## CMS Manual System

Pub 100-20 One-Time Notification

Transmittal 541

## Department of Health \& <br> Human Services (DHHS)

Centers for Medicare \& Medicaid Services (CMS)

Date: August 21, 2009
Change Request 6610

SUBJECT: Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Version 005010837 Institutional (837I) Edits for J10 and J14 Only
I. SUMMARY OF CHANGES: The purpose of this CR is to provide direction to Medicare Administrative Contractors (MACs) J10 and J14 only to implement the Accredited Standards Committee (ASC) X12 TA1 and X12 005010X231 999 edits for the inbound 5010837 I transaction based on the attached edits file.

NEW / REVISED MATERIAL
EFFECTIVE DATE: *January 1, 2010
IMPLEMENTATION DATE: January 4, 2010

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, $\mathrm{N}=\mathrm{NEW}, \mathrm{D}=\mathrm{DELETED}-$ Only One Per Row.

| R/N/D | Chapter / Section / Subsection / Title |
| :--- | :--- |
| N/A |  |

## III. FUNDING:

SECTION A: For Fiscal Intermediaries and Carriers: N/A

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 does 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.

## IV. ATTACHMENTS:

## One-Time Notification

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

# Attachment - One-Time Notification 

| Pub. 100-20 | Transmittal: 541 | Date: August 21, 2009 | Change Request: 6610 |
| :--- | :--- | :--- | :--- |

## SUBJECT: Implementation of the Health Insurance Portability and Accountability Act (HIPAA) Version 005010837 Institutional (837I) Edits for J10 and J14 Only

EFFECTIVE DATE: January 1, 2010
IMPLEMENTATION DATE: January 4, 2010

## I. GENERAL INFORMATION

A. Background: The Centers for Medicare and Medicaid Services (CMS) is in the process of implementing the next version of the Health Insurance Portability and Accountability Act (HIPAA) transactions.

The Secretary of the Department of Health and Human Services (DHHS) has promulgated in the Final Rules provisions which permit dual use of existing standards Accredited Standards Committee (ASC) X12 version 004010A1 and the new version of the ASC X12 standards version 005010 from the March 17, 2009, effective date until the January 1, 2012 compliance date to facilitate testing subject to trading partner agreement.

The purpose of this Change Request (CR) is to provide direction to specific Part A and Part B (A/B) Medicare Administrative Contractors (MACs) J10 and J14 only. Other A/B MACs, not currently in a position to implement 5010, currently in Corrective Action Plan (CAP), or under a protest condition need not reply. Specifically, J2, J6, J7, J8, J9, J11, J12, and J15 are not affected by this CR. A future CR will address these MAC jurisdictions.

Estimates for this CR should include a breakdown as part of the Level of Effort (LOE) response, utilizing the following table to be included in the "Estimate-Specific Comments" portion of the LOE template, to follow the Investment Lifecycle Phases.

| Investment Lifecycle Phase | Total Hours | Total Cost |
| :--- | :--- | :--- |
| Pre-Implementation/CR Review |  |  |
| Design \& Engineering Phase |  |  |
| Development Phase |  |  |
| Testing Phase |  |  |
| Implementation Phase |  |  |

Note that the Pre-Implementation/CR Review costs will not be funded under the unique funding situation for the 5010/D. 0 project, but instead out of the MAC's pot of hours for Pre-Implementation/CR Review.

The X12 TA1 Interchange Acknowledgment reports the status of the processing of an interchange header and trailer by the address receiver.

The ASC X12 999 Implementation Acknowledgment for Health Care Insurance reports the syntactical and relational analysis of an implementation guideline (TR3), or acknowledges receipt of an error-free transaction set. In the near future, an acknowledgments workgroup will convene working sessions. At the completion of working sessions, CMS will issue further guidance on the implementation of the 999. This further guidance will include which 999 errors will be accepted via the "Accepted with Errors" 999 as well as how these errors will be identified. The "Accepted with Errors" 999 allows for an entire batch of claims not to be rejected
because one or a few claims have syntax errors. Note that under this scenario, any claim that is accepted with a syntax error will be rejected in the Common Edits and Enhancements Module (CEM).

The ASC X12 005010X214 277 Health Care Claim Acknowledgment (277CA) reports the data content status of claim submission transactions (837s). The 277CA flat file is included in this CR for review and comment. The 277CA implementation instructions will be addressed via a future CR.
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

| Number | Requirement | Responsibility (place an " $X$ " in each applicable column) |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | A <br> / <br> B <br>  <br> M <br> A <br> A <br> C | $\begin{aligned} & \mathrm{D} \\ & \mathrm{M} \\ & \mathrm{E} \\ & \mathrm{M} \\ & \mathrm{~A} \\ & \mathrm{C} \end{aligned}$ | F | C  <br> A  <br> R  <br> R  <br> I  <br> E  <br> $R$  <br>   | $\begin{array}{\|c\|} \hline \mathrm{R} \\ \mathrm{H} \\ \mathrm{H} \\ \mathrm{I} \\ \\ \hline \end{array}$ |   <br>   | Share <br> Syst <br> ainta <br> M <br> C <br> S | $\begin{aligned} & \hline \text { ed- } \\ & \text { tem } \\ & \text { aine } \\ & \hline \begin{array}{\|l\|} \mathrm{V} \\ \mathrm{M} \\ \mathrm{~S} \end{array} \\ & \hline \end{aligned}$ |   <br>   <br>   <br>   <br>   | $\begin{gathered} \text { OTH } \\ \text { ER } \end{gathered}$ |
| 6610.1 | Contractors shall use the attached spreadsheet and documentation to generate the Medicare defined TA1 and 999 transactions. | X |  |  |  |  |  |  |  |  |  |
| 6610.2 | Contractors shall be responsible for creating alphaquality test data to generate the Medicare defined TA1 and 999 transactions. | X |  |  |  |  |  |  |  |  |  |
| 6610.3 | Contractors shall use the attached spreadsheet to determine the appropriate TA1 and 999 reject conditions (with the understanding that CMS will issue further guidance on the implementation of the 999 which may or may not affect reject conditions). | X |  |  |  |  |  |  |  |  |  |
| 6610.3.1 | Contractors shall generate the "Accepted" 999 when able to create a syntactically compliant flat file to pass to the CEM. | X |  |  |  |  |  |  |  |  |  |
| 6610.3.2 | Contractors shall generate the "Fully Rejected" 999 when unable to create a syntactically compliant flat file to pass to the CEM. An example of this would be a file that is missing a required segment. | X |  |  |  |  |  |  |  |  |  |
| 6610.3.3 | Contractors shall generate the "Accepted with Errors" 999 when able to create a flat file that is syntactically correct, but the file contains at least one 999 error. An example of this would be a file that contains an invalid qualifier, but the qualifier meets syntax requirements. | X |  |  |  |  |  |  |  |  |  |

## III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility (place an " $X$ " in each applicable column) |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  | $\begin{aligned} & \hline \mathrm{F} \\ & \mathrm{I} \end{aligned}$ | C A R R R I E R | R <br> H <br> H <br> I |  | $\begin{aligned} & \text { Shar } \\ & \text { Syst } \\ & \text { ainta } \\ & \hline \mathrm{M} \\ & \mathrm{C} \\ & \mathrm{~S} \end{aligned}$ | $\begin{gathered} \hline \text { ed- } \\ \text { em } \\ \text { aine } \\ \hline \mathrm{V} \\ \mathrm{M} \\ \mathrm{~S} \end{gathered}$ | $\begin{gathered} \text { OTH } \\ \text { ER } \end{gathered}$ |  |
|  | None |  |  |  |  |  |  |  |  |  |  |

## IV. SUPPORTING INFORMATION

Section A: for any recommendations and supporting information associated with listed requirements, use the box below:

| X-Ref <br> Requireme <br> nt | Recommendations or other supporting information: |
| :--- | :--- |
| Number |  |
|  | None |

Section B: For all other recommendations and supporting information, use this space:
CMS expects to implement ASC X12 version 005010 transaction over multiple releases. The intent is for CMS to be ready to exchange ASC X12 version 005010 transactions after December 31, 2010. During the transition period, CMS expects to exchange HIPAA test and production transactions in both 004010A1 and 005010 versions.

## V. CONTACTS

Pre-Implementation Contact(s): Matt Klischer, Matthew.Klischer@cms.hhs.gov, 410.786.7488.
Post-Implementation Contact(s): Matt Klischer, Matthew.Klischer@cms.hhs.gov, 410.786.7488.

## VI. FUNDING

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

## Section B: For Medicare Administrative Contractors (MACs), include the following statement:

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 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.

## ATTACHMENTS

2775010 Flat File V20090428.xls
9995010 Flat File v20090428.xls
FINAL Institutional 5010 spreadsheet.xls

Transaction Set ID: 277 Health Care Claim Acknowledgment
EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{aligned} & \hline \text { Loop } \\ & \text { Seq. } \\ & \hline \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ISA | INTERCHANGE CONTROL HEADER |  |  | 1 | R |  | 1 |  |  |  | ISA |  | 1 | 18 | 1 |
| ISA01 | Authorization Information Qualifier | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  | 00 |  |  |  |  | 19 | 2 |  |
| ISA02 | Authorization Information | $\mathrm{X}(10)$ | AN | 10-10 | R |  |  |  |  |  |  |  | 21 | 10 |  |
| ISA03 | Security Information Qualifier | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  | 00, 01 |  |  |  |  | 31 | 2 |  |
| ISA04 | Security Information | $\mathrm{X}(10)$ | AN | 10-10 | R |  |  |  |  |  |  |  | 33 | 10 |  |
| ISA05 | Interchange ID Qualifier | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  | 27, 28, Zz |  |  |  |  | 43 | 2 |  |
| ISA06 | Interchange Sender ID | X(15) | AN | 15-15 | R |  |  |  |  |  |  |  | 45 | 15 |  |
| ISA07 | Interchange ID Qualifier | X(2) | ID | 2-2 | R |  |  | 27, 28, zz |  |  |  |  | 60 | 2 |  |
| ISA08 | Interchange Receiver ID | X(15) | AN | 15-15 | R |  |  |  |  |  |  |  | 62 | 15 |  |
| ISA09 | Interchange Date | X(6) | DT | 6-6 | R |  |  | YYMMDD |  |  |  |  | 77 | 6 |  |
| ISA10 | Interchange Time | $\mathrm{X}(4)$ | TM | 4-4 | R |  |  | HHMM |  |  |  |  | 83 | 4 |  |
| ISA11 | Repetition Separator | X(1) |  | 1-1 | R |  |  |  |  |  |  |  | 87 | 1 |  |
| ISA12 | Interchange Control Version Number | $\mathrm{X}(5)$ | ID | 5-5 | R |  |  | 00501 |  |  |  |  | 88 | 5 |  |
| ISA13 | Interchange Control Number | $\mathrm{X}(9)$ | N0 | 9-9 | R |  |  |  |  |  |  |  | 93 | 9 |  |
| ISA14 | Acknowledgement Requested | $\mathrm{X}(1)$ | ID | 1-1 | R |  |  | 0 |  |  |  |  | 102 | 1 |  |
| ISA15 | Usage Indicator | $\mathrm{X}(1)$ | ID | 1-1 | R |  |  | P, T |  |  |  |  | 103 | 1 |  |
| ISA16 | Component Element Separator | $\mathrm{X}(1)$ |  | 1-1 | R |  |  |  |  |  |  |  | 104 | 1 |  |
| GS | FUNCTIONAL GROUP HEADER |  |  | 1 | R |  | 1 |  |  |  | GS |  | 1 | 18 | 1 |
| GS01 | Functional Identifier Code | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  |  |  |  |  |  | 19 | 2 |  |
| GS02 | Application Sender Code | X(15) | AN | 2-15 | R |  |  |  |  |  |  |  | 21 | 15 |  |

Transaction Set ID: 277 Health Care Claim Acknowledgment
EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. Max. | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{gathered} \text { Loop } \\ \text { Seq. } \end{gathered}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| GS03 | Application Receiver Code | X(15) | AN | 2-15 | R |  |  |  |  |  |  |  | 36 | 15 |  |
| GS04 | Date | $\mathrm{X}(8)$ | DT | 8-8 | R |  |  | CCYYMMDD |  |  |  |  | 51 | 8 |  |
| GS05 | Time | $\mathrm{X}(8)$ | TM | 4-8 | R |  |  | HHMM, HHMMSS, HHMMSSD, HHMMSSDD |  |  |  |  | 59 | 8 |  |
| GS06 | Group Control Number | $\mathrm{X}(9)$ | N0 | 1-9 | R |  |  |  |  |  |  |  | 67 | 9 |  |
| GS07 | Responsible Agency Code | $\mathrm{X}(2)$ | ID | 1-2 | R |  |  | x |  |  |  |  | 76 | 2 |  |
| GS08 | Version Identifier Code | $\mathrm{X}(12)$ | AN | 1-12 | R |  |  | 005010X214E1 |  |  |  |  | 78 | 12 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ST | TRANSACTION SET HEADER |  |  | 1 | R |  | 1 |  |  |  | ST |  | 1 | 18 | 1 |
| ST01 | Transaction Set Identifier Code | $X(3)$ | ID | 3-3 | R |  |  | 277 |  |  |  |  | 19 | 3 |  |
| ST02 | Transaction Set Control Number | 9(9) | AN | 4-9 | R |  |  | $\begin{array}{\|c\|} \hline \text { SE02 on <10 Characters (must } \\ \text { be reset after IEA), } 0001 \\ \hline \end{array}$ |  |  |  |  | 22 | 9 |  |
| ST03 | Version, Release, or Industry Identifier | 9(12) | AN | 1-35 | R |  |  | 005010x214E1 12 bytes |  |  |  |  | 31 | 12 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| BHT | Beginning of Hierarchical Transaction |  |  | 1 | R |  | 1 |  |  |  | BHT |  | 1 | 18 | 1 |
| BHTO1 | Hierarchical Structure Code | X(4) | ID | 4-4 | R |  |  | 0085 |  |  |  |  | 19 | 4 |  |
| BHT02 | Transaction Set Purpose Code | X (2) | ID | 2-2 | R |  |  | 08 |  |  |  |  | 23 | 2 |  |
| BHT03 | Reference Identification | X(50) | AN | 1-50 | R |  |  |  |  |  |  |  | 25 | 30 |  |
| BHT04 | Transaction Set Creation Date | X (8) | DT | 8-8 | R |  |  | CCYYMMDD (is the current cycle date) |  |  |  |  | 55 | 8 |  |
| BHT05 | Transaction Set Creation Time | X (8) | TM | 4-8 | R |  |  | HHMMSSDD (is the current computer time as FF is created |  |  |  |  | 63 | 8 |  |
| BHT06 | Transaction Type Code | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  | TH |  |  |  |  | 71 | 2 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| HL | Information Source Level |  |  | 1 | R | 2000A | 1 |  | 2000A |  | HL |  | 1 | 18 | 1 |

Transaction Set ID: 277 Health Care Claim Acknowledgment
EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. Max. | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{aligned} & \hline \text { Loop } \\ & \text { Seq. } \\ & \hline \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| HLO1 | Hierarchical ID Number | $\mathrm{X}(12)$ | AN | 1-12 | R |  |  | 1 |  |  |  |  | 19 | 12 |  |
| HL02 | Hierarchical Parent ID Number | $\mathrm{X}(12)$ | AN | 1-12 | N/U |  |  |  |  |  |  |  | 31 | 12 |  |
| HL03 | Hierarchical Level Code | $\mathrm{X}(2)$ | ID | 1-2 | R |  |  | 20 |  |  |  |  | 43 | 2 |  |
| HLO4 | Hierarchical Child Code | $X(1)$ | ID | 1-1 | R |  |  | 1 |  |  |  |  | 45 | 1 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | Information Source Name |  |  | 1 | R | 2100A | 1 |  | 2100A |  | NM1 |  | 1 | 18 | 1 |
| NM101 | Entity Identifier Code | $\mathrm{X}(2)$ | ID | 2-3 | R |  |  | PR |  |  |  |  | 19 | 3 |  |
| NM102 | Entity Type Qualifier | $\mathrm{X}(1)$ | ID | 1-1 | R |  |  | 2 |  |  |  |  | 22 | 1 |  |
| NM103 | Information Source Name | X (60) | AN | 1-60 | R |  |  | Name of MAC/State Workload |  |  |  |  | 23 | 60 |  |
| NM104 | Name First |  | AN | 1-35 | N/U |  |  |  |  |  |  |  | 83 | 35 |  |
| NM105 | Name Middle |  | AN | 1-25 | N/U |  |  |  |  |  |  |  | 118 | 35 |  |
| NM106 | Name Prefix |  | AN | 1-10 | N/U |  |  |  |  |  |  |  |  |  |  |
| NM107 | Name Suffix |  | AN | 1-10 | N/U |  |  |  |  |  |  |  | 153 | 10 |  |
| NM108 | Identification Code Qualifier | $\mathrm{X}(2)$ | ID | 1-2 | R |  |  | 46 |  |  |  |  | 163 | 2 |  |
| NM109 | Information Source Identifier | X(80) | AN | 2-80 | R |  |  | Number assigned to State Workload |  |  |  |  | 165 | 80 |  |
| NM110 | Entity Relationship Code |  | ID | 2-2 | N/U |  |  |  |  |  |  |  |  |  |  |
| NM111 | Entity Identifier Code |  | ID | 2-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| NM112 | Name Last or Organization Name |  | AN | 1-60 | N/U |  |  |  |  |  |  |  |  |  |  |
| TRN | Transmission Receipt Control Identifier |  |  | 1 | R | 2200A | 1 |  | 2200A |  | TRN |  | 1 | 18 | 1 |
| TRN01 | Trace Type Code | $\mathrm{X}(1)$ | ID | 1-2 | R |  |  | 1 |  |  |  |  | 19 | 2 |  |

Transaction Set ID: 277 Health Care Claim Acknowledgment
EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. Max. | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{aligned} & \hline \text { Loop } \\ & \text { Seq. } \\ & \hline \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| TRN02 | Information Source Application Trace Identifier | X(50) | AN | 1-50 | R |  |  | Unique for this acknowledgement |  |  |  |  | 21 | 50 |  |
| TRN03 | Originating Company Identifier |  | AN | 10-10 | N/U |  |  |  |  |  |  |  |  |  |  |
| TRN04 | Reference Identification |  | AN | 1-50 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| DTP | Information Source Receipt Date |  |  | 1 | R | 2200A | 1 |  | 2200A |  | DTP |  | 1 | 18 | 1 |
| DTP01 | Date/Time Qualifier | $\mathrm{X}(3)$ | ID | 3-3 | R |  |  | 050 |  |  |  |  | 19 | 3 |  |
| DTP02 | Date Time Period Format Qualifier | $\mathrm{X}(2)$ | ID | 2-3 | R |  |  | D8 |  |  |  |  | 22 | 3 |  |
| DTP03 | Information Source Receipt Date | $\mathrm{X}(8)$ | AN | 1-35 | R |  |  | Format CCYYMMDD (Business DOR Value) |  |  |  |  | 25 | 35 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| DTP | Information Source Process Date |  |  | 1 | R | 2200A | 1 |  | 2200A |  | DTP |  | 1 | 18 | 1 |
| DTP01 | Date/Time Qualifier | X(3) | ID | 3-3 | R |  |  | 009 |  |  |  |  | 19 | 3 |  |
| DTP02 | Date Time Period Format Qualifier | $\mathrm{X}(2)$ | ID | 2-3 | R |  |  | D8 |  |  |  |  | 22 | 3 |  |
| DTP03 | Information Source Process Date | $\mathrm{X}(8)$ | AN | 1-35 | R |  |  | Format CCYYMMDD (Cycle Date) |  |  |  |  | 25 | 35 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| HL | Information Receiver Level |  |  | 1 | R | 2000B | 1 |  | 2000B |  | HL |  | 1 | 18 | 1 |
| HLO1 | Hierarchical ID Number | $\mathrm{X}(12)$ | AN | 1-12 | R |  |  | Must be HLO1 (Info. Source) + 1 |  |  |  |  | 19 | 12 |  |
| HLO2 | Herarchical Parent ID Number | $\mathrm{X}(12)$ | AN | 1-12 | R |  |  | HL01 Info. Source Value |  |  |  |  | 31 | 12 |  |
| HLO3 | Hierarchical Level Code | $\mathrm{X}(2)$ | ID | 1-2 | R |  |  | 21 |  |  |  |  | 43 | 2 |  |
| HLO4 | Herarchical Child Code | $\mathrm{X}(1)$ | ID | 1-1 | R |  |  | $\stackrel{1}{1}$ |  |  |  |  | 45 | 1 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | Information Receiver Name |  |  | 1 | R | 2100B | 1 |  | 2100B |  | NM1 |  | 1 | 18 | 1 |

Transaction Set ID: 277 Health Care Claim Acknowledgment
EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \hline \text { Loop } \\ \text { Repeat } \end{gathered}$ | Values | Loop ID | $\begin{aligned} & \hline \text { Loop } \\ & \text { Seq. } \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NM101 | Entity Identifier Code | $\mathrm{X}(2)$ | ID | 2-3 | R |  |  | 4 |  |  |  |  | 19 | 3 |  |
| NM102 | Entity Type Qualifier | X(1) | ID | 1-1 | R |  |  | 1 or 2 |  |  |  |  | 22 | 1 |  |
| NM103 | Information Receiver Last or Organization Name | X(60) | AN | 1-60 | R |  |  | Relationship to NM102, NM104, NM105 |  |  |  |  | 23 | 60 |  |
| NM104 | Information Receiver First Name | X(35) | AN | 1-35 | S |  |  | Relationship to NM102, NM103, NM105 |  |  |  |  | 83 | 35 |  |
| NM105 | Information Receiver Middle Name | X(25) | AN | 1-25 | S |  |  | Relationship to NM102, NM103, NM104 |  |  |  |  | 118 | 35 |  |
| NM106 | Name Prefix |  | AN | 1-10 | N/U |  |  |  |  |  |  |  |  |  |  |
| NM107 | Name Suffix |  | AN | 1-10 | N/U |  |  |  |  |  |  |  | 153 | 10 |  |
| NM108 | Identification Code Qualifier | X (2) | ID | 1-2 | R |  |  | 46 |  |  |  |  | 163 | 2 |  |
| NM109 | Information Receiver Primary Identifier | X(80) | AN | 2-80 | R |  |  |  |  |  |  |  | 165 | 80 |  |
| NM110 | Entity Relationship Code |  | ID | 2-2 | N/U |  |  |  |  |  |  |  |  |  |  |
| NM111 | Entity Identifier Code |  | ID | 2-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| NM112 | Name Last or Organization Name |  | AN | 1-60 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| TRN | Information Receiver Application Trace Identifier |  |  | 1 | R | 2200B | 1 |  | 2200B |  | TRN |  | 1 | 18 | 1 |
| TRN01 | Trace Type Code | $\mathrm{X}(1)$ | ID | 1-2 | R |  |  | 2 |  |  |  |  | 19 | 2 |  |
| TRN02 | Claim Transaction Batch Number | X(50) | AN | 1-50 | R |  |  | Cross referenced from BHT03 in Inbound 837 |  |  |  |  | 21 | 50 |  |
| TRN03 | Originating Company Identifier |  | AN | 10-10 | N/U |  |  |  |  |  |  |  |  |  |  |
| TRN04 | Refernce Identification |  | AN | 1-50 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| STC | Information Receiver Status Information |  |  | 1 | R | 2200B | >1 |  | 2200B |  | STC |  | 1 | 18 | 1 |
| STC01 | Health Care Claim Status |  |  |  | R |  |  |  |  |  |  |  |  |  |  |

Transaction Set ID: 277 Health Care Claim Acknowledgment
EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. Max. | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{aligned} & \hline \text { Loop } \\ & \text { Seq. } \\ & \hline \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| STC01-1 | Health Care Claim Status Category Code | X(5) | AN | 1-30 | R |  |  |  |  |  |  |  | 19 | 30 |  |
| STC01-2 | Health Care Claim Status Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 49 | 30 |  |
| STC01-3 | Entity Identifier Code | $\mathrm{X}(2)$ | ID | 2-3 | S |  |  | 36, 40, 41, AY, PR |  |  |  |  | 79 | 3 |  |
| STC01-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC02 | Status Information Effective Date | $\mathrm{X}(8)$ | DT | 8-8 | R |  |  | CCYYMMDD |  |  |  |  | 82 | 8 |  |
| STC03 | Action Code | $\mathrm{X}(2)$ | ID | 1-2 | R |  |  | $\mathrm{U}, \mathrm{WQ}$ |  |  |  |  | 90 | 2 |  |
| STC04 | Total Submitted Charges for Unit Work | 9(11) v99 | R | 1-18 | R |  |  |  |  |  |  |  | 92 | 18 |  |
| STC05 | Monetary Amount |  | R | 1-18 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC06 | Date |  | DT | 8-8 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC07 | Payment Method Code |  | ID | 3-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC08 | Date |  | DT | 8-8 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC09 | Check Number |  | AN | 1-16 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC10 | HEALTH CARE CLAIM STATUS |  |  |  | S |  |  |  |  |  |  |  |  |  |  |
| STC10-1 | Health Care Claim Status Category Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 110 | 30 |  |
| STC10-2 | Health Care Claim Status Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 140 | 30 |  |
| STC10-3 | Entity Identifier Code | $\mathrm{X}(2)$ | ID | 2-3 | R |  |  | $36,40,41$, AY, PR |  |  |  |  | 170 | 3 |  |
| STC10-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC11 | HEALTH CARE CLAIM STATUS |  |  |  | S |  |  |  |  |  |  |  |  |  |  |
| STC11-1 | Health Care Claim Status Category Code | $X$ (5) | AN | 1-30 | R |  |  |  |  |  |  |  | 173 | 30 |  |
| STC11-2 | Health Care Claim Status Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 203 | 30 |  |
| STC11-3 | Entity Identifier Code | $\mathrm{X}(2)$ | ID | 2-3 | R |  |  | 36, 40, 41, AY, PR |  |  |  |  | 233 | 3 |  |

Transaction Set ID: 277 Health Care Claim Acknowledgment
EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | x12 Element Attributes |  |  |  |  |  | X12 Flat File |  | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | $\begin{array}{\|l\|l\|} \hline \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \hline \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{array}{\|l\|} \hline \text { Loop } \\ \text { Seq. } \\ \hline \end{array}$ |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| STC11-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC12 | Free-form Message Text |  | AN | 1-264 | NU |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| QTY | Total Accepted Quantity |  |  | 1 | s | 22008 | 1 |  | 2200B |  | QTY |  | 1 | 18 | 1 |
| QTY01 | Quantity Qualifier | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  | 90 |  |  |  |  | 19 | 2 |  |
| QTY02 | Total Accepted Quantity | $9(9)$ | R | 1-15 | R |  |  | Zero |  |  |  |  | 21 | 15 |  |
| QTY03 | Composite Unit of Measure |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
| QTY04 | Free-form Information |  | AN | 1-30 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| QTY | Total Rejected Quantity |  |  | 1 | s | 22008 | 1 |  | 2200B |  | QTY |  | 1 | 18 | 1 |
| QTY01 | Quantity Qualifier | X (2) | ID | 2-2 | R |  |  | AA |  |  |  |  | 19 | 2 |  |
| QTY02 | Total Rejected Quantity | 9(9) | R | 1-15 | R |  |  | Zero |  |  |  |  | 21 | 15 |  |
| QTY03 | Composite Unit of Measure |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
| QTY04 | Free-form Information |  | AN | 1-30 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| AMT | Total Accepted Amount |  |  | 1 | s | 22008 | 1 |  | 22008 |  | AMT |  | 1 | 18 | 1 |
| AMT01 | Amount Qualifier Code | X (2) | ID | 1-3 | R |  |  | YY |  |  |  |  | 19 | 3 |  |
| AMT02 | Total Accepted Amount | 9(11) v99 | R | 1-18 | R |  |  | Zero |  |  |  |  | 22 | 18 |  |
| AMT03 | Credit/Debit Flag Code |  | ID | 1-1 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| AMT | Total Rejected Amount |  |  | 1 | s | 22008 | 1 |  | 22008 |  | AMT |  | 1 | 18 | 1 |

Transaction Set ID: 277 Health Care Claim Acknowledgment
EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. Max. | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | Loop Repeat | Values | Loop ID | $\begin{gathered} \hline \text { Loop } \\ \text { Seq. } \\ \hline \end{gathered}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| AMT01 | Amount Qualifier Code | $\mathrm{X}(2)$ | ID | 1-3 | R |  |  | YY |  |  |  |  | 19 | 3 |  |
| AMT02 | Total Rejected Amount | 9(11) v99 | R | 1-18 | R |  |  | Zero |  |  |  |  | 22 | 18 |  |
| AMT03 | Credit/Debit Flag Code |  | ID | 1-1 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| HL | Billing Provider of Service Level |  |  | 1 | S | 2000C | >1 |  | 2000C |  | HL |  | 1 | 18 | 1 |
| HLO1 | Hierarchical ID Number | $\mathrm{X}(12)$ | AN | 1-12 | R |  |  | $\begin{gathered} \text { or (next } \mathrm{HL}+1)(\text { Prov of Svc } \\ +1) \end{gathered}$ |  |  |  |  | 19 | 12 |  |
| HLO2 | Hierarchical Parent ID Number | $\mathrm{X}(2)$ | AN | 1-12 | R |  |  |  |  |  |  |  | 31 | 12 |  |
| HL03 | Hierarchical Level Code | $\mathrm{X}(2)$ | ID | 1-2 | R |  |  |  |  |  |  |  | 43 | 2 |  |
| HLO4 | Hierarchical Child Code | $X(1)$ | ID | 1-1 | R |  |  |  |  |  |  |  | 45 | 1 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | Billing Provider Name |  |  | 1 | R | 2100C | 1 |  | 2100 C |  | NM1 |  | 1 | 18 | 1 |
| NM101 | Entity Identifier Code | $\mathrm{X}(2)$ | ID | 2-3 | R |  |  | 85 |  |  |  |  | 19 | 3 |  |
| NM102 | Entity Type Qualifier | $\mathrm{X}(1)$ | ID | 1-1 | R |  |  | 1, 2 |  |  |  |  | 22 | 1 |  |
| NM103 | Provider Last or Organization Name | X(60) | AN | 1-60 | R |  |  |  |  |  |  |  | 23 | 60 |  |
| NM104 | Provider First Name | X(35) | AN | 1-35 | S |  |  |  |  |  |  |  | 83 | 35 |  |
| NM105 | Provider Middle Name | X(25) | AN | 1-35 | S |  |  |  |  |  |  |  | 118 | 35 |  |
| NM106 | Name Prefix |  | AN | 1-10 | N/U |  |  |  |  |  |  |  |  |  |  |
| NM107 | Provider Name Suffix | $\mathrm{X}(10)$ | AN | 1-10 | S |  |  |  |  |  |  |  | 153 | 10 |  |
| NM108 | Identification Code Qualifier | $X(2)$ | ID | 1-2 | R |  |  | FI, XX |  |  |  |  | 163 | 2 |  |
| NM109 | Billing Provider Identifier | X(80) | AN | 2-80 | R |  |  | Billing Provider Number |  |  |  |  | 165 | 80 |  |
| NM110 | Entity Relationship Code |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |

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Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | x12 Element Attributes |  |  |  |  |  | X12 Flat File |  | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | cobol pic | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \hline \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{array}{\|l\|} \hline \text { Loop } \\ \text { Seq. } \\ \hline \end{array}$ |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NM111 | Entity Identifier Code |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
| NM112 | Name Last or Organization Name |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| TRN | Provider of Service Information Trace Identifier |  |  | 1 | s | 22000 | 1 |  | 2200 C |  | TRN |  | 1 | 18 | 1 |
| TRN01 | Trace Type Code | $\mathrm{X}(1)$ | ID | 1-2 | R |  |  | 1 |  |  |  |  | 19 | 2 |  |
| TRN02 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Provider of Service Information Trace } \\ \text { Identifier } \end{array} \\ \hline \end{array}$ | X(50) | AN | 1-50 | R |  |  |  |  |  |  |  | 21 | 50 |  |
| TRN03 | Originating Company Identifier |  | AN | 10-10 | N/U |  |  |  |  |  |  |  |  |  |  |
| TRN04 | Reference Identification |  | AN | 1-50 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| STC | Billing Provider Status Information |  |  | 1 | s | 22000 | >1 |  | 220 C |  | STC |  | 1 | 18 | 1 |
| STC01 | Health Care Claim Status |  |  |  | R |  |  |  |  |  |  |  |  |  |  |
| STC01-1 | Health Care Claim Status Category Code | X(5) | AN | 1-30 | R |  |  |  |  |  |  |  | 19 | 30 |  |
| STC01-2 | Health Care Claim Status Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 49 | 30 |  |
| STC01-3 | Entity Identifier Code | X (2) | ID | 2-3 | s |  |  | $\begin{gathered} \hline 36,40,41,77,82,85,87, A Y, \\ \text { PR } \\ \hline \end{gathered}$ |  |  |  |  | 79 | 3 |  |
| STC01-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC02 | Date |  | DT | 8-8 | N/U |  |  |  |  |  |  |  | 82 | 8 |  |
| STC03 | Action Code | X (2) | ID | 1-2 | R |  |  | U, WG |  |  |  |  | 90 | 2 |  |
| STC04 | Total Submitted Charges for Unit Work | 9(11) v99 | R | 1-18 | R |  |  | Zero |  |  |  |  | 92 | 18 |  |
| STC05 | Monetary Amount |  | R | 1-18 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC06 | Date |  | DT | 8-8 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC07 | Payment Method Code |  | ID | 3-3 | N/U |  |  |  |  |  |  |  |  |  |  |

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Direction: Outbound

| 2775010 |  |  | x12 Element Attributes |  |  |  |  |  | X12 Flat File |  | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \hline \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{aligned} & \text { Loop } \\ & \text { Seq. } \end{aligned}$ |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| STC08 | Date |  | DT | 8-8 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC09 | Check Number |  | AN | 1-16 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC10 | HEALTH CARE CLAIM STATUS |  |  |  | s |  |  |  |  |  |  |  |  |  |  |
| STC10-1 | Health Care Claim Status Category Code | X(5) | AN | 1-30 | R |  |  |  |  |  |  |  | 110 | 30 |  |
| STC10-2 | Health Care Claim Status Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 140 | 30 |  |
| STC10-3 | Entity Identifier Code | X (2) | ID | 2-3 | s |  |  | $\begin{gathered} \hline 36,40,41,77,82,85,87, A Y, \\ P R \end{gathered}$ |  |  |  |  | 170 | 3 |  |
| STC10-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC11 | HEALTH CARE CLAIM Status |  |  |  | s |  |  |  |  |  |  |  |  |  |  |
| STC11-1 | $\underset{\substack{\text { Health Care Claim Status Category } \\ \text { Code }}}{ }$ | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 173 | 30 |  |
| STC11-2 | Healh Care Claim Status Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 203 | 30 |  |
| STC11-3 | Entity Identifier Code | X (2) | ID | 2-3 | s |  |  | $\begin{gathered} \hline 36,40,41,77,82,85,87, A Y, \\ \text { PR } \\ \hline \end{gathered}$ |  |  |  |  | 233 | 3 |  |
| STC11-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC12 | Free-form Message Text |  | AN | 1-264 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| REF | Provider Secondary Identifier |  |  | 1 | s | 22000 | 3 |  | 22000 |  | REF |  | 1 | 18 | 1 |
| REF01 | Reference Identification Qualifier | X (2) | ID | 2-3 | R |  |  | OB, 1G, G2, LU, SY, TJ |  |  |  |  | 19 | 3 |  |
| REF02 | Billing Provider Additional Identifier | X(50) | AN | 1-50 | R |  |  |  |  |  |  |  | 22 | 50 |  |
| REF03 | Description |  | AN | 1-80 | N/U |  |  |  |  |  |  |  |  |  |  |
| REF04 | REFERENCE IDENTIFIER |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| QTY | Total Accepted Quantity |  |  | 1 | s | 22000 | 1 |  | 22000 |  | QTY |  | 1 | 18 | 1 |

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Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | x12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | $\begin{array}{\|l\|l} \hline \text { Min. } \\ \text { Max. } \end{array}$ | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \hline \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{array}{\|l\|l} \hline \text { Loop } \\ \text { Seq. } \end{array}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| QTY01 | Quantity Qualifier | X (2) | ID | 2-2 | R |  |  | QA |  |  |  |  | 19 | 2 |  |
| QTY02 | Total Accepted Quantity | 9(9) | R | 1-15 | R |  |  |  |  |  |  |  | 21 | 15 |  |
| QTY03 | Composite Unit of Measure |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
| QTY04 | Free-form Information |  | AN | 1-30 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| QTY | Total Rejected Quantity |  |  | 1 | s | 2200 C | 1 |  | 2200 C |  | QTY |  | 1 | 18 | 1 |
| QTY01 | Quantity Qualifier | X (2) | ID | 2-2 | R |  |  | QC |  |  |  |  | 19 | 2 |  |
| QTY02 | Total Rejected Quantity | $9(9)$ | R | 1-15 | R |  |  |  |  |  |  |  | 21 | 15 |  |
| QTY03 | Composite Unit of Measure |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
| QTY04 | Free-form Information |  | AN | 1-30 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| AMT | Total Accepted Amount |  |  | 1 | $s$ | 2200 C | 1 |  | 2200C |  | AMT |  | 1 | 18 | 1 |
| AMT01 | Amount Qualifier Code | x (2) | ID | 1-3 | R |  |  | YU |  |  |  |  | 19 | 3 |  |
| Амто2 | Total Accepted Amount | 9(11) v99 | R | 1-18 | R |  |  |  |  |  |  |  | 22 | 18 |  |
| Амто3 | CreditDebit Flag Code |  | ID | 1-1 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| AMT | Total Rejected Amount |  |  | 1 | s | 2200 C | 1 |  | 22000 |  | AMT |  | 1 | 18 | 1 |
| AмT01 | Amount Qualifier Code | X (2) | ID | 1-3 | R |  |  | YY |  |  |  |  | 19 | 3 |  |
| AMT02 | Total Rejected Amount | 9(11) v99 | R | 1-18 | R |  |  |  |  |  |  |  | 22 | 18 |  |
| AMT03 | CreditDebit Flag Code |  | ID | 1-1 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

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| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. Max. | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{aligned} & \hline \text { Loop } \\ & \text { Seq. } \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| HL | Patient Level |  |  | 1 | S | 2000D | >1 |  | 2000D |  | HL |  | 1 | 18 | 1 |
| HLO1 | Hierarchical ID Number | X(12) | AN | 1-12 | R |  |  |  |  |  |  |  | 19 | 12 |  |
| HLO2 | Hierarchical Patient ID Number | $\mathrm{X}(12)$ | AN | 1-12 | R |  |  |  |  |  |  |  | 31 | 12 |  |
| HL03 | Hierarchical Level Code | $\mathrm{X}(2)$ | ID | 1-2 | R |  |  | PT |  |  |  |  | 43 | 2 |  |
| HLO4 | Hierarchical Child Code |  | ID | 1-1 | N/U |  |  |  |  |  |  |  | 45 | 1 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | Patient Name |  |  | 1 | R | 2100D | 1 |  | 2100D |  | NM1 |  | 1 | 18 | 1 |
| NM101 | Entity Identifier Code | X(3) | ID | 2-3 | R |  |  | QC |  |  |  |  | 19 | 3 |  |
| NM102 | Entity Type Qualifier | $X(1)$ | ID | 1-1 | R |  |  | 1 |  |  |  |  | 22 | 1 |  |
| NM103 | Patient Last Name | $\mathrm{X}(60)$ | AN | 1-60 | R |  |  |  |  |  |  |  | 23 | 60 |  |
| NM104 | Patient First Name | X(35) | AN | 1-35 | S |  |  |  |  |  |  |  | 83 | 35 |  |
| NM105 | Patient Middle Name or Initial | X(25) | AN | 1-25 | S |  |  |  |  |  |  |  | 118 | 35 |  |
| NM106 | Name Prefix |  | AN | 1-10 | N/U |  |  |  |  |  |  |  |  |  |  |
| NM107 | Patient Name Suffix | X(10) | AN | 1-10 | S |  |  |  |  |  |  |  | 153 | 10 |  |
| NM108 | Identification Code Qualifier | $\mathrm{X}(2)$ | ID | 1-2 | R |  |  | II, MI |  |  |  |  | 163 | 2 |  |
| NM109 | Patient Identification Number | X(80) | AN | 2-80 | R |  |  |  |  |  |  |  | 165 | 80 |  |
| NM110 | Entity Relationship Code |  | ID | 2-2 | N/U |  |  |  |  |  |  |  |  |  |  |
| NM111 | Entity Identifier Code |  | ID | 2-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| NM112 | Name Last or Organization Name |  | AN | 1-60 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| TRN | Claim Status Tracking Number |  |  | 1 | R | 2200D | >1 |  | 2200D |  | TRN |  | 1 | 18 | 1 |

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Version/Release: 005010
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| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. Max. | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{gathered} \hline \text { Loop } \\ \text { Seq. } \\ \hline \end{gathered}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| TRN01 | Trace Type Code | $\mathrm{X}(2)$ | ID | 1-2 | R |  |  | 2 |  |  |  |  | 19 | 2 |  |
| TRN02 | Patient Control Number | X(50) | AN | 1-50 | R |  |  |  |  |  |  |  | 21 | 50 |  |
| TRN03 | Originating Company Identifier |  | AN | 10-10 | N/U |  |  |  |  |  |  |  |  |  |  |
| TRN04 | Reference Identification |  | AN | 1-50 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| STC | Claim Level Status Information |  |  | 1 | R | 2200D | >1 |  | 2200D |  | STC |  | 1 | 18 | 1 |
| STC01 | Health Care Claim Status |  |  |  | R |  |  |  |  |  |  |  |  |  |  |
| STC01-1 | Health Care Claim Status Category Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 19 | 30 |  |
| STC01-2 | Health Care Claim Status Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 49 | 30 |  |
| STC01-3 | Entity Identifier Code | $\mathrm{X}(2)$ | ID | 2-3 | S |  |  | 77, 82, 85, 87, DK, DN, DQ, FA, GB, HK, IL, LI, MSC, PR, |  |  |  |  | 79 | 3 |  |
| STC01-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC02 | Date |  | DT | 8-8 | N/U |  |  |  |  |  |  |  | 82 | 8 |  |
| STC03 | Status Information Action Code | $\mathrm{X}(2)$ | ID | 1-2 | R |  |  | U, WQ |  |  |  |  | 90 | 2 |  |
| STC04 | Total Claim Charge Amount | 9(11) v99 | R | 1-18 | R |  |  |  |  |  |  |  | 92 | 18 |  |
| STC05 | Monetary Amount |  | R | 1-18 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC06 | Date |  | DT | 8-8 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC07 | Payment Method Code |  | ID | 3-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC08 | Date |  | DT | 8-8 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC09 | Check Number |  | AN | 1-16 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC10 | HEALTH CARE CLAIM STATUS |  |  |  | S |  |  |  |  |  |  |  |  |  |  |
| STC10-1 | Health Care Claim Status Category Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 110 | 30 |  |

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Direction: Outbound

| 2775010 |  |  | x12 Element Attributes |  |  |  |  |  | X12 Flat File |  | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \hline \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | Values | Loop ID | $\begin{array}{\|l\|} \hline \text { Loop } \\ \text { Seq. } \end{array}$ |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| STC10-2 | Health Care Claim Status Code | x(5) | AN | 1-30 | R |  |  |  |  |  |  |  | 140 | 30 |  |
| STC10-3 | Entity Identifier Code | X (2) | ID | 2-3 | s |  |  | 77, 82, 85, 87, DK, DN, DQ, FA, GB, HK, IL, LI, MSC, PR, |  |  |  |  | 170 | 3 |  |
| STC10-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC11 | health Care claim status |  |  |  | s |  |  |  |  |  |  |  |  |  |  |
| STC11-1 | Health Care Claim Status Category Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 173 | 30 |  |
| STC11-2 | Health Care Claim Status Code | X(5) | AN | 1-30 | R |  |  |  |  |  |  |  | 203 | 30 |  |
| STC11-3 | Entity Identifier Code | X (2) | ID | 2-3 | s |  |  | 77, 82, 85, 87, DK, DN, DQ, FA, GB, HK, LL, LI, MSC, PR |  |  |  |  | 233 | 3 |  |
| STC11-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC12 | Free-form Message Text |  | AN | 1-264 | NU |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| REF | Payer Claim Control Number |  |  | 1 | s | 22000 | 1 |  | 2200 D |  | REF |  | 1 | 18 | 1 |
| REF01 | Reference Identification Qualifier | X (3) | ID | 2-3 | R |  |  | 1K |  |  |  |  | 19 | 3 |  |
| REF02 | Payer Claim Control Number | X(50) | AN | 1-50 | R |  |  |  |  |  |  |  | 22 | 50 |  |
| REF03 | Description |  | AN | 1-80 | N/U |  |  |  |  |  |  |  |  |  |  |
| REF04 | Reference Identifier |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| REF | $\begin{gathered} \text { Clearinghouse and Other } \\ \text { Transmission Intermediaries } \\ \hline \end{gathered}$ |  |  | 1 | s | 22000 | 1 |  | 22000 |  | REF |  | 1 | 18 | 1 |
| REF01 | Reference Identification Qualifier | $\mathrm{X}(3)$ | ID | 2-3 | R |  |  | D9 |  |  |  |  | 19 | 3 |  |
| REF02 | Clearinghouse Trace Number | X(50) | AN | 1-50 | R |  |  |  |  |  |  |  | 22 | 50 |  |
| REF03 | Description |  | AN | 1-80 | N/U |  |  |  |  |  |  |  |  |  |  |
| REF04 | Reference Identifier |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |

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Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. Max. | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | Values | Loop ID | $\begin{aligned} & \hline \text { Loop } \\ & \text { Seq. } \\ & \hline \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| REF | Institutional Bill Type Identification |  |  | 1 | S | 2200D | 1 |  | 2200D |  | REF |  | 1 | 18 | 1 |
| REF01 | Reference Identification Qualifier | $\mathrm{X}(3)$ | ID | 2-3 | R |  |  | BLT |  |  |  |  | 19 | 3 |  |
| REF02 | Bill Type Identifier | X(50) | AN | 1-50 | R |  |  |  |  |  |  |  | 22 | 50 |  |
| REF03 | Description |  | AN | 1-80 | N/U |  |  |  |  |  |  |  |  |  |  |
| REF04 | Reference Identifier |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| DTP | Claim Level Service Date |  |  | 1 | R | 2200D | 1 |  | 2200D |  | DTP |  | 1 | 18 | 1 |
| DTP01 | Date Time Qualifier | X(3) | ID | 3-3 | R |  |  | 472 |  |  |  |  | 19 | 3 |  |
| DTP02 | Date Time Period Format Qualifier | $X(3)$ | ID | 2-3 | R |  |  | CCYYMMDD or CCYYMMDDCCYYMMDD |  |  |  |  | 22 | 3 |  |
| DTP03 | Claim Service Period | X(35) | AN | 1-35 | R |  |  |  |  |  |  |  | 25 | 35 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| SVC | Service Line Information |  |  | 1 | S | 2200D | >1 |  | 2200D |  | SVC |  | 1 | 18 | 1 |
| SVC01 | Composite Medical Procedure Identifier |  |  |  | R |  |  |  |  |  |  |  |  |  |  |
| SVC01-1 | Procedure Code | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  | AD, ER, HC, HP, IV, NU, WK |  |  |  |  | 19 | 2 |  |
| SVC01-2 | Procedure Code | X(48) | AN | 1-48 | R |  |  |  |  |  |  |  | 21 | 48 |  |
| SVC01-3 | Procedure Modifier | $\mathrm{X}(2)$ | AN | 2-2 | S |  |  |  |  |  |  |  | 69 | 2 |  |
| SVC01-4 | Procedure Modifier | $X(2)$ | AN | 2-2 | S |  |  |  |  |  |  |  | 71 | 2 |  |
| SVC01-5 | Procedure Modifier | $X(2)$ | AN | 2-2 | S |  |  |  |  |  |  |  | 73 | 2 |  |
| SVC01-6 | Procedure Modifier | $\mathrm{X}(2)$ | AN | 2-2 | S |  |  |  |  |  |  |  | 75 | 2 |  |
| SVC01-7 | Description |  | AN | 1-80 | N/U |  |  |  |  |  |  |  |  |  |  |

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| 2775010 |  |  | x12 Element Attributes |  |  |  |  |  | X12 Flat File |  | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | cobol Pic | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{aligned} & \hline \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | Values | Loop ID | $\begin{array}{\|l\|} \hline \text { Loop } \\ \hline \end{array}$ |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| SVC01-8 | Product/Service ID |  | AN | 1-48 | N/U |  |  |  |  |  |  |  |  |  |  |
| SVC02 | Line Item Charge Amount | 9(11) v99 | R | 1-18 | R |  |  |  |  |  |  |  | 77 | 18 |  |
| SVC03 | Monetary Amount |  | R | 1-18 | N/U |  |  |  |  |  |  |  |  |  |  |
| SVC04 | Revenue Code | X(48) | AN | 1-48 | s |  |  |  |  |  |  |  | 95 | 48 |  |
| SVC05 | Quantity |  | R | 1-15 | N/U |  |  |  |  |  |  |  |  |  |  |
| SVC06 | Composite Medical Procedure Identifier Identifier |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
| SVC07 | Original Units of Service Count | 9(15) | R | 1-15 | s |  |  |  |  |  |  |  | 143 | 15 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| STC | Service Line Level Status Information |  |  | 1 | R | 22000 | >1 |  | 22000 |  | STC |  | 1 | 18 | 1 |
| STC01 | Heath Care Claim Status |  |  |  | R |  |  |  |  |  |  |  |  |  |  |
| STC01-1 | Health Care Claim Status Category Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 19 | 30 |  |
| STC01-2 | Health Care Claim Status Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 49 | 30 |  |
| STC01-3 | Entity Identifier Code | $\mathrm{X}(2)$ | ID | 2-3 | s |  |  | $\begin{aligned} & \hline 77,82,85,87, \text { DK, DN, DQ, } \\ & \text { FA, GB, HK, IL, LI, MSC, PR, } \end{aligned}$ |  |  |  |  | 79 | 3 |  |
| STC01-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC02 | Date |  | DT | 8-8 | N/U |  |  |  |  |  |  |  | 82 | 8 |  |
| STC03 | Action Code | X (2) | ID | 1-2 | R |  |  | U |  |  |  |  | 90 | 2 |  |
| STC04 | Monetary Amount |  | R | 1-18 | N/U |  |  |  |  |  |  |  | 92 | 18 |  |
| STC05 | Monetary Amount |  | R | 1-18 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC06 | Date |  | DT | 8-8 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC07 | Payment Method Code |  | ID | 3-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC08 | Date |  | DT | 8-8 | N/U |  |  |  |  |  |  |  |  |  |  |

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Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \hline \text { Loop } \\ \text { Repeat } \end{gathered}$ | Values | Loop ID | $\begin{aligned} & \hline \text { Loop } \\ & \text { Seq. } \end{aligned}$ |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| STC09 | Check Number |  | AN | 1-16 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC10 | HEALTH CARE CLAIM STATUS |  |  |  | S |  |  |  |  |  |  |  |  |  |  |
| STC10-1 | Health Care Claim Status Category Code | X(5) | AN | 1-30 | R |  |  |  |  |  |  |  | 110 | 30 |  |
| STC10-2 | Health Care Claim Status Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 140 | 30 |  |
| STC10-3 | Entity Identifier Code | $\mathrm{X}(2)$ | ID | 2-3 | S |  |  | 77, 82, 85, 87, DK, DN, DQ, FA, GB, HK, IL, LI, MSC, PR, |  |  |  |  | 170 | 3 |  |
| STC10-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC11 | HEALTH CARE CLAIM STATUS |  |  |  | S |  |  |  |  |  |  |  |  |  |  |
| STC11-1 | Health Care Claim Status Category Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 173 | 30 |  |
| STC11-2 | Health Care Claim Status Code | $\mathrm{X}(5)$ | AN | 1-30 | R |  |  |  |  |  |  |  | 203 | 30 |  |
| STC11-3 | Entity Identifier Code | $\mathrm{X}(2)$ | ID | 2-3 | S |  |  | 77, 82, 85, 87, DK, DN, DQ, FA, GB, HK, IL, LI, MSC, PR, |  |  |  |  | 233 | 3 |  |
| STC11-4 | Code List Qualifier Code |  | ID | 1-3 | N/U |  |  |  |  |  |  |  |  |  |  |
| STC12 | Free-form Message Text |  | AN | 1-264 | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| REF | Service Line Item Identification |  |  | 1 | R | 2200D | 1 |  | 2200D |  | REF |  | 1 | 18 | 1 |
| REF01 | Reference Identification Qualifier | $\mathrm{X}(3)$ | ID | 2-3 | R |  |  | FJ |  |  |  |  | 19 | 3 |  |
| REF02 | Line Item Control Number | X(50) | AN | 1-50 | R |  |  |  |  |  |  |  | 22 | 50 |  |
| REF03 | Description |  | AN | 1-80 | N/U |  |  |  |  |  |  |  |  |  |  |
| REF04 | Reference Identifier |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| REF | Pharmacy Prescription Number |  |  | 1 | S | 2200D | 1 |  | 2200D |  | REF |  | 1 | 18 | 1 |
| REF01 | Reference Identification Qualifier | $\mathrm{X}(3)$ | ID | 2-3 | R |  |  | XZ |  |  |  |  | 19 | 3 |  |

Transaction Set ID: 277 Health Care Claim Acknowledgment
EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 2775010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. Max. | $\begin{gathered} \hline \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | Values | Loop ID | $\begin{aligned} & \hline \text { Loop } \\ & \text { Seq. } \\ & \hline \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| REF02 | Pharmacy Prescription Number | X(50) | AN | 1-50 | R |  |  |  |  |  |  |  | 22 | 50 |  |
| REF03 | Description |  | AN | 1-80 | N/U |  |  |  |  |  |  |  |  |  |  |
| REF04 | Reference Identifier |  |  |  | N/U |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| DTP | Service Line Date |  |  | 1 | S | 2200D | 1 |  | 2200D |  | DTP |  | 1 | 18 | 1 |
| DTP01 | Date Time Qualifier | $\mathrm{X}(3)$ | ID | 3-3 | R |  |  |  |  |  |  |  | 19 | 3 |  |
| DTP02 | DateTime Period Format Qualifier | $\mathrm{X}(3)$ | ID | 2-3 | R |  |  | D8, RD8 |  |  |  |  | 22 | 3 |  |
| DTP03 | Service Line Date | $\mathrm{X}(35)$ | AN | 1-35 | R |  |  |  |  |  |  |  | 25 | 35 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| SE | Transaction Set Trailer |  |  | 1 | R |  | >1 |  |  |  |  |  | 1 | 18 | 1 |
| SE01 | Transaction Segment Count | 9(10) | N0 | 1-10 | R |  |  |  |  |  |  |  | 19 | 10 |  |
| SE02 | Transaction Set Control Number | $\mathrm{X}(9)$ | AN | 4-9 | R |  |  |  |  |  |  |  | 29 | 9 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| GE | FUNCTION GROUP TRAILER |  |  | 1 | R |  | 1 |  |  |  |  |  | 1 | 18 | 1 |
| GE01 | Number of Transaction Sets Included | X (6) | N0 | 1-6 | R |  |  |  |  |  |  |  | 19 | 6 |  |
| GE02 | Group Control Number | $\mathrm{X}(9)$ | N0 | 1-9 | R |  |  |  |  |  |  |  | 25 | 9 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| IEA | INTERCHANGE CONTROL TRAILER |  |  | 1 | R |  | 1 |  |  |  |  |  | 1 | 18 | 1 |
| IEA01 | Number of Included Functional Groups | $\mathrm{X}(5)$ | N0 | 1-5 | R |  |  |  |  |  |  |  | 19 | 5 |  |
| IEA02 | Interchange Control Number | $\mathrm{X}(9)$ | NO | 9-9 | R |  |  |  |  |  |  |  | 24 | 9 |  |


|  |  |
| :---: | :---: |
|  | This field indicates the element name or the industry name describing the element <br> This field indicates the the COBOL picture clause, which is an element in programming language that is used to indicate the item characteristics and size of the numeric data element. This field indicates the attributes of the data element (ie. ID, AN, R, TM, and DT) see rows 5-9 for definitions of each type <br> An identifier data element always contains a value from a predefined list of codes that is maintained by the ASC Committee or some other body recognized by the Committee. Trailing spaces must be suppressed unless they are necessary to satisfy a minimum legnth. An identifier is always left justified. The representation for this data element type is "ID". <br> A string data element is a sequence of any characters from the basic or extended character sets. The string data element must contain at least one non-space character. The significant chracters shall be left justified. Leading spaces, when they occur, are presumed to be significant characters. Trailing spaces must be suppressed unless they are necessary to satisfy a minimum legnth. The representation for this data element type is "AN". <br> A decimal data element may contain an explicit decimal point and is used for numeric values that have a varying number of decimal positions. This data element type is represented as "R". The decimal point always appears in the character stream if the decimal point is at any place other than the right end. If the value is an integer (decimal point at the right end), the decimal point must be omitted. For negative values, the leading minus sign (-) is used. Absence of a sign indicates a positive value. The plus sign (+) must not be transmitted. Leading zeros must be suppressed unless necessary to satisfy a minimum length requirement. Trailing zeros following the decimal point must be suppressed unless necessary to indicate precision. The use of triad separators (for example commas in $1,000,000$ ) is expressly prohibited. The length of a decimal type element does not include the optional leading sign or decimal point. <br> A time data element is used to express the ISO standard time HHMMSSd..d format in which HH is the hour for a 24 hour clock ( $00-23$ ), MM is the minute ( $00-59$ ), SS is the second ( $00-59$ ), and d..d is decimal seconds. The representation for this data element type is "TM". The length of the data element determines the format of the transmitted time. <br> A date data element is used to express the standard date is either YYMMDD or CCYYMMDD format in which CC is the first two digits of the calendar year, YY is the last two digits of the calendar year, MM is the month (01-12), and DD is the day in the month (01-31). The representation for this data element type is "DT". <br> This field identifies the minimum and maximum size of a data element (ie. A value of 1-2 means the element can be either 1 byte or 2 bytes. A value of $5-5$ means that the element must be 5 bytes) <br> The field indicates whether a segment or element is REQUIRED, SITUATIONAL, or NOT USED This field contains the loop ID, if applicable. <br> This field contains the value indicating the number of times the loop may be repeated. This field contains the value or values which can be submitted in this element. <br> Loop ID ( 6 bytes) - This field contain positions 1 through 6 of the 18 byte record key used to identify the loop when used as a record key in a computer program (ie. "2010AA"). Left justify and space fill. Note: the total size of the record key is 18 bytes. <br> Loop Seq. (4 bytes) - This field contain positions 7 through 10 of the 18 byte record key used to identify the numeric sequence of the loop when used as a record key in a computer program (ie. "0001"). Right justify and zero fill. Note: the total size of the record key is 18 bytes. |
|  |  |
|  |  |
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| Seg. ID | Seq. ID (4 bytes) - This field contains positions 11 through 14 of the 18 byte record key used to identify the segment when used as a record key in a computer program (ie."REF "). Left justify and space fill. Note: the total size of the record key is 18 bytes. |
| :---: | :---: |
| Seg. Seq. | Seg. Seq.(4 bytes) - This field contains positions 15 through 18 of the 18 byte record key used to identify the numeric sequence of the segment when used as a record key in a computer program (ie. "0001"). Right justify and zero fill. Note: the total size of the record key is 18 bytes. |
| start | This field shows the data element's starting position within the record. |
| Length | This field shows the data element's length with the record. |
| Record Repeat | If the record repeats, this field indicates the number of times the record may repeat. |

4/16/2009 Initial Draft

Transaction Set ID: 999 Acknowledgment for Health Care Insurance EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 9995010 | Description | COBOL PIC | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier |  |  | ID | Min. <br> Max. | Usage Reg. | Loop | Loop Repeat | Values | Loop ID | $\begin{gathered} \text { Loop } \\ \text { Seq. } \\ \hline \end{gathered}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
| ISA | INTERCHANGE CONTROL HEADER |  |  | 1 | R |  | 1 |  |  |  | ISA |  | 1 | 18 | 1 |
| ISA01 | Authorization Information Qualifier | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  | 00, 03 |  |  |  |  | 19 | 2 |  |
| ISA02 | Authorization Information | $\mathrm{X}(10)$ | AN | 10-10 | R |  |  |  |  |  |  |  | 21 | 10 |  |
| ISA03 | Security Information Qualifier | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  | 00, 01 |  |  |  |  | 31 | 2 |  |
| ISA04 | Security Information | $\mathrm{X}(10)$ | AN | 10-10 | R |  |  |  |  |  |  |  | 33 | 10 |  |
| ISA05 | Interchange ID Qualifier | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  | $\begin{gathered} \hline 01,14,20,27,28,29,30,33, \\ z z \\ \hline \end{gathered}$ |  |  |  |  | 43 | 2 |  |
| ISA06 | Interchange Sender ID | $\mathrm{X}(15)$ | AN | 15-15 | R |  |  |  |  |  |  |  | 45 | 15 |  |
| ISA07 | Interchange ID Qualifier | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  | $\begin{gathered} \hline 01,14,20,27,28,29,30,33, \\ z z \\ \hline \end{gathered}$ |  |  |  |  | 60 | 2 |  |
| ISA08 | Interchange Receiver ID | $\mathrm{X}(15)$ | AN | 15-15 | R |  |  |  |  |  |  |  | 62 | 15 |  |
| ISA09 | Interchange Date | X (6) | DT | 6-6 | R |  |  | YYMMDD |  |  |  |  | 77 | 6 |  |
| ISA10 | Interchange Time | $\mathrm{X}(4)$ | TM | 4-4 | R |  |  | HHMM |  |  |  |  | 83 | 4 |  |
| ISA11 | Repetition Separator | $\mathrm{X}(1)$ |  | 1-1 | R |  |  |  |  |  |  |  | 87 | 1 |  |
| ISA12 | Interchange Control Version Number | $\mathrm{X}(5)$ | ID | 5-5 | R |  |  | 00501 |  |  |  |  | 88 | 5 |  |
| ISA13 | Interchange Control Number | $\mathrm{X}(9)$ | N0 | 9-9 | R |  |  |  |  |  |  |  | 93 | 9 |  |
| ISA14 | Acknowledgement Requested | $\mathrm{X}(1)$ | ID | 1-1 | R |  |  | 0,1 |  |  |  |  | 102 | 1 |  |
| ISA15 | Usage Indicator | $\mathrm{X}(1)$ | ID | 1-1 | R |  |  | P, T |  |  |  |  | 103 | 1 |  |
| ISA16 | Component Element Separator | $\mathrm{X}(1)$ |  | 1-1 | R |  |  |  |  |  |  |  | 104 | 1 |  |
| TA1 | Interchange Acknowledgment |  |  | 1 | S |  | 1 |  |  |  |  |  | 1 | 18 |  |

Transaction Set ID: 999 Acknowledgment for Health Care Insurance EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 9995010 | Description | COBOL PIC | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier |  |  | ID | Min. <br> Max. | Usage Reg. | Loop | Loop Repeat | Values | Loop ID | $\begin{aligned} & \text { Loop } \\ & \text { Seq. } \\ & \hline \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| TA101 | Interchange Control Number | $\mathrm{X}(9)$ | No | 9-9 | R |  |  |  |  |  |  |  | 19 | 9 |  |
| TA102 | Interchange Date | X (6) | DT | 6-6 | R |  |  |  |  |  |  |  | 28 | 6 |  |
| TA103 | Interchange Time | X(4) | TM | 4-4 | R |  |  |  |  |  |  |  | 34 | 4 |  |
| TA104 | Interchange Acknowledgment Code | $\mathrm{X}(1)$ | ID | 1-1 | R |  |  | A, E, R |  |  |  |  | 38 | 1 |  |
| TA105 | Interchange Note Code | $\mathrm{X}(3)$ | ID | 3-3 | R |  |  | $006,007,008,009,010,011$, <br> $012,013,014,015,016,017$, <br> $018,019,020,021,022,023$, <br> $024,025,026,027,028,029$, <br> 030,031 |  |  |  |  | 39 | 3 |  |
| GS | FUNCTIONAL GROUP HEADER |  |  | 1 | R |  | 1 |  |  |  | GS |  | 1 | 18 | 1 |
| GS01 | Functional Identifier Code | $\mathrm{X}(2)$ | ID | 2-2 | R |  |  |  |  |  |  |  | 19 | 2 |  |
| GS02 | Application Sender Code | $\mathrm{X}(15)$ | AN | 2-15 | R |  |  |  |  |  |  |  | 21 | 15 |  |
| GS03 | Application Receiver Code | $\mathrm{X}(15)$ | AN | 2-15 | R |  |  |  |  |  |  |  | 36 | 15 |  |
| GS04 | Date | $\mathrm{X}(8)$ | DT | 8-8 | R |  |  | CCYYMMDD |  |  |  |  | 51 | 8 |  |
| GS05 | Time | X (8) | TM | 4-8 | R |  |  | HHMM, HHMMSS, HHMMSSD HHMMSSDD |  |  |  |  | 59 | 8 |  |
| GS06 | Group Control Number | $\mathrm{X}(9)$ | N0 | 1-9 | R |  |  |  |  |  |  |  | 67 | 9 |  |
| GS07 | Responsible Agency Code | $\mathrm{X}(2)$ | ID | 1-2 | R |  |  | X |  |  |  |  | 76 | 2 |  |
| GS08 | Version Identifier Code | $\mathrm{X}(12)$ | AN | 1-12 | R |  |  | 005010×231 |  |  |  |  | 78 | 12 |  |
| ST | TRANSACTION SET HEADER |  |  | 1 | R |  | 1 |  |  |  | ST |  | 1 | 18 | 1 |

Transaction Set ID: 999 Acknowledgment for Health Care Insurance EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 9995010 | Description | COBOL PIC | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier |  |  | ID | Min. <br> Max. | Usage Reg. | Loop | Loop <br> Repeat | Values | Loop ID | $\begin{aligned} & \text { Loop } \\ & \text { Seq. } \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
| ST01 | Transaction Set Identifier Code | $\mathrm{X}(3)$ | ID | 3-3 | R |  |  | 999 |  |  |  |  | 19 | 3 |  |
| ST02 | Transaction Set Control Number | $\mathrm{X}(9)$ | AN | 4-9 | R |  |  |  |  |  |  |  | 22 | 9 |  |
| ST03 | Version, Release, or Industry Identifier | X(12) | AN | 1-35 | R |  |  | 005010X231 |  |  |  |  | 31 | 12 |  |
| AK1 | Functional Group Response Header |  |  | 1 | R |  | 1 |  |  |  | AK1 |  | 1 | 18 | 1 |
| AK101 | Functional Identifier Code | X (2) | ID | 2-2 | R |  |  |  |  |  |  |  | 19 | 2 |  |
| AK102 | Group Control Number | $\mathrm{X}(9)$ | No | 1-9 | R |  |  |  |  |  |  |  | 21 | 9 |  |
| AK103 | Version, Release, or Identifier Code | $\mathrm{X}(2)$ | AN | 1-12 | R |  |  |  |  |  |  |  | 30 | 12 |  |
| AK2 | Transaction Set Response Header |  |  | 1 | s | 2000 | >1 |  | 2000 |  | AK2 |  | 1 | 18 | 1 |
| AK201 | Transaction Set Identifier Code | $\mathrm{X}(3)$ | ID | 3-3 | R |  |  |  |  |  |  |  | 19 | 3 |  |
| AK202 | Transaction Set Control Number | $\mathrm{X}(9)$ | AN | 4-9 | R |  |  |  |  |  |  |  | 22 | 9 |  |
| AK203 | Implementaion Convention Reference | X(35) | AN | 1-35 | S |  |  |  |  |  |  |  | 31 | 35 |  |
| IK3 | Error Identification |  |  | 1 | s | 2100 | >1 |  | 2100 |  | IK3 |  | 1 | 18 | 1 |
| IK301 | Segment ID Code | $\mathrm{X}(3)$ | ID | 2-3 | R |  |  |  |  |  |  |  | 19 | 3 |  |
| IK302 | Segment Position in Transaction Set | $\mathrm{X}(10)$ | N0 | 1-10 | R |  |  |  |  |  |  |  | 22 | 10 |  |
| IK303 | Loop Identifier Code | $\mathrm{X}(4)$ | AN | 1-4 | S |  |  |  |  |  |  |  | 32 | 4 |  |
| IK304 | Implementation Segment Syntax Error Code | $\mathrm{X}(3)$ | ID | 1-3 | R |  |  | $\begin{gathered} 1,2,3,4,5,6,7,8,14,16,17, \\ 18,19 \end{gathered}$ |  |  |  |  | 36 | 3 |  |

Transaction Set ID: 999 Acknowledgment for Health Care Insurance EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 9995010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. <br> Max. | Usage Reg. | Loop | Loop Repeat | Values | Loop ID | $\begin{aligned} & \text { Loop } \\ & \text { Seq. } \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| CTX | Segment Context |  |  | 1 | S | 2100 | 9 |  | 2100 |  | CTX |  | 1 | 18 | 1 |
| CTX01 | Context Identification |  |  |  | R |  |  |  |  |  |  |  |  |  |  |
| CTX01-1 | Context Name | $\mathrm{X}(35)$ | AN | 1-35 | R |  |  |  |  |  |  |  | 19 | 35 |  |
| CTX01-2 | Context Reference | $\mathrm{X}(35)$ | AN | 1-35 | N/U |  |  |  |  |  |  |  | 54 | 35 |  |
| CTX02 | Segment ID Code | $\mathrm{X}(3)$ | ID | 2-3 | R |  |  |  |  |  |  |  | 89 | 3 |  |
| Стх03 | Segment Position in Transaction Set | $\mathrm{X}(10)$ | No | 1-10 | R |  |  |  |  |  |  |  | 92 | 10 |  |
| СTX04 | Loop Identifier Code | $\mathrm{X}(4)$ | AN | 1-4 | S |  |  |  |  |  |  |  | 102 | 4 |  |
| CTX05 | Position in Segment |  |  |  | S |  |  |  |  |  |  |  |  |  |  |
| CTX05-1 | Element Position in Segment | $\mathrm{X}(2)$ | N0 | 1-2 | R |  |  |  |  |  |  |  | 106 | 2 |  |
| CTX05-2 | Component Data Element Position in Composite | $\mathrm{X}(2)$ | N0 | 1-2 | S |  |  |  |  |  |  |  | 108 | 2 |  |
| CTX05-3 | Reporting Dat Element Position | X(4) | N0 | 1-4 | S |  |  |  |  |  |  |  | 110 | 4 |  |
| CTX06 | Reference in Segment |  |  |  | S |  |  |  |  |  |  |  |  |  |  |
| CTX06-1 | Data Element Reference Number | $\mathrm{X}(4)$ | N0 | 1-4 | R |  |  |  |  |  |  |  | 114 | 4 |  |
| CTX06-2 | Component Data Element Reference Number | $X(4)$ | N0 | 1-4 | S |  |  |  |  |  |  |  | 118 | 4 |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| CTX | Business Unit Identifier |  |  | 1 | S | 2100 | 1 |  | 2100 |  | CTX |  | 1 | 18 | 1 |
| CTX01 | Context Identification |  |  |  | R |  |  |  |  |  |  |  |  |  |  |
| CTX01-1 | Context Name | X(35) | AN | 1-35 | R |  |  |  |  |  |  |  | 19 | 35 |  |

Transaction Set ID: 999 Acknowledgment for Health Care Insurance EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound


Transaction Set ID: 999 Acknowledgment for Health Care Insurance EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 9995010 |  |  | X12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | COBOL PIC | ID | Min. <br> Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | Values | Loop ID | $\begin{aligned} & \text { Loop } \\ & \text { Seq. } \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
| CTX01-2 | Context Reference |  | AN | 1-35 | N/U |  |  |  |  |  |  |  | 54 | 35 |  |
| СTX02 | Segment ID Code | $\mathrm{X}(3)$ | ID | 2-3 | R |  |  |  |  |  |  |  | 89 | 3 |  |
| CTX03 | Segment Position in Transaction Set | $\mathrm{X}(10)$ | N0 | 1-10 | R |  |  |  |  |  |  |  | 92 | 10 |  |
| СTX04 | Loop Identifier Code | X(4) | AN | 1-4 | S |  |  |  |  |  |  |  | 102 | 4 |  |
| Стх05 | Position in Segment |  |  |  | S |  |  |  |  |  |  |  |  |  |  |
| CTX05-1 | Element Position in Segment | $\mathrm{X}(2)$ | No | 1-2 | R |  |  |  |  |  |  |  | 106 | 2 |  |
| CTX05-2 | Component Data Element Position in Composite | $\mathrm{X}(2)$ | N0 | 1-2 | S |  |  |  |  |  |  |  | 108 | 2 |  |
| CTX05-3 | Repeating Data Element Position | $\mathrm{X}(4)$ | NO | 1-4 | S |  |  |  |  |  |  |  | 110 | 4 |  |
| CTX06 | Reference in Segment |  |  |  | S |  |  |  |  |  |  |  |  |  |  |
| СтX06-1 | Data Element Reference Number | $\mathrm{X}(4)$ | No | 1-4 | R |  |  |  |  |  |  |  | 114 | 4 |  |
| CTX06-2 | Data Element Reference Number |  | No | 1-4 | N/U |  |  |  |  |  |  |  | 118 | 4 |  |
| IK5 | Transaction Set Response Trailer |  |  | 1 | R | 2000 | 1 |  | 2000 |  | IK5 |  | 1 | 18 | 1 |
| IK501 | Transaction Set Acknowledgment Code | $\mathrm{X}(1)$ | ID | 1-1 | R |  |  | A, E, M, R, W, X |  |  |  |  | 19 | 1 |  |
| IK502 | Implementation Transaction Set Syntax Error | $\mathrm{X}(3)$ | ID | 1-3 | S |  |  | $\begin{gathered} \hline 12,13,15,16,17,18,19,23, \\ 24,25,26,27,16 \\ \hline \end{gathered}$ |  |  |  |  | 20 | 3 |  |
| IK503 | Implementation Transaction Set Syntax Error Code | X(3) | ID | 1-3 | S |  |  |  |  |  |  |  | 23 | 3 |  |
| IK504 | Implementation Transaction Set Syntax Error Code | X(3) | ID | 1-3 | S |  |  |  |  |  |  |  | 26 | 3 |  |
| IK505 | Implementation Transaction Set Syntax Error Code | $\mathrm{X}(3)$ | ID | 1-3 | S |  |  |  |  |  |  |  | 29 | 3 |  |
| IK506 | Implementation Transaction Set Syntax Error Code | $\mathrm{X}(3)$ | ID | 1-3 | S |  |  |  |  |  |  |  | 32 | 3 |  |

Transaction Set ID: 999 Acknowledgment for Health Care Insurance EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound


Transaction Set ID: 999 Acknowledgment for Health Care Insurance EDI Standards: ASC X12
Version/Release: 005010
Direction: Outbound

| 9995010 |  |  | x12 Element Attributes |  |  |  |  |  | X12 Flat File |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| Element Identifier | Description | cobol pic | ID | Min. | $\begin{aligned} & \text { Usage } \\ & \text { Rea. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | Values | Loop ID | $\begin{aligned} & \text { Loop } \\ & \text { Seq. } \end{aligned}$ | Seg. ID | Seg. Seq. | Start | Length | Record Repeat |
|  |  |  |  |  |  |  |  |  | 6 | 4 | 4 | 4 |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| IEA | INTERCHANGE CONTROL TRAILER |  |  | 1 | R |  | 1 |  |  |  | IEA |  | 1 | 18 | 1 |
| IEA01 | Number of Included Functional Groups | $\mathrm{X}(5)$ | No | 1-5 | R |  |  |  |  |  |  |  | 19 | 5 |  |
| IEA02 | Interchange Control Number | $\mathrm{X}(9)$ | No | 9-9 | R |  |  |  |  |  |  |  | 24 | 9 |  |


|  |  |
| :---: | :---: |
|  | This field indicates the element name or the industry name describing the element <br> This field indicates the the COBOL picture clause, which is an element in programming language that is used to indicate the item characteristics and size of the numeric data element. This field indicates the attributes of the data element (ie. ID, AN, R, TM, and DT) see rows 5-9 for definitions of each type <br> An identifier data element always contains a value from a predefined list of codes that is maintained by the ASC Committee or some other body recognized by the Committee. Trailing spaces must be suppressed unless they are necessary to satisfy a minimum legnth. An identifier is always left justified. The representation for this data element type is "ID". <br> A string data element is a sequence of any characters from the basic or extended character sets. The string data element must contain at least one non-space character. The significant chracters shall be left justified. Leading spaces, when they occur, are presumed to be significant characters. Trailing spaces must be suppressed unless they are necessary to satisfy a minimum legnth. The representation for this data element type is "AN". <br> A decimal data element may contain an explicit decimal point and is used for numeric values that have a varying number of decimal positions. This data element type is represented as "R". The decimal point always appears in the character stream if the decimal point is at any place other than the right end. If the value is an integer (decimal point at the right end), the decimal point must be omitted. For negative values, the leading minus sign (-) is used. Absence of a sign indicates a positive value. The plus sign (+) must not be transmitted. Leading zeros must be suppressed unless necessary to satisfy a minimum length requirement. Trailing zeros following the decimal point must be suppressed unless necessary to indicate precision. The use of triad separators (for example commas in $1,000,000$ ) is expressly prohibited. The length of a decimal type element does not include the optional leading sign or decimal point. <br> A time data element is used to express the ISO standard time HHMMSSd..d format in which HH is the hour for a 24 hour clock ( $00-23$ ), MM is the minute ( $00-59$ ), SS is the second ( $00-59$ ), and d..d is decimal seconds. The representation for this data element type is "TM". The length of the data element determines the format of the transmitted time. <br> A date data element is used to express the standard date is either YYMMDD or CCYYMMDD format in which CC is the first two digits of the calendar year, YY is the last two digits of the calendar year, MM is the month (01-12), and DD is the day in the month (01-31). The representation for this data element type is "DT". <br> This field identifies the minimum and maximum size of a data element (ie. A value of 1-2 means the element can be either 1 byte or 2 bytes. A value of $5-5$ means that the element must be 5 bytes) <br> The field indicates whether a segment or element is REQUIRED, SITUATIONAL, or NOT USED This field contains the loop ID, if applicable. <br> This field contains the value indicating the number of times the loop may be repeated. This field contains the value or values which can be submitted in this element. <br> Loop ID ( 6 bytes) - This field contain positions 1 through 6 of the 18 byte record key used to identify the loop when used as a record key in a computer program (ie. "2010AA"). Left justify and space fill. Note: the total size of the record key is 18 bytes. <br> Loop Seq. (4 bytes) - This field contain positions 7 through 10 of the 18 byte record key used to identify the numeric sequence of the loop when used as a record key in a computer program (ie. "0001"). Right justify and zero fill. Note: the total size of the record key is 18 bytes. |
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| Seg. ID | Seq. ID (4 bytes) - This field contains positions 11 through 14 of the 18 byte record key used to identify the segment when used as a record key in a computer program (ie."REF "). Left justify and space fill. Note: the total size of the record key is 18 bytes. |
| :---: | :---: |
| Seg. Seq. | Seg. Seq.(4 bytes) - This field contains positions 15 through 18 of the 18 byte record key used to identify the numeric sequence of the segment when used as a record key in a computer program (ie. "0001"). Right justify and zero fill. Note: the total size of the record key is 18 bytes. |
| start | This field shows the data element's starting position within the record. |
| Length | This field shows the data element's length with the record. |
| Record Repeat | If the record repeats, this field indicates the number of times the record may repeat. |

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| $\begin{aligned} & \text { Element } \\ & \text { IDENTIFIER } \end{aligned}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ISA | INTERCHANGE CONTROL HEADER |  | 1 | R | - | 1 |  | TA1 | TA105: 024 "Invalid Interchange Content". | ISA must be present. |  |
| ISA |  |  |  |  |  |  |  | TA1 | TA105: 024 "Invalid Interchange Content". Content". | Only one iteration of ISA is allowed. |  |
| ISA01 | Authorization Information Qualifier | ID | 2-2 | R |  |  | 00, 03 | TA1 | TA105: 010 "Invalid Authorization Information Qualifier Value". | ISA01 must be present. |  |
| ISA01 |  |  |  |  |  |  |  | TA1 | TA105: 010 "Invalid Authorization | ISA01 must be valid values. |  |
| ISA02 | Authorization Information | AN | 10-10 | R |  |  |  | TA1 | TA105: 011 "Invalid Authorization Information Value". | ISA02 must be present. |  |
| ISA02 |  |  |  |  |  |  |  | TA1 | TA105: 011 "Invalid Authorization Information Value". | ISA02 must be 10 characters. |  |
| ISA02 |  |  |  |  |  |  |  | TA1 | TA105: 011 "Invalid Authorization Information Value". | ISA02 must be populated with accepted AN characters. |  |
| ISA03 | Security Information Qualifier | ID | 2-2 | R |  |  | 00, 01 | TA1 | TA105: 012 "Security Information Qualifier Value". | ISA03 must be present. |  |
| ISA03 |  |  |  |  |  |  |  | TA1 | $\begin{aligned} & \text { TA105: } 012 \text { "Security Information } \\ & \text { Qualifier Value". } \\ & \hline \end{aligned}$ | ISA03 must be vaild values. |  |
| ISA04 | Security Information | AN | 10-10 | R |  |  |  | TA1 | TA105: 013 "Security Information Value". | ISA04 must be present. |  |
| ISA04 |  |  |  |  |  |  |  | TA1 | TA105: 013 "Security Information Value". | ISA04 must be 10 characters. |  |
| ISA04 |  |  |  |  |  |  |  | TA1 | TA105: 013 "Security Information Value". | ISA04 must be populated with accepted AN |  |
| ISA05 | Interchange ID Qualifier | ID | 2-2 | R |  |  | $\begin{gathered} 01,14,20,27,28,29,30,33, \\ z Z \end{gathered}$ | TA1 | TA105: 005 "Invalid Interchange ID Qualifier for Sender". | ISA05 must be present. |  |
| ISA05 |  |  |  |  |  |  |  | TA1 | TA105: 005 "Invalid Interchange ID Qualifier for Sender". | ISA05 must be "27", "28" or "ZZ". |  |
| ISA06 | Interchange Sender ID | AN | 15-15 | R |  |  |  | TA1 | $\qquad$ ID". | ISA06 must be present. |  |
| ISA06 |  |  |  |  |  |  |  | TA1 | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must be 15 characters. |  |
| ISA06 |  |  |  |  |  |  |  | TA1 | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must contain at least one non-space character. |  |
| ISA06 |  |  |  |  |  |  |  | TA1 | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must be populated with accepted AN characters. |  |
| ISA07 | Interchange ID Qualifier | ID | 2-2 | R |  |  | $\begin{gathered} 01,14,20,27,28,29,30,33, \\ z z \end{gathered}$ | TA1 | TA105: 007 "Invalid Interchange ID Qualifier for Receiver". | ISA07 must be present. |  |
| ISA07 |  |  |  |  |  |  |  | TA1 | TA105: 007 "Invalid Interchange ID Qualifier for Receiver". | ISA07 must be "27", "28" or "ZZ". |  |
| ISA08 | Interchange Receiver ID | AN | 15-15 | R |  |  |  | TA1 | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must be present. |  |
| ISA08 |  |  |  |  |  |  |  | TA1 | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must be 15 characters. |  |
| ISA08 |  |  |  |  |  |  |  | TA1 | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must contain at least one non-space character. |  |
| ISA08 |  |  |  |  |  |  |  | TA1 | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must be populated with accepted AN characters. |  |
| ISA09 | Interchange Date | DT | 6-6 | R |  |  |  | TA1 | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be present. |  |
| ISA09 |  |  |  |  |  |  |  | TA1 | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be a valid date in YYMMDD format. |  |


| Element IDENTIFIER | Description | ID | ${ }_{\text {Min. }}$ <br> Max. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ISA09 |  |  |  |  |  |  |  | TA1 | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be a the date of the interchange; must not be a future date. |  |
| ISA10 | Interchange Time | тм | 4-4 | R |  |  | HHMM | TA1 | TA105: 015 "Invalid Interchange Time Value". | ISA10 must be present. |  |
| ISA10 |  |  |  |  |  |  |  | TA1 | TA105: 015 "Invalid Interchange Time Value". | ISA10 must be a valid time in HHMM format. |  |
| ISA11 | Repetiton Seperator |  | 1-1 | R |  |  |  | TA1 | TA105: 024 "Invalid Interchange Content". | ISA11 must be present. | 01/20: Companion Guide Note needed. |
| ISA11 |  |  |  |  |  |  |  | TA1 | TA105: 024 "Invalid Interchange Content". | ISA11 must be 1 character. |  |
| ISA11 |  |  |  |  |  |  |  | TA1 | TA105: 024 "Invalid Interchange Content". | ISA11 must contain at least one non-space character. |  |
| ISA12 | Interchange Control Version Number | ID | 5-5 | R |  |  | 00501 | TA1 | TA105: 017 "Invalid Interchange Version ID Value". | ISA12 must be present. |  |
| ISA12 |  |  |  |  |  |  |  | TA1 | TA105: 017 "Invalid Interchange Version ID Value". | ISA12 must be "00501". |  |
| ISA13 | Interchange Control Number | N0 | 9-9 | R |  |  |  | TA1 | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be present. |  |
| ISA13 |  |  |  |  |  |  |  | TA1 | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be numeric. |  |
| ISA13 |  |  |  |  |  |  |  | TA1 | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be 9 characters. |  |
| ISA13 |  |  |  |  |  |  |  | TA1 | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be > 0 . |  |
| ISA13 |  |  |  |  |  |  |  | TA1 | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be unsigned. |  |
| ISA14 | Acknowledgement Requested | ID | 1-1 | R |  |  | 0, 1 | TA1 | TA105: 019 "Invalid Acknowledgment Requested Value". | ISA14 must be present. |  |
| ISA14 |  |  |  |  |  |  |  | TA1 | TA105: 019 "Invalid Acknowledgment Requested Value". | ISA14 must be valid values. |  |
| ISA15 | Usage Indicator | ID | 1-1 | R |  |  | P, T | TA1 | TA105: 020 "Invalid Test Indicator Value". | ISA15 must be present. |  |
| ISA15 |  |  |  |  |  |  |  | TA1 | TA105: 020 "Invalid Test Indicator Value". | ISA15 must be valid values. |  |
| ISA16 | Component Element Separator |  | 1-1 | R |  |  |  | TA1 | TA105: 027 "Invalid Component Element Separator" | ISA16 must be present. |  |
| ISA16 |  |  |  |  |  |  |  | TA1 | TA105: 027 "Invalid Component Element Separator" | ISA16 must be 1 character |  |
| ISA16 |  |  |  |  |  |  |  | TA1 | TA105: 027 "Invalid Component Element Separator" | ISA16 must contain at least one non-space character. |  |
| ISA16 |  |  |  |  |  |  |  | TA1 | TA105: 027 "Invalid Component Element Separator" | ISA16 must be populated with accepted AN characters. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| GS Sets | Functional Groups |  |  |  |  | >1 |  |  |  |  |  |
| GS | FUNCTIONAL GROUP HEADER |  | 1 | R | - | 1 |  | 999 |  | GS must be present. |  |
| GS |  |  |  |  |  |  |  | 999 | AK905: 1 "Functional Group Not Supported". | Only one iteration of GS is allowed. |  |
| GS01 | Functional Identifier Code | ID | 2-2 | R |  |  | HC | 999 | AK905: 1 "Functional Group Not Supported". | GS01 must be present. |  |
| GS01 |  |  |  |  |  |  |  | 999 | AK905: 1 "Functional Group Not Supported". | GS01 must be "HC". |  |
| GS02 | Application Sender Code | AN | 2-15 | R |  |  |  | 999 | AK905: 14 "Unknown Security Originator". | GS02 must be present. |  |

## 837 - Institutional Edits

| Element IDENTIFIER | Description | ID | Min. Max | Usage Reg. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| GS02 |  |  |  |  |  |  |  | 999 | AK905: 14 "Unknown Security Originator". | GS02 must be 2-15 characters. |  |
| GS02 |  |  |  |  |  |  |  | 999 | AK905: 14 "Unknown Security | GS02 must contain at least two non-space characters. |  |
| GS02 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { AK905: } 14 \text { "Unknown Security } \\ & \text { Originator". } \end{aligned}$ | GS02 must be populated with accepted AN characters. |  |
| GS03 | Application Receiver Code | AN | 2-15 | R |  |  |  | 999 | AK905: 13 "Unknown Security | GS03 must be present. |  |
| GS03 |  |  |  |  |  |  |  | 999 | AK905: 13 "Unknown Security Recipient". | GS03 must be 2-15 characters. |  |
| GS03 |  |  |  |  |  |  |  | 999 | AK905: 13 "Unknown Security Recipient". | GS03 must contain at least two non-space characters. |  |
| GS03 |  |  |  |  |  |  |  | 999 | AK905: 13 "Unknown Security | GS03 must be populated with accepted AN characters. |  |
| GS04 | Date | DT | 8-8 | R |  |  | CCYYMMDD |  |  | GS04 must be present. |  |
| GS04 |  |  |  |  |  |  |  |  |  | GS04 must be a valid date in CCYYMMDD format. |  |
| GSO4 |  |  |  |  |  |  |  |  |  | GS04 must be the date the functional group is created; must not be a future date |  |
| GS05 | Time | тм | 4-8 | R |  |  | HHMM, HHMMSS, HHMMSSD HHMMSSDD |  |  | GS05 must be present. |  |
| GS05 |  |  |  |  |  |  |  |  |  | GS05 must be a valid time in a valid format. |  |
| GS06 | Group Control Number | No | 1-9 | R |  |  |  | 999 | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be present. |  |
| GS06 |  |  |  |  |  |  |  | 999 | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be numeric. |  |
| GS06 |  |  |  |  |  |  |  | 999 | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be > 0 . |  |
| GS06 |  |  |  |  |  |  |  | 999 | AK905: 6 "Group Control Number Violates Syntax". Violates Syntax". | GS06 must be < =999,999,999. |  |
|  |  |  |  |  |  |  |  | 999 | AK905: 19 "Functional Group Control Number not Unique within Interchange. | GS06 must be unique within the interchange. |  |
| GS07 | Responsible Agency Code | ID | 1-2 | R |  |  | x |  |  | GS07 must be present. |  |
| GS07 |  |  |  |  |  |  |  |  |  | GS07 must be "X". |  |
| GS08 | Version Identifier Code | AN | 1-12 | R |  |  | 005010×223 | 999 | AK905: 2 "Functional Group Version Not Supported" | GS08 must be present. |  |
| GS08 |  |  |  |  |  |  |  | 999 | AK905: 2 "Functional Group Version Not Supported" | GS08 must be "005010x223A1". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| ST Sets | Transaction Sets |  |  |  |  | >1 |  |  |  |  |  |
| ST | $\underset{\substack{\text { TRANSACTION SET } \\ \text { HEADER }}}{\text { Hen }}$ |  | 1 | R | - | >1 |  |  |  | ST must be present. |  |
| ST |  |  |  |  |  |  |  |  |  | Only one iteration of ST is allowed. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & 277 C A \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ST01 | Transaction Set Identifier Code | ID | 3-3 | R |  |  | 837 | 999 | \|K502: 6 "Missing or Invalid Transaction Set Identifier". | ST01 must be present. |  |
| ST01 |  |  |  |  |  |  |  | 999 | IK502: 6 "Missing or Invalid Transaction Set Identifier". | ST01 must be "837". |  |
| ST02 | Transaction Set Control <br> Number | AN | 4-9 | R |  |  |  | 999 | \|K502: 7 "Missing or Invalid Transaction Set Control Number". | ST02 must be present. |  |
| ST02 |  |  |  |  |  |  |  | 999 | IK502: 7 "Missing or Invalid Transaction Set Control Number". | ST02 must be 4-9 characters. |  |
| ST02 |  |  |  |  |  |  |  | 999 | IK502: 7 "Missing or Invalid Transaction Set Control Number". | ST02 must contain at least four non-space characters. |  |
| ST02 |  |  |  |  |  |  |  | 999 | IK502: 7 "Missing or Invalid Transaction Set Control Number". | ST02 must be populated with accepted AN characters. |  |
| ST02 |  |  |  |  |  |  |  | 999 | IK502: 23 "Transaction Set Control Number Not Unique within the Functional Group". | ST02 must be a unique number within the ISA-IEA envelope. |  |
| ST03 | Version, Release, or Industry Identifier | AN | 1-35 | R |  |  | 005010x223 | 999 | \|K502: 16 "Implementation Convention Not Supported". | ST03 must be present. |  |
| ST03 |  |  |  |  |  |  |  | 999 | \|K502: 16 "Implementation Convention Not Supported". | ST03 must be "005010X223A1". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| BHT | BEGINNING OF HIERARCHICAL TRANSACTION |  | 1 | R | - | 1 |  | 999 | IK304 = 3: "Required Segment Missing" | BHT must be present. |  |
| BHT |  |  |  |  |  |  |  |  | IK304 = 5: "Segment Exceeds Maximum Use" | Only iteration of BHT is allowed. |  |
| BHT01 | Hierarchical Structure Code | ID | 4-4 | R |  |  | 0019 | 999 | IK403 = 1: "Required Data Element Missing" | BHT01 must be present. |  |
| BHT01 |  |  |  |  |  |  |  | 999 | IK 403 = 7: "Invalid Code Value" | BHT01 must be "019". |  |
| BHT02 | Transaction Set Purpose Code | ID | 2-2 | R |  |  | 00, 18 | 999 | IK403 = 1: "Required Data Element Missing" | BHT02 must be present. |  |
| BHT02 |  |  |  |  |  |  |  | 999 | IK 403 = 7: "Invalid Code Value" | BHT02 must be valid values. |  |
| внто3 | $\begin{gathered} \hline \text { Originator Application } \\ \text { Transaction ID } \\ \hline \end{gathered}$ | AN | 1-30 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | BHT03 must be present. |  |
| ВНто3 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | BHT03 must be 1-30 characters. |  |
| BHT03 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | BHT03 must contain at least one non-space character. |  |
| внтоз |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | BHTO3 must be populated with accepted AN |  |
| BHT04 | $\underset{\text { Transaction Set Creation }}{\text { Date }}$ | DT | 8-8 | R |  |  | CCYYMMDD | 999 | 1K403 = 1: "Required Data Element Missing" | BHT04 must be present. |  |
| в ${ }^{\text {¢ }}$ O4 |  |  |  |  |  |  |  | 999 | IK403 = 8: "Invalid Date" | BHTO4 must be a valid date in CCYYMMDD format. |  |
| BHT04 |  |  |  |  |  |  |  | 277 | CSC 510: "Future date" | BHT04 must not be a future date. |  |
| BHT05 | Transaction Set Creation Time | TM | 4-8 | R |  |  | HHMM, <br> HHMMMSSSDD <br> HHMMSD, | 999 | IK403 = 1: "Required Data Element Missing" | BHT05 must be present. |  |
| Внт05 |  |  |  |  |  |  |  |  | 1K403 = 9: "Invalid Time" | BHT05 must be a valid time in a valid time format. |  |
| BHT06 | Claim or Encounter ID | ID | 2-2 | R |  |  | 31, CH, RP | 999 | IK403 = 1: "Required Data Element Missing" | BHT06 must be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| BHT06 |  |  |  |  |  |  |  | 277 | CSC 538: "Claim or Encounter Identifier" | BHT06 must be"CH". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | SUBMITtER NAME |  | 1 | R | 1000A | 1 |  | 999 | IK 304 = 3: "Required Segment Missing" | 1000A.NM1 must be present. |  |
| NM1 |  |  |  |  |  |  |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 1000A.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 41 | 999 | IK403 = 1: "Required Data Element Missing" | 1000A.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 1000A.NM101 must be "41". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | IK403 = 1: "Required Data Element Missing" | 1000A.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | IK403 = 7: "IIvalid Code Value" | 1000A.NM102 must be valid values. |  |
| NM103 | Submitter Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 1000A.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 1000A.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM103 must contain at least one non-space character. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM103 must be populated with accepted AN characters. |  |
| NM104 | Submitter First Name | AN | 1-35 | s |  |  |  | 999 | \|K403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 1000A.NM102 is "2", 1000A.NM104 must not be present. |  |
| NM104 |  |  |  |  |  |  |  | 277 | CSC 505: "Entity's First Name" | If 1000A.NM102 is "1", 1000A.NM104 must be present. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 1000A.NM104 must be 1-35 characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM104 must contain at least one non-space character. |  |
| NM104 |  |  |  |  |  |  |  | 999 | \|K403 = 6: "IIvalid Character in Data Element" | 1000A.NM104 must be populated with accepted AN characters. |  |
| NM105 | Submitter Middle Name | AN | 1-25 | s |  |  |  | 999 | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 1000A.NM102 is "2", 1000A.NM105 must not be present. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 1000A.NM105 must be 1-25 characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM105 must contain at least one non-space |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM105 must be populated with accepted AN characters. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 1000A.NM106 must not be present. |  |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 1000A.NM107 must not be present. |  |
| NM108 | $\begin{gathered} \hline \text { Identification Code } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 1-2 | R |  |  | 46 | 999 | IK403 = 1: "Required Data Element Missing" | 1000A.NM108 must be present. |  |
| NM108 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 1000A.NM108 must be "46". |  |
| NM109 | Submitter Identifier | AN | 2-80 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 1000A.NM109 must be present. |  |
| NM109 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 1000A.NM109 must be 2-80 characters. |  |
| NM109 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM109 must contain at least two non-space characters. |  |


| Element IDENTIFIER | Description | ID | Min. <br> Max. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 1000 A .NM109 must be populated with accepted AN characters. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 24: "Entity not approved as an electronic submitter" | 1000A.NM109 must be an approved electronic submitter. | 03/27: Unless NM109 points to an external code source, FISS will edit as it does today. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 1000A.NM110 must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 1000A.NM111 must not be present. |  |
| NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Flement Present" | 1000A.NM112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| PER | SUBMITTER EDI CONTACTINFORMATION |  | 2 | R | 1000A |  |  | 999 | IK304 = 3: "Required Segment Missing" | 1000A.PER must be present. |  |
| PER |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 1000A.PER are allowed. |  |
| PER01 | Contact Function Code | ID | 2-2 | R |  |  | IC | 999 | IK403 = 1: "Required Data Element Missing" | 1000A.PER01 must be present. |  |
| PER01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 1000A.PER01 must be "IC". |  |
| PER02 | Submitter Contact Name | AN | 1-60 | s |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | For the 1st 1000A.PER transmitted, 1000A.PER02 must not $=1000 \mathrm{~A} . \mathrm{NM} 103$. |  |
| PER02 |  |  |  |  |  |  |  | 999 | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | For the 2nd 1000A.PER transmitted, 1000A.PER02 must not be present. |  |
| PER02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 1000A.PER02 must be 1-60 characters. |  |
| PER02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 1000A.PER02 must contain at least one non-space |  |
| PER02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 1000A.PER02 must be populated with accepted AN |  |
| PER03 | Communication Number Qualifier | ID | 2-2 | R |  |  | EM, FX. TE | 999 | IK403 = 1: "Required Data Element Missing" | 1000A.PER03 must be present. |  |
| PER03 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 1000A.PER03 must be valid values. |  |
| PER04 | Communication Number | AN | 1-256 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 1000A.PER04 must be present. |  |
| PER04 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 1000A.PER04 must be 1-256 characters. |  |
| PER04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER04 must contain at least one non-space character. |  |
| PER04 |  |  |  |  |  |  |  | 999 | 1K403 = 6: "Invalid Character in Data Element" | 1000A.PER04 must be populated with accepted AN characters. |  |
| PER05 | $\begin{gathered} \text { Communication Number } \\ \text { Qualifier } \end{gathered}$ | ID | 2-2 | s |  |  | Em, EX, FX, TE | 999 | 1K403 = 7: "Invalid Code Value" | 1000A.PER05 must be valid values. |  |
| PER05 |  |  |  |  |  |  |  | 999 | 1 1403 = 7: "Invalid Code Value" | If 1000A.PER05 is "EX", 1000A.PER03 must be "TE". |  |
| PER06 | Communication Number | AN | 1-256 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 1000A.PER06 is present, 1000A.PER05 must be present. |  |
| PER06 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 1000A.PER06 must be 1-256 characters. |  |
| PER06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER06 must contain at least one non-space |  |
| PER06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER06 must be populated with accepted AN characters. |  |
| PER07 | Communication Number Qualifier | ID | 2-2 | s |  |  | EM, EX, FX, TE | 999 | IK403 = 10: "Exclusion Condition Violated" | If 1000A.PER05 is present, 1000A.PER07 may be present. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PER07 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 1000A.PER07 must be valid values. |  |
| PER07 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | If 1000A.PER07 is "EX", 1000A.PER05 must be "TE". |  |
| PER08 | Communication Number | AN | 1-256 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 1000A.PER08 is present, 1000A.PER07 must be present. |  |
| PER08 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 1000A.PER08 must be 1-256 characters. |  |
| PER08 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER08 must contain at least one non-space character. |  |
| PER08 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER08 must be populated with accepted AN characters. |  |
| PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 1000A.PER09 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | RECEIVER NAME |  | 1 | R | 1000B | 1 |  | 999 | 1K304 = 3: "Required Segment Missing" | 1000B.NM1 must be present. |  |
| NM1 |  |  |  |  |  |  |  | 999 | 1K304=4: "Loop Occurs Over | Only one iteration of 1000B.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 40 | 999 | IK403 = 1: "Required Data Element Missing" | 1000B.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 1000B.NM101 must be "40". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | IK403 = 1: "Required Data Element Missing" | 1000B.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 1000B.NM102 must be "2". |  |
| NM103 | Receiver Name | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 1000B.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 1000B. NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000B.NM103 must be popoulated with accepted AN characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 1000B.NM103 must contain at least one non-space character |  |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | 46 | 999 | IK403 = 1: "Required Data Element Missing" | 1000B.NM108 must be present. |  |
| NM108 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 1000B.NM108 must be "46". |  |
| NM109 | Receiver Primary Identifier | AN | 2-80 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 1000B.NM109 must be present. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 26: "Entity not found" | 1000B.NM109 must be a valid contractor number. |  |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Rea } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HL Loop | BILLING PROVIDER Loop |  |  |  | 2000A | >1 |  |  |  |  |  |
| HL | BILLING/PAY-TO PROVIDER HIERARCHICAL LEVEL |  | 1 | R | 2000A | 1 |  | 999 | IK304 = 3: "Required Segment Missing" | 2000A.HL must be present. |  |
| HL |  |  |  |  |  |  |  | 999 | 1K304 = 4: "Loop Occurs Over | Only one iteration of 2000A.HL is allowed. |  |
| HL01 | Hierarchical ID Number | AN | 1-12 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2000A. HL01 must be present. |  |
| HL01 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2000A.HLO1 must be 1-12 characters. |  |
| HL01 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2000A.HL01 must be numeric value. |  |
| HL01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | The first HL01 must be "1". |  |
| HL02 | Hierarchical Parent ID Number | AN | 1-12 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| HL03 | Hierarchical Level Code | ID | 1-2 | R |  |  | 20 | 999 | IK403 = 1: "Required Data Element Missing" | 2000A. HLO3 must be present. |  |
| HL03 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2000A.HL03 must be "20". |  |
| HL04 | Hierarchical Child Code | ID | 1-1 | R |  |  | 1 | 999 | \|K403 = 1: "Required Data Element Missing" | 2000A.HL04 must be present. |  |
| HL04 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2000A.HL04 must be "1". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| PRV | BILLING/PAY-TO PROVIDER SPECIALTY INFORMATION |  | 1 | s | 2000A |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000A.PRV is allowed. |  |
| PRV01 | Provider Code | ID | 1-3 | R |  |  | BI | 999 | IK403 = 1: "Required Data Element Missing" | 2000A PRV01 must be present. |  |
| PRV01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2000A.PRV01 must be "BI". |  |
| PRV02 | $\begin{gathered} \hline \begin{array}{c} \text { Reference Identification } \\ \text { Qualifier } \end{array} \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | PXC | 999 | IK403 = 1: "Required Data Element Missing" | 2000B.PRV02 must be present. |  |
| PRV02 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2000B.PRV02 must be "PXC". |  |
| PRV03 | Provider Taxonomy Code | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2000B.PRV03 must be present. |  |
| PRV03 |  |  |  |  |  |  |  | 277 | CSC 145: "Entity's specialty/taxonomy code" | 2000B.PRV03 Must be a valid Provider Taxonomy Code. | Valid Provider Taxonomy Code reference must be available for this edit. |
| PRV04 | State or Province Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| PRV05 | PROVIDER SPECIALTY information |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| PRV06 | Provider Organization Code | ID | 3-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| CUR | FOREIGN CURRENCY INFORMATION |  | 1 | s | 2000A |  |  | 277 | CSC 681: "Claim Currency Not Supported" | 2000A.CUR must not be present. | Medicare does not support submisssion of foreign currency. 01/20: Companion Guide Note needed. |
|  |  |  |  |  |  |  |  |  |  |  |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM1 | Billing Provider Name |  | 1 | R | 2010AA | 1 |  | 999 | IK304 = 3: "Required Segment Missing" | 2010AA.NM1 must be present. |  |
| NM1 |  |  |  |  |  |  |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2010AA.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 85 | 999 | IK403 = 1: "Required Data Element Missing" | 2010AA.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2010AA.NM101 must be "85". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | IK403 = 1: "Required Data Element Missing" | 2010AA.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2010AA.NM102 must be "2". |  |
| NM103 | Billing Provider Last or Organizational Name | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2010AA.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2010AA.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM103 must be populated with accepted AN characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM103 must contain at least one non-space character. |  |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | xx | 999 | IK403 = 2: "Conditional Required Data Element Missing" | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only <br> 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 999 | IK403 = 19: "Implementation Dependent Data Element Missing" | 2010AA.NM108 must be present. | Everyone butTrailblazer. <br> 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2010AA.NM108 must be "XX". |  |
| NM109 | Billing Provider Identifier | AN | 2-80 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AA.NM108 is present, 2010AA.NM109 must be present. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2010AA.NM109 must be valid according to the NPI algorithm. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | The first position of 2010AA.NM109 must be a "1". |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2010AA.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | Valid NPI Crosswalk must be available for this edit. |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 496: "Submitter not approved for electronic claim submissions on behalf of this entity" | 2010AA.NM109 billing provider must be "associated" to the submitter (from a trading partner management perspective) in 1000A.NM109. |  |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| NM112 | $\begin{array}{c}\text { Name Last or Organization } \\ \text { Name }\end{array}$ | AN | 1-60 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N3 | BILLING PROVIDER ADDRESS |  | 1 | R | 2010AA |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2010AA.N3 must be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & \text { 999/ } \\ & \text { 277CA } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N3 |  |  |  |  |  |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AA.N3 is allowed. |  |
| N301 | $\underset{\substack{\text { Billing Provider Address } \\ \text { Line }}}{ }$ | AN | 1-55 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2010AA.N301 must be present. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2010AA.N301 must be 1-55 characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N301 must be populated with accepted AN characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N301 must contain at least one non-space character. |  |
| N301 |  |  |  |  |  |  |  | 277 | CSC 503: "Entity's Street Address" | 2010AA.N301 must not contain the following exact phrases (not case sensitive): "Post Office Box", "P.O Box", "PO Box", "Lock Box", "Lock Bin". | N301 must be a street address, not a post office box or lock box. |
| N302 | Billing Provider Address Line | AN | 1-55 | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2010AA.N301 is present, then 2010AA.N302 may be present. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2010AA.N302 must be 1-55 characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N302 must be populated with accepted AN characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N302 must contain at least one non-space character. |  |
| N302 |  |  |  |  |  |  |  | 277 | CSC 503: "Entity's Street Address" | 2010AA.N302 must not contain the following exact phrases (not case sensitive): "Post Office Box", "P.O Box", "PO Box", "Lock Box", "Lock Bin". | N302 must be a street address, not a post office box or lock box. |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N4 | BILLING PROVIDER CITYISTATEIZIP CODE |  | 1 | R | 2010AA |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2010AA.N4 must be present. |  |
| N4 |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AA.N4 is allowed. |  |
| N401 | Billing Provider City Name | AN | 2-30 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2010AA.N401 must be present. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2010AA.N401 must be 2-30 characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N401 must be populated with accepted AN characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N401 must contain at least two non-space characters. |  |
| N402 | Billing Provider State or Province Code | ID | 2-2 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AA.N404 is not present, 2010AA.N402 must be present. |  |
| N402 |  |  |  |  |  |  |  | 277 | CSC = 501: "Entity's State/Province" | If 2010AA.N404 is not present, 2010AB.N402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| N403 | Billing Provider Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | IK403 = 2 "Conditional Required Data Element Missing" | If 2010AA.N404 is not present, 2010AA.N403 must be present. |  |
| N403 |  |  |  |  |  |  |  | 277 | CSC = 500: "Entit's Postal/Zip Code" | If $2010 \mathrm{AA} . \mathrm{N} 404$ is not present, 2020AA.N403 must be a valid 9 digit Zip Code. | Valid Zip Code reference must be available for this edit. |
| N404 | Country Code | ID | 2-3 | s |  |  |  | 277 | CSC = 680: "Entity's Country" | 2010AA.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) |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |


| Element IDENTIFIER | Description | ID | ${ }_{\text {Min. }}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 277 | CSC 695: "Entity's Country Subdivision Code" | 2010AA.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) |
| N407 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | If 2010AA.N407 is present, then 2010AA.N404 must not = "US" or CAN". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | BILLING PROVIDER TAX IDENTIFICATION |  | 1 | R | 2010AA |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2010AA.REF must be present. |  |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AA.REF with REF01 = "EI" is allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | El | 999 | IK403 = 1: "Required Data Element Missing" | 2010AA.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2010AA.REF01 must be "El". |  |
| REF02 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Billing Provider Additional } \\ \text { Identifier } \end{array} \\ \hline \end{array}$ | AN | 1-50 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2010AA.REFO2 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 128: "Entity's tax id" | 2010AA.REF02 must be 9 digits with no punctuation. | pass through, syntax only. |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider <br> Identifier (NPI)" <br> CSC 128: "Entity's tax id" | 2010AA.REF must be associated with the provider identified in 2010AA.NM109 | Valid NPI Crosswalk must be available for this edit. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| PER | BILLING PROVIDER CONTACT INFORMATION |  | 2 | s | 2010AA |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2010AA.NM1 is present, 2010AA.PER may be present. |  |
| PER |  |  |  |  |  |  |  | 999 | 1K304 = 5: "Segment Exceeds | Only two iterations of 2010AA.PER are allowed. |  |
| PER01 | Contact Function Code | ID | 2-2 | R |  |  | IC | 999 | IK403 = 1: "Required Data Element Missing" | 2010AA.PER01 must be present. |  |
| PER01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2010AA.PER01 must be "IC". |  |
| PER02 | $\begin{array}{c}\text { Billing Provider Contact } \\ \text { Name }\end{array}$ | AN | 1-256 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | For the 1st 2010AA.PER transmitted, 2010AA.PER02 must be present. |  |
| PER02 |  |  |  |  |  |  |  | 999 | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | For the 2nd 2010AA.PER transmitted, 2010AA.PER02 must not be present. |  |
| PER02 |  |  |  |  |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | 2010AA. $\mathrm{PER02}$ must not $=1000 \mathrm{~A}$. PERO2. |  |
| PER02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2010AA.PER02 must be 1-60 characters. |  |
| PER02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER02 must be populated with accepted AN characters. |  |
| PER02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2010AA.PER02 must contain at least one non-space |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PER03 | Communication Number Qualifier | ID | 2-2 | R |  |  | EM, FX, TE | 999 | IK403 = 1: "Required Data Element Missing" | 2010AA.PER03 must be present. |  |
| PER03 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2010AA.PER03 must be valid values. |  |
| PER04 | Communication Number | AN | 1-256 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2010AA.PER04 must be present. |  |
| PER04 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2010AA.PER04 must be 1-256 characters. |  |
| PER04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER04 must contain at least one non-space character. |  |
| PER04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER04 must be populated with accepted AN characters. |  |
| PER05 | Communication Number Qualifier | ID | 2-2 | s |  |  | EM, EX, FX, TE | 999 | 1K403 = 7: "Invalid Code Value" | 2010AA.PER05 must be valid values. |  |
| PER05 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | If 2010AA.PER05 is "EX" 2010AA.PER03 must be "TE". |  |
| PER06 | Communication Number | AN | 1-256 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AA.PER05 is present 2010AA.PER06 must be present. |  |
| PER06 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2010AA.PER06 must be 1-266 characters. |  |
| PER06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER06 must contain at least one non-space character. |  |
| PER06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER06 must be populated with accepted AN |  |
| PER07 | Communication Number Qualifier | ID | 2-2 | s |  |  | EM, EX, FX, TE | 999 | 1K403 = 10: "Exclusion Condition Violated" | If 2010AA.PER05 is present, 2010AA.PER07 may be present. |  |
| PER07 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2010AA.PER07 must be valid values. |  |
| PER07 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | If 2010AA.PER07 is "EX", 2010AA.PER05 must be "TE". |  |
| PER08 | Communication Number | AN | 1-256 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AA.PER07 is present, 2010AA.PER08 must be present. |  |
| PER08 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2010AA.PER08 must be 1-256 characters. |  |
| PER08 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER08 must contain at least one non-space character. |  |
| PER08 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER08 must be populated with accepted AN characters. |  |
| PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2010AA.PER09 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | PAY TO ADDRESS NAME |  | 1 | s | 2010AB | 1 |  | 999 | 1K304 = 4: "Loop Occurs Over Maximum Times" | One iteration of 2010AB.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 87 | 999 | IK403 = 1: "Required Data Element Missing" | 2010AB.NM101 must be preset. |  |
| NM101 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2010AB.NM101 must be "87". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | IK403 = 1: "Required Data Element Missing" | 2010AB.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | IK403 7: "Invalid Code Value" | 2010AB.NM102 must be "2". |  |
| NM103 | Pay-to Provider Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Rea } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| NM108 | $\begin{gathered} \hline \text { Identification Code } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 1-2 | R |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM109 | Pay-to Provider Identifier | AN | 2-80 | R |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N3 | PAY-TO ADDRESS |  | 1 | R | 2010AB |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2010AB.NM1 is present, 2010AB.N3 must be present. |  |
| N3 |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AB.N3 is allowed. |  |
| N301 | Pay-to Address Line | AN | 1-55 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2010AB.N301 must be present. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2010AB. N301 must be 1-55 characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N301 must be populated with accepted AN characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N301 must be at least one non-space character. |  |
| N302 | Pay-to Address Line | AN | 1-55 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2010AB.N301 is present, 2010AB.N302 may be present. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2010AB. 3302 must be 1-55 characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | \|K403 = 6: "Invalid Character in Data Element" | 2010AB.N302 must be at least one non-space character. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2010AB.N302 must be populated with accepted AN characters. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N4 | PAY-TO ADDRESS CITYISTATEIZIP CODE |  | 1 | R | 2010AB |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2010AB.NM1 is present, 2010AB.N4 must be present. |  |
| N4 |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AB.N4 is allowed. |  |
| N401 | Pay-to Adress City Name | AN | 2-30 | R |  |  |  | 999 | IK 403 = 1: "Required Data Element Missing" | 2010AB.N401 must be present. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010AB.N401 must be 2-30 characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N401 must be populated with accepted AN characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N401 must contain at least two non-space characters. |  |
| N402 | Pay-to-Address State Code | ID | 2-2 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AB.N404 is not present, 2010AB.N402 must be present. |  |
| N402 |  |  |  |  |  |  |  | 277 | CSC = 501: "Entity's Stat/Province" | If 2010AB.N404 is not present, 2010AB.N402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| N403 | Pay-to Address Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AB.N404 is not present, 2010AB.N403 must be present. |  |


| Element IDENTIFIER | Description | ID | Min. <br> Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N403 |  |  |  |  |  |  |  | 277 | CSC = 500: "Entity's Postal/Zip Code" | If 2010AB.N404 is not present, 2010AB.N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| N404 | Pay-to Provider Country Code | ID | 2-3 | s |  |  |  | 277 | CSC = 680: "Entity's Country" | 2010AB.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) |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 277 | CSC 695: "Entity's Country Subdivision Code" | 2010AB.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) |
| N407 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | If 2010AB.N407 is present, then 2010AB.N404 must not = "US" or CAN". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 Loop | PAY-TO PLAN NAME Loop |  |  |  | 2010AC |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC loop must not be present. | Loop not accepted by Medicare. 11/20: Companion Guide Note needed. |
| NM1 | PAY-TO PLAN NAME |  | 1 | s | 2010AC | 1 |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.NM1 must not be present |  |
| N3 | PAY-TO PLAN ADDRESS |  | 1 | R | 2010AC |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.N3 must not be present. |  |
| N4 | PAY-TO PLAN CITYISTATEIZIP CODE |  | 1 | R | 2010AC |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.N4 must not be present. |  |
| REF | PAY-TO PLAN SECONDARY IDENTIFICATION |  | 1 | s | 2010AC |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.REF with REF01 $=\mathbf{2 U}$, FY, or NF must not be present. |  |
| REF | PAY-TO PLAN TAX IDENTIFICATION |  | 1 | R | 2010AC |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.REF with REF01 = El must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HL | SUBSCRIBER hierarchical Level |  | 1 | R | 2000B | >1 |  | 999 | IK304 = 3: "Required Segment Missing" | 2000B.HL must be present. |  |
| HL |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 20008.HL is allowed. |  |
| HL01 | Hierarchical ID Number | AN | 1-12 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2000B. HL01 must be present. |  |
| HL01 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2000B.HLO1 must be 1-12 characters. |  |
| HL01 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2000B. HL01 must be numeric. |  |
| HL01 |  |  |  |  |  |  |  | 999 | IK403 $=112:$ "Implementation Pattern Match Failure" | 2000B.HL01 must be equal the value of the previous HL01 (2000A.HL01) plus one. |  |
| HL02 | $\underset{\substack{\text { Hierarchical Parent ID } \\ \text { Number }}}{ }$ | AN | 1-12 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2000B. HL02 must be present. |  |
| HL02 |  |  |  |  |  |  |  | 999 | IK403 = I12: "Implementation Pattern Match Failure" | 2000B.HLO2 must be equal the value of the HLO1 (2000A.HL01) of the parent HL. |  |
| HL03 | Hierarchical Level Code | ID | 1-2 | R |  |  | 22 | 999 | IK403 = 1: "Required Data Element Missing" | 2000B. HLO3 must be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HL03 |  |  |  |  |  |  |  | 999 | \|1403 = 7: "Invalid Code Value" | 2000B.HL03 must be "22". |  |
| HL04 | Hierarchical Child Code | ID | 1-1 | R |  |  | 0,1 | 999 | IK403 = 1: "Required Data Element Missing" | 2000B. HL04 must be present. |  |
| HL04 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2000B.HL04 must be "0". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| SBR | $\begin{aligned} & \text { SUBSCRIBER } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  | 1 | R | 2000B |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2000B.SBR must be present. |  |
| SBR |  |  |  |  |  |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000B.SBR is allowed. |  |
| SBR01 | Payer Responsibility Sequence Number Code | ID | 1-1 | R |  |  | $\underset{U}{A, B, C, D, E, F, G, H, P, S, T,}$ | 999 | \|K403 = 1: "Required Data Element Missing" | 2000B.SBR01 must be present. |  |
| SBR01 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2000B.SBR01 must be valid values. |  |
| SBR01 |  |  |  |  |  |  |  | 277 | CSC 286: "Other payer's Explanation of Benefits/payment information" | If 2000B.SBR01 = "S" there must be at least one 2320.SBR01 with a value equal to "P". |  |
| SBR01 |  |  |  |  |  |  |  | 277 | TBD03: "Payer specific restriction on compliant qualifiers" | 2000B.SBR01 must be "S" or "P". |  |
| SBR02 | Individual Relationship Code | ID | 2-2 | s |  |  | 18 | 999 | IK403 = 1: "Required Data Element Missing" | 2000B.SBRO2 must be present. | Companion Guide Note needed. |
| SBR02 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2000B.SBR02 must be "18". |  |
| SBR03 | Insured Group or Policy Number | AN | 1-50 | s |  |  |  | 999 | 1 K 403 = 5: "Data Element Too Long" | 2000B.SER03 must be $1-50$ characters. |  |
| SBR03 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2000B.SBR03 must be populated with accepted AN characters. |  |
| SBR03 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2000B.SBR03 must contain at least one non-space character |  |
| SBR04 | Insured Group Name | AN | 1-60 | s |  |  |  | 999 | 1K403 = 10: "Exclusion Condition Violated" | If 2000B.SBR04 is present, 2000B.SBR03 must not be present. |  |
| SBR04 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2000B.SBR04 must be 1-60 characters. |  |
| SBR04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2000B.SBR04 must be populated with accepted AN |  |
| SBR04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2000B.SBR04 must contain at least one non-space character. |  |
| SBR05 | Insurance Type Code | ID | 1-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2000B.SBR05 must not be present. |  |
| SBR06 | Coordination of Benefits Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2000B.SBR06 must not be present. |  |
| SBR07 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2000B.SBR07 must not be present. |  |
| SBR08 | Employment Status Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2000B.SBR08 must not be present. |  |
| SBR09 | Claim Filing Indicator Code | ID | 1-2 | s |  |  | 11, 12, 13, 14, 15, 16, 17, AM, <br> $\mathrm{BL}, \mathrm{CH}, \mathrm{CI}, \mathrm{DS}, \mathrm{FI}, \mathrm{HM}, \mathrm{LM}$, MA, MB, MC, OF, TV, VA, WC, ZZ | 277 | TBD03: "Payer specific restriction on compliant qualifiers" | 2000B.SBR09 must be "MA". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Rea } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/1 } \\ 999 / \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM1 | SUBSCRIBER NAME |  | 1 | R | 2010BA | 1 |  | 999 | 1K304 = 3: "Required Segment Missing" | 2010BA.NM1 must be present. |  |
| NM1 |  |  |  |  |  |  |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2010BA.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | IL | 999 | IK403 = 1: "Required Data Element Missing" | 2010BA.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2010BA.NM101 must be "LL". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | IK403 = 1: "Required Data Element Missing" | 2010BA.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 277 | TBD03: "Payer specific restriction on | 2010BA.NM102 must be "1". |  |
| NM103 | Subscriber Last Name | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2010BA.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | \|K403 = 5: "Data Element Too Long" | 20108A.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM103 must contain at least one non-space |  |
| NM103 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010BA.NM103 must be populated with accepted AN characters. |  |
| NM104 | Subscriber First Name | AN | 1-35 | s |  |  |  | 277 | CSC 505: "Entity's First Name" | 2010BA.NM104 must be present. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2010BA.NM104 must be 1-35 characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM104 must contain at least one non-space character. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM104 must be populated with accepted AN characters. |  |
| NM105 | Subscriber Middle Name | AN | 1-25 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2010BA.NM105 must be 1-25 characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM105 must contain at least one non-space |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM105 must be populated with accepted AN characters. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2010BA.NM106 must not be present. |  |
| NM107 | Subscriber Name Suffix | AN | 1-10 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2010BA.NM107 must be 1-10 characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM107 must contain at least one non-space |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2010BA.NM107 must be populated with accepted AN characters. |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | s |  |  | II, MI | 277 | TBD01: "Situational segment/element required for adjudication." | 2010BA.NM108 must be present. |  |
| NM108 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2010BA.NM108 must be "MII". |  |
| NM109 | Subscriber Primary Identifier | AN | 2-80 | s |  |  |  | 999 | TBD01: "Situational segment/element required for adjudication." | 2010BA.NM109 must be present. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 164: "Entity's contract/member number" | 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. | 01/20: Companion Guide Note needed. |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 164: "Entity's contract/member number" | NM109 must be 7-12 positions in the format of ANNNNNN or AANNNNNN or AANNNNNNNNN or AAANNNNNN or AAANNNNNNNNN where "A" represents an alpha character and " N " represents a numeric digit. | 01/20: Companion Guide Note needed. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2010BA.NM110 must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2010BA.NM111 must not be present. |  |
| NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Flement Present" | 2010BA.NM112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N3 | SUBSCRIBER ADDRESS |  | 1 | s | 2010BA |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.N3 is allowed. |  |
| N301 | Subscriber Address Line | AN | 1-55 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2010BA.N301 must be present. |  |
| N301 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2010BA.N301 must be 1-55 characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" Element" | 2010BA.N301 must be populated with accepted AN characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010BA.N301 must contain at least one non-space character |  |
| N302 | Subscriber Address Line | AN | 1-55 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data | If 2010BA.N302 is present, 2010BA.N301 must be present. |  |
| N302 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2010BA.N302 must be 1-55 characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N302 must be populated with accepted AN characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N302 must contain at least one non-space character. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N4 | SUBSCRIBER CITYISTATEIZIP CODE |  | 1 | R | 2010BA |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2010BA.N4 must be present. |  |
| N4 |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.N4 is allowed. |  |
| N401 | Subscriber City Name | AN | 2-30 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2010BA.N401 must be present. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010BA. N401 must be 2-30 characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N401 must be populated with accepted AN characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N401 must contain at least two non-space characters. |  |
| N402 | Subscriber State Code | ID | 2-2 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If 2010BA.N404 is not present, 2010BA.N402 must be present. |  |
| N402 |  |  |  |  |  |  |  | 277 | CSC = 501: "Entity's State/Province" | 2010BA.N402 must be a valid state or province code. | Valid State Code reference must be available for this edit. |
| N403 | $\begin{array}{\|c\|} \hline \text { Subscriber Postal Zone or } \\ \text { ZIP Code } \\ \hline \end{array}$ | ID | 3-15 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If 2010BA.N404 is not present, 2010BA.N403 must be present. |  |
| N403 |  |  |  |  |  |  |  | 277 | CSC = 500: "Entity's Posta/ZIip Code" | If 2010BA.N404 is not present, 2010BA.N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N404 | Subscriber Country Code | ID | 2-3 | s |  |  |  | 277 | CSC = 680: "Entity's Country" | 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) |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2010BA.N405 must not be present. |  |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 277 | CSC 695: "Entity's 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) |
| N407 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | If 2010BA.N407 is present, then 2010BA.N404 must not $=$ "US" or CAN" not = "US" or CAN". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| DMG | SUBSCRIBER DEMOGRAPHIC INFORMATION |  | 1 | s | 2010BA |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | 2010BA.DMG must be present. |  |
| DMG |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.DMG is allowed. |  |
| DMG01 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | \|K403 = 1: "Required Data Element Missing" Missing" | 2010BA.DMG01 must be present. |  |
| DMG01 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2010BA.DMG01 must be "D8". |  |
| DMG02 | Subscriber Birth Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | IK403 = 1: "Required Data Element Missing" | 2010BA.DMG02 must be present. |  |
| DMG02 |  |  |  |  |  |  |  | 999 | IK403 = 8: "Invalid Date" | 2010BA.DMG02 must be a valid date in CCYYMMDD format. |  |
|  |  |  |  |  |  |  |  | 277 | CSC 510: "Future date" <br> CSC 158: "Entity's date of birth" | 2010BA.DMG02 must not be a future date. | 01/20: Companion Guide Note needed. |
| DMG03 | Subscriber Gender Code | ID | 1-1 | R |  |  | F, M, U | 999 | 1K403 = 1: "Required Data Element | 2010BA.DMG03 must be present. |  |
| DMG03 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2010BA.DMG03 must be valid values. |  |
| DMG04 | Marital Status Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| DMG05 | Race or Ethnicity Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
| DMG06 | Citizenship Status Code | ID | 1-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| DMG07 | Country Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
| DMG08 | Basis of Verification Code | ID | 1-2 | N/U |  |  |  | 999 | IK403 - 110: "Implementation "Not | Must not be present. |  |
| DMG09 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
| DMG10 | Code List Qualifier Code | ID | 1-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| DMG11 | Industry Code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | SUBSCRIBER SECONDARY IDENTIFICATION |  | 1 | s | 2010BA |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010BA.REF with REF01 = "SY" must not be present. present. | Medicare doesn't support this segment. <br> Companion Guide Note needed. |
|  |  |  |  |  |  |  |  |  |  |  |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF | PROPERTY AND CASUALTY CLAIM NUMBER |  | 1 | s | 2010BA |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.REF with REF01 = "Y4" is allowed. | pass-through |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | Y4 | 999 | 1K403 = 1: "Required Data Element Missing" | 20108A.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2010BA.REF01 must be "Y4". |  |
| REF02 | Property Casualty Claim Number | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2010BA.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2010BA.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.REF02 must contain at least one non-space |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BA.REF02 must be populated with accepted AN characters. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | PAYER NAME |  | 1 | R | 2010BB | 1 |  | 999 | 1K304 = 3: "Required Segment | 2010BB.NM1 must be present. |  |
| NM1 |  |  |  |  |  |  |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 20108B.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | PR | 999 | IK403 = 1: "Required Data Element Missing" | 20108B.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2010BB.NM101 must be "PR". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | IK403 = 1: "Required Data Element Missing" | 20108B,NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 20108B.NM102 must be "2". |  |
| NM103 | Payer Name | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 20108B.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 20108B.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM103 must contain at least one non-space character. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "IIvalid Character in Data Element" | 2010BB.NM103 must be populated with accepted AN characters. |  |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not | Must not be present. |  |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM108 | $\begin{gathered} \hline \text { Identification Code } \\ \text { Qualifier } \end{gathered}$ | ID | 1-2 | R |  |  | Pl, XV | 999 | IK403 = 1: "Required Data Element Missing" | 20108B.NM108 must be present. |  |
| NM108 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2010BB.NM108 must be "PI". |  |
| NM109 | Payer Identifier | AN | 2-80 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 20108B.NM109 must be present. |  |
| NM109 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010BB.NM109 must be $2-80$ characters. |  |
| NM109 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM109 must contain at least two non-space characters. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010BB.NM109 must be populated with accepted AN characters. |  |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N3 | PAYER ADDRESS |  | 1 | s | 2010BB |  |  | 999 | 1K304 = 5: "Segment Exceeds | Only one iteration of 20108B.N3 is allowed. |  |
| N301 | Payer Address Line | AN | 1-55 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2010BB.N301 must be present. |  |
| N301 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 20108B..N301 must be 1-55 characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010BB.N301 must be populated with accepted AN characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N301 must contain at least one non-space character. |  |
| N302 | Payer Address Line | AN | 1-55 | s |  |  |  | 999 | \|K403 = 2: "Conditional Required Data Element Missing" | If 2010BB.N302 is present, then 2010BB.N301 must be present. |  |
| N302 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2010BB. N302 must be 1-55 characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2010BB.N302 must be populated with accepted AN characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2010BB.N302 must contain at least one non-space character. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N4 | PAYER CITYISTATEIZIP CODE |  | 1 | R | 2010BB |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2010BB.N4 must be present. |  |
| N4 |  |  |  |  |  |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BB.N4 is allowed. |  |
| N401 | Payer City Name | AN | 2-30 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2010BB.N401 must be present. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010BB.N401 must be 2-30 characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N401 must be populated with accepted AN characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 20108B.N401 Must contain at least two non-space characters. |  |
| N402 | Payer State Code | ID | 2-2 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If 2010BB.N404 is not present, 2010BB.N402 must be present. |  |
| N402 |  |  |  |  |  |  |  | 277 | CSC = 501: "Entity's State/Province" | If 2010BB.N404 is not present, 2010BB.N402 must be a valid state or province code. | Valid State Code reference must be available for this edit. |
| N403 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Payer Postal Zone or ZIP } \\ \text { Code } \end{array} \\ \hline \end{array}$ | ID | 3-15 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If 2010BB.N404 is not present, 2010BB.N403 must be present. |  |
| N403 |  |  |  |  |  |  |  | 277 | CSC = 500: "Entity's Postal/Zip Code" | If 2010BB.N404 is not present, 2010BB.N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| N404 | Payer Country Code | ID | 2-3 | s |  |  |  | 277 | CSC = 680: "Entity's Country" | 2010BB.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) |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 277 | CSC 695: "Entity's Country Subdivision Code" | 2010BB.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) |
| N407 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | If 2010BB.N407 is present, then 2010BB.N404 must |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | PAYER SECONDARY IDENTIFICATION |  | 3 | s | 2010Bb |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010BB.REF with REF01 = "2U, "El", "FY", or "NF" must not be present. | Medicare doesn't support this segment. <br> Companion Guide Note needed |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | BILLING PROVIDER SECONDARY IDENTIFICATION |  | 1 | s | 2010Bb |  |  | 999 | 1K304 = 2: "Unexpected Segment" | 2010BB.REF with REF01 = "G2" must be present when 2010AA.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BB.REF with REF01 = "G2" is allowed. | Trailblazer Only oilbo: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2010BB.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G2, LU | 999 | IK403 = 1: "Required Data Element Missing" | 2010BB.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2010BB.REF01 must be valid values. |  |
| REF02 | Payer Additional Identifier | AN | 1-50 | R |  |  |  | 999 | K 403 = 1: "Required Data Element Missing" | 2010BB.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2010BB.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BB.REF02 must contain at least one-none space character. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2010BB.REF02 must be populated with accepted AN characters. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HL | PATIENT HIERARCHICAL LEVEL |  | 1 | s | 2000C | >1 |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2000C.HL must not be present. | 01/20: Companion Guide Note needed. |
| PAT | PATIENT InFormation | ID | 1 | R | 2000C |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2000C.PAT must not be present. |  |
| NM1 | PATIENT NAME | ID | 1 | R | 2010CA | 1 |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010CA.NM1 must not be present. |  |
| N3 | Patient address |  | 1 | R | 2010CA |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010CA.N3 must not be present. |  |
| N4 | PATIENT CITYISTATEIZIP CODE |  | 1 | R | 2010CA |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010CA.N4 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DMG | PATIENT DEMOGRAPHIC INFORMATION |  | 1 | R | 2010CA |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010CA.DMG must not be present. |  |
| REF | PROPERTY AND CASUALTY CLAIM NUMBER |  | 1 | s | 2010CA |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | 2010CA.REF must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| CLM Loop | CLAIM INFORMATION Loop |  |  |  | 2300 | 100 |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only 100 iterations of the $\mathbf{2 3 0 0}$ loop are allowed. |  |
| CLM | CLAIM InFormation |  | 1 | R | 2300 | 1 |  | 999 | 1K304 = 3: "Required Segment Missing" | 2300.CLM must be present. |  |
| CLM |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2300.CLM is allowed. |  |
| CLM01 | Patient Account Number | AN | 1-38 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2300.CLM01 must be present. |  |
| CLM01 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.CLM01 must be 1-38 characters. | Companion Guide Note Needed only positions $1-20$ will be stored/returned |
| CLM01 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.CLM01 must be populated with accepted AN characters. |  |
| CLM01 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2300.CLM01 must contain at least one-non-space character. |  |
| CLM02 | Total Claim Charge Amount | R | 1-18 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2300.CLM02 must be present. |  |
| CLM02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.CLM02 must be numeric. |  |
| CLM02 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 178: "Submitted Charges" | 2300.CLM02 must be >= 0 . |  |
| CLM02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.CLM02 must be <= 99,999,999.99. |  |
| CLM02 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" CSC 178: "Submitted Charges" | 2300.CLM02 is limited to 0,1 or 2 decimal positions. |  |
| CLM02 |  |  |  |  |  |  |  | 277 | CSC 178: "Submitted Charges" | 2300.CLM02 must equal the sum of all 2400.SV203 amounts. |  |
| CLM03 | Claim Filing Indicator Code | ID | 1-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| CLM04 | $\begin{gathered} \hline \text { Non-Institutional Claim } \\ \text { Type Code } \\ \hline \end{gathered}$ | ID | 1-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CLM05 | HEALTH CARE SERVICE <br> LOCATION <br> INFORMATION |  |  | R |  |  |  |  |  |  |  |
| CLM05-1 | Facility Type Code | AN | 1-2 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2300.CLM05-1 must be present. |  |
| CLM05-1 |  |  |  |  |  |  |  | 277 | 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. |
| CLM05-2 | Facility Code Qualifier | ID | 1-2 | R |  |  | A | 999 | IK403 = 1: "Required Data Element Missing" | 2300.CLM05-2 must be present. |  |
| CLM05-2 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.CLM05-2 must be"A". |  |
| CLм05-3 | Claim Frequency Code | ID | 1-1 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2300.CLM05-3 must be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CLM05-3 |  |  |  |  |  |  |  | 277 | CSC $=228$ :"Type of bill for UB claim" | 2300.CLM05-3 must be the 3rd position of a valid Uniform Bill Type Code. | $\begin{aligned} & \text { Valid Uniform Bill Type Code } \\ & \text { reference must be available for this } \end{aligned}$ ledit |
| CLM06 | Provider or Supplier Signature Indicator | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CLM07 | Medicare Assignment Code | ID | 1-1 | R |  |  | A, B, C | 999 | IK403 = 1: "Required Data Element Missing" | 2300.CLM07 must be present. |  |
| CLM07 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.CLM07 must be valid values. |  |
| CLM08 | Benefits Assignment Certification Indicator | ID | 1-1 | R |  |  | N, W, Y | 999 | IK403 = 1: "Required Data Element Missing" | 2300.CLM08 must be present. |  |
| CLM08 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.CLM08 must be valid values. |  |
| CLM09 | Release of Information Code | ID | 1-1 | R |  |  | I, Y | 999 | IK403 = 1: "Required Data Element Missing" | 2300.CLM09 must be present. |  |
| CLM09 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.CLM09 must be valid values. |  |
| CLM10 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Patient Signature Source } \\ \text { Code } \end{array} \\ \hline \end{array}$ | ID | 1-1 | N/U |  |  | P | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CLM11 | RELATED CAUSES INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| CLM12 | Special Program Indicator | ID | 2-3 | N/U |  |  | 02, 03, 05, 09 | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CLM13 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CLM14 | Level of Service Code | ID | 1-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| CLM15 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| CLM16 | Participation Agreement | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CLM17 | Claim Status Code | ID | 1-2 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CLM18 | Yes/No Condition or Response Code | ID | 1-1 | R |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| CLM19 | Claim Submission Reason Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CLM20 | Delay Reason Code | ID | 1-2 | s |  |  | $\begin{gathered} 1,2,3,4,5,6,7,8,9,10,11 \\ 15 \end{gathered}$ | 999 | IK403 = 7: "Invalid Code Value" | 2300.CLM20 must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| DTP | DATE - DISCHARGE HOUR |  | 1 | s | 2300 |  |  | 999 | IK304 = I6: "Implementation Dependent Segment Missing" | 2300.DTP with DTP01 ="096" must be present on all final inpatient claims. |  |
| DTP |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "096" is allowed. |  |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 096 | 999 | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |  |
| DTP01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.DTP01 must be "096". |  |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | тМ | 999 | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| DTP02 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "TM". |  |
| DTP03 | Discharge Hour | AN | 1-35 | R |  |  | HHMM | 999 | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| DTP03 |  |  |  |  |  |  |  | 999 | 1K403 = 9: "Invalid Time" | 2300.DTP03 must be a valid time in HHMM format. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP | date - statement dates | ID | 1 | R | 2300 |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2300.DTP must be present. |  |
| DTP |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "434" is allowed. |  |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 434 | 999 | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |  |
| DTP01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.DTP01 must be "434". |  |
| DTP02 | $\begin{gathered} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{gathered}$ | AN | 2-3 | R |  |  | RD8 | 999 | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| DTP2 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.DTP02 must be "RD*". |  |
| DTP03 | Statement From or To Date | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| DTP03 |  |  |  |  |  |  |  | 999 | \|K403 = 8: "Invalid Date" | 2300.DTPO3 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| DTP | DATE - ADMISSION DATE/HOUR |  | 1 | s | 2300 |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | 2300.DTP with DTP01 = "435" must be present for all inpatient claims. |  |
| DTP |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "435" is allowed. |  |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 435 | 999 | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |  |
| DTP01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.DTP01 must be "435". |  |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8, DT | 999 | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| DTP02 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. DTP02 must be valid values. |  |
| DTP03 | Admission Date and Hour | AN | 1-35 | R |  |  | CCYYMMDD. CCYYMMDDHHMM | 999 | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| DTP03 |  |  |  |  |  |  |  | 999 | 1K403 = 8: "Invalid Date" | If 2300.DTP02 equals D8, then 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
| DTP03 |  |  |  |  |  |  |  | 999 | 1K403 = 8: "Invalid Date" | If 2300.DTP02 equals DT, then 2300.DTP03 must be a valid date in CCYYMMDDHHMM format. | 3/17: Companion Guide note needed - CMS prefers use of the DT code and inclusion of the time. |
| DTP03 |  |  |  |  |  |  |  | 277 | CSC 510: "Future date" <br> CSC 394: "Date(s) of most recent hospitalization related to service" | 2300. DTP03 must not be a future date. | Companion Guide note needed |
|  |  |  |  |  |  |  |  |  |  |  |  |
| DTP | DATE-REPRICER RECEIVED DATE |  | 1 | s | 2300 |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP is allowed. | pass through, syntax only. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 050 | 999 | \|K403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |  |
| DTP01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "050". |  |
| DTP02 | $\begin{gathered} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | D8 | 999 | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| DTP02 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP03 | Order Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | \|K403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| DTP03 |  |  |  |  |  |  |  | 999 | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| CL1 | INSTITUTIONAL CLAIM CODE |  | 1 | R | 2300 |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2300.CL1 must be present. |  |
| CL1 |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CL1 is allowed. |  |
| CL101 | Admission Type Code | ID | 1-1 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | 2300.CL101 must be present when 2300.CLM05-1 is "11", "12", "18", "21", "22" or "41". |  |
| CL101 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.CL101 must be 1 character. |  |
| CL101 |  |  |  |  |  |  |  | 277 | CSC = 231: "Hospital admission type" | 2300.CL101 must be a valid Admission Code. | $\begin{array}{\|l} \hline \text { Valid Admission Type Code } \\ \text { reference must be available for this } \end{array}$ edit. |
| CL102 | Admission Source Code | ID | 1-1 | s |  |  |  | 999 | IK403 = 1: "Required Data Element | 2300.CL102 must be present. |  |
| CL102 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.CL102 must be 1 character. |  |
| CL102 |  |  |  |  |  |  |  | 277 | CSC = 229: "Hospital admission source" | 2300.CL102 must be a valid Admission Code. | Valid Admission Source Code reference must be available for this edit. |
| CL103 | Patient Status Code | ID | 1-2 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2300.CL103 must be present. |  |
| CL103 |  |  |  |  |  |  |  | 277 | 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. |
| CL104 | Nursing Home Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| PWK | CLAIM SUPPLEMENTAL INFORMATION |  | 10 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of $2300 . \mathrm{PWK}$ are allowed. | pass through, syntax only. |
| 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 | IK403 = 1: "Required Data Element Missing" | 2300.PWK01 must be present. |  |
| PWK01 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.PWK01 must be valid values. |  |
| PWK02 | Attachment Transmission Code | ID | 1-2 | R |  |  | AA, BM, EL, EM, FT, FX | 999 | IK403 = 1: "Required Data Element Missing" | 2300.PWK02 must be present. |  |
| PWK02 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.PWK02 must be valid values. |  |
| PWK03 | Report Copies Needed | No | 1-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| PWK04 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| PWK05 | Identification Code Qualifier | ID | 1-2 | s |  |  | AC | 999 | IK403 = 2 "Conditional Required Data Element Missing" | When 2300.PWK05 is present, 2300.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PWK05 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \begin{array}{l} \text { IK403 = } 2 \text { "Conditional Required Data } \\ \text { Element Missing" } \end{array} \\ & \hline \end{aligned}$ | 2300.PWK05 must be "AC". |  |
| PWK06 | Attachment Control Number | AN | 2-80 | s |  |  |  | 999 | \|K403 = 2: "Conditional Required Data Element Missing" | When 2300.PWK06 is present, 2300.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |  |
| PWK06 |  |  |  |  |  |  |  | 999 | K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2300.PWK06 must be $2-50$ characters. |  |
| PWK06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.PWK06 must be populated with accepted AN characters. |  |
| PWK06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2300.PWK06 must contain at least one non-space character. |  |
| PWK07 | Description | AN | 1-80 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| PWK08 | ACTIONS INDICATED |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| PWK09 | Request Category Code | ID | 1-2 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| CN1 | CONTRACT INFORMATION | ID | 1 | s | 2300 |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300.CN1 must not be present. | IG note that CN1 is not for HIPAA claims. |
|  |  |  |  |  |  |  |  |  |  |  |  |
| AMT | PATIENT ESTIMATED AMOUNT DUE |  | 1 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.AMT is allowed. |  |
| AMT01 | Amount Qualifier Code | ID | 1-3 | R |  |  | F3 | 999 | IK403 = 1: "Required Data Element | 2300.AMT01 must be present. |  |
| AMT01 |  |  |  |  |  |  |  | 999 | 1 K 403 = 7 : "Invalid Code Value" | 2300.AMT01 must be "F3". |  |
| AMT02 | Patient Responsibility Amount | R | 1-18 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2300.AMT02 must be present. |  |
| AMT02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | AMTO2 must be numeric. |  |
| AMT02 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 183: "Amount entity has paid" | 2300.AMT02 must be $>=0$. |  |
| AMT02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.AMT02 must be <=99,999,999.99. |  |
| AMT02 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2300.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| Амто3 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | SERVICE AUTHORIZATION EXCEPTION CODE |  | 1 | s | 2300 |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .REF with REF01 $=$ " $4 \mathrm{~N} "$ is allowed. | pass through, syntax only. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 4N | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be "4N". |  |
| REF01 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300. REF01 must be valid values. |  |
| REF02 | Service Authorization Exception Code | ID | 1-50 | R |  |  | 1, 2, 3, 4, 5, 6, 7 | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. REF02 must be valid values. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Flement Present" | Must not be present. |  |


| Element IDENTIFIER | Description | ID | Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF04 | REFERENCE IDENTIFIER | AN |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | REFERRAL NUMBER |  | 1 | s | 2300 |  |  | 999 | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "9F" is allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9 F | 999 | \|K403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "9F". |  |
| REF02 | Prior Authorization or | AN | 1-50 | R |  |  |  | 999 | K 403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | 1K403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | PRIOR AUTHORIZATION |  | 1 | s | 2300 |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 . REF with REF01 = "G1" is allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G1 | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "G1". |  |
| REF02 | Prior Authorization Number | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | \|K403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters |  |
| REF02 |  |  |  |  |  |  |  | 999 | \|K403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | PAYER CLAIM CONTROL NUMBER | ID | 1 | s | 2300 |  |  | 277 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300. REF with REF01 $=$ "F8" must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | REPRICED CLAIM NUMBER |  | 1 | s | 2300 |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 $=$ "9A" is allowed. | pass through, syntax only |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9A | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | \|K403 = 7: "Invalid Code Value" | 2300.REF01 must be "9A". |  |
| REF02 | $\substack{\text { Repriced Claim Reference } \\ \text { Number }}$ | AN | 1-50 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | \|K403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| REFO3 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | ADJUSTED REPRICED CLAIM NUMBER |  | 1 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. REF with REF01 $=$ " $9 \mathrm{C} "$ is allowed. | pass through, syntax only. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9 C | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "9C". |  |
| REF02 | Adjusted Repriced Claim Reference Number | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | \|K403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | investigational DEVICE EXEMPTION NUMBER |  | 5 | s | 2300 |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | Only one iteration of 2300.REF with REF01 = "LX" is allowed. | CMS is only accepting one iteration. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | LX | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. | 03/30: Companion Guide Note needed. |
| REF01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "LX". |  |
| REF02 | Investigational Device Exemption Number | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | \|K403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | \|K403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Flement Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | CLAIM IDENTIFIER FOR TRANSMISSION INTERMEDIARIES |  | 1 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. REF with REF01 $=$ "D9" is allowed. | pass through, syntax only. |
| REF01 | $\begin{gathered} \hline \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | D9 | 999 | \|K403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "D9" |  |
| REF02 | Value Added Network Trace Number | AN | 1-50 | R |  |  |  | 999 | K 403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 543: "Clearinghouse or Value Added Network Trace" | 2300.REF02 must be 1-20 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | AUTO ACCIDENT STATE |  | 1 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. REF with REF01 = "LU" is allowed. | pass through, syntax only. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | LU | 999 | \|K403 = 1: "Required Data Element Missing" Missing" | 2300.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "LU". |  |
| REF02 | $\begin{gathered} \hline \text { Auto Accident State or } \\ \text { Province } \\ \hline \end{gathered}$ | AN | 1-50 | R |  |  |  | 277 | CSC = 501: "Entity's Stat/Province" | 2300.REF02 must be a valid State or Provience code. | Valid State Code reference must be available for this edit. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | $\begin{gathered} \hline \text { MEDICAL RECORD } \\ \text { NUMBER } \\ \hline \end{gathered}$ |  | 1 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "EA" is allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | EA | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "EA". |  |
| REF02 | Medical Record Number | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" Missing" | 2300.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | demonstration PROJECT IDENTIFIER |  | 1 | s | 2300 |  |  | 999 | IK304=5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .REF with REF01 = "P4" is allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | P4 | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "P4". |  |
| REF02 | Demonstration Project Identifier | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF | PEER REVIEW ORGANIZATION (PRO) APPROVAL NUMBER |  | 1 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .REF with REF01 = "G4" is allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G4 | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | $2300 . R$ EF01 must be "G4". |  |
| REF02 | PRO Number | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| к3 | FILE Information |  | 10 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of K3 are allowed. |  |
| K301 | Fixed Format Information | AN | 1-80 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2300.K301 must be present. |  |
| K301 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | $2300 . \mathrm{K} 301$ must be 1-80 characters. |  |
| K301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| K301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.K301 must contain at least one non-space character. |  |
| K302 | Record Format Code | ID | 1-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| K303 | COMPOSITE UNIT OF MEASURE |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NTE | CLAIM NOTE |  | 10 | s | 2300 |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of 2300.NTE are allowed. |  |
| NTE01 | Note Reference Code | ID | 3-3 | R |  |  | ALG, DCP, DGN, DME, MED, NTR, ODT, RHB, RLH, RNH, SET, SFM, SPT, UPI | 999 | IK403 = 1: "Required Data Element Missing" | 2300. $\mathrm{NTE01}$ must be present. |  |
| NTE01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.NTE01 must be valid values. |  |
| NTE02 | Claim Note Text | AN | 1-80 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2300.NTE02 must be present. |  |
| NTE02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.NTE02 must be 1-80 characters. |  |
| NTE02 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.NTE02 must be populated with accepted AN characters. |  |
| NTE02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must be at least one non-space character. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NTE | BILLING NOTE |  | 1 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.NTE is allowed. |  |
| NTE01 | Note Reference Code | ID | 3-3 | R |  |  | ADD | 999 | \|K403 = 1: "Required Data Element Missing" | 2300.NTE01 must be present. |  |
| NTE01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.NTE01 must be "ADD". |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{aligned} & \text { Usage } \\ & \text { Reg. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/1 } \\ 999 / \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NTE02 | Billing Note Text | AN | 1-80 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2300.NTE02 must be present. |  |
| NTE02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.NTE02 must be 1-80 characters. |  |
| NTE02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must be populated with accepted AN characters. |  |
| NTE02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must be at least one non-space character. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| CRC | EPSDT REFERRAL |  | 1 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CRC with CRC01 = "ZZ" is allowed. | pass through, syntax only. |
| CRC01 | Code Category | ID | 2-2 | R |  |  | zz | 999 | IK403 = 1: "Required Data Element Missing" | 2300.CRC01 must be present. |  |
| CRC01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.CRC01 must be "ZZ". |  |
| CRC02 | Certification Condition Indicator | ID | 1-1 | R |  |  | N, Y | 999 | IK403 = 1: "Required Data Element Missing" | 2300.CRC02 must be present. |  |
| CRC02 |  |  |  |  |  |  |  | 999 | \|1403 = 7: "Invalid Code Value" | 2300.CRC02 must be valid values. |  |
| CRC02 | Condition Code | ID | 2-3 | R |  |  | AV, NU, S2, ST | 999 | IK403 = 1: "Required Data Element Missing" | 2300.CRC03 must be present. |  |
| CRC03 |  |  |  |  |  |  |  | 999 | 1 K 403 = 7: "Invalid Code Value" | 2300.CRC03 must be valid values. |  |
| CRC04 | Condition Code | ID | 2-3 | s |  |  | AV, NU, S2, ST | 999 | $1 \mathrm{~K} 403=7$ : "Invalid Code Value" | $2300 . C R C 04$ must be valid values. |  |
| CRC05 | Condition Code | ID | 2-3 | s |  |  | AV, NU, S2, ST | 999 | 11403 = 7: "Invalid Code Value" | $2300 . C R C 05$ must be valid values. |  |
| CRC06 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CRC07 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HI | PRINCIPAL DIAGNOSIS |  | 1 | R | 2300 |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2300.H1 with H101-1 = "BK" must be present. | ICD-9 Only period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2300.HI with H101-1 = "BK" or "ABK" must be present. | Transition period |
| HI |  |  |  |  |  |  |  | 999 | 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. |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H101-1 = "BK" is allowed. | ICD-9 Only period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H101-1 = "BK" or "ABK" is allowed. | Transition period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 . HI with HIO1-1 = "ABK" is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABK, BK | 999 | 1K403 = 1: "Required Data Element Missing" | 2300.H101-1 must be present. |  |
| H01-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 101-1$ must be valid values. |  |
| H01-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BK". | ICD-9 Only period |
| H01-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H -101-1 must = "ABK". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H01-2 | Industry Code | AN | 1-30 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2300.H101-2 must be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H01-2 |  |  |  |  |  |  |  | 277 | CSC 254: "Primary diagnosis code" | If 2300.HIO1-1 is "BK" then $2300 . \mathrm{HIO1}-2$ must be a valid ICD-9-CM Principal Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit. |
| H01-2 |  |  |  |  |  |  |  | 277 | CSC 254: "Primary diagnosis code" | If 2300. HIO1-1 is "ABK" then 2300. H01-2 must be a valid ICD-10-CM Principal Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| H101-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H01-2 must not contain a ".". |  |
| H01-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-3 must not be present. |  |
| H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-4 must not be present. |  |
| H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-5 must not be present. |  |
| H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-7 must not be present. |  |
| H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H101-8 must not be present. |  |
| H01-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H101-9 must be valid values. |  |
| H102 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H H22 must not be present. |  |
| H103 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300. H103 must not be present. |  |
| H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H104 must not be present. |  |
| H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H . 05 must not be present. |  |
| H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H106 must not be present. |  |
| H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. HI07 must not be present. |  |
| H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H 108 must not be present. |  |
| H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109 must not be present. |  |
| H110 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110 must not be present. |  |
| H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111 must not be present. |  |
| H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HI | ADMITTING DIAGNOSIS |  | 1 | R | 2300 |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | 2300.HI with HI01-1 = "BJ" must be included on inpatient admission claims. | ICD-9 Only period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = I6: "Implementation Dependent Segment Missing" | 2300.HI with H101-1 = "BJ" or "ABJ" must be included on inpatient admission claims. | Transition period |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA111 } \\ 999 / \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | 2300.HI with H101-1 = "ABJ" must be included on inpatient admission claims. | CD-10 Only period - assumes no dual-use after mandated date. |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300. HI with HIO1-1 = "BJ" cannot be included on non-inpatient admission claims. |  |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.HI with H101-1 = "BJ" is allowed. | ICD-9 Only period |
| HI |  |  |  |  |  |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H01-1 = "BJ" or "ABJ" is allowed. | Transition period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H101-1 = "ABJ" is allowed. | CD-10 Only period - assumes no dual-use after mandated date. |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABJ, BJ | 999 | IK403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| H01-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 101-1$ must = "BJ". | ICD-9 Only period |
| H01-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must = "ABJ". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H01-2 | Admitting Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | CSC = 232: "Admitting Diagnosis" | If $2300 . \mathrm{HIO1}-1$ is "BJ" then $2300 . \mathrm{HIO1}-2$ must be a valid ICD-9-CM Admitting Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Admitting Diagnosis Code reference must be available for this edit. |
| H01-2 |  |  |  |  |  |  |  | 277 | CSC = 232: "Admitting Diagnosis" | If 2300.HIO1-1 is "ABJ" then 2300.HIO1-2 must be a valid ICD-10-CM Admitting Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Admitting Diagnosis Code reference must be available for this edit. |
| H01-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H01-2 must not contain a ".". |  |
| H01-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-3 must not be present. |  |
| H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-4 must not be present. |  |
| H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-5 must not be present. |  |
| H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H101-7 must not be present. |  |
| H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H101-9 must not be present. |  |
| H102 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H02 must not be present. |  |
| H103 | health Care code information |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103 must not be present. |  |
| H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104 must not be present. |  |
| H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H105 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & \text { 999/ } \\ & \text { 277CA } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106 must not be present. |  |
| H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107 must not be present. |  |
| H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H108 must not be present. |  |
| H09 | HEALTH CARE CODE |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109 must not be present. |  |
| H110 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110 must not be present. |  |
| H111 | HEALTH CARE CODE |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111 must not be present. |  |
| H112 | HEALTH CARE CODE |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300. H112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HI | PATIENT REASON FOR VISIT |  | 1 | s | 2300 |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | 2300.HI with HIO1-1 = "PR" must be included on outpatient visit claims. | ICD-9 Only period Companion Guide Note needed. |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | 2300.HI with H101-1 = "PR" or "APR" must be included on outpatient visit claims. | Transition period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | 2300. Hl with HI01-1 = "APR" must be included on outpatient visit claims. | ICD-10 Only period - assumes no dual-use after mandated date. |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300. HI with H101-1 = "PR" or "APR" cannot be included on non-outpatient visit claims. |  |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H101-1 = "PR" is ald allowed. | ICD-9 Only period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with HI01-1 = "PR" or "APR" is allowed. | Transition period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .HI with H101-1 = "APR" is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | APR, PR | 999 | IK403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| H01-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 101-1$ must = "PR". | ICD-9 Only period |
| H01-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.H01-1 must = "APR". | ICD-10 Only period - assumes no dual-use after mandated date. |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H01-2 | Patient Reason For Visit | AN | 1-30 | R |  |  |  | 277 | CSC = 673: "Patient reason for visit" | If 2300.HIO1-1 is "PR" then 2300.HIO1-2 must be a valid ICD-9-CM Patient Reason for Visit code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Patient's Reason for Visit Code reference must be available for this edit. |
| H01-2 |  |  |  |  |  |  |  | 277 | CSC = 673: "Patient reason for visit" | If 2300.HIO1-1 is "APR" then 2300.HIO1-2 must be a valid ICD-10-CM Patient Reason for Visit code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Patient's Reason for Visit Code reference must be available for this edit. |
| H01-2 |  |  |  |  |  |  |  | 999 | 1K403 = 6: "IIvalid Character in Data Element" | 2300.H01-2 must not contain a ".". |  |
| H01-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-3 must not be present. |  |
| H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-4 must not be present. |  |
| H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-5 must not be present. |  |
| H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-6 must not be present. |  |
| H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| H01-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-9 must not be present. |  |
| H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{H} 101$ is present then 2300. HI02 may be present. |  |
| H02-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | APR, PR | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO2-1 must be valid values. |  |
| H02-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must = "PR". | ICD-9 Only period |
| H102-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must = "APR". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H102-2 | Patient Reason For Visit | AN | 1-30 | R |  |  |  | 277 | CSC = 673: "Patient reason for visit" | If 2300.HIO2-1 is "PR" then 2300.HIO2-2 must be a valid ICD-9-CM Patient Reason for Visit code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Patient's Reason for Visit Code reference must be available for this edit. |
| H102-2 |  |  |  |  |  |  |  | 277 | CSC = 673: "Patient reason for visit" | If 2300.HIO2-1 is "APR" then 2300 .HIO2-2 must be a valid ICD-10-CM Patient Reason for Visit code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Patient's Reason for Visit Code reference must be available for this edit. |
| H102-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300. H102-2 must not contain a ".". |  |
| H102-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-3 must not be present. |  |
| H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H102-4 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & \text { 9999/ } \\ & \text { 277CA } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H02-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-5 must not be present. |  |
| H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-6 must not be present. |  |
| H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-7 must not be present. |  |
| H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-8 must not be present. |  |
| H02-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H102-9 must not be present. |  |
| H03 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO} 02$ is present then $2300 . \mathrm{HIO}$ may be |  |
| H103-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | APR, PR | 999 | IK403 = 7: "Invalid Code Value" | 2300.H03-1 must be valid values. |  |
| H103-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300. HIO - 1 - must = "PR". | ICD-9 Only period |
| H03-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H I03-1 must = "APR". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H03-2 | Patient Reason For Visit | AN | 1-30 | R |  |  |  | 277 | CSC = 673: "Patient reason for visit" | If 2300.HIO3-1 is "PR" then 2300.HIO3-2 must be a valid ICD-9-CM Patient Reason for Visit code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Patient's Reason for Visit Code reference must be available for this edit. |
| H03-2 |  |  |  |  |  |  |  | 277 | CSC = 673: "Patient reason for visit" | If 2300.HIO3-1 is "APR" then 2300.HIO3-2 must be a valid ICD-10-CM Patient Reason for Visit code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Patient's Reason for Visit Code reference must be available for this edit. |
| H03-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.HIO3-2 must not contain a ".." |  |
| H03-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H103-3 must not be present. |  |
| H103-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H103-4 must not be present. |  |
| H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| H03-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H103-6 must not be present. |  |
| H03-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-7 must not be present. |  |
| H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-8 must not be present. |  |
| H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-9 must not be present. |  |
| H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H04 must not be present. |  |
| H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H05 must not be present. |  |
| H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106 must not be present. |  |
| H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107 must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H08 must not be present. |  |
| H09 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109 must not be present. |  |
| H110 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110 must not be present. |  |
| H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111 must not be present. |  |
| H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HI | EXTERNAL CAUSE OF INJURY |  | 1 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.HI with HI01-1 = "BN" is allowed. | ICD-9 Only period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H101-1 = "BN" or "ABN" is allowed. | Transition period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .HI with H101-1 = "ABN" is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| H01-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO1-1 must = "BN". | ICD-9 Only period |
| H01-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H01-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HIO1-1 is "BN" then 2300. $\mathrm{HIO1}-2$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |
| H01-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HIO1-1 is "ABN" then 2300.HIO1-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H01-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2300.H01-2 must not contain a ".". |  |
| H101-3 | $\begin{gathered} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{gathered}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H01-3 must not be present. |  |
| H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H101-4 must not be present. |  |
| H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H01-5 must not be present. |  |
| H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H101-6 must not be present. |  |
| H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| H101-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{HIO1}-9$ must be valid values. |  |
| H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | K 403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO} 1$ is present then 2300 .HIO2 may be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Rea } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H102-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must be valid values. |  |
| H102-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.H102-1 must = "BN". | ICD-9 Only period |
| H02-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H02-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H02-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HIO2-1 is "BN" then 2300.HIO2-2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |
| H02-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HIO2-1 is "ABN" then 2300.HIO2-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H02-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H102-2 must not contain a ".". |  |
| H02-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H102-3 must not be present. |  |
| H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-4 must not be present. |  |
| H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-5 must not be present. |  |
| H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-6 must not be present. |  |
| H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-7 must not be present. |  |
| H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H102-8 must not be present. |  |
| H02-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H102-9 must be valid values. |  |
| H03 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO2}$ is present then $2300 . \mathrm{HIO}$ may be present. |  |
| H103-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H03-1 must be valid values. |  |
| H03-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.HIO3-1 must = "BN". | ICD-9 Only period |
| H03-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H03-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H03-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If $2300 . \mathrm{HIO} 0-1$ is " BN " then $2300 . \mathrm{HIO3-2}$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |
| H103-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HIO3-1 is "ABN" then 2300.HIO3-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H03-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H103-2 must not contain a ".". |  |
| H003-3 | Date Time Period Format <br> Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 103-3 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H103-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 103-4$ must not be present. |  |
| H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H103-6 must not be present. |  |
| H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-7 must not be present. |  |
| H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H103-8 must not be present. |  |
| H03-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H I03-9 9 must be valid values. |  |
| H04 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 . HI 03 is present then $2300 . \mathrm{HIO4}$ may be present. |  |
| H104-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 104-1$ must be valid values. |  |
| H104-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H141-1 must = "BN". | ICD-9 Only period |
| H104-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H104-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H104-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If $2300 . \mathrm{HIO4-1}$ is "BN" then 2300 . H104-2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |
| H104-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HIO4-1 is "ABN" then 2300.HIO4-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H104-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H104-2 must not contain a ".". |  |
| H104-3 | $\begin{gathered} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{gathered}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-3 must not be present. |  |
| H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H104-4 must not be present. |  |
| H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H104-5 must not be present. |  |
| H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H104-6 must not be present. |  |
| H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-7 must not be present. |  |
| H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H104-8 must not be present. |  |
| H004-9 | Present on Admission indicator | ID | 1-1 | S |  |  | N, U, W, Y | 999 | 1 K 403 = 7: "Invalid Code Value" | 2300. H 104 -9 must be valid values. |  |
| H05 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 04$ is present then $2300 . \mathrm{HIO5}$ may be present. |  |
| H105-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{HIO5-1}$ must be valid values. |  |
| H105-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO5-1 must = "BN". | ICD-9 Only period |
| H105-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H105-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H105-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If $2300 . \mathrm{HIO} 0-1$ is " BN " then $2300 . \mathrm{HIO5-2}$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |
| H05-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HIO5-1 is "ABN" then 2300 .HIO5-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H105-2 |  |  |  |  |  |  |  | 999 | 1K403 = 6: "Invalid Character in Data Element" | 2300.H105-2 must not contain a "." |  |
| H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 105-3$ must not be present. |  |
| H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{HIO5}-4$ must not be present. |  |
| H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-5 must not be present. |  |
| H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-6 must not be present. |  |
| H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-7 must not be present. |  |
| H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300. H105-8 must not be present. |  |
| H105-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H105-9 must be valid values. |  |
| H06 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 05$ is present then $2300 . \mathrm{H} 106$ may be present. |  |
| H106-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must be valid values. |  |
| H106-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO6-1}$ must = "BN". | ICD-9 Only period |
| H06-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H - 06 -1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H106-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If $2300 . \mathrm{HIO6}-1$ is " BN " then $2300 . \mathrm{HIO6}-2$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |
| H06-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HIO6-1 is "ABN" then 2300 .HI06-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H06-2 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.H06-2 must not contain a ".". |  |
| H106-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H106-3 must not be present. |  |
| H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-4 must not be present. |  |
| H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 106-5$ must not be present. |  |
| H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-6 must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-7 must not be present. |  |
| H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H106-8 must not be present. |  |
| H106-9 | Present on Admission indicator | ID | 1-1 | s |  |  | $\mathrm{N}, \mathrm{U}, \mathrm{W}, \mathrm{Y}$ | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H106-9 must be valid values. |  |
| H07 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO6}$ is present then $2300 . \mathrm{HIO7}$ may be present. |  |
| H107-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H07-1 must be valid values. |  |
| H107-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.H107-1 must = "BN". | ICD-9 Only period |
| H107-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300. H -107-1 must = "ABN". | CD-10 Only period - assumes no dual-use after mandated date. |
| H07-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If $2300 . \mathrm{HIO7}-1$ is "BN" then $2300 . \mathrm{H} 107-2$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |
| H07-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300. HIO7-1 is "ABN" then 2300 .HIO7-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H107-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.HI07-2 must not contain a ".". |  |
| H107-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-3 must not be present. |  |
| H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H107-4 must not be present. |  |
| H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-5 must not be present. |  |
| H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H107-6 must not be present. |  |
| H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H107-7 must not be present. |  |
| H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H107-8 must not be present. |  |
| H07-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H107-9 must be valid values. |  |
| H108 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{H} 107$ is present then $2300 . \mathrm{H} 108$ may be present. |  |
| H08-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 108-1$ must be valid values. |  |
| H008-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H108-1 must = "BN". | ICD-9 Only period |
| H008-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300. H . 08 -1 must = "ABN". | CD-10 Only period - assumes no dual-use after mandated date. |
| H008-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If $2300 . \mathrm{HIO} 0-1$ is " BN " then $2300 . \mathrm{HIO}-2$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H008-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HIO8-1 is "ABN" then 2300.HIO8-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H108-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H108-2 must not contain a ".". |  |
| H108-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H108-3 must not be present. |  |
| H108-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H108-4 must not be present. |  |
| H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-5 must not be present. |  |
| H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H108-6 must not be present. |  |
| H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-7 must not be present. |  |
| H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-8 must not be present. |  |
| H08-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H I08-9 must be valid values. |  |
| H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO} 08$ is present then $2300 . \mathrm{HIO}$ may be present. |  |
| H109-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H109-1 must be valid values. |  |
| H109-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must = "BN". | ICD-9 Only period |
| H09-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H -09-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H109-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If $2300 . \mathrm{HIO9}-1$ is "BN" then 2300 .HIO9-2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |
| H109-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HIO9-1 is "ABN" then 2300.HIO9-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H109-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H109-2 must not contain a ".". |  |
| H109-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-3 must not be present. |  |
| H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-4 must not be present. |  |
| H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-5 must not be present. |  |
| H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-6 must not be present. |  |
| H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-7 must not be present. |  |
| H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-8 must not be present. |  |
| H09-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H109-9 must be valid values. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H10 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | 1K403 = 10: "Exclusion Condition Violated" | If 2300 .HI09 is present then 2300 .HI10 may be present. |  |
| H110-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | 1 K 403 = 7 : "Invalid Code Value" | 2300. H110-1 must be valid values. |  |
| H110-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 110-1$ must = "BN". | ICD-9 Only period |
| H110-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.H110-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H110-2 | External Cause of Injury | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HI10-1 is "BN" then 2300 .HIO10-2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |
| H110-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300 . $\mathrm{H} 110-1$ is "ABN" then $2300 . \mathrm{HIO1O}-2$ must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H110-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H110-2 must not contain a ".". |  |
| H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H110-3 must not be present. |  |
| H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-4 must not be present. |  |
| H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-5 must not be present. |  |
| H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-6 must not be present. |  |
| H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-7 must not be present. |  |
| H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-8 must not be present. |  |
| H110-9 | Present on Admission indicator | ID | 1-1 | s |  |  | $\mathrm{N}, \mathrm{U}, \mathrm{W}, \mathrm{Y}$ | 999 | 1 K 403 = 7 : "Invalid Code Value" | 2300.H110-9 must be valid values. |  |
| H111 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI10 is present then 2300. HI11 may be present. |  |
| H111-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | 1 K 403 = 7 : "Invalid Code Value" | 2300.H111-1 must be valid values. |  |
| H111-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must = "BN". | ICD-9 Only period |
| H111-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300. H111-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H111-2 | External Cause of Injury <br> Code | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HI11-1 is "BN" then 2300. H111-2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |
| H111-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HI11-1 is "ABN" then 2300.HI11-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H111-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data <br> Element" | 2300.H111-2 must not contain a "..". |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Reg. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 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 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-3 must not be present. |  |
| H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-4 must not be present. |  |
| H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-5 must not be present. |  |
| H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-6 must not be present. |  |
| H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-7 must not be present. |  |
| H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-8 must not be present. |  |
| H111-9 | Present on Admission indicator | ID | 1-1 | S |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-9 must be valid values. |  |
| H112 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300.H111 is present then $2300 . \mathrm{H} 12$ may be present. |  |
| H112-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | 11403 = 7: "Invalid Code Value" | 2300.H112-1 must be valid values. |  |
| H12-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must = "BN". | ICD-9 Only period |
| H112-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 122-1$ must = "ABN". | CD-10 Only period - assumes no dual-use after mandated date. |
| H112-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | CSC = 509: "E-Code" | If $2300 . \mathrm{HI} 12-1$ is "BN" then $2300 . \mathrm{H} 112-2$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit. |
| H112-2 |  |  |  |  |  |  |  | 277 | CSC = 509: "E-Code" | If 2300.HI12-1 is "ABN" then 2300.HI12-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| H112-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H112-2 must not contain a ".". |  |
| H112-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-3 must not be present. |  |
| H12-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H112-4 must not be present. |  |
| H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-5 must not be present. |  |
| H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H112-6 must not be present. |  |
| H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-7 must not be present. |  |
| H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H0012-8 must not be present. |  |
| H112-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-9 must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HI | DIAGNOSIS RELATED GROUP (DRG) information |  | 1 | s | 2300 |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{Hl}$ with H01-1 = "DR" is allowed. | 03/27: not pass through |


| Element IDENTIFIER | Description | ID | Min. <br> Max. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | DR | 999 | 11403 = 7: "Invalid Code Value" | 2300.H01-1 must be "DR". |  |
| H01-2 | DRG Code | AN | 1-30 | R |  |  |  | 277 | CSC = 256: "DRG code(s)" | 2300.H101-2 must be a valid DRG code. | Valid Diagnosis Related Group (DRG) reference must be available for this edit. |
| H101-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-3 must not be present. |  |
| H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H101-4 must not be present. |  |
| H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H101-5 must not be present. |  |
| H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H101-6 must not be present. |  |
| H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H101-7 must not be present. |  |
| H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H101-8 must not be present. |  |
| H101-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H101-9 must not be present. |  |
| H02 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H102 must not be present. |  |
| H103 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103 must not be present. |  |
| H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104 must not be present. |  |
| H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H105 must not be present. |  |
| H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106 must not be present. |  |
| H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107 must not be present. |  |
| H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H108 must not be present. |  |
| H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109 must not be present. |  |
| H110 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110 must not be present. |  |
| H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111 must not be present. |  |
| H112 | HEALTH CARE CODE |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HI | OTHER DIAGNOSIS INFORMATION |  | 2 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{H}$ with H01-1 $=$ "BF" are allowed. | ICD-9 Only period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with H101-1 = "BF" or "ABF" are allowed. | Transition period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300.H1 with H101-1 = "ABF" are allowed. | ICD-10 Only period - assumes no dual-use after mandated date |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | 11403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| H01-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BF". | ICD-9 Only period |

## 837 - Institutional Edits

| Element IDENTIFIER | Description | ID | Min. Max | $\begin{aligned} & \text { Usage } \end{aligned}$ Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H01-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{Hl01-1}$ must = "ABF". | CD-10 Only period - assumes no dual-use after mandated date. |
| H01-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If $2300 . \mathrm{HIO1}-1$ is "BF" then 2300 . HIO1-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| H01-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300 . HIO1-1 is "ABF" then 2300 .HI01-2 must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only <br> period. <br> Valid ICD-10-CM Clinical <br> Modification Diagnosis Code <br> reference must be available for this <br> edit. |
| H01-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H01-2 must not contain a ".". |  |
| H101-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H101-3 must not be present. |  |
| H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-4 must not be present. |  |
| H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not <br> Used" Element Present" | 2300.H101-5 must not be present. |  |
| H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H101-6 must not be present. |  |
| H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not <br> Used" Element Present" | 2300.H101-7 must not be present. |  |
| H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H101-8 must not be present. |  |
| H01-9 | $\begin{gathered} \hline \begin{array}{c} \text { Present on Admission } \\ \text { indicator } \end{array} \\ \hline \end{gathered}$ | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H101-9 must be valid values. |  |
| H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If 2300 . HI01 is present then 2300. HI02 may be present. |  |
| H02-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | IK403 = 7: "Invalid Code Value" | 2300.H02-1 must be valid values. |  |
| H02-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{Hl} 102 \mathrm{-1}$ must = "BF". | ICD-9 Only period |
| H102-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300. H -20-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H02-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300 . HIO2-1 is "BF" then 2300 . HIO2-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H02-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300. HIO2-1 is "ABF" then 2300. HIO2-2 must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit |


| Element IDENTIFIER | Description | ID | Min. | $\begin{aligned} & \text { Usage } \\ & \text { Rea. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H102-2 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.H102-2 must not contain a ".." |  |
| H02-3 | $\begin{gathered} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{gathered}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H102-3 must not be present. |  |
| H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H102-4 must not be present. |  |
| H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-5 must not be present. |  |
| H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-6 must not be present. |  |
| H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-7 must not be present. |  |
| H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H102-8 must not be present. |  |
| H02-9 | Present on Admission indicator indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 102$-9 must be valid values. |  |
| H103 | $\qquad$ |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO}$ is present then $2300 . \mathrm{HIO3}$ may be present. |  |
| H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | 1 K 403 = 7 : "Invalid Code Value" | 2300.H103-1 must be valid values. |  |
| H03-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO3-1 must = "BF". | CD-9 Only period |
| H03-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO3-1 must = "ABF". | CD-10 Only period - assumes no dual-use after mandated date. |
| H103-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If $2300 . \mathrm{HIO3-1}$ is "BF" then 2300. HIO3-2 must be a valid ICD-9-CM Diagnosis code. valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H03-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300.HIO3-1 is "ABF" then 2300.HIO3-2 must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H03-2 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.HIO3-2 must not contain a ".." |  |
| H03-3 | $\begin{gathered} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{gathered}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H103-3 must not be present. |  |
| H03-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-4 must not be present. |  |
| H03-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-6 must not be present. |  |
| H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H103-7 must not be present. |  |
| H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300. H103-8 must not be present. |  |
| H103-9 | $\begin{aligned} & \text { Present on Admission } \\ & \text { indicator } \end{aligned}$ | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H103-9 must be valid values. |  |
| H104 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO}$ is present then 2300 .HIO4 may be present. |  |


| Element IDENTIFIER | Description | ID | Min. <br> Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H04-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 104-1$ must be valid values. |  |
| H104-1 |  |  |  |  |  |  |  | 999 | 1 K 403 = 7: "Invalid Code Value" | 2300.H104-1 must = "BF". | ICD-9 Only period |
| H04-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO4-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H104-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300.HIO4-1 is "BF" then 2300. H104-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H104-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300.HIO4-1 is "ABF" then 2300.HIO4-2 must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H104-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2300.H104-2 must not contain a ".." |  |
| H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H104-3 must not be present. |  |
| H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H104-4 must not be present. |  |
| H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-5 must not be present. |  |
| H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H104-6 must not be present. |  |
| H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H104-7 must not be present. |  |
| H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H104-8 must not be present. |  |
| H04-9 | Present on Admission indicator | ID | 1-1 | s |  |  | $\mathrm{N}, \mathrm{U}, \mathrm{W}, \mathrm{Y}$ | 999 | 1 K 403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 104-9$ must be valid values. |  |
| H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 04$ is present then $2300 . \mathrm{H} 105$ may be present. |  |
| H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | 1 K 403 = 7: "Invalid Code Value" | 2300.H105-1 must be valid values. |  |
| H105-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.H105-1 must = "BF". | ICD-9 Only period |
| H105-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H .05-1 must = "ABF". | CD-10 Only period - assumes no dual-use after mandated date. |
| H105-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If $2300 . \mathrm{HIO5}-1$ is "BF" then $2300 . \mathrm{HIO5}-2$ must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit. |


| Element IDENTIFIER | Description | ID | Min. | $\begin{aligned} & \text { Usage } \\ & \text { Reg. } \end{aligned}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H05-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300.H105-1 is "ABF" then 2300 .HIO5-2 must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H105-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H105-2 must not contain a ".". |  |
| H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H105-3 must not be present. |  |
| H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H105-4 must not be present. |  |
| H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H105-5 must not be present. |  |
| H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H105-6 must not be present. |  |
| H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 105-7$ must not be present. |  |
| H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-8 must not be present. |  |
| H105-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H105-9 must be valid values. |  |
| H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 105$ is present then $2300 . \mathrm{H} 106$ may be present. |  |
| H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H106-1 must be valid values. |  |
| H106-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 106-1$ must = "BF". | ICD-9 Only period |
| H06-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300. H .06-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H06-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If $2300 . \mathrm{HIO6}-1$ is "BF" then 2300. HI06-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H06-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300.HIO6-1 is "ABF" then 2300 .HI06-2 must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H106-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300. H106-2 must not contain a ".". |  |
| H106-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-3 must not be present. |  |
| H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-4 must not be present. |  |
| H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H106-5 must not be present. |  |
| H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not | 2300. H106-6 must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-7 must not be present. |  |
| H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-8 must not be present. |  |
| H106-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H106-9 must be valid values. |  |
| H07 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO6}$ is present then $2300 . \mathrm{HIO7}$ may be present. |  |
| H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H07-1 must be valid values. |  |
| H107-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.H107-1 must = "BF". | ICD-9 Only period |
| H107-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.HI07-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H107-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300 . $\mathrm{HIO} 07-1$ is "BF" then 2300 . HI01-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H07-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300. HIO7-1 is "ABF" then 2300 .HI07-2 must be a valid ICD-10-CM Diagnosis code. valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H107-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H107-2 must not contain a ".". |  |
| H107-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not | 2300.H107-3 must not be present. |  |
| H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-4 must not be present. |  |
| H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-5 must not be present. |  |
| H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-6 must not be present. |  |
| H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H107-7 must not be present. |  |
| H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-8 must not be present. |  |
| H107-9 | Present on Admission indicator | ID | 1-1 | s |  |  | $\mathrm{N}, \mathrm{U}, \mathrm{W}, \mathrm{Y}$ | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H107-9 must be valid values. |  |
| H08 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 07$ is present then $2300 . \mathrm{H} 108$ may be present. |  |
| H08-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 108-1$ must be valid values. |  |
| H008-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H108-1 must = "BF". | ICD-9 Only period |
| H08-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300. H . 08 -1 must = "ABF". | CD-10 Only period - assumes no dual-use after mandated date. |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H08-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If $2300 . \mathrm{HI} 08-1$ is "BF" then 2300. H108-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H108-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300.HIO8-1 is "ABF" then 2300. HI 08 - 2 must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H08-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H108-2 must not contain a ".". |  |
| H108-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-3 must not be present. |  |
| H108-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H108-4 must not be present. |  |
| H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H -08-5 5 must not be present. |  |
| H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 108-6 must not be present. |  |
| H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-7 must not be present. |  |
| H008-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H H08-8 must not be present. |  |
| H108-9 | Present on Admission indicator | ID | 1-1 | s |  |  | $\mathrm{N}, \mathrm{U}, \mathrm{W}, \mathrm{Y}$ | 999 | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 108$-9 must be valid values. |  |
| H09 | HEALTH CARE CODE |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO} 08$ is present then $2300 . \mathrm{HIO9}$ may be present. |  |
| H09-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H 099-1 must be valid values. |  |
| H109-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.H109-1 must = "BF". | ICD-9 Only period |
| H109-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H -09-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H09-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If $2300 . \mathrm{HIO9-1}$ is "BF" then 2300. HIO9-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H109-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If $2300 . \mathrm{HIO9-1}$ is "ABF" then 2300 .HIO9-2 must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H009-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H109-2 must not contain a ".." |  |
| H009-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-3 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | $\begin{aligned} & \text { Usage } \\ & \text { Reg. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-4 must not be present. |  |
| H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-5 must not be present. |  |
| H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H109-6 must not be present. |  |
| H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-7 must not be present. |  |
| H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-8 must not be present. |  |
| H09-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H109-9 must be valid values. |  |
| H110 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO} 09$ is present then $2300 . \mathrm{Hl10}$ may be present. |  |
| H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | 1 1403 = 7: "Invalid Code Value" | 2300.H110-1 must be valid values. |  |
| H110-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300. $\mathrm{Hl110-1}$ must = "BF". | ICD-9 Only period |
| H110-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H110-1 must = "ABF". | CD-10 Only period - assumes no dual-use after mandated date. |
| H110-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If $2300 . \mathrm{HI} 10-1$ is "BF" then $2300 . \mathrm{HI} 10-2$ must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H110-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If $2300 . \mathrm{HI} 10-1$ is "ABF" then $2300 . \mathrm{HI} 10-2$ must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit. |
| H110-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H110-2 must not contain a ".". |  |
| H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-3 must not be present. |  |
| H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-4 must not be present. |  |
| H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-5 must not be present. |  |
| H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-6 must not be present. |  |
| H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-7 must not be present. |  |
| H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-8 must not be present. |  |
| H110-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H110-9 must be valid values. |  |
| H111 | $\begin{aligned} & \hline \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{Hl10}$ is present then $2300 . \mathrm{H} 111$ may be present. |  |
| H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be valid values. |  |
| H111-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must = "BF". | ICD-9 Only period |

## 837 - Institutional Edits

| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Reg. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H111-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H [11-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| H111-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300 . $\mathrm{HI} 11-1$ is " BF " then 2300 . $\mathrm{H} 111-2$ must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition <br> period. <br> Valid ICD-9-CM Clinical <br> Modification Diagnosis Code <br> reference must be available for this <br> edit. |
| H111-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If $2300 . \mathrm{HI} 111-1$ is "ABF" then $2300 . \mathrm{HI} 11-2$ must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only <br> period. <br> Valid ICD-10-CM Clinical <br> Modification Diagnosis Code <br> reference must be available for this <br> edit. |
| H11-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H111-2 must not contain a ".". |  |
| 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 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-3 must not be present. |  |
| H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H111-4 must not be present. |  |
| H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H111-5 must not be present. |  |
| H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-6 must not be present. |  |
| H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-7 must not be present. |  |
| H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-8 must not be present. |  |
| H111-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-9 must be valid values. |  |
| H12 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 . HI11 is present then 2300 . H112 may be present. |  |
| H12-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be valid values. |  |
| H112-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must = "BF". | ICD-9 Only period |
| H12-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H [12-1 must = "ABF". | CD-10 Only period - assumes no dual-use after mandated date. |
| H112-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300 . H1 $12-1$ is " BF " then 2300 . $\mathrm{H} 112-2$ must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| H112-2 |  |  |  |  |  |  |  | 277 | CSC = 255: "Diagnosis Code" | If 2300. HI12-1 is "ABF" then 2300 .HI12-2 must be a valid ICD-10-CM Diagnosis code. valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only <br> period. <br> Valid ICD-10-CM Clinical <br> Modification Diagnosis Code <br> reference must be available for this <br> edit. |


| Element IDENTIFIER | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H112-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H12-2 must not contain a ".". |  |
| H112-3 | Date Time Period Format <br> Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-3 must not be present. |  |
| H112-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H112-4 must not be present. |  |
| H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-5 must not be present. |  |
| H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H112-6 must not be present. |  |
| H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-7 must not be present. |  |
| H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H012-8 must not be present. |  |
| H12-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H 12 -9 must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| Hi | PRINCIPAL PROCEDURE INFORMATION |  | 1 | s | 2300 |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | 2300. HI with H01-1 = "BR" or "CAH" must be included on inpatient claims when a procedure was performed. | ICD-9 Only period 3/26: only edit for valid procedure code. FISS will edit against revenue code if necessary. |
| HI |  |  |  |  |  |  |  | 999 | IK304 = I6: "Implementation Dependent Segment Missing" | 2300.HI with HIO1-1 = "BR" "BBR" or "CAH" must be included on inpatient claims when a procedure was performed. | Transition period <br> 3/26: only edit for valid procedure code. FISS will edit against revenue code if necessary. |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | 2300.HI with HI01-1 = "BBR" or "CAH" must be included on inpatient claims when a procedure was performed. | ICD-10 Only period - assumes no dual-use after mandated date. 3/26: only edit for valid procedure code. FISS will edit against revenue code if necessary. |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300.HI with HIO1-1 = "BR" "BBR" or "CAH" must not be included except on inpatient claims when a procedure was performed. | 3/26: only edit for valid procedure code. FISS will edit against revenue code if necessary |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.HI with H101-1 = "BR" or "CAH" is allowed. | ICD-9 Only period |
| HI |  |  |  |  |  |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.HI with HI01-1 = "BR" "BBR" or "CAH" is allowed. | Transition period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .HI with H101-1 = "BBR" or "CAH" is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBR, BR | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| H01-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BR" or "CAH" | ICD-9 Only period |
| H01-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BBR" or "CAH". | ICD-10 Only period - assumes no dual-use after mandated date. |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H01-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | CSC 465: "Principal Procedure Code for Service(s) Rendered" | If 2300.HIO1-1 is "BR" then 2300. HIO1-2 must be a valid ICD-9-CM Principal Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Procedure Code reference must be available for this edit. |
| H01-2 |  |  |  |  |  |  |  | 277 | CSC 465: "Principal Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO1}-1$ is "BBR" then $2300 . \mathrm{H}$ 01-2 2 must be a valid ICD-10-CM Principal Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Procedure Code reference must be available for this edit. |
| H01-2 |  |  |  |  |  |  |  | 277 | TBD08: "Advanced Billing Concepts (ABC) code" | If $2300 . \mathrm{HIO1}-1$ is "CAH" then 2300. H IO1-2 2 must be a valid Advanced Billing Concepts (ABC) code. | Valid Advanced Billing Concepts (ABC) Code reference must be available for this edit. |
| H01-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H01-2 must not contain a ".". |  |
| H01-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H101-3 must be valid values. |  |
| H01-4 | Date Time Period | AN | 1-35 | s |  |  |  | 999 | IK403 = 8: "Invalid Date" | 2300.HI01-4 must be a valid date in CCYYMMDD format. |  |
| H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-5 must not be present. |  |
| H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-7 must not be present. |  |
| H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| H01-9 | Present on Admission indicator | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-9 must not be present. |  |
| H102 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H H02 must not be present. |  |
| H103 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H H03 must not be present. |  |
| H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H104 must not be present. |  |
| H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H105 must not be present. |  |
| H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H106 must not be present. |  |
| H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107 must not be present. |  |
| H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H108 must not be present. |  |
| H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109 must not be present. |  |
| H110 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110 must not be present. |  |
| H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111 must not be present. |  |
| H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HI | OTHER PROCEDURE INFORMATION |  | 2 | s | 2300 |  |  | 999 | IK304 = 16: "Implementation Dependent segment missing" | 2300.HI with H01-1 = "BQ" must be included on inpatient claims when additional procedures must be reported. | ICD-9 Only period 3/26: only edit for valid procedure code. FISS will edit against revenue code if necessary |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 16: "Implementation Dependent segment missing" | 2300.HI with HIO1-1 = "BQ" "BBQ" must be included on inpatient claims when additional procedures must be reported. | Transition period <br> 3/26: only edit for valid procedure <br> code. FISS will edit against <br> revenue code if necessary. |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 16: "Implementation Dependent segment missing" | 2300. HI with H $\mathrm{H} 01-1=$ "BBQ" must be included on inpatient claims when additional procedures must be reported. | ICD-10 Only period - assumes no dual-use after mandated date. 03/26: only edit for valid procedure code. FISS will edit against revenue code if necessary |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300.HI with H101-1 = "BQ" "BBQ" must not be included except on inpatient claims when additional procedures must be reported. | 03/26: only edit for valid procedure code. FISS will edit against revenue code if necessary |
| HI |  |  |  |  |  |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300. HI with HIO1-1 = "BQ" are allowed. | ICD-9 Only period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300.HI with H101-1 = "BQ" "BBQ" are allowed. | Transition period |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300 .HI with HI01-1 = "BBQ" are allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| H01-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HI01-1 must = "BQ". | ICD-9 Only period |
| H01-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| H01-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO1-1 is "BQ" then 2300.HIO1-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H01-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300. HIO1-1 is "BBQ" then 2300 .HI01-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| H01-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H101-2 must not contain a ".". |  |
| H101-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | IK403 = 7: "Invalid Code Value" | 2300.H01-3 must be "D8". |  |
| H01-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.HI01-4 must be a valid date in CCYYMMDD |  |
| H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H 101-5 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-6 must not be present. |  |
| H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-9 must not be present. |  |
| H102 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300.HI01 is present then 2300 .HI02 may be |  |
| H02-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 11403 = 7: "Invalid Code Value" | 2300.H102-1 must be valid values. |  |
| H02-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO2-1 must = "BQ". | ICD-9 Only period |
| H02-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| H102-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO2-1 is "BQ" then 2300. HIO2-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H102-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO2-1 is "BBQ" then 2300.HIO2-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit. |
| H102-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H102-2 must not contain a ".". |  |
| H02-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H102-3 must be "D8". |  |
| H102-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.HIO2-4 must be a valid date in CCYYMMDD format. |  |
| H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H IO2-5 must not be present. |  |
| H02-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-6 must not be present. |  |
| H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-7 must not be present. |  |
| H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H102-8 must not be present. |  |
| H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-9 must not be present. |  |
| H03 | $\qquad$ |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI02 is present then $2300 . \mathrm{HIO}$ may be present. |  |
| H03-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 11403 = 7: "Invalid Code Value" | 2300.H03-1 must be valid values. |  |
| H03-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO3-1 must = "BQ". | ICD-9 Only period |
| H103-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{HlO3-1}$ must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{aligned} & \text { Leop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H103-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO3-1 is "BQ" then 2300. HIO3-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H103-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO3-1 is "BBQ" then 2300.HIO3-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit. |
| H03-2 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.H103-2 must not contain a ".". |  |
| H03-3 | Date Time Period Format Qualifier | ID | 2-3 | S |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H103-3 must be "D8". |  |
| H103-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300.HIO3-4 must be a valid date in CCYYMMDD format. |  |
| H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| H03-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-6 must not be present. |  |
| H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-7 must not be present. |  |
| H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-8 must not be present. |  |
| H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-9 must not be present. |  |
| H04 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If $2300 . \mathrm{HIO3}$ is present then 2300 . HIO 4 may be present. |  |
| H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H104-1 must be valid values. |  |
| H04-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H104-1 must = "BQ". | ICD-9 Only period |
| H04-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HI04-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| H104-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO4-1}$ is "BQ" then 2300 . $\mathrm{H} 104-2$ must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H104-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO4-1 is "BBQ" then 2300.HIO4-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit. |
| H104-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H04-2 must not contain a ".". |  |
| H104-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | s |  |  | D8 | 999 | 1 K 403 = 7 : "Invalid Code Value" | 2300.H104-3 must be "D8". |  |
| H104-4 | Date Time Period | AN | 1-35 | S |  |  | CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300.HI04-4 must be a valid date in CCYYMMDD format. |  |
| H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-5 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-6 must not be present. |  |
| H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H104-7 must not be present. |  |
| H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H104-8 must not be present. |  |
| H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-9 must not be present. |  |
| H105 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 04$ is present then $2300 . \mathrm{H} 05$ may be present. |  |
| H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 1 K 403 = 7 : "Invalid Code Value" | $2300 . \mathrm{H} 105-1$ must be valid values. |  |
| H105-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.HIO5-1 must = "BQ". | ICD-9 Only period |
| H105-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H105-1 must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |
| H05-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300. $\mathrm{H} 105-1$ is "BQ" then $2300 . \mathrm{HIO5}-2$ must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H05-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO5-1 is "BBQ" then 2300.HI05-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit. |
| H105-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H105-2 must not contain a ".". |  |
| H105-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{array}$ | ID | 2-3 | s |  |  | D8 | 999 | IK403 = 7: "Invalid Code Value" | 2300.H105-3 must be "D8". |  |
| H005-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.HIO5-4 must be a valid date in CCYYMMDD format. |  |
| H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-5 must not be present. |  |
| H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-6 must not be present. |  |
| H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H105-7 must not be present. |  |
| H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 105-8$ must not be present. |  |
| H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-9 must not be present. |  |
| H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If 2300 . HIO5 is present then 2300 .HI06 may be present. |  |
| H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must be valid values. |  |
| H06-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO6-1}$ must = "BQ". | ICD-9 Only period |
| H06-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.H106-1 must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H06-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HI06-1 is "BQ" then 2300.HIO6-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H106-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300. HIO6-1 is "BBQ" then 2300 . H106-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit. |
| H106-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2300.H106-2 must not contain a ".." |  |
| H06-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H106-3 must be "D8". |  |
| H06-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300. HIO6-4 must be a valid date in CCYYMMDD format. |  |
| H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H106-5 must not be present. |  |
| H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-6 must not be present. |  |
| H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-7 must not be present. |  |
| H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 106-8$ must not be present. |  |
| H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-9 must not be present. |  |
| H07 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK03 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If 2300.HI06 is present then 2300 . HI07 may be present. |  |
| H07-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H007-1 must be valid values. |  |
| H07-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H107-1 must = "BQ". | ICD-9 Only period |
| H07-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H107-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| H107-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO7-1 is "BQ" then 2300.HIOT-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H07-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300. HIO7-1 is "BBQ" then 2300 .HIO7-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit. |
| H07-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H107-2 must not contain a ".." |  |
| H107-3 | $\begin{gathered} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | s |  |  | D8 | 999 | $1 \mathrm{~K} 403=7$ : "Invalid Code Value" | 2300.H107-3 must be "D8". |  |
| H107-4 | Date Time Period | AN | 1-35 | S |  |  | CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300. HIO7-4 must be a valid date in CCYYMMDD format. |  |
| H07-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-5 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-6 must not be present. |  |
| H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H107-8 must not be present. |  |
| H07-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-9 must not be present. |  |
| H108 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 07$ is present then $2300 . \mathrm{H} 108$ may be present. |  |
| H08-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 1 K 403 = 7 : "Invalid Code Value" | $2300 . \mathrm{H} 08-1$ must be valid values. |  |
| H008-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.HIO8-1 must = "BQ". | ICD-9 Only period |
| H108-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H08-1 must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |
| H08-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO8-1 is "BQ" then $2300 . \mathrm{HIO}$-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H08-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.H108-1 is "BBQ" then 2300 .HI08-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit. |
| H08-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H08-2 must not contain a ".". |  |
| H008-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{array}$ | ID | 2-3 | s |  |  | D8 | 999 | IK403 = 7: "Invalid Code Value" | 2300.H108-3 must be "D8". |  |
| H008-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.HI08-4 must be a valid date in CCYYMMDD format. |  |
| H008-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-5 must not be present. |  |
| H008-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-6 must not be present. |  |
| H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H108-7 must not be present. |  |
| H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H108-8 must not be present. |  |
| H008-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-9 must not be present. |  |
| H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If 2300 .HI08 is present then 2300 .HI09 may be present. |  |
| H109-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must be valid values. |  |
| H09-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must = "BQ". | ICD-9 Only period |
| H09-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300.H09-1 must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |


| Element IDENTIFIER | Description | ID | Min. | $\begin{aligned} & \text { Usage } \\ & \text { Reg. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H09-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.H109-1 is "BQ" then 2300.HIO9-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H09-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO9}-1$ is "BBQ" then 2300 .HIO9-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit. |
| H109-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2300.H109-2 must not contain a ".." |  |
| H109-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H109-3 must be "D8". |  |
| H099-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300. HI09-4 must be a valid date in CCYYMMDD format. |  |
| H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H109-5 must not be present. |  |
| H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H109-6 must not be present. |  |
| H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-7 must not be present. |  |
| H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H109-8 must not be present. |  |
| H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-9 must not be present. |  |
| H110 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI09 is present then 2300 .HI10 may be present. |  |
| H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 1 1403 = 7: "Invalid Code Value" | 2300.H110-1 must be valid values. |  |
| H110-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must = "BQ". | ICD-9 Only period |
| H110-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 110-1$ must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |
| H110-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.H110-1 is "BQ" then $2300 . \mathrm{HI} 10-2$ must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H110-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HI} 10-1$ is "BBQ" then 2300 . $\mathrm{H} 110-2$ must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit. |
| H110-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H110-2 must not contain a ".". |  |
| H110-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H110-3 must be "D8". |  |
| H110-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300.HI10-4 must be a valid date in CCYYMMDD format. |  |
| H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-5 must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-6 must not be present. |  |
| H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H110-7 must not be present. |  |
| H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H110-8 must not be present. |  |
| H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-9 must not be present. |  |
| H111 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI10 is present then 2300 .HI11 may be present. |  |
| H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 1 K 403 = 7 : "Invalid Code Value" | 2300.H111-1 must be valid values. |  |
| H111-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must = "BQ". | ICD-9 Only period |
| H111-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |
| H111-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HI} 11-1$ is "BQ" then $2300 . \mathrm{H} 111-2$ must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H111-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HI} 11-1$ is "BBQ" then 2300 .HI11-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit. |
| H111-2 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H111-2 must not contain a ".". |  |
| H111-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | IK403 = 7: "Invalid Code Value" | 2300.H111-3 must be "D8". |  |
| H111-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300. HI11-4 must be a valid date in CCYYMMDD format. |  |
| H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-5 must not be present. |  |
| H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-6 must not be present. |  |
| H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-7 must not be present. |  |
| H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H111-8 must not be present. |  |
| H111-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-9 must not be present. |  |
| H112 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If 2300 .HI11 is present then 2300 . HI12 may be present. |  |
| H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be valid values. |  |
| H112-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must = "BQ". | ICD-9 Only period |
| H112-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2300. H [12-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{aligned} & \text { Usage } \\ & \text { Rea. } \end{aligned}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H112-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HI12-1 is "BQ" then 2300.H112-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit. |
| H112-2 |  |  |  |  |  |  |  | 277 | CSC = 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HI12-1 is "BBQ" then 2300.HI12-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit. |
| H112-2 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.H12-2 must not contain a ".". |  |
| H12-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-3 must be "D8". |  |
| H12-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300.HI12-4 must be a valid date in CCYYMMDD format. |  |
| H12-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-5 must not be present. |  |
| H12-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-6 must not be present. |  |
| H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-7 must not be present. |  |
| H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110 : "Implementation "Not Used" Flement Present" | 2300.H112-8 must not be present. |  |
| H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H112-9 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HI | OCCURRENCE SPAN INFORMATION |  | 2 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300 . HI with $\mathrm{HIO1-1}=$ " $\mathrm{BI} "$ are allowed. |  |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | 11403 = 7: "Invalid Code Value" | 2300.H01-1 must be "Ble". |  |
| H01-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO1-1}$ is "Bl" then 2300. HI01-2 must be a valid Occurrence Span code. | $\begin{aligned} & \text { Valid Occurrence Span Code } \\ & \text { reference must be available for this } \\ & \text { edit. } \end{aligned}$ |
| H01-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H101-3 must be "RD8". |  |
| H01-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300.HIO1-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H01-5 must not be present. |  |
| H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H01-6 must not be present. |  |
| H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-9 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H02 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | 1K403 = 10: "Exclusion Condition Violated" | If 2300. HIO1 is present then 2300 .HIO2 may be present. |  |
| H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | IK403 = 7: "Invalid Code Value" | 2300.HIO2-1 must be "BII". |  |
| H02-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO2}-1$ is "BI" then $2300 . \mathrm{HIO2}-2$ must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| H102-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H102-3 must be "RD8". |  |
| H02-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300. HIO2-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H102-5 must not be present. |  |
| H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H102-6 must not be present. |  |
| H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-7 must not be present. |  |
| H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-8 must not be present. |  |
| H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-9 must not be present. |  |
| H03 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300.HI02 is present then 2300 .HI03 may be present. |  |
| H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | IK403 = 7: "Invalid Code Value" | 2300.H03-1 must be "BI". |  |
| H103-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If 2300 . HIO3-1 is "BI" then 2300 .HIO3-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code <br> reference must be available for this <br> edit edit. |
| H03-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H103-3 must be "RD8. |  |
| H103-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300. HIO3-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| H03-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | 1K403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-6 must not be present. |  |
| H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-7 must not be present. |  |
| H03-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-8 must not be present. |  |
| H03-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-9 must not be present. |  |
| H104 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO3}$ is present then 2300 .HI04 may be present. |  |
| H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{HI} 04-1$ must be "BI". |  |
| H104-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO4-1}$ is "Bl" then $2300 . \mathrm{HIO4-2}$ must be a valid Occurrence Span code. | $\begin{aligned} & \text { Valid Occurrence Span Code } \\ & \text { reference must be available for this } \\ & \text { edit. } \end{aligned}$ |
| H104-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H104-3 must be "RD8. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H104-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.HIO4-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not | 2300.H104-5 must not be present. |  |
| H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-6 must not be present. |  |
| H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-7 must not be present. |  |
| H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-8 must not be present. |  |
| H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H104-9 must not be present. |  |
| H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300. HIO4 is present then 2300 .HI05 may be |  |
| H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | Bl | 999 | 11403 = 7: "Invalid Code Value" | 2300.H105-1 must be "BI". |  |
| H105-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{H} 05-1$ is "Bl" then 2300. HIO5-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. edit. |
| H105-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H105-3 must be "RD8". |  |
| H105-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300. HIO5-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-5 must not be present. |  |
| H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-6 must not be present. |  |
| H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-7 must not be present. |  |
| H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H105-8 must not be present. |  |
| H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-9 must not be present. |  |
| H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300.HI05 is present then 2300 .HI06 may be |  |
| H06-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must be "BII. |  |
| H106-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO6}-1$ is "BI" then 2300 . HI06-2 must be a valid Occurrence Span code. | ```Valid Occurrence Span Code reference must be available for this edit.``` |
| H106-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | IK403 = 7: "Invalid Code Value" | 2300.H106-3 must be "RD8". |  |
| H106-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300.HIO6-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-5 must not be present. |  |
| H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-6 must not be present. |  |
| H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-7 must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300. H H06-8 must not be present. |  |
| H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H106-9 must not be present. |  |
| H07 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | \| K 403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{H} 106$ is present then 2300 .HI07 may be present. |  |
| H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | B1 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H107-1 must be "BII. |  |
| H107-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO}-1$ is "BI" then 2300. HI07-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| H07-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{array}$ | ID | 2-3 | R |  |  | RD8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H07-3 must be "RD8". |  |
| H07-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMmDD | 999 | IK403 = 8: "Invalid Date" | 2300. HIO7-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H07-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-5 must not be present. |  |
| H07-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-6 must not be present. |  |
| H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-8 must not be present. |  |
| H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H107-9 must not be present. |  |
| H108 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300. HI07 is present then 2300 .HI08 may be present. |  |
| H08-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | Bl | 999 | 11403 = 7: "Invalid Code Value" | 2300.H108-1 must be "B1". |  |
| H108-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIOB}-1$ is "BI" then $2300 . \mathrm{H} 08-2$ must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| H108-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H108-3 must be "RD8". |  |
| H008-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300. HIO8-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H08-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-5 must not be present. |  |
| H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-6 must not be present. |  |
| H008-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-7 must not be present. |  |
| H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300. H108-8 must not be present. |  |
| H008-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-9 must not be present. |  |
| H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .H108 is present then 2300. HI09 may be present. |  |
| H109-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | Bl | 999 | IK403 = 7: "Invalid Code Value" | 2300.H109-1 must be "BI". |  |
| H09-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO9}-1$ is "BI" then $2300 . \mathrm{HIO9}-2$ must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |


| Element IDENTIFIER | Description | ID | Min. <br> Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H109-3 | Date Time Period Format <br> Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H109-3 must be "RD8". |  |
| H109-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.H109-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H109-5 must not be present. |  |
| H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H109-6 must not be present. |  |
| H099-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-7 must not be present. |  |
| H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-8 must not be present. |  |
| H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-9 must not be present. |  |
| H110 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI09 is present then 2300 .HI10 may be present. |  |
| H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must be "BII. |  |
| H110-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If 2300 .HI10-1 is "BI" then 2300 . HI10-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| H110-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H110-3 must be "RD8". |  |
| H110-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300.HI10-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-5 must not be present. |  |
| H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-6 must not be present. |  |
| H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H110-7 must not be present. |  |
| H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-8 must not be present. |  |
| H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-9 must not be present. |  |
| H111 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If 2300 .HI10 is present then 2300 . HI11 may be present. |  |
| H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | B1 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BII". |  |
| H111-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HI} 11-1$ is " Bl " then 2300 . $\mathrm{H} 111-2$ must be a valid Occurrence Span code. | $\begin{aligned} & \text { Valid Occurrence Span Code } \\ & \text { reference must be available for this } \\ & \text { edit. } \end{aligned}$ |
| H111-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-3 must be "RD8". |  |
| H111-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300. HI11-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H111-5 must not be present. |  |
| H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-6 must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H111-7 must not be present. |  |
| H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H111-8 must not be present. |  |
| H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-9 must not be present. |  |
| H112 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .HI11 is present then 2300. HI12 may be present. |  |
| H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BI". |  |
| H112-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | CSC = 462: "NUBC Occrrence Span Code(s) and Date(s)" | If 2300.HI12-1 is "BI" then 2300. H112-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| H112-3 | $\underset{\substack{\text { Qualifier }}}{\text { Date Time Period Format }}$ | ID | 2-3 | R |  |  | RD8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H12-3 must be "RD8". |  |
| H112-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.H112-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-5 must not be present. |  |
| H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H112-6 must not be present. |  |
| H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H112-7 must not be present. |  |
| H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H112-8 must not be present. |  |
| H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-9 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HI | OCCURRENCE INFORMATION |  | 2 | s | 2300 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300 .HI with H101-1 = "BH" are allowed. |  |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must be "BH". |  |
| H101-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | CSC = 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HIO1}-1$ is "BH" then $2300 . \mathrm{HIO1}-2$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| H01-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H101-3 must be "D8". |  |
| H01-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.HI01-4 must be a valid date in CCYYMMDD format. |  |
| H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 - I10: "Implementation "Not | 2300.H101-5 must not be present. |  |
| H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-6 must not be present. |  |
| H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H101-8 must not be present. |  |
| H101-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-9 must not be present. |  |
| H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI01 is present then $2300 . \mathrm{HIO}$ may be |  |
| H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO2-1 must be "BH". |  |


| Element IDENTIFIER | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H102-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | CSC = 461: "NUBC Occurrence Code(s) and Date(s)" | If 2300.HIO2-1 is "BH" then 2300.HIO2-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| H102-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H102-3 must be "D8". |  |
| H102-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300.HIO2-4 must be a valid date in CCYYMMDD |  |
| H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-5 must not be present. |  |
| H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-6 must not be present. |  |
| H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-7 must not be present. |  |
| H02-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 102-8$ must not be present. |  |
| H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-9 must not be present. |  |
| H03 | $\begin{aligned} & \hline \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO2}$ is present then 2300 . HIO3 may be present. |  |
| H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must be "ВН". |  |
| H103-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | CSC = 461: "NUBC Occurrence Code(s) and Date(s)" | If 2300 . HIO3-1 is "BH" then 2300 .HIO3-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| H03-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H03-3 must be "D8". |  |
| H03-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300.HIO3-4 must be a valid date in CCYYMMDD format. |  |
| H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300. H IO3-5 must not be present. |  |
| H03-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-6 must not be present. |  |
| H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H103-7 must not be present. |  |
| H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-8 must not be present. |  |
| H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H103-9 must not be present. |  |
| H04 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO}$ is present then $2300 . \mathrm{HIO}$ may be |  |
| H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H104-1 must be "BH". |  |
| H104-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | CSC = 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HIO}-1$ is "BH" then 2300 . $\mathrm{HIO} 0-2$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| H04-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H04-3 must be "D8". |  |
| H04-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.H104-4 must be a valid date in CCYYMMDD format. |  |
| H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-5 must not be present. |  |
| H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { \|K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H104-6 must not be present. |  |
| H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-7 must not be present. |  |
| H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 104-8$ must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{aligned} & \text { Usage } \\ & \text { Rea } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-9 must not be present. |  |
| H105 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 04$ is present then 2300 .HI05 may be present. |  |
| H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | IK403 = 7: "Invalid Code Value" | 2300.H105-1 must be "BH". |  |
| H105-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | CSC = 461: "NUBC Occurrence Code(s) and Date(s)" | If 2300.HIO5-1 is "BH" then 2300. HIO5-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| H105-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H105-3 must be "D8". |  |
| H105-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300. HIO5-4 must be a valid date in CCYYMMDD format. |  |
| H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-5 must not be present. |  |
| H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-6 must not be present. |  |
| H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-7 must not be present. |  |
| H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-8 must not be present. |  |
| H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-9 must not be present. |  |
| H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .H105 is present then 2300. H106 may be |  |
| H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | IK403 = 7: "Invalid Code Value" | 2300.H106-1 must be "BH". |  |
| H106-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | CSC = 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HIO6}-1$ is "BH" then $2300 . \mathrm{HIO}-2$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| H106-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H106-3 must be "D8". |  |
| H106-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | IK403 = 8: "Invalid Date" | 2300.HI06-4 must be a valid date in CCYYMMDD format. |  |
| H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300. H 106-5 must not be present. |  |
| H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-6 must not be present. |  |
| H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not <br> Used" Element Present" | 2300.H106-7 must not be present. |  |
| H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-8 must not be present. |  |
| H106-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-9 must not be present. |  |
| H07 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If $2300 . \mathrm{HI} 06$ is present then 2300 . HI07 may be |  |
| H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | IK403 = 7: "Invalid Code Value" | 2300.H107-1 must be "BH". |  |
| H107-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | CSC = 461: "NUBC Occurrence Code(s) and Date(s)" | If 2300. HIO7-1 is "BH" then 2300 .HIOT- 2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| H107-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | IK403 = 7: "Invalid Code Value" | 2300. H107-3 must be "D8". |  |
| H07-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.HIO7-4 must be a valid date in CCYYMMDD format. |  |
| H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H107-5 must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-6 must not be present. |  |
| H07-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| H07-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-8 must not be present. |  |
| H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H107-9 must not be present. |  |
| H08 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO7}$ is present then 2300 .HI08 may be present. |  |
| H008-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H108-1 must be "BH". |  |
| H008-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | CSC = 461: "NUBC Occurrence Code(s) and Date(s)" | If 2300. H08 $0-1$ is "BH" then 2300 .HI08-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| H008-3 | $\begin{gathered} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | D8 | 999 | 1K403-7: "Invalid Code Value" | 2300.H108-3 must be "D8". |  |
| H108-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300. HIO8-4 must be a valid date in CCYYMMDD format. |  |
| H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H108-5 must not be present. |  |
| H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-6 must not be present. |  |
| H008-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H108-7 must not be present. |  |
| H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H108-8 must not be present. |  |
| H08-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-9 must not be present. |  |
| H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300.HI08 is present then 2300 .HI09 may be present. |  |
| H09-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must be "ВН". |  |
| H09-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | 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. |
| H09-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H109-3 must be "D8". |  |
| H109-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300. HIO9-4 must be a valid date in CCYYMMDD format. |  |
| H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { \|K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-5 must not be present. |  |
| H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-6 must not be present. |  |
| H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H109-7 must not be present. |  |
| H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300. H 109-8 must not be present. |  |
| H09-9 | Yes/No Condition or | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H109-9 must not be present. |  |
| H10 | HEALTH CARE CODE information |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI09 is present then 2300 .HI10 may be present. |  |
| H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must be "BH". |  |
| H110-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | CSC = 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HI} 10-1$ is "BH" then $2300 . \mathrm{H} 110-2$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Reg. } \end{aligned}$ | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H110-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | $1 \mathrm{~K} 403=7$ : "Invalid Code Value" | 2300.H110-3 must be "D8". |  |
| H110-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.HI10-4 must be a valid date in CCYYMMDD format. |  |
| H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-5 must not be present. |  |
| H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-6 must not be present. |  |
| H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-7 must not be present. |  |
| H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-8 must not be present. |  |
| H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-9 must not be present. |  |
| H111 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 10$ is present then 2300 . HI11 may be present. |  |
| H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | IK403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BH". |  |
| H111-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | CSC = 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HI} 11-1$ is "BH" then $2300 . \mathrm{H} 111-2$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| H111-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-3 must be "D8". |  |
| H111-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.HI11-4 must be a valid date in CCYYMMDD format. |  |
| H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-5 must not be present. |  |
| H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H111-6 must not be present. |  |
| H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-7 must not be present. |  |
| H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H111-8 must not be present. |  |
| H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-9 must not be present. |  |
| H12 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 . H111 is present then 2300 . HI12 may be present. |  |
| H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BH". |  |
| H112-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | CSC = 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{H} 112-1$ is "BH" then $2300 . \mathrm{Hl} 12-2$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| H112-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-3 must be "D8". |  |
| H112-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | 1K403 = 8: "Invalid Date" | 2300.HI12-4 must be a valid date in CCYYMMDD format. |  |
| H12-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-5 must not be present. |  |
| H12-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-6 must not be present. |  |
| H12-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H112-7 must not be present. |  |
| H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-8 must not be present. |  |
| H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-9 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & 999 / \\ & 277 C A \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HI | VALUE INFORMATION |  | 2 | s | 2300 |  |  | 999 | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only two iterations of 2300 .HI with HI01-1 = "BE" are allowed. |  |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | 11403 = 7: "Invalid Code Value" | 2300.H01-1 must be "BE". |  |
| H101-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | 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. |
| H01-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-3 must not be present. |  |
| H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-4 must not be present. |  |
| H01-5 | $\begin{gathered} \hline \begin{array}{c} \text { Value Code Associated } \\ \text { Amount } \end{array} \\ \hline \end{gathered}$ | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300. H101-5 must be numeric. |  |
| H01-5 |  |  |  |  |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) | $2300 . \mathrm{HlO1-5}$ value must be >= 0 . |  |
| H101-5 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.H01-5 must be <= 99,999,999.99. |  |
| H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300. H101-6 must not be present. |  |
| H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-7 must not be present. |  |
| H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H101-8 must not be present. |  |
| H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-9 must not be present. |  |
| H02 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI01 is present then $2300 . \mathrm{HIO}$ may be |  |
| H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO2-1 must be "BE". |  |
| H02-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HIO2-1}$ is "BE" then 2300. $\mathrm{HIOL}-2$ must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| H102-3 | $\underset{\substack{\text { Date Time Period Format } \\ \text { Qualifier }}}{ }$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300. H102-3 must not be present. |  |
| H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-4 must not be present. |  |
| H102-5 | $\begin{gathered} \hline \begin{array}{c} \text { Value Code Associated } \\ \text { Amount } \end{array} \\ \hline \end{gathered}$ | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H102-5 must be numeric. |  |
| H102-5 |  |  |  |  |  |  |  | 277 | $\begin{aligned} & \text { CSC = 463: "NUBC Value Code(s) } \end{aligned}$ | 2300.H102-5 value must be >= 0 . |  |
| H102-5 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.H101-5 must be <= 99,999,999.99. |  |
| H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-6 must not be present. |  |
| H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-7 must not be present. |  |
| H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-8 must not be present. |  |
| H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-9 must not be present. |  |
| H103 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI02 is present then $2300 . \mathrm{HIO}$ may be |  |
| H03-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | IK403 = 7: "Invalid Code Value" | 2300.HIO3-1 must be "BE". |  |
| H103-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HIO3}-1$ is "BE" then $2300 . \mathrm{HIO} 3-2$ must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| H103-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H IO3-3 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & \text { 9999/ } \\ & \text { 277CA } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H103-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-4 must not be present. |  |
| H103-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300. H 03 -5 5 must be numeric. |  |
| H103-5 |  |  |  |  |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) | 2300. H103-5 value must be >= 0 . |  |
| H03-5 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.H103-5 must be <= 99,999,999.99. |  |
| H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{HIO3-6}$ must not be present. |  |
| H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not <br> Used" Element Present" | 2300.H103-7 must not be present. |  |
| H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H I03-8 must not be present. |  |
| H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-9 must not be present. |  |
| H04 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI03 is present then 2300 .HI04 may be present. |  |
| H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H04-1 must be "BE". |  |
| H104-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300. H IO4-1 is "BE" then 2300. H104-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H104-3 must not be present. |  |
| H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H104-4 must not be present. |  |
| H104-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H104-5 must be numeric. |  |
| H104-5 |  |  |  |  |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | $2300 . \mathrm{HI} 04-5$ value must be $>=0$. |  |
| H104-5 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.H104-5 must be $<=99,999,999.99$. |  |
| H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-6 must not be present. |  |
| H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-7 must not be present. |  |
| H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-8 must not be present. |  |
| H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-9 must not be present. |  |
| H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{H} 104$ is present then 2300 . HI05 may be present. |  |
| H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO5-1 must be "BE". |  |
| H105-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HIO5-1}$ is "BE" then 2300.H05-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-3 must not be present. |  |
| H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 105-4$ must not be present. |  |
| H105-5 | $\begin{aligned} & \text { Value Code Associated } \\ & \text { Amount } \end{aligned}$ | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2300.H105-5 must be numeric. |  |
| H105-5 |  |  |  |  |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | $2300 . \mathrm{HlO5}-5$ value must be $>=0$. |  |
| H105-5 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.H105-5 must be <= 99,999,999.99. |  |
| H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-6 must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Rea } \end{aligned}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 105-7$ must not be present. |  |
| H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300. H105-8 must not be present. |  |
| H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-9 must not be present. |  |
| H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | $\begin{aligned} & \text { If } 2300 . \mathrm{HI} 05 \text { is present then } 2300 \text {.HI06 may be } \\ & \text { present. } \end{aligned}$ |  |
| H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | IK403 = 7: "Invalid Code Value" | 2300.H106-1 must be "BE". |  |
| H06-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HIO6}-1$ is "BE" then $2300 . \mathrm{HO} 06-2$ must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| H106-3 | $\begin{gathered} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | $2300 . \mathrm{H} 106-3$ must not be present. |  |
| H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 106-4$ must not be present. |  |
| H106-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300. H 106 -5 must be numeric. |  |
| H106-5 |  |  |  |  |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | $2300 . \mathrm{HIO6}-5$ value must be >= 0 . |  |
| H106-5 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.H106-5 must be <= 99,999,999.99. |  |
| H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-6 must not be present. |  |
| H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-7 must not be present. |  |
| H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 106-8 must not be present. |  |
| H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { K K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H 106 -9 must not be present. |  |
| H07 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .HI06 is present then 2300 . HIO may be present. |  |
| H07-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H07-1 must be "BE". |  |
| H07-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300. HIO7-1 is "BE" then 2300 .HI07-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| H107-3 | $\begin{gathered} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{gathered}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H107-3 must not be present. |  |
| H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H107-4 must not be present. |  |
| H107-5 | $\underset{\substack{\text { Amount } \\ \text { Value Code Associated }}}{\text { Amone }}$ | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2300. $\mathrm{H} 107-5$ must be numeric. |  |
| H07-5 |  |  |  |  |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) | 2300. $\mathrm{H} 107-5$ value must be >= 0 . |  |
| H107-5 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.H107-5 must be <= 99,999,999.99. |  |
| H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-6 must not be present. |  |
| H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H107-8 must not be present. |  |
| H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-9 must not be present. |  |
| H08 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .HI07 is present then 2300 .HI08 may be present. |  |
| H008-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H O8-1 must be "BE". |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{gathered} \begin{array}{l} \text { Loop } \\ \text { Repeat } \end{array} \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/1 } \\ 999 / \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H108-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | $\begin{aligned} & \text { CSC = 463: "NUBC Value Code(s) } \\ & \text { and/or Amount(s)" } \end{aligned}$ | If 2300. HIO8-1 is "BE" then 2300.HIO8-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| H008-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 108-3$ must not be present. |  |
| H108-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H108-4 must not be present. |  |
| H08-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300. $\mathrm{H} 108-5$ must be numeric. |  |
| H08-5 |  |  |  |  |  |  |  | 277 | $\begin{aligned} & \text { CSC = 463: "NUBC Value Code(s) } \\ & \text { and/or Amount(s)" } \\ & \hline \end{aligned}$ | 2300.H108-5 value must be >= 0 . |  |
| H108-5 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.H108-5 must be <= 99,999,999.99. |  |
| H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 108-6$ must not be present. |  |
| H008-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H108-7 must not be present. |  |
| H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-8 must not be present. |  |
| H108-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-9 must not be present. |  |
| H09 | $\begin{aligned} & \hline \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \\ & \hline \end{aligned}$ |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 08$ is present then 2300 . HI09 may be present. |  |
| H109-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must be "BE". |  |
| H109-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300.HIO9-1 is "BE" then 2300. HIO9-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| H09-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H109-3 must not be present. |  |
| H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H109-4 must not be present. |  |
| H109-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300. H109-5 must be numeric. |  |
| H09-5 |  |  |  |  |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | 2300. H109-5 value must be >= 0 . |  |
| H109-5 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.H109-5 must be $<=99,999,999.99$. |  |
| H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H I09-6 must not be present. |  |
| H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-7 must not be present. |  |
| H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-8 must not be present. |  |
| H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-9 must not be present. |  |
| H110 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403-10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO9}$ is present then 2300 .HI10 may be |  |
| H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | 1K403 = 7: "Invalid Code Value" | 2300. H110-1 must be "BE". |  |
| H110-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300.HI10-1 is "BE" then 2300.HI10-2 must be a | Valid Value Code reference must be available for this edit. |
| H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-3 must not be present. |  |
| H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-4 must not be present. |  |
| H110-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H110-5 must be numeric. |  |
| H110-5 |  |  |  |  |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | 2300. $\mathrm{H} 110-5$ value must be $>=0$. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H110-5 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.H110-5 must be <= 99,999,999.99. |  |
| H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-6 must not be present. |  |
| H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-7 must not be present. |  |
| H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-8 must not be present. |  |
| H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-9 must not be present. |  |
| H111 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If $2300 . \mathrm{HI} 10$ is present then 2300 . HI11 may be present. |  |
| H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | IK403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BE". |  |
| H111-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300.H111-1 is "BE" then 2300. H111-2 must be a | Valid Value Code reference must be available for this edit. |
| H111-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-3 must not be present. |  |
| H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-4 must not be present. |  |
| H111-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H111-5 must be numeric. |  |
| H111-5 |  |  |  |  |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | 2300.H111-5 value must be >= 0 . |  |
| H111-5 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.H111-5 must be <= 99,999,999.99. |  |
| H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-6 must not be present. |  |
| H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-7 must not be present. |  |
| H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-8 must not be present. |  |
| H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-9 must not be present. |  |
| H112 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI11 is present then 2300 .HI12 may be present. |  |
| H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BE". |  |
| H112-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300.HI12-1 is "BE" then 2300.HI12-2 must be a | Valid Value Code reference must be available for this edit. |
| H112-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-3 must not be present. |  |
| H112-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-4 must not be present. |  |
| H12-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.H112-5 must be numeric. |  |
| H12-5 |  |  |  |  |  |  |  | 277 | CSC = 463: "NUBC Value Code(s) and/or Amount(s)" | 2300. $\mathrm{H} 112-5$ value must be $>=0$. |  |
| H112-5 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.H112-5 must be <= 99,999,999.99. |  |
| H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-6 must not be present. |  |
| H122-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H112-7 must not be present. |  |
| H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-8 must not be present. |  |
| H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-9 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HI | CONDITION INFORMATION |  | 2 | s | 2300 |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300.HI with H101-1 = "BG" are allowed. |  |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must be "BG". |  |
| H01-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | CSC = 460: "NUBC Condition Code(s)" | If 2300 . H101-1 is "BG" then 2300. HIO1-2 must be a | Valid Condition Code reference must be available for this edit. |
| H01-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H101-3 must not be present. |  |
| H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110 : "Implementation "Not Used" Element Present" | 2300.HIO1-4 must not be present. |  |
| H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-5 must not be present. |  |
| H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H101-6 must not be present. |  |
| H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-9 must not be present. |  |
| H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Vinated } \end{aligned}$ Violated" | If 2300 . HI01 is present then 2300 . HIO2 may be present. |  |
| H02-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must be "BG". |  |
| H102-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | CSC = 460: "NUBC Condition Code(s)" | If 2300. HIO 02 -1 is "BG" then 2300. $\mathrm{HIO2}-2$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| H102-3 | $\qquad$ | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-3 must not be present. |  |
| H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H102-4 must not be present. |  |
| H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-5 must not be present. |  |
| H02-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-6 must not be present. |  |
| H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H102-7 must not be present. |  |
| H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-8 must not be present. |  |
| H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-9 must not be present. |  |
| H103 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | 1K403-10: "Exclusion Condition | If 2300 .HI02 is present then 2300 . HI03 may be |  |
| H03-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | 11403 = 7: "Invalid Code Value" | 2300.H03-1 must be "BG". |  |
| H03-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | CSC = 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO3-1}$ is "BG" then $2300 . \mathrm{HIO}-2$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| H03-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-3 must not be present. |  |
| H03-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-4 must not be present. |  |
| H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-6 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 9999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-7 must not be present. |  |
| H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-8 must not be present. |  |
| H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-9 must not be present. |  |
| H104 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO}$ is present then $2300 . \mathrm{HIO}$ may be |  |
| H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H04-1 must be "BG". |  |
| H104-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | CSC = 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO4-1}$ is " BG " then $2300 . \mathrm{HIO4-2}$ must be a | Valid Condition Code reference must be available for this edit. |
| H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300. $\mathrm{H} 104-3$ must not be present. |  |
| H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-4 must not be present. |  |
| H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-5 must not be present. |  |
| H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 104-6$ must not be present. |  |
| H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-7 must not be present. |  |
| H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-8 must not be present. |  |
| H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 104-9$ must not be present. |  |
| H05 | HEALTH CARE CODE |  |  | s |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO4}$ is present then 2300 . H 105 may be |  |
| H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | IK403 = 7: "Invalid Code Value" | 2300.H105-1 must be "BG". |  |
| H105-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | CSC = 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO5}-1$ is " BG " then $2300 . \mathrm{HIO5}-2$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H105-3 must not be present. |  |
| H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-4 must not be present. |  |
| H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H105-5 must not be present. |  |
| H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-6 must not be present. |  |
| H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-7 must not be present. |  |
| H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H105-8 must not be present. |  |
| H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-9 must not be present. |  |
| H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 05$ is present then 2300 . HI06 may be present. |  |
| H06-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | IK403 = 7: "Invalid Code Value" | 2300.H06-1 must be "BG". |  |
| H106-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | CSC = 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO6-1}$ is " BG " then 2300. H106-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| H106-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H106-3 must not be present. |  |
| H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H106-4 must not be present. |  |
| H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-5 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & \text { 999/ } \\ & \text { 277CA } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H106-6 must not be present. |  |
| H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-7 must not be present. |  |
| H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-8 must not be present. |  |
| H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-9 must not be present. |  |
| H107 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300.HI06 is present then 2300 .HI07 may be present. |  |
| H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | IK403 = 7: "Invalid Code Value" | 2300.H07-1 must be "BG". |  |
| H107-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | CSC = 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO7-1}$ is "BG" then 2300. HI07-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| H007-3 | $\begin{gathered} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H107-3 must not be present. |  |
| H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-4 must not be present. |  |
| H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H107-5 must not be present. |  |
| H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300. H107-6 must not be present. |  |
| H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| H007-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-8 must not be present. |  |
| H07-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-9 must not be present. |  |
| H108 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI07 is present then 2300 . HI08 may be present. |  |
| H008-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H08-1 must be "BG". |  |
| H108-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | CSC = 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO} 0-1$ is "BG" then 2300 . $\mathrm{H} 108-2$ must be a | Valid Condition Code reference must be available for this edit. |
| H108-3 | $\begin{gathered} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H108-3 must not be present. |  |
| H108-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300. H108-4 must not be present. |  |
| H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H L08-5 5 must not be present. |  |
| H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H108-6 must not be present. |  |
| H008-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H108-7 must not be present. |  |
| H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 108-8$ must not be present. |  |
| H08-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 108 -9 must not be present. |  |
| H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300.HI08 is present then 2300 .HI09 may be present. |  |
| H09-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HIO9-1 must be "BG". |  |
| H09-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | CSC = 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HIO9-1}$ is " "BG" then 2300. H109-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| H109-3 | $\begin{gathered} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{gathered}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H I09-3 3 must not be present. |  |
| H09-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-4 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 9999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-5 must not be present. |  |
| H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-6 must not be present. |  |
| H099-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-7 must not be present. |  |
| H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-8 must not be present. |  |
| H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-9 must not be present. |  |
| H110 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If $2300 . \mathrm{HIO}$ is present then $2300 . \mathrm{HI} 10$ may be |  |
| H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | 1K403 = 7: "IIvalid Code Value" | 2300. $\mathrm{H} 110-1$ must be "BG". |  |
| H110-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | CSC = 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HI10-1}$ is " BG " then $2300 . \mathrm{HI10-2}$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| H110-3 | $\begin{array}{c}\text { Date Time Period Format } \\ \text { Qualifier }\end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-3 must not be present. |  |
| H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-4 must not be present. |  |
| H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-5 must not be present. |  |
| H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-6 must not be present. |  |
| H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H110-7 must not be present. |  |
| H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-8 must not be present. |  |
| H110-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-9 must not be present. |  |
| H111 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 10$ is present then 2300 . HI11 may be present. |  |
| H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BG". |  |
| H111-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | CSC = 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{H} 111-1$ is " BG " then 2300 . H111-2 must be a | Valid Condition Code reference must be available for this edit. |
| H111-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H111-3 must not be present. |  |
| H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-4 must not be present. |  |
| H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-5 must not be present. |  |
| H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-6 must not be present. |  |
| H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-7 must not be present. |  |
| H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-8 must not be present. |  |
| H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-9 must not be present. |  |
| H112 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 . HI11 is present then 2300 . HI12 may be present. |  |
| H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | IK403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BG". |  |
| H112-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | 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. |
| H112-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-3 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H12-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-4 must not be present. |  |
| H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-5 must not be present. |  |
| H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H112-6 must not be present. |  |
| H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H112-7 must not be present. |  |
| H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-8 must not be present. |  |
| H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-9 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| Hi | treatment code INFORMATION |  | 2 | s | 2300 |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | 2300.H1 with H101-1 = "TC" must be included when Home Health Agencies need to report Plan of Treatment information under various payer contract. | Must not be present unles HH type of bill |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300.HI with H01-1 = "TC" must not be included unless Home Health Agencies need to report Plan of Treatment information under various payer contract. | Must not be present unles HH type of bill |
| HI |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300.HI with HI01-1 = "TC" are allowed. |  |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | IK403 = 7: "Invalid Code Value" | 2300.H01-1 must be "TC". |  |
| H01-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | $\begin{aligned} & \text { If } 2300 . \mathrm{HIO1-1} \text { is "TC" then } 2300 . \mathrm{HIO1-2} \text { must be a } \\ & \text { valid Treatment code. } \end{aligned}$ | Valid Treatment Code reference must be available for this edit. |
| H01-3 | $\begin{gathered} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{gathered}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H101-3 must not be present. |  |
| H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-4 must not be present. |  |
| H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-5 must not be present. |  |
| H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H01-6 must not be present. |  |
| H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | 1K403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-9 must not be present. |  |
| H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | \|K403 = 10: "Exclusion Condition Violated" | If 2300.HI01 is present then 2300 .HI02 may be present. |  |
| H02-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H02-1 must be "TC". |  |
| H02-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | If $2300 . \mathrm{HIO2-1}$ is "TC" then 2300. HIO2-2 must be a valid Treatment code. | Valid Treatment Code reference must be available for this edit. |
| H102-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-3 must not be present. |  |
| H02-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-4 must not be present. |  |
| H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-5 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 9999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-6 must not be present. |  |
| H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-7 must not be present. |  |
| H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-8 must not be present. |  |
| H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-9 must not be present. |  |
| H03 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI02 is present then $2300 . \mathrm{HIO} 3$ may be |  |
| H03-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | IK403 = 7: "Invalid Code Value" | 2300.H03-1 must be "TC". |  |
| H03-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | If 2300.HIO3-1 is "TC" then 2300. HIO3-2 must be a valid Treatment code. | Valid Treatment Code reference must be available for this edit. |
| H103-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-3 must not be present. |  |
| H103-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-4 must not be present. |  |
| H03-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-5 must not be present. |  |
| H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H103-6 must not be present. |  |
| H03-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-7 must not be present. |  |
| H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 103-8$ must not be present. |  |
| H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-9 must not be present. |  |
| H104 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 03$ is present then 2300 . HI04 may be present. |  |
| H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H104-1 must be "TC". |  |
| H104-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | If 2300.H104-1 is "TC" then 2300. HI04-2 must be a | Valid Treatment Code reference must be available for this edit. |
| H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-3 must not be present. |  |
| H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-4 must not be present. |  |
| H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-5 must not be present. |  |
| H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-6 must not be present. |  |
| H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H104-7 must not be present. |  |
| H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-8 must not be present. |  |
| H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-9 must not be present. |  |
| H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI04 is present then 2300 . HI05 may be present. |  |
| H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H105-1 must be "TC". |  |
| H105-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | $\begin{aligned} & \text { If } 2300 . \mathrm{HIO5}-1 \text { is "TC" then } 2300 . \mathrm{HIO5-2} \text { must be a } \\ & \text { valid Treatment code. } \end{aligned}$ | Valid Treatment Code reference must be available for this edit. |
| H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300. H105-3 must not be present. |  |
| H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 105-4$ must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 9999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-5 must not be present. |  |
| H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-6 must not be present. |  |
| H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-7 must not be present. |  |
| H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-8 must not be present. |  |
| H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 105-9 must not be present. |  |
| H106 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI05 is present then 2300 . HI06 may be present. |  |
| H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must be "TC". |  |
| H106-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | If $2300 . \mathrm{HIO6-1}$ is "TC" then 2300. HIO6-2 must be a valid Treatment code. | Valid Treatment Code reference must be available for this edit. |
| H106-3 | Date Time Period Format <br> Qualifier | ID | 2-3 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-3 must not be present. |  |
| H06-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-4 must not be present. |  |
| H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H106-5 must not be present. |  |
| H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300. H IO6-6 must not be present. |  |
| H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-7 must not be present. |  |
| H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 106-8$ must not be present. |  |
| H106-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-9 must not be present. |  |
| H107 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 06$ is present then 2300 . HI07 may be present. |  |
| H07-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H07-1 must be "TC". |  |
| H107-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | If 2300.HIO7-1 is "TC" then 2300. HIO7-2 must be a | Valid Treatment Code reference must be available for this edit. |
| H107-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300. H107-3 must not be present. |  |
| H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-4 must not be present. |  |
| H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H107-5 must not be present. |  |
| H07-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not | 2300. H107-6 must not be present. |  |
| H07-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-8 must not be present. |  |
| H07-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-9 must not be present. |  |
| H108 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO7}$ is present then 2300 . HI08 may be present. |  |
| H08-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H108-1 must be "TC". |  |
| H08-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | If 2300.HIO8-1 is "TC" then 2300.HIO8-2 must be a valid Treatment code. | Valid Treatment Code reference must be available for this edit. |
| 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 | IK403 = I10: "Implementation "Not Used" Flement Present" | 2300.H108-3 must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H008-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | $\begin{aligned} & \text { \|K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H108-4 must not be present. |  |
| H08-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-5 must not be present. |  |
| H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-6 must not be present. |  |
| H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-7 must not be present. |  |
| H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H108-8 must not be present. |  |
| H108-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-9 must not be present. |  |
| H109 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI08 is present then 2300 .HI09 may be |  |
| H09-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | 11403 = 7: "Invalid Code Value" | 2300.H09-1 must be "TC". |  |
| H109-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | If 2300.HI09-1 is "TC" then 2300. H109-2 must be a valid Treatment code. | Valid Treatment Code reference must be available for this edit. |
| H109-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-3 must not be present. |  |
| H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-4 must not be present. |  |
| H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-5 must not be present. |  |
| H099-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H109-6 must not be present. |  |
| H099-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-7 must not be present. |  |
| H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-8 must not be present. |  |
| H09-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H109-9 must not be present. |  |
| H110 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If 2300. HI09 is present then 2300 .HI10 may be present. |  |
| H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | 11403 = 7: "Invalid Code Value" | 2300.H110-1 must be "TC". |  |
| H110-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | If $2300 . \mathrm{HI10-1}$ is "TC" then 2300.H110-2 must be a valid Treatment code. | Valid Treatment Code reference must be available for this edit. |
| H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H110-3 must not be present. |  |
| H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H110-4 must not be present. |  |
| H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-5 must not be present. |  |
| H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-6 must not be present. |  |
| H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-7 must not be present. |  |
| H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-8 must not be present. |  |
| H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-9 must not be present. |  |
| H111 | HEALTH CARE CODE |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300. HI10 is present then 2300 .HI11 may be present. |  |
| H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be "TC". |  |
| H111-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | If 2300.H111-1 is "TC" then 2300. HI11-2 must be a | Valid Treatment Code reference must be available for this edit. |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| 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 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-3 must not be present. |  |
| H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-4 must not be present. |  |
| H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-5 must not be present. |  |
| H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-6 must not be present. |  |
| H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-7 must not be present. |  |
| H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-8 must not be present. |  |
| H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-9 must not be present. |  |
| H112 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2300. HI11 is present then 2300. HI12 may be present. |  |
| H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be "TC". |  |
| H112-2 | Treatment Code | AN | 1-30 | R |  |  |  | 277 | CSC = 658: "Treatment Code" | If 2300.HI12-1 is "TC" then 2300. HI12-2 must be a | Valid Treatment Code reference must be available for this edit. |
| H112-3 | Date Time Period Format <br> Qualifier | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H112-3 must not be present. |  |
| H112-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-4 must not be present. |  |
| H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2300.H112-5 must not be present. |  |
| H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-6 must not be present. |  |
| H12-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H112-7 must not be present. |  |
| H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2300.H112-8 must not be present. |  |
| H12-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H112-9 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HCP |  |  | 1 | s | 2300 |  |  | 999 | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of $2300 . \mathrm{HCP}$ is allowed. | pass through, syntax only. |
| HCP01 | Pricing Methodology | ID | 2-2 | R |  |  | $\begin{gathered} 00,01,02,03,04,05,06,07, \\ 08,09,10,11,12,13,14 \end{gathered}$ | 999 | IK403 = 1: "Required Data Element Missing" | 2300. HCP01 must be present. |  |
| HCP01 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2300.HCP01 must be valid values. |  |
| HCP02 | Repriced Allowed Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 1: "Required Data Element | 2300.HCP02 must be present. |  |
| HCP02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.HCP02 must be <= 99,999,999.99. |  |
| нсРоз | Repriced Saving Amount | R | 1-18 | S |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300. $\mathrm{HCPO3}$ must be $<=99,999,999.99$. |  |
| HCP04 | Repricing Organization Identifier Identifier | AN | 1-50 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.HCP04 must be 1-50 characters. |  |
| HCP04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP04 must be populated with accepted AN characters. |  |
| HCP04 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.HCP04 must contain at least one non-space character. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HCP05 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Repricing Per Diem or Flat } \\ \text { Rate Amount } \end{array} \\ \hline \end{array}$ | R | 1-9 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300. HCP05 must be 1-9 characters. |  |
| HCP06 | $\begin{array}{\|c} \hline \begin{array}{c} \text { Repriced Approved DRG } \\ \text { Code } \end{array} \\ \hline \end{array}$ | AN | 1-50 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.HCP06 must be 1-50 characters. |  |
| HCP06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP06 must be populated with accepted AN characters. |  |
| HCP08 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2300.HCP06 must contain at least one non-space |  |
| HCP07 | Repriced Approved Amount | R | 1-18 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2300.HCP07 must be <= 99,999,999.99. |  |
| HCP08 | Produc/Service ID | AN | 1-48 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300.HCP08 must be 1-48 characters. |  |
| HCP08 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP08 must be populated with accepted AN characters. |  |
| HCP08 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP06 must contain at least one non-space |  |
| HCP09 | $\begin{aligned} & \hline \text { Product/Service ID } \\ & \text { Qualifier } \end{aligned}$ | ID | 2-2 | S |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.HCP09 must not be present. |  |
| HCP10 | Product/Service ID | AN | 1-48 | s |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.HCP10 must not be present. |  |
| HCP11 | Unit or Basis for Measurement Code | ID | 2-2 | s |  |  | DA, UN | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HCP11 must be valid values. |  |
| HCP11 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403-2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | 2300.HCP012 is present, 2300.HCP011 must be |  |
| HCP12 | Quantity | R | 1-15 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403-2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | 2300.HCP011 is present, 2300 .HCP012 must be present. |  |
| HCP12 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.HCP12 must be numeric. |  |
| HCP13 | Reject Reason Code | ID | 2-2 | s |  |  | T1, T2, T3, T4, T5, T6 | 999 | 1K403 = 7: "Invalid Code Value" | 2300. HCP13 must be valid values. |  |
| HCP14 | Policy Compliance Code | ID | 1-2 | s |  |  | 1, 2, 3, 4, 5 | 999 | 11403 = 7: "Invalid Code Value" | $2300 . \mathrm{HCP14}$ must be valid values. |  |
| HCP15 | Exception Code | ID | 1-2 | s |  |  | 1, 2, 3, 4, 5, 6 | 999 | 1K403 = 7: "Invalid Code Value" | 2300.HCP15 must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | ATTENDING PROVIDER <br> NAME |  | 1 | s | 2310A | 1 |  | 999 | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 2310A.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 71 | 999 | \|K403 = 1: "Required Data Element Missing" | 2310A.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310A.NM101 must be "71". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | 1K403 = 1: "Required Data Element Missing" | 2310A.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2310A.NM102 must be "1". |  |
| NM103 | Name Last | AN | 1-60 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2310A.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2310A.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM103 must contain at least one non-space character. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM103 must be populated with accepted AN characters. |  |
| NM104 | Name First | AN | 1-35 | s |  |  |  | 999 | 11403 = 5: "Data Element Too Long" | 2310A.NM104 must be 1 - 35 characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM104 must be populated with accepted AN characters. |  |
| NM105 | Name Middle | AN | 1-25 | s |  |  |  | 999 | 11403 = 5: "Data Element Too Long" | 2310A.NM105 must be $1-25$ characters. |  |


| Element IDENTIFIER | Description | ID | Min. | $\begin{aligned} & \text { Usage } \\ & \text { Reg. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM105 must be populated with accepted AN characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM105 must contain at least one non-space character. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2310A.NM106 must not be present. |  |
| NM107 | Name Suffix | AN | 1-10 | S |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2310A.NM107 must be 1-10 characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310A.NM107 must be populated with accepted AN characters. |  |
| NM108 | $\begin{gathered} \hline \text { Identification Code } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 1-2 | s |  |  | xX | 999 | 1K403 = 7: "Invalid Code Value" | 2310A.NM108 must be "XX". |  |
| NM108 |  |  |  |  |  |  |  | 277 | TBD01: "Situational segment/element required for adjudication." | 2310A.NM108 must be present unless 2300.REF01 = P4 and 2300.REF02 = 31 . |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2310A.NM109 must be valid according to the NPI algorithm. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | The first position of 2310A.NM109 must be a "1". |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2310A.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | Valid NPI Crosswalk must be available for this edit. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | 2310A.NM110 must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | 2310A.NM111 must not be present. |  |
| NM112 | $\begin{array}{c}\text { Name Last or Organization } \\ \text { Name }\end{array}$ | AN | 1-60 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2310A.NM112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| PRV | ATTENDING PROVIDER SPECIALTY INFORMATION |  | 1 | s | 2310A |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2310A.NM1 is present, 2310A.PRV may be present. |  |
| PRV |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds | Only one iteration of 2310A.PRV is allowed. |  |
| PRV01 | Provider Code | ID | 1-3 | R |  |  | AT | 999 | \|K403 = 1: "Required Data Element Missing" | 2310A . PRV01 must be present. |  |
| PRV01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310A . PRV01 must be "AT". |  |
| PRV02 | Reference Identification Qualifier | ID | 2-3 | R |  |  | PXC | 999 | 1K403 = 1: "Required Data Element | 2310A .PRV02 must be present. |  |
| PRV02 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310A .PRV02 must be "PXC". |  |
| PRV03 | Provider Taxonomy Code | AN | 1-50 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" Missing" | 2310A .PRV03 must be present. |  |
| PRV03 |  |  |  |  |  |  |  | 277 | CSC 145: "Entity's specialty/taxonomy code" | 2310A .PRV03 must be a valid Provider Taxonomy Code. | Valid Provider Taxonomy Code reference must be available for this edit. |
| PRV04 | State or Province Code | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2310A.PRV04 must not be present. |  |
| PRV05 | PROVIDER SPECIALTY information |  |  | N/U |  |  |  | 999 | IK403 = I 10 : "Implementation "Not Used" Element Present" | 2310A.PRV05 must not be present. |  |
| PRV06 | $\begin{gathered} \hline \text { Provider Organization } \\ \text { Code } \end{gathered}$ | ID | 3-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2310A.PRV06 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |


| Element IDENTIFIER | Description | ID | Min. <br> Max. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF | ATTENDING PROVIDER SECONDARY IDENTIFICATION |  | 4 | s | 2310A |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2310A.REF with REF01 = "1G" may be present when 2310A.NM1 is present and 2310A.NM109 is not present. | Trailblazer Only <br> 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of 2310 A .REF with REF01 $=$ " 1 G " is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310A.REF must be present if 2300 .REF01 $=$ P4 and 2300. REF02 $=31$. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310A.REF must not be present. | Everyone butTrailblazer. <br> 01/20: Companion Guide Note needed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | IK403 = 1: "Required Data Element Missing" | 2310A . REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 277 | TBD03: "Payer specific restriction on compliant qualifiers" | 2310A.REF01 must be "1G". |  |
| REF02 | Attending Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2310A . REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2310A.REF02 must be 6 characters. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2310A.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2310A.REF03 must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2310A.REF04 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | $\begin{array}{c\|} \hline \text { OPERATING PHYSICIAN } \\ \text { NAME } \\ \hline \end{array}$ |  | 1 | s | 2310B | 1 |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310B.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 72 | 999 | IK403 = 1: "Required Data Element Missing" | 23108.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310B.NM101 must be "72". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | IK403 = 1: "Required Data Element Missing" | 2310B.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310B.NM102 must be "1". |  |
| NM103 | Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2310B.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2310B.NM103 must be 1 - 60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM103 must contain at least one non-space character. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM103 must be populated with accepted AN characters. |  |
| NM104 | Name First | AN | 1-35 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2310B.NM104 must be 1-35 characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310B.NM104 must contain at least one non-space character. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2310B.NM104 must be populated with accepted AN |  |
| NM105 | Middle Name | AN | 1-25 | s |  |  |  | 999 | 11403 = 5: "Data Element Too Long" | 23108.NM105 must be 1-25 characters. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM105 must contain at least one non-space character. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM105 must be populated with accepted AN characters. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| NM107 | Name Suffix | AN | 1-10 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2310B.NM107 must be 1-10 characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM107 must contain at least one non-space character. |  |
| NM107 |  |  |  |  |  |  |  | 999 | 1K403 = 6: "Invalid Character in Data | 2310B.NM107 must be populated with accepted AN |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | s |  |  | xx | 277 | TBD01: "Situational segment/element required for adjudication." | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 277 | TBDO1: "Situational segment/element required for adjudication." | 2310B.NM108 must be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310B. NM108 must be "XX". |  |
| NM109 | Identifier | AN | 2-80 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | 2310B.NM109 must be present if 2310B.NM108 is present. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider | 2310B.NM109 must be valid according to the NPI |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider | The first position of 23108.NM109 must be a "1". |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2310B.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | Valid NPI Crosswalk must be available for this edit. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | OPERATING PHYSICIAN SECONDARY IDENTIFICATION |  | 4 | s | 2310B |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2310B.REF with REF01 = "1G" may be present when 2310B.NM1 is present and 2310B.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of 2310 B .REF with REF01 $=$ " 1 G " is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310B.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | IK403 = 1: "Required Data Element Missing" | 2310B.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 277 | TBD03: "Payer specific restriction on compliant qualifiers" | 2310B.REF01 must be "1G". |  |
| REF02 | Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2310B.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2310B.REF02 must be 6 characters. |  |


| Element IDENTIFIER | Description | ID | Min. <br> Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2310B.REFO2 must be in format ANNNNN or AAANNN (where $A$ is an alpha character and $N$ is a numeric digit). |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | OTHER OPERATING PHYSICIAN NAME |  | 1 | s | 2310 C | 1 |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2310C.NM1 may be present when 2310B.NM1 is present. |  |
| NM1 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK } 304=4 \text { : "Loop Occurs Over } \\ & \text { Maximum Times" } \\ & \hline \end{aligned}$ | Only one iteration of 2310C.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | zz | 999 | IK403 = 1: "Required Data Element Missing" | 2310C.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310C.NM101 must be "ZZ". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | IK403 = 1: "Required Data Element Missing" | 2310C.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2310C.NM102 must be "1". |  |
| NM103 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Other Operating Physician } \\ \text { Last Name } \end{array} \\ \hline \end{array}$ | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2310C.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2310C.NM103 must be 1-60 characters. |  |
| Nм103 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310C.NM103 must contain at least one non-space character. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM103 must be populated with accepted AN |  |
| NM104 | $\begin{array}{\|c\|} \hline \text { Other Operating Physician } \\ \text { First Name } \\ \hline \end{array}$ | AN | 1-35 | S |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2310C. NM104 must be 1 - 35 characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310C.NM104 must contain at least one non-space |  |
| NM104 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310C.NM104 must be populated with accepted AN |  |
| NM105 | Other Operating Physician Middle Name or Initial | AN | 1-25 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2310C.NM105 must be 1-25 characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM105 must Contain at least one non-space character. |  |
| NM105 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK } 403=6: \text { "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310C.NM105 must be populated with accepted AN |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM107 | $\begin{array}{\|c\|} \hline \text { Other Operating Physician } \\ \text { Name Suffix } \\ \hline \end{array}$ | AN | 1-10 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2310C.NM107 must be 1-10 characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310C.NM107 must contain at least one non-space character. |  |
| NM107 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310C.NM107 must be populated with accepted AN characters. |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | s |  |  | xX | 277 | TBD01: "Situational segment/element required for adjudication." | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 277 | TBD01: "Situational segment/element required for adjudication." | 2310C.NM108 must be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310C.NM108 must be "XX". |  |


| Element IDENTIFIER | Description | ID | Min. Max. | $\begin{gathered} \begin{array}{c} \text { Usage } \\ \text { Reg. } \end{array} \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 | Identifier | AN | 2-80 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | $2310 \mathrm{C} . \mathrm{NM} 109$ must be present if 2310C.NM108 is present. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2310C.NM109 must be valid according to the NPI algorithm. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | The first position of 2310 C .NM109 must be a "1". |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2310C.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | Valid NPI Crosswalk must be available for this edit. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | other operating PHYSICIAN SECONDARY identification |  | 4 | s | 2310 C |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2310 C. REF with REF01 $=$ " 1 G " may be present when 2310C.NM1 is present and 2310C.NM109 is not present. | Trailblazer Only <br> 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of 2310 C. REF with REF01 $=$ " 1 G " is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310C.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | IK403 = 1: "Required Data Element Missing" | 2310 C . REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 277 | TBD03: "Payer specific restriction on compliant qualifiers" | 2310C.REF01 must be "1G". |  |
| REF02 | Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2310 C . REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2310C.REF02 must be 6 characters. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2310C.REF02 must be in format ANNNNN or AAANNN (where $A$ is an alpha character and $N$ is a numeric digit). |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | RENDERING PROVIDER NAME |  | 1 | s | 2310D | 1 |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310D.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 82 | 999 | IK403 = 1: "Required Data Element Missing" | 2310D.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2310D.NM101 must be "82". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | IK403 = 1: "Required Data Element Missing" | 2310D.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310D.NM102 must be "1". |  |
| NM103 | $\underset{\text { Nendering Provider Last }}{\text { Name }}$ | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2310D.NM103 must be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Rea } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2310D.NM103 must be 1 - 60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM103 must contain at least one non-space character. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM103 must be populated with accepted AN characters. |  |
| NM104 | Rendering Provider First Name | AN | 1-35 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2310D.NM104 must be 1-35 characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM104 must contain at least one non-space |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM104 must be populated with accepted AN characters. |  |
| NM105 | Rendering Provider Middle Name or Initial | AN | 1-25 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2310D.NM105 must be 1-25 characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM105 must contain at least one non-space character. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM105 must be populated with accepted AN characters. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM107 | Rendering Provider Name Suffix | AN | 1-10 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2310D.NM107 must be 1-10 characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM107 must contain at least one non-space character. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM107 must be populated with accepted AN characters. |  |
| NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | TBD01: "Situational segment/element required for adjudication." | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only <br> 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 277 | TBD01: "Situational segment/element required for adjudication." | 2310D.NM108 must be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310D.NM108 must be "XX". |  |
| NM109 | Rendering Provider Identifier | AN | 2-80 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | 2310D.NM109 must be present if 2310D.NM108 is present. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2310D.NM109 must be valid according to the NPI algorithm. algorithm. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider | The first position of 2310D.NM109 must be a "1". |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2310D.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | Valid NPI Crosswalk must be available for this edit. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | \|K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | RENDERING PROVIDER SECONDARY IDENTIFICATION |  | 4 | s | 2310D |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2310D.REF with REF01 = " 1 G " may be present when 2310D.NM1 is present and 2310D.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of 2310 D . REF with REF01 $=$ " 1 G " is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310D.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 0B, 1G, G2, LU | 999 | IK403 = 1: "Required Data Element Missing" | 2310D.REF01 must be present. |  |
|  |  |  |  |  |  |  |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2310D.REF01 must be "1G". |  |
| REF02 | Rendering Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2310D.REFO2 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2310D.REF02 must be 6 characters. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2310D.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | SERVICE FACILITY LOCATION NAME |  | 1 | s | 2310E | 1 |  | 999 | 1K304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310E.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 77 | 999 | IK403 = 1: "Required Data Element Missing" | 2310E.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2310E.NM101 must be "77". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | IK403 = 1: "Required Data Element Missing" | 2310E.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310E.NM102 must be "2". |  |
| NM103 | $\begin{gathered} \hline \text { Laboratory or Facility } \\ \text { Name } \\ \hline \end{gathered}$ | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2310E.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2310E.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310E.NM103 must contain at least one non-space character. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310E.NM103 must be populated with accepted AN characters. |  |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 999 | 1K403 = 7: "Invalid Code Value" | 2310E.NM108 must be "XX". |  |
| NM109 | $\begin{gathered} \hline \text { Laboratory or Facility } \\ \text { Primary Identifier } \\ \hline \end{gathered}$ | AN | 2-80 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | $2310 \mathrm{E} . \mathrm{NM} 109$ must be present if 2310E.NM108 is present. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2310E.NM109 must be valid according to the NPI algorithm. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | The first position of 2310E.NM109 must be a "1". |  |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | $\begin{aligned} & \text { Usage } \\ & \text { Rea. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM112 | $\|$Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N3 | SERVICE FACILITY LOCATION ADDRESS |  | 1 | R | 2310E |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2310E.NM1 is present, 2310.N3 must be present. |  |
| N3 |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310E.N3 is allowed. |  |
| N301 | $\begin{gathered} \hline \text { Laboratory or Facility } \\ \text { Address Line } \\ \hline \end{gathered}$ | AN | 1-55 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2310E. N 301 must be present. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2310E.N301 must be 1-55 characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310E.N301 must be populated with accepted AN characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310E.N301 must contain at least one non-space character. |  |
| N302 | $\begin{gathered} \hline \text { Laboratory or Facility } \\ \text { Address Line } \\ \hline \end{gathered}$ | AN | 1-55 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2310E.N301 is present, then 2310E.N302 may be present. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2310E.N302 must be 1-55 characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310E.N302 must be populated with accepted AN characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2310E.N302 must contain at least one non-space character. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N4 | SERVICE FACILITY LOCATION CITY, STATE, ZIP CODE |  | 1 | R | 2310E |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2310E.N3 is present, 2301E.N4 must be present. |  |
| N4 |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310E.N4 is allowed. |  |
| N401 | $\begin{array}{\|c\|} \hline \text { Laboratory or Facility City } \\ \text { Name } \\ \hline \end{array}$ | AN | 2-30 | R |  |  |  | 999 | IK403 = 1: "Required Data Element | 2310E.N401 must be present. |  |
| N401 |  |  |  |  |  |  |  | 999 | K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2310E.N401 must be 2-30 characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310E.N401 must be populated with accepted AN characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2310E.N401 must contain at least two non-space |  |
| N402 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Laboratory or Facility State } \\ \text { or Province Code } \end{array} \\ \hline \end{array}$ | ID | 2-2 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If $2310 \mathrm{E} . \mathrm{N} 404$ is not present, 2310E.N402 must be present. |  |
| N402 |  |  |  |  |  |  |  | 277 | CSC = 501: "Entity's State/Province" | If 2310E.N404 is not present, 2310 E.N402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| N403 | Laboratory or Facility Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | K 403 = 2: "Conditional Required Data Element Missing" | If 2310E.N404 is not present, 2310E.N403 must be present. |  |
| N403 |  |  |  |  |  |  |  | 277 | CSC = 500: "Entity's Postal/Zip Code" | If 2310E.N404 is not present, 2310E.N403 must be a valid 9 digit Zip Code. |  |
| N404 | Laboratory/Facility Country Code | ID | 2-3 | s |  |  |  | 277 | CSC = 680: "Entity's Country" | 2310E.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) |
| N405 | LocationQualifier | ID | 1-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/I } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 277 | CSC 695: "Entity's Country Subdivision Code" | 2310E.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) |
| N407 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | If 2310E.N407 is present, then 2310E.N404 must not = "US" or CAN". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | SERVICE FACILITY LOCATION SECONDARY IDENTIEICATION |  | 5 | s | 2310E |  |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2310E.REF must not be present. | Segment not valid for Part A. 02/04: Companion Guide Note needed. |
|  |  |  |  |  |  |  |  |  |  |  |  |
| Referring Loop | REFERRING PROVIDER NAME Loop |  |  |  |  |  |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | One iteration of this loop is allowed. |  |
| NM1 | REFERRING PROVIDER NAME |  | 1 | s | 2310F | 1 |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310F.NM1 with NM101 = "DN" is allowed. | Pass through only. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | DN | 999 | 1K403 = 1: "Required Data Element Missing" | 2310F.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2310F.NM101 must be "DN". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | IK403 = 1: "Required Data Element Missing" | 2310F.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2310F.NM102 must be "1". |  |
| NM103 | Referring Provider Last Name | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2310F.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | 11403 = 5: "Data Element Too Long" | 2310F.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM103 must contain at least one non-space character. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM103 must be populated with accepted AN characters. |  |
| NM104 | Referring Provider First Name | AN | 1-35 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2310F.NM104 must be 1-35 characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM104 must contain at least one non-space character. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM104 must be populated with accepted AN characters. |  |
| NM105 | Referring Provider Middle Name | AN | 1-25 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2310F.NM105 must be 1-25 characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM105 must contain at least one non-space character. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM105 must be populated with accepted AN characters. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM107 | Referring Provider Name <br> Suffix | AN | 1-10 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2310F.NM107 must be 1-10 characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "IIvalid Character in Data Element" | 2310F.NM107 must contain at least one non-space character. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM107 must be populated with accepted AN characters. |  |
| NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | TBD01: "Situational segment/element required for adjudication." | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM108 |  |  |  |  |  |  |  | 277 | TBDO1: "Situational segment/element required for adjudication." | 2310F.NM108 must be present. | Everyone but Trailblazer 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310F.NM108 must be "XX". |  |
| NM109 | $\begin{gathered} \hline \text { Referring Provider } \\ \text { Identifier } \\ \hline \end{gathered}$ | AN | 2-80 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | 2310F.NM109 must be present if 2310F.NM108 is present. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" Identifier (NPI)" | 2310F.NM109 must be valid according to the NPI algorithm. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | The first position of 2310F.NM109 must be a "1". |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2310F.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000 B.NM109. | Valid NPI Crosswalk must be available for this edit. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM112 | $\begin{array}{c}\text { Name Last or Organization } \\ \text { Name }\end{array}$ | AN | 1-60 | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | REFERRING PROVIDER SECONDARY IDENTIFICATION |  | 3 | s | 2310F |  |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2310F.REF must not be present. | Segment not valid for Part A. |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | OTHER SUBSCRIBER LOOP |  |  |  | 2320 |  |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only ten iterations of the 2320 loop are allowed. |  |
| SBR | other subscriber INFORMATION |  | 1 | s | 2320 | 10 |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.SBR is allowed. |  |
| SBR01 | Payer Responsibility Sequence Number Code | ID | 1-1 | R |  |  | $\underset{U}{\text { A, B, C, D, E, F, G, H, P, S, T, }}$ | 999 | IK403 = 1: "Required Data Element Missing" | 2320.SBR01 must be present. |  |
| SBR01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | $2320 . S 8 R 01$ must be valid values. |  |
| SBR01 |  |  |  |  |  |  |  | 999 | 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). |  |
| SBR01 |  |  |  |  |  |  |  | 277 | CSC 286: "Other payer's Explanation of Benefits/payment information" | If 2000B.SBR01 = "S", 2320.SBR01 ="P" must be present. |  |
| SBR02 | Individual Relationship Code | ID | 2-2 | R |  |  | $\begin{gathered} 01,18,19,20,21,39,40,53, \\ G 8 \end{gathered}$ | 999 | IK403 = 1: "Required Data Element Missing" | 2320.SBR02 must be present. |  |
| SBR02 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2320.SBR02 must be valid values. |  |
| SBR03 | Insured Group or Policy Number | AN | 1-50 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.SBR03 must be 1-50 characters. |  |
| SBR03 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR03 must contain at least one non-space character. |  |
| SBR03 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR03 must be populated with accepted AN characters. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SBR04 | Other Insured Group Name | AN | 1-60 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | $2320 . S B R 04$ may not be present when 2320.SBR03 is present. |  |
| SBR04 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2320.SBR04 must be 1-60 characters. |  |
| SBR04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data <br> Element" | 2320.SBR04 must contain at least one non-space character. |  |
| SBR04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR04 must be populated with accepted AN characters. |  |
| SBR05 | Insurance Type Code | ID | 1-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| SBR06 | Coordination of Benefits Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| SBR07 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| SBR08 | Employment Status Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| SBR09 | Claim Filing Indicator Code | ID | 1-2 | s |  |  | 11, 12, 13, 14, 15, 16, 17, AM, <br> BLL, CH, CI, DS, FI, HM, LM, <br> MA, MB, MC, OF, TV, VA, WC, | 999 | 1K403 = 7: "Invalid Code Value" | 2320.SBR09 must be valid values. |  |
| SBR09 |  |  |  |  |  |  |  | 277 | TBD03: "Payer specific restriction on compliant qualifiers" | 2320.SBR09 must not be = "MA" or "MB". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| CAS | CLAIM LEVEL |  | 5 | s | 2320 |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.CAS may be present. |  |
| CAS |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only 5 iterations of 2320.CAS are allowed. |  |
| CAS01 | $\begin{array}{\|} \hline \text { Claim Adjustment Group } \\ \text { Code } \end{array}$ | ID | 1-2 | R |  |  | CO, CR, OA, Pl, PR | 999 | \|K403 = 1: "Required Data Element Missing" | 2320.CAS01 must be present. |  |
| CAS01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | $2320 . C A S 01$ must be valid values. |  |
| CAS01 |  |  |  |  |  |  |  | 277 | CSC 696: "Group code not valid for this date of service" | If 2320.CAS01 = "CR" then 2330B.DTP with DTO01 = " 573 " must be prior to 01/01/2012. |  |
| CAS02 | Adjustment Reason Code | ID | 1-5 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2320.CAS02 must be present. |  |
| CAS02 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, <br> 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. <br> 01/08: Add clause to check for the 2330B.DTP |
| CAS03 | Adjustment Amount | R | 1-18 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2320.CAS03 must be present. |  |
| CAS03 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS03 must be numeric. |  |
| CAS03 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" | $2320 . C A S 03$ must not $=0$. |  |
| CAS03 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" CSC 519: "Adjustment Amount" | 2320.CAS03 is limited to 0,1 or 2 decimal positions. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS03 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2320.CAS03 must be >=-99,999,999.99. and <= 99,999,999.99. |  |
| CASO4 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | 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. |
| CAS04 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" | 2320. CAS04 must not $=0$. |  |
| CASO5 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition | If 2320.CAS02 is present, 2320.CAS05 may be present. |  |
| CAS05 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | 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". | Valid Claim Adjustment Reason Code reference must be available for this edit. <br> 01/08: Add clause to check for the 2330B. DTP. |
| CAS05 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 $=$ " $573^{\prime \prime}$ is not present, 2320.CAS05 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = "573". |  |
| CAS06 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If 2320.CAS05 is present, 2320.CAS06 must be present. |  |
| CAS06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | $2320 . \mathrm{CAS06}$ must be numeric. |  |
| CAS06 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to <br> zero" <br> CSC 519: "Adjustment Amount" | 2320.CAS06 must not $=0$. |  |
| CAS06 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" | 2320.CAS06 is limited to 0,1 or 2 decimal positions. |  |
| CAS06 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2320.CAS06 must be >=-99,999,999.99. and <= 99,999,999.99. |  |
| CAS07 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS05 is present, 2320.CAS07 may be present. |  |
| CAS07 |  |  |  |  |  |  |  | 999 | 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. |
| CAS07 |  |  |  |  |  |  |  | 277 | $\qquad$ | 2320. CAS07 must not $=0$. |  |
| CAS08 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS05 is present, 23200.CAS08 may be present. |  |
| CAS08 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 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. |
| CAS08 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, <br> 2320.CAS08 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = "573". |  |


| Element IDENTIFIER | Description | ID | Min. <br> Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS09 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2320CAS08 is present, 2320.CAS09 must be present. |  |
| CAS09 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS09 must be numeric. |  |
| CAS09 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to <br> zero" <br> CSC 519: "Adjustment Amount" | 2320.CAS09 must not $=0$. |  |
| CAS09 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" | 2320.CAS09 is limited to 0, 1 or 2 decimal positions. |  |
| CAS09 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2320.CAS09 must be >=-99,999,999.99. and <= 99,999,999.99. |  |
| CAS10 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS08 is present, 2320.CAS10 may be present. |  |
| CAS10 |  |  |  |  |  |  |  | 999 | 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. |
| CAS10 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to <br> zero" <br> CSC 520: "Adjustment Quantity" | 2320. CAS10 must not $=0$. |  |
| CAS11 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | 1K403 = 10: "Exclusion Condition Violated" | If 2320.CAS08 is present, 23200.CAS11 may be present. |  |
| CAS11 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | 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. |
| CAS11 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CAS11 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = "573". |  |
| CAS12 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS11 is present, 2320. CAS12 must be present. |  |
| CAS12 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS12 must be numeric. |  |
| CAS12 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to <br> zero" <br> CSC 519: "Adjustment Amount" | $2320 . C A S 12$ must not $=0$. |  |
| CAS12 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" CSC 519: "Adjustment Amount" | 2320.CAS12 is limited to 0, 1 or 2 decimal positions. |  |
| CAS12 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2320.CAS12 must be >=-99,999,999.99. and <= 99,999,999.99. |  |
| CAS13 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS11 is present, 2320.CAS13 may be present. |  |
| CAS13 |  |  |  |  |  |  |  | 999 | 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. |

## 837 - Institutional Edits

| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS13 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to <br> zero" <br> CSC 520: "Adjustment Quantity"$\|$ | 2320. CAS13 must not $=0$. |  |
| CAS14 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS11 is present, 23200.CAS14 may be present. |  |
| CAS14 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 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. |
| CAS14 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 = " 573 " is not present, 2320.CAS14 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = " 573 ". |  |
| CAS15 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If $2320 . \mathrm{CAS14}$ is present, 2320.CAS15 must be present. |  |
| CAS15 |  |  |  |  |  |  |  | 999 | 1K403 = 6: "Invalid Character in Data Element" | 2320.CAS15 must be numeric. |  |
| CAS15 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to <br> zero" <br> CSC 519: "Adjustment Amount" | $2320 . C A S 15$ must not $=0$. |  |
| CAS15 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" | 2320.CAS15 is limited to 0, 1 or 2 decimal positions. |  |
| CAS15 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2320.CAS15 must be >= -99,999,999.99. and <= 99,999,999.99. |  |
| CAS16 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS14 is present, 2320.CAS16 may be present. |  |
| CAS16 |  |  |  |  |  |  |  | 999 | 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 |
| CAS16 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to <br> zero" <br> CSC 520: "Adjustment Quantity" | 2320. CAS16 must not $=0$. |  |
| CAS17 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS14 is present, 23200.CAS17 may be present. |  |
| CAS17 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | 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. |
|  |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not presen 2320.CAS17 must be a valid Claim Adiustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = "573". |  |
| CAS18 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS17 is present, 2320.CAS18 must be present. |  |
| CAS18 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS18 must be numeric. |  |
| CAS18 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to <br> zero" <br> CSC 519: "Adjustment Amount"$\|$ | $2320 . C A S 18$ must not $=0$. |  |


| Element IDENTIFIER | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/I } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS18 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" | $2320 . \mathrm{CAS} 18$ is limited to 0, 1 or 2 decimal positions. |  |
| CAS18 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2320.CAS18 must be >=-99,999,999.99. and <= 99,999,999.99. |  |
| CAS19 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | 2lf 2320.CAS17 is present, 2320.CAS19 may be present. |  |
| CAS19 |  |  |  |  |  |  |  | 999 | 1K403 = 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. |
| CAS19 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" | 2320. CAS19 must not $=0$. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| AMT | COB PAYER PAID AMOUNT |  | 1 | s | 2320 |  |  |  | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.AMT with AMT01 = "D" may be present. |  |
| AMT |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.AMT with AMT01 = "D" is allowed. |  |
| AMT |  |  |  |  |  |  |  | 277 | 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. |  |
| AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | D | 999 | IK403 = 1: "Required Data Element Missing" | 2320.AMT01 must be present. |  |
| AMT01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2320.AMT01 must be "D". |  |
| AMT02 | Payer Paid Amount | R | 1-18 | R |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2320.AMT02 must be <= 99,999,999.99. |  |
| AMT02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 . AMT02 must be numeric. |  |
| AMT02 |  |  |  |  |  | 999 |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 183: "Amount entity has paid" | 2320.AMT02 must must be >= 0 . |  |
| AMT02 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 183: "Amount entity has paid" | 2320.AMT02 is limited to 0, 1 or 2 decimal positions. |  |
| AMT02 |  |  |  |  |  |  |  | 277 | CSC 672: "Other Payer's payment information is out of balance" | If SVD segments are present for this payer, 2320.AMT02 must - the sum of all 2430.SVD02 amounts when the value in 2430 .SVD01 is the same as the value in 2330B.NM109. |  |
| AMT03 | CreditDebit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| AMT | REMAINING PATIENT LIABILITY |  | 1 | s | 2320 |  |  |  | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.AMT with AMT01 = <br> "EAF" may be present. | pass-thru, syntax only. |
| AMT |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.AMT with AMT01 = "EAF" is allowed. |  |
| AMTO1 | AmountQualifier Code | ID | 1-3 | R |  |  | EAF | 999 | IK403 = 1: "Required Data Element Missing" | 2320.AMT01 must be present. |  |


| $\begin{aligned} & \text { Element } \\ & \text { IDENTIFIER } \end{aligned}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| AMT01 |  |  |  |  |  |  |  | 999 | \|K403 = 7: "Invalid Code Value" | 2320.AMT01 must be "EAF". |  |
| AMT02 | $\underset{\text { Amount }}{\substack{\text { Remaining Patient Liabity }}}$ | R | 1-18 | R |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.AMT02 must be <= 99,999,999.99. |  |
| AMT02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 . AMT02 must be numeric. |  |
| Амто3 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| AMT | COB TOTAL NONcovered amount |  | 1 | s | 2320 |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.AMT with AMT01 = "A8" may be present. |  |
| AMT |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.AMT with AMT01 = "A8" is allowed. |  |
| AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | A8 | 999 | IK403 = 1: "Required Data Element Missing" | 2320.AMT01 must be present. |  |
| AMT01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2320.AMT01 must be "A8". |  |
| AMT02 | Non-Covered Amount | R | 1-18 | R |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2320.AMT02 must be <= 99,999,999.99. |  |
| AMT02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 .AMT02 must be numeric. |  |
| AMT02 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 183: "Amount entity has paid" | 2320.AMT02 must must be >= 0 . |  |
| AMT02 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 596: "Non-covered Charge Amount" | 2320.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| AMT02 |  |  |  |  |  |  |  | 277 | CSC 596: "Non-covered Charge Amount" | The sum of all 2320.AMT02 (with AMT01 = "A8") elements must =2300.CLM02. |  |
| Амто3 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| OI | OTHER INSURANCE COVERAGE INFORMATION |  | 1 | R | 2320 |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2320.SBR is present, 2320.01 must be present. |  |
| 이 |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.01 is allowed. |  |
| 0101 | Claim Filing Indicator Code | ID | 1-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| 0102 | Claim Submission Reason Code | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| 0103 | Benefits Assignment Certlfication Indicator | ID | 1-1 | R |  |  | N, W, Y | 999 | IK403 = 1: "Required Data Element Missing" | 2320.0103 must be present. |  |
| 0103 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2320.0103 must be valid values. |  |
| 0104 | Patient Signature Source <br> Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| 0105 | Provider Agreement Code | ID | 1-1 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| 0106 | $\begin{gathered} \hline \begin{array}{c} \text { Release of Information } \\ \text { Code } \end{array} \\ \hline \end{gathered}$ | ID | 1-1 | R |  |  | I, Y | 999 | IK403 = 1: "Required Data Element Missing" | 2320.0106 must be present. |  |
| 0106 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2320.0106 must be valid values. |  |

## 837 - Institutional Edits

| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{array}{r} \text { TA1/1 } \\ 999 / \\ \text { 297CA } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |  |  |  |
| MIA | INPATIENT ADJUDICATION INFORMATION |  | 1 | s | 2320 |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.MIA may be present. |  |
| MIA |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.MIA is allowed on inpatient claims. | use the NUBC manual's inpatient/outpatient bill type designations/exceptions |
| MIA01 | Covered Days or Visits Count | R | 1-15 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2320.MIA01 must be present. |  |
| MIA01 |  |  |  |  |  |  |  | 999 | \|K403 = 6: "Invalid Character in Data Element" | 2320 . MIA01 must be numeric. |  |
| MIA01 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 456: "Covered Day(s)" | 2320.MIA01 must must be >= 0 . |  |
| M1A02 | Monetary Amount | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| MIA03 | LIfetime Psychiatric Days | R | 1-15 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MIA03 must be 1-15 characters. |  |
| MIA03 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data <br> Element" | 2320 . MIA03 must be numeric. |  |
| MIA03 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 582: "Lifetime Psychiatric Days Count" | 2320.MIA03 must be >= 0 . |  |
| MIA04 | Claim DRG Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MIA04 must be <= 99,999,999.99. |  |
| MIA04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 . MIA04 must be numeric. |  |
| MIA04 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 532: "Claim DRG Amount" | 2320.MIA04 must must be >= 0 . |  |
| MIA04 |  |  |  |  |  |  |  | 277 | $\begin{aligned} & \text { CSC 697: "Too many decimal } \\ & \text { positions" } \end{aligned}$ | 2320.MIA04 is limited to 0, 1 or 2 decimal positions. |  |
| MIA05 | Claim Payment Remark Code | AN | 1-50 | s |  |  |  | 277 | TBDO7: Remark Code not valid for this date of service | 2320.MIA05 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. |
| MIA06 | Claim Disproportionate Share Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MIA06 must be <= 99,999,999.99. |  |
| MIA06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 .MIA06 must be numeric. |  |
| MIA06 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" CSC 531: "Claim Disproportinate Share Amount" | 2320.MIA06 must must be >= 0 . |  |
| MIA06 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA06 is limited to 0, 1 or 2 decimal positions. |  |
| MIA07 | Claim MSP Pass-through Amount | R | 1-18 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2320.MIA07 must be <= 99,999,999.99. |  |
| MIA07 |  |  |  |  |  |  |  | 999 | $\underset{\substack{\text { IK403 = 6: "Invalid Character in Data } \\ \text { Element" }}}{ }$ | 2320 . MIA07 must be numeric. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MIA07 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 537 : "Claim MSP Pass-through Amount" | 2320.MIA07 must must be >= 0 . |  |
| MIA07 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal | 2320.MIA07 is limited to 0,1 or 2 decimal positions. |  |
| MIA08 | Claim PPS Capital Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MIA08 must be $<=99,999,999.99$. |  |
| MIA08 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 . MIA08 must be numeric. |  |
| MIA08 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 539: "Claim PPS Capital Amount" | 2320.MA108 must must be >= 0 . |  |
| MIA08 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal | 2320.MIA08 is limited to 0,1 or 2 decimal positions. |  |
| MIA09 | PPS-Capital FSP DRG Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MIA09 must be <= 99,999,999.99. |  |
| MIA09 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2320 .MIA09 must be numeric. |  |
| MIA09 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 620 : "PPS-Capital FSP DRG Amount" | 2320.MIA09 must must be >= 0 . |  |
| MIA09 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA09 is limited to 0,1 or 2 decimal positions. |  |
| MIA10 | PPS-Capital HSP DRG Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MIA10 must be <= 99,999,999.99. |  |
| MIA10 |  |  |  |  |  |  |  | 999 |  | 2320 .MIA10 must be numeric. |  |
| MIA10 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 621: "PPS-Capital HSP DRG Amount" | 2320.MIA10 must must be >= 0 . |  |
| MIA10 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA10 is limited to 0,1 or 2 decimal positions. |  |
| MIA11 | PPS-Capital DSH DRG Amount | R | 1-18 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2320.MIA11 must be <= 99,999,999.99. |  |
| MIA11 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 .MIA11 must be numeric. |  |
| MIA11 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 618: "PPS-Capital DSH DRG Amount" | 2320.MIA11 must must be >= 0 . |  |
| MIA11 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA11 is limited to 0,1 or 2 decimal positions. |  |
| MIA12 | Old Capital Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MIA12 must be $<=99,999,999.99$. |  |
| MIA12 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 .MIA12 must be numeric. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MIA12 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" CSC 603: "Old Capital Amount" | 2320.MIA12 must must be >= 0 . |  |
| MIA12 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA12 is limited to 0, 1 or 2 decimal positions. |  |
| MIA13 | PPS-Capital IME Amount | R | 1-18 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2320.MIA13 must be <= 99,999,999.99. |  |
| MIA13 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2320 . MIA13 must be numeric. |  |
| MIA13 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 622: "PPS-Capital IME Amount" | 2320.MIA13 must must be >= 0 . |  |
| MIA13 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA13 is limited to 0, 1 or 2 decimal positions. |  |
| MIA14 | PPS-Operating Hospital Speclfic DRG Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MIA14 must be <= 99,999,999.99. |  |
| MIA14 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2320 .MIA14 must be numeric. |  |
| MIA14 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 624: "PPS-Operating Hospital Specific DRG Amount" | 2320.MIA14 must must be >= 0 . |  |
| MIA14 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA14 is limited to 0, 1 or 2 decimal positions. |  |
| MIA15 | Cost Report Day Count | R | 1-15 | s |  |  |  | 999 | 1 K 403 = 5: "Data Element Too Long" | 2320.MIA15 must be 1-15 characters. |  |
| MIA15 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2320 . MIA15 must be numeric. |  |
| MIA15 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 552: "Cost Report Day Count" | 2320.MIA15 must must be >= 0 . |  |
| MIA16 | PPS-Operating Federal Speclic DRG Amount | R | 1-18 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2320.MIA16 must be <= 99,999,999.99. |  |
| MIA16 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 .MIA16 must be numeric. |  |
| MIA16 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 623: "PPS-Operating Federal Specific DRG Amount" | 2320.MIA16 must must be $>=0$. |  |
| MIA16 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA16 is limited to 0, 1 or 2 decimal positions. |  |
| MIA17 | Claim PPS Capital Outlier Amount | R | 1-18 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2320.MIA17 must be <= 99,999,999.99. |  |
| MIA17 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2320 . MIA17 must be numeric. |  |
| MIA17 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 540: "Claim PPS Capital Outlier Amount" | 2320.MIA17 must must be >= 0 . |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Reg. } \end{aligned}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MIA17 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA17 is limited to 0, 1 or 2 decimal positions. |  |
| MIA18 | $\begin{gathered} \hline \text { Claim Indirect Teaching } \\ \text { Amount } \\ \hline \end{gathered}$ | R | 1-18 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MIA18 must be <= 99,999,999.99. |  |
| MIA18 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 . MIA18 must be numeric. |  |
| MIA18 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 536: "Claim Indirect Teaching Amount" | 2320.MIA18 must must be >= 0 . |  |
| MIA18 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA18 is limited to 0,1 or 2 decimal positions. |  |
| MIA19 | Non-Payable Professional Component Amount | R | 1-18 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2320.MIA19 must be <= 99,999,999.99. |  |
| MIA19 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2320 . MIA19 must be numeric. |  |
| MIA19 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 597: "Non-payable Professional Component Amount" | 2320.MIA19 must must be >= 0 . |  |
| MIA19 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA19 is limited to 0, 1 or 2 decimal positions. |  |
| MIA20 | Remark Code | AN | 1-50 | s |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | 2330B.DTP03 when DTP01 = " 573 " is present, 2320.MIA20 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. |
| MIA2O |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 = " 573 " is not present, 2320.MIA20 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 = " 573 ". |  |
| MIA21 | Remark Code | AN | 1-50 | s |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | 2330B.DTP03 when DTP01 = "573" is present, 2320.MIA21 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. |
| MIA21 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 = " 573 " is not present, 2320.MIA21 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 = " 573 ". |  |
| MIA22 | Remark Code | AN | 1-50 | s |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | 2330B.DTP03 when DTP01 = "573" is present, 2320.MIA22 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. |
| MIA22 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 = " 573 " is not present, 2320.MIA22 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 $=$ " 573 ". |  |
| MIA23 | Remark Code | AN | 1-50 | s |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | 2330B.DTP03 when DTP01 = "573" is present, 2320.MIA23 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. |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MIA23 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | \|f $2330 \mathrm{~B} . \mathrm{DTP} 03$ with DTP01 $=$ " 573 " is not present. 2320.MIA23 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 = "573", |  |
| MIA24 | $\begin{gathered} \hline \text { PPS-Capital Exception } \\ \text { Amount } \\ \hline \end{gathered}$ | R | 1-18 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2320.MIA24 must be <= 99,999,999.99. |  |
| MIA24 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 . MIA24 must be numeric. |  |
| MIA24 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 619: "PPS-Capital Exception Amount" | 2320.MIA24 must must be >= 0 . |  |
| MIA24 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MIA24 is limited to 0, 1 or 2 decimal positions. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| MOA | OUTPATIENT ADJUDICATION INFORMATION |  | 1 | s | 2320 |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.MOA may be present. |  |
| MOA |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.MOA is allowed on outpatient claims. |  |
| MOA01 | Reimbursement Rate | R | 1-10 | s |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2320 .MOA01 must be numeric. |  |
| MOA01 |  |  |  |  |  |  |  | 999 | 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. |
| MOA01 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MOA01 is limited to 0,1 or 2 decimal positions. |  |
| MOA02 | $\begin{gathered} \hline \text { Claim HCPCS Payable } \\ \text { Amount } \end{gathered}$ | R | 1-18 | s |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320.MOA02 must be numeric. |  |
| MOA02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MOA02 must be <= 99,999,999.99. |  |
| MOA02 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 574: "HCPCS Payable Amount Home Health" | 2320.MOA02 must must be >= 0 . |  |
| MOA02 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MOA02 is limited to 0, 1 or 2 decimal positions. |  |
| MOA03 | Remark Code | AN | 1-50 | s |  |  |  | 277 | TBD07: Remark Code not valid for this date of service | 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 DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| MOA03 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.MOA03 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 = " 573 " |  |
| MOA04 | Remark Code | AN | 1-50 | s |  |  |  | 277 | TBD07: Remark Code not valid for this date of service | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.MOA04 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. <br> 01/08: Add clause to check for the 2330B. DTP |
| MOA04 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 = "573" is not present, 2320.MOA04 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 = " 573 ". |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MOA05 | Remark Code | AN | 1-50 | s |  |  |  | 277 | TBD07: Remark Code not valid for this date of service | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.MOA05 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. |
| MOA05 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B. DTP03 with DTP01 = " 573 " is not present, 2320.MOA05 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 = " 573 ". |  |
| MOA06 | Remark Code | AN | 1-50 | s |  |  |  | 277 | TBD07: Remark Code not valid for this date of service date of service | If 2330B.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. |
| MOA06 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 = "573" is not present, 2320.MOA06 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 = " 573 ". |  |
| MOA07 | Remark Code | AN | 1-50 | s |  |  |  | 277 | TBD07: Remark Code not valid for this date of service | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.MOA07 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 $=$ " 573 " DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| MOA07 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | If 2330B.DTP03 with DTP01 = "573" is not present, 2320.MOA07 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 = " 573 ". |  |
| MOA08 | Claim ESRD Payment Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 .MOA08 must be numeric. |  |
| MOA08 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MOA08 must be <= 99,999,999.99. |  |
| MOA08 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 534: "Claim ESRD Payment Amount" | 2320.MOA08 must must be $>=0$. |  |
| MOA08 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MOA08 is limited to 0, 1 or 2 decimal positions. |  |
| MOA09 | Non-Payable Professional Component Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2320 .MOA09 must be numeric. |  |
| MOA09 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2320.MOA09 must be <= 99,999,999.99. |  |
| MOA09 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 598: "Non-payable Professional Component Billed Amount" | 2320.MOA09 must must be >= 0 . |  |
| MOA09 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2320.MOA09 is limited to 0, 1 or 2 decimal positions. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | оTHER SUBSCRIBER NAME |  | 1 | R | 2330A | 1 |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2320.SBR is present, 2330A.NM1 must be present. |  |
| NM1 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 2330A.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | IL | 999 | IK403 = 1: "Required Data Element Missing" | 2330A.NM101 must be present. |  |


| Element IDENTIFIER | Description | ID | Min. | $\begin{aligned} & \text { Usage } \\ & \text { Rea. } \end{aligned}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM101 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2330A.NM101 must be "LL". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | \|K403 = 1: "Required Data Element Missing" | 2330A.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2330A.NM102 must be valid values. |  |
| NM103 | Other Insured Last Name | AN | 1-60 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2330A.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2330A.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2330A.NM103 must be populated with accepted AN characters. |  |
| Nм103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2330A.NM103 must contain at least one non-space character. |  |
| NM104 | Other Insured First Name | AN | 1-35 | s |  |  |  | 999 | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 2330A.NM102 is " 2 ", 2330A.NM104 must not be present. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2330A.NM104 must be 1-35 characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM104 must contain at least one non-space character. |  |
| NM104 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK } 403=6: \text { "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2330A.NM104 must be populated with accepted AN characters. |  |
| NM105 | Other Insured Middle Name | AN | 1-25 | s |  |  |  | 999 | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 2330A.NM102 is " 2 ", 2330A.NM105 must not be present. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2330A.NM105 must be 1-25 characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2330A.NM105 must contain at least one non-space character. |  |
| NM105 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK } 403=6: \text { "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2330A.NM105 must be populated with accepted AN characters. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
| NM107 | Other Insured Name Suffix | AN | 1-10 | s |  |  |  | 999 | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 2330A.NM102 is " 2 ", 2330A.NM107 must not be present. |  |
| NM107 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2330A.NM107 must be 1-10 characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2330A.NM107 must contain at least one non-space character. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM107 must be populated with accepted AN characters. |  |
| NM108 | Identfication CodeQualifier | ID | 1-2 | R |  |  | II, M1 | 999 | 1K403 = 1: "Required Data Element Missing" | 2330A.NM108 must be present. |  |
| NM108 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2330A.NM108 must be valid values. |  |
| NM109 | Other Insured Identifier | AN | 2-80 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2330A.NM109 must be present. |  |
| NM109 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2330A.NM109 must be 2-80 characters. |  |
| NM109 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM109 must contain at least two non-space characters. |  |
| NM109 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM109 must be populated with accepted AN characters. |  |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM112 | $\begin{array}{\|c\|} \hline \text { Name Last or Organization } \\ \text { Name } \end{array}$ | AN | 1-60 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N3 | OTHER SUBSCRIBER ADDRESS |  | 1 | s | 2330A |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2330A.NM1 is present, 2330A.N3 may be present. |  |
| N3 |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds | Only one iteration of 2330A.N3 is allowed. |  |
| N301 | Other Insured Address Line | AN | 1-55 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2330A.N301 must be present. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK 403 = 5: "Data Element Too Long" | 2330A.N301 must be 1-55 characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330A.N301 must be populated with accepted AN characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data <br> Element" | 2330AN301 must contain at least one non-space character. |  |
| N302 | Other Insured Address Line | AN | 1-55 | S |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2330 \mathrm{~A} . \mathrm{N} 301$ is present, then 2330A.N302 may be present. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2330A.N302 must be 1-55 characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | $\substack{\text { IK403 }=6: ~ " I n v a l i d ~ C h a r a c t e r ~ i n ~ D a t a ~}$ <br> Element" | 2330A.N302 must be populated with accepted AN characters |  |
| N302 |  |  |  |  |  |  |  | 999 | $\underset{\substack{\text { IK403 = 6: "Invalid Character in Data } \\ \text { Element" }}}{\substack{ \\\hline \\ \hline}}$ | 2330A.N302 must contain at least one non-space character. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N4 | OTHER SUBSCRIBER CITYISTATEIZIP CODE |  | 1 | s | 2330A |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330A.NM1 is present, 2330A.N4 must be present. |  |
| N4 |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330A.N4 is allowed. |  |
| N401 | Other Insured City Name | AN | 2-30 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2330A.N401 must be present. |  |
| N401 |  |  |  |  |  |  |  | 999 | K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2330A.N401 must be 2-30 characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2330A.N401 must be populated with accepted AN characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | $\substack{\text { IK403 }=6: ~ " I n v a l i d ~ C h a r a c t e r ~ i n ~ D a t a ~}$ <br> Element" | 2330A..N401 must contain at least two non-space |  |
| N402 | Other Insured State Code | ID | 2-2 | S |  |  |  | 999 | $\begin{aligned} & \text { \|K403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If $2330 \mathrm{~A} . \mathrm{N} 404$ is not present, 2330A.N402 must be present. |  |
| N402 |  |  |  |  |  |  |  | 277 | CSC = 501: "Entity's State/Province" | If 2330 A.N404 is not present, 2330A.N402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| N403 | $\begin{array}{\|c\|} \hline \text { Other Insured Postal Zone } \\ \text { or ZIP Code } \\ \hline \end{array}$ | ID | 3-15 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2330A.N404 is not present, 2330A.N403 must be present. |  |
| N403 |  |  |  |  |  |  |  | 277 | CSC = 500: "Entity's Postal/Zip Code" | If $2330 \mathrm{~A} . \mathrm{N} 404$ is not present, $2330 \mathrm{~A} . \mathrm{N} 403$ must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| N404 | Subscriber Country Code | ID | 2-3 | s |  |  |  | 277 | CSC = 680: "Entity's Country" | 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) |
| N405 | LocationQualifier | ID | 1-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/1 } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 277 | CSC 695: "Entity's 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) |
| N407 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | $\qquad$ |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | OTHER SUBSCRIBER SECONDARY IDENTIFICATION |  | 2 | s | 2330A |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2330A.NM1 is present, 2330A.REF may be present. |  |
| REF |  |  |  |  |  |  |  | 999 | 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. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | SY | 999 | IK403 = 1: "Required Data Element Missing" | 2330A.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2310A.REF01 must be "SY". |  |
| REF02 | Other Insured Additional Identifier | AN | 1-50 | R |  |  |  | 999 | K 403 = 1: "Required Data Element Missing" | 2330A.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 128: "Entity's tax id" | 2330A.REF02 must be 9 digits, with no punctuation. |  |
| REF03 | Description |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | OTHER PAYER NAME |  | 1 | R | 2330B | 1 |  | 999 | IK304 = I6: "Implementation Dependent Segment Missing" | If 2320.SBR is present, 2330B.NM1 must be present. |  |
| NM1 |  |  |  |  |  |  |  | 999 | IK 304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2330.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | PR | 999 | 1K403 = 1: "Required Data Element Missing" | 2330B.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2330B.NM101 must be "PR". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | 1K403 7: "Invalid Code Value" | 2330B.NM102 must be "2". |  |
| NM103 | Other Payer Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2300B.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330B.NM103 must be populated with accepted AN characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330B.NM103 must contain at least one non-space character. |  |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM108 | Identtication CodeQualifier | ID | 1-2 | R |  |  | PI, XV | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.NM108 must be present. |  |
|  |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2330B.NM108 must be valid values. |  |
| NM109 | Other Payer Primary Identifier | AN | 2-80 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.NM109 must be present. |  |
|  |  |  |  |  |  |  |  | 999 | IK403 = I12: "Implementation Pattern Match Failure" | 2330B.NM109 must = 2430.SVD01. |  |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| NM112 | $\underset{\substack{\text { Name Last or Organization } \\ \text { Name }}}{\text { N }}$ | AN | 1-60 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N3 | OTHER PAYER ADDRESS |  | 1 | s | 2330B |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2330B.NM1 is present, 2330B.N3 may be present. |  |
| N3 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { 1K304= 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2330B.N3 is allowed. |  |
| N301 | Other Payer Address Line | AN | 1-55 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.N301 must be present. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2330 B . N 301 must be 1-55 characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330B.N301 must be populated with accepted AN characters. |  |
| N301 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330B.N301 must contain at least one non-space character. |  |
| N302 | Other Payer Address Line | AN | 1-55 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = } 10 \text { : "Exclusion Condition } \\ & \text { Violated": } \\ & \hline \end{aligned}$ | If 2330B.N301 is present, then 2330B.N302 may be present. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2330B. N302 must be 1-55 characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330B.N302 must be populated with accepted AN characters. |  |
| N302 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330B.N302 must contain at least one non-space character. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N4 | OTHER PAYER CITYISTATEIZIP CODE |  | 1 | R | 2330B |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.N4 must be present. |  |
| N4 |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.N4 is allowed. |  |
| N401 | Other Payer City Name | AN | 2-30 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.N401 must be present. |  |
| N401 |  |  |  |  |  |  |  | 999 | K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2330B.N401 must be 2-30 characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330B.N401 must be populated with accepted AN characters. |  |
| N401 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2330B.N401 must contain at least two non-space |  |
| N402 | Other Payer State Code | ID | 2-2 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2330 A.N404 is not present, 2330A.N402 must be present. |  |
| N402 |  |  |  |  |  |  |  | 277 | CSC = 501: "Entity's State/Province" | If 2330B.N404 is not present, 2330B.N402 must be a | Valid State Code reference must be available for this edit. |
| N403 | Other Payer Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2330A.N404 is not present, 2330A.N403 must be present. |  |


| Element IDENTIFIER | Description | ID | Min. <br> Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N403 |  |  |  |  |  |  |  | 277 | CSC = 500: "Entity's Postal/Zip Code" | If 2330B.N404 is not present, 2330B.N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| N404 | Payer Country Code | ID | 2-3 | s |  |  |  | 277 | CSC = 680: "Entity's Country" | 2330B.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) |
| N405 | LocationQualifier | ID | 1-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 277 | CSC 695: "Entity's Country Subdivision Code" | 2330B.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) |
| N407 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | If 2330B.N407 is present, then 2330B.N404 must not $=$ "US" or CAN". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| DTP | CLAIM CHECK OR REMITTANCE DATE |  | 1 | s | 2330B |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2330B.NM1 is present, 2330B.DTP may be present. |  |
| DTP |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only one iteration of 2330B.DTP is allowed. |  |
| DTP |  |  |  |  |  |  |  | 999 | IK304 = 2: "Unexpected Segment" | If 2330B.NM1 is present and 2430.DTP with DTP01 <br> = " 573 " is not present, 2330B.DTP may be present. |  |
| DTP01 | Date TimeQualifier | ID | 3-3 | R |  |  | 573 | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.DTP01 must be present. |  |
| DTP01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2330B.DTP01 must be "573" |  |
| DTP02 | Date Time Period FormatQualifier | ID | 2-3 | R |  |  | D8 | 999 | 1K403 = 1: "Required Data Element Missing" | 2330B.DTP02 must be present. |  |
| DTP02 |  |  |  |  |  |  |  | 999 | 1 K 403 = 7 : "Invalid Code Value" | 2330B.DTP02 must be "D8". |  |
| DTP03 | $\begin{gathered} \hline \text { Adjudication or Payment } \\ \text { Date } \\ \hline \end{gathered}$ | AN | 1-35 | R |  |  | CCYYMMDD | 999 | \|K403 = 8: "Invalid Date" | 2330B.DTP03 must a valid date in CCYYMMDD format. |  |
| DTP03 |  |  |  |  |  |  |  | 277 | CSC 510: "Future date" CSC 516 "Adjudication or Payment Date" | 2330B.DTP03 must not be a future date. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | OTHER PAYER SECONDARY IDENTIFIER |  | 2 | s | 2330B |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "2U", "El", "FY" or "NF" may be present. |  |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2330B.REF with REF01 = "2U", "El", "FY" or "NF" are allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 2U, EI, FY, NF | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2330B.REF01 must be valid values. |  |
| REF02 | Other Payer Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 128: "Entity's tax id" | If 2330B.REF01 = "EI", 2330B.REF02 must be 9 digits |  |
| REF02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { If } 2330 \mathrm{~B} . \mathrm{REFO1}=\text { " } 2 \mathrm{U} \text { ", "FY" or "NF", 2330B.REF02 } \\ & \text { must be must be } 1-50 \text { characters. } \end{aligned}$ |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 999 | K403 = 6: "Invalid Character in Data Element" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | OTHER PAYER PRIOR AUTHORIZATION NUMBER |  | 1 | s | 2330B |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "G1" may be present. |  |
| REF |  |  |  |  |  |  |  | 999 | 1K304 = 5: "Segment Exceeds | Only one iteration of 2330B.REF with REF01 = "G1" is allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G1 | 999 | \|K403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2330B.REF01 must be "G1". |  |
| REF02 | Other Payer Prior Authorization or Referral | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2330B.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | OTHER PAYER REFERRAL NUMBER |  | 1 | s | 2330B |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "9F" may be present. |  |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "9F" is allowed. |  |
| REF01 | $\begin{gathered} \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | 9 F | 999 | \|K403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
|  |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2330B.REF01 must be "SF". |  |
| REF02 | Other Payer Referral Number | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
|  |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2330B.REF02 must be 1-50 characters. |  |
|  |  |  |  |  |  |  |  | 999 | IK403 $=6: ~ " I n v a l i d ~ C h a r a c t e r ~ i n ~ D a t a ~$ Element" | 2330.REF02 must be populated with accepted AN characters. |  |
|  |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |


| Element IDENTIFIER | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF | OTHER PAYER CLAIM ADJUSTMENT INDICATOR |  | 1 | s | 2330B |  |  | 999 | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "T4" may be present. |  |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "T4" is allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | T4 | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2330B.REF01 must be "T4". |  |
| REF02 | Other Payer Claim Adjustment Indicator | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2330B.REF02 must be = "Y". |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | OTHER PAYER CLAIM CONTROL NUMBER |  | 1 | s | 2330B |  |  | 999 | 1K304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "F8" may be present. |  |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "F8" is allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | F8 | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2330B.REF01 must be "F8". |  |
| REF02 | Other Payer Claim Control <br> Number | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2330B.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Other Payer Attending Provider Loop |  |  |  | 2330C | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330C Loop not allowed for Medicare. | Loops 2330C - 23301 are not supported because Medicare doesn't accept non Health Care Providers in the 2310 loops, so the NPI will always be trasmitted at the 2310 level. <br> 02/04: Companion Guide Note needed. |
| NM1 | OTHER PAYER ATTENDING PROVIDER |  | 1 | s | 2330C |  |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330C.NM1 must not be present. |  |
| REF | OTHER PAYER ATTENDING PROVIDER SECONDARY IDENTIFICATION |  | 4 | R | 2330C |  |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330C.REF must not be present. |  |


| $\begin{aligned} & \text { Element } \\ & \text { IDENTIFIER } \end{aligned}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Other Payer Operating Physician Loop |  |  |  | 2330D | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330D Loop not allowed for Medicare. |  |
| NM1 | OTHER PAYER OPERATING PHYSICIAN |  | 1 | s | 2330D | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330D.NM1 must not be present. |  |
| REF | OTHER PAYER OPERATING PHYSICIAN SECONDARY IDENTIFICATION |  | 4 | R | 2330D |  |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330D.REF must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Other Payer Other Operating Physician Loop |  |  |  | 2330E | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330E Loop not allowed for Medicare. |  |
| NM1 | OTHER PAYER OTHER OPERATING PHYSICIAN |  | 1 | s | 2330E | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330E.NM1 must not be present. |  |
| REF | OTHER PAYER OTHER OPERATING PHYSICIAN SECONDARY IDENTIFICATION |  | 4 | R | 2330E |  |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330E.REF must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Other Payer Service Facility Location Loop |  |  |  | 2330F | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330F Loop not allowed for Medicare. |  |
| NM1 | OTHER PAYER SERVICE <br> FACILITY <br> LOCATION |  | 1 | s | 2330F | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330F.NM1 must not be present. |  |
| REF | OTHER PAYER SERVICE FACILITY LOCATION SECONDARY IDENTIFICATION |  | 3 | R | 2330F |  |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330F.REF must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Other Payer Rendering Provider Loop |  |  |  | 2330G | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330G Loop not allowed for Medicare. |  |
| NM1 | OTHER PAYER RENDERING PROVIDER NAME |  | 1 | s | 2330G | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330G.NM1 must not be present. |  |
| REF | OTHER PAYER RENDERING PROVIDER SECONDARY IDENTIFIER |  | 4 | R | 2330 G |  |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330G.REF must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Other Payer Referring Provider Loop |  |  |  | 2330H | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330H Loop not allowed for Medicare. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM1 | OTHER PAYER REFERRING PROVIDER |  | 1 | s | 2330 H | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330H.NM1 must not be present. |  |
| REF | OTHER PAYER REFERRING PROVIDER SECONDARY IDENTIIER IDENTIFIER |  | 3 | R | 2330 H |  |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330H.REF must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Other Payer Billing Provider Loop |  |  |  | 23301 | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 23301 Loop not allowed for Medicare. |  |
| NM1 | OTHER PAYER BILLING PROVIDER |  | 1 | s | 23301 | 1 |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330H.NM1 must not be present. |  |
| REF | OTHER PAYER BILLING PROVIDER SECONDARY IDENTIFICATION |  | 2 | R | 23301 |  |  | 277 | TBD02: "Payer specific restriction on the number of repetitions" | 2330H.REF must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | Service Line Loop |  |  |  | 2400 |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | Only 449 iterations of the $\mathbf{2 4 0 0}$ loop are allowed. | CMS policy limit is 449 |
| Lx | SERVICE LINE NUMBER |  | 1 | R | 2400 | 999 |  | 999 | IK304 = 3: "Required Segment Missing" | 2400.LX must be present. |  |
| Lx |  |  |  |  |  |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2400 . \mathrm{LX}$ is allowed. |  |
| LX01 | Assigned Number | No | 1-6 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | $2400 . L \times 01$ must be present. |  |
| LX01 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2400.LX01 must be numeric. |  |
| LX01 |  |  |  |  |  |  |  | 277 | TBDO2: "Payer specific restriction on the number of repetitions" | 2400.LX01 must be > 0 and <= 449. |  |
| LX01 |  |  |  |  |  |  |  | 999 | IK403 = I12: "Implementation Pattern | The first 2400.LX01 must be "1". |  |
| LX01 |  |  |  |  |  |  |  | 999 | IK403 = I12: "Implementation Pattern Match Failure" | Subsequent 2400.LX01 values must increment by 1. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| sv2 | INSTITUTIONAL SERVICE LINE |  | 1 | R | 2400 |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2400.SV2 must be present. |  |
| Sv2 |  |  |  |  |  |  |  | 999 | IK304-5: "Segment Exceeds Maximum Use" | Only one iteration of $2400 . \mathrm{SV} 2$ is allowed. |  |
| SV201 | Revenue Code | AN | 1-48 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2400.SV201 must be present. |  |
| SV201 |  |  |  |  |  |  |  | 277 | CSC = 455: "Revenue code for services rendered" | 2400.SV201 must be a valid revenue code. | Valid Revenue Code reference must be available for this edit. |
| SV202 | COMPOSIIE |  |  | s |  |  |  |  |  |  |  |
| SV202-1 | Product or Service IDQualifier | ID | 2-2 | R |  |  | ER, HC, HP, IV, WK | 999 | 1K403 = 1: "Required Data Element Missing" | 2400.SV202-1 must be present. |  |
| SV202-1 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2400.SV202-1 must be "HP" or "HC". |  |
| SV202-2 | Procedure Code | AN | 1-48 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2400.SV202-2 must be present. |  |


| Element IDENTIFIER | Description | ID | ${ }_{\text {Min. }}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SV202-2 |  |  |  |  |  |  |  | 277 | CSC 507: "HCPCS" | When 2400.SV202-1 = "HC", 2400.SV202-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = "472" | Valid HCPCS reference must be available for this edit. |
| SV202-2 |  |  |  |  |  |  |  | 277 | CSC = 513: "HIPPS Rate Code for services Rendered" | When 2400.SV202-1 = "HP", 2400.SV202-2 must be a valid HIPPS Skilled Nursing Facility Rate Code. | Valid HIPPS Code reference must be available for this edit. |
| SV202-3 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV202-3 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| SV202-4 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV202-4 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| SV202-5 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV202-5 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| SV202-6 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered | 2400.SV202-6 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| SV202-7 | Description | AN | 1-80 | s |  |  |  | 999 | IK403 = 19: "Implementation Dependent Data Element Missing" | 2400.SV202-7 must be present. when 2400.SV202-2 contains a non-speclfic procedure code. | Valid Non-Sprecific Procedure Code reference must be available for this edit. |
| SV202-7 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2400.SV202-7 must be 1-80 characters. |  |
| SV202-7 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.SV202-7 must be populated with accepted AN characters. |  |
| SV202-7 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.SV202-7 must contain at least one non-space |  |
| SV202-8 | Produc//Service ID | AN | 1-48 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| SV203 | Line Item Charge Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2400.SV203 must be present. |  |
| SV203 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | $2400 . \mathrm{SV} 203$ must be numeric. |  |
| SV203 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2400.SV203 must be <= 99,999,999.99. |  |
| SV203 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 583: "Line Item Charge Amount" | 2400.SV203 must be >= 0 . |  |
| SV203 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 583: "Line Item Charge Amount" | 2400.SV203 is limited to 0,1 or 2 decimal positions. |  |
| SV204 | Unit or Basis for Measurement Code | ID | 2-2 | R |  |  | DA, UN | 999 | IK403 = 1: "Required Data Element Missing" | 2400.SV204 must be present. |  |
| SV204 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2400. SV204 must be valid values. |  |
| SV205 | Service Unit Count | R | 1-15 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2400.SV205 must be present. |  |
| SV205 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.SV205 must be numeric. |  |
| SV205 |  |  |  |  |  |  |  | 277 | CSC 402: "Amount must be greater than zero" <br> CSC 476: "Missing or invalid units of service" | 2400.SV205 must must be > 0 . |  |

## 837 - Institutional Edits

| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SV205 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2400. SV205 must be 1-7 digits, excluding the decimal. | 3/26: Companion Guide Note needed. 1-7 size only. |
| SV205 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 476: "Missing or invalid units of service" | 2400.SV205 must be an integer (whole number). | Limited to integers, no decimals. 3/26: Companion Guide Note needed. |
| SV206 | Unit Rate | ID | 1-10 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| SV207 | Monetary Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2400.SV207 must be present. |  |
| SV207 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | $2400 . \mathrm{SV} 207$ must be numeric. |  |
| SV207 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400.SV207 must be <= 99,999,999.99. |  |
| SV207 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 596: "Non-covered Charge Amount" | 2400.SV207 must be >= 0 |  |
| SV207 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 596: "Non-covered Charge Amount" | 2400 SV207 is limited to 0,1 or 2 decimal positions. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| PWK | LINE SUPPLEMENTAL INFORMATION |  | 10 | s | 2400 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of 2400.PWK are allowed. | pass thru, syntax only |
| PWK01 | Attachment Report Type Code | ID | 2-2 | R |  |  | 03, 04, 05, 06, 07, 08, 09, 10 , $11,13,15,21, \mathrm{~A}, ~ \mathrm{~A} 4, \mathrm{AM}, \mathrm{AS}$, 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, PQ, PY, PZ, RB, RR, RT, RX, SG, V5, XP | 999 | IK403 = 1: "Required Data Element Missing" | 2400.PWK01 must be present. |  |
| PWK01 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2400.PWK01 must be valid values. |  |
| PWK02 | Attachment Transmission Code | ID | 1-2 | R |  |  | AA, BM, EL, EM, FT, FX | 999 | KK403 = 1: "Required Data Element Missing" | 2400.PWK02 must be present. |  |
| PWK02 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2400.PWK02 must be valid values. |  |
| PWK03 | Report Copies Needed | No | 1-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| PWK04 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| PWK05 | Identtication CodeQualifier | ID | 1-2 | s |  |  | AC | 999 | 1K403 = 2 "Conditional Required Data Element Missing" | When 2400.PWK05 is present, 2400.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |  |
| PWK05 |  |  |  |  |  |  |  | 999 | 1 K 403 = 7: "Invalid Code Value" | 2400.PWK05 must be "AC". |  |
| PWK06 | Identfication Code | AN | 2-80 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = } 2 \text { "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | When 2400.PWK06 is present, 2400.PWK02 must be "BM", "EL", "EM", "FX" or "FT" |  |


| Element IDENTIFIER | Description | ID | ${ }_{\text {Min. }}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PWK06 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2400.PWK06 must be 2-50 characters. |  |
| PWK06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.PWK06 must be populated with accepted AN characters. |  |
| PWK06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.PWK06 must contain at least two non-space |  |
| PWK07 | Description | AN | 1-80 | N/U |  |  |  | 999 | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| PWK08 | ACTIONS INDICATED |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| PWK09 | Request Category Code | ID | 1-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| DTP | SERVICE LINE DATE |  | 1 | s | 2400 |  |  | 999 | IK304 = 3: "Required Segment Missing" | 2400.DTP with DTP01- "472" must be present. |  |
| DTP |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400. DTP with DTP01 $=$ "472" is allowed. |  |
| DTP01 |  |  |  |  |  |  | 472 | 999 | K 403 = 1: "Required Data Element Missing" | 2400.DTP01 must be "472". |  |
| DTP01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "IIvalid Code Value" | 2400. DTP01 must be valid values. |  |
| DTP02 | Date Time Period FormatQualifier | ID | 2-3 | R |  |  | D8, RD8 | 999 | IK403 = 1: "Required Data Element Missing" | 2400.DTP02 must be present. |  |
| DTP02 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "IIvalid Code Value" | 2400. DTP02 must be valid values. |  |
| DTP03 | Service Date | AN | 1-35 | R |  |  | CYYMMDD, CCYYMMDD CCYYMMDD | 999 | IK403 = 1: "Required Data Element Missing" | 2400.DTP03 must be present. |  |
| DTP03 |  |  |  |  |  |  |  | 999 | 1K403 = 8: "Invalid Date" | If 2400. DTP02 $=$ "D8" then 2400. DTP03 must be a valid date in CCYYMMDD format valid date in CCYYMMDD format. |  |
| DTP03 |  |  |  |  |  |  |  | 999 | IK403 $=8$ : "Invalid Date" | If 2400. DTP02 $=$ "RD8*" then 2400.DTP03 must be a valid date in CCYYMMDD-CCYYMMDD format. |  |
| DTP03 |  |  |  |  |  |  |  | 277 | CSC 510: "Future date" CSC 187: "Date(s) of service" | 2400. DPT03 may not be a future date. | CMS business edit. 02/04: Companion Guide Note needed |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | LINE ITEM CONTROL number |  | 1 | s | 2400 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400. REF with REF01 = " $6 R$ " is allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 6R | 999 | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "IIvalid Code Value" | 2400.REF01 must be "6R". |  |
| REF02 | Line Item Control Number | AN | 1-30 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-30 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one non-space character. |  |


| Element IDENTIFIER | Description | ID | Min. <br> Max. | $\begin{aligned} & \text { Usage } \\ & \text { Rea } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/1 } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 584: "Line Item Control Number" | 2400.REF02 must be unique within a single iteration of 2400.CLM01. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | REPRICED LINE ITEM REFERENCE NUMBER |  | 1 | s | 2400 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400 .REF with REF01 = "9B" is allowed. | pass through, syntax only |
| REF01 | $\begin{gathered} \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | 9B | 999 | \|K403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | \|K403 = 7: "Invalid Code Value" | 2400.REF01 must be "9B". |  |
| REF02 | Repriced Line Item Reference Number | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | ADJUSTED REPRICED LINE ITEM REFERENCE NUMBER |  | 1 | s | 2400 |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400 .REF with REF01 = "9D" is allowed. | pass through, syntax only |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9 D | 999 | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2400.REF01 must be "9D". |  |
| REF02 | Adjusted Repriced Line Item Reference Number | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one non-space character. |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| AMT | SERVICE TAX AMOUNT |  | 1 | s | 2400 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.AMT with AMT01 = "GT" is allowed. | pass through, syntax only |
| AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | GT | 999 | 1K403 = 1: "Required Data Element Missing" | 2400.AMT01 must be present. |  |
| AMT01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2400.AMT01 must be "GT". |  |
| AMT02 | Service Tax Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2400.AMT02 must be present. |  |
| AMT02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.AMT02 must be numeric. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{aligned} & \text { TA1/ } \\ & \text { 999/ } \\ & \text { 277CA } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| AMT02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400.AMT02 Must be <= 99,999,999.99. |  |
| АмТ03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| AMT | FACILITY TAX AMOUNT |  | 1 | s | 2400 |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.AMT with AMT01 = "N8" is allowed. | pass through, syntax only |
| AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | N8 | 999 | IK403 = 1: "Required Data Element Missing" | 2400.AMT01 must be present. |  |
| AMT01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2400.AMT01 must be "N8". |  |
| AMT02 | Facility Tax Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2400.AMT02 must be present. |  |
| AмT02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.AMT02 must be numeric. |  |
| AMT02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400.AMT02 must be <= 99,999,999.99. |  |
| AMT03 | CreditDebit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NTE | THIRD PARTY ORGANIZATION NOTES |  | 1 | s | 2400 |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.NTE is allowed. | pass through, syntax only |
| NTE01 | Note Reference Code | ID | 3-3 | R |  |  | TPO | 999 | \|K403 = 1: "Required Data Element Missing" | 2400. $\mathrm{NTE01}$ must be present. |  |
| NTE01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2400.NTE01 must be "TPO". |  |
| NTE02 | Claim Note Text | AN | 1-80 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2400.NTE02 must be present. |  |
| NTE02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400.NTE02 must be 1-80 characters. |  |
| NTE02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.NTE02 must be populated with accepted AN characters. |  |
| NTE02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.NTE02 must contain at least one non-space character. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| HCP | LINE PRICING/REPRICING INFORMATION |  | 1 | s | 2400 |  |  | 999 | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2400 . \mathrm{HCP}$ is allowed. | pass through, syntax only |
| HCP01 | Pricing Methodology | ID | 2-2 | R |  |  | 00, 01, 02, 03, 04, 05, 06, 07, <br> $08,09,10,11,12,13,14$ | 999 | IK403 = 1: "Required Data Element Missing" | 2400.HCP01 must be present. |  |
| HCP01 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2400.HCP01 must be valid values. |  |
| HCP02 | Repriced Allowed Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2400.HCP02 must be present. |  |
| HCP02 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400.HCPO2 Must be <= 99,999,999.99. |  |
| нСРоз | Repriced Saving Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2400.HCPO3 Must be <= 99,999,999.99. |  |
| HCP04 | Repricing Organization Identifier | AN | 1-50 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400. HCP04 must be 1-50 characters. |  |
| HCP04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.HCP04 must be populated with accepted AN characters. |  |
| HCP04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.HCP04 must contain at least one non-space character. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HCP05 | $\begin{array}{\|c\|} \hline \text { Repricing Per Diem or Flat } \\ \text { Rate Amount } \end{array}$ | R | 1-9 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400.HCP05 must be 1-9 characters. |  |
| HCP06 | Repriced Approved Ambulatory Patient Group | AN | 1-50 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400. HCP06 must be 1-50 characters. |  |
| HCP06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2400.HCP06 must be populated with accepted AN characters. |  |
| HCP06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data | 2400.HCP06 must contain at least one non-space character. |  |
| HCP07 | $\qquad$ | R | 1-18 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400.HCP07 Must be $<=99,999,999.99$. |  |
| HCP08 | Product/Service ID | AN | 1-48 | s |  |  |  | 277 | CSC = 455: "Revenue code for services rendered" | 2400. HCP 08 must be a valid revenue code. | Valid Revenue Code reference must be available for this edit. |
| HCP09 | Product or Service IDQualifier | ID | 2-2 | s |  |  | ER,HC, HP,IV, WK | 999 | 1K403 = 7: "Invalid Code Value" | 2400.HPC09 must be "HP" or "HC". |  |
| HCP09 |  |  |  |  |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2400.HPC10 is present, 2400. HPC09 must be present. |  |
| HCP10 | Procedure Code | AN | 1-48 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2400.HPC09 is present, 2400. HPC10 must be present. |  |
| HCP10 |  |  |  |  |  |  |  | 277 | CSC 507: "HCPCS" | When 2400.HCP09 = "HC", 2400. HCP10 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = "472". | Valid HCPCS reference must be available for this edit. |
| HCP10 |  |  |  |  |  |  |  | 277 | CSC = 513: "HIPPS Rate Code for services Rendered" | When 2400.HCP10 = "HP", 2400.SV202-2 must be a valid HIPPS Skilled Nursing Facility Rate Code. | Valid HIPPS Code reference must be available for this edit. |
| HCP11 | Unit or Basis for Measurement Code | ID | 2-2 | s |  |  | DA, UN | 999 | IK403 = 7: "Invalid Code Value" | $2400 . \mathrm{HCP11}$ must be valid values. |  |
| HCP11 |  |  |  |  |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2400. HPC12 is present, 2400. HPC11 must be present. |  |
| HCP12 | Repriced Approved Service Unit Count "DA" "UN" | R | 1-15 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2400.HPC11 is present, 2400. HPC12 must be present. |  |
| HCP12 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2400.HCP12 Must be <= 999,999.99. |  |
| HCP12 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | When a decimal is used in $2400 . \mathrm{HCP} 12$, the maximum digits to the right of the decimal is 3 . |  |
| HCP13 | Reject Reason Code | ID | 2-2 | s |  |  | T1, T2, T3, T4, T5, T6 | 999 | 1K403 = 7: "Invalid Code Value" | $2400 . \mathrm{HCP13}$ must be valid values. |  |
| HCP14 | Policy Compliance Code | ID | 1-2 | s |  |  | 1, 2, 3, 4, 5 | 999 | 1K403 = 7: "Invalid Code Value" | 2400. HCP14 must be valid values. |  |
| HCP15 | Exception Code | ID | 1-2 | s |  |  | 1, 2, 3, 4, 5, 6 | 999 | 11403 = 7: "Invalid Code Value" | $2400 . \mathrm{HCP15}$ must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| LIN | drug identification |  | 1 | s | 2410 | 1 |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2410.LIN is allowed. |  |
| LIN01 | Assigned Identlfication | AN | 1-20 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| LIN02 | Product or Service IDQualifier | ID | 2-2 | R |  |  | N4 | 999 | IK403 = 1: "Required Data Element Missing" | 2410.LIN02 must be present. |  |
| LIN02 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | $2410 . L$ INO2 must be "N4". |  |
| LIN03 | National Drug Code | AN | 1-48 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2410.LIN03 must be present. |  |
| LIN03 |  |  |  |  |  |  |  | 277 | CSC 218: "NDC Number" | 2410.LIN03 must be a valid NDC code. | Valid NDC code reference must be available for this edit. |


| $\begin{aligned} & \text { Element } \\ & \text { IDENTIFIER } \end{aligned}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| LIN04 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| LIN05 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| LIN06 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not | Must not be present. |  |
| LIN07 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| LIN08 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| LIN09 | Produc//Service ID | AN | 1-48 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| LIN10 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| LIN11 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| LIN12 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not | Must not be present. |  |
| LIN13 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| LIN14 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| LIN15 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
| LIN16 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| LIN17 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| LIN18 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| LIN19 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| LIN20 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| LIN21 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| LIN22 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| LIN23 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| LIN24 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| LIN25 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| LIN26 | ProductService IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not | Must not be present. |  |
| LIN27 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| LIN28 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| LIN29 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| LIN30 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| LIN31 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | $\begin{aligned} & \text { Usage } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |  |  |  |
| CTP | DRUG QUANTITY |  | 1 | R | 2410 |  |  | 999 | 1K304 = I6: "Implementation Dependent Segment Missing" | If 2410.LIN is present, 2410.CTP must be present. |  |
| CTP |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2410.CTP is allowed. |  |
| CTP01 | Class of Trade Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| CTP02 | Price Identifier Code | ID | 3-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| CTP03 | Unit Price | R | 1-17 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CTP04 | National Drug Unit Count | R | 1-15 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2410.CTP04 must be present. |  |
| CTP04 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2410.CTP04 must be numeric. | Companion Guide Note needed. |
| CTP04 |  |  |  |  |  |  |  | 999 | IK403 = 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. |
| CTP04 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 216 "Drug information" | 2410.CTP04 is limited to 3 decimal positions. | 03/31: Medicare specific limitation. Companion Guide Note needed. |
| CTP05 | COMPOSITE UNIT OF MEASURE |  |  | R |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If CTP04 is present then CPT05 must be present. |  |
| CTP05-1 | Unit or Basis For Measurement Code | ID | 2-2 | R |  |  | F2, GR, ME, ML, UN | 999 | 1K403 = 1: "Required Data Element Missing" | 2410.CTP05-1 must be present. |  |
| CTP05-1 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2410.CTP05-1 must be valid values. |  |
| CTP05-2 | Exponent | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CTP05-3 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CTP05-4 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| CTP05-5 | Exponent | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |  |
| CTP05-6 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| CTP05-7 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| CTP05-8 | Exponent | R | 1-15 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CTP05-9 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| CTP05-10 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| CTP05-11 | Exponent | R | 1-15 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| CTP05-12 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| CTP05-13 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CTP05-14 | Exponent | R | 1-15 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CTP05-15 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CTP06 | Price MultiplierQualifier | ID | 3-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| CTP07 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CTP08 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| СTP09 | Basis of Unit Price Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| CTP10 | Condition Value | AN | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not | Must not be present. |  |
| CTP11 | Multiple Price Quantity | NO | 1-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | PRESCRIPTION OR COMPOUND DRUG association number |  | 1 | s | 2410 |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If $2410 . \mathrm{LIN}$ is present, 2410.REF may be present. | 06/04: Pass-through, syntax only. |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2410.REF is allowed. |  |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | VY, XZ | 999 | IK403 = 1: "Required Data Element Missing" | 2410.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2410.REF01 must be valid values. |  |
| REF02 | Prescription Number | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2410.REFO2 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2410.REF02 must be 1-50 characters. |  |
| REF02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2410.REFO2 must be populated with accepted AN characters |  |
| REF02 |  |  |  |  |  |  |  | 999 | 1K403 = 6: "Invalid Character in Data Element" | 2410.REF02 must contain at least one non-space character. |  |
| REF03 | Desciption | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | $\underset{\text { NAME }}{\substack{\text { OPERATING PHYICIAN } \\ \text { NAN }}}$ |  | 1 | s | 2420A | 1 |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420A.NM1 is allowed. | pass through, syntax only |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 72 | 999 | IK403 = 1: "Required Data Element Missing" | 2420A.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2420A.NM101 must be "72". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | IK403 = 1: "Required Data Element Missing" | 2420A.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2420A.NM102 must be "1". |  |
| NM103 | Last Name | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2420A.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2420A.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM103 must be populated with accepted AN characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM103 must contain at least one non-space character. |  |
| NM104 | First Name | AN | 1-35 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2420A.NM104 must be 1-35 characters. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM104 must be populated with accepted AN characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM104 must contain at least one non-space character. |  |
| NM105 | Middle Name | AN | 1-25 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2420A.NM105 must be 1-25 characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM105 must be populated with accepted AN characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM105 must contain at least one non-space |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| NM107 | Name Suffix | AN | 1-10 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2420A.NM107 must be 1-10 characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM107 must be populated with accepted AN characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM107 must contain at least one non-space character. |  |
| NM108 | Identtication CodeQualifier | ID | 1-2 | s |  |  | xX | 277 | TBD01: "Situational segment/element required for adjudication." | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 277 | TBD01: "Situational segment/element required for adjudication." | 2420A.NM108 must be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2420A.NM108 must be "XX". |  |
| NM109 | Identifier | AN | 2-80 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | 2420A.NM109 must be present when 2420A.NM108 is present. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2420A.NM109 must be valid according to the NPI algorithm. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" Identifier (NPI)" | The first position of 2420A.NM109 must be a "1". |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2420A.NM109 must be a valid NPI on the Crosswalk | Valid NPI Crosswalk must be available for this edit. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM112 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Name Last or Organization } \\ \text { Name } \end{array} \\ \hline \end{array}$ | AN | 1-60 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | OPERATING PHYSICIAN SECONDARY IDENTIFICATION |  | 20 | s | 2420A |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2420A.REF with REF01 = " 1 G " may be present when 2420A.NM1 is present and 2420A.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of 2420 B. REF with REF01 $=$ " 1 G " is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420C.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | 1K403 = 1: "Required Data Element Missing" | 2420A.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2420A.REF01 must be "1G". |  |
| REF02 | Secondary Identifier | AN | 1-50 | R |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2420A.REFO2 must be 6 characters. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Rea } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2420A.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | COMPOSITE UNIT OF MEASURE |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | OTHER OPERATING PHYSICIAN NAME |  | 1 | s | 2420B | 1 |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420B.NM1 is allowed. |  |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | zz | 999 | IK403 = 1: "Required Data Element Missing" | 2420B.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2420B.NM101 must be "ZZ". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | IK403 - 1: "Required Data Element Missing" | 2420B.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2420B.NM102 must be "1". |  |
| NM103 | Last Name | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2420B.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2420B.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM103 must be populated with accepted AN characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM103 must contain at least one non-space |  |
| NM104 | First Name | AN | 1-35 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2420B. NM104 must be 1-35 characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM104 must be populated with accepted AN characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM104 must contain at least one non-space character. |  |
| NM105 | Middle Name | AN | 1-25 | s |  |  |  | 999 | K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2420B. NM105 must be 1-25 characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM105 must be populated with accepted AN characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM105 must contain at least one non-space character. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| NM107 | Name Suffix | AN | 1-10 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2420B. NM107 must be 1-10 characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM107 must be populated with accepted AN characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM107 must contain at least one non-space character. |  |
| NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xX | 277 | TBD01: "Situational segment/element required for adjudication." | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only <br> 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 277 | TBD01: "Situational segment/element required for adjudication." | 2420B.NM108 must be present. | Everyone butTrailblazer. <br> 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2420B.NM108 must be "XX". |  |
| NM109 | Identifier | AN | 2-80 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | 2420B.NM109 must be present when 2420B.NM108 is present. |  |


| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2420B.NM109 must be valid according to the NPI algorithm. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | The first position of 24208.Nm109 must be a "1". |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2420B.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | Valid NPI Crosswalk must be available for this edit. available for this edit. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM112 | $\underset{\text { Name }}{\text { Name Last or Organization }}$ | AN | 1-60 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | OTHER OPERATING PHYSICIAN SECONDARY IDENTIFICATION |  | 20 | s | 2420B |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2420B.REF with REF01 $=$ " 1 G " may be present when 2420B.NM1 is present and 2420B.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of $2420 B$. REF with REF01 $=$ " 1 G " is allowed. | Trailblazer Only oi/bo: Companion Guide Note needed |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420B.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | IK403 = 1: "Required Data Element Missing" | 2420B.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | 1K403 7: "Invalid Code Value" | 2420B.REF01 must be "1G". |  |
| REF02 | Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2420B.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2420B.REF02 must be 6 characters. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2420B.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit) |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | RENDERING PROVIDER NAME |  | 1 | s | 2420 C | 1 |  | 999 | 1K304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420 C .NM1 is allowed. | 03/27: CR 6289 is analysis only (no changes) - no revisit needed until implementation CR |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 82 | 999 | IK403 = 1: "Required Data Element Missing" | 2420C. NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2420C.Nm101 must be "82". |  |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | IK403 = 1: "Required Data Element Missing" | 2420C.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  | 999 | IK 403 = 7: "Invalid Code Value" | 2420C.NM102 must be "1". |  |
| NM103 | Rendering Provider Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2420C.NM103 must be present. |  |
| NM103 |  |  |  |  |  |  |  | 999 | K403 = 5: "Data Element Too Long" | 2420C.NM103 must be 1-60 characters. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM103 must be populated with accepted AN characters. |  |
| NM103 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM103 must contain at least one non-space character. |  |
| NM104 | Rendering Provider First Name | AN | 1-35 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2420C.NM104 must be 1-35 characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM104 must be populated with accepted AN characters. |  |
| NM104 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM104 must contain at least one non-space character. |  |
| NM105 | Rendering Provider Middle <br> Name | AN | 1-25 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2420C.NM105 must be 1-25 characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM105 must be populated with accepted AN characters. |  |
| NM105 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM105 must contain at least one non-space character. |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM107 | $\substack{\text { Rendering Provider Name } \\ \text { Suffix }}$ | AN | 1-10 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2420C.NM107 must be 1-10 characters. |  |
| NM107 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM107 must be populated with accepted AN |  |
| NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | TBD01: "Situational segment/element required for adjudication." | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 277 | TBD01: "Situational segment/element required for adjudication." | 2420C.NM108 must be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2420C.NM108 must be "XX". |  |
| NM109 | $\begin{gathered} \hline \text { Rendering Provider } \\ \text { Identifier } \end{gathered}$ | AN | 2-80 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | 2420 C. NM109 must be present when 2420C.NM108 is present. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2420C.NM109 must be valid according to the NPI algorithm. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | The first position of 2420 C . Nm 109 must be a "1". |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2420C.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | Valid NPI Crosswalk must be available for this edit. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM112 | $\underset{\text { Name Last or Organization }}{\text { Name }}$ | AN | 1-60 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| REF | RENDERING PROVIDER SECONDARY identification |  | 20 | s | 2420 C |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2420C.REF with REF01 = "1G" may be present when 2420C.NM1 is present and 2420C.NM109 is not present. | Trailblazer Only <br> 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of 2420 C .REF with REF01 = "1G" is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420C.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |


| Element IDENTIFIER | Description |  | ID | Min. | Usage Reg. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF01 | Reference Identification Qualifier | ID |  | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | 1K403 = 1: "Required Data Element Missing" | 2420C.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2420C.REF01 must be "1G". |  |
| REF02 | Rendering Provider Secondary Identifier | AN |  | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2420C.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2420C.REF02 must be 6 characters. |  |
| REF02 |  |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2420C.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| REF03 | Description | AN |  | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  |  | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | REFERRING PROVIDER NAME |  |  | 1 | s | 2420D | 1 |  | 999 | 1K304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420D.NM1 is allowed. |  |
| NM1 |  |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2420D.NM1 may be present on a combined (facility and professional compenents) claim. |  |
| NM101 | Entity Identifier Code | ID |  | 2-3 | R |  |  | DN | 999 | IK403 = 1: "Required Data Element Missing" | 2420D.NM101 must be present. |  |
| NM101 |  |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2420D.NM101 must be "DN". |  |
| NM102 | Entity Type Qualifier | ID |  | 1-1 | R |  |  | 1 | 999 | IK403 = 1: "Required Data Element Missing" | 2420D.NM102 must be present. |  |
| NM102 |  |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2420D.NM102 must be "1". |  |
| NM103 | Referring Provider Last Name | AN |  | 1-60 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2420D.NM103 must be present. |  |
| Nм103 |  |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2420D.NM103 must be 1-60 characters. |  |
| NM103 |  |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM103 must be populated with accepted AN |  |
| NM103 |  |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM103 must contain at least one non-space character. |  |
| NM104 | Referring Provider First Name | AN |  | 1-35 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2420D.NM104 must be 1-35 characters. |  |
| NM104 |  |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM104 must be populated with accepted AN characters. |  |
| NM104 |  |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM104 must contain at least one non-space |  |
| NM105 | Referring Provider Middle Name or Initial | AN |  | 1-25 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2420D.NM105 must be 1-25 characters. |  |
| NM105 |  |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM105 must be populated with accepted AN characters. |  |
| NM105 |  |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM105 must contain at least one non-space |  |
| NM106 | Name Prefix | AN |  | 1-10 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM107 | Referring Provider Name Suffix | AN |  | 1-10 | s |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2420D.NM107 must be 1-10 characters. |  |
| NM107 |  |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM107 must be populated with accepted AN characters. |  |
| NM107 |  |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM107 must contain at least one non-space character. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | TBDO1: "Situational segment/element required for adjudication." | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 277 | TBD01: "Situational segment/element required for adjudication." | 2420D.NM108 must be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| NM108 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2420D.NM108 must be "XX". |  |
| NM109 | Referring Provider Identifier | AN | 2-80 | S |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | 2420D.NM109 must be present when 2420D.NM108 is present. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2420D.NM109 must be valid according to the NPI algorithm. |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | The first position of 2420D.NM109 must be a "1". |  |
| NM109 |  |  |  |  |  |  |  | 277 | CSC 562: "Entity's National Provider Identifier (NPI)" | 2420D.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000 B.NM109. | Valid NPI Crosswalk must be available for this edit. |
| NM109 |  |  |  |  |  |  |  | 999 | IK403 = I12: "Implementation Pattern Match Failure" | 2420D. $\mathrm{NM109}$ must not $=$ 2310A.Nm109. |  |
| NM109 |  |  |  |  |  |  |  | 999 | IK403 = I12: "Implementation Pattern Match Failure" | 2420D. $\mathrm{NM109}$ must not $=$ 2310F. $\mathrm{NM109}$. |  |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| NM112 | $\underset{\text { Name }}{\text { Name Last or Organization }}$ | AN | 1-60 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | REFERRING PROVIDER SECONDARY identification |  | 20 | s | 2420D |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2420D.REF with REF01 = " 1 G " may be present when 2420D.NM1 is present and 2420D.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 277 | TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of 2420D.REF with REF01 $=$ " 1 G " is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |
| REF |  |  |  |  |  |  |  | 999 | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420D.REF must not be present. | Everyone butTrailblazer. <br> 01/20: Companion Guide Note needed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2 | 999 | 1K403 = 1: "Required Data Element Missing" | 2420D.REF01 must be present. |  |
| REF01 |  |  |  |  |  |  |  | 999 | \|K403 = 7: "Invalid Code Value" | 2420D.REF01 must be "1G". |  |
| REF02 | Referring Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2420D.REF02 must be present. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2420D.REFO2 must be 6 characters. |  |
| REF02 |  |  |  |  |  |  |  | 277 | CSC 133: "Entity's UPIN" | 2420D.REFO2 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| REF04 | REFERENCE IDENTIFIER |  |  | S |  |  |  | 999 | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | LINE ADJUDICATION LOOP |  |  |  | 2430 |  |  | 999 | IK304 = 4: "Loop Occurs Over Maximum Times" | Only 15 iterations of the $\mathbf{2 4 3 0}$ loop are allowed. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| sVD | LINE ADJUDICATION INFORMATION |  | 1 | s | 2430 | 15 |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2430.SVD is allowed. |  |
| SVD01 | Payer Identifier | AN | 2-80 | R |  |  |  | 999 | \|K403 = 1: "Required Data Element Missing" | 2430.SVD01 must be present. |  |
| SVD01 |  |  |  |  |  |  |  | 999 | IK403 = I12: "Implementation Pattern Match Failure" | 2430.SVD01 must = 2330B.NM109 (for the same payer). |  |
| SVD02 | Service Line Paid Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2430.SVD02 must be present. |  |
| SVD02 |  |  |  |  |  |  |  | 999 | IK403 = 6: "IIvalid Character in Data Element" | 2430.SVD02 must be numeric. |  |
| SVD02 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" <br> CSC 643: "Service Line Paid Amount" | 2430.SVD02 must must be >= 0 . |  |
| SVD02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2430.SVD02 must be <= 99,999,999.99. |  |
| SVD02 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" | 2430.SVD02 is limited to 0,1 or 2 decimal positions. |  |
| SVD03 | COMPOSITE MEDICAL PROCEDURE IDENTIFIER |  |  | R |  |  |  |  |  |  |  |
| SVD03-1 | $\begin{gathered} \text { Product or Service } \\ \text { IDQualifier } \\ \hline \end{gathered}$ | ID | 2-2 | R |  |  | ER, HC, HP, IV, WK | 999 | IK403 = 1: "Required Data Element Missing" | 2430.SVD03-1 must be present. |  |
| SVD03-1 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2400.SVD03-1 must be "HP" or "HC". |  |
| SVD03-2 | Procedure Code | AN | 1-48 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2430.SVD03-2 must be present. |  |
| SVD03-2 |  |  |  |  |  |  |  | 277 | CSC 507: "HCPCS" | When 2430.SVD03-1 = "HC", 2430.SVD03-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = "472". | Valid HCPCS reference must be available for this edit. <br> 11/21: Revised edit |
| SVD03-2 |  |  |  |  |  |  |  | 277 | CSC = 513: "HIPPS Rate Code for services Rendered" | 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. |
| SVD03-3 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2430.SVD03-3 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| SVD03-4 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 999 | IK403 = 2 "Conditional Required Data Element Missing" | 2430.SVD03-4 is present, 2430.SVD03-3 must be present. |  |
| SVD03-4 |  |  |  |  |  |  |  | 277 | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2430.SVD03-4 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| SVD03-5 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 999 | IK403 = 2 "Conditional Required Data Element Missing" | 2430.SVD03-5 is present, 2430.SVD03-4 must be present. |  |
| SVD03-5 |  |  |  |  |  |  |  | 277 | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2430.SVD03-5 must be valid procedure modifier. | Valid Procedure Code ModIfier reference must be available for this edit. |
| SVD03-6 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 999 | IK403 = 2 "Conditional Required Data Element Missing" | $\underbrace{2430 . \text { SVD03-6 is present, } 2430 . \text { SVD03-5 must be }}_{\text {2 }}$ |  |
| SVD03-6 |  |  |  |  |  |  |  | 277 | CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2430.SVD03-6 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| SVD03-7 | $\begin{gathered} \hline \text { Procedure Code } \\ \text { Description } \\ \hline \end{gathered}$ | AN | 1-80 | s |  |  |  | 999 | 1K403 = 5: "Data Element Too Long" | 2430.SVD03-7 must be 1-80 characters. |  |
| SVD03-7 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD03-7 must be populated with accepted AN characters. |  |

## 837 - Institutional Edits

| Element IDENTIFIER | Description | ID | Min. Max. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SVD03-7 |  |  |  |  |  |  |  | 999 | $\left\lvert\, \begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" }\end{aligned}\right.$ | 2430.SVD03-7 must contain at least one non-space character. |  |
| SVD03-8 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | 1K403 = 110: "Implementation "Not | Must not be present. |  |
| SVD04 | Product or Service ID | AN | 1-48 | R |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
| SVD05 | Paid Service Unit Count | R | 1-15 | R |  |  |  | 999 | 1K403 = 1: "Required Data Element Missing" | 2430. SVD05 must be present. |  |
| SVD05 |  |  |  |  |  |  |  | 999 | \|K403 = 6: "Invalid Character in Data Element" | 2430. SVD05 must be numeric. |  |
| SVD05 |  |  |  |  |  |  |  | 277 | CSC 693: "Amount must be greater than or equal to zero" | 2430.SVD05 must must be >= 0 . |  |
| SVD05 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2430.SVD05 must be 1-8 digits, excluding the decimal. |  |
| SVD05 |  |  |  |  |  |  |  | 999 | IK 403 = 5: "Data Element Too Long" | 2430. SVD05 must be an integer (whole number). | Companion Guide Note needed. |
| SVD06 | Bundled or Unbundled Line <br> Number | N0 | 1-6 | s |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2430.SVD06 must be numeric. |  |
| SVD06 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2430.SVD06 must must $1-6$ digits. | Companion Guide Note needed. |
| SVD06 |  |  |  |  |  |  |  | 277 | CSC 526: "Bundled or Unbundled Line Number" | 2430.SVD06 must must be > 0 . |  |
| SVD06 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2430.SVD06 must must be a integer (no decimals). |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| CAS | LINE ADJUSTMENT |  | 5 | s | 2430 |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If $2430 . S V D$ is present, 2430.CAS may be present. |  |
| CAS |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only 5 iterations of 2430.CAS are allowed. |  |
| CAS01 | $\begin{aligned} & \hline \text { Claim Adjustment Group } \\ & \text { Code } \\ & \hline \end{aligned}$ | ID | 1-2 | R |  |  | $\mathrm{CO}, \mathrm{CR}, \mathrm{OA}, \mathrm{Pl}, \mathrm{PR}$ | 999 | IK403 = 1: "Required Data Element Missing" | 2430.CAS01 must be present. |  |
| CAS01 |  |  |  |  |  |  |  | 999 | 1K403 = 7: "Invalid Code Value" | 2430.CAS01 must be valid values. |  |
| CASO1 |  |  |  |  |  |  |  | 277 | CSC 696: "Group code not valid for this | If 2430.CAS01 = "CR" then 2430B.DTP with DTP01 = |  |
| CAS02 | Adjustment Reason Code | ID | 1-5 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2430.CAS02 must be present. |  |
| CAS02 |  |  |  |  |  |  |  | 277 | TBDO6: "Adjustment Reason Code not valid for this adjudication/payment date" | 2430.CASO2 must be a valid Claim Adjustment <br> Reason Code on the date in 2430. DTP03 when DTP01 <br> = "573". = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| CAS03 | Adjustment Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 1: "Required Data Element Missing" | 2430.CAS03 must be present. |  |
| CAS03 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS03 must be numeric. |  |
| CAS03 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" CSC 519: "Adjustment Amount" | 2430.CAS03 must not $=0$. |  |
| CAS03 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" CSC 519: "Adiustment Amount" | 2430.CAS03 is limited to 0, 1 or 2 decimal positions. |  |
| CAS03 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2430. CAS03 must be $>=-99,999,999.99$ and $<=99,999,999.99$. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS04 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | 1K403 = 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. |
| CAS04 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" CSC 520: "Adjustment Quantity" | 2430. CAS04 must not $=0$. |  |
| CAS05 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | 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. |
| CAS05 |  |  |  |  |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If $2430 . \mathrm{CASO2}$ is present, 2430.CAS05 may be present. |  |
| CAS06 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS05 is present, 2430.CAS06 must be present. |  |
| CAS06 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS06 must be numeric. |  |
| CAS06 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" | 2430. CAS06 must not $=0$. |  |
| CAS06 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2430.CAS06 must be >= -99,999,999.99. and <= 99,999,999.99. |  |
| CAS06 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" CSC 519: "Adiustment Amount" | 2430.CAS06 is limited to 0, 1 or 2 decimal positions. |  |
| CAS07 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2430. CAS05 is present, 2430. CAS07 may be present. |  |
| CAS07 |  |  |  |  |  |  |  | 999 | 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. |
| CAS07 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" | $2430 . \mathrm{CASO7}$ must not $=0$. |  |
| CAS08 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | 1K403 = 10: "Exclusion Condition Violated" | If 2430. CAS05 is present, 2430. CAS08 may be present. |  |
| CAS08 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | 2430.CAS08 must be a valid Claim Adjustment <br> Reason Code on the date in 2430.DTP03 when DTP01 <br> = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| CAS09 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS08 is present, 2430.CAS09 must be present. |  |
| CAS09 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS09 must be numeric. |  |
| CAS09 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" | 2430.CAS09 must not $=0$. |  |
| CAS09 |  |  |  |  |  |  |  | 999 | 1K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2430.CAS09 must be >=-99,999,999.99. and <= 99,999,999.99. |  |
| CAS09 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" | 2430.CAS09 is limited to 0, 1 or 2 decimal positions. |  |


| Element IDENTIFIER | Description | ID | Min. | Usage Reg. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS10 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS08 is present, 2430.CAS10 may be present. |  |
| CAS10 |  |  |  |  |  |  |  | 999 | 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. |
| CAS10 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" | 2430. CAS10 must not $=0$. |  |
| CAS011 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition | If 2430. CAS08 is present, 2430. CAS11 may be present. |  |
| CAS11 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date | 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. |
| CAS12 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2430. CAS1 is present, 2430.CAS12 must be present. |  |
| CAS12 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS12 must be numeric. |  |
| CAS12 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" | 2430.CAS12 must not $=0$. |  |
| CAS12 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS12 must be >=-99,999,999.99. and } \\ & <=99,999,999.99 \text {. } \end{aligned}$ |  |
| CAS12 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" | 2430.CAS12 is limited to 0,1 or 2 decimal positions. |  |
| CAS13 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS11 is present, 2430. CAS13 may be present. |  |
| CAS13 |  |  |  |  |  |  |  | 999 | 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. |
| CAS13 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" | 2430. CAS13 must not $=0$. |  |
| CAS14 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | 1K403 = 10: "Exclusion Condition Violated" | If 2430.CAS11 is present, 2430.CAS14 may be present. |  |
| CAS14 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | 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. |
| CAS15 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | $\begin{aligned} & \text { If 2430.CAS14 is present, } 2430 . \text { CAS15 must be } \\ & \text { present. } \end{aligned}$ |  |
| CAS15 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS15 must be numeric. |  |
| CAS15 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" | 2430.CAS15 must not $=0$. |  |
| CAS15 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2430.CAS15 must be $>=-99,999,999.99$. and <= 99,999,999.99. |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Reg. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS15 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" | 2430.CAS15 is limited to 0,1 or 2 decimal positions. |  |
| CAS16 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS14 is present, 2430.CAS16 may be |  |
| CAS16 |  |  |  |  |  |  |  | 999 | 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. |
| CAS16 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" | 2430. CAS16 must not $=0$. |  |
| CAS17 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | 1K403 = 10: "Exclusion Condition Violated" | If $2430 . \mathrm{CAS14}$ is present, 2430.CAS17 may be present. |  |
| CAS17 |  |  |  |  |  |  |  | 277 | TBD06: "Adjustment Reason Code not valid for this adjudication/payment date" | 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. |
| CAS18 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS17 is present, 2430.CAS18 must be present. |  |
| CAS18 |  |  |  |  |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS18 must be numeric. |  |
| CAS18 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" | 2430.CAS18 must not $=0$. |  |
| CAS18 |  |  |  |  |  |  |  | 999 | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & 2430 . \text { CAS15 must be }>=-99,999,999.99 \text {. and } \\ & <=99,999,999.99 \text {. } \end{aligned}$ |  |
| CAS18 |  |  |  |  |  |  |  | 277 | CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" | 2430.CAS18 is limited to 0,1 or 2 decimal positions. |  |
| CAS19 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS17 is present, 2430.CAS19 may be present. |  |
| CAS19 |  |  |  |  |  |  |  | 999 | 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. |
| CAS19 |  |  |  |  |  |  |  | 277 | CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" | 2430.CAS19 must not $=0$. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| DTP | LINE CHECK OR REMITTANCE DATE |  | 1 | R | 2430 |  |  | 999 | IK304 = I6: "Implementation Dependent Segment Missing" | If 2430.SVD is present, 2430.DTP must be present. |  |
| DTP |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" Maximum Use" | Only one iteration of 2430.DTP is allowed. |  |
| DTP01 | Date /TimeQualifier | ID | 3/3 | R |  |  | 573 | 999 | IK403 = 1: "Required Data Element Missing" | 2430.DTP01 must be present. |  |
| DTP01 |  |  |  |  |  |  |  | 999 | \|K403 = 7: "Invalid Code Value" | 2430.DTP01 must be "573". |  |
| DTP02 | Date /Time FormatQualifier | ID | 2/3 | R |  |  | D8 | 999 | IK403 = 1: "Required Data Element Missing" | 2430.DTP02 must be present. |  |
| DTP02 |  |  |  |  |  |  |  | 999 | 11403 = 7: "Invalid Code Value" | 2430.DTP02 must be "D8". |  |


| Element IDENTIFIER | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ 999 / \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP03 | $\begin{array}{c\|} \hline \text { Adjudication or Payment } \\ \text { Date } \\ \hline \end{array}$ | AN | 1/35 | R |  |  | CCYYMMDD | 999 | IK403 = 1: "Required Data Element Missing" | 2430.DTP03 must be present. |  |
| DTP03 |  |  |  |  |  |  |  | 999 | 1K403 = 8: "Invalid Date" | 2430.DTP03 must be a valid date in CCYYMMDD format. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| AMT | REMAINING PATIENT LIABILITY |  | 1 | s | 2430 |  |  | 999 | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If $2430 . S V D$ is present, $2430 . A M T$ may be present. | pass-through, syntax only |
| AMT |  |  |  |  |  |  |  | 999 | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2430.AMT is allowed |  |
| AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | EAF | 999 | IK403 = 1: "Required Data Element Missing" | 2430.AMT01 must be present. |  |
| AMT01 |  |  |  |  |  |  |  | 999 | IK403 = 7: "Invalid Code Value" | 2430.AMT01 must be "EAF". |  |
| AMT02 | Non-Covered Amount | R | 1-18 | R |  |  |  | 999 | IK403 = 6: "Invalid Character in Data Element" | 2430 .AMT02 must be numeric. |  |
| AMT02 |  |  |  |  |  |  |  | 999 | IK403 = 5: "Data Element Too Long" | 2430.AMTO2 must be <= 99,999,999.99. |  |
| AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | IK403 = 110: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| SE | TRANSACTION SET TRAILER |  | 1 | R |  |  |  | 999 | IK502: 2 "Transaction Set Trailer Missing". | SE must be present. |  |
| SE |  |  |  |  |  |  |  | 999 |  | Only one iteration of SE is allowed. |  |
| SE01 | Ttansaction Segment Count | NO | 1/10 | R |  |  |  | 999 | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be present. |  |
| SE01 |  |  |  |  |  |  |  | 999 | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be numeric. |  |
|  |  |  |  |  |  |  |  | 999 | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must equal the transaction segment count. |  |
| SE01 |  |  |  |  |  |  |  | 999 | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be > 0 . |  |
| SE02 | Transaction Set Control Number | AN | 4/9 | R |  |  |  | 999 | IK502: 3 "Transaction Set Control Number in Header and Trailer Do Not Match". | SE02 must be present. |  |
| SE02 |  |  |  |  |  |  |  | 999 | IK502: 3 "Transaction Set Control Number in Header and Trailer Do Not Match". | SE02 must = ST02. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| GE | Functional Group Trailer |  | 1 | R | - |  |  | 999 | AK905: 3 "Functional Group Trailer Missing" | GE must be present. |  |
| GE |  |  |  |  |  |  |  |  |  | Only one iteration of GE is allowed. |  |
| GE01 | Number of Transaction Sets Included | No | 1-6 | R |  |  |  | 999 | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be present. |  |
| GE01 |  |  |  |  |  |  |  | 999 | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be numeric. |  |
| GE01 |  |  |  |  |  |  |  | 999 | 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. |  |


| Element IDENTIFIER | Description | ID | Min. | $\begin{aligned} & \text { Usage } \\ & \text { Rea. } \end{aligned}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| GE01 |  |  |  |  |  |  |  | 999 | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be > 0 . |  |
| GE02 | Group Control Number | AN | 4-9 | R |  |  |  | 999 | AK905: 4 "Group Control Number in the Functional Group Header and Trailer Do Not Agree" | GE02 must be present. |  |
| GE02 |  |  |  |  |  |  |  | 999 | AK905: 4 "Group Control Number in the Functional Group Header and Trailer Do Not Agree". | GE02 must = GS06. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| IEA | Interchange Control Header |  | 1 | R |  |  |  | TA1 | TA105: 024 "Invalid Interchange Content". | IEA must be present. |  |
| IEA |  |  |  |  |  |  |  | TA1 | TA105: 024 "Invalid Interchange Content". | Only one iteration of IEA is allowed. |  |
| IEA01 | Number of Included Functional Groups | No | 1-6 | R |  |  |  | TA1 | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must be present. |  |
| IEA01 |  |  |  |  |  |  |  | TA1 | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must be numeric. |  |
| IEA01 |  |  |  |  |  |  |  | TA1 | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must equal the number of functional groups included in the interchange. |  |
| IEA01 |  |  |  |  |  |  |  | TA1 | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must be $>0$. |  |
| IEA02 | Interchange Control Number | AN | 4-9 | R |  |  |  | TA1 | TA105: 001 "The Interchange Control Number in the Header and Trailer Do Not Match". | IEA02 must be present. |  |
| IEA02 |  |  |  |  |  |  |  | TA1 | TA105: 001 "The Interchange Control Number in the Header and Trailer Do Not Match" | IEA02 must = ISA13 |  |

Change Log
Changes to the version included for POC Review

| \# | Location | Change | Date |
| :---: | :---: | :---: | :---: |
| 1 | ISA05 | Added explicit values. | 06/09/09 |
| 2 | ISA07 | Added explicit values. | 06/09/09 |
| 3 | GS | Removed the miscellaneous note. | 06/09/09 |
| 4 | GS | Changed the error code to an AK905 error code. | 05/03/09 |
| 5 | GS01 | Changed the error codes to AK905 error codes. | 05/03/09 |
| 6 | GS01 | Added explicit value and added 5010 value in column I. | 06/09/09 |
| 7 | GS02 | Changed the error codes to AK905 error codes. | 05/03/09 |
| 8 | GS03 | Changed the error codes to AK905 error codes. | 05/03/09 |
| 9 | GS04 | Removed the IK403 error code, no replacement defined. | 05/03/09 |
| 10 | GS04 | Corrected typo. | 04/21/09 |
| 11 | GS05 | Removed the IK403 error code, no replacement defined. | 05/03/09 |
| 12 | GS06 | Changed the error codes to AK905 error codes. | 05/03/09 |
| 13 | GS06 | Added triad seperators. | 04/22/09 |
| 14 | GS07 | Removed the IK403 error code, no replacement defined. | 05/03/09 |
| 15 | GS08 | Changed the error codes to AK905 error codes. | 05/03/09 |
| 16 | ST | Corrected the typo. | 04/21/09 |
| 17 | ST | Changed the error codes to AK502 error codes. | 05/03/09 |
| 18 | ST | Removed the miscellaneous note. | 06/09/09 |
| 19 | ST01 | Changed the error codes to AK502 error codes. | 05/03/09 |
| 20 | ST02 | Changed the error codes to AK502 error codes. | 05/03/09 |
| 21 | ST03 | Corrected the typo. | 04/21/09 |
| 22 | ST03 | Changed the error codes to AK502 error codes. | 05/03/09 |
| 23 | BHT | Added "999" in column J. | 04/21/09 |
| 24 | BHT01 | Added explicit value. | 04/23/09 |
| 25 | 1000A.NM108 | Added explicit value. | 04/23/09 |
| 26 | 1000A.PER01 | Added explicit value. | 04/23/09 |
| 27 | 1000B.NM1 | Added "999" in column J. | 04/21/09 |
| 28 | 1000B.NM108 | Added explicit value. | 04/21/09 |
| 29 | 2000A.HL | Removed the miscellaneous note. | 06/09/09 |
| 30 | 2000A.HL03 | Added explicit value. | 04/23/09 |
| 31 | 2000A.HL04 | Added explicit value. | 04/23/09 |
| 32 | 2000A.PRV01 | Added explicit value. | 04/23/09 |
| 33 | 2000A.PRV02 | Added explicit value. | 04/23/09 |
| 34 | 2000A.CUR | Changed to the standard wording "must not be present." | 04/26/09 |
| 35 | 2010AA.NM108 | Changed all to 277/situational data required. | 04/27/09 |

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Change Log
Changes to the version included for POC Review

| 36 | 2010AA.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |
| :---: | :---: | :---: | :---: |
| 37 | 2010AA.NM109 | Corrected location typo. | 04/27/09 |
| 38 | 2010AA.N301 | Corrected the location reference loop name. | 06/09/09 |
| 39 | 2010AA.N302 | Corrected the location reference loop and element names in edits and notes. | 06/09/09 |
| 40 | 2010AA.N407 | Added the element info in column B,C,D and E. | 06/09/09 |
| 41 | 2010AA.N407 | Added 2nd edit row. | 06/09/09 |
| 42 | 2010AA.REF (EI) | Added explicit value. | 04/23/09 |
| 43 | 2010AA.REF (EI) | Copied new edit from the Professional. | 04/23/09 |
| 44 | 2010AA.PER | Changed error code to 19. | 05/03/09 |
| 45 | 2010AA.PER01 | Added explicit value. | 04/23/09 |
| 46 | 2000B.HL01 | Changed the edit. | 04/21/09 |
| 47 | 2000B SBR01 | Changed the edit, corrected location information and copied a new edit from the Professional. | 04/21/09 |
| 48 | 2000B.PAT08 | Added triad separators. | 04/22/09 |
| 49 | 2010BA.NM108 | Changed to match the Professional edit. | 04/21/09 |
| 50 | 2010BA.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 51 | 2010BA.NM109 | Changed to 277/situational data required. | 04/27/09 |
| 52 | 2010BA.DMG01 | Added explicit value. | 04/23/09 |
| 53 | 2010BA.REF (SY) | Changed to match the Professional edit. | 04/21/09 |
| 54 | 2010BA.REF01 (SY) | Added explicit value. | 04/23/09 |
| 55 | $\begin{aligned} & \text { 2010BB.REF } \\ & \text { (2U/EI/FY/NF) } \end{aligned}$ | Changed to match the Professional edit. | 04/26/09 |
| 56 | 2010BB.REF (G2) | Consolidated the rows. | 04/27/09 |
| 57 | 2000C.HL | Changed to match the Professional edit. | 04/26/09 |
| 58 | 2000C.PAT | Changed to match the Professional edit. | 04/26/09 |
| 59 | 2010CA.NM1 | Changed to match the Professional edit. | 04/26/09 |
| 60 | 2010CA.N3 | Changed to match the Professional edit. | 04/26/09 |
| 61 | 2010CA.N4 | Changed to match the Professional edit. | 04/26/09 |
| 62 | 2010CA.DMG | Changed to match the Professional edit. | 04/26/09 |
| 63 | 2010CA.REF | Changed to match the Professional edit. | 04/26/09 |
| 64 | 2300.CLM02 | Added triad seperators. | 04/22/09 |
| 65 | 2300.CLM02 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 66 | 2300.CLM05-2 | Added explicit value. | 04/23/09 |
| 67 | 2300.DTP01 (096) | Added explicit value. | 04/23/09 |
| 68 | 2300.DTP02 (096) | Added explicit value. | 04/23/09 |
| 69 | 2300.DTP01 (434) | Added explicit value. | 04/23/09 |
| 70 | 2300.DTP02 (434) | Added explicit value. | 04/23/09 |
| 71 | 2300.DTP01 (050) | Added explicit value. | 04/23/09 |
| 72 | 2300.DTP02 (050) | Added explicit value. | 04/23/09 |
| 73 | 2300.DTP01 (435) | Added explicit value. | 04/23/09 |

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Change Log
Changes to the version included for POC Review

| 74 | 2300.DTP01 (435) | Added explicit value. | 04/23/09 |
| :---: | :---: | :---: | :---: |
| 75 | 2300.DTP03 (435) | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 76 | 2300.PWK05 | Switched the edit to "If 05 is present, 02 must be $=\ldots . .$. " and copied the error code from the Professional. | 04/21/09 |
| 77 | 2300.PWK05 | Added a new row with an explicit valid value. | 04/23/09 |
| 78 | 2300.PWK06 | Switched the edit to "If 06 is present, 02 must be =.....", copied the error code from the Professional, and corrected the location. | 04/21/09 |
| 79 | 2300.CN1 | Removed the CN1 detail edits and copied the segment level info from the Professional. | 04/21/09 |
| 80 | 2300.AMT01 (F3) | Added explicit value. | 04/23/09 |
| 81 | 2300.AMT02 (F3) | Added triad seperators. | 04/22/09 |
| 82 | 2300.AMT03 (F3) | Copied the error code from the Professional | 04/22/09 |
| 83 | 2300.AMT03 (F3) | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 84 | 2300.REF01 (N4) | Added explicit value. | 04/23/09 |
| 85 | 2300.REF01 (9F) | Added explicit value. | 04/23/09 |
| 86 | 2300.REF01 (G1) | Added explicit value. | 04/23/09 |
| 87 | 2300.REF01 (9A) | Added explicit value. | 04/23/09 |
| 88 | 2300.REF01 (9C) | Added explicit value. | 04/23/09 |
| 89 | 2300.REF01 (LX) | Added explicit value. | 04/23/09 |
| 90 | 2300.REF01 (D9) | Added explicit value. | 04/23/09 |
| 91 | 2300.REF01 (LU) | Added explicit value. | 04/23/09 |
| 92 | 2300.REF01 (EA) | Added explicit value. | 04/23/09 |
| 93 | 2300.REF01 (P4) | Removed one edit row. | 04/22/09 |
| 94 | 2300.REF01 (G4) | Added explicit value. | 04/23/09 |
| 95 | 2300.NTE01 (ADD) | Added explicit value. | 04/23/09 |
| 96 | 2300.CRC01 (ZZ) | Added explicit value. | 04/23/09 |
| 97 | $\begin{aligned} & \hline 2300 . \mathrm{HIO1-3} \\ & \text { (BR/BBR/CAH) } \end{aligned}$ | Added explicit value. | 04/23/09 |
| 98 | 2300.HI01-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |
| 99 | 2300.HIO2-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |
| 100 | 2300.HI03-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |
| 101 | 2300.HI04-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |
| 102 | 2300.HI05-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |
| 103 | 2300.HI06-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |

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Changes to the version included for POC Review

| 104 | 2300.HI07-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |
| :---: | :---: | :---: | :---: |
| 105 | 2300.HI08-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |
| 106 | 2300.HI09-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |
| 107 | 2300.HI10-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |
| 108 | 2300.HI11-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |
| 109 | 2300.HI12-3 (BQ/BBQ) | Added explicit value. | 04/23/09 |
| 110 | 2300.HI01-1 (BI) | Added explicit value. | 04/23/09 |
| 111 | 2300.HI01-3 (BI) | Added explicit value. | 04/23/09 |
| 112 | 2300.HIO2-1 (BI) | Added explicit value. | 04/23/09 |
| 113 | 2300.HI02-3 (BI) | Added explicit value. | 04/23/09 |
| 114 | 2300.HI03-1 (BI) | Added explicit value. | 04/23/09 |
| 115 | 2300.HI03-3 (BI) | Added explicit value. | 04/23/09 |
| 116 | 2300.HI04-1 (BI) | Added explicit value. | 04/23/09 |
| 117 | 2300.HI04-3 (BI) | Added explicit value. | 04/23/09 |
| 118 | 2300.HI05-1 (BI) | Added explicit value. | 04/23/09 |
| 119 | 2300.HI05-3 (BI) | Added explicit value. | 04/23/09 |
| 120 | 2300.HI06-1 (BI) | Added explicit value. | 04/23/09 |
| 121 | 2300.HI06-3 (BI) | Added explicit value. | 04/23/09 |
| 122 | 2300.HI07-1 (BI) | Added explicit value. | 04/23/09 |
| 123 | 2300.HI07-3 (BI) | Added explicit value. | 04/23/09 |
| 124 | 2300.HI08-1 (BI) | Added explicit value. | 04/23/09 |
| 125 | 2300.HI08-3 (BI) | Added explicit value. | 04/23/09 |
| 126 | 2300.HI09-1 (BI) | Added explicit value. | 04/23/09 |
| 127 | 2300.HI09-3 (BI) | Added explicit value. | 04/23/09 |
| 128 | 2300.HI10-1 (BI) | Added explicit value. | 04/23/09 |
| 129 | 2300.HI10-3 (BI) | Added explicit value. | 04/23/09 |
| 130 | 2300.HI11-1 (BI) | Added explicit value. | 04/23/09 |
| 131 | 2300.HI11-3 (BI) | Added explicit value. | 04/23/09 |
| 132 | 2300.HI12-1 (BI) | Added explicit value. | 04/23/09 |
| 133 | 2300.HI12-3 (BI) | Added explicit value. | 04/23/09 |
| 134 | 2300.HI01-1 (BH) | Added explicit value. | 04/23/09 |
| 135 | 2300.HI01-3 (BH) | Added explicit value. | 04/23/09 |
| 136 | 2300.HI02-1 (BH) | Added explicit value. | 04/23/09 |
| 137 | 2300.HI02-3 (BH) | Added explicit value. | 04/23/09 |
| 138 | 2300.HI03-1 (BH) | Added explicit value. | 04/23/09 |

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| 139 | 2300.HI03-3 (BH) | Added explicit value. | 04/23/09 |
| :---: | :---: | :---: | :---: |
| 140 | 2300.HI04-1 (BH) | Added explicit value. | 04/23/09 |
| 141 | 2300.HI04-3 (BH) | Added explicit value. | 04/23/09 |
| 142 | 2300.HI05-1 (BH) | Added explicit value. | 04/23/09 |
| 143 | 2300.HI05-3 (BH) | Added explicit value. | 04/23/09 |
| 144 | 2300.HI06-1 (BH) | Added explicit value. | 04/23/09 |
| 145 | 2300.HI06-3 (BH) | Added explicit value. | 04/23/09 |
| 146 | 2300.HI07-1 (BH) | Added explicit value. | 04/23/09 |
| 147 | 2300.HI07-3 (BH) | Added explicit value. | 04/23/09 |
| 148 | 2300.HI08-1 (BH) | Added explicit value. | 04/23/09 |
| 149 | 2300.HI08-3 (BH) | Added explicit value. | 04/23/09 |
| 150 | 2300.HI09-1 (BH) | Added explicit value. | 04/23/09 |
| 151 | 2300.HI09-3 (BH) | Added explicit value. | 04/23/09 |
| 152 | 2300.HI10-1 (BH) | Added explicit value. | 04/23/09 |
| 153 | 2300.HI10-3 (BH) | Added explicit value. | 04/23/09 |
| 154 | 2300.HI11-1 (BH) | Added explicit value. | 04/23/09 |
| 155 | 2300.HI11-3 (BH) | Added explicit value. | 04/23/09 |
| 156 | 2300.HI12-1 (BH) | Added explicit value. | 04/23/09 |
| 157 | 2300.HI12-3 (BH) | Added explicit value. | 04/23/09 |
| 158 | 2300.HI01-1 (BE) | Added explicit value. | 04/23/09 |
| 159 | 2300.HI01-5 (BE) | Added triad seperators. | 04/22/09 |
| 160 | 2300.HI02-1 (BE) | Added explicit value. | 04/23/09 |
| 161 | 2300.HI02-5 (BE) | Added triad seperators. | 04/22/09 |
| 162 | 2300.HI03-1 (BE) | Added explicit value. | 04/23/09 |
| 163 | 2300.HI03-5 (BE) | Added triad seperators. | 04/22/09 |
| 164 | 2300.HI04-1 (BE) | Added explicit value. | 04/23/09 |
| 165 | 2300.HI04-5 (BE) | Added triad seperators. | 04/22/09 |
| 166 | 2300.HI05-1 (BE) | Added explicit value. | 04/23/09 |
| 167 | 2300.HI05-5 (BE) | Added triad seperators. | 04/22/09 |
| 168 | 2300.HI06-1 (BE) | Added explicit value. | 04/23/09 |
| 169 | 2300.HI06-5 (BE) | Added triad seperators. | 04/22/09 |
| 170 | 2300.HI07-1 (BE) | Added explicit value. | 04/23/09 |
| 171 | 2300.HI07-5 (BE) | Added triad seperators. | 04/22/09 |
| 172 | 2300.HI08-1 (BE) | Added explicit value. | 04/23/09 |
| 173 | 2300.HI08-5 (BE) | Added triad seperators. | 04/22/09 |
| 174 | 2300.HI09-1 (BE) | Added explicit value. | 04/23/09 |
| 175 | 2300.HI09-5 (BE) | Added triad seperators. | 04/22/09 |
| 176 | 2300.HI10-1 (BE) | Added explicit value. | 04/23/09 |
| 177 | 2300.HI10-5 (BE) | Added triad seperators. | 04/22/09 |
| 178 | 2300.HI11-1 (BE) | Added explicit value. | 04/23/09 |
| 179 | 2300.HI11-5 (BE) | Added triad seperators. | 04/22/09 |

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Changes to the version included for POC Review

| 180 | 2300.HI12-1 (BE) | Added explicit value. | 04/23/09 |
| :---: | :---: | :---: | :---: |
| 181 | 2300.HI12-5 (BE) | Added triad seperators. | 04/22/09 |
| 182 | 2300.HI01-1 (BG) | Added explicit value. | 04/23/09 |
| 183 | 2300.HIO2-1 (BG) | Added explicit value. | 04/23/09 |
| 184 | 2300.HI03-1 (BG) | Added explicit value. | 04/23/09 |
| 185 | 2300.HI04-1 (BG) | Added explicit value. | 04/23/09 |
| 186 | 2300.HI05-1 (BG) | Added explicit value. | 04/23/09 |
| 187 | 2300.HI06-1 (BG) | Added explicit value. | 04/23/09 |
| 188 | 2300.HI07-1 (BG) | Added explicit value. | 04/23/09 |
| 189 | 2300.HI08-1 (BG) | Added explicit value. | 04/23/09 |
| 190 | 2300.HI09-1 (BG) | Added explicit value. | 04/23/09 |
| 191 | 2300.HI10-1 (BG) | Added explicit value. | 04/23/09 |
| 192 | 2300.HI11-1 (BG) | Added explicit value. | 04/23/09 |
| 193 | 2300.HI12-1 (BG) | Added explicit value. | 04/23/09 |
| 194 | 2300.HI (TC) | Changed the usage from R to S | 06/07/09 |
| 195 | 2300.HI01-1 (TC) | Added explicit value. | 04/23/09 |
| 196 | 2300.HI02-1 (TC) | Added explicit value. | 04/23/09 |
| 197 | 2300. $\mathrm{HIO3-1}$ (TC) | Added explicit value. | 04/23/09 |
| 198 | 2300.HI04-1 (TC) | Added explicit value. | 04/23/09 |
| 199 | 2300.HI05-1 (TC) | Added explicit value. | 04/23/09 |
| 200 | 2300.HI06-1 (TC) | Added explicit value. | 04/23/09 |
| 201 | 2300.HI07-1 (TC) | Added explicit value. | 04/23/09 |
| 202 | 2300.HI08-1 (TC) | Added explicit value. | 04/23/09 |
| 203 | 2300.HI09-1 (TC) | Added explicit value. | 04/23/09 |
| 204 | 2300.HI10-1 (TC) | Added explicit value. | 04/23/09 |
| 205 | 2300.HI11-1 (TC) | Added explicit value. | 04/23/09 |
| 206 | 2300.HI12-1 (TC) | Added explicit value. | 04/23/09 |
| 207 | 2300.HCP02 | Added triad seperators. | 04/22/09 |
| 208 | 2300.HCP03 | Added triad seperators. | 04/22/09 |
| 209 | 2300.HCP04 | Changed to match the Professional edit. | 04/26/09 |
| 210 | 2300.HCP06 | Changed to match the Professional edit. | 04/26/09 |
| 211 | 2300.HCP07 | Added triad seperators. | 04/22/09 |
| 212 | 2300.HCP08 | Added standard "non-space" edit. | 04/26/09 |
| 213 | 2300.HCP08 | Corrected maximum length. | 06/09/09 |
| 214 | 2310A.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 215 | 2310A.PRV | Corrected segment name. | 06/09/09 |
| 216 | 2310A.PRV01 | Added explicit value. | 04/23/09 |
| 217 | 2310A.PRV02 | Added explicit value. | 04/23/09 |
| 218 | 2310A.REF (1G) | Corrected segment name. Corrected location references in the edit. | 06/09/09 |
| 219 | 2310B.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 220 | 2310B.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |

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Changes to the version included for POC Review

| 221 | 2310C.NM108 | Added explicit value. | 04/23/09 |
| :---: | :---: | :---: | :---: |
| 222 | 2310C.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 223 | 2310C.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |
| 224 | 2310D.NM108 | Added explicit value. | 04/23/09 |
| 225 | 2310D.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 226 | 2310D.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |
| 227 | 2310E.NM108 | Added explicit value. | 04/23/09 |
| 228 | 2310E.NM109 | Deleted edit "2310E.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109". | 04/26/09 |
| 229 | 2310F.NM1 | Changed iteration number to match 837 errata. | 04/22/09 |
| 230 | 2310F.NM103 | Changed to match the Professional edits. | 04/22/09 |
| 231 | 2310F.NM104 | Changed to match the Professional edits. | 04/22/09 |
| 232 | 2310F.NM105 | Changed to match the Professional edits. | 04/22/09 |
| 233 | 2310F.NM107 | Changed to match the Professional edits. | 04/22/09 |
| 234 | 2310F.NM108 | Changed to match the Professional edits. | 04/22/09 |
| 235 | 2310F.NM108 | Added explicit value. | 04/23/09 |
| 236 | 2310F.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 237 | 2310F.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |
| 238 | 2310F.NM109 | Changed to match the Professional edits. | 04/22/09 |
| 239 | 2320.SBR01 | Deleted the T-H edits | 04/22/09 |
| 240 | 2320.SBR03 | Corrected the maximum length. | 06/09/09 |
| 241 | 2320.SBR09 | Changed to match the Professional edits. | 04/22/09 |
| 242 | 2320.CAS03 | Added 2nd CSC code (519). | 04/26/09 |
| 243 | 2320.CAS03 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 244 | 2320.CAS06 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 245 | 2320.CAS09 | Added 2nd CSC code (519). | 04/26/09 |
| 246 | 2320.CAS09 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 247 | 2320.CAS12 | Added 2nd CSC code (519). | 04/26/09 |
| 248 | 2320.CAS12 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 249 | 2320.CAS15 | Added 2nd CSC code (519). | 04/26/09 |
| 250 | 2320.CAS15 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 251 | 2320.CAS18 | Added 2nd CSC code (519). | 04/26/09 |
| 252 | 2320.CAS18 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 253 | 2320.AMT (D) | Deleted the T-H edits | 05/03/09 |
| 254 | 2320.AMT01 (D) | Added explicit value. | 04/23/09 |
| 255 | 2320.AMT02 (D) | Changed to match the Professional error code. | 04/23/09 |
| 256 | 2320.AMT02 (D) | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 257 | 2320.AMT01 (A8) | Added explicit value. | 04/23/09 |
| 258 | 2320.AMT01 (A8) | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 259 | 2320.AMT (EAF) | Added explicit value. | 04/23/09 |
| 260 | 2320.MIA04 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |

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Changes to the version included for POC Review

| 261 | 2320.MIA05 | Corrected the maximum length. | 06/09/09 |
| :---: | :---: | :---: | :---: |
| 262 | 2320.MIA06 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 263 | 2320.MIA07 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 264 | 2320.MIA08 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 265 | 2320.MIA10 | Corrected the maximum length. | 06/09/09 |
| 266 | 2320.MIA11 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 267 | 2320.MIA12 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 268 | 2320.MIA13 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 269 | 2320.MIA14 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 270 | 2320.MIA16 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 271 | 2320.MIA17 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 272 | 2320.MIA18 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 273 | 2320.MIA19 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 274 | 2320.MIA24 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 275 | 2320.MOA | Corrected segment name. | 06/09/09 |
| 276 | 2320.MOA01 | Changed to match the Professional edits. | 04/22/09 |
| 277 | 2320.MOA01 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 278 | 2320.MOA02 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 279 | 2320.MOA08 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 280 | 2320.MOA09 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 281 | 2330A.NM106 | Changed to match the Professional edits. | 04/22/09 |
| 282 | 2330B.DTP (573) | Changed to match the Professional edits. | 04/22/09 |
| 283 | 2330B.DTP01 (573) | Added explicit value. | 04/23/09 |
| 284 | 2330B.DTP02 (573) | Added explicit value. | 04/23/09 |
| 285 | 2330B.DTP03 (573) | Changed to match the Professional edits. | 04/23/09 |
| 286 | 2330B.REF01 (G1) | Added explicit value. | 04/23/09 |
| 287 | 2330B.REF01 (9F) | Added explicit value. | 04/23/09 |
| 288 | 2330B.REF01 (T4) | Added explicit value. | 04/23/09 |
| 289 | 2330B.REF01 (F8) | Added explicit value. | 04/23/09 |
| 290 | 2400.SV203 | Added triad seperators. | 04/22/09 |
| 291 | 2400.SV203 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 292 | 2400.SV205 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 293 | 2400.SV207 | Added triad seperators. | 04/22/09 |
| 294 | 2400.SV207 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 295 | 2400.PWK | Corrected segment repetitions. | 06/09/09 |
| 296 | 2400.PWK05 | Copied the error code from P to I | 04/21/09 |
| 297 | 2400.PWK05 | Added explicit value. | 04/23/09 |
| 298 | 2400.PWK06 | Copied the error code from P to I | 04/21/09 |
| 299 | 2400.DTP (472) | Changed to match the Professional edits. | 05/04/09 |
| 300 | 2400.DTP01 (472) | Added explicit value. | 04/23/09 |
| 301 | 2400.REF01 (6R) | Added explicit value. | 04/23/09 |

Change Log
Changes to the version included for POC Review

| 302 | 2400.REF01 (9B) | Added explicit value. | 04/23/09 |
| :---: | :---: | :---: | :---: |
| 303 | 2400.REF01 (9D) | Added explicit value. | 04/23/09 |
| 304 | 2400.AMT01 (GT) | Added explicit value. | 04/23/09 |
| 305 | 2400.AMT02 (GT) | Added triad seperators. | 04/22/09 |
| 306 | 2400.AMT01 (N8) | Added explicit value. | 04/23/09 |
| 307 | 2400.AMT02 (N8) | Added triad seperators. | 04/22/09 |
| 308 | 2400.NTE01 (TPO) | Added explicit value. | 04/23/09 |
| 309 | 2400.PS102 | Added triad seperators. | 04/22/09 |
| 310 | 2400.HCP | Changed to match the Professional edits. | 04/26/09 |
| 311 | 2400.HCP02 | Added triad seperators. | 04/22/09 |
| 312 | 2400.HCP03 | Added triad seperators. | 04/22/09 |
| 313 | 2400.HCP04 | Changed to match the Professional edits. | 04/26/09 |
| 314 | 2400.HCP05 | Added triad seperators. | 04/22/09 |
| 315 | 2400.HCP05 | Changed to match the Professional edits. | 04/26/09 |
| 316 | 2400.HCP06 | Changed to match the Professional edits. | 04/26/09 |
| 317 | 2400.HCP07 | Added triad seperators. | 04/22/09 |
| 318 | 2400.HCP12 | Added triad seperators. | 04/22/09 |
| 319 | 2410.LIN02 | Added explicit value. | 04/23/09 |
| 320 | 2410.CTP04 | Changed to match the Professional edits. Added triad seperators. | 04/27/09 |
| 321 | 2410.CTP04 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 322 | 2410.REF (VY/XZ) | Added "pass-thru" note. | 06/04/09 |
| 323 | 2420A.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 324 | 2420A.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |
| 325 | 2420B.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 326 | 2420B.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |
| 327 | 2420C.NM104 | Changed to match the Professional edits. | 04/26/09 |
| 328 | 2420C.NM105 | Changed to match the Professional edits. | 04/26/09 |
| 329 | 2420C.NM108 | Added explicit value. | 04/23/09 |
| 330 | 2420C.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 331 | 2420C.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |
| 332 | 2420C.REF (1G) | Changed error code. | 05/03/09 |
| 333 | 2420D.NM1 | Changed to match the Professional edits. | 04/26/09 |
| 334 | 2420D.NM108 | Added explicit value. | 04/23/09 |
| 335 | 2420D.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 336 | 2430.SVD01 | Changed to match the Professional edits. | 04/26/09 |
| 337 | 2430.SVD02 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 338 | 2430.SVD03-2 | Corrected spelling of "modifier". | 06/04/09 |
| 339 | 2430.SVD03-3 | Corrected spelling of "modifier". | 06/04/09 |
| 340 | 2430.SVD03-4 | Changed to match the Professional edits. | 04/26/09 |
| 341 | 2430.SVD03-4 | Corrected spelling of "modifier". | 06/04/09 |
| 342 | 2430.SVD03-5 | Changed to match the Professional edits. | 04/26/09 |

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Changes to the version included for POC Review

| 343 | 2430.SVD03-5 | Corrected spelling of "modifier". | 06/04/09 |
| :---: | :---: | :---: | :---: |
| 344 | 2430.SVD03-6 | Changed to match the Professional edits. | 04/26/09 |
| 345 | 2430.SVD03-6 | Corrected spelling of "modifier". | 06/04/09 |
| 346 | 2430.CAS | Changed to match the Professional edits. | 04/26/09 |
| 347 | 2430.CAS02 | Changed to match the Professional error code. | 04/26/09 |
| 348 | 2430.CAS03 | Added 2nd CSC code (519). | 04/26/09 |
| 349 | 2430.CAS03 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 350 | 2430.CAS05 | Changed to match the Professional error code. | 04/26/09 |
| 351 | 2430.CAS06 | Added 2nd CSC code (519). | 04/26/09 |
| 352 | 2430.CAS06 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 353 | 2430.CAS08 | Changed to match the Professional error code. | 04/26/09 |
| 354 | 2430.CAS09 | Added 2nd CSC code (519). | 04/26/09 |
| 355 | 2430.CAS09 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 356 | 2430.CAS11 | Changed to match the Professional error code. | 04/26/09 |
| 357 | 2430.CAS12 | Added 2nd CSC code (519). | 04/26/09 |
| 358 | 2430.CAS12 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 359 | 2430.CAS14 | Changed to match the Professional error code. | 04/26/09 |
| 360 | 2430.CAS15 | Added 2nd CSC code (519). | 04/26/09 |
| 361 | 2430.CAS15 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 362 | 2430.CAS17 | Changed to match the Professional error code. | 04/26/09 |
| 363 | 2430.CAS18 | Added 2nd CSC code (519). | 04/26/09 |
| 364 | 2430.CAS18 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 365 | 2430.DTP01 (573) | Added explicit value. | 04/23/09 |
| 366 | 2430.DTP02 (573) | Added explicit value. | 04/23/09 |
| 367 | 2430.DTP02 (573) | Changed to match the Professional error code. | 04/26/09 |
| 368 | 2430.AMT (EAF) | Changed to match the Professional edits. | 04/26/09 |
| 369 | 2430.AMT01 (EAF) | Added explicit value. | 04/23/09 |
| 370 | 2430.AMT01 (EAF) | Deleted edit. | 04/23/09 |
| 371 | SE | Corrected location typo. | 04/26/09 |
| 372 | SE | Changed the error code to an AK502 error. | 05/03/09 |
| 373 | SE01 | Changed the error code to an AK502 error. | 05/03/09 |
| 374 | SE02 | Changed the error code to an AK502 error. | 05/03/09 |
| 375 | GE | Changed the error code to an AK905 error. | 05/03/09 |
| 376 | GE01 | Changed the error code to an AK905 error. | 05/03/09 |
| 377 | GE02 | Changed the error code to an AK905 error. | 05/03/09 |
| 378 | IEA | Changed to match the Professional error code. | 04/26/09 |
| 379 | IEA01 | Changed to match the Professional error code. | 04/26/09 |
| 380 | IEA02 | Changed to match the Professional error code. | 04/26/09 |


| cLM | claim information |  | 1 | R | 2300 | 1 |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CLM02 | Total Claim Charge Amount | R | 1-18 | R |  |  |  |  | 277 |  | CLM02 must equal the sum of 2430 CAS amounts and 2320 CAS amounts and 2320 AMT02 (when AMT01=D). |  |  |
| cım02 | Total Claim Charge Amount | R | 1-18 | R |  |  |  |  | 277 |  | If no 2430 SVD amounts or 2430 CAS amounts are present, CIMO2 must equal the sum of 2320 AMTO2 (when AMTO1=D) and 2320 CAS amounts. |  |  |
| амт | cob payer paid amount |  | 1 | s | 2320 |  |  |  |  |  |  |  |  |
| Amto2 | Payer Paid Amount | R | 1-18 | R |  |  |  |  | 277 |  | If only SVD amounts are present (no CAS amounts present) 2320.AMT02 (when AMT01=D) must $=$ the sum of all 2430. SVD02 amounts when the value in 2430.SVD01 is the same as the value in 2330B.NM109. | If only SVD amounts are present (no CAS amounts present) 2320 .AMT02 (AMT01=D) must = the sum of all 2430.SVD02 amounts when the value in 2430. SVD01 is the same as the value in 2330B. NM109. |  |
| sv2 | $\underset{\substack{\text { institutional service } \\ \text { LINE }}}{ }$ |  | 1 | R | 2400 |  |  |  |  |  |  |  |  |
| sv203 | Line tem Charge Amount | R | 1-18 | R |  |  |  |  | 277 |  | If SVD and 2430 CAS amounts are present, 2400. SV203 must = the sum of all 2430.CAS amounts plus 2430.SVD02 amounts when the the value in 2330 B. NM109. | If SVD and 2430 CAS amounts are present, 2400. SV203 must $=$ the 2430.SVD02 amounts when the value in 2430. SVD01 is the same as the value in 2330B.NM109. |  |

## Assumptions

| Assumptions |  |  |  |  |  |  |
| :--- | :--- | :---: | :---: | :---: | :---: | :---: |
| 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 <br> 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 <br> 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 <br> 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. <br> Any numeric value with an edit that indicates it must be > 0 means that neither zero nor negative numbers are allowed. <br> 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 <br> $2300 . H I ~ w i t h ~ H I o 1-1 ~=~ " D R " ~ i s ~ a l l o w e d), ~ o t h e r w i s e ~ t h e ~ s e g m e n t ~ e d i t ~ w i l l ~ j u s t ~ i n c l u d e ~ t h e ~ n u m b e r ~ o f ~ i t e r a t i o n s ~ a l l o w e d ~(O n l y ~ o n e ~ i t e r a t i o n ~ o f ~$ |  |  |  |  |  |
| $2310 C . N M 1$ is allowed). |  |  |  |  |  |  |

Style Sheet


Style Sheet


| Segment level edits |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Cat | Desc. | Edit text | Edit \# | Notes |
| Depends on claim info | Required segment missing. | Example text: 2310E.NM1 must be present when the location of the service is different than the location in Loop 2010AA. | IK304 $=16$ |  |
| Depends on the presence of another seament | Required segment missing. | Example text: If 2310E.N3 is present, 2301E.N4 must be present. | IK304 $=16$ |  |
| Element Errors | Segement has element errors. |  | IK304 = 8 | Not a spreadsheet assigned error. |
| Repeats | Loop level - maximum occurs exceded. | Example - Only one iteration of 2010AA is allowed. | IK304 = 4 |  |
| Repeats | Segment level - maximum occurs exceded. | Example - Only one iteration of 2010AA is allowed. | IK304 = 5 |  |
| Repeats | Loop level - implementation guide required minimum occurs not present. | Example - Only one iteration of 2010AA is allowed. | IK304 = 17 |  |
| Repeats | Segment level - implementation guide required minimum occurs not present. | Example - Only one iteration of 2010AA is allowed. | IK304 $=18$ |  |
| Usage | Segment ID not recognized. |  | IK304 = 1 | Not a spreadsheet assigned error. |
| Usage | Segment unexpected. |  | IK304 = 2 | Not a spreadsheet assigned error. |
| Usage | Must be present - required segment. | Example - 2010AA.N4 must be present. | IK304 = 3 |  |
| Usage | Must not be present - segment not in the transaction. |  | IK304 = 6 | Not a spreadsheet assigned error. |
| Usage | Segment out of sequence. |  | IK304 = 7 | Not a spreadsheet assigned error. |
| Usage | Must not be present per the implementation guide. | Example - Must not be present. | $1 \mathrm{~K} 304=14$ |  |
| Usage | Must not be present per the implementation guide situational rules. | Example - Must not be present. | IK304 $=19$ |  |

Style Sheet

| Element level edits |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: |
| Cat | Desc. | Edit text | Edit \# | Notes |
| Attributes | Invalid character in element. | Must be numeric. | IK403 = 6 | N0 and R data types |
| Attributes | No significant character in the element. | Must contain at least one non-space character. | $\mathrm{IK} 403=6$ | AN |
| Attributes | Invalid character in the element. | Must be populated with accepted AN characters. | $\mathrm{IK} 403=6$ | AN |
| Attributes | Invalid code value. | When there are multiple qualifiers use the generic statement. <br> "Must be valid values." | $\mathrm{IK} 403=7$ | ID |
| Attributes | Invalid code value. | When there is only one qualifier, list the qualifier: Example: 1000A.NM108 must be "46". | $\mathrm{IK} 403=7$ | ID |
| Content | Implementation pattern match failure. (Format doesn't match expected format.) |  | IK403 = I12 |  |
| Date/Time | Invalid date or format. | If DTP02 equals D8, then DTP03 must be a valid date in CCYYMMDD format | $\mathrm{IK} 403=8$ |  |
| Date/Time | Invalid date or format. | If DTP02 equals RD8, then DTP03 must be a valid date in CCYYMMDD-CCYYMMDD format | $\mathrm{IK} 403=8$ |  |
| Date/Time | Invalid date/time or format. | If DTP02 equals DT, then DTP03 must be a valid date/time in CCYYMMDDHHMM format | $\mathrm{IK} 403=8$ |  |
| Date/Time | Invalid date/time or format. | If DTP02 equals DT, then DTP03 must be a valid date/time in CCYYMMDDHHMM format | $\mathrm{I} 403 \mathrm{=} 9$ |  |
| 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 | $\mathrm{I} 403=5$ | amount maximum depends on data element length or implementation guide constraints. |
| Dollar Amt | Non-numeric data in a numeric element. | Must be numeric | $\mathrm{I} 403=6$ |  |
| 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. | $\mathrm{I} 403 \mathrm{~S}=4$ | too short |
| Non Dollar Numeric | Numeric element less than minumim length. | must be \#- \#\# digits. | $\mathrm{I} 403=5$ | too long |
| Non Dollar Numeric | Numeric element not formatted correctly, or invalid length. | must be \#- \#\# digits, excluding the decimal. | $\mathrm{I} 403=5$ |  |
| 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 \#. | $\mathrm{I} 403=5$ |  |
| Non Dollar Numeric | Non-numeric data in a numeric element. | Must be numeric | $\mathrm{I} 403=6$ |  |
| Sizing | Element less than minumim length. | Must be X - X characters | IK403 = 4 | Too short |
| Sizing | Element exceeds maximum length. | Must be X - X characters | IK403 = 5 | Too long |
| Usage | Required element missing. | Must be present. | IK403 = 1 |  |

Style Sheet

| Usage | Must be present per the implementation guide situational rules. | Must be present. | $\mathrm{I} 403 \mathrm{=} 1$ |  |
| :---: | :---: | :---: | :---: | :---: |
| Usage | Conditional Requied Data Element missing. |  | $\mathrm{IK} 403=2$ |  |
| Usage | Too many data elements |  | IK403 $=3$ | Not a spreadsheet assigned error. |
| Usage | Exclusion Condition Violated |  | IK403 = 10 |  |
| Usage | Too many repetitions |  | IK403 = 12 | Not a spreadsheet assigned error. |
| Usage | Too many components |  | IK403 = 13 | Not a spreadsheet assigned error. |
| Usage | Must not be present - not used element. | Must not be present | I K403 = I10 |  |
| Usage | Must not be present per the implementation guide situational rules. | Must not be present | I K403 = I10 |  |
| Usage | Implementation too few repetitions. |  | IK403 = I11 |  |
| Usage | Implementation Dependent "not used" element present. |  | I K403 = I13 |  |
| External <br> Code <br> 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. |  | This is not an edit, it's a reminder of when a verification/reference table is required. |
|  |  |  |  |  |

[Project Name] Issues Log

|  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: |
| PARKING LOT |  |  |  |  |  |
| $\begin{array}{\|l} \hline \begin{array}{l} \text { Issue } \\ \# \end{array} \\ \hline \end{array}$ | Issue | Issue Description | Issue Status | Issue Resolution | Issue Closed Date |
|  |  |  |  |  |  |
| 1 | External Code <br> Sources - Capacity | - Ability for the Front Ends to handle the code set processing <br> - Full codes set vs. CMS sub set | Closed | Edit module will contain the appropriate code set/source. | 3/30/2009 |
| 2 | External Code <br> Sources - Location | - Where will the Front Ends receive or pull the code sets | Closed | Edit module maintainer will be responsible for obtaining the code | 3/30/2009 |
| 3 | External Code <br> Sources - <br> Consistency | - For some of the code sets, there is no single code set, but individually maintained sets that differ per contactor | Closed | Shared system will handle local medical review policy issues as is done today. | 3/30/2009 |
| 4 | External Code Sources - Code set to Code set | - Example: SV105 - Procedure Code to Place of Service validation | Closed | Shared system will handle as is done today. | 3/30/2009 |
| 5 | Internal Code Sources | - Concern about the provider file at the shared system being out of synch with provider file at front ends. | Closed | Edit module will house the provider edit files. | 3/30/2009 |
| 6 | NPI | - The workgroup needs to check all NPIs, to validate if they need to be checked against the NPI cross-walk | Closed | Edit module will validate NPI against the crosswalk data. | 4/2/2009 |
| 7 | NPI | - Validate the algorithm check is on all NPI | Closed | Edit module will validate NPI algorithm |  |
| 8 | NPI | - Verify with policy staff of the validity of placeholder/surrogate NPI (roster billing) | Closed | Surrogate NPI's are not allowed. | 3/30/2009 |
| 9 | Units of Service | - Consistent COBOL pictures clause <br> - Spreadsheet will need to be updated once the expansion is implemented | Closed | Consistent COBOL picture clauses will be included in the flatfile spreadsheet | 3/30/2009 |

## [Project Name] Issues Log

| $\begin{array}{\|l} \hline \text { Issue } \\ \# \end{array}$ | Issue | Issue Description | Issue Status | Issue Resolution | Issue Closed Date |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 10 | Technical Concerns | - Extended character set limitations | Closed | Companion guide language: You must submit incoming 837 claim data using the basic character set as defined in Appendix B of the 837 Institutional Implementation Guide. In addition to the basic character set, you may choose to submit lower case characters and the '@' symbol from the extended character set. Any other characters submitted from the extended character set [will/may] cause the interchange (transmission) to be rejected at the translator. | 3/30/2009 |
| 11 | Technical Concerns - X12 <br> Syntax and Semantic Note edits | - The work group would like all the X12 syntax and semantic edits from the implementation guide added to the spreadsheet. | Closed | We will not be recreating the implementation guide in this spreadsheet. | 3/30/2009 |
| 12 | Technical Concerns "Bucket Order" | - The work group would like sequential edits put in place <br> - Example: PER07 can't be used if PER03 and PER05 aren't used | Closed | There will be no "bucket order" edits added by the edits module. | 4/2/2009 |
| 13 | Companion Guide <br> - Incomplete notations | - There has only been a cursory effort to add notes for when companion notes are needed. 1/20 we added notations for medicare specific usages, limitations, etc. Group needs to identify all remaining items that need notations. | Closed | companion guide notes have been added where appropriate | 3/30/2009 |
| 14 | Trading Partner Management | - Linkage between 2010AA (provider) and 1000A (submitter) | Closed | Yes this must be validated | 3/30/2009 |
| 15 | "R" Type Data Elements | - Validate that all Cobol pic defined data elements are valid to the flat file | Open | Completed | 3/30/2009 |

