EDI 834	Trans	action Set Fi	le Layo	ut									
Data Field				Segment	Reference			Data Element			ibute		
Values	Level	Loop	Position	ID.	Designator	Name	Data Element	Description	Requirement	Min	Max	Comments	Mapping Notes
		Interchange	Contro	l Header									
ISA		Interchange	Contro	ISA		Interchar	nge Control Header		Required			Identifies an interchange of functional	ISA*00* *00*
		Header										groups and interchange control data.	*30*141788609*30*123456789*000309*13 56*U*00401*00000001*1*P*:~
					ISA01		Author Info Qualifier	Author Information Qualifier	М	2	2	00 = No Authorization Information Present 03 = Additional Data Identification	Set to 00 (zero zero)
					ISA02		Author Information	Authorization Information	M	10	10		n/a
					ISA03		Security Info Qual	Security Information Qualifier	M	2	2	00 = No Security Information Present 01 = Password	Set to 00 (zero zero)
					ISA04		Security Information	Security Information	М	10	10	o i i accivora	n/a
				-	ISA05		Interchange Id Qual Interchange Sender Id Interchange ID Qual	Interchange Id Qualifier Interchange Sender Id Interchange Id Qualifier	M M M	15 2	15 2	01 = Duns Number 14 = Duns Plus Prefix 20 = Health Industry Number 27 = Carrier Identification Num 28 = FIIN Number 29 = Medicare Provider Num 30 = Federal Tax Id Num 33 = NAIC Company Code ZZ = Mutually Defined 01 = Duns Number 14 = Duns Plus Prefix 20 = Health Industry Number	Set to 30 Set to 146013200 Set to 30
				_	ISA08		Interchange Receiver Id	Interchange Receiver Id	М	15	15	27 = Carrier Identification Num 28 = FIIN Number 29 = Medicare Provider Num 30 = Federal Tax Id Num 33 = NAIC Company Code ZZ = Mutually Defined In absence of a value from the Carrier, defaulted to the Benefit Plan Name.	Set to Trading partner ID
					ISA09		Interchange Date	Interchange Date	М	8	8	CCYYMMDD	System generated. Format: yymmdd
					ISA10		Interchange Time	Interchange Time	М	4	4	ННММ	System generated. Format: hhmm
					ISA11		Inter Ctrl Stand Ident	Interchange Control Standards Identifier	М	1	1	U = US EDI ASC X12, TDCC, and USC	Set to U
					ISA12		Inter Ctrl Version Num	Interchange Control Version Number	М	5	5		Set to 00501
					ISA13		Inter Ctrl Number	Interchange Control Number	М	9	9		System generated
					ISA14		Ack Requested	Acknowledgement Requested	М	1	1	0 = No Acknowledgement Requested 1 = Acknowledgement Requested	Set to 1
					ISA15		Test Indicator	Test Indicator	M	1	1	P = Production Data T = Test Data	set to P
					ISA16		Component Elem Sepera	Component Element Separator	М	1	1		Set to :

EDI 834	Trans	action Set Fil	le Layo	ut									
Data Field				Segment	Reference			Data Element			ibute		
Values	Level	Loop	Position	ID	Designator	Name	Data Element	Description	Requirement	Min	Max	Comments	Mapping Notes
		Functional G	Group H	eader									
GS		Group Header		GS		Functional	I Group Header		Required	1		Identifies the start of a functional group	GS*BE*146013200*123456789*20031009*
												and provides control data.	1700*1*X*004010X095A1~
					GS01		Functional ID Code	Functional Identifier Code	М	2	2	BE = Benefit Enrollment and Maintenance (834)	Set to BE
					GS02	 	Application Send's Code	Application Sender's Code	М	2	15	(654)	Set to 146013200
					GS03		Application Rec's Code	Application Receiver's Code	M	2	15		By agreement between partners
					GS04			Date	M	8	8	CCYYMMDD	System generated. Format: ccyymmdd
					GS05	7	Time	Time	М	4	8	Can be HHMM, HHMMSS, HHMMSSD, or	System generated.
												HHMMSSDD (D = decimal seconds)	Format: hhmm
					GS06	(Group Ctrl Number	Group Control Number	М	1	9		System generated.
					GS07	F	Responsible Agency Code	Responsible Agency Code	М	1	2		Set to X
					GS08	\	Ver/Release ID Code	Version/Release/Industry Identifier Code	М	1	12		Set to 005010X220A1
		Functional G	Proup T	railor									
GE	Trailer	runctional C	JOUD I	GE		Functional	l Group Trailer		Required			Indicates the end of a functional group and provides control information	GE*6542*1~
					GE01	١	Number of TS Included	Number of Transactions Sets Included	М	1	6	Total number of transaction sets in the functional group or interchange group	System generated.
					GE02		Group Ctrl Number	Group Control Number	М	1	9	Unique control number .	System generated.
		Interchange	Contro	l Trailer									
IEA	Trailer	interchange	Contro	IEA		Interchanc	e Control Trailer		Required	T	T	Indicates the end of an interchange	IEA*1*00000001~
ILA	Trailer			ILA		Interenang	je dominor framer		rtequired			functional groups and related control segments	ILA I GOGGGGGT
					IEA01		Num of Inc Funct Group	Number of Included Functional Groups	М	1	5	The number of functional groups included in the interchange	System generated.
					IEA02	1	nter Ctrl Number	Interchange Control Number	М	9	9	An assigned control number .	System generated.

EDI 834	Trans	action Set F	ile Lay	out								
Data Field				Segment	Reference					ibute		
Values	Level	Loop	Position	ID	Designator	Name Data Element	Data Element Description	Requirement	Min	Max	Comments	Notes / Examples
		Header										
ST	Header	Header	010	ST		Transaction Set Header		Required			Indicates start of transaction set and assigns control number.	ST*834*6 ~
834					ST01	TS ID Code	Transaction Set Identifier Code	М	3	3	Code to identify transaction set type. Set benefit enrollment transaction set to 834.	Set to 834.
					ST02	TS Control Number	Transaction Set Control Number	М	4	9	Unique control number.	The transaction set control numbers in ST0 and SE02 must be identical. Assign starting with 0001 and increment forward. Control numbers are unique within a specific functional group but can repeat in other groups and interchanges.
					ST03	Implementation Conventio Reference	n Implementation Convention Reference	М	1	35	Reference assigned to identify Implementation Convention	Set to 005010X220A1. This field contains the same value as GS08
BGN	Header	Header	020	BGN		Beginning Segment		Required			Indicates the beginning of a transaction	BGN*00*00000000000196*20000309*135
					BGN01	TS Purpose Code	Transaction Set Purpose Code	М	2	2	set. 00 = Original. First time transaction sent 15 = Resubmission. Corrected transaction, original not yet processed by receiver. 22 = Information Copy. Same as original transmission.	Default to '00'
					BGN02	Reference Ident	Reference Identification Transaction Set Identifier Code	М	1	30	Unique control number.	Set to a unique identifying reference number
					BGN03	Date	Date Transaction Set Creation Date	М	8	8	CCYYMMDD	System generated. Set to 8 positions. Format: ccyymmdd
					BGN04	Time	Time Transaction Set Creation Time	M	4	8	Can be HHMM, HHMMSS, HHMMSSD, or HHMMSSDD (D = decimal seconds)	System generated. Format: hhmmss
				-	BGN05	Time Code	Time Code Time Zone Code	S	2	2	CD Central Daylight Time, CS Central Standard Time, CT Central Time, ED Eastern Daylight Time, ES Eastern Standard Time, ET Eastern Time, MD Mountain Daylight Time, MS Mountain Standard Time, MT Mountain Time, PT Pacific Time. If BGN05, then BGN04 is required.	Optional. Not used.
					BGN06	Reference Ident	Reference Identification Transaction Set Identifier Code	0	1	30	If BGN01 = 15 or 22, then cross reference Reference Ident of the original transaction.	Optional. If 00 then not used. If 15 or 22 then write original transaction re id number.
					BGN07	Transaction Type Code - Not Used		n/a	2	2		n/a
					BGN08	Action Code	Reference Identification Transaction Set Identifier Code	М	1	2	2 = Change (Update) - Identifies transactions for additions, terminations and changes to current enrollment 4 = Verify - Identifies system compare or verify partner's systems	Required Default = 2
REF	Header	Header	030	REF		Transaction Set Policy Number		Situational			Segment is used if a unique ID number	REF*38*0000~
38					DEF04	Poforopos Ident Ous!	Poforonce Identification Qualifica-	B. 4	2	2	applies to the entire transaction set.	Sat to 29
JO					REF01 REF02	Reference Ident Qual Reference Ident	Reference Identification Qualifier Reference Identification Master Policy Number	M X	1	30	38 = Master policy number code. Master Policy Number. At least one REF02 is required.	Set to 38. Set to master policy number. Value to be supplied by Carrier Default =00000
DTP	Header	Header	040	DTP		File Effective Date		Situational				Carrier information requirement can adequately be satisfied without it. Data element is not used.

Data Field	i irans	saction Set Fi	ile Layo	out								
Data FIEI0				Segment						ibute		
Values	Level	Loop	Position	ĪD	Designator	Name Data Element	Data Element Description	Requirement	Min	Max	Comments	Notes / Examples
	1					T	T					
					DTP01	Date/Time Qualifier	Date/Time Qualifier	M	3	3	007 = Effective	Not used
											303 = Maintenance Effective	
											382 = Enrollment	
											388 = Payment Commencement	
D8					DTP02	Date Time Format Qual	Date Time Period Format Qualifier	M	2	3	D8 = Date expressed in CCYYMMDD.	Not used
					DTP03	Date Time Period	Date Time Period	M	1	35		Not used
		10001 0										
114	III.	1000A Spon				lo N		I Decised		_	Ideal Control of the	NA*DE*NEW YORK OTATE*EI*4 44700000
N1	Header		070	N1		Sponsor Name		Required			Identifies the organization paying for the	N1*P5*NEW YORK STATE*FI*141788609
		Sponsor Name									coverage by type, name, and code. At	
DE					NIAOA	Entity ID Code	Fatitudantifias Cada	M	0	2	least one N102 or N103 is required.	Catta DE
P5					N101	,	Entity Identifier Code	M	4	3	P5 = Plan Sponsor.	Set to P5.
	1				N102	Name	Estimate and a second	X	1	0	NEW YORK STATE	NEW YORK STATE
					N103	ID Code Qualifier	Entity Identifier Code	Х	1	2	FI = Federal Taxpayers Identification Number.	Set to FI = Federal Taxpayers Identification
											ZZ = Mutually Defined (HIPAA Id)	Number. Once National Payer ID is mandated, then
					NIAOA	ID Code	Idantification Code	V	0	00	If N104 present then required.	use ZZ. Set to 146013200
					N104	ID Code	Identification Code	Х	2	80	Sponsor Identifier.	Set to 146013200
							Sponsor Identifier			<u> </u>	If N103 present then required.	
		1000P Payer	. Nama									
NI1	Lloods-	1000B Payer		N1		Paver Name		Boguirod			Identifies the insurance company	N14*INI**EI*192456700
N1	neader	Payer Name	070	NT		rayer Name		Required	1	1	(receiver) type, name, and code. At least	N1*IN**FI*123456789~
		Payer Name										
INI					NIAOA	Fasis ID Code	Fatitudantifias Cada	N4	0	2	one N102 or N103 is required.	Catta INI
IN					N101	Entity ID Code	Entity Identifier Code	M	4	3	IN = Insurer.	Set to IN.
					N102	Name	Fatth I Idaatifiaa Cada	n/a X	4	60	Not used. FI = Federal Taxpayers Identification	Set to placeholder.
					N103	ID Code Qualifier	Entity Identifier Code	^	1	2		FI = Federal Taxpayers Identification
											Number.	Number. XV = Health Care Financing Administration
											G	
											Administration National Payer Identification.	National Payer Identification. Once National Payer ID is mandated, then
											If N104 present then required.	use only XV
					NIIOI	ID Code	Identification Code		2	00	Incurer identification code	Data not contiged by a DC field
					N104	ID Code	Identification Code Insurer Identification Code	Х	2	80	Insurer identification code. If N103 present then required.	Data not captured by a PS field.
							insurer identification code				ii N 103 present then required.	Value to be supplied by carrier.
		1000C Broke	ar Name	_								
N1	Hoodor	1000C BIOK		N1		TPA/Broker Name		Situational			Identifies TPA/broker organization by	Segment does not apply.
IN I	Headel	Broker Name	70	N.		TFA/BIOKEI Name		Situational			type, name, and code. At least one N102	Segment does not apply.
		biokei ivaille									or N103 is required.	
2/2					N101	Entity ID Code	Entity Identifier Code	4			BO = Broker TV = Third party admin	n/a
n/a Not used						I TEHLIN ID CODE		N.4	2	2		
					4		Entity identifier Code	M	2			
					N102	Name - Not Used		n/a	1		Not used.	n/a
n/a					4		Entity Identifier Code		1		Not used. 94 = Code assigned by receiving	
ıwa					N102	Name - Not Used		n/a	1		Not used. 94 = Code assigned by receiving organization	n/a
ινα					N102	Name - Not Used		n/a	1		Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification	n/a
iua					N102	Name - Not Used		n/a	1		Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number.	n/a
ı v a					N102	Name - Not Used		n/a	1		Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing	n/a
iu a					N102	Name - Not Used		n/a	1		Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer	n/a
iva					N102	Name - Not Used		n/a	1		Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification.	n/a
					N102 N103	Name - Not Used ID Code Qualifier	Entity Identifier Code	n/a X	1	60 2	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required.	n/a n/a
					N102	Name - Not Used	Entity Identifier Code	n/a	2 1 1 1 2		Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code.	n/a
					N102 N103	Name - Not Used ID Code Qualifier	Entity Identifier Code	n/a X	1	60 2	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required.	n/a n/a
n/a	Host	14000	100	IACT.	N102 N103	Name - Not Used ID Code Qualifier ID Code	Entity Identifier Code	n/a X	1	60 2	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code. If N103 present then required.	n/a n/a
n/a	Header	1100C	120	ACT	N102 N103	Name - Not Used ID Code Qualifier	Entity Identifier Code	n/a X	1	60 2	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code. If N103 present then required. Specifies account information if different	n/a n/a
n/a	Header	1100C Broker Account	120	ACT	N102 N103	Name - Not Used ID Code Qualifier ID Code	Entity Identifier Code	n/a X	1	60 2	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code. If N103 present then required.	n/a n/a
n/a ACT	Header		120	ACT	N102 N103	Name - Not Used ID Code Qualifier ID Code ID Code	Entity Identifier Code Identification Code TPA or Broker Identification	n/a X	1	80	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code. If N103 present then required. Specifies account information if different than account number of sponsor.	n/a n/a n/a Segment does not apply.
n/a ACT	Header		120	ACT	N102 N103 N104	Name - Not Used ID Code Qualifier ID Code ID Code TPA/Broker Account Information Account Number	Entity Identifier Code	n/a X X Situational	1	80	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code. If N103 present then required. Specifies account information if different	n/a n/a n/a Segment does not apply.
n/a ACT n/a Not used	Header		120	ACT	N102 N103 N104 N104	Name - Not Used ID Code Qualifier ID Code ID Code TPA/Broker Account Information Account Number Name - Not Used	Entity Identifier Code Identification Code TPA or Broker Identification	n/a X X Situational M n/a	1	80 80 35 60	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code. If N103 present then required. Specifies account information if different than account number of sponsor.	n/a n/a n/a Segment does not apply. n/a n/a
n/a ACT n/a Not used Not used	Header		120	ACT	N102 N103 N104 N104 ACT01 ACT02 ACT03	Name - Not Used ID Code Qualifier ID Code ID Code TPA/Broker Account Information Account Number Name - Not Used ID Code Qual - Not Used	Entity Identifier Code Identification Code TPA or Broker Identification	x X Situational M n/a n/a	1	80 80 35 60 2	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code. If N103 present then required. Specifies account information if different than account number of sponsor.	n/a n/a n/a Segment does not apply. n/a n/a n/a n/a
n/a ACT n/a Not used Not used Not used Not used	Header		120	ACT	N102 N103 N104 N104 ACT01 ACT02 ACT03 ACT04	Name - Not Used ID Code Qualifier ID Code ID Code ID Code TPA/Broker Account Information Account Number Name - Not Used ID Code Qual - Not Used ID Code - Not Used	Entity Identifier Code Identification Code TPA or Broker Identification	n/a X X Situational M n/a n/a n/a n/a	1	80 80 35 60	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code. If N103 present then required. Specifies account information if different than account number of sponsor.	n/a n/a n/a Segment does not apply. n/a n/a n/a n/a n/a
n/a ACT n/a Not used Not used Not used Not used Not used Not used	Header		120	ACT	N102 N103 N103 N104 ACT01 ACT02 ACT02 ACT03 ACT04 ACT05	Name - Not Used ID Code Qualifier ID Code ID Code ID Code Account Information Account Number Name - Not Used ID Code Qual - Not Used ID Code - Not Used Acct Num Qual-Not Used Acct Num Qual-Not Used	Entity Identifier Code Identification Code TPA or Broker Identification	n/a X X Situational M n/a n/a n/a n/a n/a	1	80 35 60 2 80 3	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code. If N103 present then required. Specifies account information if different than account number of sponsor. Account number assigned.	n/a n/a n/a Segment does not apply. n/a n/a n/a n/a n/a n/a n/a n/a
n/a ACT n/a Not used Not used Not used Not used	Header		120	ACT	N102 N103 N104 N104 ACT01 ACT02 ACT03 ACT04	Name - Not Used ID Code Qualifier ID Code ID Code ID Code TPA/Broker Account Information Account Number Name - Not Used ID Code Qual - Not Used ID Code - Not Used	Entity Identifier Code Identification Code TPA or Broker Identification	n/a X X Situational M n/a n/a n/a n/a	1	80 80 35 60 2	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code. If N103 present then required. Specifies account information if different than account number of sponsor. Account number assigned. Account number - more than one account	n/a n/a n/a Segment does not apply. n/a n/a n/a n/a n/a
ACT n/a Not used Not used Not used Not used Not used Not used	Header		120	ACT	N102 N103 N103 N104 ACT01 ACT02 ACT02 ACT03 ACT04 ACT05	Name - Not Used ID Code Qualifier ID Code ID Code ID Code Account Information Account Number Name - Not Used ID Code Qual - Not Used ID Code - Not Used Acct Num Qual-Not Used Acct Num Qual-Not Used	Entity Identifier Code Identification Code TPA or Broker Identification	n/a X X Situational M n/a n/a n/a n/a n/a	1	80 35 60 2 80 3	Not used. 94 = Code assigned by receiving organization FI = Federal Taxpayers Identification Number. XV = Health Care Financing Administration National Payer Identification. If N104 present then required. TPA or Broker Identification code. If N103 present then required. Specifies account information if different than account number of sponsor. Account number assigned.	n/a n/a n/a Segment does not apply. n/a n/a n/a n/a n/a n/a n/a n/a

EDI 834	Trans	action Set F	ile Layo	ut							
Data Field				Segment	Reference	Segment			Attribute		
Values	Level	Loop	Position	ĪD	Designator	Name	Data Element	Data Element Description	Requirement Min Max	Comments	Notes / Examples

		2000 Membe	er Detai	il								
INS	Detail	2000	010	INS		Member Level Detail		Optional			Provides insured benefit information for	INS*Y*18*021**A*E**FT**N~
		Member Detail									subscriber and dependents. Subscriber	
											information must precede dependent	
											information or have been submitted in a	
										1.	previous transmission.	
					INS01	Yes/No Cond Resp Code	Yes/No Condition or Response Code	M	1	1	N = No Status of Insured is dependent.	N = No Status of Insured is dependent.
					INS02	Individual Dalet Cada	Subscriber Indicator	M	_	_	Y = Yes Status of insured is subscriber.	Y = Yes Status of insured is subscriber. Set SP = 01
					111502	Individual Relat Code	Individual Relationship Code	IVI	2	2	01 = Spouse 18 = Self	Set SP = 01 Set subscriber = 18
											19 = Child	Set S and D = 19
											25 = Ex-spouse	Set X = 25
											53 = Life partner	Set DP = 53
											38 = Collateral dependent	Set O = 38
					INS03	Maintenance Type Code	Maintenance Type Code	0	3	3	001 = Change	001 = Change
											021 = Addition	021 = Addition
											024 = Cancellation or termination	024 = Cancellation or termination
											025 = Reinstatement	025 = Reinstatement
											030 = Audit or compare	030 = Audit or compare
					INS04	Maintain Reason Code	Maintenance Reason Code	О	2	3	01 = Divorce	Use of this segment is limited to identify a
											02 = Birth	change in Benefit Program and Termination
					1						03 = Death	Reason for Conversion of Coverage.
					1						04 = Retirement	Set Termination of Decesite = 07
					1						05 = Adoption 06 = Strike	Set Termination of Benefits = 07 Set Termination of Employment = 08
											07 = Termination of Benefits	Set change in Benefit Program = 22
											08 = Termination of Employment	Set Plan Change = 22
												Set Alternate Identifier Change = 25
											10 = COBRA Premium Paid	Set Initial Enrollment = 28
											11 = Surviving Spouse	Set Re-enrollment = 41
											14 = Voluntary Withdrawal	
											15 = Primary Care Provider Change	
											16 = Quit	
											17 = Fired	
											18 = Suspended	
											20 = Active	
											21 = Disability	
											22 = Plan Change	
											25 = Change in Identifying Data Elements 26 = Declined Coverage	
											27 = Pre-Enrollment	
											28 = Initial Enrollment	
											29 = Benefit Selection	
											31 = Legal Separation	
											32 = Marriage	
											33 = Personnel Data	
											37 = Leave of Absence with Benefits	
											38 = Leave of Absence without Benefits	
											39 = Lay Off with Benefits	
											40 = Lay Off without Benefits	
											41 = Re-enrollment	
					1						43 = Change of Location	
					1						XN = Notification Only XT = Transfer	
											AT = Transfer	
									1	1		
					INS05	Benefit Status Code	Benefit Status Code	0	1	1	Type coverage for which benefits paid A= Active	Type of Set default to 'A' unless termination, Cobra or surviving spouse
											C = Cobra	Valid values are 'A', 'C', and 'S'
											S = Surviving Insured	TEFRA is a medical assistance program for families with children with disabilities.
											T = Tax equity and fiscal responsibility act	Eligibility is determined based on medical and level of care criteria.

EDI 834	Trans	saction Set F	ile Layo	ut								
Data Field				Segment	Reference				Attri	bute		
Values	Level	Loop	Position	ID	Designator	Name Data Element	Data Element Description	Requirement	Min	Max	Comments	Notes / Examples
				1//////////////////////////////////////	INICOG	Medicara Plan Code	Madigara Dian Codo		14	14	A = Madigara Dart A	Currently only track Medicare Part P
ŀ					INS06	Medicare Plan Code	Medicare Plan Code	0	1	1	A = Medicare Part A B = Medicare Part B	Currently only track Medicare Part B
											C = Medicare Part A and B	Valid values are 'B' and 'E'
											D = Medicare	Valid Valides are B and E
											E = No Medicare	
					INS07	Cobra Qual Event Code	Cobra Qualifying Event Code	0	1	2	1 = Termination of Employment	1 = Termination of Employment
											2 = Reduction of work hours	2 = Reduction of work hours
l											3 = Medicare	3 = Medicare
l											4 = Death	4 = Death
l											5 = Divorce	5 = Divorce
											6 = Separation	6 = Separation
											7 = Ineligible Child	7 = Ineligible Child
					INIOOO	F	Free land of the Control	0			8 = Bankruptcy of a Retired Employee	8 = Bankruptcy of a Retired Employee
					INS08	Employment Status Code	Employment Status Code	0	2	2	If enrollment is in a non employment	Subscriber only
											based program such as medicare, then use status of subscriber in that	
l											program.	
											AO = Active Military - Overseas	Valid values are:
					1				1	1	AU = Active Military - USA	13.333 3.31
					1				1	1	FT = Full Time Active	FT
					1				1	1	L1 = Leave of Absence	PT
l											PT = Part Time Active	TE
l											RT = Retired	RT
											TE = Terminated	L1
					INS09	Student Status Code	Student Status Code	0	1	1	F = Full-time	F = Full-time
l											N = Not a student	N = Not a student
								_	ļ	<u> </u>	P = Part-time	
					INS10	Yes/No Cond Resp Code	·	0	1	1	Handicap indicator:	For dependent only
							Handicap Indicator				N = no Y = yes	
D8					INS11	Date Time Format Qual	Date Time Period Format Qualifier	Х	2	3	D8 = Date expressed in CCYYMMDD	Set to D8
D6					INSTI	Date Time Format Quai	Date Time Feriou Format Qualifier	^	-	3	If INS12 present then required.	Set to Do
-					INS12	Date Time Period	Date Time Period	Х	1	35	Date of Death	Dependent date of death not captured on the
						Date Time Coned	Insured Individual Death Date		'		If INS11 present then required.	database
Not used					INS13	Confidentiality - Not Used		n/a			Not used.	Set to placeholder.
Not used					INS14	City Name - Not Used		n/a			Not used.	Set to placeholder.
Not used					INS15	State Code - Not Used		n/a			Not used.	Set to placeholder.
Not used					INS16	Country Code - Not Used		n/a			Not used.	Set to placeholder.
					INS17	Number	Number	0	1	9	Not available	Not a PeopleSoft delivered database
												element. Data for this element is not
					1							available.
REF	Detail	2000	020	REF		Subscriber Number		Required	1	1	Specifies identifying information. Segment	REF*0F*123456789~
I CLI	Detail	Member Detail	020	IVI		Gubscriber Number		required			contains a unique SUBSCRIBER Id	1120430703
l		mombo. Botan									Number (SSN or other) This occurrence	
l											identified by the OF qualifier. Identifier is	
l											used in order to link subscriber with	
											dependents.	
0F					REF01	Reference Ident Qual	Reference Identification Qualifier	M	2	3	0F = Subscriber Number.	Set to 0F (zero f).
$\overline{}$					REF02	Reference Ident	Reference Identification	X	1	30	At least one REF02 is required.	Social security number should be used until
					1 -							the National identifier is available.
							Subscriber Identifier			•		
REE	Detail	2000	020	DEE		Member Policy Number	Subscriber Identifier	Situational			Specifies identifying information. Segment	
REF	Detail	2000 Member Detail	020	REF		Member Policy Number	Subscriber Identifier	Situational			Specifies identifying information. Segment is used if group number applies to all	
REF	Detail	2000 Member Detail	020	REF		Member Policy Number	Subscriber Identifier	Situational			is used if group number applies to all	
REF	Detail		020	REF	REF01	Member Policy Number Reference Ident Qual	Reference Identification Qualifier	Situational	2	3		REF*1L*NYSLWOP~
REF	Detail		020	REF					2	3 30	is used if group number applies to all coverage data for the member.	REF*1L*NYSLWOP~
REF	Detail		020	REF	REF01	Reference Ident Qual	Reference Identification Qualifier	М	2	3 30	is used if group number applies to all coverage data for the member. 1L = Group or Policy Number	REF*1L*NYSLWOP~
REF	Detail		020	REF	REF01	Reference Ident Qual	Reference Identification Qualifier Reference Identification	М	2	3 30	is used if group number applies to all coverage data for the member. 1L = Group or Policy Number	REF*1L*NYSLWOP~ Set to 1L. Join Company and Ben_Status Valid Company Values: PA ,PE ,NYS, MTH
REF	Detail		020	REF	REF01	Reference Ident Qual	Reference Identification Qualifier Reference Identification	М	2 1	3 30	is used if group number applies to all coverage data for the member. 1L = Group or Policy Number	REF*1L*NYSLWOP~ Set to 1L. Join Company and Ben_Status Valid Company Values: PA ,PE ,NYS, MTH Valid Benefit Statuses:
REF	Detail		020	REF	REF01	Reference Ident Qual	Reference Identification Qualifier Reference Identification	М	2 1	3 30	is used if group number applies to all coverage data for the member. 1L = Group or Policy Number	REF*1L*NYSLWOP~ Set to 1L. Join Company and Ben_Status Valid Company Values: PA ,PE ,NYS, MTH Valid Benefit Statuses: DISP,FAML,IMIL,LPTA,LTDS,LWOP,
REF	Detail		020	REF	REF01	Reference Ident Qual	Reference Identification Qualifier Reference Identification	М	2	3 30	is used if group number applies to all coverage data for the member. 1L = Group or Policy Number	REF*1L*NYSLWOP~ Set to 1L. Join Company and Ben_Status Valid Company Values: PA, PE, NYS, MTH Valid Benefit Statuses: DISP,FAML,IMIL,LPTA,LTDS,LWOP, MILL,PRFL,STDS,WCDF,WCLV,
REF	Detail		020	REF	REF01	Reference Ident Qual	Reference Identification Qualifier Reference Identification	М	2	3 30	is used if group number applies to all coverage data for the member. 1L = Group or Policy Number	REF*1L*NYSLWOP~ Set to 1L. Join Company and Ben_Status Valid Company Values: PA ,PE ,NYS, MTH Valid Benefit Statuses: DISP,FAML,IMIL,LPTA,LTDS,LWOP,

EDI 834	Trans	saction Set F	ile Lavo	out									
Data Field					Reference	Segment				Attri	ibute		
Values	Level	Loop	Position	ĪD	Designator	Name	Data Element	Data Element Description	Requirement	Min	Max	Comments	Notes / Examples
REF	Detail	2000 Member Detail	020	REF		Member Id	lentification Number		Situational			Specifies identifying information. Segment is used to send additional member information.	REF*23*891234567~
					REF01	F	Reference Ident Qual	Reference Identification Qualifier	М	2	3	23 = Client Number	Set to 23
					REF02	F	Reference Ident	Reference Identification Subscriber Supplemental Identifier	Х	1	30	Subscriber Supplemental Identifier. At least one REF02 is required.	Bea_Altid
REF	Detail	2000 Member Detail	020	REF		Member Id	lentification Number		Situational			Specifies identifying information. Segment is used to send additional member information.	REF*DX*00001~
					REF01 REF02		Reference Ident Qual Reference Ident	Reference Identification Qualifier Reference Identification Subscriber Supplemental Identifier	M X	1	3	DX = Department/Agency Number Subscriber Supplemental Identifier. At least one REF02 is required.	Set to DX Cust_Id If 'HIP' and CUSTID = '00001 then map DEPTID If 'UHG' and txn for dep then add dep # to end of CUSTID field
REF	Detail	2000 Member Detail	020	REF		Member Id	lentification Number		Situational			Specifies identifying information. Segment is used to send additional member information.	REF*F6*123456789A~
					REF01	F	Reference Ident Qual	Reference Identification Qualifier	М	2	3	F6 = Health Insurance Claim(HIC) Number	Set to F6
					REF02	F	Reference Ident	Reference Identification Subscriber Supplemental Identifier	Х	1	30	Subscriber Supplemental Identifier. At least one REF02 is required.	Health Insurance Claim(HIC) Number
REF	Detail	2000 Member Detail	020	REF		Member Id	lentification Number		Situational			Specifies identifying information. Segment is used to send additional member information.	REF*Q4*999999999~
					REF01	F	Reference Ident Qual	Reference Identification Qualifier	М	2	3	Q4 = Prior Identification Number	Set to Q4
					REF02	F	Reference Ident	Reference Identification Subscriber Supplemental Identifier	Х	1	30	Subscriber Supplemental Identifier. At least one REF02 is required.	Previous Subscriber SSN covered under.
REF	Detail	2000 Member Detail	020	REF		Member Id	lentification Number		Situational			Specifies identifying information. Segment is used to send additional member information.	REF*60*999999999~
					REF01	F	Reference Ident Qual	Reference Identification Qualifier	М	2	3	6O = Cross Reference Number	Set to 60
					REF02	F	Reference Ident	Reference Identification Subscriber Supplemental Identifier	Х	1	30	Subscriber Supplemental Identifier. At least one REF02 is required.	This number is used to tie the Survivng Insured back to the original Subscriber ID.
REF	Detail	2000 Member Detail	020	REF		Member Id	lentification Number		Situational			Specifies identifying information. Segment is used to send additional member information.	REF*ZZ*E~
					REF01	F	Reference Ident Qual	Reference Identification Qualifier	M	2	3	ZZ = Mutually Defined	Set to ZZ
					REF02	F	Reference Ident	Reference Identification Subscriber Supplemental Identifier	Х	1	30	Subscriber Supplemental Identifier. At least one REF02 is required.	Valid values are: 'E' = Employee Rate 'T' = Total Rate
DTP	Detail	2000 Member Detail	025	DTP		Member L	evel Dates		Situational			Specifies date, time, and time period for member enrollment and benefit changes.	DTP*336*D8*20000207~
												†	

EDI 834	Trans	action Set Fi	ile Layo										
Data Field					Reference						ribute		
Values	Level	Loop	Position	ID	Designator	Name	Data Element	Data Element Description	Requiremen	t Min	Ma	Comments	Notes / Examples
					DTP01		Date/Time Qualifier	Date/Time Qualifier	М	3	3	286 = Retirement 296 = Return to Work 297 = Date Last Worked 300 = Enrollment Signature Date 301 = Cobra Qualifying Event 303 = Maintenance Effective 336 = Employment Begin 337 = Employment End 338 = Medicare Begin 339 = Medicare End 340 = Cobra Begin 341 = Cobra Begin 351 = Education Begin 351 = Education Begin 351 = Education End 356 = Eligibility Begin 357 = Eligibility Begin 387 = Eligibility End 383 = Adjusted Hire 393 = Plan Participation Suspension 394 = Rehire	Valid values are: 303 = Maintenance Effective 336 = Employment Begin 338 = Medicare Begin 339 = Medicare End
												473 = Medicaid Begin	
DTP	Detail	2000	025	DTP		Member I	Level Dates		Situational	+	+	474 = Medicaid End Specifies date, time, and time period for	DTP*336*D8*20000207~
		Member Detail	020	J					Citadioilai			member enrollment and benefit changes.	300 20 2000237
					DTP01		Date/Time Qualifier	Date/Time Qualifier	М	3	3	286 = Retirement 296 = Return to Work 297 = Date Last Worked 300 = Enrollment Signature Date 301 = Cobra Qualifying Event 303 = Maintenance Effective 336 = Employment Begin 337 = Employment End 338 = Medicare Begin 339 = Medicare Begin 340 = Cobra Begin 341 = Cobra End 350 = Education Begin 351 = Education Begin 351 = Education End 356 = Eligibility Begin 357 = Eligibility End 383 = Adjusted Hire 393 = Plan Participation Suspension 394 = Rehire 473 = Medicaid Begin 474 = Medicaid End	Valid values are: 303 = Maintenance Effective 336 = Employment Begin 338 = Medicare Begin 339 = Medicare End
					DTP02		Date Time Format Qual	Date Time Period Format Qualifier	М	2	3	D8 = Date expressed in CCYYMMDD.	Set to D8
					DTP03		Date Time Period	Date Time Period	M	1	35		Effective Date
								Status Information Effective Date			1		

EDI 834	Trans	action Set Fi	ile Layo	out									
Data Field				Segment	Reference	Segment				1	Attribute		
Values	Level	Loop	Position	ID	Designator	Name	Data Element	Data Element Description	Red	quirement N	Min Max	Comments	Notes / Examples
•												_	_

2100A Member Name 2100A Segment identifies member being NM1*IL*1*SMITH*JOHN*M**SR*34*123456 NM1 Detail 030 NM1 Member Name Required Member Name enrolled, changed, or corrected. NM101 Entity ID Code Entity Identifier Code М 74 = Transmission is correcting the Set to 74 if changing existing identifying identifier information on a member already information. enrolled. Usage of this code requires the sending of an NM1 with code '70' in loop 2100B. IL = Enrollment of a new member or Set to IL for new enrollment or change not update of a member with no change in related to identifying information. identifying information. The identifying information for a member is specified under the insurance contract between the sponsor and payer. NM102 Entity Type Qualifier Entity Type Qualifier 1 = Person. М Set to 1. NM103 Name Last/ Org Name Name Last or Organization Name 35 0 Member Last Name Subscriber Last Name NM104 Name First Name First 0 25 Member First Name Subscriber First Name NM105 Name Middle Name Middle 0 25 Member Middle Name Subscriber Middle Name NM106 Name Prefix - Not Used Not used NM107 Name Suffix Name Suffix 0 10 Member Name Suffix Subscriber Name Suffix ID Code Qualifier For BCBS.CBL.ESI, set to ZZ. NM108 Χ 34 = Social security number. ZZ = Mutually defined All other carriers, set to 34 Use of NM109 is required with NM108. If value is invalid ssn then set to ZZ NM109 ID Code Identification Code Χ Use of NM108 is required with NM109. For BCBS, CBL, ESI set to ssn + Subscriber Identifier dependent benef. All other carriers set to ssn until the National identifier is available PER 040 PER PER*IP**TE*518/229-0457~ Detail 2100A Member Communications Numbers Situational Identifies where administrative Member Name communication should be sent. PER01 Contact Funct Code Contact Function Code М IP = Insured Party Set to IP PER02 n/a 1 60 Name - Not Used. Set to placeholder. TE PER03 Comm Number Qual Communication Number Qualifier EM = Electronic Mail Set to TE (if available) EX = Telephone Extension FX = Facsimile HP = Home Phone Number TE = Telephone WP = Work Phone Number If PER04 present then required. PER04 Comm Number Communication Number If PER03 present then required. Format: 9999999999 Х TE PER05 Comm Number Qual Communication Number Qualifier EM = Electronic Mail Not used EX = Telephone Extension FX = Facsimile HP = Home Phone Number TE = Telephone WP = Work Phone Number If PER06 present then required. PER06 Comm Number Communication Number Х If PER05 present then required. Not used PER07 Comm Number Qual Communication Number Qualifier Х 2 If PER08 present then required. Not used PER08 Comm Number Communication Number If PER07 present then required. Not used 2100A 050 N3 Member Residence Strt Addr - DCS use field for Mailing address DCS is sending the mailing address for N3*81 COLUMBIA STREET~ Detail Situational Member Name the member. Send for subscriber and dependents. N301 Address Information Address Information М 55 Address line 1 Subscriber Address Line N302 Address Information Address Information 0 55 Address line 2 Subscriber Address Line

ata Field	I	saction Set Fi		Segment	Reference	Segment				Attr	ibute		
/alues	Level	Loop	Position		Designator		Data Element	Data Element Description	Requirement	Min	Max	Comments	Notes / Examples
•	Detail	2100A Member Name	060	N4		Member I	Residence City, State, ZII	Code - DCS mail address	Situational			Identifies location of member. Send for subscriber and dependents.	N4*ALBANY*NY*122100000*USA*~
					N401		City Name	City Name Subscriber City Name	0	2	30		City Name
					N402		State or Prov Code	State or Province Code Subscriber State Code	0	2	2		State or Prov Code
					N403		Postal Code	Postal Code Subscriber Postal Code	0	3	15		Postal Code
					N404		Country Code	Country Code	0	2	3		Country
					N405		Location Qualifier	Location Qualifier	0	1	2	CY = County	Set to CY
					N406		Location Identifier	Location Identifier Location Identification Code (County)	0	1	30	If N406 is present then N405 is required.	County
IG	Detail	2100A Member Name	080	DMG		Member I	Demographics		Situational			This segment is required for dependents until the national identifier for individuals is	DMG*D8*19720310*M*I~
												available. Once a national identifier is available, the national identifier should be sent in NM109. If DMG01 or DMG02 is present, then other is required.	
					DMG01		Date Time format Qual	Date Time Format Qualifier	Х	2	3	D8 = Date expressed in CCYYMMDD.	Set to D8.
				=	DMG02		Date Time Period	Date Time Period Member Birth Date	X	1	35	Date of Birth.	Date of Birth.
					DMG03		Gender Code	Gender Code	0	1	1	F = female	F = female
												M = male	M = male
												U = unknown	U = unknown
					DMG04		Marital Status Code	Marital Status Code	0	1	1	B = Registered Domestic Partner D = Divorced I = Single M = Married R = Unreported S = Separated U = Unmarried(single,divorced,widowed) W = Widowed X = Legally Separated	Set C, Common Law = M Set D, Divorced = D Set E, Separated = S Set H, Head Household = U Set M, Married = M Set S, Single = I Set U, Unknown = R Set W, Widowed = W
					DMG05		Race or Ethic Code	Race or Ethic Code	0	1	1		Not Used
					DMG06		Citizen Status Code	Citizen Status Code	0	1	2		Not Used
I	Detail	2100A Member Name	150	LUI		Member I	Language		Situational			Used if member's language is other than english. This data should only be transmitted when required by the insurance contract and allowed by federal and state regulations.	Not used
					LUI01		ID Code Qualifier	Identification Code Qualifier	Х	1	2	Use of LUI02 is required with LUI01.	Not used
					LUI02		ID Code	Identification Code Language Code	Х	2	80	Use of LUI01 is required with LUI02.	Not used
					LUI03		Description	Description Language Description	Х	1	80		Not used
					LUI04		Use of Lang Indica	Use of Language Indicator Language Use Indicator	0	1	2		Not used

	ırans	saction Set F	iie Layc	,uı								
Data Field				Segment	Reference	Segment				ibute		
Values	Level	Loop	Position	ID	Designator	Name Data Element	Data Element Description	Requirement	Min	Max	Comments	Notes / Examples
		04000 1										П
11	Detail	2100B Incor 2100B		mber Na INM1	ame	Incorrect Member Name		Cituational		_	Segment is used only with a corrected	
V 11	Detail	Incorrect	030	NM1		Incorrect Member Name		Situational			Segment is used only with a corrected name in loop 2100A.	NWT"70"T"SWITH"JON"""34"98765432
		Member Name									marile in loop 2100A.	
1		Wichiber Hame			NM101	Entity ID Code	Entity Identifier Code	М	2	3	70 = Prior Incorrect Insured	Set to 70.
					14141101	Entity 15 Godo	Entity Identifier Gode		Ĭ		Use if correcting identifier information on a	
											member already enrolled. Send NM1 with	
											code 74 in loop 2100A.	
					NM102	Entity Type Qualifier	Entity Type Qualifier	M	1	1	1 = Person	Set to 1
					NM103	Name Last/ Org Name	Name Last or Organization Name	0	1	35		Prior Incorrect Insured Last Name
							Prior Incorrect Insured Last Name					
					NM104	Name First	Name First	0	1	25		Prior Incorrect Insured First Name
							Prior Incorrect Insured First Name					
					NM105	Name Middle	Name Middle	0	1	25		Prior Incorrect Insured Middle Name
					NINAAOC	Name Destin	Prior Incorrect Insured Middle Name	0		40		Catta alasahaldan
					NM106	Name Prefix	Name Prefix Prior Incorrect Insured Name Prefix	0	[1	10		Set to placeholder.
					NM107	Name Suffix	Name Suffix	0	1	10		Prior Incorrect Insured Name Suffix
					INIVITO	Ivallie Sullix	Prior Incorrect Insured Name Suffix		[10		I not incorrect insured ivaline Sullix
					NM108	ID Code Qualifier	Identification Code Qualifier	Х	1	2	34 = Social security number.	For BCBS,CBL,ESI, set to ZZ
								^		[ZZ = Mutually Defined	All other carriers, set to 34
									1		Use of NM109 is required with NM108.	
					NM109	ID Code	Identification Code	Х	2	80	Use of NM108 is required with NM109.	For BCBS, CBL,ESI set to ssn +
							Prior Incorrect Insured Identifier		1			dependent_benef.
												All other carriers set to ssn
				I and a second		1	1					W
ИG	Detail	2100B	080	DMG		Incorrect Member Demographics		Situational			Segment used only if demographic	DMG*D8*19740311~
		Incorrect									information, such as date of birth is used	
		Member Name									to identify a member and it is being	
3					DMG01	Date Time Format Qual	Date Time Period Format Qualifier	N4	2	2	changed. D8 = Date expressed in CCYYMMDD.	Set to D8.
)					DMG01	Date Time Period	Date Time Period Format Qualifier Date Time Period	M X	1	35	Prior incorrect insured birth date.	Prior Incorrect Insured Birth Date
					DIVIGUE	Bate Time Fellou	Prior Incorrect Insured Birth Date	^	l'	00	Use of DMG01 is required with DMG02.	I nor medirect madred birth bate
					DMG03	Gender Code	Gender Code	0	1	1	F = female	F = female
											M = male	M = male
											U = unknown	U = unknown
		04000 14				for residence address						
					CS using							
VI1		2100C		NM1	US using	Member Mailing Address - DCS u	se field for residence address	Situational			DCS is sending the residence address	NM1*31*1~
M1		2100C Member			ocs using		se field for residence address	Situational			when the mailing address is a PO Box	NM1*31*1~
M1		2100C				Member Mailing Address - DCS u					when the mailing address is a PO Box address in loop 2100A.	
л 1		2100C Member			NM101	Member Mailing Address - DCS u Entity ID Code	Entity Identifier Code	M	2	3	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address	Set to 31
W1		2100C Member				Member Mailing Address - DCS u			2	3	when the mailing address is a PO Box address in loop 2100A.	
	Detail	2100C Member Address	030	NM1	NM101	Member Mailing Address - DCS u Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier	M M	2	3	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person	Set to 31 Set to 1
	Detail	2100C Member Address 2100C	030		NM101	Member Mailing Address - DCS u Entity ID Code	Entity Identifier Code Entity Type Qualifier	M	2	3	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address	Set to 31
	Detail	2100C Member Address 2100C Member	030	NM1	NM101	Member Mailing Address - DCS u Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier	M M	2 1	3 1	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box	Set to 31 Set to 1
	Detail	2100C Member Address 2100C	030	NM1	NM101	Member Mailing Address - DCS u Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier	M M	2 1	3 1	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address	Set to 31 Set to 1
	Detail	2100C Member Address 2100C Member	030	NM1	NM101 NM102	Member Mailing Address - DCS u Entity ID Code Entity Type Qualifier Member Mail Street Addr - DCS u	Entity Identifier Code Entity Type Qualifier se field for residence address	M M Situational	2 1		when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box	Set to 31 Set to 1 N3*Street 1~
	Detail	2100C Member Address 2100C Member	030	NM1	NM101 NM102	Member Mailing Address - DCS u Entity ID Code Entity Type Qualifier Member Mail Street Addr - DCS u	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information	M M Situational	2 1 1 1 1	3 1 55 55	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box	Set to 31 Set to 1 N3*Street 1~
	Detail	2100C Member Address 2100C Member	030	NM1	NM101 NM102	Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line	M M Situational	1 1		when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box	Set to 31 Set to 1 N3*Street 1~ Address Information
3	Detail	2100C Member Address 2100C Member Address	030	NM1	NM101 NM102	Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information	M M Situational M O	1 1		when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box address in loop 2100A.	Set to 31 Set to 1 N3*Street 1~ Address Information Address Information
3	Detail	2100C Member Address 2100C Member Address 2100C	030	NM1	NM101 NM102	Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information	M M Situational	1 1		when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box address in loop 2100A. This loop is sent if the member has a	Set to 31 Set to 1 N3*Street 1~ Address Information
	Detail	2100C Member Address 2100C Member Address 2100C Member	030	NM1	NM101 NM102	Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information	M M Situational M O	1 1		when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box address in loop 2100A. This loop is sent if the member has a different mailing address from the	Set to 31 Set to 1 N3*Street 1~ Address Information Address Information
3	Detail	2100C Member Address 2100C Member Address 2100C	030	NM1	NM101 NM102 N301 N302	Entity ID Code Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information Subscriber Address Line	M M Situational M O Situational	1 1 2	55	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box address in loop 2100A. This loop is sent if the member has a	Set to 31 Set to 1 N3*Street 1~ Address Information Address Information N4*ALBANY*NY*122100000*USA*~
3	Detail	2100C Member Address 2100C Member Address 2100C Member	030	NM1	NM101 NM102	Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information Subscriber Address Line City Name	M M Situational M O	1 1 2 2		when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box address in loop 2100A. This loop is sent if the member has a different mailing address from the	Set to 31 Set to 1 N3*Street 1~ Address Information Address Information
3	Detail	2100C Member Address 2100C Member Address 2100C Member	030	NM1	NM101 NM102 N301 N302	Member Mailing Address - DCS u Entity ID Code Entity Type Qualifier Member Mail Street Addr - DCS u Address Information Address Information Member Mail City, State, Zip City Name	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information Subscriber Address Line	M M Situational M O Situational O	2 1 1 1 2 2 2 2	55	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box address in loop 2100A. This loop is sent if the member has a different mailing address from the	Set to 31 Set to 1 N3*Street 1~ Address Information Address Information N4*ALBANY*NY*122100000*USA*~ City Name
3	Detail	2100C Member Address 2100C Member Address 2100C Member	030	NM1	NM101 NM102 N301 N302	Entity ID Code Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information Subscriber Address Line City Name Subscriber City Name State or Province Code	M M Situational M O Situational	2 1 1 1 2 2 2	55	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box address in loop 2100A. This loop is sent if the member has a different mailing address from the	Set to 31 Set to 1 N3*Street 1~ Address Information Address Information N4*ALBANY*NY*122100000*USA*~
3	Detail	2100C Member Address 2100C Member Address 2100C Member	030	NM1	NM101 NM102 N301 N302	Member Mailing Address - DCS u Entity ID Code Entity Type Qualifier Member Mail Street Addr - DCS u Address Information Address Information Member Mail City, State, Zip City Name	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information Subscriber Address Line City Name Subscriber City Name	M M Situational M O Situational O	1 1 2 2 3 3	55	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box address in loop 2100A. This loop is sent if the member has a different mailing address from the	Set to 31 Set to 1 N3*Street 1~ Address Information Address Information N4*ALBANY*NY*122100000*USA*~ City Name
3 3	Detail	2100C Member Address 2100C Member Address 2100C Member	030	NM1	NM101 NM102 N301 N302 N401 N402	Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information Subscriber Address Line City Name Subscriber City Name State or Province Code Subscriber State Code	M M Situational M O Situational O O	2	30 2	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box address in loop 2100A. This loop is sent if the member has a different mailing address from the	Set to 31 Set to 1 N3*Street 1~ Address Information Address Information IN4*ALBANY*NY*122100000*USA*~ City Name State or Prov Code
3	Detail	2100C Member Address 2100C Member Address 2100C Member	030	NM1	NM101 NM102 N301 N302 N401 N402	Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information Subscriber Address Line City Name Subscriber City Name State or Province Code Subscriber State Code Postal Code	M M Situational M O Situational O O	2	30 2	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box address in loop 2100A. This loop is sent if the member has a different mailing address from the	Set to 31 Set to 1 N3*Street 1~ Address Information Address Information IN4*ALBANY*NY*122100000*USA*~ City Name State or Prov Code
3	Detail	2100C Member Address 2100C Member Address 2100C Member	030	NM1	NM101 NM102 N301 N302 N401 N402 N403	Entity ID Code Entity ID Code Entity Type Qualifier	Entity Identifier Code Entity Type Qualifier se field for residence address Address Information Subscriber Address Line Address Information Subscriber Address Line City Name Subscriber City Name State or Province Code Subscriber State Code Postal Code Country Code Ed	M M Situational M O O O O O	2	30 2	when the mailing address is a PO Box address in loop 2100A. 31 = Postal Mailing Address 1 = Person DCS is sending the residence address when the mailing address is a PO Box address in loop 2100A. This loop is sent if the member has a different mailing address from the	Set to 31 Set to 1 N3*Street 1~ Address Information Address Information N4*ALBANY*NY*122100000*USA*~ City Name State or Prov Code Postal Code

EDI 834	Trans	action Set Fi	le Lavo	out								
Data Field					Reference				Attr	ibute		
Values	Level	Loop	Position	ĪD	Designator	Name Data Element	Data Element Description	Requirement	Min	Max	Comments	Notes / Examples
		2100D Memb										
VM1		2100D	030	NM1		Member Employer		Situational			This loop is to be sent when the member	Segment does not apply.
		Member									is employed by someone other that the	
		Employer									sponsor and the insurance contract	
											requires the payer be notified of such	
					NINAAOA	TEATH ID OLD	Even Ideaes Conde			_	employment.	-1-
				-	NM101	Entity ID Code Entity Type Qualifier	Entity Identifier Code	M	2	3		n/a
					NM102 NM103	Name Last/ Org Name	Entity Type Qualifier Name Last or Organization Name	М О	1	35		n/a n/a
					INIVI 103	Name Last Org Name	Insured Employer Name		'	33		lliva
					NM104	Name First	Name First	0	1	25		n/a
					14101104	Ivallie i list	Insured Employer First Name	Ŭ	l '	25		
					NM105	Name Middle	Name Middle	0	1	25		n/a
						I I I I I I I I I I I I I I I I I I I	Insured Employer Middle Name					
					NM106	Name Prefix	Name Prefix	0	1	10		n/a
							Insured Employer Name Prefix			1		
					NM107	Name Suffix	Name Suffix	0	1	10		n/a
	<u> </u>		<u></u>				Insured Employer Name Suffix			L		
					NM108	ID Code Qualifier	Identification Code Qualifier	Х	1	2	Use of NM109 is required with NM108.	n/a
		_			NM109	ID Code	Identification Code	Х	2	80	Use of NM108 is required with NM109.	n/a
							Insured Employer Identifier					
				11/////////////////////////////////////				//1			T-	
PER	Detail	2100D	040	PER		Member Employer Communication	s Numbers	Situational			When employer is applicable, segment	Segment does not apply.
		Member									identifies to whom administrative	
		Employer			DEDO4	10	October Frankling October			_	communications should be sent.	-1-
					PER01 PER02	Contact Funct Code Name - Not Used	Contact Function Code	M	2	2 60	Name - Not Used.	n/a
					PER02 PER03	Comm Number Qual	Communication Number Qualifier	n/a X	2	2	If PER04 present then required.	n/a
				-	PER03	Comm Number	Communication Number Qualifier	X	1	80	If PER03 present then required.	n/a n/a
				-	PER05	Comm Number Qual	Communication Number Qualifier	X	2	2	If PER06 present then required.	n/a
					PER06	Comm Number Quai	Communication Number Qualifier	X	1	80	If PER05 present then required.	n/a
					PER07	Comm Number Qual	Communication Number Qualifier	X	2	2	If PER08 present then required.	n/a
					PER08	Comm Number	Communication Number	X	1	80	If PER07 present then required.	n/a
								1		,		
V3	Detail	2100D Member	050	N3		Member Employer Street Address		Situational			When employer is applicable, segment	Segment does not apply.
						•					identifies employer address.	
					N301	Address Information	Address Information	M	1	55		n/a
					N302	Address Information	Address Information	0	1	55		n/a
				11/////////////////////////////////////				//1			T-	
N4	Detail	2100D	060	N4		Member Employer City, State, Zip		Situational			When employer is applicable, segment	Segment does not apply.
		Member									identifies employer address.	
	 	Employer			NIAOA	City Name	Cit. Nama		2	20		7/2
					N401 N402	City Name	City Name	0	2	30		n/a
					N402 N403	State or Prov Code Postal Code	State or Province Code Postal Code	0	2	15		n/a n/a
					N403 N404	Country Code	Country Code	0	2	3	+	n/a
				1	N404 N405	Location Qualifier	Location Qualifier	0	1	2		n/a
					N405	Location Identifier	Location Identifier	0	1	30	If N406 is present then N405 is required.	n/a
			1					<u> </u>				- · · · · · · · ·
		2100E Memb	er Sch	ool								
NM1		2100E		NM1		Member School		Situational			Loop is sent when member is enrolled in	Not a PeopleSoft delivered database
		Member School								1	school and sponsor is required to notify	element. Carrier information requirement ca
										1	payer.	adequately be satisfied through the
										1		dependent member segments. Segment is
												not used.
					NM101	Entity ID Code	Entity Identifier Code	M	2	3		Not used
					NM102	Entity Type Qualifier	Entity Type Qualifier	M	1	1		Not used
	l				NM103	Name Last/ Org Name	Name Last or Organization Name	0	1	35		Not used

	4 Trans	saction Set Fi											
Data Field Values	Level	Loop	Position	Segment	Reference Designator		Data Element	Data Element Description	Requirement		ribute Max	Comments	Notes / Examples
					1 = 5 = 3 - 5 - 5				1				
PER	Detail	2100E	040	PER		Member 9	School Communications	Numbers	Situational			When school is applicable, segment	Not a PeopleSoft delivered database
		Member School										identifies to whom administrative	element. Carrier information requirement can
												communications should be sent.	adequately be satisfied through the
													dependent member segments. Segment is
	1				DEDOL				<i></i>			014 0 1 1 1 1	not used.
	1			_	PER01		Contact Funct Code	Contact Function Code	M	2	2	SK = School clerk	Not used
	1			-	PER02		Name - Not Used Comm Number Qual	Communication Number Qualifier	n/a	2	60 2	Name - Not Used.	Set to placeholder.
	1			-	PER03 PER04		Comm Number Quai	Communication Number Qualifier Communication Number	X	1	80	If PER04 present then required. If PER03 present then required.	Not used Not used
				-	PER04 PER05		Comm Number Qual	Communication Number Qualifier	X	2	2	If PER06 present then required.	Not used
				-	PER05		Comm Number Qual	Communication Number Qualifier	x	1	80	If PER05 present then required.	Not used
				-	PER07		Comm Number Qual	Communication Number Qualifier	X	2	2	If PER08 present then required.	Not used
				-	PER08		Comm Number Qual	Communication Number	X	1	80	If PER07 present then required.	Not used
	-1				1 LINO	I.	Committaniber	Communication Hamber		<u> </u>	100	in the present them required.	Hot doed
N3	Detail	2100E	050	N3		Member 9	School Street Address		Situational			When school is applicable, segment	Not a PeopleSoft delivered database
		Member School										identifies school address.	element. Carrier information requirement can
													adequately be satisfied through the
													dependent member segments. Segment is
													not used.
					N301		Address Information	Address Information	M	1	55		Not used
					N302		Address Information	Address Information	0	1	55		Not used
N4	Detail	2100E	060	N4		Member :	School City, State, Zip		Situational			When school is applicable, segment	Not a PeopleSoft delivered database
		Member School										identifies school address.	element. Carrier information requirement can
													adequately be satisfied through the
													dependent member segments. Segment is
	1				11101		lou M	an N					not used.
					N401		City Name	City Name	0	2	30		Not used
	1			_	N402		State or Prov Code Postal Code	State or Province Code	0	2	2		Not used
	1				N403			Postal Code	0	3	15		Not used
					NAOA		Country Codo	Country Code	0	2	2		Notuced
					N404		Country Code	Country Code	0	2	3		Not used
		2100E Custo	dial D	aront	N404		Country Code	Country Code	0	2	3		Not used
NM1	Detail	2100F Custo			N404	Custodia	·	Country Code		2	3	Loon is sent when custodial parent of a	
NM1	Detail	2100F	odial Pa	arent NM1	N404	Custodia	·	Country Code	O	2	3	Loop is sent when custodial parent of a	Not a PeopleSoft delivered database
NM1	Detail	2100F Custodial			N404	Custodia	·	Country Code		2	3	minor is someone other than the	Not a PeopleSoft delivered database element. Carrier information requirement can
NM1	Detail	2100F			N404	Custodia	·	Country Code		2	3	· ·	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the
NM1	Detail	2100F Custodial			N404	Custodia	·	Country Code		2	3	minor is someone other than the	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could
NM1	Detail	2100F Custodial			N404	Custodia	·	Country Code		2	3	minor is someone other than the	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or
NM1	Detail	2100F Custodial			N404	Custodia	·	Country Code		2	3	minor is someone other than the	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could
NM1	Detail	2100F Custodial			N404	Custodia	·	Country Code Entity Identifier Code		2	3	minor is someone other than the	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels.
NM1	Detail	2100F Custodial				Custodia	I Parent		Situational M M	2 2 1	3 3 1	minor is someone other than the	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended.
NM1	Detail	2100F Custodial			NM101 NM102 NM103	Custodia	Entity ID Code Entity Type Qualifier Name Last/ Org Name	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name	Situational M M O	2 2 1 1 1	3 3 1 35	minor is someone other than the	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used Not used Not used
NM1	Detail	2100F Custodial			NM101 NM102 NM103 NM104	Custodia	Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First	Situational M M O O	2 1 1 1 1	25	minor is someone other than the	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used Not used Not used Not used Not used
NM1	Detail	2100F Custodial			NM101 NM102 NM103 NM104 NM105	Custodia	Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle	Situational M M O O O	2 1 1 1 1 1 1	25 25	minor is someone other than the	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
NM1	Detail	2100F Custodial			NM101 NM102 NM103 NM104 NM105 NM106	Custodia	Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix	Situational M M O O O O	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	25 25 10	minor is someone other than the	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
NM1	Detail	2100F Custodial			NM101 NM102 NM103 NM104 NM105 NM106 NM107	Custodia	Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix	Situational M M O O O O O	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	25 25	minor is someone other than the subscriber.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
NM1	Detail	2100F Custodial			NM101 NM102 NM103 NM104 NM105 NM106 NM107 NM108	Custodia	Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier	Situational M M O O O O X	2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	25 25 10 10 2	minor is someone other than the subscriber. Use of NM109 is required with NM108.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
NM1	Detail	2100F Custodial			NM101 NM102 NM103 NM104 NM105 NM106 NM107	Custodia	Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix	Situational M M O O O O O	2 1 1 1 1 1 1 1 1 2	25 25 10	minor is someone other than the subscriber.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
		2100F Custodial Parent	030	NM1	NM101 NM102 NM103 NM104 NM105 NM106 NM107 NM108		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier ID Code	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code	Situational M M O O O X X	2 1 1 1 1 1 1 1 1 2	25 25 10 10 2	minor is someone other than the subscriber. Use of NM109 is required with NM108. Use of NM108 is required with NM109.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
NM1	Detail	2100F Custodial Parent	030		NM101 NM102 NM103 NM104 NM105 NM106 NM107 NM108		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code	Situational M M O O O O X	2 1 1 1 1 1 1 1 1 2	25 25 10 10 2	minor is someone other than the subscriber. Use of NM109 is required with NM108. Use of NM108 is required with NM109. When custodial parent is applicable,	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
		2100F Custodial Parent	030	NM1	NM101 NM102 NM103 NM104 NM105 NM106 NM107 NM108		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier ID Code	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code	Situational M M O O O X X	2 1 1 1 1 1 1 1 1 2	25 25 10 10 2	minor is someone other than the subscriber. Use of NM109 is required with NM108. Use of NM108 is required with NM109. When custodial parent is applicable, segment identifies to whom administrative	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used N
		2100F Custodial Parent	030	NM1	NM101 NM102 NM103 NM104 NM105 NM106 NM107 NM108		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier ID Code	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code	Situational M M O O O X X	2 1 1 1 1 1 1 1 2	25 25 10 10 2	minor is someone other than the subscriber. Use of NM109 is required with NM108. Use of NM108 is required with NM109. When custodial parent is applicable,	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the
		2100F Custodial Parent	030	NM1	NM101 NM102 NM103 NM104 NM105 NM106 NM107 NM108		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier ID Code	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code	Situational M M O O O X X	2 1 1 1 1 1 1 1 1 2	25 25 10 10 2	minor is someone other than the subscriber. Use of NM109 is required with NM108. Use of NM108 is required with NM109. When custodial parent is applicable, segment identifies to whom administrative	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Segment is
		2100F Custodial Parent	030	NM1	NM101 NM102 NM103 NM104 NM105 NM106 NM107 NM108 NM109		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier ID Code	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code	Situational M M O O O X X X Situational	2 2 1 1 1 1 1 1 1 1 1 2 2	25 25 10 10 2	minor is someone other than the subscriber. Use of NM109 is required with NM108. Use of NM108 is required with NM109. When custodial parent is applicable, segment identifies to whom administrative	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used N
		2100F Custodial Parent	030	NM1	NM101 NM102 NM103 NM104 NM105 NM106 NM107 NM108 NM109		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier ID Code I Parent Communications Contact Funct Code	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code	Situational M M O O O X X X Situational	2 1 1 1 1 1 1 1 2 2 2 1 1	25 25 10 10 2 80	use of NM109 is required with NM108. Use of NM108 is required with NM109. When custodial parent is applicable, segment identifies to whom administrative communications should be sent.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
		2100F Custodial Parent	030	NM1	NM101 NM102 NM103 NM104 NM105 NM106 NM107 NM108 NM109		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier ID Code I Parent Communications Contact Funct Code Name - Not Used	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code s Numbers Contact Function Code	Situational M M O O O X X X Situational	2 1 1 1 1 1 1 1 1 2	25 25 10 10 2	use of NM109 is required with NM108. Use of NM108 is required with NM109. When custodial parent is applicable, segment identifies to whom administrative communications should be sent.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
		2100F Custodial Parent	030	NM1	NM101 NM102 NM103 NM104 NM106 NM107 NM108 NM109		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier ID Code I Parent Communications Contact Funct Code Name - Not Used Comm Number Qual	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code s Numbers Contact Function Code Communication Number Qualifier	Situational M M O O O X X X Situational	2 1 1 1 1 1 1 1 1 2 2 1	25 25 10 10 2 80	minor is someone other than the subscriber. Use of NM109 is required with NM108. Use of NM108 is required with NM109. When custodial parent is applicable, segment identifies to whom administrative communications should be sent. Name - Not Used. If PER04 present then required.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
		2100F Custodial Parent	030	NM1	NM101 NM102 NM103 NM104 NM105 NM106 NM107 NM108 NM109		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier ID Code I Parent Communications Contact Funct Code Name - Not Used	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code S Numbers Contact Function Code Communication Number Qualifier Communication Number	Situational M M O O O X X X Situational	2 1 1 1 1 1 1 1 2 2 1 1 2 1 2 1 1 2 1 2	25 25 10 10 2 80 2 60 2	use of NM109 is required with NM108. Use of NM108 is required with NM109. When custodial parent is applicable, segment identifies to whom administrative communications should be sent.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
		2100F Custodial Parent	030	NM1	NM101 NM102 NM103 NM104 NM106 NM107 NM108 NM109		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier ID Code I Parent Communications Contact Funct Code Name - Not Used Comm Number Comm Number	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code s Numbers Contact Function Code Communication Number Qualifier	Situational M M O O O X X X Situational	2 1 1 1 1 1 1 1 1 2 2 1 1 2 1 2	25 25 10 10 2 80 2 60 2	minor is someone other than the subscriber. Use of NM109 is required with NM108. Use of NM108 is required with NM109. When custodial parent is applicable, segment identifies to whom administrative communications should be sent. Name - Not Used. If PER04 present then required. If PER03 present then required.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used
		2100F Custodial Parent	030	NM1	NM101 NM102 NM103 NM104 NM105 NM106 NM107 NM108 NM109 PER01 PER02 PER03 PER04 PER05		Entity ID Code Entity Type Qualifier Name Last/ Org Name Name First Name Middle Name Prefix Name Suffix ID Code Qualifier ID Code I Parent Communications Contact Funct Code Name - Not Used Comm Number Comm Number Comm Number	Entity Identifier Code Entity Type Qualifier Name Last or Organization Name Name First Name Middle Name Prefix Name Suffix Identification Code Qualifier Identification Code S Numbers Contact Function Code Communication Number Qualifier Communication Number Communication Number Qualifier	Situational M M O O O X X Situational	2 1 1 1 1 1 1 1 1 2 2 1 2 1 1 2 1 1 2 1 1 2 1 2 1 1 2 2 1 2 1 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 2 1 2 1 2 1 2	25 25 10 10 2 80 2 60 2 80 2	minor is someone other than the subscriber. Use of NM109 is required with NM108. Use of NM108 is required with NM109. When custodial parent is applicable, segment identifies to whom administrative communications should be sent. Name - Not Used. If PER04 present then required. If PER05 present then required. If PER06 present then required.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Could customize dependent/beneficiary or dependent/beneficiary comment panels. Customization not recommended. Not used

EDI 834	Trans	saction Set F	ile Layo	out									
Data Field Values		Loop	Position	Segment	Reference Designator		Data Element	Data Element Description	Requirement		ribute Max	Comments	Notes / Examples
N3	Detail	2100F Custodial Parent	050	N3			Parent Street Address		Situational			segment identifies custodial address.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Segment is not used.
					N301		Address Information	Address Information	M	1	55		Not used
	<u> </u>				N302		Address Information	Address Information	0	1	55		Not used
N4	Detail	2100F Custodial Parent	060	N4	N401	Custodia	Parent City, State, Zip City Name	City Name	Situational	2	30		Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Segment is not used. Not used
					N402		State or Prov Code	State or Province Code	0	2	2		Not used
					N403		Postal Code	Postal Code	0	3	15		Not used
					N404		Country Code	Country Code	0	2	3		Not used
		2100G Resp							1				
NM1	Detail	2100G Responsible Person	030	NM1		Responsi	ble Person		Situational			Loop identifies person responsible for the member. Responsible person is someone other than the subscriber. Data is intended for coverage programs that are not to be employment related, such as Medicare and Medicaid.	dependent member segments. Segment is not used.
					NM101		Entity ID Code	Entity Identifier Code	M	2	3		Not used
					NM102		Entity Type Qualifier	Entity Type Qualifier	M	1	1		Not used
					NM103 NM104		Name Last/ Org Name Name First	Name Last or Organization Name Name First	0	1	35 25		Not used Not used
				-	NM104		Name Middle	Name Middle	0	1	25		Not used
					NM106		Name Prefix	Name Prefix	0	1	10		Not used
					NM107		Name Suffix	Name Suffix	0	1	10		Not used
					NM108		ID Code Qualifier	Identification Code Qualifier	Х	1	2	Use of NM109 is required with NM108.	Not used
					NM109		ID Code	Identification Code	X	2	80	Use of NM108 is required with NM109.	Not used
PER	Detail	2100G Responsible Person	040	PER		Responsi	ble Person Communication	ons Numbers	Situational				Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Segment is not used.
					PER01		Contact Funct Code	Contact Function Code	М	2	2		Not used
					PER02		Name - Not Used		n/a	1	60	Name - Not Used.	Not used
					PER03		Comm Number Qual	Communication Number Qualifier	X	2	2	If PER04 present then required.	Not used
					PER04 PER05		Comm Number Comm Number Qual	Communication Number Communication Number Qualifier	X	7	80	If PER03 present then required. If PER06 present then required.	Not used Not used
					PER05 PER06		Comm Number Quai	Communication Number Qualifier Communication Number	X	1	80	If PER05 present then required.	Not used
					PER07		Comm Number Qual	Communication Number Qualifier	X	2	2	If PER08 present then required.	Not used
					PER08		Comm Number	Communication Number	X	1	80	If PER07 present then required.	Not used
N3	Detail	2100G Responsible Person	050	N3		Responsi	ble Person Street Addres		Situational			segment identifies responsible address.	Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Segment is not used.
					N301		Address Information	Address Information	M	1	55		Not used
	<u> </u>				N302		Address Information	Address Information	0	1	55	1	Not used
N4	Detail	2100G Responsible Person	060	N4		•	ble Person City, State, Zip		Situational				Not a PeopleSoft delivered database element. Carrier information requirement can adequately be satisfied through the dependent member segments. Segment is not used.
					N401		City Name	City Name	0	2	30		Not used
					N402		State or Prov Code	State or Province Code	0	2	2		Not used
					N403		Postal Code	Postal Code	0	3	15 3		Not used
l	ı				N404		Country Code	Country Code	0		J	1	Not used

EDI 834	Trans	action Set Fi	ile Layo	out								
Data Field				Segment	Reference	Segment				Attribute		
Values	Level	Loop	Position	ĪD	Designator	Name	Data Element	Data Element Description	Requirement	Min Max	Comments	Notes / Examples
-												·

		2200 Disabi										
DSB	Detail	2200 Disability Information	200	DSB		Disability Information		Situational			Segment used when enrolling or changing a disabled member. The DSB loop may only appear for the Subscriber.	DSB*3~
					DSB01	Disability Type Code	Disability Type Code	М	1	1	2 = Long Term Disability	Valid Values: Set T = 2 Set P = 3 Set N = 4
Not used					DSB02	Quantity - Not Used					Not used	Not used
Not used					DSB03	Occupation Cd - Not Used					Not used	Not used
Not used					DSB04	Work Inty Code - Not Used					Not used	Not used
Not used					DSB05	Product Opt Cd - Not Used					Not used	Not used
Not used					DSB06	Monetary Amt - Not Used					Not used	Not used
DX					DSB07	Prod/Serv ID Qual	Product Service ID Qualifier	X	2	2	DX = International Classification of Diseases Clinical Modification(Icd-9-cm) Diagnosis If DSB09 present then required.	Not used
585					DSB08	Medical Code Value	Medical Code Value Diagnosis Code	Х	1	15	Medical Code Value the only allowed value is 585 - End Stage Renal Disease If DSB08 present then required.	Not used
DTP	Detail	2200 Disability Information	210	DTP		Disability Eligibility Dates		Situational			Segment is used to send first and last date of disability.	DTP*360*D8*1996*1001~
					DTP01	Date/Time Qualifier	Date/Time Qualifier	М	3	3	360 = Disability Begin 361 = Disability End	360 = Disability Begin 361 = Disability End
D8					DTP02	Date Time Format Qual	Date Time Period Format Qualifier	M	2	3	D8 = Date expressed in CCYYMMDD.	Set to D8.
					DTP03	Date Time Period	Date Time Period Disability Eligibility Date	M	1	35	Disability Eligibility Date	Disability Eligibility Date

			_				·					
LID	ID-1-1	2300 Health				I		O't attack	_	_		LIDAGGASSI II TSSIND
HD	Detail	2300 Health Coverage	260	HD		Health Coverage		Situational			Segment is used to enroll a new member or add, update, or terminate coverage for an existing member.	HD*021**HLT**IND~
Netword					HD01	Maintenance Type Code	Maintenance Type Code	М	3	3	001 = Change 002 = Delete 021 = Addition 024 = Cancellation or termination 025 = Reinstatement 026 = Correction 030 = Audit or compare 032 = Employee Info Not Applicable	001 = Change 002 = Delete 021 = Addition 024 = Cancellation or termination 025 = Reinstatement 030 = Audit or Compare
Not used				_	HD02	Maint Reason - Not Used	1	_			Not used	Not Used
					HD03	Insurance Line Code	Insurance Line Code	O	2	3	AG = Preventitive Care/Wellness AH = 24 Hour Care AJ = Medicare Risk AK = Mental Health DCP = Dental Capitation DEN = Dental EPO = Exclusive Provider Organization FAC = Facility HE = Hearing HLT = Health HMO = Health Maintenance Organization LTC = Long-Term Disability MM = Major Medical MOD = Mail Order Drug PDG = Prescription Drug POS = Point of Service PPO = Preferred Provider Organization PRA = Practitioners STD = Short-Term Disability UR = Utilization Review VIS = Vision	Evaluate retro stack Valid Values : HLT PDG DEN VIS
					HD04	Plan Cvrg Description	Plan Cvrg Description	0	1	50	Use this element when additional information is needed by the insurer to describe the exact type of coverage being provided. If required by an insurer, this information must be included. The insurer establishes the content of this element.	Not applicable
					HD05	Coverage Level Code	Coverage Level Code	0	3	3	CHD = Children Only DEP = Dependents Only E1D = Employee and 1 Dependent E2D = Employee and 2 Dependents E3D = Employee and 3 Dependents E5D = Employee and 1 or More Dependents E6D = Employee and 2 or More Dependents E7D = Employee and 3 or More Dependents E8D = Employee and 4 or More Dependents E8D = Employee and 5 or More Dependents E9D = Employee and 5 or More Dependents E9D = Employee and Children EMP = Employee and Spouse FAM = Family IND = Individual SPC = Spouse and Children SPO = Spouse only TWO = Two Party	Valid Values: IND FAM

Requirement Min Max

Comments

Notes / Examples

EDI 834 Transaction Set File Layout

Data Field Se

Loop

Values

Level

Position

Segment Reference Segment ID Designator Name

Data Element

Data Element Description

0	Detail	2300 Health Coverage	270	DTP		Health Coverage Eligibility Dates		Required			Segment contains the date that maintenance was performed or effective, and the benefit begin and end dates for the coverage.	DTP*348*D8*20000320~
					DTP01	Date/Time Qualifier	Date/Time Qualifier	М	3	3	303 = Maintenance Effective 348 = Benefit Begin 349 = Benefit End	Valid Values: 348 = Benefit Begin 349 = Benefit End 303 = Maintenance Effective
					DTP02	Date Time Format Qual	Date Time Period Format Qualifier	M	2	3	D8 = Date expressed in CCYYMMDD.	Set to D8.
					DTP03	Date Time Period	Date Time Period Coverage Period	М	1	35	Coverage Period	Coverage Period
F De	Detail	2300 Health Coverage	290	REF		Health Coverage Policy Number		Situational			Segment is used to identify a policy or group number for a particular insurance product if it has not already been identified in either REF02, position 1-030 or REF02, position 2-020. This is necessary when not all coverage types have the same group	
				-	REF01	Deference Ident Ouel	Deference Identification Qualifier	NA.	2	2	or policy. 17 = Client Reporting Category	Cot to 41
					REF02	Reference Ident Qual Reference Ident	Reference Identification Qualifier Reference Identification Insured Group or Policy Number	M X	1	30	Insured Group or Policy Number At least one REF02 is required.	Set to 1L Join Benefit Plan and Benefit Program
	Detail	2300 Health Coverage	260	HD		Health Coverage		Situational			Segment is used to indicate Med D enrollment	HD*021**PDG~ (Medicare D Enrollment)
used					HD02	Maint Reason - Not Used					002 = Delete 021 = Addition 024 = Cancellation or termination 025 = Reinstatement 026 = Correction 030 = Audit or compare 032 = Employee Info Not Applicable Not used	002 = Delete 021 = Addition 024 = Cancellation or termination 025 = Reinstatement 030 = Audit or Compare
					HD03	Insurance Line Code	Insurance Line Code	0	2	3	AG = Preventitive Care/Wellness AH = 24 Hour Care AJ = Medicare Risk AK = Mental Health DCP = Dental Capitation DEN = Dental EPO = Exclusive Provider Organization FAC = Facility HE = Hearing HLT = Health HMO = Health Maintenance Organization LTC = Long-Term Care LTD = Long-Term Disability MM = Major Medical MOD = Mail Order Drug PDG = Prescription Drug POS = Point of Service PPO = Preferred Provider Organization PRA = Practitioners STD = Short-Term Disability UR = Utilization Review VIS = Vision	Evaluate retro stack Valid Values : PDG
					HD04	Plan Cvrg Description	Plan Cvrg Description	0	1	50	Use this element when additional information is needed by the insurer to describe the exact type of coverage being provided. If required by an insurer, this information must be included. The insurer establishes the content of this element.	Not applicable

Requirement Min Max

Comments

Notes / Examples

EDI 834 Transaction Set File Layout

Data Field Se

Loop

Values

Level

Position

Segment Reference Segment ID Designator Name

Data Element

Data Element Description

		saction Set F	ile Layo										
Data Field Values	Level	Loop	Position		Reference Designator	Segment Name	Data Element	Data Element Description	Requirement	Att Min	ribute Max	Comments	Notes / Examples
					HD05		Coverage Level Code	Coverage Level Code	0	3	3	CHD = Children Only DEP = Dependents Only E1D = Employee and 1 Dependent E2D = Employee and 2 Dependents E3D = Employee and 3 Dependents E5D = Employee and 1 or More Dependents E6D = Employee and 2 or More Dependents E7D = Employee and 3 or More Dependents E8D = Employee and 4 or More Dependents E8D = Employee and 5 or More Dependents E9D = Employee and 5 or More Dependents ECH = Employee and Children EMP = Employee and Spouse FAM = Family IND = Individual SPC = Spouse and Children SPO = Spouse Only TWO = Two Party	Not applicable
DTP	Detail	2300 Health Coverage	270	DTP		Health Co	overage Eligibility Dates		Required			Segment contains the date that maintenance was performed or effective, and the benefit begin and end dates for the coverage.	DTP*348*D8*20000320~
					DTP01		Date/Time Qualifier	Date/Time Qualifier	М	3	3	303 = Maintenance Effective 348 = Benefit Begin 349 = Benefit End	Valid Values: 348 = Benefit Begin 349 = Benefit End 303 = Maintenance Effective
D8					DTP02 DTP03		Date Time Format Qual Date Time Period	Date Time Period Format Qualifier Date Time Period Coverage Period	M M	1	3 35	D8 = Date expressed in CCYYMMDD. Coverage Period	Set to D8. Coverage Period
REF	Detail	2300 Health Coverage	290	REF		Health Co	overage Policy Number		Situational			Segment is used to identify a policy or group number for a particular insurance product if it has not already been identified in either REF02, position 1-030 or REF02, position 2-020. This is necessary when not all coverage types have the same group or policy.	Not applicable
					REF01 REF02		Reference Ident Qual Reference Ident	Reference Identification Qualifier Reference Identification Insured Group or Policy Number	M X	1	3	17 = Client Reporting Category Insured Group or Policy Number At least one REF02 is required.	Not applicable Not applicable
IDC	Detail	2300 Health Coverage	300	IDC		Identifica	ition Card		Situational			Segment is used to request the production of an identification card due to an enrollment add, change, or statement. An enrollment statement refers to no change being made except to request a replacement ID card.	IDC*12345678901016*H~ Not used anymore
					IDC01		Plan Cvrg Description	Plan Coverage Description	М	1	50	A description or number that identifies the plan or coverage. Element used when additional information is needed by the insurer to identify the type of ID card that will be produced. If requested, this information must be established by the insurer. Set IDC01 to a single zero if this does not apply.	Set to the member's card number.
				-	IDC02		ID Card Type Code	ID Card Type Code	M	1	1	D = Dental Insurance H = Health Insurance P = Prescription Drug Insurance Send only if quantity is greater than 1	D = Dental Insurance H = Health Insurance P = Prescription Drug Insurance
					IDC03		Quantity	Quantity Identification Card Count		<u> </u>	15	Send Only II quantity is greater than 1	Set to zero

EDI 834	Trans	saction Set F	ile Layo	ut									
Data Field				Segment	Reference	Segment				Att	tribute		
Values	Level	Loop	Position	ID	Designator	Name	Data Element	Data Element Description	Requirement	Mir	n Ma	Comments	Notes / Examples
		_					r	T	,				
					IDC04		Action Code	Action Code	0	1	2		Set new enrollee to '1'
												2 = Change	Set changes to '2'
												RX = Replace (no data change)	
					•								•
LX	Detail	2300 Health Coverage	310	LX		Provider	Information		Situational			care or capitated physicians and pharmacies chosen by the enrollee in a managed care plan when that selection is made through the sponsor. Use one iteration of the loop to identify each applicable health care service.	The scope of Nybeas does not include the maintenance of a PC P dictionary by DCS and does not provide for maintaining database records to support employee PCP selections and changes. The delivered interface will not include PCP data fields
					LX01		Assigned Number	Assigned Number	M	1	6	Number assigned for differentiation within a transaction set.	Not used

EDI 834	1 Trans	saction Set Fi	ie Lay	out									
Data Field					Reference						ibute		
Values	Level	Loop	Position	ID	Designator	Name	Data Element	Data Element Description	Requirement	Min	Max	Comments	Notes / Examples
		0040 D : 1								_			
VIN 44		2310 Provide 2310	320	Mation NM1	1	Dunida N	P4-44-4		Deguired	_	_	The National Provider ID should be	The scope of Nybeas does not include the
NM1	Detail	Provider Information	320	NMT		Provider N	ame		Required			The National Provider ID should be passed in NM109. Until the NP ID is available the Federal Tax ID should be used. Fields NM103 through NM107 are used when the sponsor has the provider's name but does not pass the standard ID in NM109 because the ID is unknown or local regulations prevent using Social Security Numbers or Federal Tax IDs. If the entity code, NM102, is 1 for person and the name is being passed, NM103 and NM104 must be used and NM105, NM106 andNM107 may be used. When the name is being passed for a non-person entity, then use only NM103. NM104 through NM107 are not populated.	maintenance of a PC P dictionary by DCS and does not provide for maintaining database records to support employee PC selections and changes. The delivered interface will not include PCP data fields
					NM101		Entity ID Code	Entity Identifier Code	M	2	3		Not used
	<u> </u>				NM102		Intity Type Qualifier	Entity Type Qualifier	M	1	1		Not used
					NM103		lame Last/ Org Name	Name Last or Organization Name	0	1	35		Not used
					NM104		lame First	Name First	0	1	25		Not used
					NM105	N	lame Middle	Name Middle	0	1	25		Not used
					NM106		lame Prefix	Name Prefix	0	1	10		Not used
					NM107		lame Suffix	Name Suffix	0	1	10		Not used
					NM108		D Code Qualifier	Identification Code Qualifier	X	1	2	Use of NM109 is required with NM108.	Not used
					NM109 NM110		D Code Entity Relat Code	Identification Code Entity Relationship Code	X	2	80	Use of NM108 is required with NM109.	Not used Not used
PLA	Detail	2310 Provider Information	395	PLA		PCP Chang	ge Reason		Situational			Segment is used to report the reason and the effective date that a member changes primary care provider.	The scope of Nybeas does not include the maintenance of a PC P dictionary by DCS and does not provide for maintaining database records to support employee PCF and the state of the state o
													selections and changes. The delivered interface will not include PCP data fields
					PI A01	ΙΔ	action Code	Action Code	M	1	2		interface will not include PCP data fields
				-	PLA01 PLA02		action Code	Action Code Entity Identifier Code	M M		2		interface will not include PCP data fields Not used
					PLA01 PLA02 PLA03	E	Action Code Entity ID Code	Action Code Entity Identifier Code Date	M M M	1 2 8	2 3 8		interface will not include PCP data fields
					PLA02	E	Intity ID Code	Entity Identifier Code	M	2	3		interface will not include PCP data fields Not used Not used
					PLA02	E	Entity ID Code Date	Entity Identifier Code	M	2	3		interface will not include PCP data fields Not used Not used Not used
					PLA02 PLA03 PLA05	E	Entity ID Code Date	Entity Identifier Code Date	M M	2	3		interface will not include PCP data fields Not used Not used Not used Not used Not used
COD		2320 Coordi			PLA02 PLA03 PLA05	E C	Entity ID Code Date Maintain Reason Code	Entity Identifier Code Date	M M	2	3		interface will not include PCP data fields Not used
COB	Detail	2320 Coordi 2320 Coordination of Benefits	nation 400	of Bener	PLA02 PLA03 PLA05	E C	Entity ID Code Date	Entity Identifier Code Date	M M	2	3	Loop is used when an individual has another insurance plan with benefits similar to those covered by the insurance product specified in the HD segment for this occurrence of Loop ID-2300. COB information is provided by individual, not by subscriber.	interface will not include PCP data fields Not used Not used Not used Not used Not used COB*S*NYSHIP*1~
COB		2320 Coordination of			PLA02 PLA03 PLA05	Coordination	Alaintain Reason Code On of Benefits Payer Resp Seq No Code	Entity Identifier Code Date	M M	2	3	another insurance plan with benefits similar to those covered by the insurance product specified in the HD segment for this occurrence of Loop ID-2300. COB information is provided by individual, not by subscriber. P = Primary S = Secondary T = Tertiary U = Unknown	interface will not include PCP data fields Not used Not used Not used Not used Not used COB*S*NYSHIP*1~ Used to indicate NYSHIP is Secondary dur
COB		2320 Coordination of			PLA02 PLA03 PLA05	Coordination	Alaintain Reason Code On of Benefits Payer Resp Seq No Code	Entity Identifier Code Date Maintain Reason Code Payer Responsibility Sequence	M M O Situational	2 8 2	3 8 3	another insurance plan with benefits similar to those covered by the insurance product specified in the HD segment for this occurrence of Loop ID-2300. COB information is provided by individual, not by subscriber. P = Primary S = Secondary T = Tertiary	interface will not include PCP data fields Not used Not used Not used Not used Not used COB*S*NYSHIP*1~ Used to indicate NYSHIP is Secondary due to Medicare D enrollment Valid Values:

		saction Set F	ile Layo										
Data Field			D		Reference		Data Element	Bata Flanca d Basadatia	D		ribute		Notes (Formula)
Values	Level	Loop	Position	ID	Designator	Name	Data Element	Data Element Description	Requirement	Min	Max	Comments	Notes / Examples
REF	Detail	2320 Coordination of Benefits	405	REF		Additiona	I Coordination of Benefit	s Identifiers	Situational			Specifies COB identifying information.	The scope of Nybeas does not include the maintenance of a COB data by DCS. The delivered interface will not include PCP data fields
					REF01		Reference Ident Qual	Reference Identification Qualifier	М	2	3	1W = Member Identification Number 6O = Account Suffix Code 6P = Group Number A6 = Employee Identification Number SY = Social Security Number	Not used
					REF02		Reference Ident	Reference Identification	Х	1	30	Insured Group or Policy Number At least one REF02 is required.	Not used
N1	Detail	2320 Coordination of Benefits	410	N1			urance Company Name		Situational			Identifies other insurance company (COB) by type, name, and code.	maintenance of a COB data by DCS. The delivered interface will not include PCP data fields
IN					N101		Entity ID Code	Entity Identifier Code	M	2	3	IN = Insurer.	Not Used
					N102		Name	Entity Identifier Code	X	1	60	Insurer name.	Not Used
					N103		ID Code Qualifier	Entity Identifier Code	X		2	FI = Federal Taxpayers Identification Number. NI = National Association of Insurance Commissioners Identification. XV = Health Care Financing Administration National Payer Identification.	Not used
					N104		ID Code	Plan Sponsor	Х	2	80	Insured Group or Policy Number	Not used
DTP	Detail	2320 Coordination of Benefits	450	DTP		Coordina	tion of Benefits Eligibility	/ Dates	Situational			Segment contains the dates for which coordination of benefits is in effect.	The scope of Nybeas does not include the maintenance of a COB data by DCS. The delivered interface will not include PCP data fields
					DTP01		Date/Time Qualifier	Date/Time Qualifier	М	3	3	344 = Coordination of benefits begin. 345 = Coordination of benefits end.	Not Used
D8					DTP02		Date Time Format Qual	Date Time Period Format Qualifier	M	2	3	D8 = Date expressed in CCYYMMDD.	Not Used
					DTP03		Date Time Period	Date Time Period	М	1	35	Date COB is in effect.	Not Used
		Transaction	Cot T	oile#						_			
SE	Trailer	Transaction	Set 11	SE		Transacti	on Set Trailer		Required		Т	Indicates end of transaction set and provides a count of the segments.	SE*39*1 ~
					SE01		Number of Inc Segs	Number of Included Segments	M	1	10	Total number of segments in the transaction set including ST and SE.	System generated.
					SE02		TS Control Number	Transaction Set Control Number	М	4	9	Unique control number.	The transaction set control numbers in SE02 and ST02 must be identical. Assign starting with 0001 and increment forward. Control numbers are unique within a specific functional group but can repeat in other groups and interchanges.