ASC X12N Implementation Guide

Common Content

The information in this document will be common for all X12N implementation guides.

Underlined information will be replaced with publisher-inserted implementation guide specific references.

{Bracketed text} will be replaced with author-supplied choices.

X12N Implementation Guides Task Group
Version 006020 • June 2011

Preface v
1. Purpose and Business Information 1
1.1. Implementation Purpose and Scope 1
1.2. Version Information 1
1.3. Implementation Limitations 1
1.3.1. Batch and Real-time Usage 1
1.3.2. Other Usage Limitations 2
1.4. Business Usage 2
1.4.1. Health Care Transaction Flow 2
1.4.2. Section 1.4.2 5
1.5. Business Terminology 5
1.6. Transaction Acknowledgments 5
1.7. Related Transactions 5
1.8. Trading Partner Agreements 5
1.9. The HIPAA Role in Implementation Guides 6
2. Transaction Set 7
2.1. Presentation Examples 7
2.2. Implementation Usage 12
2.2.1. Industry Usage 12
2.2.2. Loops 14
2.3. Transaction Set Listing 15
2.3.1. Implementation 15
2.3.2. X12 Standard 16
2.4. 800 Segment Detail 17
3. Example 19
A. External Code Sources 21
B. Nomenclature 23
B.1. ASC X12 Nomenclature 23
B.1.1. Interchange and Application Control Structures 23
B.2. Object Descriptors 26
C. EDI Control Directory 29
C.1. Control Segments 29
D. Change Summary 39
D.1. Purpose and Business Information 39
D.2. Transaction Sets 39
D.2.1. X12 Standard 39
D.2.2. Implementation 39
D.2.3. Deletions 39
D.3. Appendix A External Code Sets 40
D.4. Appendix C EDI Control Directory 40

D.5. Appendix E Data Element Glossary 40
D.6. - D.26 Appendices F - Z 40
E. Industry Names 41
F. Transaction Set Standard Listing 43
G. ASC X12 Code List/External Value Domain Harmonization 45
G.1. Administrative Gender 45

Preface

ASC X12 standards are developed to identify the broadest data requirements for a transaction set. Type 3 Technical Reports (TR3) define explicit data requirements for a specific business purpose. Trading partners who implement according to the instructions in this TR3 can exchange data with multiple trading partners in a consistent manner.

Trading partners define their specific transport requirements separately. Neither ASC X12 standards nor TR3s define transport requirements.

1 Purpose and Business Information

1.1 Implementation Purpose and Scope

{Purpose and scope of the transaction set(s) for the usage described in this implementation guide are presented here. This section is not a detailed business use description.}

1.2 Version Information

This implementation guide is based on the October 2009 ASC X12 standards, referred to as Version 6, Release 2, Sub-release 0 (006020).

The unique Version/Release/Industry Identifier Code for transaction sets that are defined by this implementation guide is 006020X***186***.

The two-character Functional Identifier Code(s) for the transaction set(s) included in this implementation guide:

- ***HB Eligibility, Coverage or Benefit Information (271)***
- ***HS Eligibility, Coverage or Benefit Inquiry (270)***

The Version/Release/Industry Identifier Code and the applicable Functional Identifier Code must be transmitted in the Functional Group Header (GS segment) that begins a functional group of these transaction sets. For more information, see the descriptions of GS01 and GS08 in Appendix C.

1.3 Implementation Limitations

1.3.1 Batch and Real-time Usage

There are multiple methods available for sending and receiving business transactions electronically. Two common modes for EDI transactions are batch and real-time.

Batch - In a batch mode the sender does not remain connected while the receiver processes the transactions. Processing is usually completed according to a set schedule. If there is an associated business response transaction (such as a 271 Response to a 270 Request for Eligibility), the receiver creates the response transaction and stores it

for future delivery or transmits the response transaction back to the sender of the original transaction. The sender of the original transmission reconnects at a later time and picks up the response transaction if the transaction was not transmitted back to the sender of the original transaction. This implementation guide does not set specific response time parameters for these activities.

Real-Time - In real-time mode the sender remains connected while the receiver processes the transactions and returns a response transaction to the sender. This implementation guide does not set specific response time parameters for implementers.

This implementation guide was based on requirements for {batch mode/real-time mode/batch and real-time modes}. Willing trading partners may use batch or real-time mode.

1.3.2 Other Usage Limitations

{There are other usage limitations as described in the following subsections./There are no other usage limitations.}

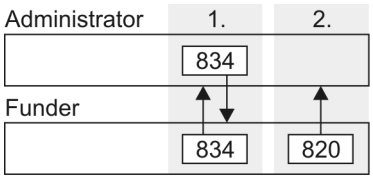
{Any technical or content limitations (e.g. size limits) for this IG are presented here.}

1.4 Business Usage

1.4.1 Health Care Transaction Flow

Each ASC X12 implementation guide explains how to use ASC X12 transaction sets to meet a single defined business purpose. The following diagrams, current as of version 006020, depict the business functions supported by the ASC X12 health care implementation guide. The intent of these diagrams is to represent the possible exchanges between trading partners using these implementation guides. Trading partners include entities that administer part or all of a health plan, fund the plan and enroll members, and provide the health care services.

Enrollment



1. Enrollment

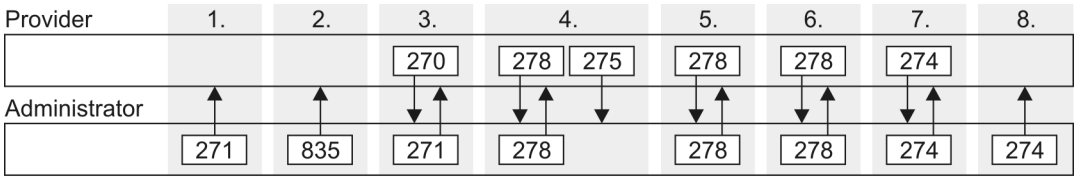
006020X283 834 Benefit Enrollment and Maintenance

006020X281 834 Benefit Enrollment Response

2. Premium Payment

006020X284 820 Payroll Deducted and Other Group Premium Payment For Insurance Products

Pre-adjudication



1. Roster

006020X297 271 Unsolicited Health Care Eligibility/Benefit Roster

2. Capitation Roster and Payment

006020X258 835 Health Care Claim Payment/Advice

3. Eligibility

006020X280 270 Health Care Eligibility Benefit Inquiry
271 Health Care Eligibility Benefit Information Response

4. Health Care Services Review Request

006020X266 278 Health Care Services Review – Request for Review
278 Health Care Services Review – Response
006020X278 275 Additional Information to Support a Health Care Services Review

5. Health Care Services Review Inquiry

006020X264 278 Health Care Services Review Inquiry
278 Health Care Services Review Response

6. Health Care Services Review Notification

006020X265 278 Health Care Services Review Notification
278 Health Care Services Review Acknowledgment

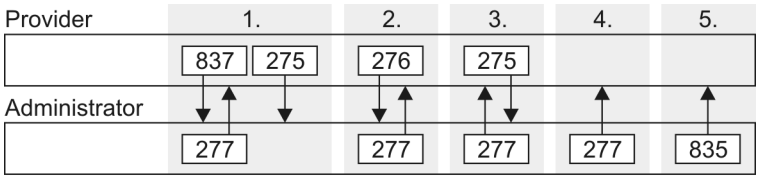
7. Provider Information

006020X206 274 Health Care Provider Information
274 Health Care Provider Information

8. Participating Provider Roster

006020X207 274 Health Care Provider Directory

Adjudication



1. Health Care Claim and Encounter plus Additional Support Information

006020X259	837	Health Care Claim: Professional
006020X260	837	Health Care Claim: Institutional
006020X261	837	Health Care Claim: Dental
006020X262	837	Health Care Service Data Reporting
006020X275	275	Additional Information to Support a Health Care Claim or Encounter
006020X269	277	Health Care Claim Acknowledgment

2. Health Care Claim Status

006020X267	276	Health Care Claim Status Request
	277	Health Care Claim Status Response

3. Health Care Claim Additional Information

006020X268	277	Health Care Claim Request for Additional Information
006020X275	275	Additional Information to Support a Health Care Claim or Encounter

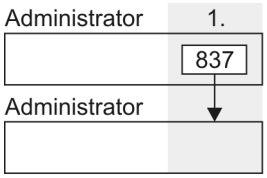
4. Health Care Claim Pending Status

006020X270	277	Health Care Claim Pending Status Information

5. Health Care Claim Payment

006020X258	835	Health Care Claim Payment/Advice

Post-adjudication



1. Coordination of Benefits

006020X259	837	Health Care Claim: Professional
006020X260	837	Health Care Claim: Institutional
006020X261	837	Health Care Claim: Dental

1.4.2 Section 1.4.2

This section(s) describes the detailed business usage for the transaction described in this implementation guide. It may include a more detailed transaction chart which encompasses the transaction set defined in this implementation guide, acknowledgements, and/or related transactions.

1.5 Business Terminology

{The following business terms are used in this implementation guide.}

Terms and associated definitions are selected from the appropriate Glossary and presented here. This section will not repeat definitions contained in Appendix E - Industry Names. Industry names attribute industry-specific names to the generic X12 data elements. The Glossary items are other business terms with their definitions.

1.6 Transaction Acknowledgments

The purpose of transaction acknowledgments is to report to the sender whether the transaction being acknowledged was accepted or rejected.

The ASC X12 Technical Report Type 2, *Acknowledgment Reference Model* provides guidance on several control structures and transaction set standards intended to augment EDI auditing and control systems. See appendix H.

1.7 Related Transactions

There {are one or more/are no} transactions related to the transactions described in this implementation guide.

Authors insert specific information on related transactions here.

1.8 Trading Partner Agreements

Trading partner agreements are used to establish and document the relationship between trading partners. A trading partner agreement must not override the specifications in this implementation guide if a transmission is reported in GS08 to be a product of this implementation guide.

1.9 The HIPAA Role in Implementation Guides

Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (PL 104-191 - known as HIPAA) direct the Secretary of Health and Human Services to adopt standards for transactions to enable health information to be exchanged electronically and to adopt specifications for implementing each standard.

This implementation guide has been developed for use as an insurance industry implementation guide. At the time of publication it has not been adopted as a HIPAA standard. Should the Secretary adopt this implementation guide as a standard, the Secretary will establish compliance dates for its use by HIPAA covered entities.

2 Transaction Set

NOTE
See Appendix B, Nomenclature, to review the transaction set structure, including descriptions of segments, data elements, levels, and loops.

2.1 Presentation Examples

The ASC X12 standards are generic. For example, multiple trading communities use the same PER segment to specify administrative communication contacts. Each community decides which elements to use and which code values in those elements are applicable.

This implementation guide uses a format that depicts both the generalized standard and the insurance industry-specific implementation. In this implementation guide, **IMPLEMENTATION** specifies the requirements for this implementation. **X12 STANDARD** is included as a reference only.

The transaction set presentation is comprised of two main sections with subsections within the main sections:

2.3 Transaction Set Listing

There are two sub-sections under this general title. The first sub-section concerns this implementation of a generic X12 transaction set. The second sub-section concerns the generic X12 standard itself.

IMPLEMENTATION

This section lists the levels, loops, and segments contained in this implementation. It also serves as an index to the segment detail.

STANDARD

This section is included as a reference.

2.4 Segment Detail

There are three sub-sections under this general title. This section repeats once for each segment used in this implementation providing segment specific detail and X12 standard detail.

SEGMENT DETAIL

This section is included as a reference.

DIAGRAM

This section is included as a reference. It provides a pictorial view of the standard and shows which elements are used in this implementation.

ELEMENT DETAIL

This section specifies the implementation details of each data element.

These illustrations (Figures 2.1 through 2.5) are examples and are not extracted from the Section 2 detail in this implementation guide. Annotated illustrations, presented below in the same order they appear in this implementation guide, describe the format of the transaction set that follows.

IMPLEMENTATION

Indicates that this section is the implementation and not the standard

8XX Insurance Transaction Set

Table 1 - Header

PAGE #	POS. #	SEG. ID	NAME	USAGE	REPEAT	LOOP REPEAT
53	0100	ST	Transaction Set Header	R	1	
54	0200	BPR	Financial Information	R	1	
60	0400	TRN	Reassociation Key	R	1	
62	0500	CUR	Non-US Dollars Currency	S	1	
65	0600	REF	Receiver ID	S	1	
66	0600	REF	Version Number	S	1	
68	0700	DTM	Production Date	S	1	
			PAYER NAME			1
70	0800	N1	Payer Name	R	1	
72	1000	N3	Payer Address	S	1	
75	1100	N4	Payer City, State, Zip	S	1	
76	1200	REF	Additional Payer Reference Number	S	1	
78	1300	PER	Payer Contact	S	1	
			PAYEE NAME			1
79	0800	N1	Payee Name	R	1	
81	1000	N3	Payee Address	S	1	
82	1100	N4	Payee City, State, Zip	S	1	
84	1200	REF	Payee Additional Reference Number	S	>1	

Each segment is assigned an industry specific name. Not used segments do not appear

Each loop is assigned an industry specific name

R=Required
S=Situational

Segment repeats and loop repeats reflect actual usage

Position Numbers and Segment IDs retain their X12 values

Individual segments and entire loops are repeated

Figure 2.1. Transaction Set Key — Implementation

STANDARD

Indicates that this section is identical to the ASC X12 standard

See *Appendix B.1, ASC X12 Nomenclature* for a complete description of the standard

8XX Insurance Transaction Set

Functional Group ID: **XX**

This Draft Standard for Trial Use contains the format and establishes the data contents of the Insurance Transaction Set (8XX) within the context of the Electronic Data Interchange (EDI) environment.

Table 1 - Header

POS. #	SEG. ID	NAME	REQ. DES.	MAX USE	LOOP REPEAT
0100	ST	Transaction Set Header	M	1	
0200	BPR	Beginning Segment	M	1	
0300	NTE	Note/Special Instruction	O	>1	
0400	TRN	Trace	O	1	

Figure 2.2. Transaction Set Key — Standard

SEGMENT DETAIL

Industry assigned Segment Name → **NM1 - PATIENT NAME**

X12 Segment Name: Individual or Organizational Name

X12 Purpose: To supply the full name of an individual or organizational entity

X12 Syntax:

1. **P0809**
   If either NM108 or NM109 is present, then the other is required.
2. **C1110**
   If NM111 is present, then NM110 is required.
3. **C1203**
   If NM112 is present, then NM103 is required.

See X12.6 for a description of these values

Industry assigned Loop ID and Loop Name

Industry Loop Repeat

Industry Segment Repeat → **Loop:**	**2100B — PATIENT NAME Loop Repeat: 1**
Segment Repeat:	**1**
Industry usage → **Usage:**	**SITUATIONAL**
Situational Rule:	**Required when the patient is different from the insured. If not required by this implementation guide, do not send.**
Situational Rule	
TR3 Notes:	**1. Any necessary identification number must be provided in NM109.**
Industry Notes	
TR3 Example:	**NM1*QC*1*Shepard*Sam*A***34*452114586~**
Example	

Figure 2.3. Segment Key — Implementation

DIAGRAM

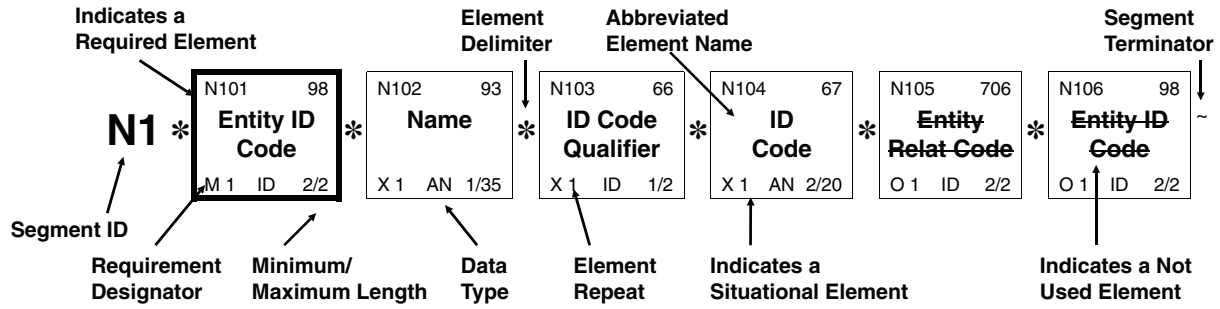


Figure 2.4. Segment Key — Diagram

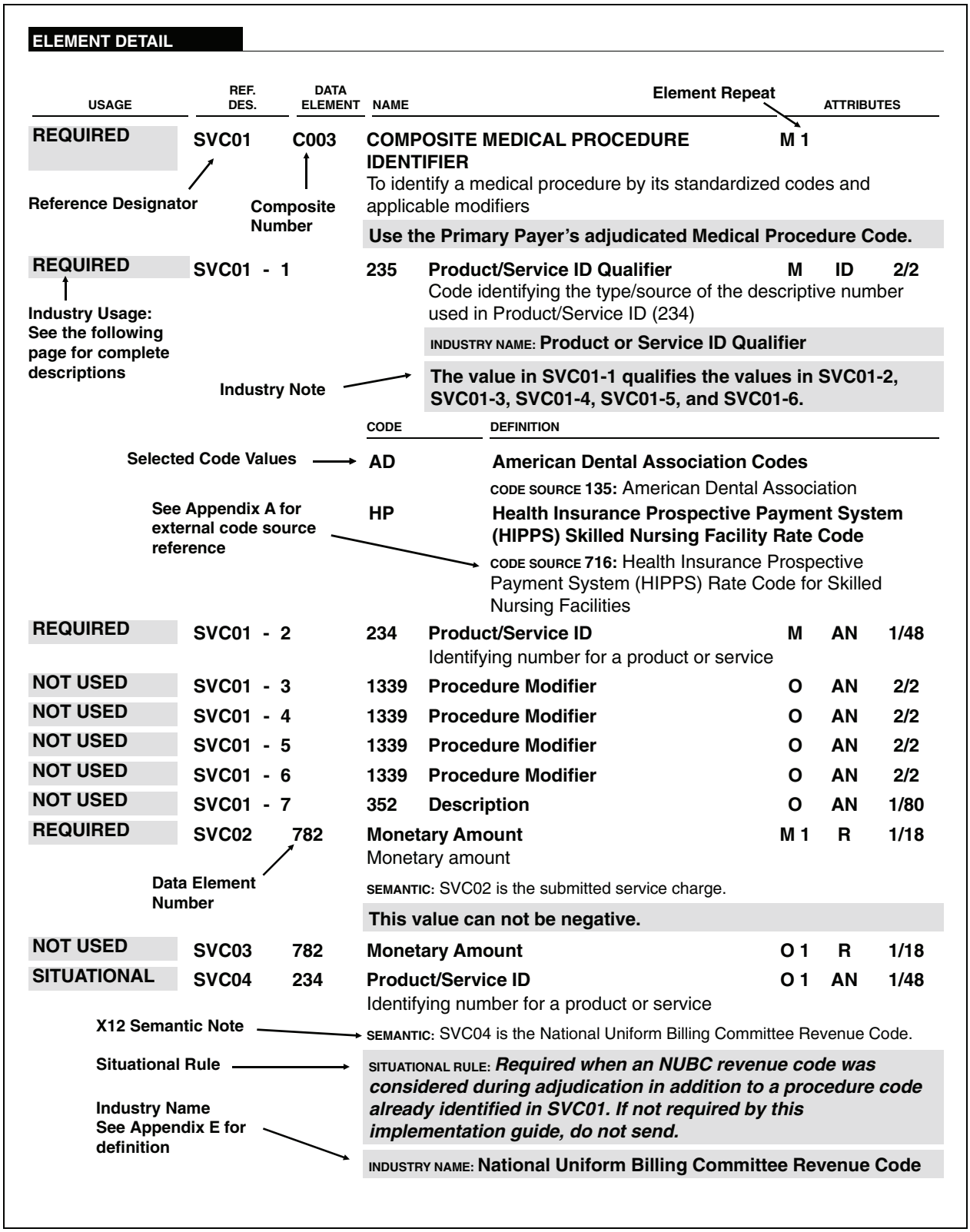


Figure 2.5. Segment Key — Element Summary

2.2 Implementation Usage

2.2.1 Industry Usage

Industry Usage describes when loops, segments, and elements are to be sent when complying with this implementation guide. The three choices for Usage are required, not used, and situational. To avoid confusion, these are named differently than the X12 standard Condition Designators (mandatory, optional, and relational).

Required This loop/segment/element must always be sent.

Required segments in Situational loops only occur when the loop is used.

Required elements in Situational segments only occur when the segment is used.

Required component elements in Situational composite elements only occur when the composite element is used.

Not Used This element must never be sent.

Situational Use of this loop/segment/element varies, depending on data content and business context as described in the defining rule. The defining rule is documented in a Situational Rule attached to the item.

There are two forms of Situational Rules.

The first form is “Required when <explicit condition statement>. If not required by this implementation guide, may be provided at the sender’s discretion, but cannot be required by the receiver.” The data qualified by such a situational rule cannot be required or requested by the receiver, transmission of this data is solely at the sender’s discretion.

The alternative form is “Required when <explicit condition statement>. If not required by this implementation guide, do not send.” The data qualified by such a situational rule cannot be sent except as described in the explicit condition statement.

2.2.1.1 Transaction Compliance Related to Industry Usage

A transmitted transaction complies with an implementation guide when it satisfies the requirements as defined within the implementation guide. The presence or absence of an item (loop, segment, or element) complies with the industry usage specified by this implementation guide according to the following table.

Industry Usage	Business Condition is	Item is	Transaction Complies with Implementation Guide?
Required	N/A	Sent	Yes
		Not Sent	No
Not Used	N/A	Sent	No
		Not Sent	Yes
Situational (Required when <explicit condition statement>. If not required by this implementation guide, may be provided at the sender's discretion, but cannot be required by the receiver.)	True	Sent	Yes
		Not Sent	No
	Not True	Sent	Yes
		Not Sent	Yes
Situational (Required when <explicit condition statement>. If not required by this implementation guide, do not send.)	True	Sent	Yes
		Not Sent	No
	Not True	Sent	No
		Not Sent	Yes

This table specifies how an entity is to evaluate a transmitted transaction for compliance with industry usage. It is not intended to require or imply that the receiver must reject non-compliant transactions. The receiver will handle non-compliant transactions based on its business process and any applicable regulations.

2.2.2 Loops

Loop requirements depend on the context or location of the loop within the transaction. See Appendix B for more information on loops.

- A nested loop can be used only when the associated higher level loop is used.
- The usage of a loop is the same as the usage of its beginning segment.
  - If a loop's beginning segment is Required, the loop is Required and must occur at least once unless it is nested in a loop that is not being used.
  - If a loop's beginning segment is Situational, the loop is Situational.
- Subsequent segments within a loop can be sent only when the beginning segment is used.
- Required segments in Situational loops occur only when the loop is used.

2.3 Transaction Set Listing

2.3.1 Implementation

This section lists the levels, loops, and segments contained in this implementation. It also serves as an index to the segment detail. Refer to Section 2.1 - *Presentation Examples* for detailed information on the components of the Implementation section.

(Implementation Table to follow.)

2.3.2 X12 Standard

This section is included as a reference. The implementation guide reference clarifies actual usage. Refer to Section 2.1 - *Presentation Examples* for detailed information on the components of the X12 Standard section.

(Standard Table to follow.)

2.4 800 Segment Detail

This section specifies the segments, data elements, and codes for this implementation. Refer to Section 2.1 - *Presentation Examples* for detailed information on the components of the Segment Detail section.

(Detail Section to follow.)

3 Example

At least one business example of the transaction is included here.

A External Code Sources

A.1 External Code Sources

Appendix A is a listing of all external code sources referenced in this implementation guide.

- Where an external code source is referenced, the implementer is required to use only the codes from that list.
- Codes must be reported as listed in the code source (e.g. with leading zeroes).
- Implementers must follow the instructions for code use that are supplied by the code set owner.

77 X12 Directories

SIMPLE DATA ELEMENT/CODE REFERENCES
721, 725

SOURCE
X12.3 Data Element Dictionary
X12.22 Segment Directory

AVAILABLE FROM
Data Interchange Standards Association, Inc. (DISA)
7600 Leesburg Pike
Suite 430
Falls Church, VA 22043

ABSTRACT
The data element dictionary contains the format and descriptions of data elements used to construct X12 segments. It also contains code lists associated with these data elements. The segment directory contains the format and definitions of the data segments used to construct X12 transaction sets.

121 Health Industry Number

SIMPLE DATA ELEMENT/CODE REFERENCES
66/21, 128/HI, 1270/HI, I05/20

SOURCE
Health Industry Number Database

AVAILABLE FROM
Health Industry Business Communications Council
5110 North 40th Street
Phoenix, AZ 85018

ABSTRACT
The HIN is a coding system, developed and administered by the Health Industry Business Communications Council, that assigns a unique code number to hospitals other provider organizations, and manufacturers and distributors.

B Nomenclature

B.1 ASC X12 Nomenclature

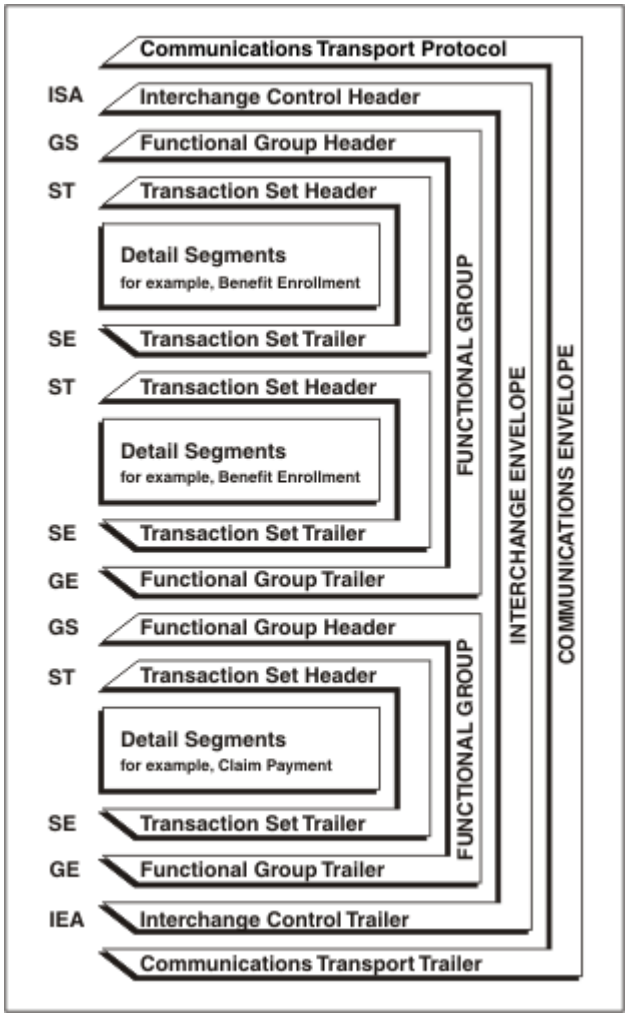
B.1.1 Interchange and Application Control Structures

The full X12 interchange and control structure rules are defined in X12.5, X12.6, and other X12 standards and official documents. Appendix B is provided as a supplement to these rules. The full X12 rules and guidelines apply unless specifically modified in the detailed instructions of this implementation guide (see Section B.1.1.4 - *Decimal* for an example of such a modification).

B.1.1.1 Interchange Control Structure

Similar transaction sets, called "functional groups," can be sent together within a transmission. Each functional group is prefaced by a group start segment; and a functional group is terminated by a group end segment. One or more functional groups are prefaced by an interchange header and followed by an interchange trailer.
Figure B.1 - *Transmission Control Schematic*, illustrates this interchange control.

Figure B.1 - Transmission Control Schematic



B.1.1.2 Delimiters

Once specified in the interchange header, the delimiters are not to be used in a data element value elsewhere in the interchange. For consistency, this implementation guide uses the delimiters shown in Table B.1 - *Delimiters*, in all examples of EDI transmissions.

Table B.1 - Delimiters

CHARACTER	NAME	DELIMITER
*	Asterisk	Data Element Separator
^	Carat	Repetition Separator
:	Colon	Component Element Separator
~	Tilde	Segment Terminator

The delimiters above are for illustration purposes only and are not specific recommendations or requirements. Users of this implementation guide should be aware that an application system may use some valid delimiter characters within the application data. Occurrences of delimiter characters in transmitted data within a data element will result in errors in translation. The existence of asterisks (*) within transmitted application data is a known issue.

B.1.1.3 Data Element

The data element minimum and maximum lengths may be restricted in this implementation guide for a compliant implementation. Such restrictions may occur by virtue of the allowed qualifier for the data element or by specific instructions regarding length or format as stated in this implementation guide.

B.1.1.4 Decimal

While the ASC X12 standard supports usage of exponential notation, this guide prohibits that usage.

For implementations governed by the Health Insurance Portability and Accountability Act (HIPAA), decimal data elements in Data Element 782 (Monetary Amount) will be limited to a maximum length of 10 characters including reported or implied places for cents (implied value of 00 after the decimal point). Note that the decimal point and leading sign, if sent, are not part of the character count.

EXAMPLE
For implementations governed by HIPAA:

- The following transmitted value represents the largest positive dollar amount that can be sent: 99999999.99
- The following transmitted value is the longest string of characters that can be sent representing whole dollars. 99999999

- The following transmitted value is the longest string of characters that can be sent representing negative dollars and cents. -99999999.99
- The following transmitted value is the longest string of characters that can be sent representing negative whole dollars. -99999999

B.1.1.5 Identifier

An identifier data element always contains a value from a predefined list of codes that is maintained by the ASC X12 Committee or some other body recognized by the Committee. Trailing spaces must be suppressed unless they are necessary to satisfy a minimum length. An identifier is always left justified. The representation for this data element type is "ID."

B.1.1.6 String

A string data element is a sequence of any characters from the basic or extended character sets. The string data element must contain at least one non-space character. The significant characters shall be left justified. Leading spaces, when they occur, are presumed to be significant characters. Trailing spaces must be suppressed unless they are necessary to satisfy a minimum length. The representation for this data element type is "AN."

B.2 Object Descriptors

Object Descriptors (OD) provide a method to uniquely identify specific locations within an implementation guide. There is an OD assigned at every level of the X12N implementation:

1. Transaction Set
2. Loop
3. Segment
4. Composite Data Element
5. Component Data Element
6. Simple Data Element

ODs at the first four levels are coded using X12 identifiers separated by underbars:

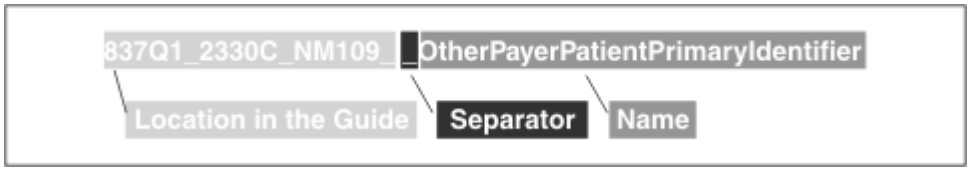
Entity	Example
1. Transaction Set Identifier plus a unique 2 character value	837Q1

Entity	Example
2. Above plus under bar plus Loop Identifier as assigned within an implementation guide	837Q1_2330C
3. Above plus under bar plus Segment Identifier	837Q1_2330C_NM1
4. Above plus Reference Designator plus under bar plus Composite Identifier	837Q1_2400_SV101_C003

The fifth and sixth levels add a name derived from the "Industry Term" defined in the X12N Data Dictionary. The name is derived by removing the spaces.

Entity	Example
5. Number 4 above plus composite sequence plus under bar plus name	837Q1_2400_SV101_C00302_ProcedureCode
6. Number 3 above plus Reference Designator plus two under bars plus name	837Q1_2330C_NM109__OtherPayerPatientPrimaryIdentifier

Said in another way, ODs contain a coded component specifying a location in an implementation guide, a separator, and a name portion. For example:



Since ODs are unique across all X12N implementation guides, they can be used for a variety of purposes. For example, as a cross reference to older data transmission systems, like the National Standard Format for health care claims, or to form XML tags for newer data transmission systems.

C EDI Control Directory

C.1 Control Segments

- **ISA**
  Interchange Control Header Segment
- **GS**
  Functional Group Header Segment
- **GE**
  Functional Group Trailer Segment
- **IEA**
  Interchange Control Trailer Segment

SEGMENT DETAIL

ISA - INTERCHANGE CONTROL HEADER

X12 Segment Name: Interchange Control Header

X12 Purpose: To start and identify an interchange of zero or more functional groups and interchange-related control segments

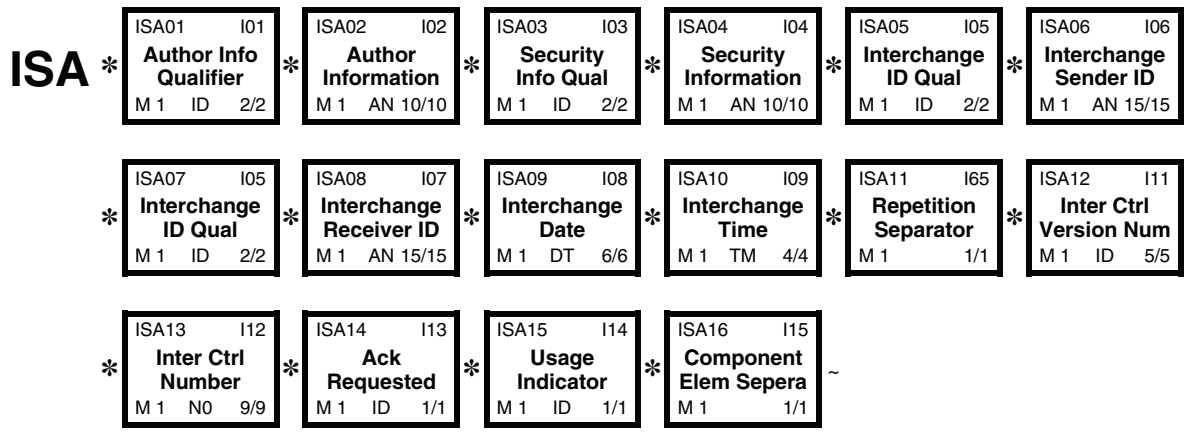
Usage: **REQUIRED**

TR3 Notes:

1. **All positions within each of the data elements must be filled.**
2. **For compliant implementations under this implementation guide, ISA13, the interchange Control Number, must be a positive unsigned number. Therefore, the ISA segment can be considered a fixed record length segment.**
3. **The first element separator defines the element separator to be used through the entire interchange.**
4. **Spaces in the example interchanges are represented by "." for clarity.**
5. **The ISA segment terminator defines the segment terminator used throughout the entire interchange.**

TR3 Example: **ISA*00*.........*01*SECRET....*ZZ*SUBMITTERS.ID..*ZZ*RECEIVERS.ID...*030101*1253*^*00602*000000905*0*T*:~**

DIAGRAM



ELEMENT DETAIL

USAGE	REF. DES.	DATA ELEMENT	NAME	ATTRIBUTES
REQUIRED	**ISA01**	**I01**	**Authorization Information Qualifier** Code identifying the type of information in the Authorization Information	**M 1 ID 2/2**

CODE	DEFINITION
00	**No Authorization Information Present (No Meaningful Information in I02)**
03	**Additional Data Identification**

REQUIRED **ISA02** **I02** **Authorization Information** **M 1 AN 10/10**
Information used for additional identification or authorization of the interchange sender or the data in the interchange; the type of information is set by the Authorization Information Qualifier (I01)

REQUIRED **ISA03** **I03** **Security Information Qualifier** **M 1 ID 2/2**
Code identifying the type of information in the Security Information

CODE	DEFINITION
00	**No Security Information Present (No Meaningful Information in I04)**
01	**Password**

REQUIRED **ISA04** **I04** **Security Information** **M 1 AN 10/10**
This is used for identifying the security information about the interchange sender or the data in the interchange; the type of information is set by the Security Information Qualifier (I03)

REQUIRED **ISA05** **I05** **Interchange ID Qualifier** **M 1 ID 2/2**
Code indicating the system/method of code structure used to designate the sender or receiver ID element being qualified

This ID qualifies the Sender in ISA06.

CODE	DEFINITION
01	**Duns (Dun & Bradstreet)**
14	**Duns Plus Suffix**
20	**Health Industry Number (HIN)** CODE SOURCE **121:** Health Industry Number
27	**Carrier Identification Number as assigned by Centers for Medicare & Medicaid Services (CMS)**
28	**Fiscal Intermediary Identification Number as assigned by Centers for Medicare & Medicaid Services (CMS)**
29	**Medicare Provider and Supplier Identification Number as assigned by Centers for Medicare & Medicaid Services (CMS)**
30	**U.S. Federal Tax Identification Number**
33	**National Association of Insurance Commissioners Company Code (NAIC)**
ZZ	**Mutually Defined**

REQUIRED **ISA06** **I06** **Interchange Sender ID** **M 1 AN 15/15**
Identification code published by the sender for other parties to use as the receiver ID to route data to them; the sender always codes this value in the sender ID element

REQUIRED **ISA07** **I05** **Interchange ID Qualifier** **M 1 ID 2/2**
Code indicating the system/method of code structure used to designate the sender or receiver ID element being qualified

This ID qualifies the Receiver in ISA08.

CODE	DEFINITION
01	**Duns (Dun & Bradstreet)**
14	**Duns Plus Suffix**
20	**Health Industry Number (HIN)** CODE SOURCE **121:** Health Industry Number

			27	**Carrier Identification Number as assigned by Centers for Medicare & Medicaid Services (CMS)**			
			28	**Fiscal Intermediary Identification Number as assigned by Centers for Medicare & Medicaid Services (CMS)**			
			29	**Medicare Provider and Supplier Identification Number as assigned by Centers for Medicare & Medicaid Services (CMS)**			
			30	**U.S. Federal Tax Identification Number**			
			33	**National Association of Insurance Commissioners Company Code (NAIC)**			
			ZZ	**Mutually Defined**			
REQUIRED	**ISA08**	**I07**	**Interchange Receiver ID** Identification code published by the receiver of the data; When sending, it is used by the sender as their sending ID, thus other parties sending to them will use this as a receiving ID to route data to them		**M 1**	**AN**	**15/15**
REQUIRED	**ISA09**	**I08**	**Interchange Date** Date of the interchange		**M 1**	**DT**	**6/6**
			The date format is YYMMDD.				
REQUIRED	**ISA10**	**I09**	**Interchange Time** Time of the interchange		**M 1**	**TM**	**4/4**
			The time format is HHMM.				
REQUIRED	**ISA11**	**I65**	**Repetition Separator** Type is not applicable; the repetition separator is a delimiter and not a data element; this field provides the delimiter used to separate repeated occurrences of a simple data element or a composite data structure; this value must be different than the data element separator, component element separator, and the segment terminator		**M 1**		**1/1**
REQUIRED	**ISA12**	**I11**	**Interchange Control Version Number** Code specifying the version number of the interchange control segments		**M 1**	**ID**	**5/5**
			CODE	**DEFINITION**			
			00602	**Standards Approved for Publication by ASC X12 Procedures Review Board through October 2009**			
REQUIRED	**ISA13**	**I12**	**Interchange Control Number** A control number assigned by the interchange sender		**M 1**	**N0**	**9/9**
			The Interchange Control Number, ISA13, must be identical to the associated Interchange Trailer IEA02.				
			Must be a positive unsigned number and must be identical to the value in IEA02.				
REQUIRED	**ISA14**	**I13**	**Acknowledgment Requested** Code indicating sender's request for an interchange acknowledgment		**M 1**	**ID**	**1/1**
			See Section B.1.1.5.1 for interchange acknowledgment information.				
			CODE	**DEFINITION**			
			0	**No Interchange Acknowledgment Requested**			
			1	**Interchange Acknowledgment Requested (TA1)**			

REQUIRED **ISA15** **I14** **Interchange Usage Indicator** **M 1** **ID** **1/1**

Code indicating whether data enclosed by this interchange envelope is test, production or information

CODE	DEFINITION
P	**Production Data**
T	**Test Data**

REQUIRED **ISA16** **I15** **Component Element Separator** **M 1** **1/1**

Type is not applicable; the component element separator is a delimiter and not a data element; this field provides the delimiter used to separate component data elements within a composite data structure; this value must be different than the data element separator and the segment terminator

SEGMENT DETAIL

IEA - INTERCHANGE CONTROL TRAILER

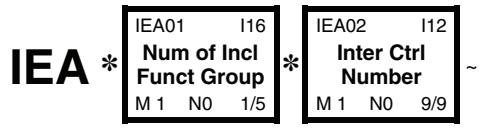
X12 Segment Name: Interchange Control Trailer

X12 Purpose: To define the end of an interchange of zero or more functional groups and interchange-related control segments

Usage: **REQUIRED**

TR3 Example: **IEA*1*000000905~**

DIAGRAM



ELEMENT DETAIL

USAGE	REF. DES.	DATA ELEMENT	NAME	ATTRIBUTES		
REQUIRED	**IEA01**	**I16**	**Number of Included Functional Groups** A count of the number of functional groups included in an interchange	**M 1**	**N0**	**1/5**
REQUIRED	**IEA02**	**I12**	**Interchange Control Number** A control number assigned by the interchange sender	**M 1**	**N0**	**9/9**

SEGMENT DETAIL

GS - FUNCTIONAL GROUP HEADER

X12 Segment Name: Functional Group Header

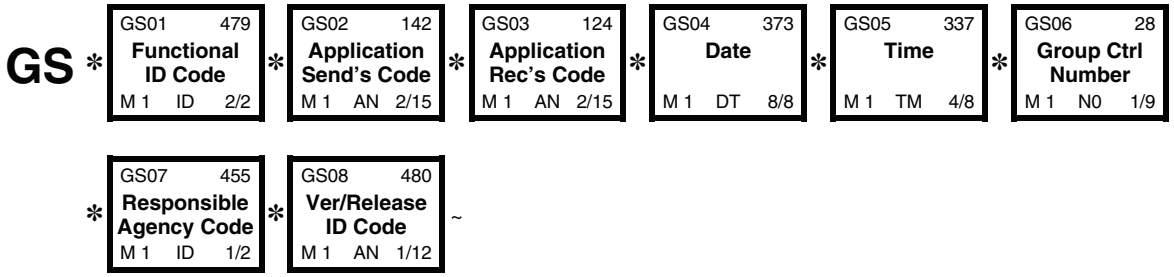
X12 Purpose: To indicate the beginning of a functional group and to provide control information

X12 Comments: **1.** A functional group of related transaction sets, within the scope of X12 standards, consists of a collection of similar transaction sets enclosed by a functional group header and a functional group trailer.

Usage: **REQUIRED**

TR3 Example: **GS*XX*SENDER CODE*RECEIVER CODE*19991231*0802*1*X*006020X**000~

DIAGRAM



ELEMENT DETAIL

USAGE	REF. DES.	DATA ELEMENT	NAME	ATTRIBUTES
REQUIRED	**GS01**	**479**	**Functional Identifier Code** Code identifying a group of application related transaction sets **This is the 2-character Functional Identifier Code assigned to each transaction set by X12. The specific code for a transaction set defined by this implementation guide is presented in section 1.2, Version Information.**	**M 1 ID 2/2**
REQUIRED	**GS02**	**142**	**Application Sender's Code** Code identifying party sending transmission; codes agreed to by trading partners **Use this code to identify the unit sending the information.**	**M 1 AN 2/15**
REQUIRED	**GS03**	**124**	**Application Receiver's Code** Code identifying party receiving transmission; codes agreed to by trading partners **Use this code to identify the unit receiving the information.**	**M 1 AN 2/15**
REQUIRED	**GS04**	**373**	**Date** Date expressed as CCYYMMDD where CC represents the first two digits of the calendar year **SEMANTIC:** GS04 is the group date. **Use this date for the functional group creation date.**	**M 1 DT 8/8**

REQUIRED **GS05** **337** **Time** **M 1 TM 4/8**

Time expressed in 24-hour clock time as follows: HHMM, or HHMMSS, or HHMMSSD, or HHMMSSDD, where H = hours (00-23), M = minutes (00-59), S = integer seconds (00-59) and DD = decimal seconds; decimal seconds are expressed as follows: D = tenths (0-9) and DD = hundredths (00-99)

SEMANTIC: GS05 is the group time.

Use this time for the creation time. The recommended format is HHMM.

REQUIRED **GS06** **28** **Group Control Number** **M 1 N0 1/9**

Assigned number originated and maintained by the sender

SEMANTIC: The data interchange control number GS06 in this header must be identical to the same data element in the associated functional group trailer, GE02.

For implementations compliant with this guide, GS06 must be unique within a single transmission (that is, within a single ISA to IEA enveloping structure). The authors recommend that GS06 be unique within all transmissions over a period of time to be determined by the sender.

REQUIRED **GS07** **455** **Responsible Agency Code** **M 1 ID 1/2**

Code identifying the issuer of the standard; this code is used in conjunction with Data Element 480

CODE	DEFINITION
X	**Accredited Standards Committee X12**

REQUIRED **GS08** **480** **Version / Release / Industry Identifier Code** **M 1 AN 1/12**

Code indicating the version, release, subrelease, and industry identifier of the EDI standard being used, including the GS and GE segments; if code in DE455 in GS segment is X, then in DE 480 positions 1-3 are the version number; positions 4-6 are the release and subrelease, level of the version; and positions 7-12 are the industry or trade association identifiers (optionally assigned by user); if code in DE455 in GS segment is T, then other formats are allowed

CODE SOURCE 881: Version / Release / Industry Identifier Code

This is the unique Version/Release/Industry Identifier Code assigned to an implementation by X12N. The specific code for a transaction set defined by this implementation guide is presented in section 1.2, Version Information.

CODE	DEFINITION
006020	**Standards Approved for Publication by ASC X12 Procedures Review Board through October 2009**

SEGMENT DETAIL

GE - FUNCTIONAL GROUP TRAILER

X12 Segment Name: Functional Group Trailer

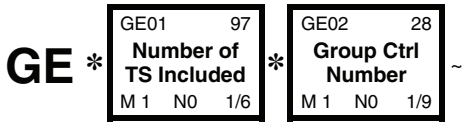
X12 Purpose: To indicate the end of a functional group and to provide control information

X12 Comments:
1. The use of identical data interchange control numbers in the associated functional group header and trailer is designed to maximize functional group integrity. The control number is the same as that used in the corresponding header.

Usage: **REQUIRED**

TR3 Example: **GE*1*1~**

DIAGRAM



ELEMENT DETAIL

USAGE	REF. DES.	DATA ELEMENT	NAME	ATTRIBUTES
REQUIRED	**GE01**	**97**	**Number of Transaction Sets Included** Total number of transaction sets included in the functional group or interchange (transmission) group terminated by the trailer containing this data element	**M 1 N0 1/6**
REQUIRED	**GE02**	**28**	**Group Control Number** Assigned number originated and maintained by the sender **SEMANTIC:** The data interchange control number GE02 in this trailer must be identical to the same data element in the associated functional group header, GS06.	**M 1 N0 1/9**

D Change Summary

This Implementation Guide (006020X999) defines the X12 requirements for the Automobile Glass Invoice. It is based on version/release/subrelease 006020 of the ASC X12 standards.

The publisher will insert one of the following into the draft guide.

A. This is the first version of the Automobile Glass Invoice Implementation Guide. No change summary is included.

B. The last published version of the Automobile Glass Invoice was 003070X102. It was based on version/release/subrelease 003070 of the ASC X12 standards

006020X999 contains significant revisions and can only be used with other trading partners who have also implemented 006020X999.

Changes:

D.1 Purpose and Business Information

Implementers must review Section 1 in its entirety because changes must be considered in the context of the section. Changes have been made to the following sub-sections. Publisher will insert a Section/title listing; Developers will add a description of changes.

D.2 Transaction Sets

D.2.1 X12 Standard

D.2.2 Implementation

D.2.3 Deletions

D.3 Appendix A External Code Sets

D.4 Appendix C EDI Control Directory

D.5 Appendix E Data Element Glossary

D.6 - D.26 Appendices F - Z

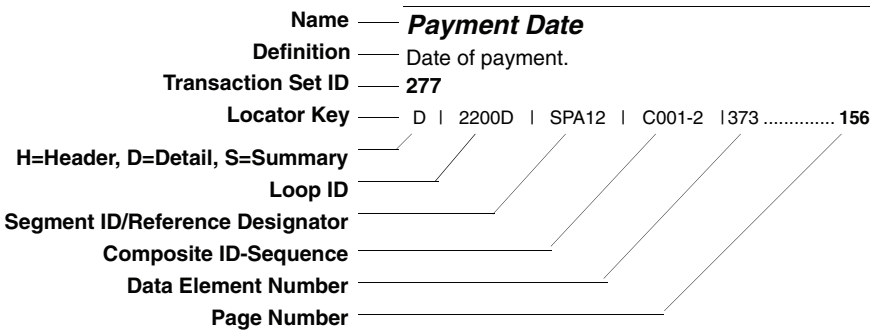
{Developers will describe changes to these sections, at a minimum they will note which appendices were added, changed or deleted.}

NOTE:

There is no Change Summary for either Section 3 Examples or Appendix B Nomenclature.

E Industry Names

This section contains an alphabetic listing of industry-specific names and definitions attributed to X12 generic data elements and used in this implementation guide. Data element names in normal type are generic ASC X12 names. Italic type indicates an industry defined name. Consult the appropriate X12N Data Element Dictionary, available for purchase at the ASC X12 online store, for a complete list of all X12N Industry Names.



Accident Date

Date of the accident related to charges or to the patient's current condition, diagnosis, or treatment referenced in the transaction.

278 - Health Care Services Review - Request For Review
D | 2000E | DTP03 | - | 1251 ..... **130**

278 - Health Care Services Review - Request For Review Response
D | 2000E | DTP03 | - | 1251 ..... **378**

278 - Health Care Services Review - Inquiry
D | 2000E | DTP03 | - | 1251 ..... **115**

278 - Health Care Services Review Notification
D | 2000E | DTP03 | - | 1251 ..... **127**

837 - Health Care Claim: Professional
D | 2300 | DTP03 | - | 1251 ..... **170**

837 - Health Care Claim: Dental
D | 2300 | DTP03 | - | 1251 ..... **154**

F Transaction Set Standard Listing

Appendix F is reserved for a complete listing of the X12 transaction set and is optionally used by ASC X12 subcommittees. Consequently, for ASC X12N technical reports, this appendix is left empty and Appendix G is the next applicable section.

G ASC X12 Code List/External Value Domain Harmonization

This appendix contains crosswalks that support the harmonization of code sets across health care standards development organizations.

G.1 Administrative Gender

Source code list

X12 DE 1068 - Gender Code
owned by ASC X12
Element Attributes: 1/1 ID

Target code list

SNOMED
owned by International Health Terminology Standard Development Organisation (IHTSDO)

X12 DE 1068 - Gender Code	SNOMED
F - Female	1086007 Female structure (body structure)
M - Male	10052007 Male structure (body structure)
U - Unknown	37791004 Indeterminate sex (body structure)