REF01.010 | REF01 | Reference Identification Qualifier | 10 | $2 \cdot 3$ | R |  |  | T4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. | 23308.REF01 must be present. |  |
| X222.330.23308.REFF0.1.220 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{7}$ : "Invalid Code Value" | 23308. REF01 must be "T4". | 23308. REF01 must be "T4". |  |
| x222.330.23308.REFO2.010 | REFO2 |  | AN | ${ }^{1.50}$ | R |  |  |  | 999 | R |  | 23308.REFO2 must be present. | 2330.REFO2 must be present. |  |
| x222.330.23308.REFFO2.020 | REF02 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 23308.REFF22 must be "Y". | 23308.REFF22 must be "Y". |  |
| X222.330.23308.REF03.010 | ReFo3 | Descripion | AN | 1-80 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.330.23308.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | nv |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\begin{aligned} & \text { X222.331.2330B.REF. } 010 \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.331.23308.REF.020 | REF | OTHER PAYER CLAIM CONTROL NUMBER |  | 1 | s | 23308 |  |  | 999 | R | $\left\lvert\, \begin{aligned} & \text { \|1K304 }=5: \text { "Segment Exceeds } \\ & \text { Maximum Use" }\end{aligned}\right.$ | Only one iteration of 2330B.REF with REF01 = "F8" is allowed. |  |  |
| X222.331.23308.REFF0.010 | REFFO1 | Reference Identification Qualifier | 10 | 2.3 | R |  |  | F8 | 999 | R | (ka03 =1:"Required Data Element | 2330B.REF01 must be present. | 23308.REFF01 must be present. |  |
| x222.331.23308.REFF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 7 7: "Invalid Code Value" | 23300. REF01 must be "F8". | 2330.REFF01 must be "F8". |  |
| X222.331.23308.REFFO2.010 | REFO2 | $\underset{\substack{\text { Other Payer Claim Control } \\ \text { Number }}}{\text {. }}$ | AN | ${ }^{1.50}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | $23308 . R$ EFFO2 must be present. | 23308.REF02 must be present. |  |
| X222.331.23308.REFF2.020 | REFO2 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 23308.REFO2 must be 1 - 50 characters. | 23308.REFF2 must be 1 - 50 characters. |  |
| X222.331.23308.REFO2.025 |  |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information.." <br> CSC 512: "Length invalid for receiver's application system" CSC 464: "Payer Assigned Claim Control Number" CSC 286: Other payer's Explanation of Benefits/payment information Benefits/payment information |  |  |  |
| x222.331.23308.REFO2.030 | REFO2 |  |  |  |  |  |  |  | 999 | R | K4003 $=6$ : "Invalid Character in Data Element:" | $2330 B \cdot R E F 02$ must be populated with accepted AN characters. | 2330.REFO2 must be populated with acceneed AN characters. |  |
| $\begin{aligned} & \text { X222.331.2330B.REF02.040 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.331.23308.REFFO2.050 | ReFoz |  |  |  |  |  |  |  | 999 | R | KK003 $=6$ : "Invalid Character in Data <br> Element" | ${ }_{\text {space character. }}^{2330 \text {. }}$. | ${ }_{\text {Space character }}^{2330 \text {. }}$. |  |
| х222,.331.23308.REF03.010 | REFO3 | Descripion | ${ }^{\text {an }}$ | 1.80 | NU |  |  |  | 999 | E | (104033 10. "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.331.23308.REF04.010 | REFO4 | REFERENCE IDENTIFIER |  |  | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.332.2330C.. 010 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\underset{\substack{\text { min. } \\ \text { Max. }}}{\text { a }}$ | ( $\begin{gathered}\text { Usage } \\ \text { Req. }\end{gathered}$ | Loop | $\underset{\text { Repat }}{\substack{\text { Loop } \\ \text { Rep }}}$ | $\begin{aligned} & 5010 \mathrm{OA} 1 \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { Th11 } \\ \substack{9997 \\ 277 c a} \end{gathered}$ | ${ }_{\substack{\text { Acceptrej } \\ \text { ect }}}^{\text {at }}$ | Disposition / Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part B } \end{gathered}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.332.2330C.NM1.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.332.2330C.NM1.020 | NM1 | OTHER PAYER REFERRING PROVIDER |  | 1 | s | 2330 C |  |  | 277 | T | Cscc A7: <br> "Acknowledgement/Rejected for invalid Information..." CSC 732: "Information submitted inconsistent with billing CSC 562: " CSC 562: "Entity's National Provider Identifier (NPI)." EIC: DN "Referring Provider" | Segment must not be present. | Segment must not be present. | 0120: Companion Guide Note needed. |
| x222.334.2330C.REF.010 | REF | OTHER PAYER REFERRING PROVIDER SECONDARY IDENTIFIER |  | 3 | R | 2330 C |  |  | 277 | ${ }^{\top}$ | cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: DN "Referring Provider" | 2330 C . EEF must not be present. | 2330 C . EEF must not be present. | 01/20: Companion Guide Note needed. |
| X222.336.2330D.. 010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 2.22 .36 .23300$. MM1.010 | NM1 | other payer rendering PROVIDER |  | 1 | s | 23300 | 1 |  | 277 | ${ }^{\top}$ | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing <br> CSC 562: "Entity's National Provider Identifier (NPI)." EIC: 82 "Rendering Provider" | Segment must not be present. | Segment must not be present. | 0120: Companion Guide Note needed. |
| x222.338.2330.REF.010 | REF | OTHER PAYER RENDERING PROVIDER SECONDARY IDENTIFICATION |  | 3 | R | 23300 |  |  | 277 | ${ }^{\top}$ | cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." guidelines." <br> CSC 560: "Entity's Additional/Secondary Identifier." EIC: 82 "Rendering Provider" | 23300.REF must not be present. | 23300.REF must not be present. | 01/20: Companion Guide Note needed. |
| X222.340.2330E.. 010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.30.2333E.NM1.010 | NM1 | OTHER PAYER SERVICE facility Location |  | 1 | s | 2330 | 1 |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." <br> CSC 562: "Entity's National Provider Identifier (NPI)." EIC: 77 "Service Location" | Segment must not be present. | Segment must not be present. | 0120: Companion Guide Note needed. |


| Edit Reference | $\underset{\substack{\text { Segment or } \\ \text { Element }}}{\substack{\text { a }}}$ | Descripion | 10 | $\underset{\substack{\text { min. } \\ \text { Max. }}}{ }$ | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\underset{\substack{\text { Leop } \\ \text { Repat }}}{\text { Len }}$ | $\begin{gathered} 5010 A_{1} \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TAAI } \\ \text { g999/ } \\ 277 C A \end{gathered}$ | ${ }_{\text {Act }}^{\text {Acceptrej }}$ ect | Disposition / Error Code | Proposed 5010A1 Edits Part B | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.342.2330E.REF.010 | REF | OTHER PAYER SERVICE FACILITY LOCATION SECONDARY IDENTIFIER |  | 3 | R | 2330 |  |  | 277 | T | cscc A7: <br> Acknowledgement/Rejected for nvalid Information..." CSC 732: "Information submitted guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 77 "Service Location" | 2330E.REF must not be present. | 2330E.REF must not be present. | 01/20: Comparion Guide Note needed. |
| X222.343.2330F. 010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.343.2330F.NM1.010 | NM1 | $\underset{\substack{\text { OTHER PAYER SUPERVISING } \\ \text { PROVIDER }}}{ }$ |  | 1 | s | 2330 F | 1 |  | 277 | T | cscc a7: <br> Acknowledgementrejected for nvalid Information..." <br> CSC 732: "Information submitted inconsisten <br> csC 562: "Entity's National Provider Identifier (NPI)." EIC: DQ "Supervising Physician" | Segment must not be present. | Segment must not be present. | O120: Companion Guide Note needed. |
| x222.345.233F.REF. 010 | REF | OTHER PAYER SUPERVISING PROVIDER SECONDARY IDENTIFICATION |  | 3 | R | 2330 F |  |  | 277 | T | cscc A7: <br> Acknowiedgement/Rejected for fivalid Information... guidelines. <br> CSC 560: "Entity's Additional/Secondary Identifier." EIC: DQ "Supervising Physician" | 2330F.REF must not be present. | 2330F.REF must not be present. | O1/20: Companion Guide Note needed. |
| X222.347.2330G. 010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.347 .2330 \mathrm{G} . \mathrm{Mm} 1.010$ | NM1 | OTHER PAYER BILLING PROVIDER |  | 1 | s | 23306 | 1 |  | 277 | T | cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." SC 732: "Information submitted guidelines." CSC 562: "Entity's National Provider Identifier (NPI)." EIC: 85 "Billing Provider" | Segment must not be present. | Segment must not be present. | O120: Companion Guide Note needed. |
| x222.399.2330G.REF.010 | REF | OTHER PAYER BILLING PROVIDER SECONDARY IDENTIFICATION |  | 2 | R | 23306 |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for nvalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: 85 "Billing Provider" | 2330G.REF must not be present. | 2330G. REF must not be present. | O120: Comparion Guide Note needed. |
| х222.350.2400.Line Loop.010 | Line Loop | Service Line Loop |  |  |  | 2400 | 50 |  | 999 | R | $\left.\right\|^{113304=4: 4 \text { "Loop Occurs over }} \begin{aligned} & \text { Maximum Times. }\end{aligned}$ | Only fifty iterations of the 2400 loop are allowed. | Only fifty iterations of the 2400 loop are allowed. |  |
| X222,350.2400.1. $\mathbf{4}$.010 | Lx | SERVICE LINE |  | 1 | R | 2400 |  |  | ${ }^{999}$ | R | IK304 = 3: "Required Segment | 2400.1 LX must te present. | 2400.1 LX must te present. |  |
| X222.350.2400.11.020 | Lx |  |  |  |  |  |  |  | ${ }^{999}$ | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2400.Lx is allowed. | Only one iteration of 2400.Lx is allowed. |  |
| $\times \times 22.350 .2400 .1 \times 01.010$ | Lx01 | Assigned Number | No | 1-6 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | $2400.1 \times 01$ must be pesest. | $2400.1 \times 01$ must be pesent. |  |
| X222, 350.2400.1. $\times 1.020$ | Lx01 |  |  |  |  |  |  |  | 999 | R |  | $2400.1 \times 01$ must be numeric. | $2400.1 \times 01$ must be numeric. |  |
| X222.350.2400.1401.030 | Lx01 |  |  |  |  |  |  |  | 999 | R |  | 2400.1 Lx01 must be must be > 0 and $<=50$. | 2400.1 K01 must be must be $>0$ and $<=50$. |  |
| X222.350.2400.1401.040 | Lx01 |  |  |  |  |  |  |  | 999 | R |  | The first 2400.1 LX01 must be "1". | The first 2400.1 LX01 must be "1". |  |
| X222.350.2400.1.101.050 | Lx01 |  |  |  |  |  |  |  | 999 | R |  | Subsequent 2 240.LXO1 values must | Subsequent 2 240.LXOO1 values must |  |
| x222.351.2400.sv1.010 | sv1 | Professional service |  | 1 | R | 2400 |  |  | 999 | R | $\left.\right\|_{\text {Missing: }} ^{1 \times 204=3: \text { Required Segment }}$ | 2400.5 Sv 1 must be present. | 2400.5 Sv 1 must be present. |  |
| x222.351.2400.Sv1.020 | sv1 |  |  |  |  |  |  |  | 999 | R |  | Only one iteration of 2400.5 Sv 1 is allowed. | Only one iteration of 240 .SV1 is allowed. |  |

$\stackrel{837-}{8 \text { - }}$

| Edit Reference | Segment or Element | Description | 10 | min. Max. | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TA11 } \\ \substack{9991 \\ 277 C A} \end{gathered}$ | Acceptrej | Disposition / Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part } \mathrm{B} \end{gathered}$ | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{aligned} & \text { X222.31.2.200.SV101.010 } \\ & \text { Edit Deacivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.351.2400.Sv101-1.010 | sV101-1 | Product or Senice it Qualifer | 10 | 2-2 | R |  |  | ER, HC, IV, WK | 999 | R |  | 2400.SV101-1 must be present. | 2400.SV101-1 must be present. |  |
| x222.351.2400.Sv101-1.020 | sV101-1 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Invaid Code Value" | $2400 . \mathrm{Sv} 101-1$ must be "HC". | 2400. SV101-1 must be "HC". |  |
| x222.351.2400.Sv101-2.010 | sv101-2 | Procedure Code | AN | ${ }^{1-48}$ | R |  |  |  | ${ }^{999}$ | R | 1K033 = 1: "Required Data Element | 2400.SV101-2 must be present. | 2400.SV101-2 must be present. |  |
| x222.351.2400.Sv101-2.020 | Sv101-2 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information. CSC 507: "HCPCS" | When 2400.SV101-1 = "HC", 2400. SV101-2 must be avalid HCPCS Code on the date in 2400.DTP03 when DTPO1 $=$ "472". | When $2400 . \mathrm{SV} 101-1=$ "HC", $2400 . \mathrm{SV} 101-2$ must be a valid HCPCS Code on the date in 2400. DTP03 when DTP01 $=$ " 472 ". | Valid CMS Proprietary HCPCS reference must be available for this edit. |
| ×222.351.2400.Sv101-2.030 | sv101-2 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> "Acknowledgement/Rejected for Invalid Information..." CSC 507: "HCPCS" | When 2400.SV101-1 = "HC", 2400.SV101-2 must be a valid HCPCS Code on the date in 400.DTP03 when DTP01 $=$ " 472 ". OR When 2400. SV101-1 = "HC", 2400.SV101-2 must be a 5 character alphanumeric value. |  | 12/16: Fallback edits: used only if primary edit above is determined to be unworkable. Review this before finalizing. <br> Valid HCPCS reference must be available for this edit (full external code list). |
| ×222.351.2400.Sv101-3.010 | sv101-3 | Procedur Modifier | an | 2.2 | s |  |  |  | 277 | c | Cscc A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" <br> red" | 2400.SV101-3 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472" | 2400.SV101-3 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". | Valid CMS Proprietary Procedure Code Modifier to Procedure Code reference must be available for this edit |
| x222.351.2400.Sv101-3.020 | sv101-3 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> AcknowledgementRRejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV101-3 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472" | 2400.SV101-3 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". | 12/16: Fallback edits:used only if primary edit above is determined to be unworkable. Review this before finalizing. <br> Valid Procedure Code Modifier reference must be available for this edit (full external code list). |
| ×222.351.2400.Sv101-3.030 | sv101-3 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information... CSC 544: "Clinical Laboratory mpovement Amendment |  | If 2400. Sv $101-3=$ " 90 " 2400. REF with REF01 = "F4" must be present |  |
| ×222.351.2400.Sv101-4.010 | sv101-4 | Procedur Modifier | an | 2-2 | s |  |  |  | 999 | R | IK $403=2$ : "Conditional Required Data Element Missing" | It 2 2400.SV101-4 is present, 2400. Sv101-3 must be pesesent. | It 2 200. Sv101-4 is present, 2400. Sv101-3 must be present. | Valid CMS Proprietary Procedure Code Modlfier to Procedure Code reference must be available for this edit. |
| x222.351.2400.sv101-4.020 | sv101-4 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information... CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" Rendered" | 2400.SV101-4 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". | 2400.SV101-4 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 $=$ " 472 ". |  |
| ×222.351.2400.Sv101-4.030 | sv101-4 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid Information... CSC 544: "Clinical Laboratory improvement Amendment" |  | If 2400. SV101-4 = "90" 2400.REF with REF01 = "F4" must be present. |  |
| x222.351.2400.SV101-5.010 | sv101-5 | Procedur Modifier | AN | 2-2 | s |  |  |  | ${ }^{999}$ | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | $\left\lvert\, \begin{aligned} & \text { It 2400.Sv101-5is present, } 2400 . \text { Sv101-4 } \\ & \text { must be pesent. } \end{aligned}\right.$ | $\begin{aligned} & \text { It 2400.5V101-5 is present, 2400.Sv101-4 } \\ & \text { must be present. } \end{aligned}$ | Valid CMS Proprietary Procedure Code Modlfier to Procedure Code reference must be available for this edit. |
| x222.351.2400.Sv101-5.020 | sv101-5 |  |  |  |  |  |  |  | 277 | c | Cscc A7: Acknowledgement/Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" Rendered" | 2400.SV101-5 must be valid procedure modifier on the date in 2400.DTP03 whe DTP01 = "472" | 2400.SV101-5 must be valid procedure modifier on the date in 2400.DTP03 whe DTP01 $=$ " 472 " |  |
| ×222.351.2400.Sv101-5.030 | Sv101-5 |  |  |  |  |  |  |  | 277 | c |  |  | If 2400.SV101-5 $=$ " 90 " 2400. REF with REF01 = "F4" must be present. |  |
| x222.351.2400.SV101-6.010 | sv101-6 | Procedur Modifier | AN | 2-2 | s |  |  |  | 999 | R | $\begin{array}{\|l\|} \hline \text { K403 }=2 . \text { "Conditional Required Data } \\ \text { Element Missing" } \end{array}$ | $\begin{aligned} & \text { It } 2400 . \text { Svi01-6 is present, } 2400.5 v 101-5 \\ & \text { must t p present. } \end{aligned}$ | $\begin{aligned} & \text { \|t 240..SV101-6 is present, 2400.SV101-5 } \\ & \text { must te present. } \end{aligned}$ | Valid CMS Proprietary Procedure Code Modifier to <br> Procedure Code reference must be available for <br> this edit. |
| ×222.351.2400.Sv101-6.020 | sv101-6 |  |  |  |  |  |  |  | 277 | c | $\operatorname{cscc}$ A7: <br> "Acknowledgement/Rejected for Invalid <br> nformation... <br> CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV101-6 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". | 2400.SV101-6 must be valid procedure modifier on the date in 2400 .DTP03 when DTP01 = "472". |  |
| ×222.351.2400.Sv101-6.030 | Sv101-6 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." CSC 544: "Clinical Laboratory improvement Amendment" |  | If 2400. SV101- $6=$ "90" 2400. REF with REF01 = "F4" must be present |  |
| x222.351.2400.SV101-7.010 | Sv101-7 | Descripion | an | 1.80 | s |  |  |  | 999 | R | $\begin{aligned} & \left\|\begin{array}{l} \text { K } 403=6: ~ \\ \text { Element" } \end{array}\right\|=1 \text { Ivalid Character in Data } \end{aligned}$ | 2400.SV101-7 must contain at least one nonspace character. | 2400.SV101-7 must contain at least one nonspace character | Valid CMS Proprietary table of Procedure Codes that r edit. |
| ×222.351.2400.Sv101-7.020 | sv101-7 |  |  |  |  |  |  |  | 277 | c |  | 2400.SV101-7 must be present. when $2400 . \mathrm{SV} 101-2$ is present on the table of procedure codes that require a description. | 2400.SV101-7 must be present. when 2400.SV101-2 is associated with a proc option of "JK. |  |
| x222.351.2400.Sv101-7.030 | sv101-7 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400. Sv101-7 must be 1-80 characters. | 2400. Sv101-7 must be 1-80 characters. |  |


| Edit Reference | Segment or Element | Description | 10 | min. <br> Max. | Usage Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \substack{999 \\ 277 \mathrm{CA}} \end{gathered}$ | $\begin{array}{\|c} \text { Acceptrei } \\ \text { ect } \end{array}$ | Disposition / Error Code |  | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.351.2400.Sv101-7.040 | sv101-7 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement/Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 306 Detailed description of |  |  |  |
| $\times \times 222.351 .2400 .5 v 101-7.050$ | Sv101-7 |  |  |  |  |  |  |  | 999 | R | KLE03 6: "Invalid Character in Data Element" | 240. Svi01-7 must be populated with accented A A chacacters. | 200.SV101.7 must be populated with accented $A \mathrm{~N}$ characters. |  |
| X222.351.2400.SV101-7.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.351.2400.SV101-8.010 | SV101-8 | Productserice ID | an | ${ }^{1-48}$ | NU |  |  |  | 999 | R | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.351.2400.SV102.010 | sv102 | Line tem Charge Amount | R | ${ }^{1-18}$ | R |  |  |  | 999 | R |  | 2400. Sv102 must be present. | 2400. Sv102 must be present. |  |
| X222.351.2400.Sv102.020 | sv102 |  |  |  |  |  |  |  | 999 | R |  | 2400. SV102 must be numeric. | 2400. Sv102 must be numeric. | 11/25: Medicare specific limitation. 1/20: Companion Guide Note needed. |
| x222.351.2400.Sv102.025 | sv102 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | $2400 . \mathrm{Sv} 102$ must be e $=99.999 .99$. | 2400. Sv102 must be $<=99.999 .99$. |  |
| $\times 222.351 .2400 .5 v 102.030$ | sv102 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 583: "Line Item Charge Amount" |  |  |  |
| $\times 222.351 .2400 .5 v 102.040$ | sv102 |  |  |  |  |  |  |  | 277 | T | Cscc A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> than or equal "Amount must be greater to zero" <br> CSC 583: "Line Item Charge Amount" | 2400. Sv102 must be $>=0$ | 2400. Sv102 must be >= 0 |  |
| $\times 222.351 .2400 .51102 .050$ | sv102 |  |  |  |  |  |  |  | 277 | T | $\operatorname{cscc}$ A7: <br> Acknowledgement/Rejected for Invalid <br> nformation <br> CSC 697: "Invalid Decimal Precision" <br> CSC 583: "Line Item Charge Amoun | 2400.SV102 is limited to 0,1 or 2 decimal positions. | 2400. Sv102 is limited to 0,1 or 2 decimal |  |
| $\times 222.351 .2400 .5 v 102.060$ | sv102 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 400: "Claim is out of balance: CSC 583:"Line Item Charge Amount" CSC 643: "Service Line Paid Amount" | SV102 must = the sum of all payer amounts paid found in 2430 SVD02 and the sum of all ine adjustments found in 2430 CAS Adjustment Amounts | SV102 must = the sum of all payer amounts paid found in 2430 SVD02 and the sum of all line adjustments found in 2430 CAS Adjustment Amounts. |  |
| x222.351.2400.SV103.010 | sv103 | $\begin{aligned} & \hline \text { Unit or Basis for Measurement code } \\ & \hline \end{aligned}$ | 10 | 2.2 | R |  |  | mJ, Un | 999 | R |  | $2400 . \mathrm{Sv103}$ must be pesent. | 2400. sv103 must be present. |  |
| $\times 222.351 .2400 .5 v 103.020$ | sv103 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information... <br> CSC 732: "Information submitted inconsistent with billing guidelines." CSC 659: "Unit or Basis for <br> Measurement Code | 2400.SV103 must be "MJ" when SV101-3, SV101-4, SV101-5, or SV101-6 is an anesthesia modifier (AA, AD, QK, QS, QX, QY or QZ). Otherwise, must be "UN". | 2400.51103 must be "UN". | Valid CMS Proprietary table of Anesthesia Modifiers must be available for this edit. |
| x222.351.2400.5v104.010 | sv104 | Serice Unit Count | R | ${ }^{1-15}$ | R |  |  |  | 999 | R |  | $2400 . S V 104$ must te present. | $2400 . \mathrm{Sv} 104$ must be present. |  |
| x222.351.2400.Sv104.020 | sv104 |  |  |  |  |  |  |  | 999 | R |  | $2400 . \mathrm{SV} 104$ must be numeric. | 2400. SV104 must be numeric. |  |
| $\begin{aligned} & \times 222.351 .240 .5 \mathrm{~Sv} 104.025 \\ & \text { Editideactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.351.2400.SV104.030Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \times 222.351 .240 .5 \mathrm{~Sv} 104.035 \\ & \text { Editioneativated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.351.2400.SV104.040 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.351.2400.Sv104.045 | sv104 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2400.sV104 must be > 0 and < $=9999.9$ | 2400. SV104 must be > 0 and < = 9999.9 |  |
| $\times 222.351 .2400 .5 v 104.050$ | sv104 |  |  |  |  |  |  |  | 277 | T |  | If $2400 . \mathrm{SV} 103=$ "UN", $2400 . \mathrm{SV} 104$ must be $>0$ and $<=9,999.9$. | If 2400.SV103 = "UN", 2400. SV104 must be $>0$ and $<=9,999.9$. | 12/16: Medicare specific limitation. Companion Guide Note needed. |
| x222.351.2400.SV104.055 | sv104 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2400. Svi04 must be > 0 and < = 9999 | 2400. Sv104 must be > 0 and < $=9999.9$ |  |


| Edit Reference | Segment or Element | Descripion | 10 | $\min _{\text {max. }}$ | Usage <br> Req. | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part B } \end{gathered}$ | Proposed 5010A1 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.351.2400.Sv104.060 | sv104 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ |  | If 2400. SV103 $=$ "MJ", 2400. SV104 must be $>0$ and $<=9,999$. |  | 12/16: Medicare specific limitation. Companion Guide Note needed. |
| x222.351.2400.Sv104.070 | sv104 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for elational field in error CSC 476: "Missing or invalid units of service" <br> CSC 454: Procedure code for services rendered. |  | When 2400.SV101-2 is associated with a proc option of "DR" or "PP", 2400.SV104 must be $=$ " 1 " or " 2 " |  |
| x222.351.2400.Sv104.080 | sv104 |  |  |  |  |  |  |  | 277 | c |  |  | When 2400.sv101-2 is associated with a proc option of "DR" or "PP" and 2400.SV104 $=" 2 "$, one of 2400. SV101-3, SV101-4 sV101-5 or SV101-6 must = "RT" and one must ="LT" must = "LT |  |
| x222.351.2400.Sv105.010 | sv105 | Place of Serice Code | an | 1-2 | s |  |  |  | 277 | c | CSCC A7: <br> AckowedgementrRejected for Invalid <br> Intormation <br> CSC 249: "Place of service" | 2400.SV105 must be a valid Place of Service Code on the date in BHTO4. | 2400. sv105 must be a valid Place of Service Code on the date in GSO4. | Valid Place of Service reference must be available for this edit. <br> OR <br> Valid CMS Proprietary Place of Service Code to Procedure Code reference must be available for this edit. |
| X222.351.2400.Sv106.010 | sv106 | Serice Type Code | 10 | 1-2 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.351.2400.SV107.010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.351.2400.SV107-1.010 | sv107-1 | Diagosis Code Pointer | No | 1-2 | R |  |  |  | 999 | R | $\left.\right\|_{\text {K403 }=1: \text { :"Required Data Element }}$ Missing" | 2400.Sv107-1 must be present. | 2400.Sv107-1 must be present. |  |
| X222.351.2400.SV107-1.020Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.351.2400.SV107-1.030 | sv107-1 |  |  |  |  |  |  |  | 277 | T |  | 2400. Sv107-1 must be > $>1$ and $\ll 12$. | 2400. SV107-1 must be $>=1$ and $\ll 12$. |  |
| x222.351.2400.SV107-1.040 | sv107-1 |  |  |  |  |  |  |  | 277 | c | cscc A7: <br> Acknowedgementrejected for Invalid nformation. CSC 477: "Diagnosis code pointer is missing or invalid" |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.351.2400.SV107-2.020 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.351.2400.SV107-2.030 | sv107-2 | Diagnosis Code Pointer | No | 1-2 | s |  |  |  | 277 | T | "AccknowledgementRejected for Invalid Information... <br> CSC 477: "Diagnosis code pointer is <br> missing or invalid" | 2400. Sv107-2 must be $>=1$ and $<=12$. | 2400. Sv107-2 must be $>=1$ and $\ll 12$. |  |
| x222.351.2400.SV107-2.040 | sv107-2 |  |  |  |  |  |  |  | 277 | c | Cscc A7: Acknowledgementrejected for Invalid Antormaion niss 477. "Diagnosis code pointer is missing or invalid" | There must be a corresponding diagnosis "BK" for the pointer value entered Example 1: if $2400 . \mathrm{SV} 107-1=3$, when 2300. HI01-1 with "BK" or "ABK", 2300. HIO3Example 2 : if 2400 SV $2300 . \mathrm{HIO1-1}$ with "BK" or "ABK", 2300.H1052 must be poplulated. |  |  |
| X2222.351.2400.Sv107-3.010 | sv107-3 | Diagnosis Code Pointer | No | ${ }^{1-2}$ | s |  |  |  | 999 | R |  | ${ }_{2 \text { is }}^{2 \text { is resent. }}$. | SV107-3 can only be presentif 2400. SV107- 2 is present. |  |
| X222.351.2400.sv107-3.020Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

${ }_{\text {rofessional Edits }}^{837}$

| Edit Reference | Segment or Element | Description | ID | $\begin{gathered} \text { min. } \\ \text { Max. } \end{gathered}$ | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TAAI } \\ \text { a999/ } \\ 277 C A \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Acceptree } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010A1 Edits Part B | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ×222.351.2400.sv107-.030 | sv107-3 |  |  |  |  |  |  |  | 277 | T |  <br> CSC 477: "Diagn | 2200. Sv107-3 must be $\gg 1$ and $<=12$. | 2400. Sv107-3 must be $>=1$ and $<=12$. |  |
| ×222.351.2400.Sv107-3.040 | SV107-3 |  |  |  |  |  |  |  | 277 | c | $\operatorname{cscc}$ A7: <br> AcknowledgementRRejected for Invalid fiformation... CSC 477: "Diagnosis code pointer is missing or invalid |  |  |  |
| x222.351.2400.SV107-4.010 | sv107-4 | Diagnosis Code Pointer | No | 1-2 | s |  |  |  | 999 | R | IK403 =2:" Conditional Required Data Element Misinga' | SV107-4 can only be present if 2400 .SV107. 3 is oresent. | SV107-4 can only be present if 2400. SV107- 3 |  |
| X222.351.2400.SV107-4.020 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.351.2400.sv107-4.030 | sv107-4 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> CSC 477: "Diagnosis code pointer is <br> missing or invalid" | 2200. Sv107-4 must be $\gg 1$ and $<=12$. | 2400. Sv107-4 must be $>=1$ and $<=12$. |  |
| ×222.351.2400.sv107-4.040 | sv107-4 |  |  |  |  |  |  |  | 277 | c | $\operatorname{cscc}$ A7: <br> AcknowledgementRRejected for Invalid nformation... CSC 477: "Diagnosis code pointer is missing or invalid | There must be a corresponding diagnosis code in 2300. HI where HIO1-1 is "ABK" or Example 1: if $2400 . \mathrm{SV} 107-1=3$, when 2300.HI01-1 with "BK" or "ABK", 2300.H1032 must be poplulated. Example 2: if $2400 . S V 107-1=5$, when $2300 . \mathrm{HIO1-1}$ with "BK" or "ABK", 2300.HIO52 must be poplulated. |  |  |
| x222.351.2400.Sv108.010 | sv108 | Monetay Amount | R | ${ }^{1-18}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not te present. | Must not be present. |  |
| X222.351.2400.SV109.010 | Sv109 | Emergency Indicator | ID | 1-1 | s |  |  | Y | 999 | R | \|k403 7: "Ilvaid Code Value" | 2400. SV109 must be "Y"', | 2400. Vv109 must be "Y"', |  |
| X222.351.2400.Sv110.010 | sv110 | Multiple Procedure Code | 10 | 1-2 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.351.2400.SV111.010 | SV111 | EPSDT Indicator | ID | 1-1 | s |  |  | Y | 999 | R | \|K403 =7: "Invaid Code Value" | 2400. SV111 must be "Y". | 2400. Sv111 must be "Y"'. |  |
| X222.351.2400.SV112.010 | SV112 | Family Planning Indicator | ID | 1-1 | s |  |  | Y | 999 | R | \|14003 $=7$ : "llvaid Code Value" | 2400.Sv112 must be "Y". | 2400. SV112 must be "Y"', |  |
| X222.351.2400.Sv113.010 | sV113 | Review Code | 10 | 1-2 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.351.2400.SV114.010 | SV114 | National or Local Assigned Review Value | AN | 1-2 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.351.2400.SV115.010 | sV115 | Co.pay Staus Code | ID | ${ }^{1-1}$ | s |  |  | 0 | 999 | R | \|K403 =7: "Invalid Code Value" | 2400. SV115 must be 0 "o. | 2400. SV115 must be "0". |  |
| X222.351.2400.Sv116.010 | sv116 | Health Care Professional Shortage Area Code | 10 | 1-1 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.351.2400.Sv117.010 | SV117 | Reference Identificaion | AN | 1.50 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.35.2.200.SV118.010 | sV118 | Postal Code | $1{ }^{\text {I }}$ | 3.15 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.351.2400.SV119.010 | sv119 | Monetay Amount | R | ${ }^{1-18}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.351.2400.SV120.010 | sv120 | Level of Care Code | 10 | 1-1 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.351.2400.SV121.010 | sv121 | Provider Agreement Code | 10 | ${ }^{1-1}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.359.2400.Sv5.010 | sv5 | $\begin{aligned} & \text { DUUABLLE MEDICAL } \\ & \text { EQUPMENT SERVICE } \\ & \hline \end{aligned}$ |  | 1 | s | 2400 |  |  | ${ }^{999}$ | R | mplementatio $\qquad$ Dependen Present" | 2400.5 Sv must not be present. |  |  |
| ×222.359.2400.Sv5.020 | sv5 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" |  | One iteration of 2 200..SV5 is allowed when 2400.Sv101-3, SVIT1.4, sV101-5, or SV101-6 $=$ "RR", "NU", or "UE." |  |
| X222.359.240..SV501.010Edit Deaciviated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.359.2400.Sv501-1.010 | sv501-1 | Procedure Identifier | 10 | 2.2 | R |  |  | нс | 999 | R | IK403 = 1: "Required Data Element Missing" |  | $2400.5 \mathrm{Sv01-1}$ must be present. |  |
| X222.359.2400.SV501-1.020 | sv501-1 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" |  | 2400.SV501-1 must be "HC". |  |
| x222.359.2400.Sv501-2.010 | Sv501-2 | Procedure Code | AN | 1.48 | R |  |  |  | 999 | R | 1K003 = $12:$ :IImplementaion Patem Match Falure" |  | 2400.SV501-2 must $=2400.5 \mathrm{Sv101-2}$. |  |
| $\times \times 22.359 .2400 .5 \mathrm{~V} 501-3.010$ | Sv50-3 | Procedure Modifier | AN | 2.2 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| x222.359.2400.Sv501-4.010 | sv501-4 | Procedur Modifier | AN | 2.2 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.359.2400.SV501-5.010 | sv501-5 | Procedure Modifier | AN | 2.2 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.359.2400.Sv501-6.010 | sv501-6 | Procedure Modifier | AN | 2-2 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.359.2400.Sv501-7.010 | sv501-7 | Dessipion | AN | 1.80 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.359.2400.SV501-8.010 | Sv501-8 | Producuserice ID | AN | 1.48 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.359.2400.Sv502.010 | sv502 | Unitor Basis for Measurement Code | 10 | 2-2 | R |  |  | DA | 999 | R | Missing:" Required Dalate Element |  | 2400. SV502 must be present. |  |

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| Edit Reference | Segment or Element | Description | 10 | Min. Max. | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TA11 } \\ \text { cog } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part } \mathrm{B} \end{gathered}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.359.240.SV550.020 | Sv502 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ :"Invalid Code Value" |  | 2400.5 S 502 must be "DA". |  |
| X222.359.2400.SV503.010 | sv503 | Length of Meicical Necessity | R | ${ }^{1-15}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" |  | 2400. V5503 must be present. |  |
| X222.359.2400.SV503.020 | sv503 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  | 2400.5 V 503 must be numeric. |  |
| X222.359.2400.Sv503.025 | Sv503 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" |  | $2400.5 \mathrm{Sv503}$ must be > 0 and < $=999$ | 03/31: Medicare specific limitation. Companion Guide Note needed. |
| X222.359.2400.SV503.030 | Sv503 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 260 "Length of medical necessity, |  |  |  |
| x222.359.200.5v503.040edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.359.2400.Sv504.010 | Sv504 | DME Rental Price | R | ${ }^{1-18}$ | R |  |  |  | 999 | R |  |  | 2400. SV504 must be present. |  |
| X222.359.2400.SV504.020 | Sv504 |  |  |  |  |  |  |  | 999 | R | (HLem=en:"IIvalid Character in Data |  | 2400. SV504 must be numeric. |  |
| X222.359.2400.SV554.030 | sv504 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 185: "Invalid Decimal Precision" medical. Rental price for durable medical equipment" |  | 200.SV504 is linited to 0,1 or 2 decimal positions. |  |
| X222.359.240..Sv504.035 | Sv504 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" |  | 2400.SV504 must be $>=0$ and $<=999999.99$. | 11/25: Medicare specific limitation. |
| X222.359.2400.SV554.040 | sv504 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 185: "Rental price for durable medical equinment" |  |  |  |
| X222.359.2400.SV504.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.359.240. Sv505.010 | sv505 | DME Purchase Price | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" |  | 2400. Sv505 must be present. |  |
| X222.359.2400.SV505.020 | sv505 |  |  |  |  |  |  |  | 999 | R |  |  | 244.5 Sv 505 must be numeric. |  |
| X222.359.2400.SV505. .30 | sv505 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | cscc A7: <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 184: "Puald Decimal Precision" rented Purchase price for the rented durable medical equipment" |  | 2400. Sv505 is limited to 0,1 or 2 decimal positions. |  |
| X222.359.2400.SV505. .35 | sv505 |  |  |  |  |  |  |  | 999 | E | 1 14003 $=5$ " "Data Element Too Long" |  | 2400.SV505 must be $>=0$ and $<=999999.99$. | 11/25: Medicare specific ilinitaion. 01/20: Companion Guide Note needed. |
| X222.359.2400.SV505.040 | sv505 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 184: "Purchase price for the rented durable medical equinment" |  |  |  |
| x222.359.2400.SV505.050Edit Deacivited |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.359.240. Sv506.010 | sv506 | Rental Unit Price Indicator | 10 | 1-1 | R |  |  | 1,4,6 | 999 | R | IK403 = 1: "Required Data Element Missing" |  | 2400. Sv506 must be present. |  |
| X222.359.2400.SV506.020 | SV506 |  |  |  |  |  |  |  | 999 | R | \|K403 7 7: "Invalid Code Value" |  | $2400.5 V 506$ must be valid values. |  |
| X222.359.2400.SV507.010 | sv507 | Prognosis Code | 10 | 1-1 | NU |  |  |  | 999 | E | (K403 $=10$ " "Implementation "Not | Must not te present. | Must not be present. |  |
| X222.362.2400.PWK.010 | PWK | $\begin{aligned} & \text { LINE SUPPLEMENTAL } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  | 10 | s | 2400 |  |  | 999 | R |  | Only ten iterations of 2400.PWK are allowed. | Only ten iterations of 2400.PWK are allowed. |  |

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| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { Min. } \\ \hline \end{gathered}$ Max. | $\begin{array}{\|c\|c} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> Values |  | $\left\lvert\, \begin{gathered} \text { Acceptriej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.362.2400.PwK01.010 | PWK01 | Attachment Report Type Code | 10 | 2.2 | R |  |  |  | 999 | R | \|K403 = 1 : "Required Data Element Missing" | $2400 . \mathrm{Pw}$ K01 must be present. | 2400. PwK01 must be present. |  |
| X222.362.2400.PWK01.020 | PWK01 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2400. PWK01 must be valid values. | $2400 . P W K 01$ must be valid values. |  |
| X222.362.2400.PWK02.010 | PWK02 | Atachment Transmission Code | ID | 1-2 | R |  |  | ${ }^{\text {AA, BM, EL, EM, FT, }}$ FX, | 999 | R | IK403 = 1: "Required Data Element | $2400 . \mathrm{PW}$ K02 must be present. | 2400. PwK02 must be present. |  |
| X222.362.2400.PWK02.020 | PWK02 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Invalid Code Value" | $2400 . \mathrm{PWK02} \mathrm{must} \mathrm{be} \mathrm{vaid} \mathrm{values}$. | $2400 . P W K 02$ must be valid values. |  |
| X222.362.240.PWK03.010 | Pwко3 | Report Copies Needed | No | 1-2 | nu |  |  |  | 999 | E | IK403 = 110. "mplementation "Not | Must not be present. | Must not be present. |  |
| X222.362.240.PWK04.010 | PWK04 | Enity Identifer Code | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | $1 \mathrm{~K} 403=10$, "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| X222.362.2400.PWK00.010 | PWK05 | Identification Code Qualifier | 10 | 1-2 | s |  |  | AC | 999 | R | $\begin{aligned} & \text { IK403 }=2 \text { : "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ |  |  |  |
| X222.362.240.PWK05.020 | PWK05 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7. "Ivalid Code Value" | $2400 . \mathrm{PWK05}$ must be "AC". | 2400. PWK05 must be "AC". |  |
| X222.362.240.PwK06.010 | PWK06 | Identification Code | an | 2.80 | s |  |  |  | 999 | R | $\begin{array}{\|l\|l\|} \hline \text { K003 }=2: \text { : "Conditional Required Data } \\ \text { Element Missing" } \end{array}$ |  | When 2400.PWK06 is present, $2400 . \mathrm{PWK02}$ must be "BM", "EL", "EM", "FX" "FT" |  |
| X222.362.2400.PwK06.020 | PwK06 |  |  |  |  |  |  |  | 999 | R | KK03 =6:" "Nvalid Character in Data | 2400.PWK06 must contain at least two non- space characters. | space spararacteres. |  |
| X222.362.2400.PWK00.030 | PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2400.PWK06 must be 2-50 characters. | 2400 PWWK06 must be 2-50 characters. |  |
| X222.362.2400.PwK06.040 | PWK06 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: Acknowledge Information..." <br> CSC 512: "Length invalid for receiver's CSC Number "Attachment Control Number" |  |  |  |
| X222.362.2400.PWK06.050 | PwK06 |  |  |  |  |  |  |  | 999 | R |  | ${ }_{\text {accented } A N \text { characters. }}^{2400 \text {.ppulated with }}$ | ${ }_{\text {accenter }}^{2400 \text {.PW K06 chust be poppulated with }}$ |  |
| X222.362.2400.PWK06.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.362.2400.PWK07.010 | PWK07 | Descripion | AN | 1-80 | N/U |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.362.2400.PWK08.010 | PWK08 | Actions indicated |  |  | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.362.2400.PWK09.010 | PWK09 | Request Categoy Code | ID | 1-2 | nu |  |  |  | 999 | E |  | Must not be present. | Must not te present. |  |
| X222.366.240.PwK.010 | PwK | DURABLE MEDICAL EEUPMEN CERTIFCTE OF MEDICAL NECESSITY INDICATOR |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2400.PWK must not be present when 2400. PWK $01=$ CT and 2400. PWK $02=$ AB, AD, AF, AG, or NS. |  |  |
| x222.366.240.pwk.020 | PwK |  |  |  |  |  |  |  | 999 | ${ }^{\text {R }}$ | $\begin{aligned} & \text { IK304 = 16: "Implementation } \\ & \text { Dependent Segment Missing" } \end{aligned}$ |  | 2400.PWK with PWK01 = "CT" must be present when 2400.CR3 is present. |  |
| X222.366.2400.PWK.030 | PWK |  |  |  |  |  |  |  | ${ }^{999}$ | R | $\begin{array}{\|l} \substack{1 \text { K304 } 35: 5 \text { " Segment Exceeds } \\ \text { Maximum Use" }} \end{array}$ |  | Only one iteration of 2400. PWK with PWK01 $=$ "CT" is allowed. |  |
| X222.366.2400.PWK00.010 | PWK01 | Attachment Report Type Code | 10 | 2.2 | R |  |  | ст | 999 | R | IK403 = 1: "Required Data Element | Must not be present. | 2400. PwK01 must be pesent. |  |
| X222.366.240.PWKK01.020 | PWK01 |  |  |  |  |  |  |  | 999 | R | 11403 =7: "Invalid Code Value" | Must not be present. | 2400. PWK01 mus be "CT": |  |
| X222.366.240.PwK02.010 | PWK02 | Atachment Transmission Code | ${ }^{10}$ | 1-2 | R |  |  | AB, AD, AF, AG, NS | ${ }^{999}$ | R | K4003 =1: "Required Data Element Missing" | Must not be present. | 2400. PWK02 must be present. |  |
| X222.366.2400.PWK02.015 | PWK02 |  |  |  |  |  |  |  | 999 | R | 1 Kasion $=16$ " "Code Value Not Used in implementaion" | ${ }_{A G, \text { or NS }}^{2400 \text { PWK }}$ |  |  |
| X222.366.2400.PWK02.020 | PWK02 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7."Invalid Code Value" | Must not be present. | $2400 . P W$ Ko2 must be valid values. |  |
| X222.366.2400.PWK03.010 | PWK03 | Report Copies Needed | No | 1-2 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.366.240.PWK04.010 | PWK04 | Enity ldentifer Code | 1 D | 2.3 | NU |  |  |  | 999 | E | K $4033=110:$ "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.366.240.PWK05.010 | PWK05 | Identification Code Qualifier | 10 | 1-2 | Nu |  |  |  | 999 | E | IK403 $=110$. "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.366.240.PWK06.010 | PWK06 | Idenififation Code | AN | 2.80 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.366.240.PwK07.010 | PWK07 | Descripition | AN | 1.80 | nu |  |  |  | 999 | E | (K403 = 110. "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.366.240.PwK08.010 | PWK08 | Actions indicated |  |  | Nu |  |  |  | 999 | E | (K403 = 110. "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.366.2400.PwK09.010 | PWK09 | Request Calegory Code | ID | 1-2 | NU |  |  |  | 999 | E | (K4033 = 110.4 "Implementation "Not | Must not be present. | Must not be present. |  |
| $\times 222.368 .2400 . C R 1.010$ | CR1 | AMBULANCE TRANSPORT INFORMATION |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" Maximum Use" | Only one iteration of 2400.CR1 is allowed. | Only one iteration of 2400.CR1 is allowed. | $3 / 31$ : Per X12N Interpretation, this segment is only allowed when transport is actually conducted. |

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| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { Min. } \\ \hline \end{gathered}$ Max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 Values | $\begin{gathered} \text { TaAl } \\ \substack{9991 \\ 277 C A} \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.368.2400.CR101.010 | CR101 | Unit or Basis for Measurement Code | 10 | 2-2 | s |  |  | LB | 999 | R | IK403 $=2$ : "Conditional Required Data Element Missing" | If 2400.CR102 is present, $2400 . C R 101$ must be present. | If $2400 . \mathrm{CR} 102$ is present, 2400. CR101 must be present. |  |
| х222.368.2400.CR101.020 | CR101 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $2400 . C R 1101$ must be valid values. | $2400 . C R 1101$ must be valid values. |  |
| x222.368.240.CR102.010 | CR102 | Paient Weight | R | 1-10 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 1 It 240..CR101 is present, then 2400.CR102 must be peresent. | If 2 200. CR1001 is present, then 2400. CR102 must be reesent |  |
| x222.368.2400.CR102.015 | CR102 |  |  |  |  |  |  |  | 999 | E | 1K403 5 : "Data Element Too Long" | 2300.CR102 must be $>0$ and $<=9,999.99$. | 2300.CR102 must be $>0$ and $<=9,999.99$. |  |
| x222.368.2400.CR102.020 | CR102 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 337: "Ambulance certification/documentation" c.SC. $773 \cdot$ Weinht |  |  | 12118: CMS specific length. |
| X222.368.2400.CR103.010 | CR103 | Ambulance Transport Code | 10 | ${ }^{1-1}$ | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.368.2400.CR104.010 | CR104 | Ambulance Transpor Reason <br> Code | 10 | ${ }^{1-1}$ | R |  |  | A, B, C, D, E | 999 | R | IK403 = 1: "Required Data Element Missing" | $2400 . C R 104$ must be pesent. | $2400 . C R 104$ must be present. |  |
| x222.368.2400.CR104.020 | CR104 |  |  |  |  |  |  |  | 999 | R | 1K403 7 7: "Invalid Code Value" | $2400 . C$ CR104 must be valid values. | $2400 . C$ CR104 must be valid values. |  |
| x222.368.2400.CR105.010 | CR105 | Unitor orasis for Measurement Code | 10 | 2-2 | R |  |  | DH | 999 | R | IK403 = 1: "Required Data Element | $2400 . C R 105$ must be present. | $2400 . C R 105$ must be present. |  |
| Х222.36.2400.CR105.020 | CR105 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | $2400 . C R 105$ must be "DH". | $2400 . C R 105$ must be "DH". |  |
| x222.368.240.CR106.010 | CR106 | Transport Distance | R | ${ }^{1-15}$ | R |  |  |  | 999 | R | 1K033 = 1: "Required Data Element Missing" | $2400 . C R 106$ must be present. | $2400 . C R 106$ must be present. |  |
| x222.368.240.CR100.020 | CR106 |  |  |  |  |  |  |  | 999 | R | K403 =6: "Ivalid Character in Data Element" | $2400 . C R 106$ must be numeric. | $2400 . C R 106$ must be numeric. |  |
| $\begin{aligned} & \text { x222.368.2400.CR106.030 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times \times 222.368 .2400 . C R 106.035$ | CR106 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | $2400 . C R 106$ must be $>=0$ and $<=9999$. | $2400 . C R 106$ must be $>=0$ and $<=9999$. | 03/31: Medicare specific limitation. Companion Guide Note needed. |
| x222.368.2400.CR106.040 | CR106 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 512: "Length invalid for receiver's application system" transported" |  |  |  |
| X222.368.2400.CR107.010 | CR107 | Address Intormation | AN | ${ }^{1.55}$ | vu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.368.2400.CR108.010 | CR108 | Address Intormaion | AN | 1.55 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.368.240.CR109.010 | CR109 | Round Tip Purpose Descripioion | AN | 1-80 | s |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | 2400. CR109 must be 1-80 characters. | $2400 . C$ CR109 must be 1-80 characters. |  |
| x222.368.2400.CR109.020 | CR109 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 337: "Ambulance |  |  |  |
| X222.368.2400.CR1109.030 | CR109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.CR109 must be populated with accepted AN characters. | ${ }^{2400 . C R 109 \text { must be populated with }}$ |  |
| X222.368.2400.CR109.040Edit Deactivated Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.368.2400.CR1199.050 | CR109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.CR109 must contain at least one non- space character. | 2400.CR109 must contain at least one nonspace character. |  |
| X222.368.2400.CR110.010 | CR110 | Stetcher Purpose Descripioion | ${ }^{\text {an }}$ | 1-80 | s |  |  |  | ${ }^{999}$ | R | IK403 = 6: "Invalid Character in Data Element" | 2400.CR110 must contain at least one nonspace character. | 2400.CR110 must contain at least one nonspace character. |  |
| x222.368.2400.CR1110.020 | CR110 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | $2400 . C R 110$ must be 1 - 80 characters. | $2400 . C R 110$ must be 1 - 80 characters. |  |
| ×222.368.2400.CR110.030 | CR110 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system CSC 711:: "Stretcher Purpose: |  |  |  |
| X2222.368.2400.CR110.040 | CR110 |  |  |  |  |  |  |  | 999 | R |  | 2400. CR110 must be populated d with accepede AN characters. | 2400.CR110 must be populated with accepered AN characters. |  |
| $\times 222.368 .2400$. CR110.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.371.2400.CR3.010 | CR3 | DURABLE MEDICAL EQUIPMENT CERTIFICATION |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2400.CR3 must not be present. |  |  |

$\xrightarrow{837-}$

| Edit Reference | Segment or Element | Description | ID | Min. $\operatorname{Max}$ | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 Values | $\begin{gathered} \mathrm{TAII} \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ×222.371.2400.CR3.020 | CR3 |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" |  | 2400.CR3 must be present when any of the following conditions are met but not of them are me <br> 2400.PWK with PWK02 = "AD" is present <br> 2400.CR3 is present <br> 2400.DTP with DTP01 $=$ " 463 " is present <br> 2400.CRC01 = '09' is present <br> 2440.LQ is present <br> 2440.FRM is presen |  |
| х222.371.2400.CR3.030 | CR3 |  |  |  |  |  |  |  | ${ }^{999}$ | R | $\left.\right\|^{11304=5: \text { : "segment Exceeds }}$ |  | Only one iteration of $2400 . C R 3$ is allowed. |  |
| x222.371.2400.CR330.010 | CR301 | Certification Type Code | 10 | ${ }^{1-1}$ | R |  |  | ${ }_{\text {I,R,S }}$ | 999 | R |  |  | $2400 . C R 301$ must be present. |  |
| x222.371.2400.CR301.020 | CR301 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invilid Code Vaue" |  |  |  |
| X222.371.2400.CR3301.030 | CR301 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ :"Invalid Code Value" |  | $2400 . C R 301$ must be valid values. |  |
| X222.371.2400.CR302.010 | CR302 | Unitor Basis for Measurement ${ }_{\text {Code }}$ | ${ }^{10}$ | 2.2 | R |  |  | мо | 999 | R | \|K403 = 1: "Required Data Element |  | $2400 . C R 302$ must be peresent. |  |
| X222.371.2400.CR302.020 | CR302 |  |  |  |  |  |  |  | 999 | R | 1K003 $=7$ : "Invalid Code Value" |  | $2400 . C R 302$ must be "MO". |  |
| $\times \times 222.377 .2400 . C R 3303010$ | СR303 | Durable Medical Equipment Duration | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" |  | $2400 . C R 303$ must be present. |  |
| X222.377.2400.CR330.015 | CR303 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" |  | $2400 . C R 303$ must be 1 - 2 digits. | 03/31: Medicare specific limitation Companion Guide Note needed |
| ×222.371.2400.CR303.020 | CR303 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | cscc A7: <br> Acknowledgement/Rejected for Invalid formation..." <br> CSC 512: "Length invalid for receiver's application system <br> CSC 352: "Duration of treatment plan" |  |  |  |
| х222.377.12400.CR330.030 | CR303 |  |  |  |  |  |  |  | 999 | R |  |  | $2400 . C R 303$ must be numeric. |  |
| ×222.371.2400.CR303.040 | CR303 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 402: "Amount must be greater than 0" <br> CSC 352: "Duration of treatment plan" |  | 2400.CR303 must be > 0 unless 2400.LQ02 $=$ "08.02". |  |
| х222.371.2400.CR334.010 | СR304 | Insulin Dependent Code | 10 | 1-1 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.371.2400.CR305.010 | CR305 | Descripion | AN | 1-80 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.373.2400.CRC. 010 | CRC | ambulance certification |  |  |  | 2400 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only three iterations of 2400.CRC with CRC01 = "07", "70", or "09" are allowed |  | 12:23 Regardless of qualifier, Only three iterations of this segment are allowed in this position. |
| X222.373.2400.CRC. 020edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х2222.377.2400.CRC.030 | crc |  |  | 3 | s | 2400 |  |  | ${ }^{999}$ | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only three iterations of 2400.CRC with CRC01 = "07" are allowed. |  | 12:23 Regardless of qualifier, Only three iterations of this segment are allowed in this position. |
| ×222.373.2400.CRC. 040 | CRC |  |  | 3 | s | 2400 |  |  | 277 | c | "AcknowledgementRejected for nvalid Information..." CSC 732: "Information submitted guidelines." <br> CSC 335: "Durable medical equipment certification." |  | No iterations of 2400.CRC with CRC01 = "07" are allowed. | 02/19: Segments with the "07" qualifier are not accepted by Medicare for DME. |
| X222.373.2400.CRC01.010 | CRCO1 | Code Category | 10 | 2.2 | R |  |  | 07 | 999 | R | (1K003 1. "Required Data Element | $2400 . C R C 01$ must be present. |  |  |
| X222.373.2400.CRC01.020 | CRC01 |  |  |  |  |  |  |  | 999 | R | IK403 =7: "Invalid Code Value" | $2400 . C R C 01$ must be "07". |  |  |
| X222.373.2400.CRC02.010 | CRC02 | Cerificaion Condition Indicator | 10 | ${ }^{1-1}$ | R |  |  | N, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | $2400 . C R C 02$ must be present. |  |  |
| х222.373.2400.CRC02.020 | CRC02 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | $2400 . C R C 02$ must be valid values. |  |  |
| $\times 2222.373 .2400 . C R C 03.010$ | CRCO3 | Condition Code | 10 | 2-3 | R |  |  | $01,04,05,06,07$, <br> $08,09,12$ | 999 | R | IK403 = 1: "Required Data Element Missing" | $2400 . C R C 03$ must be present. |  |  |
| X222.373.2400.CRC03.020 | CRCO3 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | $2400 . C R C 03$ must be vaid values. |  |  |
| $\times \times 222.373 .2400 . C R C 04.010$ | CRC04 | Condition Code | $1{ }^{1}$ | ${ }^{2.3}$ | s |  |  | $\stackrel{01,04,05,06,07,}{ }$ | 999 | R |  |  |  |  |
| x222.373.2400.CRR04.020 | CRC04 |  |  |  |  |  |  |  | 999 | R | 1K403 7 : : "livalid Code Value" $^{\text {a }}$ | $2400 . \mathrm{CRC} 04$ must be valid values. |  |  |
| X222.373.2400.CRC05.010 | CRC05 | Condition Code | 10 | ${ }^{2.3}$ | s |  |  | ${ }^{\text {01, }} 0$ | 999 | R |  |  |  |  |
| X222.373.2400.CRC05.020 | CRC05 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | $2400 . \mathrm{CRCO5}$ must be valid values. |  |  |
| X222.373.2400.CRC06.010 | CRC06 | Condition Code | 10 | 2.3 | s |  |  | $\begin{aligned} & 01,04,05,06,07, \\ & 08,09,12 \end{aligned}$ | ${ }^{999}$ | R | 1K403 = 2: "Conditional Required Data | It 2400. CRCO6 is present, 2400.CRC05 |  |  |
| х222.373.2400.CRC06.020 | CRC06 |  |  |  |  |  |  |  | 999 | R | 11403 $\mathbf{~ 7 ~ \% ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $2400 . C R C 06$ must be valid values. |  |  |


| Edit Reference | Segment or Element | Description | 10 | Min. max | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 <br> Values | $\begin{gathered} \mathrm{TAAl} \\ 9991 \\ 27 \mathrm{CA} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.373.2400.CRC07.010 | CRC07 | Condition Code | 10 | 2.3 | s |  |  | 01, 04, 05, 06, 07, $08,09,12$ | 999 | R |  |  |  |  |
| х222.373.2400.CRC07.020 | CRC07 |  |  |  |  |  |  |  | 999 | R | IK403 =7: "Invalid Code Value" | $2400 . C R C 07$ must be valid values. |  |  |
| X222.376.2400.CRC. 010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.376.2400.CRC. 015 | CRC | hospice employee indicator |  | 1 | s | 2400 |  |  | 277 | c | $\operatorname{cscc} A 8:$ <br> "Acknowledgement/Rejected for relational field in error." CSC 21 "Missing or invalid information." <br> CSC 747: "Hospice Employee Indicator" | If 2300.CLM05-1 = "34" or 2400.SV105 = "34", 2400.CRC with CRC01 = "70" must be present. |  | 12:23 Regardless of qualifie, ony 3 iterations a his segment are allowed in this postion. acceppect by Medicare for 10 ME |
| x222.377.2400.CRC. 020 | CRC |  |  |  |  |  |  |  | 999 | R |  | Only one iteration of 2400. CRC with CRC01 = "70" is allowed |  |  |
| ×222.376.2400.CRC. 330 | CRC |  |  |  |  |  |  |  | 277 | c | cscc a7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." Indicator" |  | No iterations of 2400.CRC with CRC01 = "70" are allowed. | 02/19: Segments with the " 70 " qualifier are not accepted by Medicare for DME. |
| X222.376.240.CRC01.010 | CRCO1 | Code Category | 10 | 2-2 | R |  |  | 70 | 999 | R | (K003 1. "Required Data Element | $2400 . C R C 01$ must be present. |  |  |
| X222.376.240.CRC01.020 | CRCO1 |  |  |  |  |  |  |  | 999 | R | \|1403 $=7$ : "Invalid Code Value" | 2400.CRC01 must be "70". |  |  |
| x222.376.2400.CRC02.010 | CRC02 | $\xrightarrow[\substack{\text { Hospice Employed Provider } \\ \text { Indicator }}]{\text {. }}$ | 10 | ${ }^{1-1}$ | R |  |  | N, Y | 999 | R |  | $2400 . C R C 02$ must be present. |  |  |
| X222.376.2400.CRCO2.020 | CRCO2 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | $2400 . C R C 02$ must be valid values. |  |  |
| X222.376.240.CRR03.010 | CRC03 | Condition Indicator | 10 | 2.3 | R |  |  | 65 | 999 | R | IK403 = 1: "Required Data Element Missing" | $2400 . C R C 03$ must be present. |  |  |
| X222.376.2400.CRC03.020 | CRCO3 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2400.CRC03 must be "65". |  |  |
| X222.376.2400.CRC04.010 | CRC04 | Condition Indicator | 1 D | 2.3 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.376.2400.CRC05.010 | CRCos | Condtion Indicator | 10 | $2 \cdot 3$ | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.376.2400.CRC06.010 | CRC06 | Condition Indicator | 10 | 2.3 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.376.2400.CRC07.010 | CRC07 | Condition Indicator | 10 | $2 \cdot 3$ | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| ×222.37.2400.CRC. 010 | CRC | CONDITION INDICATOR/ DURABLE MEDICAL EQUIPMENT |  | 1 | s | 200 |  |  | 999 | R | IK304 = 19: "Implementation <br> Dependent "Not Used" Segment <br> Present" | $2400 . C R C$ must not be present. |  |  |
| x222.378.2400.CRC. 020 | CRC |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" |  | Only three iterations of 2400.CRC with CRC01 = "09" are allowed. | 12:23 Regardless of qualifier, Only three iterations of this segment are allowed in this position. |
| x222.378.2400.CRC. 030 | CRC |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" |  | If $2400 . C R 3$ is present, one iteration of $2400 . C R C$ with CRC01 = "09" must be present. |  |
| X222.378.2400.CRC01.010 | CRC01 | Code Category | 10 | 2.2 | R |  |  | 09 | 999 | R | IK $203=1:$ "Required Data Element Missina" |  | $2400 . C R C 011$ must be present. |  |
| X222.378.2400.CRC01.020 | CRCO1 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Invalid Code Value" |  | $2400 . C R C 01$ must be "99". |  |
| X222.378.2400.CRC02.010 | CRC02 | Cerrificaion Condition Indicator | 10 | ${ }^{1-1}$ | R |  |  | N, Y | 999 | R | IK403 = 1: "Required Data Element Missing" |  | $2400 . C R C 02$ must be present. |  |
| X222.378.2400.CRC02.020 | CRCO2 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" |  | $2400 . C R C 02$ must be valid values. |  |
| X222.378.2400.CRC03.010 | CRC03 | Condtion Indicator | 10 | 2.3 | R |  |  | 38, | 999 | R | IK403 = 1: "Required Data Element Missing" |  | $2400 . C R C 03$ must be present. |  |
| X222.378.2400.CRC03.020 | CRCO |  |  |  |  |  |  |  | 999 | R | IK403 =7: "Invalid Code Value" |  | $2400 . C R C 03$ must be valid values. |  |
| X222.378.2400.CRC03.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222:378.2400.CRC04.010 | CRC04 | Condition Indicator | 10 | ${ }^{2.3}$ | s |  |  | zv | 999 | R | $\left\lvert\, \begin{aligned} & \text { \|K403 }=2.2 . \text { "conditional Required Data } \\ & \text { Element Missinat }\end{aligned}\right.$ |  | $\left.\right\|_{\mid \text {It 2400.CRRCO i is present, 2400.CRCO3 }} ^{\text {must be pesent }}$ |  |
| X222.378.2400.CRC04.020 | CRC04 |  |  |  |  |  |  |  | 999 | R | \|K403 7 7: "Invalid Code Value" |  | $2400 . C R C 04$ must be valid values. |  |
| X222.378.2400.CRC04.030 | CRC04 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid (1normation <br> CSC 527: "Certification Condition <br> Indicator" |  | If 2400.CRC01 is "09", at least one iteration of 2400.CRC03 or 2400 .CRC04 must be 38 |  |
| X222.378.2400.CRC05.010 | CRC05 | Condition Indicator | 10 | 2.3 | nu |  |  |  | 999 | E |  | Must not be peresent. | Must not be present. |  |
| X222.378.2400.CRC06.010 | CRC06 | Condition Indicator | 10 | 2.3 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.378.2400.CRC07.010 | CRC07 | Condtion Indicator | 10 | 2.3 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X2222.380.2400.0tp. 010 | DTP | date- service date |  | 1 | R | 2400 |  |  | 999 | R |  | ${ }^{2400 . D T P}$ with DTP01 $=$ "472" must be | 2000.DTP with DTP01 $=$ "472" must be |  |
| X222.380.2400.DTP. 020 | DTP |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with DTP01 = "472" is allowed. | Only one iteration of 2400.DTP with DTP01 = "472" is allowed. |  |

Professional Edits

| Edit Reference | Segment or Element | Description | 10 | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \\ \hline \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TAII } \\ \text { T } 979 / 1 \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.380.2400.DTP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3} 3$ | R |  |  | 472 | 999 | R |  | 2400. DTP01 must be present. | 2400. TTP01 must be present. |  |
| X222.380.2400.0TPP0.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2400.DTP01 must be "472". | 2400.0TP01 must be "472". |  |
| $\times 222.380 .2400$. DTP02.010 | DTP02 | Daie Time Period Formal | $1{ }^{1}$ | ${ }^{2.3}$ | R |  |  | D8, RD8 | 999 | R | K403 $1:$ : "Required Data Element Missing" | 2400.0 TP02 must be pesent. | 2400. TrP02 must be present. |  |
| X222.380.2400.DTPP2.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7."Invid Code Value" | $2400 . \mathrm{DTP02}$ must be valid values. | 240.0. TPP02 must be valid values. |  |
| х222.380.2400.0tpo3.010 | dтP03 | Senice Date | an | ${ }^{1-35}$ | R |  |  | $\begin{array}{\|c\|} \hline \text { CCYYMMDD. } \\ \text { CCYYMMDDCCYY } \\ \text { MMDD } \end{array}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.0 TP03 must be present. | 2400. TrP03 must be present. |  |
| х222.380.2400.DTP03.020 | отP03 |  |  |  |  |  |  |  | 999 | R | \|K403 = 8. "Ivalid Date" | If 2400.DTP02 is D8, then 2400.DTP03 must be a valid date in the format of CCYYMMDD. | If 2400 .DTP02 is D8, then 2400 .DTP03 must be a valid date in the format of CCYYMMDD. be a valid date in the format of CCYYMMDD. |  |
| х222.380.2400.DTP03.030 | отP03 |  |  |  |  |  |  |  | 999 | R | \|K403 =8. "IIvalid Date" | If 2400.DTP02 is RD8, then 2400.DTP03 must be a valid date in the format of CCYYMMDD-CCYYMMDD. | If 2400. DTP02 is RD8, then 2400. DTP03 must be a valid date in the format of CCYYMMDD-CCYYMMDD. |  |
| X222.380.2400.DTP03.040 | ${ }_{\text {dTP03 }}$ |  |  |  |  |  |  |  | 277 | c |  | If 2400.DTP02 is D8, 2400.DTP03 must not be a future date. | If 2400.DTP02 is D8,2400.DTP03 must not be a future date. |  |
| х222.380.2400.DTP03.050 | dTP03 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information... <br> 510: "Future date" CSC 187: "Date(s) of service" | If 2400.DTP02 is RD8, 2400.DTP03 must not be a future date. | If 2400.DTP02 is RD8, the first date listed in 2400.DTP03 must not be a future date |  |
| х222.380.2400.DTP03.060 | dтP03 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information..." CSC 187: "Date(s) of service" | If 2400.DTP02 is RD8, the first date listed in 2400.DTP03 must be a date prior or equal to the second date listed in 2400.DTP03. | If 2400.DTP02 is RD8, the first date listed in 2400. DTP03 must be a date prior to the second date listed in 2400.DTP03. |  |
| $\times 222.380 .2400 .0$ TP03.070 | dтP03 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid nformation..." CSC 187: "Date(s) of service" |  | Reject the claim if 2400.DTP02=D8 or 2400.DTP02 = RD8 and the CCYYMM portion of the first date and the CCYYMM portion of the second date are equal and 2400.SV101-3, SV101-4, SV101-5 or SV101 $6=$ "RR" and 2400. SV104 is not $=$ " 1 ". |  |
| X222.380.2400.DTP03.080 | ${ }_{\text {отP03 }}$ |  |  |  |  |  |  |  | 277 | c |  |  |  |  |
| х222.380.2400.DTP03.090 | dтP03 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." CSC 187: "Date(s) of service" |  | Reject the claim if 2400.DTP02 = "RD8" and the first date is not = the second date and SV101-2 is not "E0935" or "E0936", \& the proc option "GL" or "IS" does NOT exist, \& the proc option "DF", "DI", "DR", "LP", "OC", "OG", "OL" or "OP does exist. |  |
| х2222.388.2400.07P. 010 | DTP | DATE - PRESCRIPTION DATE |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with DTP01 = "471" is allowed. | Only one iteration of 2400.DTP with <br> DTP01 = " 471 " is allowed. |  |
| x222.382.2400.DTP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | ${ }^{471}$ | 999 | R |  | 2400. DTP01 must be peresent. | 2400. DTP01 must be present. |  |
| X222.382.2400.0TP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2400.0 PP01 must be "471". | 2400. DTP01 must be "471". |  |
| x222.382.2400.DTP02.010 | DTP02 | Date Time Period Format Qualifier | 10 | ${ }^{2.3}$ | R |  |  | D8 | 999 | R | K403 $1: 1$ :"Required Data Element Missing" | 2400. DTP02 must be peresent. | 2400. TTP02 must be present. |  |
| X222.382.2400.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|k403 =7: "Invalid Code Value" | 2400. DTP02 must be "D8\%". | 2400. DTP02 must be "D8\%. |  |
| X222.382.2400.DTP03.010 | отРоз | Prescripioion Date | AN | ${ }^{1.35}$ | R |  |  | CCYYMMD | 999 | R | \|K403 = 8: "Invalid Date" | 2 200.DTPO3 must bea valid date in the | 200. DTPO3 Must be a avald date in the tormat of CCYMMMDD. |  |
| х222.382.2400.DTP03.020 | ${ }_{\text {dTP03 }}$ |  |  |  |  |  |  |  | 277 | c |  | 2400. DTP03 must not be a future date. | 2400.0 TP 03 must not be a future date. |  |
| ×222.383.2400.0TP. 010 | DTP | DATE-CERTIFICATION REVISIONRECERTIICATION DATE |  | 1 | s | 2400 |  |  | ${ }^{999}$ | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2400. DTP with DTP01 $=$ " 607 " must not be present. |  | 06/04: Companion Guide Note needed. |
| х222.383.2400.0TP.020 | DTP |  |  |  |  |  |  |  | 999 | R | 1K304 = 16: "Implementation Dependent Segment Missing" |  | One iteration of 2400. DTP with DTP01 = " 607 " must be present when $2400 . C R 301$ = "R" or "S". |  |
| х222.383.2400.DTP01.010 | DTP01 | Date Time Quaifier | 10 | ${ }^{3.3}$ | R |  |  | 607 | 999 | R | \|K403 1 1. "Required Data Element |  | $2400 . \mathrm{TTP01}$ must be peresent. |  |
| X222.38.2400.0TP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" |  | 2400.0 DP01 must be "607". |  |
| X222.383. 2400. DTP02.010 | DTP02 | Date Time Period Format Qualifier | 10 | 2-3 | R |  |  | D8 | 999 | R | ${ }^{1 \text { K403 }} 1$ 1: Required Data Element |  | 2400.0 TP02 must be present. |  |
| X222.383.2400.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|k403 $=7$ : "Invalid Code Value" |  | 2400. DTP02 must be "D8\%. |  |
| X222.383.240.0tP03.010 | DTP03 | Certification Revision Recertification Date | AN | ${ }^{1.35}$ | R |  |  | cCYYMmd | 999 | R | \|1403 = 8: "Invaid Date" |  | 200.DTPO3 must be a valid date in the forma of CcrMMMDD. |  |
| х222.383.2400.DTP03.020 | dтP03 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid ation 510: "Future date" CSC 529: "Certification Revision Date |  | $2400 . \mathrm{DTP03}$ must no be a future date. |  |
| ×222.388.2400.07P. 010 | DTP | $\begin{gathered} \text { DATE - BEGIN THERAPY } \\ \text { DATE } \\ \hline \end{gathered}$ |  | 1 | s | 2400 |  |  | ${ }^{999}$ | R | Dependent "Not Used" Segment Present" | $\begin{aligned} & \begin{array}{l} 2400 . \text { DTP } \text { with DTP01 }=\text { "463" must not be } \\ \text { present. } \end{array} \\ & \hline \end{aligned}$ |  | 06/04: Companion Guide Note needed. |
| х222.384.4400.0TP.020 | गтP |  |  | 1 | s |  |  |  | ${ }^{999}$ | R | $\begin{aligned} & \text { IK304 = 16: "Implementation } \\ & \text { Dependent Segment Missing" } \end{aligned}$ |  | If 2400.CR3 is present, 2400.DTP with DTP01 = "463" must be present. |  |

$\stackrel{837-}{8}$

| Edit Reference | Segment or Element | Description | 10 | min. <br> Max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TAAI } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptree } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х2222.384.2400.0tr.030 | DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" |  | Only one iteration of 2400.DTP with DTP01 = "463" is allowed. |  |
| X222.384.2400.0TPP01.010 | DTP01 | Date Time Qualifier | 10 | 3.3 | R |  |  | 463 | 999 | R | (K03 (1."Required Data Element |  | 2400.0 TP01 must be peesent. |  |
| X222.384.2400.0TP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" |  | 2400.0 DP01 must be "463". |  |
| X222.384.2400.DTPO2.010 | DTP02 | ${ }_{\text {Date }}^{\text {Date Time Period Format }}$ Ouatifer | 10 | 2.3 | R |  |  | D8 | ${ }^{999}$ | R | K $403=1$ : "Required Data Element |  | 2400.0 TPO2 must be present. |  |
| X222.384.2400.DTPO2.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Invalid Code Value" |  | 2400.DTP02 must be "D8". |  |
| X222.384.2400.0тTP03.010 | DTP03 | Begin Therapy Date | AN | ${ }^{1.35}$ | R |  |  | CCYYMMD | 999 | R | 1 K403 =8: "Invalid Date" |  | $2400 . D T P 03$ must be a valid date in the format of CCYYMMDD. |  |
| X22, 384.2400.0tP03.020 | отP03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid CSC 510: "Future date" |  | $2400 . \mathrm{DTP03}$ must not be a future date. |  |
| ×222.385.2400.0TP. 010 | отP | $\begin{gathered} \text { DATE - LAST CERTIFICATION } \\ \text { DATE } \end{gathered}$ |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | $\begin{aligned} & \text { 2400.DTP with DTP01 = " } 461 \text { " must not be } \\ & \text { present. } \end{aligned}$ |  | 06/04: Companion Guide Note needed. |
| X222.385.2400.0TP.020 | отP |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" |  | 2400.DTP with DTP01 = "461" must be present when 2400.CRC01 = "09" and CRC03 or CRC04 = "38" and CRC02 = " Y ". |  |
| х222.385.2400.0тP.030 | DTP |  |  |  |  |  |  |  | 999 | R | \|K304=5: " "egement Exceeds |  | Only one iteration of 2400.DTP with |  |
| X222.385.2400.0TP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | 461 | 999 | R |  |  | 2400.0 TP01 must be present. |  |
| X222.385.2400.0TP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" |  | 2400.0 TP01 must be "461". |  |
| X222.355.2400.0TPO2.010 | DTP02 | Date Time Period Format Qualifier | 10 | 2.3 | R |  |  | D8 | ${ }^{999}$ | R | 1K033 $=1$ : "Required Data Element |  | 2400.0 TPO2 must be present. |  |
| X222.385.2400.DTPO2.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|14033 =7: "Invaid Code Value" |  | 2400. DTPP2 must te "D8". |  |
| X222.385.2400.0тP03.010 | ${ }^{\text {отPо3 }}$ | Last Cerification Date | AN | ${ }^{1.35}$ | R |  |  | CCYYMмDD | 999 | R | 1 \|K403 $=8$ : "Invalid Date" |  | 2400.DTP03 must be a valid date in the format of CCYYMMDD. |  |
| X222.385.2400.0tP03.020 | DTP03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid Information... CSC 510: "Future date" CSC 580 "Last Certification Date" |  | 2400. DTP03 must not be a tuture date. |  |
| х222.386.2400.07P. 010 | DTP | date - date last seen |  | 1 | s | 2400 |  |  | 999 | R |  | Only one iteration of 2400.DTP with DTP01 = "304" is allowed. |  | 06/04: Companion Guide Note needed. |
| X222,386.2400.0TP.020 | DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" |  | 2400.DTP with DTP01 $=$ " 304 " must not be present. |  |
| X222.386.2400.0TP01.010 | DTP01 | Date Time Qualifier | 10 | 3-3 | R |  |  | 304 | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2400.0 TP01 must be peresent. |  |  |
| X222.386.2400.0TP001.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invalid Code Value" | 2400.0 TP01 must be "304". |  |  |
| X222.386.2400.0tP02.010 | DTP02 | Date Time Period Format Ouadifier | 10 | ${ }^{2 \cdot 3}$ | R |  |  | ${ }^{88}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.0 TP02 must be pesent. |  |  |
| X222.386.2400.0TPO2.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Invalid Code Value" | 2400.0 DP02 must be "D8". |  |  |
| X222.386.2400.0TP03.010 | DTP03 | Last Seen Date | AN | ${ }^{1-35}$ | R |  |  | CCYYMMDD | 999 | R | $1 \mathrm{~K} 403=8$ 8: "ITvalid Date" | 2400.DTP03 must be a valid date in the format of CCYYMMDD. |  |  |
| X222.387.2400.0TP.010 | DTP | date- test date |  | 2 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2400.DTP with DTP01 = "738" or "739" are allowed. | Only two iterations of 2400.DTP with DTP01 = "738" or "739" are allowed. |  |
| X222.387.2400.0TP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | 738, 739 | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missinq" | 2400.0 TP01 must be pesent. | 2400. TTP01 must be present. |  |
| X222.387.2400.0TP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $2400 . \mathrm{DTP01}$ must be valid values. | $2400 . \mathrm{DTP01}$ must be valid values. |  |
| X222.387.2400.0TP02.010 | DTP02 | Dale Time Period Format Ouatifier | $1{ }^{1}$ | 2.3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.0 TP02 must be present. | 2400.0 TP02 must be present. |  |
| X222.387.2400.DTPO2.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Invalid Code Value" | 2400. DTP02 must be "D8". | 2400. DTPP2 must te "D8". |  |
| X222.387.2400.0тP03.010 | ОтР03 | Test Performed Date | an | ${ }^{1-35}$ | R |  |  | CCYYMMD | 999 | R | 1 \|K003 $=8$ : "Ivalid Date" | lom tormat of fcrymumbo . |  |  |
| х222.387.2400.0tP03.020 | ${ }_{\text {dTP03 }}$ |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid CSC 510. " CSC 510 CSC 653 "Test Performed Date" | 2400. TPPo3 must not be a tuture date. | 2400. DTPO3 must not be a tuture date. |  |
| х222.388.2400.DTP. 010 | DTP | DATE. SHIPPED DATE |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with DTP01 = "011" is allowed. | Only one iteration of 2400.DTP with DTP01 $=$ "011" is allowed. | Pass through, syntax only |
| X222.388.2400.0TP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3.3}$ | R |  |  | ${ }^{011}$ | 999 | R | (Kissin 1. "Required Data Element | 2400.0 TP01 must be pesent. | 2400. DTP01 must be present. |  |
| X222.388.2400.0TP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ :"Invalid Code Value" | 2400.DTP01 must be "011". | 2400.0 PP01 must be "011". |  |
| X222.388.2400.0TP02.010 | DTP02 | Date Time Period Format Oualifer | 10 | ${ }^{2 \cdot 3}$ | R |  |  | D8 | 999 | R |  | 2400. DTP02 must be pesesent. | 2400.0 TP02 must be pesesent. |  |
| X222.388.2400.0TPP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2400.0 TPP2 must be "D8". | 2400. DTP02 must be "D8". |  |
| X222.388.2400.0тP03.010 | DтP03 | Shipped Date | AN | ${ }^{1-35}$ | R |  |  | сСуYммDD | 999 | R | 1 K403 $=8$ : "Invalid Date" | 240. DTPO3 Must be a vaid date in the tormat of CCYMMMDD. | 240. TTPO3 Must be a avid date in the tormat of CcYMMMDD. |  |
| $\times \times 222.389 .2400 .0$ TPP. 010 | DTP | DATE-LAST X -Ray |  | 1 | s | 2400 |  |  | э99 | R | 1 K304 $=5$ : " Segment Exceeds Maximum Use | Only one iteration of 2400.DTP with DTP01 = "455" is allowed. |  |  |
| X222,389.2400.0TP.020 | отP |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" |  | 2400.DTP with DTP01 $=$ " 455 " must not be present. |  |
| X222,389.2400.0.tP01.010 | ${ }^{\text {DTP01 }}$ | Date Time Qualifier | 10 | 3-3 | R |  |  | 455 | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2400.0 TP01 must be pesent. |  |  |
| X222.389.2400.0TPP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{7}$ 7. "Invalid Code Value" | 2400.0 TP01 must be "455". |  |  |
| X222.389.2400.0TPO2.010 | DTP02 | Date Time Period Format Oualifer | 10 | ${ }^{2 \cdot 3}$ | R |  |  | D8 | 999 | R |  | 2400.0 TP02 must be present. |  |  |
| X222.389.2400.0TPP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | \|k403 =7: "Invalid Code Value" | 2400.0TP02 must be "D8". |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { Min. } \\ \hline \end{gathered}$ Max. | $\begin{array}{\|c\|c} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 Values |  | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.389.240.0tPP0.010 | סтP03 | Last X -Ray Date | AN | ${ }^{1.35}$ | R |  |  | CCYYMMDD | 999 | R | 1 K403 $=8$ : "Invalid Date" | 2400. TTPO3 must be a valid date in the format of CCYYMMDD. |  |  |
| х222.389.2400.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 277 | c |  | 2400.0 TP03 must not be afuture date. |  |  |
| х222.390.2400.0тP. 010 | DTP | ${ }^{\text {DATE - INTTAL TREATMENT }}$ |  | 1 | s | 2400 |  |  | 999 | R |  | Only one iteration of 2400.DTP with DTP01 $=$ " 454 " is allowed. | Only one iteration of 2 240.0.DTP with DTP01 $=454$ is is alowed. |  |
| x222.390.2400.DTP01.010 | DTP01 | Date Time Qualifier | 10 | ${ }^{3} 3$ | R |  |  | 454 | 999 | R | (Ka03 1 1: "Required Data Element | 2400.0 TP01 must be pesesent. | 2400. DTP01 must be pesesent. |  |
| x222.390.2400.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7."Invid Code Value" | 2400.0 TP01 must be "454". | 2400.0.0701 must be "454". |  |
| X222.390.2400.DTPP2.010 | DTP02 | $\underset{\substack{\text { Date Time Period Format } \\ \text { Oualifer }}}{ }$ | 10 | 2-3 | R |  |  | D8 | ${ }^{999}$ | R | ${ }^{\text {K4033 }}$ 1: "Required Data Element Missing" | 2400.0 TP02 must be pesent. | $2400 . \mathrm{TTP02}$ must be peresent. |  |
| X222.390.2400.DTP02.020 | ${ }^{\text {DTP02 }}$ |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2400.DTP02 must be "D8". | 2400.0 TPO2 must be "D8". |  |
| X222.390.2400.DTP03.010 | DTP03 | Initial Treamment Date | AN | ${ }^{1.35}$ | R |  |  | ссуYмmd | 999 | R | \|K403 $=8$ : "IIvalid Date" | 2400. DTP03 must be a valid date in the tormat of CCYYMMDD. | 2400.DTP03 must be a valid date in the format of CCYYMMDD. |  |
| ×222.390.2400.DTP03.020 | dтP03 |  |  |  |  |  |  |  | 277 | c | CSCC Acknowledgement/Rejected for Invalid Information..." CSC 510: "Future date" CSC 701 "Intial Tren | 2400. DTP03 must not be a future date. | 2400.0 TP03 must not be a ature date. |  |
| х222.391.2400.0тT. 010 | QtY | AMBULANCE PATIENT COUNT |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with QTY01 = "PT" is allowed. | Only one iteration of 2400.DTP with QTY01 $=$ "TT" is allowed. |  |
| X222.391.2400.QTYY01.010 | Qtyo1 | Quantiy Qualifer | 10 | 2.2 | R |  |  | PT | 999 | R | (K403 1 =1" "Required Data Element | 2400.9 TY01 must be pesent. | $2400 . \mathrm{Q}$ TY01 must be pesent. |  |
| X222.391.2400.QTYY01.020 | QTY01 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2400. QTY01 must be "PT". | 2400. QTY01 must be "PT". |  |
| x222.391.2400.QTY02.010 | QTYO2 | Ambulance Patient Count | R | 1-15 | R |  |  |  | 999 | R |  | 2400.0 TY02 must be present. | 2400.0 TY02 must be present. |  |
| x222.391.2400.QTYYo..220 | QTY02 |  |  |  |  |  |  |  | 999 | R | IK403 =6: "Invalid Character in Data Element" | 2400.0 TYO2 must be umenic. | 2400. QTY02 must be numeric. |  |
| X222.391.2400.QTYYo..330 | QTYO2 |  |  |  |  |  |  |  | 999 | R | IK403 = 122 : "Implementation Patem Match Failure | 2400. ¢TYY2 must be $>1$. | 2400. OTYO2 must be $>1$. |  |
| X222.391.2400.QTYY2.:35 | QTY02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2400.9 ¢TY02 must be 1 - 2 digits. | 2400.9 TY02 must be 1 - 2 digits. | 03/31: Medicare specific limitation. Companion Guide Note needed |
| X222.391.2400.QTYO2.040 | QTYO2 |  |  |  |  |  |  |  | 277 | T | ${ }^{\text {CSCCC AT: }}$ Information..." <br> CSC 512: "Length invalid for receiver's <br> application system |  |  |  |
| X222.391.2400.QTYY 3.010 | QтYo3 | COMPOSTIE UNIT OF <br> MEASURE |  |  | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| x222.391.2400.QTYY4.010 | QTro4 | Free-Form Message | AN | 1-30 | NU |  |  |  | 999 | E | \|K403 = 110: "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.392.2400.9TY. 010 | QTY | OBSTETRIC ANESTHESIA ADDITIONAL UNITS |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" Maximum Use" | Only one iteration of 2400.DTP with QTY01 = "FL" is allowed. | Only one iteration of 2400.DTP with QTY01 = "FL" is allowed. |  |
| X222.392.2400.QTYY01.010 | QTY01 | Quantity Qualifier | 10 | 2.2 | R |  |  | FL | 999 | R | K4033 $=1$ : "Required Data Element Missina" | 2400.9 TY01 must be pesent. | $2400 . \mathrm{Q}$ TY01 must be pesent. |  |
| X222.392.2400.QTYY01.020 | QTY01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7."Invid Code Value" | 2400. QTYO1 must be "FL". | 2400. OTYO1 must be "FL". |  |
| x222.392.2400.QTYY02.010 | Qtyoz | Obsteric Additional Units | R | 1-15 | R |  |  |  | 999 | R | 1 K $403=1$ : "Required Data Element Missing" | 2400.0 TY02 must be present. | 2400.0 TYO2 must be present. |  |
| x222.392.2400.eTY02.020 | QTYO2 |  |  |  |  |  |  |  | 999 | R |  | 2400.0 TYO2 must be numeric. | $2400 . \mathrm{QTY02}$ must be numeric. |  |
| X222.392.2400.QTY02.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.392.2400.QTYO2.035 |  |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element too Long" | 2400.0 TY02 must be $>0$ and $<=99$. | 2400. QTYO2 must be $>0$ and $<=99$. | 03/31: Medicare specific limitation. Companion Guide Note needed. |
| X222.392. 2400.QTYO2.040 | QTYO2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... SC 512: "Length invalid for receiver's application system <br> CSC 712:: "Obstetric Additional Units" |  |  |  |
| X222.392.2400.QTYY 3.010 | QTro3 | $\underset{\substack{\text { MEASURE }}}{\text { COMPOSTE UNIT OF }}$ |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.392.2400.QTYY04.010 | Qtro4 | Fee.form Message | AN | 1-30 | vu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.393.2400.MEA.010 | MEA | TEST RESULTS |  | 5 | s | 2400 |  |  | 999 | R |  | Only five iterations of 2400 .MEA are allowed. | Only five iterations of 2400 .MEA are allowed. |  |
| X222.393.2400.MEAO1.010 | mea01 | Measurement Reference dentification Code | 10 | 2-2 | R |  |  | og, TR | 999 | R | IK403 = 1: "Required Data Element | 2400.MEA01 must be present. | 2400. MEA01 must be present. |  |
| $\times$ x222.393.2400.MEAO1.020 | MEAO1 |  |  |  |  |  |  |  | 999 | R | 11403 $\mathbf{~ 7 ~ 7 ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2400. MEAO1 must be valid values. | $2400 . M E A 01$ must be valid values. |  |
| X222.393.2400.MEAO2.010 | MEAO2 | Measurement Qualifier | 10 | ${ }^{1.3}$ | R |  |  | HT, R1, R2, R3, R4 | 999 | R | IK403 = 1: "Required Data Element K403 Missing" | 2400. MEA02 must be present. | 2400. MEAO2 must be present. |  |
| X222.393.2400.MEAO2.020 | MEAO2 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7."Invalid Code Value" | $2400 . \mathrm{MEAO} 2$ must be valid values. | $2400 . M E A 02$ must be valid values. |  |
| х222.393.2400.MEAO3.010 | MEAO3 | Test Result | R | 1-20 | R |  |  |  | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2400.MEA03 must be present. | 2400. MEAO3 must be present. |  |
| X222.393.2400.MEAO3.020 | MEAO3 |  |  |  |  |  |  |  | 999 | R | IK403 =6: "Invalid Character in Data | 2400.MEAO3 must be numeric. | 2400. MEAO3 must be numeric. |  |
| Х222.393.2400.MEAO3.025 | MEAO3 |  |  |  |  |  |  |  | 999 | E | 1K403 =5: "Data Element Too Long" | 2400. MEA03 must be $>=0$ and $<=99.9 .9$ | 2400. MEAO3 must be $>=0$ and $<=99.9 .9$ | 03/31: Medicare specific linitation. Companion Guide Note needed. |

${ }_{\text {Professional Edits }}^{837}$

| Edit Reference | Segment or Element | Description | ID | Min. <br> Max. | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.393.240..MEA03.030 | MEAO3 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: "Acknowledgement/Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 300 "Lab/test report/notes/results" |  |  |  |
| X222.393.2400.MEAO3.040 | MEAO3 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 697: "Invalid Decimal Precision" CSC 300 "Lab/test report/notes/results | $2400 . M E A O 3$ is sinited to 1 decimal position. | 2400.MEAOO is limited to 1 decimal position. | 03/31: Medicare specific limitation. Companion Guide Note needed. |
| X222.393.2400.MEA04.010 | MEAO4 | COMPOSITE UNIT OF MEASURE |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.393.2400.MEA05.010 | MEAO5 | Range Minimum | R | 1-20 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.393.2400.MEA06.010 | MEA06 | Range Maximum | R | $1-20$ | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.393.240.MEA07.010 | MEAO7 | Measurement Significance Code | ${ }^{10}$ | 2.2 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.393.240., MEA08.010 | MEAOB | Measurement Atribute Code | 10 | 2.2 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.393.2400.MEA09.010 | MEAO9 | Surfacelayerlposition Code | 10 | 2.2 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.393.240.MEA10.010 | mealo | Measurement Method or Device | 10 | 2-4 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.393.2400.MEA11.010 | MEA11 | Code List Quaifier Code | $1{ }^{1}$ | ${ }^{1-3}$ | NU |  |  |  | 999 | E | 1 K403 $=1010 . "$ "mplementation "Not Usear" Ilemen Present | Must not be present. | Must not be present. |  |
| X222.393.240.MEA12.010 | MEA12 | Industry Code | An | 1-30 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times 222.395 .2400 . C N 1.010$ | CN1 | Contractinformation |  | 1 | s | 2400 |  |  | 999 | E | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | Must not be present. | Must not be present. | 01/20: Companion Guide Note needed. <br> Medicare does not support post-adjudicated claim processing (a non-HIPAA mandated use) acessing (a non-HIPAA mandated use). |
| X2222.397.2400.REF.010 | REF | $\begin{aligned} & \text { REPRICED LINE ITEM } \\ & \text { REFERENCE NUMBER } \\ & \hline \end{aligned}$ |  | 1 | s | 2400 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only one iteration of 2400.REF with REF01 = "9B" is allowed. | Only one iteration of 2400. REF with REF01 $=$ " 9 B " is allowed. | Pass through, symtax only. |
| X222.397.240.REEF01.010 | REF01 | Reference Identification Qualifier | 10 | ${ }^{2.3}$ | R |  |  | 98 | ${ }^{999}$ | R |  | 2400. REF01 must be present. | $2400 . \mathrm{REF01}$ must be pesent. |  |
| X222.397.240.R.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | $2400 . R E F 01$ must be "98". | $2400 . R E F 01$ must be "98". |  |
| X222.397.2400.REFFO2.010 | REFO2 | Repiced Line tem Reference Number | AN | ${ }^{1.50}$ | R |  |  |  | 999 | R | 1 K003 1. "Required Data Element | 2400. REF02 must be present. | 2400. REFO2 must be present. |  |
| X222.397.2400.REFO2.020 | REFO2 |  |  |  |  |  |  |  | 999 | R |  | ${ }^{2} 200$. REFO2 must contain at least one non- |  |  |
| X222.397.240.REEF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | \|K403 5 5: "Data Element Too Long" | 2400. REFO2 must be $1-50$ characters. | 2400. REFF2 must be 1-50 characters. |  |
| X222.397.2400.REFO2.040 | REF02 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ |  |  |  |  |
| X222.397.2400.REFFO2.050 | REFO2 |  |  |  |  |  |  |  | 999 | R |  | 2400. REFO2 must be populated d with accepede AN characters. | $\underbrace{240 \text {. }}_{\text {accerente AN characacers. }}$ |  |
| X222.397.2400.REF02.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.397.2400.REFO3.010 | REF03 | Descripion | ${ }^{\text {AN }}$ | 1-80 | vU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.397.2400.REFF04.010 | REFO4 | REFERENCE IDENTIFIER |  |  | vu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.398.2400.REF. 010 | REF | ADJUSTED REPRICED LINE ITEM REFERENCE NUMBER |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maxim Maximum Use" | Only one iteration of $\mathbf{2 4 0 0}$. REF with REF01 = "9D" is allowed. | Only one iteration of 2400.REF with REF01 = "9D" is allowed. | Pass through, symtax only. |
| X222.398.2400.REF01.010 | REF01 | Reference Identification Qualifier | ID | ${ }^{2.3}$ | R |  |  | 9 D | ${ }^{999}$ | R | \|K403 = : "Required Data Element Missina" Man | 2400. REF01 must be pesent. | $2400 . R E F 01$ must be pesent. |  |
| X222.398.2400.REFFO1.020 | REF01 |  |  |  |  |  |  |  | 999 | R | K4003 $=7$ " "Ivalid Code Value" | 2400.REF01 must be "9D". | 2400. REF01 must be "90". |  |
| X222.398.2400.REFO2.010 | REF02 | Adjusted Repiced Line tem Reference Number | ${ }^{\text {an }}$ | 1.50 | R |  |  |  | 999 | R |  | 2400. REFO2 must be present. | 2400. REFO2 must be present. |  |
| X222.398.240.REEFO2.020 | REFO2 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | $2400 . R E F 02$ must contain at least one non- space character. |  |  |
| X222.398.240.REEFO2.030 | REFO2 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | 2400. REFO2 must be 1-50 characters. | 2400 REFO2 must be 1-50 characters. |  |
| X222.398.2400.REFO2.040 | REFO2 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ |  |  |  |  |
| х222.398.2400.REFFO2.050 | REF02 |  |  |  |  |  |  |  | 999 | R |  | 2400. REFO2 must be populated with accepted $A N$ characters. | ${ }^{2400 . R E F O 2 \text { must be populated with }}$ |  |


| Edit Reference | Segment or Element | Description | 10 | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\underset{\text { Leopeat }}{\substack{\text { Lepen }}}$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { a999/ } \\ 277 c \mathrm{~A} \end{gathered}$ | $\underset{\text { Acceptrej }}{\text { ect }}$ | Disposition / Error Code | $\underset{\text { Part B }}{\text { Proposed 5010A1 Edits }}$ | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.398.2400.REF02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.399.2400.REF03.010 | REF03 | Descripioion | AN | 1-80 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| $\times 2$ 222.398.2400.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | nu |  |  |  | 999 | E | (1203 = 10. "mplementation "N | Must not be present. | Must not be present. |  |
| х222.399.2400.REF.010 | REF | Prior authorization |  | 5 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only five iterations of 2400. REF with REF01 = "G1" are allowed. | Only five iterations of 2400. REF with REF01 = "G1" are allowed. |  |
| X222.399.2400.REFF1.010 | REF01 | Reference Idenificiation Quaifier | 10 | 2.3 | R |  |  | 61 | 999 | R | \|K4033 =1: "Required Data Elemen | $2400 . R E F 01$ must be present. | 2400. REF01 must be present. |  |
| X222.399.2400.REFF1.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2400.REF01 must be "G1". | $2400 . R E F 01$ must be "G1". |  |
| X222.399.2400.REFF2.010 | REF02 | Prior Authorization or Referral Number | an | ${ }^{1.50}$ | R |  |  |  | 999 | R |  | $2400 . \mathrm{REFO2}$ must be pesent. | $2400 . \mathrm{REF} \mathrm{F}$ must be present. |  |
| X222.399.2400.REFF0.020 | REF02 |  |  |  |  |  |  |  | 999 | R | \|14003 $=6$ :"Invalid Character in Data Element" | 2400 . $\mathrm{EFFO2}$ must contain at least one non- | 2400.REFO2 must contain at least one non- |  |
| X222.399.2400.REFFo.030 | REF02 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2400. REFO2 must be 1 - 50 characters. | 2400. REFO2 must be 1 - 50 characters. |  |
| $\times 2.22 .399 .2400$. REFO2.040 | REFO2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 252: "Entity's authorization/cerrification number" |  |  |  |
| X222.399.2400.REFF2.050 | ReFo2 |  |  |  |  |  |  |  | 999 | R | \|K403 =6: "Invalid Character in Data Element | 2400.REFO2 must be populated with | 2400 .REFO2 must be populated with |  |
| X222.399.2400.REFFO2.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.399.2400.REF03.010 | Refo3 | Descripion | AN | 1-80 | Nu |  |  |  | 999 | E | (104033 $=110$ " Implementation "Not | Must not be present. | Must not be present. |  |
| $\begin{aligned} & \begin{array}{l} \text { X222.399.2.200.REFFO4.010 } \\ \text { Edit Deactivated } \end{array} \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.399 .2400 . R$ EF 044.1010 | REF04-1 | Referencel Identifier Qualifier | 10 | 2.3 | R |  |  | 2 U | 999 | R | \|K403 $\mathbf{7}$ 7. "Invalid Code Value" | $2400 \cdot R E$ F04-1 must be "UU". | $2400 . R E F 04-1$ must be "UU". |  |
| $\times 222.399 .2400$. REF04-2.010 | REFF04-2 | Other Payer Primayy Idenitifer | an | ${ }^{1.50}$ | R |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2400. REF04-1 is present, 2400.REF04-2 must be present. | If 2400. REF04-1 is present, 2400. REF04-2 must be present. |  |
| X222.399.2400.REFO4-2.020 | REFO4-2 |  |  |  |  |  |  |  | 999 | R |  | 2400.REF04-2 must $=2333 \mathrm{~B}$.NM109 | 2400.REF04-2 must $=2333 \mathrm{~B}$.NM109 |  |
| х222.399.2400.REFFO4.3.010 | REFF04.3 | Reference Identification Quaifier | 10 | 2.3 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.399.2400.REFF044.010 | REFO4 4 | Reference Identificaion | an | ${ }^{1.5}$ | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.399.2400.REFO4-5.010 | REF04.5 | Reference Identification Qualifier | 10 | 2.3 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.399.2400.REFO4-6.010 | REFO4.6 | Reference Idenififation | AN | 1.50 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.401.2400.REF. 010 | REF | LINE TTEM CONTROL NUMBER |  | 1 | s | 2400 |  |  | 999 | R |  | Only one iteration of 2400. REF with REF $=1=$ " 6 R is is allowed. | Only one iteration of 2400. REF with REF $=1=$ " 6 R is is allowed. |  |
| X222.401.2400.REFF0.010 | REF01 | Reference Identification Qualifier | 10 | ${ }^{2.3}$ | R |  |  | 6R | 999 | R |  | $2400 . \mathrm{REFF01}$ must be present. | 2400 REFF01 must be present. |  |
| X222.401.2400.REFF1.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2400.REF01 must be "6R". | $2400 . R E F 01$ must be "6R". |  |
| X222.401.2400.REFF2.010 | REFO2 | Line Item Control Number | an | 1.50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | $2400 . \mathrm{REFO2}$ must be pesent. | ${ }^{2400 . R E F 02 ~ m u s t ~ b e ~ p e s e s e n t . ~}$ |  |
| X222.401.2400.REFF2.020 | REFO2 |  |  |  |  |  |  |  | 999 | R | IK403 $=6$ : "Invalid Character in Data Element" | 2400.REF02 must contain at least one nonspace character. | 2400.REF02 must contain at least one nonspace character. |  |
| $\times 222.401 .2400$. REFF2.030 | ReFor |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400 .REF02 must be 1 - 30 characters. | 2400 .REFO2 must be 1 - 30 characters. | Implementaion Limitaion |
| $\times 2$ 22.401.2400.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 584: "Line Item Control Number" |  |  |  |
| X222.401.2400.REFF2.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. | 2400.REF02 must be populated with accepted AN characters. |  |
| X222.401.2400.REF02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 22.401 .2400$. REFF2.070 | REF02 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information. CSC 584: "Line Item Control Number" | 2400.REF02 must be unique within a single iteration of 2300.CLM01. | 2400.REF02 must be unique within a single iteration of 2300.CLM01. |  |
| x222.401.2400.REF03.010 | REFO3 | Descripion | an | 1.80 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. | Must not be present. |  |
| $\times 222.401 .2400 . \mathrm{REF} 04.010$ | REFO4 | REFERENCE IDENTIFIER |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.403.2400.REF. 010 | REF | MAMMOGRAPHY CERTIICATION NUMBER |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400 .REF with REF01 = "EW" is allowed. | Only one iteration of 2400 .REF with REF01 = "EW" is allowed. |  |


| Edit Reference | $\begin{aligned} & \text { Segment or } \\ & \text { Element } \end{aligned}$ | Description | 10 | Min <br> max. | $\begin{array}{\|l\|l} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\substack{\text { Loop } \\ \text { Repeat }}$ | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { Th11 } \\ \substack{9997 \\ 277 c a} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | Proposed 5010A1 Edits Part B | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.403.2400.REFF01.010 | ReFor | Referencei identification Quaifier | 10 | 2-3 | R |  |  | Ew | ${ }^{999}$ | R |  | 2400. REF01 must be pesent. | ${ }^{2400 . R E F 01 ~ m u s t ~ b e ~ p e r e s e n t . ~}$ |  |
| X222.403.240.REEF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7."Invalid Code Value" | 2400.REF01 must be "EW". | 2400.REF01 must be "EW". |  |
| X222.403.240.REEF02.010 | REFO2 | Mammography Certification Number | AN | 1.50 | R |  |  |  | 999 | R | K403 =1: "Required Data Element Missing" | $2400 . \mathrm{REF} \mathrm{F} 2$ must be present. | $2400 . \mathrm{REF} \mathrm{F}$ 2 must be present. |  |
| X222.403.2400.REFO2.020 | REF02 |  |  |  |  |  |  |  | 999 | R |  |  | 240. REFO2 must contain at least one non- space character. |  |
| X222.403.2400.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" |  | 2400. REFO2 must be 1-50 characeres. |  |
| X222.403.2400.REFFO2.040 | REF02 |  |  |  |  |  |  |  | 277 | T |  |  |  | 12-9-11 New CSC requested for "Mammography Certification number" |
| X222.403.2400.REFFO2.050 | REFO2 |  |  |  |  |  |  |  | 999 | R |  | 2400.REF02 must be populated with accepted AN characters. | $\underbrace{240 \text {. }}_{\text {accerente AN characteres. }}$ |  |
| X222.403.2400.REFO2.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.403.240.REFF02.070 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 252: "Entity's <br> authorization/certification number" <br> EIC: MSC "Mammography Screening Center" <br> Center" | 2400.REF02 must be a valid Mammography Certification Number. |  | Valid MQSA reference must be available for this edit. <br> 12-9-11 New CSC requested for "Mammography Certification number" |
| X222.403.2400.REF03.010 | Refo3 | Descripion | AN | 1-80 | Nu |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| X222.403.2400.REF04.010 | REF04 | REFERENCE IIENTIFIER |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present | Must not be present. | Must not te present. |  |
| ×222.404.2400.REF. 010 | REF | $\begin{gathered} \text { CLINICAL LABORATORY } \\ \text { IMPROEMENT AMENDMENT } \\ \text { (CLIA) IDENTIFICATION } \end{gathered}$ |  | 1 | s | 2400 |  |  | 999 | R | $11304=5:$ : Segment Exceeds Maximum Use" | Only one iteration of $\mathbf{2 4 0 0}$.REF with REF01 = " X 4 " is allowed. | Only one iteration of 2400 .REF with REF01 = "X4" is allowed. |  |
| X222.404.2400.REF01.010 | REF01 | Reference Identification Quaifier | 10 | ${ }^{2.3}$ | R |  |  | x4 | 999 | R | ${ }^{1 \text { K4033 }}$ 1: "Required Data Element | 2400.REF01 must be present. | $2400 . \mathrm{REF01}$ must be present. |  |
| X222.404.2400.REFF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | $2400 . R E F 01$ must be "X4". | $2400 . \mathrm{REF01}$ must be "X4". |  |
| X222.404.240.REEFO2.010 | ReFoz | Clinical Laboratory Improvement Amendment Number | an | 1.50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400. REF02 must be present. | $2400 . R E F 02$ must be present. |  |
| X222.404.2400.REFO2.020 | REFO2 |  |  |  |  |  |  |  | 999 | R |  | 2400. REFO2 must contain at least one non- Ssace character. | 240.REFO2 must contain at least one non- space character. |  |
| X222.404.240.REEF02.030 | REFO2 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | $2400 . R E F$ O2 must be 1.50 characters. | 2400. REFO2 must be 1.50 characters. |  |
| x222.404.240.REEFO2.040 | REF02 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 544: "Clinical Laboratory <br> mprovement Amendment" |  |  |  |
| X222.404.2400.REF02.050 | Refor |  |  |  |  |  |  |  | 999 | R |  |  | 2400.REFO2 must be populated with accented AN characters. |  |
| X222.404.2400.REF02.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.404.2400.REFO3.010 | REF03 | Descripion | AN | 1.80 | NU |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. | Must not te present. |  |
| X222.404.240.REEF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.405.2400.REF. 010 | REF | REFERRING CLIIICAL LABORATORY IMPROEMENAMENDMENT ICLIATACAILTYY IDENTIFICATION |  | 1 | s | 2400 |  |  | 277 | c | Acknowiedgement/Rejected for nvalid Information.. CSC 544: "Clinical Laboratory Improvement Amendment ${ }^{\prime \prime}$ |  | 2400.REF with REF01 = "F4" must be present when 2400.SV101-3, SV1014, SV101-5 or SV101-6 are $=$ " 90 ", |  |
| х222.405.2400.REF.020 | REF |  |  |  |  |  |  |  | 999 | R | ${ }^{11304=5: 5 \text { " } \text { Segment Exceeds }}$ | Only one iteration of 2400.REF with REF01 = "F4" is allowed | Only one iteration of 2400.REF with REF01 = "F4" is allowed |  |
| X222.405.2400.REFF01.010 | ReFol | Reference Identification Qualifier | ID | 2-3 | R |  |  | F4 | 999 | R | IK403 = 1: "Required Data Element | 2400. REF01 must be present. | $2400 . R$ FF01 must be present. |  |
| X222.405.240.REEF01.220 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2400. REF01 must be "F4". | 2400.REF01 must be "F4". |  |
| X222.405.240.REEFO2.010 | REF02 | Referring CLIA Number | AN | 1.50 | R |  |  |  | 999 | R | \|K403 1: "Required Data Element | 2400. REF02 must be present. | $2400 . \mathrm{REFO2}$ must be present. |  |
| X222.405.2400.REFFO2.020 | REFO2 |  |  |  |  |  |  |  | 999 | E | 1K403 =5: "Data Element Too Long" | 2400 .REFFo2 must be 1.50 characters. | 2400 .REFFor must be 1-50 characters. |  |

$\stackrel{837-}{\text { - }}$

| Edit Reference | Segment or Element | Description | ID | Min <br> max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $5010 A 1$ Values | $\begin{gathered} \text { Ta11 } \\ \text { 999/ } \\ 277 c \mathrm{CA} \end{gathered}$ | $\begin{array}{\|c} \text { Acceptrei } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\underset{\text { Prat B }}{\text { Proposed 5010A1 Edits }}$ | $\underset{\substack{\text { Proposed 501001 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.409.2400.REFF2.030 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information.... <br> CSC 512: "Length invalid for receiver's application system" CSC 544: "Clinical Laboratory improvement Amendment" |  |  |  |
| $\times 2$ 222.405.2400.REF02.040 | REFO2 |  |  |  |  |  |  |  | 999 | R |  | 2400.REFO2 must be populated with accented $A N$ characters. | 2400.REFO2 must be populated with accented AN characters. |  |
| X222.405.2400.REF02.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.400.2400.REFF20.060 | REFO2 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one non- space character. | 2400.REF02 must contain at least one non- space character. |  |
| X222.405.2400.REF03.010 | REF03 | Desscripion | AN | 1-80 | nu |  |  |  | 999 | E | \|K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.405.2400.REF04.010 | REF04 | REFERENCE IIENTIFIER |  |  | N/ |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.400.2400.REF. 010 | REF | IMMUNIZATION BATCH NUMBER |  | 1 | s | 2400 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2400.REF with REF01 = "BT" is allowed. | Only one iteration of 2 200.REF with REFFO= $=$ BT" is allowed. |  |
| X222.400.2400.REF01.010 | REF01 | Reference Idenification Qualifier | 10 | 2-3 | R |  |  | ${ }^{\text {BT }}$ | 999 | R | (kase 1: "Required Data Element | 2400. REF01 must be present. | $2400 . \mathrm{REF} 01$ must be peresent. |  |
| X222.406.2400.REFF1.020 | REF01 |  |  |  |  |  |  |  | 999 | R | $11403=7$ : "lvalid Code Value" | $2400 . R E F 01$ must be "BT". | 2400. REF01 must be "BT". |  |
| X222.406.2400.REFF2.010 | Refoz | Immunizaion Bach Number | AN | 1.50 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element Missing" | $2400 . \mathrm{REFO2}$ must be present. | $2400 . \mathrm{REF} \mathrm{F}$ 2 must be present. |  |
| X222.400.2400.REFFo2.020 | ReFor |  |  |  |  |  |  |  | 999 | R |  | $240 . \mathrm{REFO2}$ must contain at least one non- space character. | 240. REFO2 must contain at least one non- space charactert. |  |
| X222.400.2400.REFF2.030 | REFO2 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | 2400. REFO2 must be 1.50 characters. | 2400 .REFFo2 must be 1 - 50 characters. |  |
| $\times 222.406 .2400$. REFFo2.035 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 512: "Length invalid for receiver's application system" Number" |  |  |  |
| X222.406.2400.REFF2.040 | REFO2 |  |  |  |  |  |  |  | 999 | R |  | $2400 . R E$ Ero2 must be populated with accented $A N$ characters. | 2400. REFO2 must be populated with accepeed $A N$ characters. |  |
| ×222.406.2400.REFO2.050 | REF02 |  |  |  |  |  |  |  | 277 | T | Cscc A7 <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 576: "Immunization Batch Number |  |  |  |
| X222.40.2400.REF03.010 | REF03 | Descripion | AN | ${ }^{1.80}$ | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.406.2400.REFF0.010 | ReFo4 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 99 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X2222.407.2400.REF.010 | REF | Referral number |  | 5 | s | 2400 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only five iterations of 2400.REF with REF01 $=$ "9F" are allowed. | Only five iterations of 2400.REF with REF01 = "9F" are allowed. |  |
| X222.407.2400.REF00.010 | REF01 | Reference Idenification Qualifier | 10 | 2.3 | R |  |  | 9 F | 999 | R | (ka03 = 1: "Required Data Element | 2400. REF01 must be present. | $2400 . \mathrm{REF01}$ must be peesent. |  |
| X222.407.2400.REFF0.1.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 7 7: "Invalid Code Value" | 2400.REF01 must be "9F". | 2400.REF01 must be "9F". |  |
| X222.407.2400.REFFO.010 | REFO2 | Referral Number | AN | 1.50 | R |  |  |  | ${ }^{999}$ | R | K403 = 1: "Required Data Element | 2400.REFO2 must be present. | $2400 . \mathrm{REF} \mathrm{F}$ must be present. |  |
| X222.407.2400.REFFo.020 | REFO2 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one non- space character. | Stin 240. REFO2 must contain at least one non- |  |
| X222.407.2400.REFFo..030 | REFO2 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | 2400. REF02 must be 1.50 characters. | 2400 .REFO2 must be 1-50 characters. |  |
| $\times 222.407 .2400$. REFO2.035 | REFO2 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information. CSC 512: " application system" CSC 761: "Entity's referral number" EIC: PR "Paver" |  |  |  |
| X222.407.2400.REFF0.040 | REFO2 |  |  |  |  |  |  |  | 999 | R |  | 2400.REF02 must be populated with accepted AN characters. | 2400.REFO2 must be populated with accented AN characters. |  |
| X222.407.2400.REF02.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.407.2400.REFFO.010 | REFO3 | Description | AN | 1.80 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.407.2400.REF04.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.407 .2400 . R$ EF044.010 | REF04-1 | Reference Identifier Qualifier | 10 | 2.3 | R |  |  | 2 U | 999 | R | \|K403 $=7$ : "Invalid Code Value" | $2400 . \mathrm{REF04-1}$ must be "UU". | $2400 . \mathrm{REF04-1}$ must be "2U", |  |
| $\times$ X222.407.2400.REF04-2.010 | REFO4-2 | Other Payer Primay Idenitifer | AN | 1.50 | R |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data <br> Element Missing" |  |  |  |
| x222.407.2400.REFFO-2.020 | REF04-2 |  |  |  |  |  |  |  | 999 | R | \|K403 $=122:$ "Implementation Pateen Match Falure" | 2400.REF04-2 must = 23308.NM109 | 2400.REF04-2 must $=2330 \mathrm{~B}$. .NM109 |  |
| X222.407.2400.REFFO43.010 | REFF04.3 | Reference Identification Qualifier | ID | ${ }^{2 \cdot 3}$ | Nu |  |  |  | 999 | E | (12403 =10: "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.407.2400.REFO4-4.010 | REF04-4 | Reference Identificaion | AN | 1.50 | Nu |  |  |  | 999 | E | (K403 =10: "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.407.2400.REFO4-5.010 | REF04.5 | Reference Idenificiation Qualifier | 10 | 2.3 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.407.2400.REFF4-6.010 | REF04.6 | Reference Idenififation | an | 1.50 | NU |  |  |  | 999 | E | (12403 =10: "Implementration "Not | Must not be present. | Must not be present. |  |


| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { Min. } \\ \hline \end{gathered}$ Max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.409.2400.AMT. 010 | Amt | Sales tax amount |  | 1 | s | 2400 |  |  | 999 | R |  | Only one iteration of 2400.AMT with AMTOI = ${ }^{\text {Tr is allowed. }}$ | Only one iteration of 2400.AMT with AMT01 $=T T T$ is allowed. | 06/04: Pass through, syntax only |
| X222.409.2400.AMT01.010 | Амто1 | Amount Quaifier Code | 10 | ${ }^{1-3}$ | R |  |  | T | 999 | R | (ka03 =1:"Requited Data Element | $24000 . \mathrm{AMTO1}$ must be pesent. | $2400 . A n T 01$ must be pesent. |  |
| X222.409.2400.AMTO1.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2400. AMTO1 must be "T". | 2400 AmTO1 must be "T". |  |
| X222.409.240.AмגTo2.010 | Амто2 | Sales Tax Amount | R | ${ }^{1-18}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400. AmTO2 must be present. | 2400. AmT02 must be present. |  |
| X222.409.240.AмMTо2.020 | Amто2 |  |  |  |  |  |  |  | 999 | R | (K403=6:"Invalid Charactere in Data | 2400. AMTO2 must be numeric. | 2400. AmTo2 must be numeric. |  |
| X222.409.240.AAMTO2.030 | Aмто2 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2400.AMTO2 Must be < $=99.999 .99$. | 2400. AMTO2 Must bee $<=99.999 .99$. |  |
| X222.409.2400.AMTO2.040 | Amто2 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| X222.409.2400.AMTO2.050 | Amто2 |  |  |  |  |  |  |  | 277 | T |  | 2400.AMT02 is limited to 0,1 or 2 decimal positions. | 2400.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| X222.409.240.Aм4то3.010 | ${ }_{\text {Amто }}$ | Credituebit Flag Code | 10 | 1-1 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.410.2400.AMT.010 | AMT | postage claimed amount |  | 1 | s | 2400 |  |  | ${ }^{999}$ | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only one iteration of 2400.AMT with AMT01 = "F4" is allowed. | Only one iteration of 2400.AMT with AMT01 = "F4" is allowed. | 06/04: Pass through, syntax only |
| X222.410.2400.AMT01.010 | Амто1 | Amount Quaifier Code | 10 | 1-3 | R |  |  | F4 | 999 | R | (ka03 i: 1 "Required Data Element | $24000 . \mathrm{AMTO1}$ must be peesent. | 2400 AmT01 must be pesent. |  |
| X222.410.2400.AMTO1.020 | AmT01 |  |  |  |  |  |  |  | 999 | R | IK403 $=7$ :"Invalid Code Value" | 2400.AMT01 must be "F4". | 2400.AMT01 must be "F4". |  |
| X222.410.2400.AMTO2.010 | Amто2 | Postage Claimed Amount | R | 1-18 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | $2400 . A M T 02$ must be present. | 2400. AmTO2 must be present. |  |
| X222.410.2400.Aмто2.020 | Амто2 |  |  |  |  |  |  |  | 999 | R | IK403 =6: "Invalid Character in Data | 2400. AMTO2 must be numeric. | 2400. AmTo2 must be numeric. |  |
| X222.410.2400.AMT02.025 | Aмто2 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.AMTO2 Must be < $=99.999 .99$. | 2400. AMTO2 Must be e $=99.999 .99$. |  |
| X222.410.2400.AMTO2.030 | Amто2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 617: "Postage Claimed Amount" |  |  |  |
| X222.410.2400.Anto2.040 | Amто2 |  |  |  |  |  |  |  | 277 | T | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information. CSC 617. "Pivaid Decimal Precision" CSC 617: "Postage Claimed Amount" | 2400.AmToz is isinited to 0,1 or 2 decimal postions. | 2400.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| х222.410.2400.Aмт03.010 | Амтоз | Credivoebit Flag Code | 10 | ${ }^{1.1}$ | NU |  |  |  | ${ }^{999}$ | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.411.2400.к3.010 | к3 | FILE INFORMATION |  | 10 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of 2400.K3 are allowed. | Only ten iterations of 2400.K3 are allowed. |  |
| X222.411.2400.K301.010 | к301 | Fixed Format Itformation | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.1301 must be present. | $2400 . \mathrm{K} 301$ must be present. |  |
| X222.411.2400.K301.020 | к301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.1301 must be 1-80 characters | $2400 . \mathrm{K} 301$ must be 1-80 charcacters |  |
| X222.411.2400.K301.030 | к301 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 569: "Fixed Format Information" |  |  |  |
| $\times$ х222.411.2400.K301.040 | к301 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { Kata3 = } 6 \text { " "Ivaid Character in Data } \\ & \text { Element: } \end{aligned}$ | ${ }_{A N}^{240 . .6301 \text { must be populated with accepted }}$ | 2400.3301 must be populated with acceperted AN characters. |  |
| $\begin{aligned} & \begin{array}{l} \text { x222.411.2400.K301.050 } \\ \text { Edit Deactivated } \end{array} \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.411 .2400 .1301 .060$ | K301 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | $\begin{aligned} & \text { 2400.K301 must contain at least one non- } \\ & \text { space character. } \end{aligned}$ | $\begin{aligned} & \text { 2400.K301 must contain at least one non- } \\ & \text { space character. } \end{aligned}$ |  |
| X222.411.2400.K302.010 | к302 | Record Format Code | 10 | 1-2 | vu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х2222.411.2400.K303.010 | кзоз | $\underset{\text { MEASURE }}{\text { COMPOSTITE UNIT OF }}$ |  |  | NU |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\begin{aligned} & \text { X222.413.2400.NTE. } 010 \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.413.2400.NTE.020 | NTE | LINE NOTE |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.NTE with NTE01 = "ADD" or "DCP"is allowed. | Only one iteration of 2400. NTE with NTE01 = "ADD" or "DCP" is allowed. |  |
| X222.413.2400.NTE01.010 | NTE01 | Note Reference Code | 10 | ${ }^{3.3}$ | R |  |  | ADD, DCP | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.NTE01 must be present. | $2400 . \mathrm{NTE01}$ must be present. |  |
| X222.413.2400.NTE01.020 | NTE01 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2400 .NTE01 must be valid values. | 2400 .NTE01 must be valid values. |  |
| X222.413.2400.NTE02.010 | NTE02 | Line Note Text | an | 1.80 | R |  |  |  | ${ }^{999}$ | R | (Kissing:" | 2400 .NTE02 must be present. | 2400 .NTE02 must be present. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. Max. | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \\ \hline \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \text { cog } \\ \text { 277CA } \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.413.2400.NTE02.020 | NTE02 |  |  |  |  |  |  |  | 999 | R | ${ }^{1 K 203=66 ": " I n v a l i d ~ C h a r a c t e r e r ~ i n ~ D a t a ~}$ | ${ }^{2} 200 . \mathrm{NTEO2}$ must contain at least one non- | ${ }_{\text {lin }}^{2400 . N T E O 2 \text { must contain at least one non- }}$ |  |
| x222.413.240.NTEO2.030 | NTE02 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2400 .NTEO2 must be 1-80 characters. | 2400 . NTE02 must be 1 - 80 characters. |  |
| х222.413.2400.NTE02.040 | nTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid nformation..." CSC 512: "Length invalid for receiver's application system SC 586: "Line Note Text" |  |  |  |
| х222.413.2400.NTE02.050 | NTE02 |  |  |  |  |  |  |  | 999 | R |  | $2400 . \mathrm{NT}$ O2 must be populated with | $2400 . \mathrm{NT}^{2}$ O2 must be populated with accented AN characters |  |
| X222.413.2400.NTE02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.414.2400.Nте.010 | NTE | THIRD PARTY ORGANIZATION NOTE |  | 1 | s | 2400 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2400.NTE with NTE01 = "TPO" is allowed. | Only one iteration of 2400.NTE with NTE01 = "TPO" is allowed. | Pass through, symtax only. |
| x222.414.2400.NTE01.010 | NTE01 | Third Party Organizaion Notes | 10 | ${ }^{3} 3$ | R |  |  | тPO | 999 | R | (Ka03 1 1."Required Data Element | 2400. NTE01 must be present. | 2400 .NTE01 must be present. |  |
| X222.414.2400.NTE01.020 | NTE01 |  |  |  |  |  |  |  | 999 | R | \|K403 =7:"Invalid Code Value" | $2400 . \mathrm{NTE01}$ mus t be "TPO". | 2400. NTE01 must be "TPO". |  |
| X222.414.2400.NTE02.010 | nteoz | Line Note Text | AN | 1.80 | R |  |  |  | 999 | R | ${ }^{1 \text { K403 }}$ = 1: Required Data Element Missing" | 2400. NTE02 must be present. | 2400. NTE02 must be pesent. |  |
| $\times \times 222.414 .2400$. NTE02.020 | NTE02 |  |  |  |  |  |  |  | 999 | R | Missing Elesement:"Invalid Character in Data Elemen | $2400 . \mathrm{NTEO2}$ must contain at least one non- | $2400 . \mathrm{NTEO2}$ must tontain at least one non- |  |
| x222.414.2400.NTEO2.030 | NTE02 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2400 . NTE02 must be 1 - 80 characters. | 2400 . NTE02 must be 1 - 80 characters. |  |
| х222.414.2400.NTE02.040 | NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: Acknowledge CSC 512:..." application system" CSC 586: "Line Note Text" EIC: TU "Third Party Repricing Oramization (TPO)" |  |  |  |
| х222.414.2400.NTE02.050 | NTE02 |  |  |  |  |  |  |  | 999 | R |  | $2400 . \mathrm{NT}$ O22 must be populated with accepied AN charcters. | $2400 . \mathrm{NTEO2} \mathrm{must} \mathrm{be} \mathrm{populated} \mathrm{with}$ accented AN characters. |  |
| X222.414.2400.NTE02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.415.2400.PS 1.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.415.2400.PS1.015 | PS1 | PURCHASED SERUICE INFORMATION |  | 1 | s | 2400 |  |  | 277 | c | CSCC A8: <br> Acknowledgement/Rejected for relational field in error." CSC 21: "Mis CSC 124: "Entity's name, address, phone and id number. " EIC: QB "Purchased Service Provider" | If 24208 . NM1 with NM101 $=$ "QB" is present, $2400 . \mathrm{PS1}$ must be present. | If $2420 \mathrm{~B} . \mathrm{NM} 1$ with $\mathrm{NM101}=$ "QB" is present, $2400 . \mathrm{PS} 1$ must be present. | 02/03: Reference CR 6362 for Provider ID instructions. |
| x222.415.2400.P51.020 | PS1 |  |  |  |  |  |  |  | ${ }^{999}$ | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.P51 is allowed. | Only one iteration of $2400 . \mathrm{PS1}$ is allowed. |  |
| X222.41.2400.PS 101.010 | PS101 | Purchased Senice Provider Identifier | AN | 1.50 | R |  |  |  | 999 | R | 1 Kinsin 1 :"Required Data Element | 2400.PS101 must be present. | $2400 . \mathrm{PS} 101$ must be present. |  |
| X222.415.2400.PS101.020 | Ps101 |  |  |  |  |  |  |  | 999 | R | 1 KSo3 $=12:$ :"Implementation Patem Math Failure" | ${ }_{2420 B . R E F O 2}^{2400 . \text { PS101 }}$ must $=24208$.NM109 or |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.415 .2400$. PS 102.005 | PS102 | $\begin{aligned} & \text { Purchased Service Charge } \\ & \text { Amount } \end{aligned}$ | R | 1-18 | R |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2400.PS102 must be > 0 and <= 99,999.99. | 2400.PS 102 must be > 0 and << 99.999 .99. |  |
| $\times 222.415 .2400 . \mathrm{PS} 102.010$ | PS102 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid nformation..." <br> CSC 512: "Length invalid for receiver's pplication system" <br> CSC 469: "Purchase Service Charge" |  |  |  |
| X222.415.2400.PS 103.010 | Ps103 | State or Prouince Code | 10 | 2-2 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.416.2400.HCP.005 | нсР | LINE PRICING REPRICING INFORMATION |  | 1 | s | 2400 |  |  | 277 | ${ }^{+}$ | cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." CSC 732: "Information submitted guidelines." CSC 64: "Re-pricing information." | Segment must not be present. | Segment must not te present. |  |

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Professional Edits

| Edit Reference | Segment or <br> Elemen | Descripion | ID | $\min _{\text {max. }}$ | $\begin{array}{\|l\|l\|l\|l} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | $\begin{aligned} & \text { 5010a1 } \\ & \text { values } \end{aligned}$ | $\begin{gathered} \text { TAA11/ } \\ \substack{997 \\ 27 T C A} \end{gathered}$ | $\begin{array}{\|c} \text { Acceptree } \\ \text { ect } \end{array}$ | Disposition/Error Code | Proposed 5010 A1 Edits Part B Part B | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{aligned} & \text { X222.416.2400.HCP. } 010 \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X222.416.2400.HCP01.010 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2400.HCP02.030 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2400.HCPO3.010Edit Deacivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2400.HCP03.020 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.416 .2400 . H C P 04.030$ <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X222.416.2400.HCP04.040 } \\ & \text { Edit Deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2400.HCP04.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.240..HCP05.010Editi Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2400.HCP05.020 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2000.HCP06.010Edit Deacivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X222.416.2400.HCP06.020 } \\ & \text { Edit Deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2400.HCP06.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2400.HCP06.040 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2400.HCP06.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2400.HCP07.010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2400.HCP07.020Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.200...4CP07.030Edid Deactiviated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X222.416.240..HCPO8.010 } \\ & \text { Edit Deacivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Descripion | 10 | Min. | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | Loop <br> Repeat | 5010A1 values | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.416.2400. HCP10.020Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l\|} \begin{array}{\|c} \text { x222.416.240..HCP12.030 } \\ \text { Edit Deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\left\lvert\, \begin{aligned} & \text { x222.416.240..HCP12.040 } \\ & \text { Edit Deacivated } \end{aligned}\right.$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.423.2410.L1N.010 | LIN | DRUG IDENTIFICATION |  | 1 | s | 2410 | 1 |  | 999 | R |  | Only one iteration of 2410.LIN is allowed. | Only one iteration of $2410 . \mathrm{LIN}$ is allowed. | 12330: Pass-through, syntax ony for Part B. |
| X222.423.240.LıN.020 | LIN |  |  |  |  |  |  |  | 277 | c |  |  | 2410. LIN must be present when 2400.SV101-1 contains default HCPCS |  |
| X222.423.2410.L1N01.010 | LIN01 | Assigned Idenification | AN | 1-20 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222A1.023.2410.LIN02.010 | LINO2 | Product or Senice ID Qualfier | ID | 2.2 | R |  |  | N4, EN, EO, HI, ON, UK, UP | 999 | R | \|K403 $=1$ : "Required Data Element Missing" | 2410.LIN02 must be present. | $2410 . L 1 \mathrm{LNO2}$ must be present. |  |
| X222.423.2410.L1N02.220 | LIN02 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | $2410 . \mathrm{LINO2}$ must be "N4". | $2410 . L$ LINO2 must be "N4". | Companion guide note needed. |
| $\times$ 222.423.2410.L1N03.010 | LINO3 | Nationa Drug Code | AN | ${ }^{1-48}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element | $2410 . \mathrm{LIN03}$ must be present. | $2410 . L 1 N 03$ must be present. |  |
| $\begin{array}{\|l\|l} \text { K222.423.2410.LINo3.020 } \\ \text { Edit Deactivaled } \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.423.2410.LIN03.025 | LIN03 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 218 NDC Number | $2410 . L 1$ No3 must be 11 byes apha-numeric | $2410 . L 1 \mathrm{NO} 3$ must be 11 byes apha-rumeic |  |
| ×222.423.2410.LIN03.030 | LIN03 |  |  |  |  |  |  |  | 277 | c | Cscc A8 <br> Acknowledgement/Rejected for esc 21 fild in error. DC number" CSC 507: "HCPCS |  | 2410.LIN03 must be valid with an associated default HCPCS code. | Valid HCPCS reference must be available for this edit. |
| ×222.423.2410.LIN03.040 | LINO3 |  |  |  |  |  |  |  | 277 | c |  |  | 2410. LIN03 must be valid with an associated default HCPCS code with the value of "Oral Cancer". | Valid HCPCS reference must be available for this edit. |
| X222.423.2410.L1N04.010 | LIN04 | ProductSerice ID Qualifer | 10 | 2.2 | NU |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.L1N05.010 | LINO5 | ProductService ID | An | 1.48 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.L1N06.010 | LINO6 | ProductSenice ID Quaifier | $1{ }^{10}$ | 2-2 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN07.010 | LIN07 | Productserice ID | AN | ${ }^{1-48}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN08.010 | LINO8 | Producusenice ID Qualifer | 10 | 2-2 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.423.2410.L1N09.010 | LIN09 | ProductSerice ID | AN | 1-48 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN10.010 | LIN10 | ProductSerice ID Qualifer | 10 | 2.2 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN11.010 | LIN11 | Productsenice ID | ${ }^{\text {AN }}$ | 1.48 | NU |  |  |  | ${ }^{999}$ | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.423.2410.LIN12.010 | LIN12 | ProductSerice ID Qualifer | 10 | 2.2 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |

${ }_{\text {Professional Edits }}^{837}$

| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { Min. } \\ \hline \end{gathered}$ Max. | $\begin{array}{\|c\|c} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> Values |  | $\left\lvert\, \begin{gathered} \text { Acceptriej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.423.2410.LIN13.010 | LIN13 | Productserice ID | AN | 1-48 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be peresent. | Must not be present. |  |
| x222.423.2410.LIN14.010 | LIN14 | ProductSerice ID Qualifer | 10 | 2-2 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN15.010 | LIN15 | Productsenice ID | An | $1-48$ | nu |  |  |  | 999 | E | (104033 10.7 "Implementation "Not | Must not be present. | Must not be present. |  |
| x222.423.2410.L1116.010 | LIN16 | Productserice ID Qualifer | 10 | 2-2 | nu |  |  |  | 999 | E | (104033 10.0 "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN17.010 | LIN17 | ProductSerice ID | AN | 1-48 | nu |  |  |  | 999 | E | (Ka03 $=10$. "Implementation "Not | Must not be present. | Must not be present. |  |
| x222.423.2410.LIN18.010 | LN18 | ProcuctSerice ID Qualifer | 10 | 2.2 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.423.2410.LIN19.010 | LIN19 | Producuserice ID | AN | 1.48 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.423.2410.LIN2.010 | LIN20 | ProductSerice ID Qualifer | 10 | 2.2 | NU |  |  |  | 999 | E | (1/403 =10: "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN21.010 | LIN21 | Productserice ID | AN | 1.48 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN22.010 | LIN22 | Productserice ID Qualifer | ID | 2.2 | NU |  |  |  | 999 | E | (14033 $=10.0$ "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN23.010 | LIN23 | Productserice ID | AN | 1-48 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN24.010 | LIN24 | ProductSerice ID Qualifer | ID | 2-2 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN25.010 | LIN25 | Productsenice ID | AN | 1-48 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN26.010 | LIN26 | ProductSerice ID Qualifer | 10 | 2.2 | nv |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.LIN27.010 | LN27 | Productsenice ID | AN | 1-48 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" <br> Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times$ х222.423.2410.LIN22.010 | LIN28 | ProductSerice ID Qualifier | $1{ }^{10}$ | 2.2 | vu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" E <br> Used" Element Present" | Must not te present. | Must not be present. |  |
| X222.423.2410.LIN29.010 | LIN29 | Productserice ID | an | -48 | vu |  |  |  | 999 | E | (14033 $=10$. "Implementation "Not | Must not be present. | Must not be present. |  |
| x222.423.2410.LIN3.010 | Lı30 | ProductSerice ID Qualifer | ID | 2-2 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.423.2410.L1N31.010 | LN31 | Productservice ID | AN | 1-48 | nu |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110: \text { "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. | Must not be present. |  |
| $\times$ <222.426.2410.CTP. 010 | стP | drug pricing |  | 1 | R | 2410 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | It $2410 . \operatorname{LIN}$ is present, 2410. CTP must be present. | If 2410. LIN is present, 2410. CTP must be present. | Pass trough, symtax only |
| х222.426.2410.CTP.020 | стP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2410.CTP is allowed. | Only one iteration of 2410.cTP is allowed. |  |
| ×222.426.2410.CTP01.010 | CTP01 | Class of Trade Code | 10 | 2-2 | NU |  |  |  | 999 | E | IK403 $=110:$ "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.42.2410.CTPP2.010 | стP02 | Price Identifier Code | 10 | ${ }^{3.3}$ | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.42.2410.CTP03.010 | стро3 | Unit Price | R | 1-17 | nu |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. | Must not be present. |  |
| $\times 222.426 .2410 . C T$ P04.010 | CTP04 | National Drug Unit Count | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | $2410 . \mathrm{CTP04}$ must be present. | ${ }^{2410 . C T P 04 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| ×222.426.2410.CTP04.015 | стP04 |  |  |  |  |  |  |  | ${ }^{999}$ | E | \|K403 = 5: "Data Element Too Long" | 2410.CTP04 must be $>0$ and $<=9,999,999.999$. | 2410.CTP04 must be $>0$ and $<=9,999,999.999$. | 03/31: Medicare specific limitation. Companion Guide Note needed |
| х222.426.2410.CTP04.020 | стP04 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: <br> Information information <br> application system" <br> CSC 216 "Drua information" |  |  |  |
| х222.426.2410.CTP04.030 | CTP04 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information CSC 216 "Drug information" | $2410 . C$ TP04 is lisited to 3 decimal positions. | 2410.CTP04 is simited to 3 decimal positions. | 03/31: Medicare specific limitation. Companion Guide Note needed. |
| X222.426.2410.cTP05.010 Edit Deacivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 222.426 .2410 . \mathrm{CTP05-1.010}$ | CTP05-1 | Unit or Basis For Measurement <br> Code | 10 | 2.2 | R |  |  | F2, GR, ME, ML, UN | 099 | R | IK403 = 1: "Required Data Element Missing" | 2410. CTP05-1 must be present. | 2410. CTP05-1 must be present. |  |
| Х222.426.2410.CTPP55-1.020 | CTP05-1 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | $2410 . C$ CPP5 5 -1 must be valid values. | $2410 . C$ TP05-1 must be valid values. |  |
| $\times \times 22.426 .2410 . \mathrm{CTP05}$-2.010 | CTP05-2 | Exponent | R | 1-15 | NU |  |  |  | 999 | E | (14033 $=10$ " "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.426.2410.CTP95-3.010 | CTP05-3 | Mutipiper | R | 1-10 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.426.2410.CTP05-4.010 | CTP05-4 | Unit or Basis For Measurement Code | 10 | 2-2 | nu |  |  |  | 999 | E | $\begin{aligned} & \text { TK003 = 1.0:" Implementataion "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. | Must not be present. |  |
| $\times$ х22.426.2410.CTP95-5.010 | CTP05-5 | Exponent | R | 1-15 | nu |  |  |  | 999 | E | (Kene | Must not be present. | Must not be present. |  |
| X222.426.2410.cTP95.6.010 | CTP05-6 | Mutipipier | R | 1-10 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.426.2410.CTP95-7.010 | CTP05-7 | Unit or Basis For Measurement <br> Code | 1 D | 2.2 | NU |  |  |  | 999 | E | (12033 $=10.0$ "Implementataion "Not | Must not be present. | Must not be present. |  |
| ×222.426.2410.ctrp5-8.010 | CTP05-8 | Exponent | R | 1-15 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.426.2410.CTP95.9.010 | CTP05-9 | Muttipier | R | 1-10 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.426.2410.CTP05-10.010 | CTP05-10 | Unito or Basis For Measurement Code | $1{ }^{\text {d }}$ | 2.2 | nu |  |  |  | 999 | E | \|K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.426.2410.CTP05-11.010 | CTP05-11 | Exponent | R | 1-15 | no |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |


| Edit Reference | Segment or Element | Description | ID | Min <br> max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $5010 A 1$ Values | $\begin{gathered} \text { TA11 } \\ \text { Ta99 } \\ 277 C A \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\underset{\text { Prat B }}{\text { Proposed 5010A1 Edits }}$ | $\underset{\text { CED }}{\text { Proposed 5010A1 Edits }}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.426.2410.CTP05-12.010 | CTPP5-12 | Mutipipier | R | ${ }^{1-10}$ | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.426.2410.cTP95-13.010 | CTPO5-13 | Unit or Basis For Measurement Code | ID | 2-2 | nv |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.426.2410.cTP95-14.010 | CTP05-14 | Exponent | R | 1-15 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.426.2410.CTPP55-15.010 | CTP05-15 | Mutipipier | R | 1-10 | Nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.426.2410.CTP06.010 | стP06 | Price Multipier Pualifier | ID | 3.3 | nv |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.426.2410.CTP07.010 | СтP07 | Mutipipier | R | 1-10 | NU |  |  |  | 999 | E | 1 K403 $=1010 . "$ "Implementation "Not Usear" Ilemen Present | Must not be present. | Must not be present. |  |
| $\times 2$ 222.426.2410.CTP08.010 | СтP08 | Monetary Amount | R | 1-18 | NU |  |  |  | 999 | E | IK403 = I 10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times 2$ 222.426.2410.CTP09.010 | СтР09 | Basis of Unit Price Code | ID | 2.2 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.426.2410.CTP10.010 | CTP10 | Condition Value | AN | 1-10 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times 2 \times 22.426 .2410 . C$ CP11.010 | CTP11 | Multiple Price Quantit | No | 1-2 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.428.2410.REF. 010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.428.2410.REF.020 | REF | PRESCRIPTION OR COMPOUND DRUG ASSOCIATION NUMBER |  | 1 | s | 2410 |  |  | 999 | R | 1K304 $=5:$ "Segment Exceeds Maximum Use" | Only one iteration of 2410.REF is alowed. | Only one iteration of 240.REF is allowed. |  |
| ×222.428. $2410 . \mathrm{REF} .030$ | REF |  |  |  |  |  |  |  | 277 | c | cscc A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 219: "Prescription number." | If SV101-3, SV101-4,SV101-5 or SV101-6 are = "J1", 2410.REF with REF01 = "XZ" must be present. | If SV101-3, SV101-4,SV101-5 or SV101-6 are = "J1", 2410.REF with REF01 = "XZ" must be present. |  |
| X222.428.2410.REF00.010 | REF01 | Reference Idenification Quaifier | 10 | ${ }^{2.3}$ | R |  |  | vr, xz | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410. REF01 must be present. | 2410. REF01 must be present. |  |
| X222.428.2410.REF00.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ 7 ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2410. REF011 must be valid values. | $2410 . R E F 01$ must be valid values. |  |
| X222.428.2410.REFO2.010 | REFO2 | Prescripion Number | AN | ${ }^{1.50}$ | R |  |  |  | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missina" | 2410. REFO2 must be present. | 2410.REFO2 must be present. |  |
| X222.428.2410.REFF0.020 | REFO2 |  |  |  |  |  |  |  | 999 | R |  | character ceror must be at least one non-space | 241. . EFO2 must be at least one non-space character |  |
| ×222.428.2410.REFFo2.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 5 5: "Data Element Too Long" | 2410. REFO2 must be 1.50 characters. | 2410. REFO2 must be 1.50 characters. |  |
| $\times 2.22 .48 .2410 . \mathrm{REFO2} .035$ | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid nformation..." <br> CSC 512: "Length invalid for receiver's application system <br> CSC 219: "Prescription number" |  |  |  |
| X222.428.2410.REFFo2.040 | REFO2 |  |  |  |  |  |  |  | 999 | R |  | 2410.REFO2 must be populated with accepered AN characters. | 2410. REFO2 must be populated with accepete AN characters. |  |
| X222.428.2410.REF02.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\times 2$ 22.428.2410.REF03.010 | Refo3 | Descipition | AN | ${ }^{1-80}$ | NU |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. | Must not be present. |  |
| X222.428.2410.REF04.010 | REFO4 | REFERENCE IIENTIFIER |  |  | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| x222.430.2420A.NM1.010 | NM1 | RENOERING PROVIDER NAME |  | 1 | s | 2420A | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420A.NM1 is allowed. | Only one iteration of 2420A.NM1 is allowed. |  |
| X222.430.2420A.NM101.010 | NM101 | Enity Identifier Code | 1 D | ${ }^{2.3}$ | R |  |  | 82 | 999 | R | K403 =1:"Required Data Element Missing" | $2420 A . N M 101$ must be present. | 2420A.NM101 must be present. |  |
| X222.430.2420A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|14003 $=7$ :"Invalid Code Value" | 2420A.NM101 must be "82". | 2420A.NM101 must be "82". |  |
| X222.430.2420A.NM102.010 | NM102 | Enity Type Quadifier | ${ }^{10}$ | ${ }^{1-1}$ | R |  |  | 1,2 | 999 | R | 1K403 = 1: : Required Data Element Missing" | 2420A.NM102 must be present. | 2420AA.NM102 must be present. |  |
| Х222.430.2420A.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|K603 $=7$ : "lvalid Code Value" | 2420 A.NM102 must be valid values. | 2420 A.NM102 must be valid values. |  |
| X222.433.2420A.NM103.010 | NM103 | Rendering Provider Last or Organization Name | ${ }^{\text {AN }}$ | 1.60 | R |  |  |  | 999 | R | \|K403 = 1: Requiried Data Element Missing" | 2420A.NM103 must be present. | 2420A.NM103 must be present. |  |
| $\times \times 22.430 .2420$ A.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R |  | $2420 \mathrm{~A}, \mathrm{~N} 103$ must contain at least one non- space character. | ${ }^{2420 A . N M 103 \text { must contain at least one non- }}$ |  |
| $\times 2$ 222.430.2420A.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | \|K403 5 5: "Data Element Too Long" | 2420AANM103 must be 1-60 characters. | 2420AA.NM103 must be 1-60 characters. |  |
| ×222.430.2420A.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid nformation..." <br> pplication Length invalid for receiver's <br> CSC 504: "Entity's Last Name" <br> EIC: 82 "Rendering Provider" |  |  |  |
| ×222.433.2420A.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | $\left.\right\|_{\text {Element }} ^{1 \text { K403 }}$ | ${ }^{24200 . . N M 103 \text { must be poppulated with }}$ | ${ }_{\text {accented }}^{2420 A . \text { NM103 chust beeres. populated with }}$ |  |
| X222.430.2420A.NM103.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.433.2420A.NM104.010 | NM104 | Rendering Provider First Name | AN | 1.35 | s |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | If $2420 \mathrm{~A} . \mathrm{NM} 102$ is " 2 ", 2420A.NM104 must not be present. | If 2420 A.NM102 is " 2 ", 2420A.NM104 must not be present. |  |


| Edit Reference | Segment or Element | Description | ID | min. <br> Max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TA11 } \\ \text { 99991 } \\ 277 c \mathrm{C} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.430.2420A..N1104.020 | NM104 |  |  |  |  |  |  |  | 999 | R | ${ }^{1 K 203=66 ": " I n v a l i d ~ C h a r a c t e r e r ~ i n ~ D a t a ~}$ | 2420A.NM104 must contain at least one non- space character. | 2420A.NM104 must contain at least one non- space character. |  |
| X222.430.2420A.NM104.030 | NM104 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2420 A.NM104 must be 1-35 characters. | 2420 A .NM104 must be $1-35$ characters. |  |
| ×222.430.2420A..NM104.040 | nM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid <br> Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 505: "Entity's First Name" <br> EIC: 82."Renderina Provider" |  |  |  |
| ×222.430.2420A.NM104.050 | NM104 |  |  |  |  |  |  |  | ${ }^{999}$ | R |  | 2420A.NM104 must be populated with accepiled AN characters. | $2420 \mathrm{ANM104} \mathrm{must} \mathrm{be} \mathrm{populated} \mathrm{with}$ |  |
| $\begin{aligned} & \text { X222.430.2420A.NM104.060 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.430.2420A..NM155.010 | nм105 | Rendering Provider Midadle Name | an | ${ }^{1-25}$ | s |  |  |  | 999 | R | IK403 = I 13 : "Implementation Dependent "Not Used" Data Element Present" <br> Present" | If $2420 \mathrm{~A} . \mathrm{NM102}$ is " 2 ", 2420A.NM105 must not be present. | If 2420 A.NM102 is " 2 ", 2420 A.NM105 must not be present. |  |
| х2222.430.2420A.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | R |  | In space e character. |  |  |
| X222.430.2420A..NM155.030 | nM105 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2420 A . NM 105 must be 1-25 characters. | 2420 A .NM105 must be $1-25$ characters. |  |
| x222.430.2420A.NM105.440 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7 Acknowledge <br> CSC 512: "Length invalid for receiver' application system CSC 514: "Entity's Middle Name" FIC. 82 "Rendering Provider" |  |  |  |
| X222.430.2420A..NM155.050 | NM105 |  |  |  |  |  |  |  | 999 | R |  | 2420A.NM105 must be populated with accepted AN characters. | 2420A.NM105 must be populated with accepted AN characters. |  |
| x222.430.2420A.NM105.055 | nм105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement 1Rejected for Invalid Information.." EIC: 82 "Rendering Provider" | The first position of 2420A.NM105 must be alphabetic (A...Z). | The first position of 2420A.NM105 must be alphabetic (A...Z) | To prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.430.2420A.NM105.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.430.2420A.NM106.010 | NM106 | Name Prefix | AN | 1-10 | NU |  |  |  | 999 | E | (Ta03: $=10$. "mplementaion "Not | Must not be present. | Must not be present. |  |
| x222.430.2420A.NM107.010 | NM107 | Rendering Provider Name Suffix | an | ${ }^{1-10}$ | s |  |  |  | 999 | ${ }^{\text {R }}$ | $\qquad$ | If 2420 A ..NM102 is " 2 ", 2420A.NM107 must not te present. | If 2420 A.NM102 is " 2 ", 2420A.NM107 must not be present. |  |
| X222.430.2420A.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2420 A .NM107 must be 1-10 characters. | 2420 A .NM107 must be $1-10$ characters. |  |
| x222.430.2420A.NM107.030 | nM107 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: 82 "Rendering Provider" |  |  |  |
| X222.430.2420A..NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R |  |  | ${ }_{\text {accen }}^{2420 \mathrm{~A} . . \mathrm{MM107} \text { must be poppulated with }}$ |  |
| X222.430.2420A.NM107.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.430.2420A.NM108.010 | nM108 | Identulication CodeQualifier | 10 | 1.2 | s |  |  | xx | 277 | c | Acknowledgement/Rejected for relational field in error <br> CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider dentifier (NPI)" <br> EIC: 82 "Renderina Provider" | 2420A.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| ×222.430.2420A.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c |  | 2420 A .NM108 must be present. | 2420A.NM108 must be present. | Everyone but Trailblazer or JH (Texas); as appropriate for current MAC contract for VA MRA laims <br> 01/20: Companion Guide Note needed |
| x222.430.2420A.NM108.030 | nM108 |  |  |  |  |  |  |  | 999 | R | 1K003 $\mathbf{~ 7}$ : "Invalid Code Value" | 2420A.NM108 must be "XX". | 2420A.NM108 must be "XX". | Does not apply to TrailBlazer or JH (Texas); as appropriate for current MAC contract for VA MRA Project claims. |
| X2222.430.2420A.NM109.010 | NM109 | Rendering Provider Identifier | AN | 2.80 | s |  |  |  | 999 | R | 1 K403 $=2:$ " "nonditional Required Data <br> Element Missing | $142420 A . N M 108$ is present, 2420A.NM109 must be present. | IIt $2420 \mathrm{~A} . \mathrm{NM108}$ is present, 2420A.NM109 must be resest. |  |
| ×222.430.2420A.NM109.020 | nM109 |  |  |  |  |  |  |  | 277 | c |  | 2420A.NM109 must be valid according to the NPI algorithm. | 2420A.NM109 must be valid according to the NPI algorithm. |  |

$\frac{837-}{8}$

| Edit Reference | Segment or Element | Description | ID | Min. Max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 <br> Values | $\begin{gathered} \mathrm{TAAl} \\ 9991 \\ 27 \mathrm{CA} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ×222.430.2420A.NM109.030 | nм109 |  |  |  |  |  |  |  | 277 | c |  | 2420A.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | 2420A.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | Valid NPI Crosswak must be availale for this edit. |
| ×222.430.2420A..NM109.040 | nM109 |  |  |  |  |  |  |  | 277 | c | Acknowledgement/Rejected for Invalid information... <br> SC 562 "Entity's National Provider tentifier (NPI)" | The first position of 2420A.NM109 must be a "1". | The first position of 2420A.NM109 must be a "1". |  |
| X222.430.2420A.NM110.010 | NM110 | Entity Relationship Code | 10 | 2-2 | nu |  |  |  | 999 | E | (K403 = 110. "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.430.2420A.NM111.010 | NM111 | Enity Identifier Code | 10 | 2.3 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.430.2420A..NM112.010 | NM112 | $\underbrace{\text { Name }}_{\text {Name Last or organization }}$ | AN | 1.60 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\begin{aligned} & \begin{array}{l} \text { X222.433.2420A.PRV. } 010 \\ \text { Edit Deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.433.2420A.PRV. 020 | PRV | RENDERING PROVIDER SPECIALTY INFORMATION |  | 1 | s | 2420A |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420A.PRV is allowed. | Only one iteration of 2420A.PRV is allowed. |  |
| x222.433.2420A.PRV01.010 | PrV01 | Provider Code | 10 | ${ }^{1.3}$ | R |  |  | PE | 999 | R | ${ }_{\text {Missing" }}^{1 K 203}=1$ Required Data Element | 2420A.PRV01 must be present | 2420A.PRV01 must be present |  |
| X222.433.2420A.PRV01.020 | ${ }^{\text {PRV01 }}$ |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 242AA.PRV01 must be "EE". | 2420A.PRV01 mus be "PE". |  |
| X222.433.2420A.PRVV2.010 | PRV02 | Reference Idenificiation Qualifer | 10 | ${ }^{2.3}$ | R |  |  | PxC | 999 | R | $\left.\right\|_{\text {Missina" }} ^{1 \text { K03 }}=1$ : Required Datata Element | 2420A.PRV02 must be present. | 2420A.PRV02 must be present. |  |
| X222.433.2420A.PRVO2.020 | PRV02 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2420A.PRV02 must be "PXC". | 2420A.PRV02 must be "PXC". |  |
| X222.433.2420A.PRV03.010 | PRV03 | Provider Taxoonomy Code | AN | 1-50 | R |  |  |  | 999 | R | $\left.\right\|_{\text {Missing" }} ^{1 \text { K03 }}=1$ : Required Data Element | 2420A.PRV03 must be present. | 2420A.PRV03 must be present. |  |
| X222.433.2420A.PRV03.020 | PRV03 |  |  |  |  |  |  |  | 277 | c | ${ }^{\text {CSCCC A7: }}$ "Acknowedgementrefecected for Invalid Information... <br> CSC 145 : "Enitys specialylytaxoromy code $\qquad$ | 2420A.PRV03 must be valid Taxonomy Code | 2420A.PRV03 must be valid Taxonomy Code | Valid Provider Taxonomy Code reference must be available for this edit. |
| X222.433.2420A.PRV04.010 | PRV04 | State of Prounce Code | ID | 2-2 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| X222.433.2420A.PRVV5.010 | PRV05 | PROVIDER SPECIALTY INFORMATION |  |  | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| X222.433.2420A.PRVV6.010 | PRV06 | Provider Organization Code | 10 | 3.3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. | Must not be present. |  |
| x222.434.2420A.REF.010 | REF | RENDERING PROVIDER SECONDARY IDENTIFICATION |  | ${ }^{20}$ | s | 2420A |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2420A.NM1 is present and 2420A.NM109 is not present, 2420A.REF with REF01 = "0B", "1G", "G2" or "LU" may be present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| x222.434.2420A.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." CSC 732: "Information submitted inconsistent with billing guidelines." CsC 560: "Entity's Additional/Secondary Identifier." EIC: $\mathbf{8 2}$ "Rendering Provider" | Only four iterations of 2420A.REF with REF01 = "1G", "0B", "G2" or "LU" are allowed. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| x222.434.2420A.REF. 030 | REF |  |  |  |  |  |  |  | 999 | R | II $304=199$ "Implementation Dependent "Not Used" Segment Present" | 2420A.REF must not be present. | 2420A.REF must not be present. | Everyone but Trailblazer or JH (Texas); as appropriate for current MAC contract for VA MRA Project claims. <br> 01/20: Companion Guide Note needed. |
| X222.434.2420A.REF01.010 | REF01 | Reference Idenification Quaifier | ID | ${ }^{2 \cdot 3}$ | R |  |  | 0B, 16, G2, LU | 999 | R |  | 2420A.REF01 must be present. | Must not be present. |  |
| X222.434.2420A.REFF0.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Invalic Code Value" | 2420 .REF01 must be valid values. | Must not be present. |  |
| X222.434.2420A.REFF2.010 | REFO2 | ${ }^{\text {Rendering } P \text { Provider Secondary }}$ Identifier | an | 1-50 | R |  |  |  | 999 | R |  | 2420A.REFO2 must be present. | Must not be present. |  |
| X222.434.2420A.REFO2.020 | ReFor |  |  |  |  |  |  |  | 277 | c | CsCC A7: <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 133: "Entity's UPIN" CSC 560: "Entity's Additional/Secondary Identifier" ElC: 82 "Renderina Provider" | When 2420A.REF01 = "1G", 2420A.REF02 must be in format ANNNNN or AAANNN where A is an alpha character and N is a numeric digit). | Must not te present. |  |
| x222.434.2420A.REFO2.030 | REFO2 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | When 2420 A. REF01 $=$ "OB", "G2" or "LU", 2420A.REF02 must be $1-50$ characters. | Must not be present. |  |
| X222.434.2420A.REFO2.035 | REF02 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid information... <br> CSC 512: "Length invalid for receiver's pplication system CSC 560: "Entity's Additional/Secondary Identifier |  |  |  |
| X222.434.2420A.REFO2.040 | REF02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | When 2420A.REF01 = "0B", "G2" or "LU", 2420A.REF02 must be populated with accepted AN characters. | Must not be present. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. мах. | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | Loop <br> Repeat | 5010A1 values | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\underset{\substack{\text { AcceptRej } \\ \text { ect }}}{ }$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.434.2420A.REF02.045 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.434.2420A.REFO2.050 | ReFoz |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element | 2420A.REF02 must contain at least one non- | Must not be present. |  |
| X222.434.2420A.REFO3.010 | REFO3 | Descripion | an | 1.80 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.434.2420A.REF04.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.434.2420A.REFO4-1.010 | REF04-1 | Reference Identifier Qualifier | 10 | ${ }^{2.3}$ | R |  |  | 20 | 999 | R | \|K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2420A.REF04-1 must be "2U". | Must not be present. |  |
| X222.434.2420A.REF04-2.010 | REFO4-2 | Other Payer Primay Idenitier | an | 1.50 | R |  |  |  | 999 | R | 1 IK403 $=2:$ : "Conditional Required Data Element Missing Element Missing" | If 2 2420A.REFO4-1 is present, 2420A.REF04- 2 must be present. | Must not be present. |  |
| X222.434.2420A.REF04-2.020 | REF04-2 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2420A,REF04-2 must $=23308 . \mathrm{NM109}$. | Must not be present. |  |
| x222.434.2420A.REFF043.010 | REFF04-3 | Reference Idenification Qualifier | 10 | 2-3 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.434.2420A.REFF04.4.010 | REF04-4 | Referencel Idenififation | an | 1.50 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be pesest. | Must not be present. |  |
| X222.434.2420A.REFF04.5.010 | REFO4.5 | Reference Identification Qualifier | 10 | 2.3 | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.434.2420A.REFF04.6.010 | REF04-6 | Reference Identificaion | an | ${ }^{1.50}$ | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.436.2420B.NM1.010 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.436.24208.NM1.015 | NM1 | purchased service PROVIIER NAME |  | 1 | s | ${ }^{24208}$ | 1 |  | 277 | c | cscc A8: <br> Acknowledgement/Rejected for "lanal field in error." CSC 21: "Missing or invalid information." <br> CSC 125: "Entity's name." EIC: QB "Purchased Service Provider" | If $2400 . \mathrm{PS} 1$ is present, $2420 \mathrm{~B} . \mathrm{NM} 1$ with NM101 = "QB" must be present. | If 2400.PS1 is present, 2420B.NM1 with NM101 = "QB" must be present. |  |
| х222.436.24208.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | $\begin{array}{\|l} \text { KK304=4: "Loop Occurs over } \\ \text { Maximum Times." } \end{array}$ | Only one iteration of 2420B.NM1 is allowed. | Only one iteration of 2420B.NM1 is allowed. |  |
| х222.436.2420B.NM101.010 | NM101 | Entity Identifier Code | 10 | ${ }^{2.3}$ | R |  |  | QB | 999 | R |  | 24208.NM101 must be present. | 24208..NM101 must be present. |  |
| x222.436.24208.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2420B.NM101 must be "QB". | 24208. NM101 must be "QB". |  |
| х222.436.2420B.NM102.010 | NM102 | Entity Type Quadifier | 10 | ${ }^{1-1}$ | R |  |  | 1,2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420B.NM102 must be present. | 2420B..nM102 must be present. |  |
| х222.436.24208.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | IK403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 24208 . .NM102 must be valid values. | 24208. NM102 must be valid values. |  |
| х222.436.24208. . 1103.010 | NM103 | Name Last or Organization Name | AN | 1.60 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.436.24208. . 1104.010 | NM104 | Name First | AN | ${ }^{1.35}$ | Nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times$ 2222.436.2420B.NM104.020 | NM104 | Name Middle | AN | 1.25 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.436.2420B.NM106.010 | NM106 | Name Prefix | AN | ${ }^{1-10}$ | vu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.436.24208.NM107.010 | NM107 | Name Suffix | ${ }^{\text {an }}$ | ${ }^{1.10}$ | NU |  |  |  | ${ }^{999}$ | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. | Must not te present. |  |
| ×222.436.24208.NM108.010 | nM108 | Idenitication Code Qualifier | 10 | 1-2 | s |  |  | xx | 277 | c | CSCC A8 <br> Acknowledgement/Rejected for relational field in error" <br> CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider EIC: QB "Purchased Service Provider" | 2420B.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier" |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| ×222.436. 24208. $\mathrm{NM108.020}$ | nM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6 <br> Acknowledgement/Rejected for Missing Information. <br> CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: QB "Purchased Service Provider" | 24208.NM108 must be present. | 2420B.NM108 must be present. | Everyone but Trailblazer or JH (Texas), as appropriate for current MAC contract for VA MRA Project claims <br> 01/20: Companion Guide Note needed |
| x222.436.24208. . 1108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | \|K403 $\mathbf{7}$ 7: "Invalid Code Value" | 24208. NM108 must be "XX": | 24208. NM108 must be "XX". | Does not apply to TrailBlazer or JH (Texas), as appropriate for current MAC contract for VA MRA |
| х2222.436.2420B.NM109.010 | NM109 | $\xrightarrow{\text { Purchaseed Senice Provider }}$ Identifer | AN | 2.80 | s |  |  |  | 999 | R | \|K403 = 2: "Conditional Required Data Element Missing" | $\int_{\text {must be present. }}^{1+2420 . \text {. }}$ | $\int_{\text {must be present }}^{\text {IT }}$ I 240 . . |  |


| Edit Reference | $\begin{aligned} & \text { Segment or } \\ & \text { Element } \end{aligned}$ | Descripion | 10 | Min <br> max. | $\begin{array}{\|l\|l} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} \text { 5010A1 } \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TAA1 } \\ \text { T999/ } \\ \text { 277CA } \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | Proposed 5010A1 Edits Part B | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ×222.436.2420B.NM109.020 | nM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid nformation..." CSC 562: "Entity's National Provider dentifier (NPI)" <br> EIC: QB "Purchased Service Provider" | 2420B.NM109 must be valid according to the NPI algorithm. | 2420B.NM109 must be valid according to the NPI algorithm. |  |
| ×222.436.2420B.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowleagement/Rejected for Invalid formation.... SC 562: "Entity's National Provider identifier (NPI)" EIC: QB "Purchased Service Provider" | The first position of 2420B.NM109 must be a "1". | The first position of 2420B.NM109 must be a "1". |  |
| х222.436.24208.NM110.010 | NM110 | Entit Relaiooship Code | 10 | 2.2 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.436.2420B.NM111.010 | NM111 | Enity Identifer Code | 10 | 2.3 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.436.24208.NM112.010 | NM112 | Name Last or Organization Name | AN | 1.60 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. | Must not be present. |  |
| x222.439.24208.REF. 010 | REF | PURCHASED SERVICE PROVIDER SECONDARY IDENTIFICATION |  | ${ }^{20}$ | s | ${ }^{2420 B}$ |  |  | ${ }^{999}$ | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2420B.NM1 is present and 2420B.NM109 is not present, 2420B.REF with REFO1 $=$ "1G" may be present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims.) |
| x222.439.24208.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for nvalid Information..." CSC 732: "Information submitted guidelines." CSC 560: "Entity's Additional/Secondary Identifier." EIC: QB "Purchased Service Provider" | Only one iteration of 2420B.REF with REF01 = " 1 G " is allowed. |  | Trailbazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| x222.439.24208.RE. ${ }^{\text {a }}$. | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420B.REF must not be present. | 2420B.REF must not be present. | Everyone but Trailblazer or JH (Texas); as appropriate for current MAC contract for VA MRA Project claims. <br> 01/20. Commanion Guide Note needed |
| $\times \times 22.433 .24208$. REF01.010 | REF01 | Reference Idenififation Quaifier | 10 | ${ }^{2.3}$ | R |  |  | ob, 16, G2 | ${ }^{999}$ | R | K403 11 : "Required Data Element Missing" | 24208. REF01 must be present | 24208.REF01 must be present |  |
| $\times 222.439 .24208 . R E F 01.020$ | REF01 |  |  |  |  |  |  |  | 277 | T | Cscc A7 <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 732: "Information submitted consistent with biliing guidelines." CSC 560: "Entity's Additional/Secondary Identifier," EIC: QB "Purchased Service Provider" | 2420B. REF01 must be "1G". |  | Traillazer or $J H$ (Texas) only, as appropiate for current MAC contact for VA MRA Project claims. |
| х222.439.24208.REF02.010 | REF02 | Purchased Service Provider Secondary Identifier | ${ }^{\text {an }}$ | 1.50 | R |  |  |  | 999 | R | Misssing": Required Data Element | 24208.REFFO2 must be present. | 2420B.REFO2 must be present. |  |
| $\times 222.439 .2420 B . R E F 02.020$ | REFO2 |  |  |  |  |  |  |  | 277 | c |  | 2420B.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). | 2420B.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and $N$ is a numeric digit). |  |
| х222.439.24208.REF03.010 | ReFo3 | Descripition | AN | 1-80 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.439.24208.REFF04.010 | REFF4 | Referencel Identifier Qualfier |  |  |  |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.441.2420C.NM1.010 | NM1 | SERVICE FACLITTY OCATION ALME |  | 1 | s | ${ }^{2420 C}$ | 1 |  | ${ }^{999}$ | R | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | One one iteration of $2420 \mathrm{C} . \mathrm{NM1}$ is allowed. | One one iteration of $2420 \mathrm{C} . \mathrm{NM} 1$ is allowed. |  |
| х222.441.2420C.NM101.010 | NM101 | Enity Identifier Code | 10 | 2.3 | R |  |  | 77 | 999 | R | IK403 = 1: "Required Data Element <br> Missing" | 2420C.NM101 must be present. | 2420C. NM101 must be present. |  |
| X222.441.2420C.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2420C.NM101 must be "77". | 2420C.NM101 must be "77". |  |
| х222.441.2420C..NM102.010 | NM102 | Entity Type Quadifier | 10 | 1-1 | R |  |  | 2 | 999 | R |  | $2420 \mathrm{C} . \mathrm{NM102}$ must be present. | 2420 C .NM102 must be present. |  |
| X222.441.2420C.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Ivalid Code Value" | $2420 \mathrm{C} . \mathrm{NM102}$ must be " 2 ". | 2420C.NM102 must be "2". |  |
| х222.441.2420C.NM103.010 | Nm103 | Laborator of Facility Name | AN | 1.60 | R |  |  |  | 999 | R | \|K403 1 : : Required Data Element Missing" | 2420C.NM103 must be present. | 2420C.NM103 must be present. |  |
| х222.441.24200.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IKL03 $=6$ : "Invalid Character in Data Element" | ${ }_{\text {space character }}^{2420 \mathrm{C}}$.N103 must be a teast one non- | ${ }^{2420 C C . N M 103 ~ m u s t ~ b e ~ a ~ t e a s t ~ o n e ~ n o n-~}$ |  |
| х222.441.24200.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2420 C . NM103 must be 1-50 characters. | 2420 C.NM103 must be 1-50 characters. |  |
| ×222.441.2420C.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> SC 512: "Length invalid for receiver's application system CSC 504: "Entity's Last Name <br> ElC: 77 "Service Location" |  |  |  |
| х222.441.2420C.NM103.050 | nм103 |  |  |  |  |  |  |  | 999 | R |  | 2420C. NM103 must be populated wih accepted AN characters. | 2420C. NM103 must be populated wih accepted AN characters. |  |
| $\begin{aligned} & \text { X222.441.2420C.NM103.060 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> values | $\begin{gathered} \text { TAAI } \\ \text { g999 } \\ 277 C A \end{gathered}$ | $\begin{gathered} \text { Acceptrej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х2222.441.2420C.NM104.010 | NM104 | Name First | an | ${ }^{1.35}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be peresent. | Must not be present. |  |
| X222.441.2420C.NM105.010 | NM105 | Name Midde | AN | 1-25 | nu |  |  |  | 999 | E | \|K4033 $=110$. "Implementation "Not | Must not be present. | Must not be present. |  |
| х222.441.2420C.NM106.010 | NM106 | Name Pefix | AN | 1-10 | nu |  |  |  | 999 | E | (10403 $=110$. "Implementation "Not | Must not be present. | Must not be present. |  |
| х2222.441.2420C.NM107.010 | NM107 | Name Suffix | AN | ${ }^{1-10}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.441.2420C.NM108.010 | nm108 | Identification Code Qualifier | 10 | 1.2 | s |  |  | xx | 999 | R | 1K403 $\mathbf{~ 7 ~ \% ~ " I v a l i d ~ C o d e ~ V a u e " ~}$ | 2420C. .nm108 must be "XX". | 2420C. .NM108 must be "XX". | Does not apply to TrailBlazer or JH (Texas); as appropriate for current MAC contract for VA MRA Project claims. |
| X222.441.2420C.NM109.010 | NM109 | Laboratory or Facility Primary Identifier | an | 2.80 | s |  |  |  | ${ }^{999}$ | R |  |  |  |  |
| ×222.441.2420C.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 77 "Service Location" | 2420C.NM109 must be valid according to the NPI algorithm. | 2420C.NM109 must be valid according to the NPI algorithm. NPI Ilgorithm. |  |
| ×222.441.2420C.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c |  | The first position of 2420C.NM109 must be a "1". | The first position of 2420C.NM109 must be a "1". |  |
| х222.441.2420C.NM110.010 | NM110 | Entit Pelationship Code | 10 | 2.2 | NU |  |  |  | ${ }^{999}$ | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| ×222.441.2420C.NM111.010 | NM111 | Enity Identifier Code | $1{ }^{10}$ | 2.3 | viv |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.441.2420C.NM112.010 | NM112 | Name Last or Organization Name | ${ }^{\text {an }}$ | 1.60 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.444.24200.N3.010 | N3 | SERVICE FACILITY LOCATION ADDRESS |  | 1 | R | 2420 C |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2420C.NM1 is present, 2420C.N3 must be present. | If 2420C.NM1 is present, 2420C.N3 must be present. |  |
| х222.444.24200. . . 0.020 | N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420C.N3 is allowed. | Only one iteration of 2420C. .s is allowed. |  |
| X222.444.2420C. . 301.010 | N301 | ${ }_{\text {Laboratory or Facility Adress }}^{\text {Line }}$ | an | 1.55 | R |  |  |  | 999 | R | (kasi 1: "Required Data Element | 2420 C. N 311 must be present. | ${ }^{24200 .}$. 301 must be present. |  |
| X222.444.2420...301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | ${ }^{24200 . ~ N 301 ~ m u s t ~ c o n t a i a n ~ a t ~ l e a s t ~ o n e ~ n o n-~}$ | 2420C.N301 must contain at least one non- space character. |  |
| X222.444. 2420C. .301.030 | N301 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2420C. . 301 must be 1 - 55 characters. | 24200. .3301 must be 1 - 55 characters. |  |
| ×222.444.2420C.N301.040 | N301 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" |  |  |  |
| ×222.444.2420C. .301.050 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2420C.N301 must be populated with accepted AN characters. | 2420C.N301 must be populated with accepted AN characters. |  |
| X222.444.2420C.N301.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X222.444.2420C.N302.010 } \\ & \text { Edit Deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.444.24200. .3302.020 | N302 | ${ }_{\text {Lem }}^{\text {Laboratoy or Facility Address }}$ Line | AN | ${ }^{1.55}$ | s |  |  |  | ${ }^{999}$ | R | IK403 = 6: "Invalid Character in Data Element" | 2420C. N302 must contain at least one non- space character. | 2420C.N302 must contain at least one non space character. |  |
| X222.444.24200. .302.030 | N302 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2420C. .332 must be 1 - 55 characters. | 2420C. $\mathbf{2} 302$ must be 1 - 55 characters. |  |
| ×222.444.2420C.N302.040 | N302 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid nformation..." <br> CSC 512: "Length invalid for receiver's application system <br> EIC: 77 "Serice s Street address" <br> EIC. 77 "Service Location" |  |  |  |
| х222.444.2420...302.050 | N302 |  |  |  |  |  |  |  | 999 | R |  | 2420 C . 302 must be populated d with accepede AN Characters. | 2420C. .3022 must be populated with accepeted AN characters. |  |
| X222.444.2420C.N302.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.445.2420C.N4.010 | N4 | SERVICE FACILITY LOCATION CITYISTATEIZIP |  | 1 | R | 2420 C |  |  | 999 | ${ }^{R}$ | IK304 = 16: "Implementation Dependent Segment Missing" | If $2420 \mathrm{C} . \mathrm{NM} 1$ is present, 2420 C .N4 must be present. | If 2420C.NM1 is present, 2420C.N4 must be present. |  |
| x222.445.2420C.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteratio of 2420C.N4 is allowed. | Only one iteration of 2420C.NA is allowed. |  |
| X222.445.2420C.N401.010 | N401 | Laboratory or Faciliy City Name | AN | 2.30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 22420 C. . 401 must be pesent. | ${ }^{2420 C . N 401 ~ m u s t ~ b e ~ p e s e s t .}$ |  |
| X222.445.24200. .400.020 | N401 |  |  |  |  |  |  |  | 999 | R |  | 2420. .N401 must contain at least two non- space characters. | $24200 . N 401$ must contaia at least two non- soace characters. |  |
| ×222.445.2420C.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2420C. . 4001 must be 2.30 characters. | 2420 C . 4001 must be 2.30 characters. |  |


| Edit Reference | Segment or Element | Descripion | 10 | Min. Max. | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> values | $\begin{gathered} \text { TAAI } \\ \text { g999 } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ×222.445.2420C.N401.040 | N401 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information.. <br> CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" |  |  |  |
| x222.445.2420C.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R | K $k 403$ = : "Invalid Character in Dota Element" | $2420 \mathrm{C} . \mathrm{N} 401$ must be populated with | $2420 \mathrm{C} . \mathrm{N} 401$ must be populated with accepeled $A \mathrm{~N}$ characters. |  |
| X222.445.2420C.N401.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.445.2420C.N402.010 | N402 | Laboratory or Facility State or Province Code | 10 | 2.2 | s |  |  |  | 999 | R | T403 $=2.2$ ". Conditional Requiried Data Hement Missing |  | $\begin{aligned} & \text { If } 2420 \mathrm{C} . \mathrm{N} 404 \text { is not present, } 2420 \mathrm{C} . \mathrm{N} 402 \\ & \text { must be present. } \end{aligned}$ |  |
| ×222.445.2420C.N402.020 | N402 |  |  |  |  |  |  |  | 277 | c | Acknowledgement/Rejected for Invalid Information... <br> CSC 501: "Entity's State/Province EIC: 77 "Service Location" | 2420 C . N002 must be a valid State Code. | 2420C.N002 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| X222.445.2420C.N403.010 | N403 | Laboratory or facility Postal Zone or zlip code | 10 | 3 3.15 | s |  |  |  | 999 | R |  | It $2420 \mathrm{C}, \mathrm{N} 404$ is not present, 2420 C. . 403 must be eresent. | It 2420C. N 404 is not present, $2420 \mathrm{C} . \mathrm{N} 403$ must be pesesent |  |
| ×222.445.2420C.N403.020 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information... CSC 500: "Entity's Postal/Zip Code" EIC: 77 "Service Location" | 2420 C . $\mathrm{N003}$ must be a valid 9 digit Zip Code. | 22220 C.N003 must be a valid 9 digit Zip Code. | Valid Zip Code reference must be available for this edit. |
| X222.445.2420C.N404.010 | N404 | $\begin{aligned} & \text { Service Facility Location Country } \\ & \text { Code } \\ & \hline \end{aligned}$ | 10 | 2.3 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.445.24200.N405.010 | N405 | Location Qualifier | 10 | 1-2 | Nu |  |  |  | 999 | E | K403 $=110:$ " Implementation "Not | Must not be present. | Must not be present. |  |
| X222.445.2420C.N406.010 | N406 | Location Identifier | AN | 1.30 | NU |  |  |  | 999 | E | (K4033 $=10.0$ "Implementation "Not | Must not te present. | Must not be present. |  |
| X222.445.2420C.N407.005 | N407 | County Subdivision Code | 10 | ${ }^{1.3}$ | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.445.2420C.N407.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.447.2420C.REF. 010 | REF | SERVICE FACILITY LOCATION SECONDARY IDENTIFICATION |  | 3 | s | 2420 C |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted <br> inconsistent with billing <br> guidelines." <br> CSC 560: "Entity's <br> AdC: 77 "Secondary Identifier." <br> EIC: 77 "Service Location" | 2420C.REF must not be present. | 2420C.REF must not be present. | Segment not accepted by Medicare. 01/20: Companion Guide Note needed. |
| X222.499.24200..NM1.010 | NM1 | $\underset{\text { NAME }}{\substack{\text { SUPERVIING PROVIDER }}}$ |  | 1 | s | 24200 | 1 |  | 999 | R | $\begin{array}{\|l\|l\|} \hline \text { K304 = 4: "Loop Occurs over } \\ \text { Maximum Times" } \end{array}$ | Only one iteration of 2420D.NM1 is allowed. | Only one iteration of 2420D.NM1 is allowed. |  |
| x222.499.24200..Nm1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | 1K304 $=16:$ "Implementation Dependent Segment Missing" | If2420D.NM1 is present, 2310D.NM1 must be present | If2420D.NM1 is present, 2310D.NM1 must be present |  |
| X222.499.24200..NM101.010 | NM101 | Entity Identifier Code | $1{ }^{1}$ | 2.3 | R |  |  | DQ | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 24200...M101 must be present. | 24200..NM101 must be present. |  |
| X222.449.24200.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ :"Invalid Code Value" | 24200.NM101 must be "DQ". | 24200.NM101 must be "DQ". |  |
| X222.499.24200.NM102.010 | NM102 | Entity Type Qualifier | 10 | ${ }^{1-1}$ | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 24200.NM102 must be present. | 24200 .NM102 must be present. |  |
| x222.449.24200.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 24200.NM122 must be "1". | 24200.NM102 must be "1". |  |
| х222.499.24200..м1103.010 | NM103 | Supenising Provider Last Name | ${ }^{\text {an }}$ | ${ }^{1.60}$ | R |  |  |  | 999 | R | (ka03 : 1 "Required Data Element | 24200.NM103 must be present. | $24200 . \mathrm{NM103}$ must be present. |  |
| X2222.449.24200.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R |  | 24200.NM103 must contain at least one non- space chacater. | 2420.NM103 must contain a a least one non- space character. |  |
| X222.499.24200.NM103.030 | nм103 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | 24200.NM103 must be 1-60 characters. | $24200 . \mathrm{NM103}$ must be 1.60 characters. |  |
| x222.449.24200.NM103.040 | nM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7 "Acknowled information. " <br> CSC 512: "Length invalid for receiver's application system" EIC. DO "Snuty's Last Name EIC: DO "Subervisina Provider" |  |  |  |
| x222.449.24200.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R |  | 24200.NM103 must be populated with acceneed $A \mathrm{~A}$ characers. | 24200.NM103 must be populated with accepied $A \mathrm{~A}$ characters. |  |
| X222.449.2420D.NM103.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.449.24200.NM104.010 | NM104 | Supenising Provider Name First | ${ }^{\text {an }}$ | ${ }^{1-35}$ | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  | ${ }^{24200 . N M 104 \text { must conlaia a a least one non- }}$ space character. |  |
| X222.499.24200. NM104.020 | nM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 24200 .NM104 must be $1-35$ characters. | 24200 .NM104 must be 1-35 characters. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. Max. | Usage <br> Req. | Loop | Loop Repeat | 5010A1 <br> Values | $\begin{gathered} \text { TA11 } \\ \text { 9997 } \\ 277 c A \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ×222.499.24200.NM104.030 | nM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" |  |  |  |
| х222.449.24200.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | R | 1K403 =6:" "Invalid Charactere in Data Element" | 2420.NM104 must be populated with | ${ }^{24200 . \text { NM104 must be populated with }}$ |  |
| X222.449.2420D.NM104.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.449.24200.NM105.010 | NM105 | $\begin{gathered} \text { Supervising Provider Middle } \\ \text { Name or Initial } \\ \hline \end{gathered}$ | ${ }^{\text {AN }}$ | ${ }^{1.25}$ | s |  |  |  | 999 | R | $\left.\right\|_{\text {Klemen }} ^{\text {Kane }}$ : "Invalid Character in Data | 2420D.NM105 must contain at least one non- space character. | 2420D.NM105 must contain at least one non- space character. |  |
| x222.499.24200.NM105.020 | nM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 24200 . .M 105 must be $1-25$ characters. | 24200 .NM105 must be $1-25$ characters. |  |
| ×222.499.24200.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7 Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" ElC: DO "Supervising Provider |  |  |  |
| х222.499.24200.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM105 must be populated with accepted AN characters. | accented $A$ N characters. 2420 . |  |
| X222.449.24200..NM105.045 | nм105 |  |  |  |  |  |  |  | 277 | c |  | The first position of 2420D.NM105 must be alphabetic (A...Z) | The first position of 2420D.NM105 must be alphabetic (A...Z). | To prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.449.2420D.NM105.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.449.24200.NM106.010 | NM106 | Name Prefix | an | 1-10 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.449.24200.NM107.010 | NM107 | $\begin{aligned} & \text { Superisining Provider Name } \\ & \text { Suffix } \end{aligned}$ | AN | ${ }^{1-10}$ | s |  |  |  | 999 | R |  | Int space chararacter | S. space ce character. |  |
| х222.499.24200.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 24200 . NM107 must be $1-10$ characters. | 24200 . NM107 must be $1-10$ characters. |  |
| ×222.499.24200..nM107.030 | nM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" EIC: DO "Supervisina Provider" |  |  |  |
| х222.449.24200...м1107.040 | NM107 |  |  |  |  |  |  |  | 999 | R |  | ${ }_{\text {accen }}^{24200 . \text {.NM } 107 \text { must be poppulated with }}$ |  |  |
| X222.449.2420D.NM107.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.499.24200.NM108.010 | nм108 | ${ }^{\text {Identification Code Qualfier }}$ | 10 | 1-2 | s |  |  | xx | 277 | c | Acknowledgement/Rejected for relational field in error. <br> : "Identifier Qualifier CSC 562: "Entity's National Provider Identifier (NPI)" <br> ElC: DO "Supervising Provider" | 2420D.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier" |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| ×222.499.24200.NM108.020 | nM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: "Acknowledgement/Rejected for Missing Information. CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider EIC. DQ (NPI) <br> EIC: DQ "Supervising Provider" | 24200.NM108 must be present. | 24200.NM108 must be present. | Everyone but Trailblazer or JH (Texas); as appropriate for current MAC contract for VA MRA Project claims. <br> 01/20: Companion Guide Note needed |
| $\times 222.449 .24200 . \mathrm{NM} 108.030$ | nM108 |  |  |  |  |  |  |  | 999 | R | 1K403 7 7: "Invalid Code Value" | 2420..nm108 must be "XX". | 24200.NM108 must be "XX". | Does not apply to TrailBlazer or JH (Texas; as appropriate for current MAC contract for VA MRA Project claims.) |
| х222.449.24200.NM109.010 | nm109 | Supenising Provider Identifier | AN | 2.80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 1424200. NM108 is is present, 24200.NM109 must be present | 1424200. NM108 is is present, 24200.NM109 must be present. |  |
| ×222.449.24200.NM109.020 | nı109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement/Rejected for Invalid Acknowledg <br> CSC 562: "Entity's National Provider Identifier (NPI) <br> EIC: DO "Supervising Provider" | 24200.NM109 must be valid according to the NPI algorithm. | 2420D.NM109 must be valid according to the NPI I agorithm. |  |
| ×222.499.24200.NM109.030 | nM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: Acknowledgement/Rejected for Invalid information. CSC 562: "Entity's National Provider Identifier (NPI)" EIC: DO "Supervising Provider" | The first position of 2420D.NM109 must be a "1". | The first position of 2420D.NM109 must be a "1". |  |
| х222.499.24200..NM110.010 | NM110 | Enity Relaionstip Code | 10 | 2.2 | NU |  |  |  | 999 | E | (14030 10. "Implementation "Not | Must not be present. | Must not be present. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. ${ }_{\text {min. }}$ | $\begin{aligned} & \begin{array}{c} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.449.24200.NM111.010 | NM111 | Enity Identifier Code | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.449.24200.NM112.010 | NM112 | Name Last or Organization Name | an | 1.60 | Nu |  |  |  | 999 | E |  Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.452.2420.REF. 010 | REF | SUPERUIIING PROVIDER EECNORAYY IDENTIFICATION |  | 20 | s | 24200 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" |  |  | Trailbazer or JH (Texas) only, as appropiate for <br> current MAC contract for $\begin{array}{l}\text { A MRA MR Proect claims. } \\ \text { 11/20: } \mathrm{G} 2 \text { is not valid for Medicare. }\end{array}$ 11/20: G2 is not valid for Medicare. <br> Companion Guide Note needed |
| x222.452.2420.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | $\operatorname{cscc}$ A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." <br> CSC 560: "Entity's <br> EIC: DQ "Supervising Provider" <br> EIC: DQ "Supervising Provider" | Only three iterations of 2420D.REF with REF01 $=$ " 0 B ", " 1 G " or "LU" are allowed |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| x222.452.2420.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 24200.REF must not be present. | 24200.REF must not be present. | Everyone but Trailblazer or JH (Texas); as appropriate for current MAC contract for VA MRA Project claims <br> 120: Companion Guide Note needed |
| X222.452.24200.REFF01.010 | REF01 | Reference Identification Qualifier | 10 | $2 \cdot 3$ | R |  |  | 0B, 16, 62, LU | 999 | R | IK403 = 1: "Required Data Element | 24200.REF01 must be present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| X222.452.24200.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 $\mathbf{~ 7 ~ 7 : ~ " I v a l i d ~ C o d e ~ V a l u e " ~}$ | 24200. REF01 must be valid values. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| X222.452.24200.REFFO2.010 | REFO2 | Supervising Provider Secondary <br> Identifier | ${ }^{\text {AN }}$ | ${ }^{1.50}$ | R |  |  |  | 999 | R | 1 K003 $=1:$ "Required Data Element Missing" | 24200. REFO2 must be present. |  | Trailblazer or JH (Texas) only, as appropriaate for current MAC contract for VA MRA Project claims |
| X222.452.24200.REFFO2.020 | REFO2 |  |  |  |  |  |  |  | 277 | c | Acknowledgement/Rejected for Invalid Information..." CSC 133: "Entity's UPIN" CSC 560 : "Entity's Additional/Secondary Identifier" Supervising Provider |  |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| X222.452.24200.REFFO2.030 | REFO2 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | When 2420D.REF01 = "0B" or "LU" <br> 2420D.REF02 must contain at least one non space character. |  | Trailbazer or JH (Teexas) only, as appropriate for <br> current MAC contract for VA MRA Project claims current MAC contract for VA MRA Project claims. |
| X222.452.24200.REFFO2.040 | REF02 |  |  |  |  |  |  |  | 999 | E | IK003 = 5: "Data Element Too Long" | When 2420D.REF01 = "0B" or "LU", 2420D.REF02 must be $1-50$ characters. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| X222.452.24200.REFFO2.050 | REFO2 |  |  |  |  |  |  |  | 277 | T |  |  |  | Trailbazer or JH (Texas) only as appropriate for current MAC contract for VA MRA Project claims. |
| X222.452.24200.REFF2.060 | REFO2 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| X222.452.2420D.REF02.070Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.452.24200.REFF3.010 | REF03 | Description | AN | 1.80 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.452.24200.REFF041.015 | REF04-1 | Reference Identifier Qualifier | 10 | 2.3 | R |  |  | ${ }^{20}$ | 999 | R | IK403 = 1: "Required Data Element Missing" Missing" |  |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| x222.452.2420.REEF041.020 | REF54-1 |  |  |  |  |  |  |  | 999 | R | K403 $\mathbf{7}$ 7: "Invalid Code Value" | 24200.REF04-1 must be "UU". |  | Trailblazer or JH (Texas) only; as appropriate for current MAC contract for VA MRA Project claims. |
| x222.452.24200.REF04-2.010 | REF04-2 | Other Payer Primay Idenitifer | an | 1.50 | R |  |  |  | 999 | R | $\begin{array}{\|l} \left\lvert\, \begin{array}{l} \text { K4003 } \\ \text { Missing": } \end{array}\right. \\ \text { Mequired Data Element } \end{array}$ | If 2420D.REF04-1 is present, 2420D.REF042 must be present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| x222.452.2420.REEF04.2.020 | REF04-2 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = I12: "Implementation Pattern } \\ & \text { Match Failure" } \end{aligned}$ | 24200,REF04-2 must $=23308$. .nM109. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| X222.452.2420.REEF04.3.010 | REF04-3 | Reference Identification Qualifier | 10 | 2.3 | NU |  |  |  | 999 | E | (K403 $=110.7$ "mplementation "Not | Must not be present. | Must not be present. |  |
| X222.452.2420.R.REF044.010 | REF04-4 | Reference Identificaion | AN | 1.50 | NU |  |  |  | 999 | E | IK403 = $=110:$ :"Implemenentation "Not | Must not be present. | Must not be pesesent. |  |
| X222.452.2420.R.REF04-5.010 | REFO4.5 | Reference Identification Qualifier | 10 | ${ }^{2.3}$ | NU |  |  |  | 999 | E | K 1 K003 $=110:$ : Implemenentation "Not Used" Element Present" | Must not be present. | Must not be pesesent. |  |
| X222.452.2420.REEF046.0.010 | REF04.6 | Reference Idenutication | an | 1.50 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |


| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { Min. } \\ \hline \end{gathered}$ Max. | $\begin{array}{\|c\|c} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\left.\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array} \right\rvert\,$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.454.2420E.NM1.010 | NM1 | ORDERING PRovider name |  | 1 | s | 2420 E | 1 |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" |  | 2420E.NM1 must be present. |  |
| X222.454.2420E.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | $\begin{array}{\|l} \mid \text { \|K304= =4: "Loop occurs over } \\ \text { Maximum Times" } \end{array}$ | Only one iteration of 2420 E.NM1 is allowed. | Only one iteration of 2420 E.NM1 is allowed. |  |
| X222.454.2420E.NM101.010 | NM101 | Enity Identifier Code | 10 | ${ }^{2 \cdot 3}$ | R |  |  | סK | ${ }^{999}$ | R | (Kissing:"Required Data Element | 2420E.NM101 must be present. | 2420E.NM101 must be present. |  |
| x222.454.2420E.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invaid Code Value" | 2420E.NM101 must be "KK: | 2420E.NM101 must be "KK: |  |
| X222.454.2420E.NM102.010 | NM102 | Enity Type Quadifier | ID | ${ }^{1-1}$ | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420E.NM102 must be present. | 2420E.NM102 must be present. |  |
| X222.454.2420E. . M 102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ 7 ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2420E.NM102 must be "1". | 2420E.NM102 mus t e "1". |  |
| X222.454.2420E:.NM13.010 | NM103 | Ordering Provider Last Name | AN | 1.60 | R |  |  |  | ${ }^{999}$ | R | IK403 = 1: "Required Data Element | 2420E.NM103 must be present. | 2420E.NM103 must be present. |  |
| X2222.454.2420E:NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R |  | 2420E.NM103 must contain at least one non- space character. | 2420E.NM103 must contain at least one non- |  |
| X222.454.2420E.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | \|K403 5 5: "Data Element Too Long" | 2420E.NM103 must be 1-60 characters. | 2420E.NM103 must be 1-60 characters. |  |
| X222.454.2420E.NM103.440 | nM103 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 Acknowledg Information Information... CSC 512: "Le application system" CSC 504: "Entity's Last Name" EIC: DK "Orderina Phvsician" |  |  |  |
| X2222.454.2420E.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R |  | 2420 .NM103 must be populated with accepied $A \mathrm{~A}$ characters. | 2420 .NMIO3 must be populated with accenied $A \mathrm{~A}$ characters. |  |
| X222.454.2420E.NM103.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X2222.454.2420E:NM104.010 | NM104 | Ordering Provider First Name | AN | ${ }^{1.35}$ | s |  |  |  | 999 | R | $\begin{aligned} & \text { \|kM03 = } 6 \text { " "Ivaid Character in Data } \\ & \text { Flement" } \end{aligned}$ | 2420E.NM104 must contain at least one non- space character. | 2420E.NM104 must contain at least one nonspace character. |  |
| X222.454.2420E.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | \|K403 5 5: "Data Element Too Long" | 2420E.NM104 must be $1-35$ characters. | 2420 E .NM104 must be $1-35$ characters. |  |
| X222.454.2420E.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| x222.454.2420E.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | R |  | 240 . 2 M104 must be populaed with accepied $A$ N characters. | 2420E.NM104 must be populated with accepted AN characters. |  |
| X222.454.2420E.NM104.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X2222.454.2420E.NM105.010 | NM105 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Ordering Provider Middle Name } \\ \text { or Initial } \end{array} \\ \hline \end{array}$ | ${ }^{\text {an }}$ | ${ }^{1.25}$ | s |  |  |  | 999 | R |  | 2420E.NM105 must contain at least one non- space character. | 2420E.NM105 must contain at least one nonspace character. |  |
| X222.454.2420E.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | 1K403 5 : "Data Element Too Long" | 2420 E . N105 must be 1-25 characters. | 2420 E .NM105 must be 1-25 characters. |  |
| X222.454.2420E.NM105.030 | nM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement/Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" EIC. DK "Ord" |  |  |  |
| X2222.454.2420E:NM105.040 | NM105 |  |  |  |  |  |  |  | ${ }^{999}$ | R |  | 240 . NM105 must be populated with accepied $A \mathrm{~A}$ characters. | $\begin{aligned} & \text { 2420E.NM105 must be populated with } \\ & \text { 2accepeded AN characters. } \end{aligned}$ |  |
| X222.454.2420E.NM105.045 | nM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 514: "Entity's Middle Name" EIC: DK "Ordering Physician" | The first position of 2420E.NM105 must be apphabetic (A...Z). | The first position of 2420E.NM105 must be alphabetic (A...Z). | To prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.454.2420E.NM105.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.454.2420E:.NM106.010 | NM106 | Name Prefix | an | 1-10 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.454.2420E:.NM107.010 | NM107 | Ordering Provider Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | Inden NM107 must contain at least one non- space character. | 2420E.NM107 must contain at least one non- space character. |  |
| X222.454.2420E.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420 E. NM107 must be $1-10$ characters. | 2420 E . NM107 must be $1-10$ characters. |  |
| X222.454.2420E.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7 Acknowledgement/Rejected for Invalid Information... application CSC 125: "Entity's Name" EIC: DK "Ordering Physician" |  |  |  |
| X2222.454.2420E.NM107.040 | NM107 |  |  |  |  |  |  |  | ${ }^{999}$ | R |  | 240E.NM107 must be populated with accepeded $A N$ characters. | 2420 . NMIO7 must be populated with acceened $A$ ch charcters. |  |


| Edit Reference | Segment or Element | Description | 10 | $\underset{\substack{\text { min. } \\ \text { Max. }}}{ }$ | $\begin{array}{\|l\|l} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> Values |  | $\underset{\substack{\text { Acceptrej } \\ \text { ect }}}{ }$ | Disposition /Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. N |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.454.2420E.NM107.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.454.2420E.NM108.010 | NM108 | Identificaion Code Qualifier | 10 | 1-2 | s |  |  | xx | 277 | c | Acknowledgement/Rejected for elational field in error CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider dentifier (NPI)" | 2420E.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier" |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| X222.454.2420E.NM108.020 | nM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6 <br> Acknowledgement/Rejected for Missing Information.. CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: DK "Ordering Physician" | 2420E.NM108 must be present. | 2420E.NM108 must be present. | Everyone but Trailblazer or JH (Texas); as appropriate for <br> 01/20: Companion Guide Note needed |
| X222.454.2420E.NM108.030 | nM108 |  |  |  |  |  |  |  | 999 | R | 1 K403 - 7: "Invalid Code Value" | 2420 E .NM108 must be "XX". | 2420E.NI | $\begin{aligned} & \text { Does not apply to Traililazer or JH (Texas; as } \\ & \text { appropiate for current MAC contract for VA MRA } \\ & \text { Proiect claims.) } \end{aligned}$ |
| X222.454.2420E.NM109.010 | NM109 | Ordeing Provider Identifier | AN | $2 \cdot 80$ | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | II 2420 ..NM108 is present, 2420E.NM109 must be present. | ${ }^{1 I}$ It 2420E.NM108 is present, 2420E.NM109 |  |
| ×222.454.2420E.NM109.020 | nM109 |  |  |  |  |  |  |  | 277 | c |  | 2420E.NM109 must be valid according to the NPI algorithm. | 2420E.NM109 must be valid according to the NPI algorithm. |  |
| ×222.454.2420E.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | Acknowledgement/Rejected for Invalid Information..." <br> CSC 562: "Entity's National Provider Identifier (NP) <br> Phvsician" | The first position of 2420E.NM109 must be a "1". | The first position of 2420E.NM109 must be a "1". |  |
| X222.454.2420E.NM109.040Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.454.2420E.NM110.010 | NM110 | Enity Relationship Code | 10 | 2-2 | Nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.454.2420E.NM11.010 | NM111 | Enitiy Idenifier Code | 10 | 2.3 | vu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.454.2420E.NM112.010 | NM112 | $\underbrace{\text { Name }}_{\text {Name Last or organization }}$ | an | 1.60 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.457.2420E.N3.010 <br> Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.457.2420E.N3.020 | N3 | ORDERING PROVIDER ADDRESS |  | 1 | s | 2420 E |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420E.N3 is allowed. | Only one iteration of 2420E.N3 is allowed. |  |
| ×222.457.2420E...301.010 | N301 | Ordering Provider Address Line | AN | ${ }^{1.55}$ | R |  |  |  | 999 | R |  | 2420E.N301 must be present. | 2420E.N301 must be present. |  |
| X222.457.2420E...301.020 | N301 |  |  |  |  |  |  |  | ${ }^{999}$ | R | K403 =6: "Invalic Character in Data Element" | 2420E.N301 must contain at least one nonspace character. | 2420E.N301 must contain at least one nonspace character. |  |
| x222.457.2420E...301.030 | N301 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | Location.N301 must be 1 - 55 characters. | Location.N301 must be 1-55 characters. |  |
| ×222.457.2420E...301.040 | N301 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" . Orderina Phvsician" |  |  |  |
| ×222.457.2420E...301.050 | N301 |  |  |  |  |  |  |  | 999 | R | K4003 =6:" "Invalic Character in Data Element" | 2acenenced $A \mathrm{~N}$ musharacters. | 2420E.N301 must be populated with accepted AN characters. |  |
| X222.457.2420E.N301.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l\|l\|} \hline \text { 222.457.2420....302.010 } \\ \text { Edit Deactivated } \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.457.2420E...302.020 | N302 | Ordering Provider Address Line | an | ${ }^{1.55}$ | s |  |  |  | ${ }^{999}$ | R | K403 =6:" "Invalid Character in Data | ${ }^{2420 E(N 302 \text { must contain at least one non- }}$ | 2420E.N302 must contain at least one non- |  |
| X222.457.2420...330.030 | N302 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2420E. 302 must be $1-55$ characters. | 2420E. 302 must be $1-55$ characters. |  |
| ×222.457.2420E...302.040 | N302 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> EIC: DK "Entity's Street address" <br> EIC: DK "Orderina Phvsician" |  |  |  |
| X222.457.2420E.N302.050 | N302 |  |  |  |  |  |  |  | 999 | R | K403 $=6$ : ITWaid Chaacter in in ota Element" | 2420E.N302 must be populated with accepted AN characters. | 2420E.N302 must be populated with accepted AN characters. |  |


| Edit Reference | Segment or Element | Description | ID | $\mathrm{Min}_{\text {Min. }}^{\text {Max. }}$ | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | $\begin{aligned} & \begin{array}{c} 5010 A_{1} \\ \text { Values } \end{array} \end{aligned}$ | $\begin{gathered} \text { TA11 } \\ \text { Ta99 } \\ 277 c \mathrm{Ca} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.457.2420E.N302.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.458.2420E.N4.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { 2x22.455.2420...4.020 } \\ & \text { EdiD Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222A1.024.2420E.N4.010 | N4 | ORDERING PROVIDER CITYISTATEIZIP CODE |  | 1 | s | 2420 E |  |  | 999 | R |  | Only one iteration of 2420E.N4 is allowed. | Only one iteration of 2420E.N4 is alowed. |  |
| X222.458.2420E.N401.010 | N401 | Ordeing Provider City Name | AN | 2.30 | R |  |  |  | 999 | R | (ka03 1: "Required Data Element | 2420E.N401 must be pesent. | 2420E.N401 must be pesent. |  |
| X222.458.2420E.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R |  | 2420 . N401 must contain at least two non- space characters. |  |  |
| X222.458.2420E.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4 : "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2420E.N401 must be 2.30 characters. | 2420E.N401 must be 2.30 characters. |  |
| X222.458.2420E...401.040 | N401 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 Acknowledgement/Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" EIC: DK "Orderina Phvsician" |  |  |  |
| X222.458.2420E.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R |  | 2420E. .N001 must be populated with accepeded $A \mathrm{~N}$ characters. | 2420E. .N401 must be populated with accented $A \mathrm{~N}$ characters. |  |
| X222.458.2420E.N401.060Edit Deactivated Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.458.2420E.N402.010 | N402 | Ordering Provider State or Province Code | 10 | 2-2 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missinq" } \end{aligned}$ | $\begin{aligned} & \text { If } 2420 E . N 404 \text { is not present, } 2420 E . N 402 \\ & \text { must be present. } \end{aligned}$ | $\begin{aligned} & \text { If } 2420 E . N 404 \text { is not present, } 2420 E . N 402 \\ & \text { must be present. } \end{aligned}$ |  |
| X222.458. 2420E.N402.020 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 501: "Entity's State/Province" EIC: DK "Ordering Physician" | 2420E. N402 must be a valid State Code. | 22420 . .N022 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| X222.458.2420E.N403.010 | N403 | Ordefing Provider Postal Zone or Zlp Coode | 10 | ${ }^{3-15}$ | s |  |  |  | 999 | R |  |  |  |  |
| X222.458.2420E.N403.020 | N403 |  |  |  |  |  |  |  | 277 | c | Cscc A7 Acknowledgement/Rejected for Invalid Information... CSC 500: "Entity's Postal/Zip Code" EIC: DK "Ording Pr EIC: DK "Ordering Physician | 2420E.N403 must be a valid Zip Code. | 2420 E.N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| X222.458.2420E.N404.010 | N404 | Ordering Prowider Country Code | 10 | 2.3 | s |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.458.2420...405.010 | N405 | Location Qualifier | 10 | 1-2 | NU |  |  |  | 999 | E | K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.458.2420E.N406.010 | N406 | Location Identifer | AN | 1.30 | NU |  |  |  | 999 | E | (10403 $=10.0$ "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.458.2420E.N407.005 | N407 | Country Subdivision Code | 10 | ${ }^{1-3}$ | s |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.458.2420E.N407.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.460.2420.REF.010 | REF | ORDERING PROVIDER SECONDARY IDENTIFICATION |  | 20 | s | 2420 E |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2420E.NM1 is present, 2420E.REF may be present. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| x222.460.2420.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." <br> CSC 560: "Entity's Additional/Secondary Identifier." EIC: DK "Ordering Physician" | Only one iterations of 2420E.REF are allowed. |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. |
| x222.460.2420.RE..030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420E.REF must not be present. | 2420E.REF must not be present. | Everyone but Trailblazer or JH (Texas); as Project claims <br> 01/20: Companion Guide Note needed. |
| X222.460.2420E.REF01.010 | REF01 | Reference Identificaion Qualifer | 10 | 2.3 | R |  |  | 0B, 16, G2 | 277 | T | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." CSC 560: "Entity's Additional/Secondary Identifier." | 2420E.REF01 must be "16". |  |  |
| X2222.460.2420E.REF02.010 | REFO2 | $\underset{\substack{\text { ordering Provider Secondary } \\ \text { Identifer }}}{\text { ater }}$ | AN | 1.50 | R |  |  |  | 999 | R | Missing: Requifen Data | 2420E.REFO2 must be present. | ${ }^{2420 E E R E F F O 2 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |


| Edit Reference | Segment or Element | Description | 10 | Min. <br> Max. | $\begin{array}{\|l\|l} \hline \begin{array}{l} \text { Usage } \\ \text { Rea. } \end{array} \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 values | $\begin{gathered} \mathrm{TAII} \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CED | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.460.2420E.REFO2.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information.. <br> CSC 133: "Entity's UPIN" CSC 560: "Entity's Additional/Secondary Identifier" | 2420E.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). | 2420E.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| х222.460.2420E.REFF03.010 | Refo3 | Descripion | AN | 1.80 | NU |  |  |  | 999 | E | 1 K403 = 110: "Implementation "Not | Must not be present. | Must not be pesesent. |  |
| х222.460.2420E.REFF04.010 | REFO4 | Reference Identifier |  |  | s |  |  |  | 999 | E |  | Must not be present. | Must not be present. | Only used with G 2. |
| X222.462.2420E.PER. 010 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.462.2420E.PER. 020 | PER | ORDERING PROVIDER CONTACT INFORMATION |  | 1 | s | 2420 E |  |  | 999 | ${ }^{R}$ | IK304 = 16: "Implementation Dependent Segment Missing" | If 2400.CR3 is present, 2420E.PER must be present. | If 2400.CR3 is present, 2420E.PER must be present. |  |
| X222.462.2420E.PEER.030 | PER |  |  |  |  |  |  |  | 999 | R | 1K304 =5: " "segment Exceeds Maximum Use" | Only one iteration of 2420E.PER is allowed. | Only one iteration of 2420E.PER is allowed. |  |
| X222.462.2420E.PERR01.010 | Perol | Contact Function Code | 10 | 2-2 | R |  |  | 1 C | 999 | R | IK403 = 1: "Required Data Element Missing" | $2420 E$ PPER01 must be present. | $2420 E \cdot P E$ R01 must be present. |  |
| X222.462.2420E.PERP01.020 | PeR01 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2420 E.PER01 must be "IC". | 2420 E.PER01 must be "IC". |  |
| X222.462.2420E.PERO2.010 | PER02 | Ordering Provider Contact Name | ${ }^{\text {AN }}$ | 1.60 | s |  |  |  | 999 | R | IK403 = 19: "Implementation Dependent Data Element Missing" | 2420E.PERRO2 must be present. | $2420 E$ PERRO2 must be present. |  |
| X222.462.2420E.PERRO2.020 | PERO2 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420E.PERO2 must contain at least one non-. | 2420E.PERO2 must contain at least one nonspace character. |  |
| x222.462.2420E.PERRO2.030 | PER02 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | 2420E.PERRO2 must be $1-60$ characters. | 2420E.PERRO2 must be $1-60$ characters. |  |
| X222.462.2420E.PER02.040 | PERO2 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7 Acknowled Information... application system" CSC 561: "Entity's Contact Name" EIC: DK "Orderina Physician" |  |  |  |
| X222.462.2420E.PERRO2.050 | PER02 |  |  |  |  |  |  |  | 999 | R |  | ${ }_{\text {accented }}^{2420 \text { E.PERO2 must beraters. populated with }}$ | 2420 .PERO2 must be populated with accened $A \mathrm{~A}$ characeres. |  |
| X222.462.2420E.PER02.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.462.2420E.PERO3.010 | PERO3 | Communication Number <br> Qualifier | 10 | 2-2 | R |  |  | Em, fx, TE | 999 | R |  | 2420E.PER03 must be present. | $2420 \mathrm{EPEPR} \mathbf{0} 3$ must be present. |  |
| X222.462.2420E.PER 03.020 | PERO3 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2420 E.PER03 must be valid values. | 2420..PER03 must be valid values. |  |
| X222.462.2420E.PERR04.010 | PER04 | Communicaioion Number | AN | ${ }^{1-256}$ | R |  |  |  | 999 | R | KK03 $=1$. Missing Required Data Element | $2420 E . P$ PR04 must be present. | $2420 E . P E$ R04 must be present. |  |
| X222.462.2420E.PERR04.020 | PER04 |  |  |  |  |  |  |  | 999 | R |  | 2420E.PER04 must contain at least one non- space character. | 2420E.PER04 must contain at least one non- |  |
| X222.462.2420E.PERR04.030 | PER04 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | $2420 E$ PerRo4 must be 1-256 characters. | 2420 E.PER04 must be 1-256 characters. |  |
| X222.462.2420E.PER04.040 | PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 127: <br> ElC: DK "Ordering Phvsician" |  |  |  |
| X222.462.2420E.PERR04.050 | PER04 |  |  |  |  |  |  |  | 999 | R |  |  | 240 .PERO4 must be populated with accepered $A \mathrm{~A}$ characters. |  |
| X222.462.2420E.PER04.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.462.2420E.PER04.070 | PER04 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | "Acknowledgement/Rejected for Invalid Information. CSC 127: "Entity's Communication Number" | 2420E.PER04 must be populated with exactly ten numeric characters when 2420E.PER03 equals FX or TE | 2420E.PER04 must be populated with exactly ten numeric characters when 2420E.PER03 equals FX or TE . |  |
| X222.462.2420E.PER05.010 | PER05 | Communication Number Qualifier | 10 | 2.2 | s |  |  | EM, EX, FX, TE | 999 | R | 1K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2420 E.PER05 must be valid values. | 2420 E.PER05 must be valid values. |  |
| X222.462.2420E.PER05.020 | PER05 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a u s e " ~}$ | If 2420E.PERO5 is "EX", 2420E.PER03 must | It 2420E.PEROS is "EX", 2420E.PERO3 must |  |
| X222.462.2420E.PER06.010 | PER06 | Communication Number | ${ }^{\text {AN }}$ | ${ }^{1-256}$ | s |  |  |  | 999 | R |  |  | It 2420E.PER06 is present, 2420E.PERO5 |  |
| X222.462.2420E.PER06.020 | PER06 |  |  |  |  |  |  |  | 999 | R |  | 2420.EPRRO6 must contain at least one non-- space character. | 2420 e. PERERO6 must contain a t least one non-. ssace character. |  |
| X222.462.2420E.PER06.030 | PER06 |  |  |  |  |  |  |  | 999 | E | 1K403 5 5: "Data Element Too Long" | 2420E.PER06 must be 1-256 characters. | 2420 E.PER06 must be 1-256 characters. |  |
| X222.462.2420E.PER06.040 | PER06 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | Min. <br> max. | Usage Req. | Loop | Loop Repeat | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TA11 } \\ \text { c979 } \\ 277 c \mathrm{C} \end{gathered}$ | $\underset{\text { Acceptrej }}{\text { ect }}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\times \times 222.466 .2420$ E.PER06.050 | PER06 |  |  |  |  |  |  |  | 999 | R |  |  | ${ }^{24200 \text {.PRROG must be populated with }}$ |  |
| X222.462.2420E.PER06. 060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.462.2420E.PERP6.070 | Pero6 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid <br> Information..." <br> CSC 127: "Entity's Communication <br> Number | 2420E.PER06 must be populated with exactly ten numeric characters when 2420E.PER05 equals FX or TE | 2420E.PER06 must be populated with exactly ten numeric characters when 2420E.PER05 equals FX or TE . |  |
| X222.462.2420E.PERR7.010 | PER07 | Communication Number Qualifier | 10 | 2.2 | s |  |  | EM, EX, FX, TE | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" |  |  |  |
| X222.462.2420E.PERP7.020 | PER07 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ \% ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | 2420 E.PER07 must be valid values. | $2420 E$. PERRO7 must be vaid values. |  |
| X222.462.2420E.PERR07.030 | PER07 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | It 2420E.PERO7 is "EX", 2420E.PER05 mus be "TE", |  |  |
| X222.462.2420E.PERR88.010 | PERO8 | Communicaion Number | An | 1-256 | s |  |  |  | 999 | R | K403 $=2$ : "Conditional Required Data Element Missing |  |  |  |
| X222.462.2420E.PERR88.020 | PERO8 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | $2420 E . P E R 08$ must contain at least one non- space character. | 2420E.PER08 must contain at least one non- space character. |  |
| X222.462.2420E.PERR88.030 | PERO8 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element too Long" | 2420E.PER08 must be $1-256$ characters. | 2420E.PER08 must be $1-256$ characters. |  |
| X222.462.2420E.PER808.040 | PERO8 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information.. <br> CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Communication Number <br> FIC DK "Orderina Phwician" |  |  |  |
| x222.462.2420..PER08.050 | PER08 |  |  |  |  |  |  |  | 999 | R | K4003 $=6:$ "IIvaid Character in Data Element | ${ }_{\text {accenepered } A N \text { characters. }}^{2420 \text {. }}$ | ${ }_{\text {and }}^{2420 \text { E.PERROR must be populated with }}$ |  |
| X222.462.2420E.PER08.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.462.2420E.PERP8.070 | PERO8 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | "Acknowledgement/Rejected for Invalid Information..." <br> CSC 127: "Entity's Communication Number" <br> 保 | 2420E.PER08 must be populated with exactly ten numeric characters when 2420E.PER07 equals FX or TE | 2420E.PER08 must be populated with exactly ten numeric characters when 2420E.PER07 equals FX or TE . |  |
| X222.462.2420..PER09.010 | PER09 | Contact Inquiry Reference | AN | 1-20 | NU |  |  |  | 999 | E | KC003 $=10:$ " Implemenataion "Not | Must not be present. | Must not be present. |  |
| x222.465.2420F.Referring Loop. 10 | $\begin{gathered} \text { Referring } \\ \text { Loop } \end{gathered}$ | REFERRING PROVIDER NAME Loop <br> NAME Loop |  |  |  | 2420 F | 2 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" Maximum Times" | Only two iterations of 2420 F are allowed. | Only two iterations of 2420 F are allowed. |  |
| X222.465.242F..NM1.010 | NM1 | $\underset{\substack{\text { REFERRING PROVIDER } \\ \text { NAME }}}{\substack{\text { nt }}}$ |  | 1 | s | 2420 F |  |  | ${ }^{999}$ | R | 1 K304 $=5:$ " "egment Exceeds Maximum Use" | Only one iteration of 2420 F . NM 1 is allowed. | Only one iteration of $2420 \mathrm{~F} . \mathrm{NM1}$ is allowed. |  |
| x222.465.2420F.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | 1K304 = 16: "Implementation Dependent Segment Missing" | If2420F.NM1 is present, 2310A.NM1 must be present | If2420F.NM1 is present, 2310A.NM1 must be present |  |
| X222.465.2420F.NM101.010 | NM101 | Entiy Idenifier Code | 10 | $2 \cdot 3$ | R |  |  | ${ }^{\text {DN, P3 }}$ | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2420F.NM101 must be present. | 2420F.NM101 must be pesent. |  |
| х222.465.2420F.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|K403 =7: "Invaid Code Value" | For the first iteration of the 2420 F loop, 2420F. NM101 must be "DN" | For the first iteration of the 2420 F loop, 2420F. NM101 must be "DN". |  |
| X222.465.24200.NM101.030 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ 7."Invalid Code Value" | For the second iteration of the 2420F loop, 2420 F.NM101 must be "P3". | For the second iteration of the 2420F loop, |  |
| X222.465. 2420F.NM102.010 | NM102 | Enity Type Qualifier | 10 | ${ }^{1-1}$ | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420F.NM102 must be present. | 2420F.NM102 must be present. |  |
| X222.465.2420F.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|K403 $=7$ : "Invalid Code Value" | 2420F.NM122 must be "1". | 2420F.NM102 must be "1". |  |
| X222.465.2420F.NM103.010 | NM103 | Referring Provider Last Nane | ${ }^{\text {AN }}$ | 1.60 | R |  |  |  | ${ }^{999}$ | R | (ka03 1: "Required Data Element | 2420F.NM103 must be present. | 2420F.NM103 must be present. |  |
| х222.465.2420F.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R |  | 2420F.NM103 must contain at least one non- space character. | 2420FF.NM103 must contain at teast one non- space character. |  |
| x222.465.2420F.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | \|K403 5 5: "Data Element Too Long" | 2420-.NM103 must be 1-60 characters. | 2420F.NM103 must be 1-60 characters. |  |
| ×222.465.2420F.NM103.040 | nM103 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information.. <br> CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" EIC: DN "Referrina Provider" |  |  |  |
| X222.465.2420F.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420F.NM103 must be populated with accepted AN characters. | 2accof.NM103 must be poppulated with acced $A$ charactes. |  |
| X222.465.2420F.NM103.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.465.2420F.NM104.010 | NM104 | Refering Provider First Name | ${ }^{\text {AN }}$ | ${ }^{1.35}$ | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | space character. | 2 242F.NM104 must contain at least one non- |  |
| x222.465.2420F.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2420 F.NM104 must be $1-35$ characters. | 2420F.NM104 must be 1-35 characters. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. max. | Usage Req. | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TA11 } \\ \substack{9991 \\ 277 C A} \end{gathered}$ | $\left\|\begin{array}{c} \text { AcceptriRej } \\ \text { ect } \end{array}\right\|$ | Disposition / Error Code | $\underset{\text { Proposed 501001 Edits }}{\text { Part } B}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.465.2420F.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: <br> "Acknowledgement/Rejected for Invalid <br> Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 505: "Entity's First Name" <br> EIC: DN "Referrina Provider" |  |  |  |
| X222.465.2420F.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | R |  |  | ${ }_{\text {accent }}^{2420 \text {..NMIO4 must be poppulated with }}$ |  |
| X222.465.2420F.NM104.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.465.2420F.NM105.010 | nм105 | Referring Provider Middle Name or Initial | an | 1-25 | s |  |  |  | ${ }^{999}$ | R | IK403 = 6: "Invalid Character in Data | 2420F.NM105 must contain at least one non- | 2420F.NM105 must contain at least one non- |  |
| x222.465.2420F.NM105.020 | nM105 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2420 F.NM105 must be 1-25 characters. | 2420 F.NM105 must be 1-25 characters. |  |
| X222.465. 2420F.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name EIC: DN "Referrina Provider" |  |  |  |
| X222.465.2420F.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R |  | 2400.NM105 must be populated with |  |  |
| X222.465.2420F.NM105.045 | NM105 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 514: "Entity's Middle Name" <br> EIC: DN "Referring Provider" | The first position of 2420F.NM105 must be alphabetic (A.... $)$. | The first position of 2420F.NM105 must be alphabetic (A...Z). | To prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.465.2420F.NM105.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.465.2420F.NM106.010 | NM | Name Prefix | an | 1-10 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| х222.465.2420F.NM107.010 | NM107 | Refering Provider Name Suffix | AN | 1-10 | s |  |  |  | ${ }^{999}$ | R | KK003 =6: "INvalid Character in Data Element | 2420F.NM107 must contain at least one nonspace character. | 2420F.NM107 must contain at least one nonspace character. |  |
| X222.465.2420F.NM107.020 | nM107 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element too Long" | 2420-.NM107 must be 1-10 characters. | 2420 F . N107 must be 1-10 characters. |  |
| X222.465.2420F.NM107.030 | nM107 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | "Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system CSC 125: "Entity's Name" EIC. DN "Referrina Provider" |  |  |  |
| X222.465.2420\%.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | R |  | 2420F.NM107 must be populated with accepted AN characters. | 2420F.NM107 must be populated with accepted AN characters. |  |
| X222.465.2420F.NM107.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.465.2420F.NM108.010 | nм108 | Identification Code Qualifier | 10 | ${ }^{1-2}$ | s |  |  | xx | 277 | c | "Acknowledgement/Rejected for relational field in error." <br> CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider dentifier (NPI)" <br> EIC: DN "Referrina Provider | 2420F.NM108 must not be present when 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier" |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claim. 01/20: Companion Guide Note needed. |
| X222.465.2420F.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Missing Information. <br> CSC 745: "Identifier Qualifier" CSC 562: "Entity's National Provider Identifier (NPI) <br> EIC: DN "Referrina Provider" | 2420 F .N108 must be present. | 2420 F .NM108 must be present. | Everyone but Trailblazer or JH (Texas); as appropriate for current MAC contract for VA MRA Project claims. <br> 01/20: Companion Guide Note needed |
| X222.465.2420F.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 $\mathbf{~ 7 ~ \% ~ " I n v a l i d ~ C o d e ~ V a u e " ~}$ | 2420F.NM108 must be "XX". | 2420F.NM108 must be "XX". | Does not apply to TrailBlazer or JH (Texas); as appropriate for current MAC contract for VA MRA appropriate for Project claims. |
| X222.465. 2420 F .NM109.010 | NM109 | Referring Provider Identifier |  |  |  |  |  |  | 277 | c | Acknowledgement/Rejected for Invalid information... <br> CSC 562: "Entity's National Provider dentifier (NPI)" <br> EIC: DN "Referrina Provider" | 2420F.NM109 must be valid according to the NPI algorithm. | 2420F.NM109 must be valid according to the NPI algorithm. |  |
| X222.465. 2420 F .NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c |  | The first position of 2420F.NM109 must be a "1". | The first position of 2420F.NM109 must be a "1". |  |
| х222.465.2420F..NM109.030 | NM109 |  |  |  |  |  |  |  | 999 | R |  | 2420F.NM109 must not = 2310A.NM109. | 2420F.NM109 must not $=2310 \mathrm{~A} . \mathrm{Mm109}$. |  |
| $\begin{aligned} & \begin{array}{l} \text { X222.465.2420F.NN109.040 } \\ \text { Edit Deactivated } \end{array} \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\mathrm{Min}_{\substack{\text { min. } \\ \text { Max. }}}$ | ( $\begin{gathered}\text { Usage } \\ \text { Req. }\end{gathered}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repat }}}{ }$ | 5010A1 Values | $\begin{gathered} \text { TAAl/ } \\ \begin{array}{c} 9997 \\ 277 C A \end{array} \end{gathered}$ | ${ }_{\text {ect }}^{\text {Acceptrej }}$ | Disposition / Error Code | $\underset{\text { Propor B }}{\text { Prose Edits }}$ | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { CEDI }}}{ }$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.257.2420F.NM109.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.465.2420F.NM109.050Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.465.2420F.NM110.010 | nM110 | Enity Relationship Code | 10 | 2-2 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.465.2420F.NM111.010 | NM111 | Entity Identifier Code | 10 | 2.3 | nu |  |  |  | 999 | E | 1K403 $=110$ " "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.465.2420F.NM112.010 | NM112 | Name Last or Organization Name | AN | ${ }^{1.60}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| x222.468.2420F.REF. 010 | REF | REFERRING PROVIDER SECONDARY DENTIFICATION |  | 20 | s | ${ }^{2420 F}$ |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | It 2 2402..NM1 is present and 2420F.NM109 is not present, 2420F.REF must be present. |  | Traillazer or JH (Texas) only, as approppriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| X222.468.2420F.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." <br> CSC 560: "Entity's Additional/Secondary Identifier." EIC: DN "Referring Provider" | Only one iteration of 2420. REF is allowed |  | Trailblazer or JH (Texas) only, as appropriate for current MAC contract for VA MRA Project claims. 01/20: Companion Guide Note needed. |
| x222.468.242F.REF. 030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Dresent" | 2420F.REF must not be present. | 2420F.REF must not be present. | Everyone but Trailblazer or JH (Texas); as appropriate for current MAC contract for VA MRA Project claims. <br> 01/20: Companion Guide Note needed |
| X222.468.24200.REFF01.010 | REF01 | Reference Identification Quaifier | 10 | 2.3 | R |  |  | 0B, 16, G2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420F.REFF01 must be present. | 2420F.REFF01 must be present. |  |
| X222.468. 24200 .REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | T | CsCC A7 <br> Acknowledgement/Rejected for Invalid information..." CSC 732: "Information submitted CSC 560: "Entity's Additional/Secondary Identifier. EIC: DN "Referring Provider" | 2420E.REF01 must be"1G". | 2420E.REF01 must be "1G". | $11 / 20$ : $G 2$ is not valid for Medicare. 01/20: Companion Guide Note needed 1/06: OB and G2 are not valid for Medicare. |
| X2222.468.2420F.REF02.010 | REF02 | $\xrightarrow{\text { Referingug Provider Seconday }}$ Identifier | ${ }^{\text {an }}$ | ${ }^{1.50}$ | R |  |  |  | ${ }^{999}$ | R | \|K403 = 1: "Required Data Element Missing" | 2420F.REFO2 must be present. | 2420F REFO2 must be present. |  |
| X222.468. 2420F.REFF0.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 133: "Entity's UPIN" <br> 560 Entity's Additional/Secondary <br> Identifier <br> ElC: DN "Referring Provider" | 2420F.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit) | 2420F.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit) |  |
| x222.468.2420F.REF03.010 | REFO3 | Descripion | AN | 1-80 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.468.2420F.REF04.010 | REF04 | Reference Qualifier |  |  | s |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.470.24206.NM1.010 | NM1 | $\begin{aligned} & \text { AMBULANCE PICK UP } \\ & \hline \text { LOCATION } \\ & \hline \end{aligned}$ |  | 1 | s | 24206 | 1 |  | 999 | R |  | Only one iteration of 24206 . NM1 is allowed | Only one iteration of $2420 G$ GM1 is allowed. |  |
| x222.470.2420G.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | Itr2420G.NM1 is present, 2310E.NM1 must be present | If2420G.NM1 is present, 2310E.NM1 must be present |  |
| X222.470.2420G. NM101.010 | nM101 | Entiy Idenifier Code | 10 | ${ }^{2.3}$ | R |  |  | PW | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420G. .N101 must be present. | 2420GG.NM101 must be present. |  |
| X222.470.2420GG.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | IK403 7 7: "Invalid Code Value" | 2420G.NM101 must be "PW". | 2420 G . NM101 must be "PW". |  |
| X222.470.2420G. NM102.010 | NM102 | Enity Type Quadifier | 10 | ${ }^{1-1}$ | R |  |  | 2 | ${ }^{999}$ | R | IK403 = 1: "Required Data Element Missing" | 2420 G . NM102 must be present. | 2420 G . NM102 must be present. |  |
| X222.470.24206. NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | IK403 -7: "Invalid Code Value" | 2420 G . NM 102 must be "2". | 2420 G .NM102 must be "2". |  |
| X222.470.24206. NM103.010 | NM103 | Name Last or Organization Name | an | 1.60 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.470.2420GG.NM104.010 | NM104 | Name First | AN | ${ }^{1.35}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" <br> Used" Element Presentr | Must not be present. | Must not be present. |  |
| X222.470.2420G.NM105.010 | NM105 | Name Middle | AN | $1-25$ | NU |  |  |  | ${ }^{999}$ | E |  | Must not be present. | Must not be present. |  |
| X222.470.2420G. NM106.010 | NM106 | Name Prefix | AN | ${ }^{1-10}$ | NU |  |  |  | 999 | E | (14033 $=10$. "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.470.24200. .NM107.010 | NM107 | Name Sufit | ${ }^{\text {an }}$ | ${ }^{1-10}$ | NIL |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.470.24200. NM108.010 | NM108 | Identification Code Qualifier | 10 | 1-2 | NU |  |  |  | 999 | E | (104033 $=110$. "Implementation "Not | Must not be present. | Must not be present. |  |
| X222.470.24206.NM109.010 | NM109 | Identification Code | AN | 2.80 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| X222.470.2420G. NM110.010 | NM110 | Enity Relationstip Code | 10 | 2-2 | nu |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |
| X222.470.2420G. NM111.010 | NM111 | Entiy Identifier Code | 10 | 2.3 | NU |  |  |  | 999 | E |  | Must not be present. | Must not be present. |  |


| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { Min. } \\ \hline \end{gathered}$ Max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 Values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.470.24206..NM112.010 | NM112 | Name Last or Organization Name | AN | 1.60 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| ×222.472.2420G.N3.010 | N3 | AMBULANCE PICK UP LOCATION ADDRESS |  | 1 | R | 2420 G |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | It 2 2 2 20GG. NMM is is present, 2420G. N3 must be present. be present. | If 2420G.NM1 is present, 2420G.N3 must be present. |  |
| х222.472.24206. ${ }^{\text {®3.020 }}$ | N3 |  |  |  |  |  |  |  | 999 | R |  | Only one iteration of 2420G.N3 is allowed. | Only one iteration of 24206..N3 is allowed. |  |
| X222.472.2420G...301.010 | N301 | Ambulance Pick Up Address Line | AN | 1.55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 24206. . 301 must be present. | $24200 . \mathrm{N} 301$ must be present. |  |
| X222.472.2420G. 3 301.020 | N301 |  |  |  |  |  |  |  | 999 | R |  | ${ }^{24200 . ~ N 301 ~ m u s t ~ c o n t a i n ~ a t ~ l e a s t ~ o n e ~ n o n-~}$ | ${ }^{2} 2200$. . 3 301 must contain at least one non- |  |
| X222.472.2420G. .301.030 | N301 |  |  |  |  |  |  |  | 999 | E | \|K403 5 5: "Data Element Too Long" | 24206. . 301 must be $1-55$ characters. | 24200. .3301 must be $1-55$ characters. |  |
| $\times 222.472 .4420 \mathrm{G} .3301 .040$ | N301 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ |  |  |  |  |
| X222.472.2420G...301.050 | N301 |  |  |  |  |  |  |  | 999 | R |  | 2420 G . N301 must be populated with accepede AN Characters. |  |  |
| X222.472.2420G.N301.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \times 222.472 .24200 . .330 .010 \\ \text { Edit Deactivated } \end{array} \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.472.24206. 3302.020 | N302 | ${ }_{\text {Ambulance Pick Up }}^{\text {Line }}$ Adrress | AN | 1.55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data <br> Element" | 2420G.N302 must contain at least one nonspace character. | 2420G. N302 must contain at least one non- space character. |  |
| X222.472.2420G. .302.030 | N302 |  |  |  |  |  |  |  | 999 | E | \|K403 5 : "Data Element Too Long" | 24200. . 302 must be $1-55$ characters. | 2420 G . 3322 must be $1-55$ characters. |  |
| $\times 2$ 22.472.2420G.N302.040 | N302 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> "Acknowledgement/Rejected for Invalid information. application system" CSC 503: "Entity's Street address" CSC 266: "Facility point of origin and destination - ambulance" Elc: 77 "Service Location" |  |  |  |
| $\times 222.472 .4420 \mathrm{G}$. 302.050 | N302 |  |  |  |  |  |  |  | 999 | R |  | 2420G.N302 must be populated with accepted AN characters |  |  |
| X222.472.2420G.N302.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.473.2420G.N4.010 | N4 | AMBULANCE PICK UP LOCATION CITYISTATEIZIP |  | 1 | R | ${ }^{2420 G}$ |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing | $\left\lvert\, \begin{aligned} & \text { It } 2 \text { 2420G. NM1 is is present, } 2420 G \text {. N4 must } \\ & \text { be present. }\end{aligned}\right.$ | If 2420G.NM1 is present, 2420G.N4 must be present. |  |
| X222.473.2420G.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R |  | Only one iteration of 2420G.N4 is allowed. | Only one iteration of 2420G.N4 is allowed. |  |
| X222.473.24206.N401.010 | N401 | Ambulance Pick Up City Name | AN | 2.30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420G. N401 must be present. | 2420G. . 401 must be present. |  |
| $\times 222.473 .24206 . N 401.020$ | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420G.N401 must contain at least two nonspace characters. | 2420G.N401 must contain at least two nonspace characters |  |
| $\times 222.473 .2420 \mathrm{G} .1401 .030$ | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4 " "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2420G.N401 must be $2 \cdot 30$ characters. | 24206. N401 must be $2 \cdot 30$ characters. |  |
| $\times 222.473 .2420 \mathrm{G} .1401 .040$ | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information... CSC 502: "Entity's C <br> CSC 266: "Facility point of origin and destination - ambulance" EIC. 77 "Service Location" $\qquad$ |  |  |  |
| x222.47.2420G.N401.050 | N401 |  |  |  |  |  |  |  | 999 | R |  | 2420G.N401 must be populated with accepted AN characters. |  |  |
| X222.473.2420G.N401.060 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.473.2420G.N402.010 | N402 | Ambulance Pick Up State or Province Coce | 10 | 2.2 | s |  |  |  | 999 | R |  | $\left.\right\|_{\text {must be present }} ^{\text {IT }}$. |  |  |

$\xrightarrow{837-}$

| Edit Reference | Segment or Element | Descripion | 10 | Min. Max. | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 <br> values | $\begin{gathered} \text { TAAI } \\ \text { g999 } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ×222.473.2420G.N402.020 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 501: "Entity's State/Province" CSC 266: "Facility point of origin and destination - ambulance ElC: 77 "Service_Location" | 24206 . N 002 must be a valid State Code. | 2420 G . N 02 z must be a valid State Code. | Valid State Code reference must be available for this edit. |
| X222.473.24206.N403.010 | N403 | $\begin{array}{\|l\|} \hline \text { Ambulance Pick Up Postal Zone } \\ \text { ZIP Code } \end{array}$ | 10 | 3 3.15 | s |  |  |  | 999 | R |  |  | If 2 2420G. N404 is not present, 2420G. N403 must be present. |  |
| $\times 222.473 .2420 \mathrm{G} . \mathrm{N403.020}$ | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" CSC 266: "Facility point of origin and destination - ambulance" EIC: 77 "Service EIC: 77 "Service Location" | 2420G.N403 must be a valid Zip Code. | 2420G.N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| X222.43.24206.N400.010 | N404 | Ambulance Pick Up Country Code | 10 | 2.3 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be peresent. | Must not be peresent. |  |
| X222.473.24206. .400.010 | N405 | Location Qualifer | 10 | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.473.24206. N406.010 | N406 | Location Identifier | an | 1.30 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.473.2420G.N407.005 | N407 | Countr Subdivision Code | 10 | ${ }^{1-3}$ | s |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present | Must not be present. | Must not be present. |  |
| $\left\lvert\, \begin{aligned} & x_{2222.43 .24206 . N 407.010} \\ & \text { Edit Deaciviated } \end{aligned}\right.$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.475.2420H.NM1.010 | NM1 | $\begin{aligned} & \text { AMBULANCE DROP OFF } \\ & \text { LOCATION } \\ & \hline \end{aligned}$ |  | 1 | s | ${ }^{2420 \mathrm{H}}$ | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420 H .NM1 is | Only one iteration of 2420 H .NM1 is allowed. |  |
| x222.475.2420H.Nm1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If2420H.NM1 is present, 2310F.NM1 must be present | If2420H.NM1 is present, 2310F.NM1 must be present |  |
| X222.475.2420H.NM101.010 | NM101 | Entity Identifier Code | $1{ }^{1}$ | 2-3 | R |  |  | 45 | 999 | R | (K003 1.1 "Required Data Element | 242 H .NM101 must be present. | 2420 H .NM101 must be present. |  |
| x222.475.2420H.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|1403 =7: "Invalid Code Value" | 242OH.NM101 must be "55". | 2420H.NM101 must be "45". |  |
| X222.475.242OH.NM102.010 | NM102 | Enity Type Quadifier | 10 | ${ }^{1-1}$ | R |  |  | 2 | 999 | R | (K003 1. "Required Data Element | 242OH.NM102 must be present. | 242OH.NM102 must be present. |  |
| X222.475.2420H.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|14003 =7: "Invalid Code Value" | 2420H.NM102 must be "2". | 2420H.NM102 must be "2". |  |
| X222.475.2420H.NM103.010 | NM103 | Ambulance Drop off Location | AN | ${ }^{1.60}$ | s |  |  |  | 999 | R |  |  | Space character. |  |
| X222.475.2420Н. NM 103.020 | мм103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2220 H .NM103 must be 1-60 charcters | ${ }^{2420 \mathrm{H}}$.NM103 must be 1-60 charcters |  |
| X222.475.2420H.NM103.025 | nM103 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" CSC 266: "Facility point of origin and destination - ambulance" |  |  |  |
| x222.475.242OH.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | R |  | ${ }_{\text {accented }}^{2420 \mathrm{~N} . \text { NMO3 must beracers. populated with }}$ | ${ }_{\text {accen }}^{2420 \mathrm{OH} \text {.NM103 must be poppulated with }}$ |  |
| X222.475.2420H.NM103.040 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х222.475.2420H.NM104.010 | NM104 | Name First | AN | 1-35 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.475.2420H.NM105.010 | NM105 | Name Midale | an | 1-25 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.475.2420H.NM106.010 | NM106 | Name Peffix | an | 1-10 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| Х222.475.2420-HM1107.010 | NM107 | Name Sufix | an | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| Х2222.475.2420OH.NM108.010 | NM108 | Identification Code Qualifier | $1{ }^{1}$ | 1.2 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| $\times \times 222.475 .2420 \mathrm{H}$.NM109.010 | NM109 | Identification Code | an | 2.80 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.475.2420Н.NM110.010 | NM110 | Enity Relationstip Code | $1{ }^{1}$ | 2.2 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.475.242OH.NM111.010 | NM111 | Enity Identifier Code | 10 | 2.3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| Х2222.475.2420OH.NM112.010 | NM112 | Name Last or Organization Name | AN | 1.60 | nu |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| х222.477.2420H.N3.010 | N3 | AMBULANCE DROP OFF LOCATION ADDRESS |  | 1 | R | ${ }^{2420 H}$ |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If $\mathbf{2 4 2 0 H}$.NM1 is present, $\mathbf{2 4 2 0 H}$.N3 must be present. | If $\mathbf{2 4 2 0 H}$.NM1 is present, $\mathbf{2 4 2 0 H}$.N3 must be present. |  |
| $\times \times 22.477 .2420 \mathrm{H} \cdot \mathrm{N} 3.020$ | N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420H.N3 is allowed. | Only one iteration of 2420H.N3 is allowed. |  |
| x222.477.2420H.N301.010 | N301 | $\begin{array}{\|l\|} \hline \text { Ambuance Drop Off Adrress } \\ \hline \text { Line } \end{array}$ | an | ${ }^{1.55}$ | R |  |  |  | 999 | R |  | 2420 H . 3001 must be present. | ${ }^{2420 H . N 301 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| X222.477.2420H.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R |  |  |  |  |
| х222.477.2420H...301.030 | N301 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | $2420 \mathrm{H} . \mathrm{N301}$ must be 1 - 55 characters. | 2420 H.N301 must be 1-55 characters. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 <br> values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\times 222.47 .2420 H . N 301.040$ | N301 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| х222.477.2420Н...301.050 | N301 |  |  |  |  |  |  |  | 999 | R |  | ${ }_{\text {accented } A N \text {. Characceres. }}^{2420 \text {. }}$. | ${ }_{\text {accented } A N \text { characteres. }}^{2420 \text {. }}$. |  |
| X222.477.2420н.N301.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X22.477.2420H.N302.010 Edit Deacivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.477.2420\%H.N302.020 | N302 | $\underset{\substack{\text { Ambulance Drop Offf Address } \\ \text { Line }}}{\text { An }}$ | AN | 1.55 | s |  |  |  | 999 | R | $\left.\right\|_{\text {Klement: }} ^{\text {Ka03 }}=$ :"Invalid Character in Data | $\left.\right\|_{\text {space c character. }} ^{2420 \text { I }}$. ontain at least one non- | $2420 \mathrm{H} . \mathrm{N} 302$ must contain at least one non- space character. |  |
| х222.477.2420Н...332.030 | N302 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2420 H .N302 must be 1 - 55 characters. | 2420 H.N302 must be 1-55 characters. |  |
| ×222.477.2420H.N302.040 | N302 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" CSC 266: "Facility point of origin and destination - ambulance" |  |  |  |
| х222.477.242OH.N302.050 | N302 |  |  |  |  |  |  |  | 999 | R |  | $2420+. N 302$ must be populated $w$ with accepeled $A N$ characters. | $2420+. N 302$ must be populated with accented $A N$ characters. |  |
| $\begin{aligned} & \text { X222.477.2420H.N302.060 } \\ & \text { Edit Deactivated } \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.478.2420H.N4.010 | N4 | AMBULANCE DROP OFF LOCATION CITYISTATEIZIP |  | 1 | R | ${ }^{2420 H}$ |  |  | 999 | R | $1 K 304=166: " I m p l e m e n t a t i o n$ Dependent Segment Missing" | If $2420 \mathrm{H} . \mathrm{NM} 1$ is present, 2420 H .N4 must be present. | If $2420 \mathrm{H} . \mathrm{NM} 1$ is present, 2420 H.N4 must be present. |  |
| х2222.478.2420Н.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420H.NA is allowed. | Only one iteration of 2420H.NA is allowed. |  |
| $\times 222.478 .2420 \mathrm{H}$. 401.010 | N401 | Ambulance Drop off city Name | ${ }^{\text {an }}$ | 2.30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element | 22420 H ./401 must be present. | ${ }^{2420 H . N 401 ~ m u s t ~ b e ~ p e s e n t . ~}$ |  |
| $\times \times 222.478 .2420 \mathrm{H}$. 401.020 | N401 |  |  |  |  |  |  |  | 999 | R |  | 2420 H . N401 must contain at least two non- space characters. | $2420 \mathrm{H} . \mathrm{N} 401$ must contain at least two non- space characters. |  |
| ×222.478.2420H.N.N01.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2420H.N401 must be 2.30 characters. | 2420H.N401 must be 2.30 characters. |  |
| $\times 222.478 .2420 \mathrm{H} .1401 .040$ | N401 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ |  |  |  |  |
| X222.478.2420H.N4001.050 | N401 |  |  |  |  |  |  |  | 999 | R |  | 2420H.N401 must be populated with accepted AN characters. | $2420 \mathrm{H} . \mathrm{N} 401$ must be populated with accepted AN characters. |  |
| X222.478.2420H.N401.060Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×222.478. 2420H.N402.010 | N402 | Ambulance Drop Off State or Province Code | 10 | 2.2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If $2420 \mathrm{H} . \mathrm{N} 404$ is not present, 2420H.N402 must be present. | If $2420 \mathrm{H} . \mathrm{N} 404$ is not present, 2420H.N402 must be present. |  |
| ×222.478. 2420H.N402.020 | N402 |  |  |  |  |  |  |  | 277 | c | Acknowledgement/Rejected for Invalid Information..." <br> CSC 501: "Entity's State/Province" CSC 266: "Facility point of origin and destination - ambulance" | 2420 H .N002 must be a valid State Code. | 2420 H . 4002 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| ×222.478.2420H.N003.010 | N403 | Ambulance Drop piff Postal Zone ZIP Code | 10 | 3-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If $2420 \mathrm{H} . \mathrm{N} 404$ is not present, $2420 \mathrm{H} . \mathrm{N} 403$ must be present. | If $2420 \mathrm{H} . \mathrm{N} 404$ is not present, $2420 \mathrm{H} . \mathrm{N} 403$ must be present. |  |


| Edit Reference | Segment or Element | Description | 10 | Min. max. | Usage Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 values | $\begin{gathered} \text { TA9/1/ } \\ 277 c / 4 \end{gathered}$ | $\begin{array}{\|c} \text { Acceptreej } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part } \mathrm{B} \end{gathered}$ | Proposed 501001 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.478.2420H.N403.020 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 500: "Entity's Postal/Zip Code" CSC 266: "Facility point of origin and destination - ambulance" EIC: 77 "Service Location" | 2420H.N403 must be a valid Zip Code. | 2420 H .N003 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| X2222.478.2420H.N404.010 | N404 | $\begin{gathered} \text { Ambulance Drop Off Country } \\ \text { Code } \\ \hline \end{gathered}$ | 10 | $2 \cdot 3$ | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be presesent. |  |
| x222.478.242OH.N405.010 | N405 | Location Quaifier | 10 | 1-2 | NU |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.478.2420H.N4006.010 | N406 | Location Identifier | AN | ${ }^{1.30}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| x222.478.2420H.N407.005 | N407 | Country Subdivision Code | 10 | 1-3 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |
| X222.478.2420H.N407.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.480.2430.010 |  | Line Adjudication Loop |  |  |  | 2330 | 15 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | $\begin{aligned} & \text { only fitteen iterations of } 2430 \text { are } \\ & \text { allowed. } \end{aligned}$ | Only fifteen iterations of $\mathbf{2 4 3 0}$ are allowed. |  |
| x222.480.2430.SvD. 1010 | svo | LINE ADJUDICATION INFORMATION |  | 1 | s | 2430 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2430.SvD is allowed. | Only one iteration of 2433.5 SvD is allowed. |  |
| X222.480.2430.SvD01.010 | SvD01 | Other Payer Primay Identifier | AN | ${ }^{2.80}$ | R |  |  |  | 999 | R | $1 \mathrm{~K} 403=1:$ "Required Data Element Missing" | 2230.SVV001 must te present. | ${ }^{2430 . S V D 011 ~ m u s t ~ t e ~ p r e s e n t . ~}$ |  |
| $\times 222.480 .2430 .5 v$ D01.020 | svool |  |  |  |  |  |  |  | 999 | R | IK403 = 112: "Implementation Pattern Match Failure | 2430.SVD01 must = 2330B.NM109 (for the same payer). | 2430.SVD01 must = 2330B.NM109 (for the same payer). |  |
| x222.480.2430.5vD02.010 | SvD02 | Service Line Paid Ammunt | R | ${ }^{1-18}$ | R |  |  |  | 999 | R | 1 K403 $=1:$ : "Required Data Element Missing" | $2430 . S V \mathrm{DO2}$ must be present. | 2 2430.SVD02 must be present. |  |
| x222.480. 2430.SvDo2.020 | svoor |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVV02 must be numeric. | 2430.SVD02 must be numeric. |  |
| X222.480.2430.SVD02.030Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.480.2430.SvDo2.040 | SvD02 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2430.SVD02 must be $>=0$ and $<=$ | 2430.SVD02 must be $>=0$ and $<=$ | 11/25: Medicare specific limitation |
| $\times 222.480 .2430 .5 v D 02.050$ | svo02 |  |  |  |  |  |  |  | 277 | T | CSCC A7. Information..." CSC 512: "Length invalid for receiver's application system" |  |  |  |
| $\times 222.480 .2430 .5 v$ D02.060 | SvD02 |  |  |  |  |  |  |  | 277 | T | cscc A7: <br> -AcknowledgementrRejected for Invalid Information.. CSC 697 : "Ilvaid Decimal Precision" CSC 643 :" Sevinice Line Paid Amount" | 2430.SVD02 is limited to 0,1 or 2 decimal positions. | 2430.SVD02 is limited to 0,1 or 2 decimal positions. |  |
| X222.480.2430.SVD02.070 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.480.2430.SVD03.010Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.488.2430.SvD03-1.010 | svoo3-1 | Product or Serice ID Qualifier | 10 | 2.2 | R |  |  | ER, HC, IV, wk | 999 | R | IK403 = 1: "Required Data Element <br> Missing" | $2430.5 v$ D03-1 must be present. | 2430.SvD03-1 must be present. |  |
| ×222.480.2430.SvD03-1.020 | SvDo3-1 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 Acknowledgement/Rejected for Invalid Information..." <br> CSC 732: "Information submitted inconsistent with billing guidelines." CSC 507: "HCPCS" | 2430.SVD03-1 must be "HC". | 2430.SvD03-1 must be "HC". |  |
| х222.480.2430.SvD03-2.010 | svoo3-2 | Procedure Code | ${ }^{\text {an }}$ | ${ }^{1.48}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.SvDo3.2 must be present. | 2433.SvD03.2 must be present. |  |


| Edit Reference | Segment or Element | Description | 10 | $\mathrm{M}_{\text {Min. }}^{\text {Max. }}$ | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 Values | $\begin{gathered} \text { TAII } \\ \text { T } 979 / 1 \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition/Error Code |  | Proposed 5010A1 Edits <br> CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.480.2430.SvD03-2.020 | svo03-2 |  |  |  |  |  |  |  | 277 | c |  | When 2430.SVD03-1 = "HC", 2430.SVD03-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 $=$ " 472 ". | When 2430.SVD03-1 = "HC", 2430.SVD03-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 $=$ " 472 ". | Valid CMS Proprietary HCPCS reference must be avaiable for this edit. |
| x222.480.2430.SvD03-2.030Edit beacivived |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.480.2430.SVD03-3.010 | svo03-3 | Procedur Modifier | an | 2.2 | s |  |  |  | 277 | c | cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" Information" | 2430.SVD03-3 must be valid procedure modifier. modifier. | 2430.SVD03-3 must be valid procedure modifier. | Valid Procedure Code Modifier reference must be available for this edit. |
| x222.480.2430.SVD03-4.010 | svo03-4 | Procedur Modifier | an | 2.2 | s |  |  |  | 999 | ${ }^{\text {R }}$ | IK403 = 2: "Conditional Required Data Element Missing | 2430.SVD03-4 is present, 2430. SVD03-3 must be present | 2430.SVD03-4 is present, 2430.SVD03-3 must be present. |  |
| x222.480.2430.SVD03-4.020 | svo03-4 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> Acknowledgement/Rejected for Invalid nformation... <br> CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered <br> CSC 710:: "Line Adjudication <br> Information" | 2430.SVD03-4 must be valid procedure modifier. modifier. | 2430.SVD03-4 must be valid procedure modifier. | Valid Procedure Code Modifier reference must be available for this edit. |
| X222.480.2430.SvD03-5.010 | svoo3.5 | Procedure Modifier | AN | 2.2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2430.SVDO3.5 is present, $2430.5 V D 033-4$ must be resent. | 2430.SVDO3.5 is present, $2430.5 V D 03$-4 must be present. |  |
| x222.480.2430.SvD03-5.020 | svoo3-5 |  |  |  |  |  |  |  | 277 | c |  | 2430.SvD03-5 must be valid procedure modifier. | 2430.SVD03-5 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| X222.480.2430.SvD03-6.010 | svoo3-6 | Procedur Modifier | an | 2.2 | s |  |  |  | 999 | ${ }^{\text {R }}$ | IK403 = 2: "Conditional Required Data Element Missing" | 2430.SVD03-6 is present, 2430. SVD03-5 must be present. | 2430.SVD03-6 is present, 2430.SVD03-5 must be present |  |
| x222.480.2430.SvDO3-6.020 | svoo3-6 |  |  |  |  |  |  |  | 277 | c | CscC A7: <br> Acknowledgement/Rejected for Invalid information... <br> CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered <br> CSC 710:: "Line Adjudication <br> Information | 2430.SvD03-6 must be valid procedure modifier. | 2430.SVD03.6 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| x222.480.2430.SvD03-7.010 | svo03-7 | Procedure Code Descripion | an | 1-80 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD03-7 must contain at least one non space character | 2430. SVD03-7 must contain at least one nonspace character. |  |
| x222.480.2430.SvD03-7.020 | SvDo3-7 |  |  |  |  |  |  |  | 999 | E | 1K403 =5: "Data Element Too Long" | 2430.SVD03-7 must be 1-80 characters. | 2430.5 SV 03.7 must be $1-80$ characters. |  |
| x222.480.2430.SvD03-7.030 | svo03.7 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ |  |  |  |  |
| X222.480.2430.SvD03-7.040 | svo03-7 |  |  |  |  |  |  |  | 999 | R |  | ${ }^{2430.5 V D 03.7 \text { must be poppulated with }}$ | 243.SVDO..7 must be populated with accepied $A$ N characters. |  |
| X222.480.2430.SVD03-7.050 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\underset{\substack{\text { Min. } \\ \text { Max. }}}{\text { mat }}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\substack{\text { Loop } \\ \text { Repeat }}}{ }$ | 5010A1 values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { AcceptIRe } \\ \text { ect } \end{array}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.480.2430.SvD03.8.010 | SVD03-8 | Productservice ID | AN | ${ }^{1.48}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| x222.480.2430.5vD00.010 | Sv004 | Product or Service ID | AN | ${ }^{1.48}$ | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. | Must not te present. |  |
| x222.480.2430.5vD05.010 | svo0s | Paid Serice Unit Count | R | ${ }^{1.15}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430. SvD05 must be present. | 2 230.SVV005 must be present. |  |
| x222.48.2430.svDos.020 | svDos |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Ivvaid Character in Data | 2430.svo05 must be numeric. | 2430.svo05 must be numeric. |  |
| X222.480.2430.SVD05.025 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.480.2430.SVD05.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.48.2430.SvDo5.035 | svoos |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2430. SvDo5 must be $>=0$ and $<=9.999 .9$. | $2430.5 \mathrm{SvDO5}$ must be > $=0$ and <= 9.999 .9. |  |
| $\times 222.480 .2430 .5 v$ D05.040 | svoos |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 608: "Paid Service Unit Count" CSC 710. "Line Adjudication Information" |  |  |  |
| X222.480.2430.SVD05.050 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.480. 2430.SvD06.010 | svD06 | ${ }^{\text {Bundiled or Unbunded } \text { Line }}$ Number | No | 1.6 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SvD06 must be numeric. | 2430.SvD06 must be numeric. |  |
| x222.480. $2430.5 \mathrm{svD06.020}$ | svD06 |  |  |  |  |  |  |  | ${ }^{999}$ | R | \|Ka03 $\mathbf{k}$ 6: "INvalid Character in Data Element" | 2430.SVD06 must be a integer (whole number. | ${ }^{2430 . \text { SvD00 }}$ dust be a integer (no |  |
| X222.480. $2430.5 \mathrm{svo06.030}$ | svDo6 |  |  |  |  |  |  |  | 999 | E | IK403 5 5: "Data Element Too Long" | 2430.svoo6 must 1-6 digits. | 2430. SVD06 must 1.6 digits. | Medicare business edit Companion quide item |
| $\times 222.480 .2430 .5 v$ D06.035 | Svo06 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's |  |  |  |
| X222.488.2430.CAS. 010 | cas | Line adjustment |  | 5 | s | 2430 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" <br> OR <br> IK304 = 2: "Unexpected Segment" | If 2430.CAS is present, 2430. SVD must be present. | $\underset{\substack{12 \\ \text { present. }}}{ }$ 233.CAS is present, 2430.SVD must be |  |
| х222.484.2430.CAS.020 | cAs |  |  |  |  |  |  |  | 999 | R | 1K304 =5: " "segment Exceeds Maximum Use" | Only five iterations of 2430.CAS are allowed. | Only five iterations of 2430.CAS are allowed. |  |
| X222.484.2430.CAs01.010 | CAs01 | Claim Adjustment Group Code | ID | 1-2 | R |  |  | CO, CR, OA, Pl, PR | 999 | R |  | 2430.CAS01 must be pesent. | 2430.CAS01 must be present. |  |
| X222.484.2430.CAS01.020 | CAS01 |  |  |  |  |  |  |  | 999 | R | IK403 $\mathbf{~ 7 : ~ " I n v a l i d ~ C o d e ~ V a l u e " ~}$ | $2430 . C A 5011$ must be valid values. | $2430 . C A S 011$ must be valid values. |  |
| X222.484.2430.CAS01.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.484.2430.CAS02.010 | CAS02 | Adjustment Reason Code | 10 | 1.5 | R |  |  |  | 999 | R |  | 2430.CASO2 must be present. | 2430.CAS02 must be present. |  |
| $\times 222.484 .2430 . C A S 02.020$ | casoz |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error <br> CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | 2430.CAS02 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 " | 2430.CAS02 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| $\times \times 22$ 2.84.2430.CAS03.010 | CASO3 | Adjustment Amount | R | ${ }^{1-18}$ | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.CAS03 must be present. | 2430.CASO3 must be present. |  |
| $\times 2$ 222.484.2430.CASO3.020 | caso3 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" $\qquad$ | 2430.CAS03 must be numeric. | 2430.CASO3 must be numeric. |  |
| $\times 222.484 .2430 . C A 503.030$ | CASO3 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" <br> EIC: GB "Other Insured | 2430.CAS03 must not $=0$. | 2430.CAS03 must not $=0$. |  |

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| Edit Reference | Segment or Element | Description | 10 | Min. Max. | Usage <br> Req. | Loop | Loop Repeat | 5010A1 <br> values | $\begin{gathered} \text { TTA1 } \\ \substack{999 / \\ 277 C A} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } B \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.484.2430.CAS03.040 | CASO3 |  |  |  |  |  |  |  | 277 | T | Cscc A7: <br> Acknowledgement/Rejected for Invalid \|nformation..." <br> CSC 519: "Adius Decimal Precision" EIC: GB "Other Insured" | 2430.CAS03 is limited to 0,1 or 2 decimal positions. | 2430.CAS03 is limited to 0,1 or 2 decimal positions. |  |
| х2222.484.2430.CAS03.050 | CASO3 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | ${ }^{2430 . C A S O 33 \text { must be }>--99,999.99}$ and | ${ }^{2} 2430 . \mathrm{CASOSO}$ must be $>=-99,999.99$ and | 11/25: Medicare specific limitation. $01 / 20:$ Companion Guide Note needed. |
| x222.484.2430.CAS03.060 | CASO3 |  |  |  |  |  |  |  | 277 | T |  |  |  |  |
| x222.484.2430.CAS04.010 | CAS04 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | E | IK003 = 5: "Data Element Too Long" | 232.CAS04 must be $1-15$ digits. | 2320.CAS04 must be $1-15$ digits. | 11/25: Medicare specific limitation. $01 / 08:$ Not brought into Core System, so no Medicare size limit is needed. |
| x222.484.2430.CAS04.020 | CASO4 |  |  |  |  |  |  |  | 277 | T | "Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount EIC: GB "Other Insured" |  |  |  |
| x222.484.2430.CAS04.030 | CASO4 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" <br> EIC: GB "Other Insured | 2430.CAS04 must not 0 . | 2430.CAS04 must not $=0$. |  |
| X222, 484.2430.CAS05.010 | CASO5 | Adjusment Reason Code | 10 | 1.5 | s |  |  |  | 999 | R |  | 1 It 2430.CASO5 is present, 2430.CASO22 must be pesesent | 1 It 2430.CASO5 is present, 2430.CASO22 must be pesesent |  |
| x222.484.2430.CAS05.020 | CASO5 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error. <br> CSC 521: Adjustment Reason Code <br> CSC 516: Adjudication or Payment <br> Date <br> EIC: GB "Other Insured" | 2430.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2430. DTP03 when DTP01 $=$ " 573 ". | 2430.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X2222.88.2430.CAs06.010 | CAS06 | Adjustment Amount | R | ${ }^{1.18}$ | s |  |  |  | 999 | R |  | It 1 2430.CASO5 is present, 2430.CAS06 must | 112 2430.CASO5 is presest, 2430.CAS06 must be resesent. |  |
| x222.484.2430.CAS06.020 | Casob |  |  |  |  |  |  |  | 999 | R | K403 =6: "Invalid Character in Data Element: | 2430.CAS06 must be numeric. | 2430.CAS06 must be numeric. |  |
| x222.484.2430.CAS06.030 | CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount <br> EIC: GB "Other Insured" | 2430.CAS06 must not 0 . | 2430.CAS06 must not 0 . |  |
| x222.484.2430.CAS06.040 | CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 519: "Adjus Decimal Precision" EIC: GB "Other Insured" | $2430 . C A S 06$ is limited to 0,1 or 2 decimal positions. | 2430. CAS06 is limited to 0,1 or 2 decimal positions. |  |
| X222.484.2430.CA506.050 | CA506 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2430.CAS06 must be $>=-99,999.99$. and $<=$ | 2430.CAS06 must be $>=-99,999.99$. and $<=$ | $\begin{aligned} & 11 / 25: \text { Medicare specifici linitation. } \\ & \text { O} 1 / 20: \text { Companaino Cuide Note needed. } \end{aligned}$ |
| X222.484.2430.CAS06.060 | CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid information... <br> CSC 512: "Length invalid for receiver's CSC 519. "Adem <br> EIC: GB "Other insured" Amount <br> EIC: GB "Other Insured" |  |  |  |
| X2222.484.2430.CAS07.010 | CAS07 | Adjustment Quantity | R | ${ }^{1.15}$ | s |  |  |  | 999 | R |  | 1 II 2430.CASO7 is present, 2430.CASO5 must be peresent. | 1 It 2430.CASO7 is present, 2430.CASO5 mustbe pesesent |  |
| x222.484.2430.CAS07.020 | CASO7 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 232.CAS07 must be $1-15$ digits. | 2320.CAS07 must be 1-15 digits. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| x222.484.2430.CAS07.030 | CAS07 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | "Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" <br> EIC: GB "Other Insured" |  |  |  |
| x222.484.2430.CAS07.040 | CAS07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information... <br> CSC 694: "Amount must not be equal to zero <br> CSC 520: "Adjustment Quantity" <br> EIC: GB "Other Insured" | 2430.CAS07 must not $=0$. | 2430.CASO7 must not $=0$. |  |
| х222, 484.2430.CAs08.010 | CA508 | Adjustment Reason Code | 10 | $1-5$ | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | ${ }_{\text {It }}^{1 \text { It 2430.CASOB is is present, 2 } 230 . C A S O}$ | ${ }_{\text {It }}^{1 \text { It 2430.CASOB is is present, 2430.CASO5 }}$ |  |

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| Edit Reference | Segment or Element | Description | 10 | $\underset{\text { max. }}{\text { min. }}$ | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 501001 Values | $\begin{gathered} \text { Th11 } \\ \substack{9997 \\ 277 c a} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | $\underset{\substack{\text { Proposed 5010A1 Edits } \\ \text { Part } B}}{ }$ | $\underset{\text { CEDI }}{\text { Proposed 5010A1 Edits }}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.484.2430.CAS08. 220 | CAS08 |  |  |  |  |  |  |  | 277 | c | CSCC A8 <br> Acknowledgement/Rejected for relational field in error <br> CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB "Other Insured" | 2430.CAS08 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | 2430.CAS08 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| x222.484.2430.CAS09.010 | Caso9 | Adjustment Amount | R | ${ }^{1.18}$ | s |  |  |  | 999 | R | K403 $=2:$ " "nonditional Required Data Element Missing | $\begin{aligned} & \text { tit 2430.CASO8 is present, 2430.CAS09 must } \\ & \text { be resesent. } \end{aligned}$ | It $12430 . \mathrm{CASO88}$ is present, 2430.CASO99 must be present. |  |
| x222.484.2430.CAS09.020 | Casog |  |  |  |  |  |  |  | 999 | R |  | 2430.CAS09 must be numeric. | ${ }^{2430} \mathbf{C A}$ Cso9 must be numeric. |  |
| x222.484.2430.CAS09.030 | CASO9 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" <br> EIC: GB "Other Insured" | 2430.CAS09 must not 0 . | 2430.CAS09 must not 0 . |  |
| X222.484.2430.CASO9.040 | CASO9 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount EIC: GB "Other Insured" | 2430.CASO9 is linited to 0, 1 or 2 decimal postions. | 2430.CAS09 is limited to 0,1 or 2 decimal positions. |  |
| X222.484.2430.CASS99.050 | CAS09 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.CAS09 must be $>=-99,999.99$. and $k=99.999 .99$. | 2430.CASO99 must be $>=-99,999.99$. and $==99.999 .99$. | 11/25: Medicare specific limitation 01/20: Companion Guide Note needed |
| x222.484.2430.CAS09.060 | CASO9 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> EIC: GB "Other Insur Amount <br> C. GB "Other Insured" |  |  |  |
| x222.484.2430.CAS10.010 | CAS10 | Adjustment Quantity | R | ${ }^{1-15}$ | s |  |  |  | 999 | R |  | 112 2430.CAS10 is present, 2430.CASO88 must be peresent. | II 2 2430.CAS10 is present, 2430.CAS08 must be pesent. |  |
| x222.484.2430.CAS10.020 | CAS10 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.CAS10 must be $1-15$ digits. | 2320.CAS10 must be $1-15$ digits. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| x222.484.2430.CAS10.030 | CAS10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512. Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount <br> EIC: GB "Other Insured" |  |  |  |
| ×222.484.2430.CAS10.040 | CAS10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Ackidedgement/Rejected for Invalid <br> Information..." <br> CSC 694: "Amount must not be equal to zero <br> CSC 520: "Adjustment Quantity" EIC. GB "Other <br> EIC: GB "Other Insured" | 2430.CAS10 must not 0 . | 2430.CAS10 must not 0 . |  |
| X222.484.2430.CAS11.010 | CAS11 | Adjustment Reason Code | 10 | 1-5 | s |  |  |  | 999 | R | KCAOB 2.2 " "ondititional Required Data Element Missing | 1 II 2430.CAS11 is present, 2430.CASO8 must be peresent. | II 2 230.CAS11 is present, 2430.CASO88 must be pesesent |  |
| x222.484.2430.CAS11.020 | CAS11 |  |  |  |  |  |  |  | 277 | c | CSCC A8 <br> "Acknowledgement/Rejected for <br> relational field in error. <br> CSC 521: Adjustment Reason Code <br> Date <br> EIC: GB "Other Insured" | 2430.CAS011 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | 2430.CAS011 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit |
| x222.484.2430.CASS12.010 | CAS12 | Adjustment Amount | R | ${ }^{1.18}$ | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | It 1 2430.CAS11 is present, 2430.CAS12 must | II 2 2430.CAS11 is present, 2330.CAS12 must be present. |  |
| X222.484.2430.CASS12.020 | CAS12 |  |  |  |  |  |  |  | 999 | R | \|K403 =6: "Invalid Character in Data Element | $24330 . C A S 12$ must be numeric. | ${ }^{2430 . C A S 12 ~ m u s t ~ b e ~ n u m e r i c . ~}$ |  |
| x222.484.2430.CAS12.030 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal to zero <br> CSC 519: "Adjustment Amount" <br> ElC: GB "Other-Insured" | 2430.CAS12 must not $=0$. | $2433 . C A S 12$ must not $=0$. |  |
| X222.484.2430.CASS12.040 | CAS12 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7 <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 697: "Invalid Decimal Precision" <br> CSC 519: "Adjustment Amount <br> EIC: GB "Other Insured" | 2430.CAS12 is limited to 0,1 or 2 decimal positions. | 2430.CAS12 is limited to 0,1 or 2 decimal positions. |  |
| x2222.484. 2430.CAS12.050 | CAS12 |  |  |  |  |  |  |  | 999 | E | 1K403 5 5 "Data Element Too Long" | $\underbrace{2430 . \text { CAS12 must be }>=-99,999.99 \text { and }}_{k=9999999 .}$ | 2430.CAS12 must be $>=-99,999.99$ a and $k=99.999 .99$. | 11/25: Medicare specific limitation. $01 / 20:$ Companion Guide Note needed. |
| x222.484.2430.CAS12.060 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> "Acknowledgement/Rejected for Invalid Information.. <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" <br> EIC. GB "Other Insured" |  |  |  |
| x222.484.2430.CASL13.010 | CAS13 | Adjustment Quantiy | R | 1-15 | s |  |  |  | 999 | R |  | 11 It 2430.CAS13 is present, 2430.CAS11 must be peresent. | ${ }^{11}$ It 2430.CAA13 is present, 2430.CAS11 |  |

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| Edit Reference | Segment or Element | Descripion | 10 | $\min _{\text {max. }}^{\text {Max. }}$ | $\begin{aligned} & \begin{array}{l} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | Loop Repeat | 5010A1 <br> Values | $\begin{gathered} \text { TaAl } \\ \substack{9991 \\ 277 C A} \end{gathered}$ | $\left\|\begin{array}{c} \text { Acceptreje } \\ \text { ect } \end{array}\right\|$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.484.243.CAS13.020 | CAS13 |  |  |  |  |  |  |  | ${ }^{999}$ | E | 1K403 = 5: "Data Element Too Long" | 2320.CAS13 must be 1.15 digits. | 2320.CAS13 must be 1-15 digits. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed |
| X222.484.243.CAS13.030 | CAS13 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: "Acknowledgement/Rejected for Invalid Information.. <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount <br> ElC: GB "Other Insured" |  |  |  |
| X222.484.243.CAS13.040 | CAS13 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information.. <br> CSC 694: "Amount must not be equal to zero <br> CSC 520: "Adjustment Quantity" <br> EIC: GB "Other Insured" | 2430.CAS13 must not 0 . | 2430.CAS13 must not $=0$. |  |
| X222.484.243.CAS14.010 | CAS14 | Adjustment Reason Code | 10 | 1.5 | s |  |  |  | 999 | R | \|K403 = 2: "Conditional Required Data | II 2 2330.CAS14 is present, 2430.CAS11 must be peresent | It 2 2330.CAS14 is present, 2430.CAS11 must be peresent |  |
| X222.484.243.CAS14.020 | CAS14 |  |  |  |  |  |  |  | 277 | c | CSCC A8 <br> Acknowledgement/Rejected for relational field in error. <br> CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> EIC: GB "Other Insured" | 2430.CAS014 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | 2430.CAS014 must be a valid Claim Adjustment Reason Code on the date in 2430. TTPO3 when $\mathrm{DTPO1}=" 573$. 2430.DTPO3 when DTPO1 $=573$. | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X222.484.243.CAS15.010 | CAS15 | Adjustment Amount | R | ${ }^{1.18}$ | s |  |  |  | ${ }^{999}$ | R | \|K403 =2: "Conditional Required Data Element Missing' | It 2430.CAS14 is present, 2430.CAS15 must be present. | If 2430.CAS14 is present, $2430 . \mathrm{CAS15}$ must be present. |  |
| X222.484.243.CAS15.020 | CAS15 |  |  |  |  |  |  |  | 999 | R | IK403 =6: "Invalid Character in Data Element" | 2430.CAS15 must be numeric. | 2430.CAS15 must be numeric. |  |
| X222.484.243.CAS15.030 | CAS15 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid information... <br> CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" ElC: GB "Other Insured" | 2430.CAS15 must not 0 . | 2430.CAS15 must not $=0$. |  |
| X222.484.243.CAS15.040 | CAS15 |  |  |  |  |  |  |  | 277 | T | $\operatorname{cscc}$ A7: <br> Acknowledgement/Rejected for Invalid nformation..." CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount EIC: GB "Other Insured" | 2430.CAS15 is inimed to 0,1 or 2 decimal postions. | 2430.CAS15 is inited to 0,1 or 2 decimal positions. |  |
| X222.484.243.CAS15.050 | CAS15 |  |  |  |  |  |  |  | ${ }^{999}$ | E | 1K403 = 5: "Data Element Too Long" | 2430.CAS15 must be >- -99.999 .99 and < $=9.999 .99$ | 2430.CAS15 must be $>=-99,999.99$. and $<=99.999 .99$. | 11/25: Medicare specific limitation 1/20: Companion Guide Note needed. |
| ×222.484.243.CAS15.060 | CAS15 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information... <br> CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount EIC: GB "Other Insured" |  |  |  |
| X222.484.243.CAS16.010 | CAS16 | Adjustment Quantity | R | ${ }^{1.15}$ | s |  |  |  | 999 | R | IK403 =2:" "Conditional Required Data Element Missing" |  | It 2 243.CAS16 is present, 2430.CAS14 must be resent. |  |
| X222.484.243.CAS16.020 | CAS16 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 232.CAS16 must be $1-15$ digits. | 2320.CAS16 must be $1-15$ digits. | $\begin{aligned} & \text { 11/25: Medicare specific limitation. } \\ & \text { 01/08: Not brought into Core System, so no } \\ & \text { Medicare size limit is needed. } \end{aligned}$ |
| X222.484.243.CAS16.030 | CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> Acknowledgement/Rejected for Invalid information.. <br> CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  |  |
| ×222.484.243.CAS16.040 | CAS16 |  |  |  |  |  |  |  | 277 | T | Acknowledgement/Rejected for Invalid Information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" <br> EIC: GB "Other Insured" | 2430.CAS16 must not 0 . | 2430.CAS16 must not $=0$. |  |
| X222.484.2430.CAS17.010 | CAS17 | Adjustment Reason Code | 10 | ${ }^{1.5}$ | s |  |  |  | 999 | R |  | $\begin{aligned} & \text { tif 2430.CAS17 is present, 2430.CAS14 } \\ & \text { must be present: } \end{aligned}$ | $\begin{aligned} & \text { tif 2430.CAS17 is present, 2430.CAS14 } \\ & \text { must be peresent. } \end{aligned}$ |  |
| X222.484.243.CAS17.020 | CAS17 |  |  |  |  |  |  |  | 277 | c | $\mathrm{CsCc} A \mathrm{~A}:$ <br> Acknowledgement/Rejected for elational field in error <br> CSC 521: Adjustment Reason Code Date <br> EIC: GB "Other Insured" | 2430 CAS017 must be a valid Claim Adjustment Reason Code on the date in 2430 .DTP03 when DTP01 $=$ " 573 ". | 2430. CAS017 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit |
| X222.484.243.CAS18.010 | CAS18 | Adjustment Amount | R | ${ }^{1.18}$ | s |  |  |  | 999 | R | IK403 =2: "Conditional Required Data Element Missing | It $2430 . C A S 17$ is present, 2430.CAS18 must be present. | If 2430.CAS17 is present, 2430.CAS18 must be present. |  |
| X222.484.2430.CAS18.020 | CAS18 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS18 must be numeric. | 2430.CAS18 must be numeric. |  |
| X222.484.243.CAS18.030 | CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid information..." <br> CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount EIC: GB "Other Insured" | 2430.CAS18 must not $=0$. | 2430.CAS18 must not $=0$. |  |

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| Edit Reference | Segment or Element | Description | 10 | $\begin{gathered} \text { Min. } \\ \hline \end{gathered}$ Max. | $\begin{array}{\|c\|c} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 <br> Values |  | $\left\lvert\, \begin{gathered} \text { Acceptriej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { PartB } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.484.2430.CAS18.040 | CAS18 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." <br> CSC 697: "Invalid Decimal Precision" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" | 2430.CAS18 is limited to 0,1 or 2 decimal positions. | 2430.CAS18 is limited to 0,1 or 2 decimal positions. |  |
| x222.484.2430.CAS18.050 | CAS18 |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" |  | 2430.CAS18 must be $>=-99,999.99$. and $\varepsilon=99999.99$. | 11/25: Medicare specific limitation 01/20: Companion Guide Note needed. |
| ×222.484.2430.CAS18.060 | CAS18 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7 Acknowledge CSC 512. " application system" CSC 519: "Adjustment Amount" EIC: GB "Other Insured" |  |  |  |
| X222.484.2430.CAS19.010 | CAS19 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | \|K403 = 2: "Conditional Required Data Element Misising" | ${ }_{\text {If }}^{\text {If 2430.CAS19 is present, } 2430 . C A S 17}$ | ${ }_{\text {It }}^{1 \text { It 2430.CAS19 is present, } 2430 . C A S 17}$ |  |
| x222.484.2430.CAS19.020 | CAS19 |  |  |  |  |  |  |  | ${ }^{999}$ | E | 1K403 = 5: "Data Element Too Long" | 232.CAS19 must be $1-15$ digits. | 2320.CAS19 must be $1-15$ digits. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed |
| x222.484.2430.CAS19.030 | CAS19 |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CSCC A7: <br> Acknowledgement/Rejected for Invalid information... <br> CSC 512: "Length invalid for receiver's CSC 519: "Adustem <br> EIC: GB "Oth <br> CSCC AT: |  |  |  |
| x222.484.2430.CAS19.040 | CAS19 |  |  |  |  |  |  |  | 277 | T | 解 nformation..." <br> CSC 694: "Amount must not be equal to zero <br> CSC 520: "Adjustment Quantity" <br> EIC: GB "Other Insured" | 2430.CAS19 must not $=0$. | 2430.CAS19 must not $=0$. |  |
| ×222.490.2430.DTP. 010 | DTP | LINE CHECK OR REMITTANCE DATE |  | 1 | R | 2430 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 16: "Implementation } \\ & \text { Dependent Segment Missing" } \end{aligned}$ | $\begin{aligned} & \text { If 2430.SVD is present, 2430.DTP must be } \\ & \text { present. } \end{aligned}$ | If 2430.SVD is present, 2430.DTP must be present. |  |
| х222.490.2430.DTP.020 | DTP |  |  |  |  |  |  |  | 999 | R |  | Only one iteration of 2430.DTP is allowed. | Only one iteration of 2430.DTP is allowed. |  |
| x222.490.2430.DTP01.010 | DTP01 | Date Time Quaifier | 10 | ${ }^{3} 3$ | R |  |  | 573 | 999 | R | ${ }^{1 \text { K4033 }}=1:$ : Required Data Element Missing" | 2430.DTP01 must be pesent. | 2430.DTP01 must be present. |  |
| X222.490.2430.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | 2430.0TP01 must be "573". | 2430.DTP01 must be "573". |  |
| X222.490.2430.DTPO2.010 | DTP02 | $\underset{\substack{\text { Date Time Period Format } \\ \text { Qualfifer }}}{\text { Din }}$ | 10 | ${ }^{2.3}$ | R |  |  | D8 | 999 | R | \|K403 = 1: Required Data Element <br> Missing" | 2 2330.0TP02 must be pesent. | $22^{230.0 T P 02 ~ m u s t ~ b e ~ p e r e s e n t . ~}$ |  |
| X222.490.2430.DTP02.020 | ${ }^{\text {DTP02 }}$ |  |  |  |  |  |  |  | 999 | R | 1K403 $=7$ : "Invalid Code Value" | 2430.0 DP02 must be "D8". | 2433. DTPO2 must be "D8". |  |
| $\times \times 222.490 .2430$. DTP03.010 | DTP03 | Adjudication or Payment Date | AN | 1.35 | R |  |  | CCYYMMD | 999 | R | IK403 = 1: "Required Data Element Missina" | 2430.0TP03 must be present. | 2430.0TP03 must be present. |  |
| х222.490.2430.DTP03.020 | ${ }^{\text {DTP03 }}$ |  |  |  |  |  |  |  | 999 | R | \|K403 =8. "Invalid Date" | tormat of CCYYMMMDD. <br> 24alid date in the | $2430 . D T P 03$ must be a valid date in the format of CCYYMMDD. |  |
| X222.491.2430.AMT. 010 |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| хх222.491.2430.AmT. 220 | AMT | REMAINING PATIENT LIABLITTY |  | 1 | s | 2430 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2430.AMT is allowed. | Only one iteration of 2430.AMT is allowed. |  |
| х222.491.2430.AmT.030 | amt |  |  |  |  |  |  |  | 277 | ${ }^{+}$ | CsCC A8: <br> "Acknowledgement/Rejected for relational field in error" CSC 6: "Balance due from the subscriber". <br> EIC: GB "Other Insured" | If 2320 AMT (EAF) is present for the same payer, the 2430 AMT (EAF) must not be present | If 2320 AMT (EAF) is present for the same payer, the 2430 AMT (EAF) must not be present |  |
| х222.491.2430.AmT01.010 | Амто1 | Amount Qualifier Code | 10 | ${ }^{1-3}$ | R |  |  | EAF | 999 | R | (1K4033 1. 1 "Required Data Element | 2430.AmT01 must be present. | ${ }^{2430 . A M T 011 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| X222.491.2430.AMTO1..220 | AMTO1 |  |  |  |  |  |  |  | 999 | R | 1K403 =7: "Invalid Code Value" | $2430 . A M T 01$ must be"EAF". | $2430 . A$ AMT01 must be "EAFP". |  |
| х222.491.2430.AмTт2.005 | Aмto2 | $\underset{\substack{\text { Remaining Patien LLiability } \\ \text { Amount }}}{ }$ | R | 1-18 | R |  |  |  | 999 | R | IK003 $=1$ : "Required Doda Element | 2430.AnTo2 must be present. | ${ }^{2430 . A n T 02 ~ m u s t ~ b e ~ p r e s e n t . ~}$ |  |
| х222.491.2430.AмTт02.010 | Амто2 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.AMTO2 must be numeric. | 2430.AMTO2 must be numeric. |  |
| x222.491.2430.Aмto2.020 | amtoz |  |  |  |  |  |  |  | 999 | E | \|K403 = 5: "Data Element Too Long" | 2430.AMTO2 must be < $=99.999 .99$. | 2430.AMTO2 must be $<=99.999 .99$. | 11/25: Medicare specific limitation. 01/08: Medicare limit not needed for pass through elements. |
| х222.491.2430.AMTTO2.030 | Amtoz |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | "Acknowledgement/Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 6: "Balance due from the subscriber" $\qquad$ $\qquad$ |  |  |  |
| х222.491.2430.AmT02.040 | Amto2 |  |  |  |  |  |  |  | 277 | T | CSCC A7 <br> Acknowledgement/Rejected for Invalid information..." <br> CSC 697: "Invalid Decimal Precision" CSC 6: "Balance due from the subscriber" <br> EIC: GB "Other Insured" | 2430.AMT02 is limited to 0,1 or 2 decimal positions. | 2430.AMT02 is limited to 0,1 or 2 decimal positions. positions. |  |
| х222.491.2430.AмTт3.010 | Амтоз | Crediudeitit Flag Code | 10 | 1-1 | nu |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. | Must not be present. |  |


| Edit Reference | Segment or Element | Description | 10 |  | $\begin{aligned} & \begin{array}{c} \text { Usage } \\ \text { Req. } \end{array} \end{aligned}$ | Loop | ${ }_{\substack{\text { Loop } \\ \text { Repeat }}}^{\text {cen }}$ | 5010A1 <br> Values | $\begin{gathered} \text { TAAl/ } \\ \begin{array}{c} 9999 \\ 277 C A \end{array} \end{gathered}$ | Acceptree ${ }_{\text {ect }}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.492.240.LQ.010 | LQ | Form Identification Form Loop |  |  |  | 240 | >1 |  |  |  |  |  |  |  |
| x222.492.2400.LQ.015 | LQ | Form identification Coie |  | 1 | s | 2440 | 1 |  | ${ }^{999}$ | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2400.LQ must not be present. |  | Part B only |
| x222.492.2440.LQ.020 | LQ |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK304 = 16: "Implementation Dependent Segment Missing" |  | If 2400.CR3 is present, 2440.LQ must be present. | DME only |
| x222.492.2440.LQ.030 | LQ |  |  |  |  |  |  |  | 277 | c | cscc A7: <br> Acknowiedgement/Rejected for Invalid Information..." CSC 698: "Form Type Identifier." |  | If 2400.PWK with PWK01 = "CT" and PWK02 = "AD" is present, 2440.LQ must be present. | DME only |
| $\begin{aligned} & \text { X222.492.2440.LQ. } 040 \\ & \text { Edit Deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.492.240.LQ01.010 | LQ01 | Code List Quaifier Code | 10 | 1-3 | R |  |  | As, UT | 999 | R |  |  | $240 . \mathrm{LQ01}$ must be present. | DME only |
| X222.492.240.LQ01.020 | LQ01 |  |  |  |  |  |  |  | 999 | R | \|k403 $=7$ : "Invalid Code Value" |  | 2440.LQ01 must be "UT". | DME only |
| x222.492.240.LQ02.010 | LQ02 | Form Identifier | AN | ${ }^{1-30}$ | R |  |  |  | 999 | R |  |  | 2440.1 LQo2 must be present. | DME only |
| x222.492.2440.L¢02.020 | LQ02 |  |  |  |  |  |  |  | 277 | c | CSCC A7 <br> Acknowledgement/Rejected for Invalid CSC 698 "Form Type Identifier." |  | 2440.LQ02 must be a valid DMERC CMN Form. | DME only. Valid DMERC CMN Form reference must be available for this edit. |
| x222.492.2440.LQ02.030 | LQ02 |  |  |  |  |  |  |  | 277 | c | "Acknowledgement/Rejected for Invalid Information..." CSC 698 "Form Type Identifier" |  | 2440. LQ02 must be a valid form for the procedure code in $2400 . \mathrm{SV} 102$. | DME only. CMS Proprietary Procedure code/Form reference must be available for this edit. |
| X222.492.2400.L002.040 | LQ02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  | 2440.LQ02 must contain at least one non- space character. | DME only |
| X222.494.2490.FRM.005 | FRM | $\begin{gathered} \text { SUPPORTING } \\ \text { DOCUMENTATION } \end{gathered}$ |  | 99 | R | 2440 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2440.FRM must not be present. |  | Part B only |
| X222.494.2400.FRM. 1010 | FRM |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" |  | If 2440. LQ is present, 2440 .FRM must be present. | DME only |
| X222.494.2440.FRM. 020Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.494.2400.FRM.025 | FRM |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error." <br> CSC 21: "Missing or invalid information." <br> CSC 699: "Question/Response from Supporting Documentation Form" |  | If $2440 . \mathrm{LQ}=$ " 484.03 ", occurrences of 2440.FRM with FRM01 = ("1A" or "1B") and FRM01 required. <br> required. | DME only |
| X222.494.2440.FRM. 030Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.494.2400.FRM.035 | FRM |  |  |  |  |  |  |  | 277 | c | $\csc$ A8: <br> Acknowledgement/Rejected for relational field in error." CSC 21: "Missing or invalid information." CSC 699: "Question/Response from Supporting Documentation Form" |  | If 2440.LQ = "484.03" and 2440.FRM01 $=$ " 1 A " and $\mathrm{FRM} 03>=55.5$ and $<=59.4$, "07", "08" and "09" are required. | DME only |
| X222.494.2440.FRM. 040Edit Deacivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.494.2490.fRM.045 | FRM |  |  |  |  |  |  |  | 277 | c | cscc as: <br> Acknowiedgement/Rejected for elational field in error." <br> CSC 21: "Missing or invalid information." <br> CSC 699: "Question/Response from Supporting Documentation Form" |  | If 2440.LQ $=$ "484.03" and 2440.FRM01 $=$ ${ }^{18}$ " and $\mathrm{FRMO5}>=88.5$ and <<89.4, "07", "08" and "09" are required. | DME only |


| Edit Reference | Segment or Element | Description | 10 | $\operatorname{Min}_{\text {Max. }}^{\text {Max. }}$ | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Rea. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | 5010A1 <br> Values | $\begin{gathered} \text { TAAI } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | ${ }_{\text {Acceptrej }}^{\text {ect }}$ | Disposition / Error Code | Proposed 5010A1 Edits Part B | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.494.2440.FRM.050 | FRM |  |  |  |  |  |  |  | ${ }^{999}$ | R | IK304 = 16: "Implementation Dependent Segment Missing |  | If 2400. PWK with PW WK01 $=$ "CT" is present, 2440 .FRM must be present | DME only |
| х222.494.2440.FRM.060 | FRM |  |  |  |  |  |  |  | ${ }^{999}$ | R | \|1304=5: "Segment Exceeds |  | Only 99 iterations of 2440. FRM are allowed. | DME only |
| X222.494.2440.FRM01.010 | FRM01 | Question Numberlceter | AN | 1-20 | R |  |  |  | 999 | R | K403 = 1:" Required Data Element Missing" |  | 2440. FRM01 must be present. | DME only |
| X222.494.2440.FRM01.020 | FRM01 |  |  |  |  |  |  |  | 999 | R | \|K403 = 5: "Data Element Too Long" |  | 2400.FRM01 must be 1-20 characters | DME only |
| X222.494.2440.FRM01.025 |  |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> Acknowledgement/Rejected for Invalid Information..." Certification" <br> CSC 699: "Question/Response from Supporting Documentation Form." |  | 2440.FRM01 must be valid for the value in 2440.LQ02. | DME only |
| X222.494.2440.FRM01.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.494.240.FFRM01.040 | FRM01 |  |  |  |  |  |  |  | 277 | c | $\operatorname{cscc}$ A7: <br> Acknowleagement/Rejected for Invalid information. SSC 699: "Question/Response from Supporting Documentation Form. |  | If 2440. LQ02 $=$ ' 484.03 ' and 2440. FRM01 $=6 A^{\prime}$ or '6B', an occurrence of FRM01 with the value of ' 6 ' ' is required. | DME only |
| X222.494.240.FFRM01.050 | FRM01 |  |  |  |  |  |  |  | 277 | c |  |  | If 2440.LQ02='484.03' and <br> 2440.FRM01='6C', an occurrence of FRM01 with the value of ' 6 A ' or ' 6 B ' is required. | DME only |
| X222.494.2440.FRM02.010 | FRM02 | Question Response | 10 | 1-1 | s |  |  | N, W, Y | 999 | R | \|K403 =7: "Invidid Code Value" |  | 2440. FRM02 must be valid values. | DME only |
| X222.494.240.FFRMO2.020 | FRM02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ |  |  | DME only |
| X222.494.2440.FRM02.030 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.494.240.FFRMO2.035 | FRM02 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error." <br> CSC 21: "Missing or invalid information." CSC 699: "Question/Response from Supporting Documentation Form" |  | If $2440 . \mathrm{LQ} 02=1484.03$ " and 2440 FRM with FRM01 = "04", "07", "08" or "09" is present, then 2440 .FRM02 must be present. | DME only |
| X222.494.2400.FRM03.010 | FRM03 | Question Response | an | ${ }^{1.50}$ | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  | 2440.FRM03 must contain at least one non- space character. | DME only |
| х222.494.240.FFRMO3.020 | FRM03 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information CSC 699: "Question/Response from Supporting Documentation Form. |  | 2440.FRM03 must be present if 2440 .LQ02 = "04.04" and 2440.FRM01 = "07B", "09B" "10B" or "10C". | DME only |
| х222.494.2440.FRM03.030 | FRM03 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> Acknowledgement/Rejected for Invalid Information..." CSC 699: "Question/Response from Supporting Documentation ntation Form." |  | 2440.FRM03 must be present if 2440 .LQ02 $=$ "06.03" and FRM01 = "02" or "03". | DME only |
| X222.494.2400.FRM03.040 | FRM03 |  |  |  |  |  |  |  | 277 | c |  |  | 2440.FRM03 must be present if 2440.LQ02 = "09.03" and FRM01 = "01", "01A", "01B", 01C", "02", "02A", "028", "02C", "03" or 04". | DME only |
| X222.494.240.FRM03.050 | FRM03 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> AcknowledgementRejected for Invalid Information. CSC 699: "Question/Response from Supporting Documentation Form. |  | 2440.FRM03 must be presentif 2440.L९02 <br>  "o88", "08F", "08G" or "09": | DME only |
| X222.494.240.FRMO3.060Edit Deacivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| Edit Reference | Segment or Element | Description | 10 | $\mathrm{M}_{\substack{\text { min. } \\ \text { Max. }}}^{\text {a }}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | ${ }_{\substack{\text { Loop } \\ \text { Repeat }}}$ | 5010A1 values | $\begin{gathered} \text { Thal } \\ \substack{999 \\ 277 c A} \end{gathered}$ | ${ }_{\text {Acceptrej }}^{\text {ect }}$ | Disposition / Error Code | $\begin{aligned} & \text { Proposed 501001 Edits } \\ & \text { Part B } \end{aligned}$ | Proposed 5010A1 Edits CEDI | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х222.494.2440.FRM03.070 | frM03 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" |  | 2440. FRM03 must be 1-50 characters. | DME only |
| X222.494.2400.FRMO3.080 | FRM03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: <br> "Acknowledgement/Rejected for Invalid CSC 512 application system" CSC 699: "Question/Response from Supporting Documentation Form." |  |  | DME ony |
| х222.494.240.F.FM03.090 | FRM03 |  |  |  |  |  |  |  | 999 | R | K4003 $=6:$ "Invalid Character in Data Element: Element |  | 2440.FRM03 must be populated with accepted AN characters. | DME only |
| X222.494.2440.FRM03.100 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.494.240.FFRM03.110 | FRM03 |  |  |  |  |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" |  |  | DME only |
| X222.494.2440.FRM03.120Edit |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.494.240.FFRM03.125 | FRM03 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error." <br> CSC 21: "Missing or invalid information." <br> CSC 699: "Question/Response from Supporting Documentation Form" |  | If 2440. LQ02 $=$ ' 484.03 ' and 2440 FRM with FRM01 = "1A", "6A, "02", "03" or "05" is present, then 2440.FRM03 must be present. | DME ony |
| X222.494.244.FRM04.010 | FRM04 | Question Response | DT | ${ }^{8.8}$ | s |  |  | CCYYMMDD | 999 | R | \|K403 =8: "ITvalid Date" |  | 2440.FRM04 must be a valid date in the | DME only |
| X222.494.2400.FRM04.020 | FRM04 |  |  |  |  |  |  |  | 277 | c | CSCC A7: <br> "Acknowledgement/Rejected for Invalid Information... CSC 510: "Future date" CSC 699: "Question/Response from Supporting Documentation Form." |  | 2440. FRM04 must not be a future date. | DME ony |
| X222.494.240.FFRM04.030 | FRM04 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ |  | If 2440. FRM02 and $2440 . F R M 03$ and 2440. FRM05 are not present, $2440 . F R M 04$ must be present. | DME ony |
| X222.494.2440.FRM04.040Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.494.2400.FRM04.045 | FRM04 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> "Acknowledgement/Rejected for relational field in error." CSC 21: "Missing or invalid information." CSC 699: "Question/Response from Supporting Documentation Form" |  | If 2440. LQ02 $^{\prime}=' 484.03^{\prime \prime}$ and 2440 FRM with FRM01 = " 1 C " or " 6 C " is present, then 2440.FRM04 must be present. | DME only |
| X222.494.2400.FRM05.010 | FRM05 | Question Response | R | ${ }^{1-6}$ | s |  |  |  | 999 | R | (14003 =6: "Invalid Character in Data |  | 22400. FRM05 must be numeric. | DME only |
| X222.494.2440.FRM05.020 | FRM05 |  |  |  |  |  |  |  | 277 | c | Cscc A7: <br> "Acknowledgement/Rejected for Invalid nation. $\qquad$ Supporting Documentation Form." |  | 2440.FRM05 must be present if 2440 .LQ02 <br> $=$ "10.03" and FRM01 = "08B", "08E" or овн | DME only |
| X222.494.240.FFRM05.030 | FRM05 |  |  |  |  |  |  |  | 277 | T | Cscc A7: <br> -Acknowedgementrejected for Invalid Information. CSC 69:" "uestionResponse from Supporting Documentation Form. |  | 2440. FRM05 must be $\gg 0$ and $<=1000.0$. | DME ony |


| Edit Reference | $\begin{aligned} & \text { Segment or } \\ & \text { Element } \end{aligned}$ | Descripion | 10 | Min <br> max. | $\begin{array}{\|l\|l} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\substack{\text { Loop } \\ \text { Repeat }}$ | $\begin{aligned} & \text { 5010A1 } \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { Th11 } \\ \substack{9997 \\ 277 c a} \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | Proposed 5010A1 Edits Part B | $\begin{aligned} & \text { Proposed 5010A1 Edits } \\ & \text { CEDI } \end{aligned}$ | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X222.494.2440.FRM05.040 | FRM05 |  |  |  |  |  |  |  | 277 | T | Cscc AT <br> Acknowledgement/Rejected for Invalid ation..." CSC 697: "Invalid Decimal Precision" CSC 699: "Question/Response from Supporting Documentation Form. |  | 244. .FRMMO is initited 100 or 1 decimal positions. positions. | DME only |
| X222.494.2440.FRM05.550 | FRM05 |  |  |  |  |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" |  | If 2440 .FRM02 and 2440. FRM03 and 2440 FRM04 are not present, 2440.FRM05 must be present. | DME ony |
| x222.494.2440.FRM05.060 | FRM05 |  |  |  |  |  |  |  | 277 | c | CSCC A8: <br> Acknowledgement/Rejected for elational field in error." CSC 21: "Missing or invalid information." <br> SC 699: "Question/Response from Supporting Documentation Form" |  | If $2440 . \operatorname{LQ} 02=$ ' 484.03 ' and 2440 FRM with FRM01 = " 1 B " or " 6 B " is present, then 2440.FRM05 must be present. | DME ony |
| X222.496..SE.010 | SE | TRANSACtion Set traller |  | 1 | R |  | >1 |  | 999 | R |  | SE must be present. | SE must be present. |  |
| $\begin{aligned} & \text { X222.496..SE. } 020 \\ & \text { Edit Deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.496..SE01.010 | SE01 | Transaction Segment Count | No | 1-10 | R |  |  |  | 999 | R | IK502 = 4: "Number of Included Segments Does Not Match Actual | SE01 must be present. | SE01 must be present. |  |
| X222.496. SE01.020 | SE01 |  |  |  |  |  |  |  | 999 | R | IK502 $=4:$ "Number of Included Segments Does Not Match Actual Comel | SE01 must be numeric. | SE01 must be numeric. |  |
| X222.496..SE01.030 | SE01 |  |  |  |  |  |  |  | 999 | R | IK502 = 4: "Number of Included Segments Does Not Match Actual Count" <br> Count". | SE01 must equal the transaction segment count. | SE01 must equal the transaction segment count. |  |
| X222.496. SE01.040 | SE01 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK502 = 4: "Number of Included } \\ & \text { Segments Does Not Match Actual } \\ & \text { Count". } \end{aligned}$ | SE01 must be $>0$. | SE01 must be > 0 . |  |
| X222.496. SE02.010 | SE02 | Transaction Set Contro Number | an | 4.9 | R |  |  |  | 999 | R | IK502 = 3: "Transaction Set Control Number in Header and Trailer Do Not Match" | SE02 must be present. | SE02 must be present. |  |
| х222.496. SE02.020 | SE02 |  |  |  |  |  |  |  | 999 | R | IK502 = 3: "Transaction Set Control Number in Header and Trailer Do Not Match". | SE02 must S STo2. | SE02 must = STO2. |  |
| x222.C8.GE.010 | GE | Functional Group Trailer |  | 1 | R |  |  |  | 999 | R | (tas | GE must be present. | GE must be present. |  |
| $\begin{aligned} & \begin{array}{l} \text { X222.C8..GE.020 } \\ \text { Edit Deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X222.C8. GE01.010 | GE01 | $\begin{aligned} & \text { Number of Transaction Sets } \\ & \text { Included } \\ & \hline \end{aligned}$ | No | ${ }^{1-6}$ | R |  |  |  | 999 | R | AK905 = 5: "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be present. | GE01 must be present. |  |
| X222.c8. GE01.020 | GE01 |  |  |  |  |  |  |  | 999 | R | AK905 = 5: "Number of Included Transaction Sets Does Not Match Actual Count". <br> Actual Count | GE01 must be numeric. | GE01 must be numeric. |  |
| X222.c8..GE01.030 | GE01 |  |  |  |  |  |  |  | 999 | R | AK905 = 5: "Number of Included Transaction Sets Does Not Match Actual Count" | GE01 must equal the number of transaction sets included in the functional group. | GE01 must equal the number of transaction sets included in the functional group. |  |
| X222.c8. GE01.040 | GE01 |  |  |  |  |  |  |  | 999 | R | AK905 = 5: "Number of Included Transaction Sets Does Not Match | GE01 must be > 0 . | GE01 must be > 0 . |  |
| X222.C8. GE02.010 | GE02 | Group Control Number | No | 1.9 | R |  |  |  | 999 | R | $\begin{aligned} & \text { AKK05 = 4: "Group Control Number in } \\ & \text { the Functional Group } \\ & \text { Header and Traier Do Not Agree". } \end{aligned}$ | GE02 must be present. | GE02 must be present. |  |
| X222.c8. GE02.020 | GE02 |  |  |  |  |  |  |  | 999 | R | AKM005 =4: "Group Control Number in <br> the Functional Group <br> Header and Trailer Do Not Aaree". | GE02 must = Gso6. | GE02 must = GS06. |  |
| X222.C10.IIEA.010 | IEA | Interchange Control Header |  | 1 | R |  |  |  | ta1 | R | TA105 = 023: "Improper (Premature) End-of-File (Transmission)" | IEA must be present. | IEA must be present. |  |
|  |  |  |  |  |  |  |  |  | TA1 | R | TA105 = 022: "Invalid Control Structure" | Only one iteration of IEA is allowed. -OR- | Only one iteration of IEA is allowed. -OR- |  |
| x222.C10.\|IEA.015 | IEA |  |  |  |  |  |  |  | TA1 | R | TA105 = 023: "Improper (Premature) End-of-File (Transmission)" | Only one iteration of IEA is allowed. | Only one iteration of IEA is allowed. | Contractors are free to choose the edit that best fits their translator functionality. |
| X222.C10..IEA. 020 Edit Deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x222.C10.1FA01.010 | IEA01 | Number of Included Functional Groups | No | 1.5 | R |  |  |  | ${ }^{\text {A1 }}$ | R | (eater | \|EA001 must be present. | IEA01 must be present. |  |
| x222.C10.1EA01.020 | IEA01 |  |  |  |  |  |  |  | TA1 | R |  | IEA01 must be numeric. | IEA01 must be numeric. |  |
| x222.:10.1FA001.030 | IEA01 |  |  |  |  |  |  |  | TA1 | ${ }^{\text {R }}$ | TA105 = 021: "Invalid Number of Included Groups Value". | IEA01 must equal the number of functional groups included in the interchange. | IEA01 must equal the number of functional groups included in the interchange. |  |
| X222.C10. .1FA01.040 | IEA01 |  |  |  |  |  |  |  | TA1 | R |  | IEA01 must be $>0$. | IEA01 must be $>0$. |  |
| x222.C10.\|EA02.010 | IEA02 | Interchange Control Number | No | 9.9 | R |  |  |  | tA1 | R |  | IEA02 must be present. | IEA02 must be present. |  |

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| Edit Reference | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \hline \end{gathered}$ Max. | $\begin{array}{\|l\|l\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | 5010A1 Values |  | ${ }_{\text {Acceptrej }}^{\text {ect }}$ | Disposition /Error Code | $\begin{gathered} \text { Proposed 501001 Edits } \\ \text { Part B } \end{gathered}$ |  | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x222.C10.1EA02.020 | IEA02 |  |  |  |  |  |  |  | TA1 | R | TA105 = 001: "The Interchange Control Number in the Header and Trailer Do Not Match". | IEAO2 must = SAA13 | IEA02 must = ISA13 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| Color Coding |  | 1CD-9 Only period |  |  |  |  |  |  |  |  |  |  |  |  |
| Color Coding |  | $1 \mathrm{CD}-10$ Only period |  |  |  |  |  |  |  |  |  |  |  |  |
| Color Coding |  | Not Used or Must Not be Present |  |  |  |  |  |  |  |  |  |  |  |  |
| Color Coding |  | Edit Deactivaled |  |  |  |  |  |  |  |  |  |  |  |  |
| Color Coding |  | CsC is TBD |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

Changes to the version included for POC Review

| Edit Reference | Change | Date | Reason |
| :---: | :---: | :---: | :---: |
| X222.305.2320.AMT01.030 | added a 277 C edit to ensure if 2000B.SBR01 $=P$ then $2320 . A M T 01$ must not $=D(9 / 20 / 2012$, added misc. note explaining rationale) | 9/4/2012 | Medicare business edit: Medicare cannot be both primary and secondary at the same time, as a P (primary) and a D (payor amount paid) would respectively indicate. |
| X222.087.2010AA.NM108.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.087.2010AA.NM108.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.087.2010AA.NM108.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.096.2010AA.REF. 010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.096.2010AA.REF. 020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.096.2010AA.REF. 030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.096.2010AA.REF01.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.096.2010AA.REF01.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.096.2010AA.REF02.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.096.2010AA.REF02.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.140.2010BB.REF. 010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.140.2010BB.REF. 020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.140.2010BB.REF. 030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.140.2010BB.REF01.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.140.2010BB.REF01.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.140.2010BB.REF02.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.140.2010BB.REF02.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.140.2010BB.REF02.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.140.2010BB.REF02.040 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.140.2010BB.REF02.050 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.140.2010BB.REF02.075 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.205.2300.REF02.050 | added JH (Texas) to "Misc. Notes" column, clarified language (9/20/2012), and revised the edit | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.257.2310A.NM108.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.257.2310A.NM108.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.257.2310A.NM108.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.260.2310A.REF. 010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.260.2310A.REF. 020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |

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| X222.260.2310A.REF. 030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| :---: | :---: | :---: | :---: |
| X222.260.2310A.REF01.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.260.2310A.REF01.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.260.2310A.REF02.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.260.2310A.REF02.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.260.2310A.REF02.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.260.2310A.REF02.040 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.260.2310A.REF02.050 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.260.2310A.REF02.060 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.262.2310B.NM108.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.262.2310B.NM108.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.262.2310B.NM108.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.267.2310B.REF. 010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.267.2310B.REF. 020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.267.2310B.REF. 030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.269.2310C.NM108.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.280.2310D.NM108.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.280.2310D.NM108.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.280.2310D.NM108.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.283.2310D.REF. 010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.283.2310D.REF. 015 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.283.2310D.REF01.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.283.2310D.REF01.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.283.2310D.REF02.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.283.2310D.REF02.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.283.2310D.REF02.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.283.2310D.REF02.040 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.283.2310D.REF02.050 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.283.2310D.REF02.060 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |


| X222.430.2420A.NM108.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| :---: | :---: | :---: | :---: |
| X222.430.2420A.NM108.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.430.2420A.NM108.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.434.2420A.REF. 010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.434.2420A.REF. 020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.434.2420A.REF. 030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.436.2420B.NM108.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.436.2420B.NM108.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.436.2420B.NM108.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.439.2420B.REF. 010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.439.2420B.REF. 020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.439.2420B.REF. 030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.439.2420B.REF01.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.441.2420C.NM108.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.449.2420D.NM108.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.449.2420D.NM108.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.449.2420D.NM108.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF. 010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF. 020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF. 030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF01.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF01.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF02.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF02.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF02.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF02.040 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF02.050 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF02.060 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF04-1.015 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |

Changes to the version included for POC Review

| X222.452.2420D.REF04-1.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| :---: | :---: | :---: | :---: |
| X222.452.2420D.REF04-2.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.452.2420D.REF04-2.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.454.2420E.NM108.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.454.2420E.NM108.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.454.2420E.NM108.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.460.2420E.REF. 010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.460.2420E.REF. 020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.460.2420E.REF. 030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.460.2420E.REF01.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.465.2420F.NM108.010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.465.2420F.NM108.020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.465.2420F.NM108.030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.468.2420F.REF. 010 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.468.2420F.REF. 020 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.468.2420F.REF. 030 | added JH (Texas) to "Misc. Notes" column and clarified language (9/20/2012) | 9/6/2012 | JH (Texas) will handle VA MRA claims per its MAC contract |
| X222.074.1000A.NM105.065 | added 277C edit for 1st character of middle name to be alphabetic (9/20/2012, added misc. note explaining rationale). | 9/6/2012 | Medicare business edit: to prevent continued processing and rejection (CWF) of claims having an incorrect character in this position, such as a paren. |
| X222.087.2010AA.NM105.065 | added 277C edit for 1st character of middle name to be alphabetic (9/20/2012, added misc. note explaining rationale). | 9/6/2012 | Medicare business edit: to prevent continued processing and rejection (CWF) of claims having an incorrect character in this position, such as a paren. |
| X222.121.2010BA.NM105.045 | added 277C edit for 1st character of middle name to be alphabetic (9/20/2012, added misc. note explaining rationale). | 9/6/2012 | Medicare business edit: to prevent continued processing and rejection (CWF) of claims having an incorrect character in this position, such as a paren. |
| X222.257.2310A.NM105.045 | added 277C edit for 1st character of middle name to be alphabetic (9/20/2012, added misc. note explaining rationale). | 9/6/2012 | Medicare business edit: to prevent continued processing and rejection (CWF) of claims having an incorrect character in this position, such as a paren. |
| X222.262.2310B.NM105.055 | added 277C edit for 1st character of middle name to be alphabetic (9/20/2012, added misc. note explaining rationale). | 9/6/2012 | Medicare business edit: to prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.280.2310D.NM105.045 | added 277C edit for 1st character of middle name to be alphabetic (9/20/2012, added misc. note explaining rationale). | 9/6/2012 | Medicare business edit: to prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |

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Change Log
Changes to the version included for POC Review

| X222.313.2330A.NM105.055 | added 277C edit for 1st character of middle name to be alphabetic (9/20/2012, added misc. note explaining rationale). | 9/6/2012 | Medicare business edit: to prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| :---: | :---: | :---: | :---: |
| X222.430.2420A.NM105.055 | added 277C edit for 1st character of middle name to be alphabetic (9/20/2012, added misc. note explaining rationale). | 9/6/2012 | Medicare business edit: to prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.449.2420D.NM105.045 | added 277C edit for 1st character of middle name to be alphabetic (9/20/2012, added misc. note explaining rationale). | 9/6/2012 | Medicare business edit: to prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.454.2420E.NM105.045 | added 277C edit for 1st character of middle name to be alphabetic (9/20/2012, added misc. note explaining rationale). | 9/6/2012 | Medicare business edit: to prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.465.2420F.NM105.045 | added 277C edit for 1st character of middle name to be alphabetic (9/20/2012, added misc. note explaining rationale). | 9/6/2012 | Medicare business edit: to prevent continued processing and later rejection of claims (CWF) having an incorrect character in this position, such as a paren. |
| X222.172.2300.DTP02.030 | added 277C edit for qualifier 314 requiring RD8 | 9/18/2012 | per the TR3 |
| X222.283.2310D.REF02.050 | removed CSC 629: "Property Casualty Claim Number" from the edit | 9/27/2012 | CSC not applicable |
| X222.130.2010BA.REF02.040 | removed EIC: IL "Subscriber" from the edit | 9/27/2012 | EIC not applicable |
| X222.373.2400.CRC. 020 | edit deactivated | 10/22/2012 | This 277 C edit is redundant in function to the 999 edit X222.378.2400.CRC.020. Both limit to 3 iterations the 2400. CRC segment when CRC01=09, that is "durable medical equipment certification." Only one edit for this purpose is needed. |
|  |  |  |  |

## Spreadsheet Details

An Edit Identifier is used to uniquely identify each row in an Edit Spreadsheet. It consists of the following fields separated by periods:

* TR3 Identifier.
* TR3 Page reference for the segment identified.
* TR3 Loop ID (if there is no loop ID there will be two periods together).
* Segment ID and Element Position.
* Edit Number (within the Segment ID / Element Position).
- The "Accept/Reject" Column will be populated with one of the following values as indicated below:
* R - The transaction set (ST-SE) is rejected back to the submitter.
* E - The transaction set (ST-SE) is passed to the CEM where additional validation occurs. Rejections for both syntax and business reasons will occur at the claim level within the CEM.
* T - The error is identified in the translator and an STC record is added to the 837 flat file following the segment that had the error.
* C - The error is identified in the CEM, a 277CA flat file, including the business error information, will be generated.


## - Acronyms:

* CSC - Claim Status Code.
* CSCC - Claim Status Category Code.
* EIC - Entity Identifier Code.


## - Edit inclusion methodology:

* If a segment/element/composite is required, based on either guide usage or by situational rule interpretation, there will be an edit that indicates it must be present.
* If a segment/element/composite is not used, based on either guide usage or by situational rule interpretation, there will be an edit that indicates that it must not be present.
* If a segment/element/composite does not have either of those explicit notations, the edits listed will apply when the segment/element/component is present.


## - Assumptions:

instructions or add Medicare specific requirements. Unless otherwise explicitly specified in the EDITS worksheet, all X12 IG instructions must be followed.
constraints or business rules. This notation indicates that the information is stored on the repository but not used in any CMS system processing.

* Front End processing will determine billing criteria (inpatient, outpatient, POA, etc.) based on the NUBC manual. Specific criteria will not be included in this document.
included when they can be consistently enforced by a transaction receiver. In the absence of consistently enforceable criteria, no edit will be included to control inclusion/exclusion.
Example: 2320 COB Payer Amt Paid - there is no way for the receiver to determine whether the claim has been adjudicated by the payer in Loop 2330B, so no edit will be included for that criteria.
* Format definitions, rules, restrictions, guidance, or instructions published by the code set owner of an external code set must be met for a code from an external code set to be noted as "valid". qualifier clause (Only one iteration of $2300 . \mathrm{HI}$ with HI01-1 = "DR" is allowed), otherwise the segment edit will just include the number of iterations allowed (Only one iteration of 2310C.NM1 is allowed).


## - Valid dates - dates must be valid according to the calendar for the specific year.

* Only 01-12 are valid for the month positions of the date field.
* If month is "01", the day positions may be populated with 01-31.
* If month is "02", the day positions may be populated with $01-28$, except during leap years (2008 was a leap year, leap years occur every 4 years) when the day positions may be populated with 01-29.
* If month is "03", the day positions may be populated with 01-31.
* If month is "04", the day positions may be populated with 01-30.
* If month is "05", the day positions may be populated with 01-31.
* If month is "06", the day positions may be populated with 01-30.
* If month is "07", the day positions may be populated with 01-31.
* If month is " 08 ", the day positions may be populated with $01-31$.
* If month is "09", the day positions may be populated with 01-30.
* If month is "10", the day positions may be populated with 01-31.
* If month is "11", the day positions may be populated with 01-30.
* If month is "12", the day positions may be populated with 01-31.


## - Future Date edits:

* Edits restricting a date field from being a "future date" should be evaluated against the date the file was received.


## - ICD Codes:

* Edits that are specific to the period when ICD-9 is allowed are highlighted in pink.
* Edits that are specific to the period when ICD-10 is allowed are highlighted in turquoise.


## - Numeric edits:

* Positive/Negative/Zero:
- Any numeric value with an edit that indicates it must be $>=0$ means that negative numbers are not allowed.
- Any numeric value with an edit that indicates it must be $>0$ means that neither zero nor negative numbers are allowed.
- If neither of these explicit edit are present, negative, zero, and positive numbers are allowed.
* If an edit references a numeric value (must be >=, <= or = with a numeric limitation) implies a numeric content requirement so the standard numeric check will not be included.
* The words "digit" or "digits" in an edit implies numeric content.
- Alphanumeric edits:
* The words "character" or "characters" in an edit implies alphanumeric content.
* If the data of an AN element or composite is from an external code list, the standard AN edits will not be included.
- If an edit contains a bracketed clause, [clause], each contractor must supply the information noted in the edit (e.g. receiver code).


## Terms and Definitions

The flow of the transactions is:

* Front end processing - commercial translator edits, specific to each contractor.
- EDI syntax integrity validation

Valid Segments (e.g. valid segment identifier, number of elements, delimiters)
Segment order (as defined by the X12 / NCPDP standard)
Element Attributes (e.g. X12 usage, repetitions, data type, and min/max size)
Numeric element validation (e.g. leading minus signs, decimal points for R data types)
X12 / NCPDP syntactical rules

- HIPAA syntax integrity validation based upon adopted specifications (X12 / NCPDP)

Repeat maximums for segments, loops, elements (when repeating element are used)

- Used and un-used qualifiers, (internal) codes, elements, and segments
- Intra-segment situational data elements (e.g. DTP for auto accident becomes required when CLM011-1 or CLM11-2 is "AA" or "OA")


## * Common edit module - identical processing across contractors

- External code source validation
- All CMS business rule validation that is evaluated post-translation
- Balancing edits
- Situation based edits
- Code Set edits
- Product Type/Type of Service edits


## * Shared system - CMS claims processing system.

277 - Denotes that a 277 acknowledgement will be returned to the submitter.
common edit module is invoked). When this type of error is identified an STC record is added to the 837 flat file following the segment with the identified error.
type of error is identified an STC record is added to the 277 flat file following the segment with the identified error.

999 - Denotes that a 999 acknowledgement will be returned to the submitter.
rejected back to the submitter. If multiple transaction sets are included in one functional group, only the transaction set with an identified 999R error will be rejected, not all the transaction sets in the functional set (ST-SE) will continue to be evaluated against the translator errors before being passed to the CEM for additional validation. When an error is identified an STC record is added to the 837 flat file following the segment with the identified error.
Exception: If the 999E is based on usage of a "Not Used" element only a 999E will be generated and sent back to the submitter. No corresponding 277 will be created in the flat file for this type of error.

## Assumptions

277 acknowledgements and 999 acknowledgements are not mutually exclusive.

## General Edit Rules:

## Duplicate ST-SE transaction sets shall be rejected as follows:

CSCC A8: Acknowledgement / Rejected for relational field in error
CSC 746: Duplicate Submission. Note: use only at the information receiver level in the Health Care Claim Acknowledgement transaction
EIC: 40: Receiver

These are the priority rules. They supersede the secondary rules whenever there is a conflict between the instructions.

- 999R edits stand alone. They are not associated with a corresponding 277 error.

999E edits are always followed by a 277T edit.

* Exception: a 999E based on usage of a "Not Used" element stands alone.

277C edits stand alone. They are not associated with a corresponding 999 error.
277T edits are usually preceded by a 999E edit but can stand alone.

* Special Case: When an element has more than one error that can be identified in the translator, there can be multiple 277Ts following one 999E.
acknowledged as shown in the spreadsheet. If envelope errors result in a transaction not being recognized as an X12 transaction, contractors have flexibilty on how to acknowlege the transaction.

All Table 1 edits result in a 999R or TA1 rejection.

* Exception: "Not Used" elements will be associated with stand-alone 999E edits.

All Table 2 edits related to CMS business constraints will be associated with a 277 edit.

* EDI Syntax Integrity Validation (WEDI Level 1) or HIPAA Syntax Integrity Validation, which includes Situational Rule Validation (WEDI Level 2) edits will be associated with a 277T edit.
* Common Edit Module validation (WEDI Levels 3 through 6) edits will be associated with a 277C edit.

All Table 2 edits related to CMS technical constraints will be associated with a 999E followed by a 277T edit.

* Examples: amounts or quantities for which CMS's internal system size is smaller than the IG allowed maximum.


## Specific Edit Rules:

These are the secondary rules. They apply only when they do not violate the priority rules.

- Loops that are not accepted based on Medicare business rules will be associated with a standalone 277T edit.

Segments that are not accepted based on Medicare business rules will be associated with a standalone 277T edit.

- All "... must be populated with accepted AN characters" edits will result in a 999R (IK403=6).
. All "...must be \# - \#\# characters" edits will be associated with a 999E (IK403=4 or IK403=5)/277T edit combination.
- All "...must be $\{<,>,=,<=,>=\}$ " edits that establish element length will be associated with a 999E (IK403=4 or IK403=5)/277T edit combination.
- All "...must contain at least \#\# non-space characters" edits will be associated with a 999R edit (IK403=6).

All "...must be present" edits at the segment level will be associated with a 999R edit (IK304=3). Exception: if the edit reflects Medicare business rules instead of X12 syntax rules, the edit will be associated with a 277T edit.

All "...must be present" edits at the element level will be associated with a 999R edit (IK403=1). Exception: if the edit reflects Medicare business rules instead of X12 syntax rules, the edit will be associated with a 277T edit.
. All "If ... is not present, ... must be present" edits at the segment level will be associated with a 999R edit (IK304=16).

All "If ... is present, ... must be present" edits referring to a relationship between two elements within the same segment will be associated with a 999R edit (IK403=2).
. All "If ... is present, ... must be present" edits referring to a relationship between two different segments will be associated with a 277C edit.

All "If ...is present, ....may be present" edits referring to a relationship between two elements within the same segment will be associated with a 999R edit (IK403=10).
. All "If ... is present, ... may be present" edits referring to a relationship between two different segments will be associated with a 999R edit (IK304=I9).

All "...must be valid values" edits will be associated with a 999R edit (IK403=7).

All "...must be \{explicit value\}" edits will be associated with a 999R edit (IK403=7).
All "...must be numeric" edits will be associated with a 999R edit (IK403=6).

All external code source edits will be associated with a 277C edit.
All "must be an integer" edits will be associated with a 999R edit (IK403=6).

All "must be a valid date" edits will be associated with a 999R edit (IK403=8).
All "must be a valid time" edits will be associated with a 999R edit (IK403=8).

All "must not be present" edits at the segment level will be associated with a 277T edit.
All "must not be present" edits at the element level will be associated with a 999E edit (IK403=I10).
All "If ...NM102 is " 2 ", ... must not be present" edits will be associated with a 999R edit (IK403=I13).

All dollar amounts or numeric elements that use $<,>,=,<=$, or $>=$ to establish value limits will be associated with a 277T edit.

All edits limiting the number of iterations of a segment will be associated with a 999R (IK304=5).

* Exception: All edits limiting the number of iterations of the first segment of a loop will be associated with a 999R (IK304=4).


## Segment or Element Specific Edit Rules:

These are the tertiary rules. They apply only when they do not violate the priority or secondary rules.

In Loops 1000A and 2010AA, NM109 edits referring to "approved electronic submitter" (trading partner management edits) will be associated with a 999R edit (trading partner management edits). - Elements that are situational in the TR3 but listed as "must not be present" and shaded gray on the edits spreadsheets are not to be mapped to the flat file.

