



Indiana State
Department of Health

X12 8371
Companion Guide
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Section 1: Revision History

Document Version Number	Revision Date	Revision Page Number(s)	Reason for Revisions	Revisions Completed By
Version 1.0				ISDH HIPAA
Version 2.0				ISDH HIPAA
Version 3.0	January 2011	All	5010 Implementation	ISDH HIPAA

Section 2: Institutional Claims and Encounters

Introduction

The ASC X12N 837 (005010X223A2) transaction is the HIPAA mandated instrument by which institutional claims or encounter data must be submitted. Any claim that would be submitted on a HCFA/CMS-1500 claim form must be submitted using this transaction if the data is submitted electronically.

This document is intended only as a companion guide to and is not intended to contradict or replace any information in the EDI Implementation Guides (IG). It is highly recommended that implementers have the following resources available during the development process:

- This document, *Companion Guide – 837 Institutional Claims and Encounters Transactions*
- ASC X12N 837 0005010X223 ASC X12 Standards for Electronic Data Interchange Technical Report Type 3
- ASC X12N 837 005010X223A1 ASC X12 Standards for Electronic Data Interchange Technical Report Type 3 Errata
- ASC X12N 837 005010X223A2 ASC X12 Standards for Electronic Data Interchange Technical Report Type 3 Errata

A 999 – *Implementation Acknowledgement* file will be sent to acknowledge all 837 transaction sets that are sent to ISDH. An 835 – Payment Advice will be sent for all HIPAA Compliant 837 claims. See the companion guides for these transactions on our web site for more information: <http://www.cshcs.in.gov> and then going to the EDI Solutions section.

Additionally, there are several processing assumptions, limitations, and guidelines a developer must be aware of when implementing the 837I transaction. The following list identifies these processing stipulations:

- **ISDH will be validating at the ST-SE level. We recommend that you take this into consideration when deciding how many claims to submit within a single ST-SE as a single error will cause the entire transaction set (ST-SE) to be rejected.**

Segment Usage – 837 Professional

The following matrix lists all segments within the 5010 version of the 837I IG. The ISDH Usage column indicates which segments are required, situational or not used by ISDH. A required segment element must appear on all transactions. Failure to include a required segment results in a compliance error. A situational segment is not required for every type transaction; however, a situational segment may be required under certain circumstances. Any data in a segment that is identified in the *Usage* column with an **X** is ignored by ISDH. Any segment identified in the *Usage* column as required or situational is explained in detail in the *Segment and Data Element Description* section of the document.

Table 3.1 – Segment Usage – 837 Institutional

Segment ID	Loop ID	Segment Name	ISDH Usage R – Required S – Situational X – Not Used
ST	N/A	Transaction Set Header	R
BHT	N/A	Beginning of Hierarchical Transaction	R
NM1	1000A	Submitter Name	R
PER	1000A	Submitter EDI Contact Information	R
NM1	1000B	Receiver Name	R
HL	2000A	Billing/Pay-To Hierarchical Level	R
PRV	2000A	Billing/Pay-To Specialty Information	X
CUR	2000A	Foreign Currency Information	X
NM1	2010AA	Billing Provider Name	R
N3	2010AA	Billing Provider Address	R
N4	2010AA	Billing Provider City/State/ZIP Code	R
REF	2010AA	Billing Provider Tax Identification	R
PER	2010AA	Billing Provider Contact Information	S
NM1	2010AB	Pay-To Provider Name	S
N3	2010AB	Pay-To Provider Address	R
N4	2010AB	Pay-To Provider City/State/ZIP Code	R
NM1	2010AC	Pay To Plan Name	X
N3	2010AC	Pay To Plan Address	X
N4	2010AC	Pay To Plan City/State/ZIP Code	X
HL	2000B	Subscriber Hierarchical Level	R
SBR	2000B	Subscriber Information	R

Table 3.1 – Segment Usage – 837 Institutional

Segment ID	Loop ID	Segment Name	ISDH Usage R – Required S – Situational X – Not Used
PAT	2000B	Patient Information	X
NM1	2010BA	Subscriber Name	R
N3	2010BA	Subscriber Address	S
N4	2010BA	Subscriber City/State/ZIP Code	S
DMG	2010BA	Subscriber Demographic Information	S
REF	2010BA	Subscriber Secondary Information	S
REF	2010BA	Property and Casualty Claim Number	X
NM1	2010BB	Payer Name	R
N3	2010BB	Payer Address	X
N4	2010BB	Payer City/State/ZIP Code	X
REF	2010BB	Payer Secondary Information	X
REF	2010BB	Billing Provider Secondary Identification	X
HL	2000C	Patient Hierarchical Level	X
PAT	2000C	Patient Information	X
NM1	2010CA	Patient Name	X
N3	2010CA	Patient Address	X
N4	2010CA	Patient City/State/ZIP Code	X
DMG	2010CA	Patient Demographic Information	X
REF	2010CA	Property and Casualty Patient Identifier	X
REF	2010CA	Property and Casualty Claim Number	X
CLM	2300	Claim Information	R
DTP	2300	Discharge Hour	S
DTP	2300	Statement Dates	S
DTP	2300	Admission Date/Hour	S
DTP	2300	Date - Repricer Received Date	X
CL1	2300	Institutional Claim Code	R
PWK	2300	Claim Supplemental Information	S
CN1	2300	Contract Information	X
AMT	2300	Patient Estimated Amount Due	S
REF	2300	Service Authorization Exception Code	X
REF	2300	Referral Number	S
REF	2300	Prior Authorization	S
REF	2300	Payer Claim Control Number	X

Table 3.1 – Segment Usage – 837 Institutional

Segment ID	Loop ID	Segment Name	ISDH Usage R – Required S – Situational X – Not Used
REF	2300	Re-priced Claim Number	X
REF	2300	Adjusted Re-priced Claim Number	X
REF	2300	Investigational Device Exemption Number	X
REF	2300	Claim Identifier for Transmission Intermediaries	X
REF	2300	Auto Accident State	X
REF	2300	Medical Record Number	S
REF	2300	Demonstration Project Identifier	X
REF	2300	Peer Review Organization (PRO) Approval Number	X
K3	2300	File Information	X
NTE	2300	Claim Note	S
NTE	2300	Billing Note	S
CRC	2300	EPSDT Referral	X
HI	2300	Principal Diagnosis	R
HI	2300	Admitting Diagnosis	S
HI	2300	Patient's Reason For Visit	S
HI	2300	External Cause Of Injury	S
HI	2300	Diagnosis Related Group (DRG) Information	S
HI	2300	Other Diagnosis Information	S
HI	2300	Principal Procedure Information	S
HI	2300	Other Procedure Information	S
HI	2300	Occurrence Span Information	S
HI	2300	Occurrence Information	S
HI	2300	Value Information	S
HI	2300	Condition Information	S
HI	2300	Treatment Code Information	X
HCP	2300	Claim Pricing/Re-pricing Information	X
NM1	2310A	Attending Provider Name	S
PRV	2310A	Attending Provider Specialty Information	X
REF	2310A	Attending Provider Secondary Information	S
NM1	2310B	Operating Physician Name	S
REF	2310B	Operating Physician Secondary Information	S

Table 3.1 – Segment Usage – 837 Institutional

Segment ID	Loop ID	Segment Name	ISDH Usage R – Required S – Situational X – Not Used
NM1	2310C	Other Operating Physician Name	S
REF	2310C	Other Physician Secondary Information	S
NM1	2310D	Rendering Provider Name	S
REF	2310D	Rendering Provider Secondary Identification	S
NM1	2310E	Service Facility Location Name	S
N3	2310E	Service Facility Location Address	S
N4	2310E	Service Facility Location City/State/ZIP Code	S
REF	2310E	Service Facility Location Secondary Identification	X
NM1	2310F	Referring Provider Name	S
REF	2310F	Referring Provider Secondary Identification	X
SBR	2320	Other Subscriber Information	S
CAS	2320	Claim Level Adjustment	S
AMT	2320	Coordination of Benefits (COB) Payer Paid Amount	S
AMT	2320	Remaining Patient Liability	S
AMT	2320	Coordination Of Benefits (Cob) Total Non-Covered Amount	X
OI	2320	Other Insurance Coverage Information	R
MIA	2320	Medicare Inpatient Adjudication Information	S
MOA	2320	Medicare Outpatient Adjudication Information	S
NM1	2330A	Other Subscriber Name	R
N3	2330A	Other Subscriber Address	S
N4	2330A	Other Subscriber City/State/ZIP Code	S
REF	2330A	Other Subscriber Secondary Information	S
NM1	2330B	Other Payer Name	S
N3	2330A	Other Payer Address	S
N4	2330A	Other Payer City/State/ZIP Code	S
DTP	2330B	Claim Check or Remittance Date	S
REF	2330B	Other Payer Secondary Identifier	X
REF	2330B	Other Payer Prior Authorization Number	S
REF	2330B	Other Payer Referral Number	X
REF	2330B	Other Payer Claim Adjustment Indicator	X

Table 3.1 – Segment Usage – 837 Institutional

Segment ID	Loop ID	Segment Name	ISDH Usage R – Required S – Situational X – Not Used
REF	2330B	Other Payer Claim Control Number	X
NM1	2330C	Other Payer Attending Provider	X
REF	2330C	Other Payer Attending Provider Secondary Identification	X
NM1	2330D	Other Payer Operating Physician	X
REF	2330D	Other Payer Operating Physician Secondary Identification	X
NM1	2330E	Other Payer Other Operating Physician	X
REF	2330E	Other Payer Other Operating Physician Secondary Identification	X
NM1	2330F	Other Payer Service Facility Location	X
REF	2330F	Other Payer Service Facility Location Secondary Identification	X
NM1	2330G	Other Payer Rendering Provider Name	X
REF	2330G	Other Payer Rendering Provider Secondary Identification	X
NM1	2330H	Other Payer Referring Provider	X
REF	2330H	Other Payer Referring Provider Identification	X
NM1	2330I	Other Payer Billing Provider	X
REF	2330I	Other Payer Billing Provider Secondary Identification	X
LX	2400	Service Line Number	R
SV1	2400	Institutional Service Line	R
PWK	2400	Line Supplemental Information	X
DTP	2400	Date – Service Date	R
REF	2400	Line Item Control Number	S
REF	2400	Re-priced Line Item Reference Number	X
REF	2400	Adjusted Re-priced Line Item Reference Number	X
REF	2400	Service Tax Amount	X
REF	2400	Facility Tax Amount	X
NTE	2400	Third Party Organization Notes	X
HCP	2400	Line Pricing/Re-pricing Information	X
LIN	2410	Drug Identification	X
CTP	2410	Drug Pricing	X

Table 3.1 – Segment Usage – 837 Institutional

Segment ID	Loop ID	Segment Name	ISDH Usage R – Required S – Situational X – Not Used
REF	2410	Prescription or Compound Drug Association Number	X
NM1	2420A	Operating Physician Name	X
REF	2420A	Operating Physician Name Secondary Identification	X
NM1	2420B	Other Operating Physician Name	X
REF	2420B	Other Operating Physician Name Secondary Identification	X
NM1	2420C	Rendering Provider Name	X
REF	2420C	Rendering Provider Secondary Identification	X
NM1	2420D	Referring Provider Name	X
REF	2420C	Referring Provider Secondary Identification	X
SVD	2430	Line Adjudication Information	X
CAS	2430	Line Adjustment	S
DTP	2430	Line Check or Remittance Date	R
AMT	2430	Remaining Patient Liability	S
SE	N/A	Transaction Set Trailer	R

Segment and Data Element Description

This section contains a tabular representation of any segment required or situational for the ISDH HIPAA implementation of the 837I. Each segment table contains rows and columns describing different segment elements.

Segment Name – The industry assigned segment name as identified in the *IG*.

Segment ID – The industry assigned segment ID as identified in the *IG*.

Loop ID – The loop within which the segment should appear.

Usage – Identifies the segment as required or situational.

Segment Notes – A brief description of the purpose or use of the segment.

Example – An example of complete segment.

Element ID – The industry assigned data element ID as identified in the *IG*.

Usage – Identifies the data element as R-required, S-situational, or N/A-not used.

Guide Description/Valid Values – Industry name associated with the data element. If no industry name exists, this is the *IG* data element name. This column also lists in **BOLD** the values and/or code set to be used.

Comments – Description of the contents of the data elements including field lengths.

Header

Segment Name	ST - Transaction Set Header
Segment ID	ST
Loop ID	N/A
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	BHT - Beginning of Hierarchical Transaction
Segment ID	BHT
Loop ID	N/A
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - Submitter Name
Segment ID	NM1
Loop ID	1000A
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	PER - Submitter EDI Contact Information
Segment ID	PER
Loop ID	1000A
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - Receiver Name
Segment ID	NM1
Loop ID	1000B
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Billing Provider Detail

Segment Name	HL - Billing/Pay-To Provider Hierarchical Level
Segment ID	HL
Loop ID	2000A
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - Billing Provider Name
Segment ID	NM1
Loop ID	2010AA
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	N3 - Billing Provider Address
Segment ID	N3
Loop ID	2010AA
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	N4 - Billing Provider City/State/ZIP Code
Segment ID	N4
Loop ID	2010AA
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF - Billing Provider Tax Identification
Segment ID	REF
Loop ID	2010AA
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	PER - Billing Provider Contact Information
Segment ID	PER
Loop ID	2010AA
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - Pay-To Provider Name
Segment ID	NM1
Loop ID	2010AB
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	N3 - Pay-To Provider Address
Segment ID	N3
Loop ID	2010AB
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	N4 - Pay-To Provider City/State/ZIP Code
Segment ID	N4
Loop ID	2010AB
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Subscriber Detail

Segment Name	HL - Subscriber Hierarchical Level
Segment ID	HL
Loop ID	2000B
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	SBR - Subscriber Information
Segment ID	SBR
Loop ID	2000B
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - Subscriber Name
Segment ID	NM1
Loop ID	2010BA
Usage	Required
Segment Notes	See ISDH specific rules below.
Example	NM1*IL*1*DOE*JOHN*T***MI*123456~

Element ID	Usage	Guide Description/Valid Values	Comments
NM101	R	Entity Identifier Code IL – Insured or Subscriber	
NM102	R	Entity Type Qualifier 1 – Person	
NM103	R	Subscriber's Last Name	
NM104	S	Subscriber's First Name	
NM105	S	Subscriber's Middle Initial	
NM106	N/A	Name Prefix	Not used per IG
NM107	S	Subscriber Name Suffix	
NM108	R	Identification Code Qualifier MI – Member Identification Number	

Element ID	Usage	Guide Description/Valid Values	Comments
NM109	R	Subscriber Primary Identifier	This field is required by ISDH.
NM110	N/A	Entity Relationship Code	Not used per IG
NM111	N/A	Entity Identifier Code	Not used per IG
NM112	N/A	Name Last or Organization Name	Not used per IG

Segment Name	N3 - Subscriber Address
Segment ID	N3
Loop ID	2010BA
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	N4 - Subscriber City/State/ZIP Code
Segment ID	N4
Loop ID	2010BA
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	DMG - Subscriber Demographic Information
Segment ID	DMG
Loop ID	2010BA
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF - Subscriber Secondary Information
Segment ID	REF
Loop ID	2010BA
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - Payer Name
Segment ID	NM1
Loop ID	2010BB – Payer Name
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Claim Information

Segment Name	CLM - Claim Information
Segment ID	CLM
Loop ID	2300
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	DTP - DISCHARGE HOUR
Segment ID	DTP
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	DTP - STATEMENT DATES
Segment ID	DTP
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	DTP - ADMISSION DATE/HOUR
Segment ID	DTP
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	CL1 - INSTITUTIONAL CLAIM CODE
Segment ID	CL1
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	PWK - Claim Supplemental Information
Segment ID	PWK
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	AMT - Patient Estimated Amount Due
Segment ID	AMT
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF- Referral Number
Segment ID	REF
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF- Prior Authorization
Segment ID	REF
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF - Medical Record Number
Segment ID	REF
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NTE - Claim Note
Segment ID	NTE
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NTE - Billing Note
Segment ID	NTE
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - PRINCIPAL DIAGNOSIS
Segment ID	HI
Loop ID	2300
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - ADMITTING DIAGNOSIS
Segment ID	HI
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - PATIENT'S REASON FOR VISIT
Segment ID	HI
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - EXTERNAL CAUSE OF INJURY
Segment ID	HI
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - DIAGNOSIS RELATED GROUP (DRG) INFORMATION
Segment ID	HI
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - OTHER DIAGNOSIS INFORMATION
Segment ID	HI
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - PRINCIPAL PROCEDURE INFORMATION
Segment ID	HI
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - OTHER PROCEDURE INFORMATION
Segment ID	HI
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - OCCURRENCE SPAN INFORMATION
Segment ID	HI
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - OCCURRENCE INFORMATION
Segment ID	HI
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - VALUE INFORMATION
Segment ID	HI
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	HI - CONDITION INFORMATION
Segment ID	HI
Loop ID	2300
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - ATTENDING PROVIDER NAME
Segment ID	NM1
Loop ID	2310A
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF - Attending Provider Secondary Identification
Segment ID	REF
Loop ID	2310A
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - Operating Physician Name
Segment ID	NM1
Loop ID	2310B
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF - Operating Physician Secondary Identification
Segment ID	REF
Loop ID	2310B
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - Other Operating Physician Name
Segment ID	NM1
Loop ID	2310C
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF - Other Operating Physician Secondary Identification
Segment ID	REF
Loop ID	2310C
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - Rendering Provider Name
Segment ID	NM1
Loop ID	2310D
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF - Rendering Provider Secondary Information
Segment ID	REF
Loop ID	2310D
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - Service Facility Location Name
Segment ID	NM1
Loop ID	2310E
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	N3 - Service Facility Location Address
Segment ID	N3
Loop ID	2310E
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	N4 - Service Facility Location City, State, Zip Code
Segment ID	N4
Loop ID	2310E
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 - REFERRING PROVIDER NAME
Segment ID	NM1
Loop ID	2310F
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	SBR - Other Subscriber Information
Segment ID	SBR
Loop ID	2320
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	CAS - Claim Level Adjustment
Segment ID	CAS
Loop ID	2320
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	AMT - Coordination of Benefits (COB) Payer Paid Amount
Segment ID	AMT
Loop ID	2320
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	AMT - Remaining Patient Liability
Segment ID	AMT
Loop ID	2320
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	OI - Other Insurance Coverage Information
Segment ID	OI
Loop ID	2320
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	MIA - Inpatient Adjudication Information
Segment ID	MOA
Loop ID	2320
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	MOA – Outpatient Adjudication Information
Segment ID	MOA
Loop ID	2320
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 – Other Subscriber Name
Segment ID	NM1
Loop ID	2330A
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	N3 – Other Subscriber Address
Segment ID	N3
Loop ID	2330A
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	N4 – Other Subscriber City, State, Zip Code
Segment ID	N4
Loop ID	2330A
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF – Other Subscriber Secondary Identification
Segment ID	REF
Loop ID	2330A
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	NM1 – Other Payer Name
Segment ID	NM1
Loop ID	2330B
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	N3 – Other Payer Address
Segment ID	N3
Loop ID	2330B
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	N4 – Other Payer City, State, Zip Code
Segment ID	N4
Loop ID	2330B
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	DTP – Claim Check or Remittance Date
Segment ID	DTP
Loop ID	2330B
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF – Other Payer Prior Authorization Number
Segment ID	REF
Loop ID	2330B
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	LX - Service Line
Segment ID	LX
Loop ID	2400
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	SV2 – Institutional Service Line
Segment ID	SV1
Loop ID	2400
Usage	Required
Segment Notes	Follow the HIPAA and IG rules

Segment Name	DTP - Date - Service Date
Segment ID	DTP
Loop ID	2400
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	REF - Line Item Control Number
Segment ID	REF
Loop ID	2400
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	CAS - Service Line Adjustment
Segment ID	CAS
Loop ID	2430
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	DTP - LINE CHECK OR REMITTANCE DATE
Segment ID	DTP
Loop ID	2430
Usage	Required
Segment Notes	Follow the HIPAA and IG rules.

Segment Name	AMT - REMAINING PATIENT LIABILITY
Segment ID	DTP
Loop ID	2430
Usage	Situational
Segment Notes	Follow the HIPAA and IG rules.

Transaction Set Trailer

Segment Name	SE - Transaction Set Trailer
Segment ID	SE
Loop ID	N/A
Usage	Required
Segment Notes	Follow the HIPAA and A1 IG rules.