



Blue Cross & Blue Shield of Rhode Island

**270/271 Health Care Eligibility Benefit
Inquiry and Response Companion Guide
(Real-Time and Batch)**

HIPAA version 5010

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PREFACE

This *Companion Guide* supplements the ASC X12 270/271 (005010X279A1) 5010 *Technical Reports Type 3 (TR3)* and *Errata* adopted under HIPAA. Its purpose is to clarify the rules and specify the data content when data is electronically transmitted to Blue Cross & Blue Shield of Rhode Island (hereinafter "BCBSRI"). The rules for transmitting data detailed herein are compliant with both X12 syntax and the 5010 *TR3s*. This *Companion Guide* does not convey information that in any way exceeds the requirements or usages of data expressed in the 5010 *Technical Reports Type 3 (TR3s and Errata)*.

DISCLAIMER

This *Companion Guide* is considered a living document, and as such, the information provided herein will be subject to change after July 1, 2011 in the event that BCBSRI revises its policies or HIPAA Transactions and Code Sets law is updated or amended.

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1.0 Introduction

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires that all health insurance payers in the United States comply with the electronic data interchange (EDI) standards for health care as established by the Secretary of Health and Human Services (HHS).

The *ANSI X12N 5010 TR3s and Erratas* adhere to the final HIPAA Transaction Regulations and have been established as the standards of compliance for electronic transactions. The *5010 TR3s* are available electronically at www.wpc-edi.com.

2.0 Scope

This *270/271 Health Care Eligibility Benefit Inquiry and Response Companion Guide* is designed for use in conjunction with the *ANSI ASC X12N 270/271 (005010X279A1) Health Care Eligibility Benefit Inquiry and Response 5010 TR3*. The specifications contained within this *Companion Guide* define current functions and provide supplemental information specific to Blue Cross & Blue Shield of Rhode Island (BCBSRI). The information presented is for clarification and does not contradict any requirements in the *ANSI X12N 5010 TR3s and Erratas*.

The tables in **Section 7.1** and **Section 7.2** detail the additional information directly related to loops, segments, or data elements specific to BCBSRI transactions.

3.0 Trading Partners

A BCBSRI EDI trading partner is any business partner (provider, billing service, software vendor, employer group, financial institution, etc.) who transmits to or receives electronic data from BCBSRI.

In order to register as a BCBSRI Trading Partner and begin testing, it is necessary to complete the Trading Partner Registration (TPR) form. In addition, trading partners must print out and complete a copy of the Trading Partner Agreement (TPA) before partner testing can begin. Both documents are located on the BCBSRI Web site:

https://www.bcbsri.com/BCBSRIWeb/providers/provider_network_system/companion_guides.jsp.

Both original documents must be returned to:

Director, EDI & Electronic Information Exchange
ATTN: EDI Trading Partner Agreement & Registration
Blue Cross & Blue Shield of Rhode Island
500 Exchange Street
Providence, RI 02903

4.0 Working with BCBSRI

BCBSRI will work closely with its trading partners to establish effective communication protocols and to resolve any connectivity issues that may arise regarding the exchange of HIPAA-related electronic transactions.

4.1 Contact Information

The following contact information is provided to assist in the process of implementing 270/271 transactions or if you should encounter any 270/271 transaction production issues:

Call the Information Technology (IT) Service Desk which supports BCBSRI, at 401-751-1673 or 1-855-721-4211.

5.0 Payer Connectivity/Communications

5.1 Transmission Administrative Procedures

BCBSRI's EDI & Electronic Information Exchange staff will establish logon IDs, passwords and a HIPAA transaction mailbox for each trading partner approved for testing. If a Trading Partner wishes to do Real-Time transactions, they will need to be assigned a logon ID & password by EDI & Electronic Information Exchange staff.

5.2 Retransmission Procedures

In the event that issues arise requiring trading partners to resubmit transactions, BCBSRI/IT Service Desk support personnel will confirm that it is necessary to retransmit the file(s) in question and will forward specific information to the trading partner.

5.3 Communications Protocols

The communications will utilize Internet browser technology (IP Protocol) to the secure BCBSRI Web page, Sterling File Gateway via HTTPS (with certificate) using IE 7.0 or greater or Secure File Transfer Protocol (SFTP) using SSH keys. It is required that all trading partners have Internet access with an industry standard browser.

BCBSRI provides a Web-based application known as BCBSRI Sterling File Gateway that enables trading partners to:

- Submit (send) HIPAA transactions
- Receive HIPAA transaction responses
- View history files (directory) of all transactions sent and received (only possible for batch files submitted. Not for real time.)
- BCBS Maintains 30 days of history for Batch transactions in each Trading Partners mailbox directory.

BCBSRI accepts Real-Time transmissions from Trading Partners. To send Real-Time transmissions, please refer to the *BCBSRI 27x Real-Time API Document* located at:

https://www.bcsri.com/BCBSRIWeb/providers/provider_network_system/companion_guides.jsp .

5.3.1 Passwords

Trading Partner access will be verified by the logon ID and password whenever the BCBSRI Connect Enterprise system is accessed. Operation procedures will assure that logons and passwords are initiated, monitored and maintained in a secure manner.

5.3.2 Connecting to BCBSRI via EDI Gateway

Please go to www.bcbsri.com and select the **Providers** tab, **HIPAA** and **Documentation** to view or print *BCBSRI EDI Gateway*, a document that provides detailed instructions on how to connect to the BCBSRI Connect Enterprise System. If necessary, also reference the *BCBSRI EDI Gateway Dialup Networking Guide* for specific data communications set-up instructions.

6.0 Receiver/Sender Identifiers

6.1 ISA-IEA Control Structure/Envelopes

Sender ID interchange control segments: Use ID Qualifier code ZZ in ISA05. The BCBSRI assigned Submitter ID must be used in ISA06 and GS02. ID limited to 8 characters with a leading alpha prefix. Prefixes: **P = Production, T = Test.**

Receiver ID interchange control segments: Use ID Qualifier code ZZ in ISA07. The Receiver ID provided by BCBSRI in the Trading Partner Agreement must be used in ISA08 and GS03.

6.1.1 ISA Delimiters

BCBSRI systems will accept the valid delimiters listed below and request that the use of delimiters be restricted to the following:

- * = Element Delimiter
- : = Composite Delimiter
- ~ = Terminator Delimiter
- ^, (= Repetition Delimiter (ISA11)

6.2 GS-GE Control Segments/Envelopes

Sender ID interchange control segments: Submitter = GS02.

Receiver ID interchange control segments: Receiver = GS03.

Sender IDs will be assigned.

GS Segments/Reference Codes:

		Batch	Real-Time
Functional Identifier Code	GS01	HS	HS
Application's Sender Code	GS02	TXXXXXXXX (Test) PXXXXXXXX (Production)	TRXXXXXXXX (Test) PRXXXXXXXX (Production)
Application's Receivers Code	GS03	222774	R222774
Date	GS04	Date (ccymmdd)	Date (ccymmdd)
Time	GS05	Time (hhmm)	Time (hhmm)
Group Control Number	GS06	Required	Required
Responsible Agency Code	GS07	X	X
Version/Release/Industry Identifier Code	GS08	005010X279A1	005010X279A1

7.0 BCBSRI Specific Business Rules and Limitations

7.1 270 Eligibility Inquiry

General: The eligibility information returned is not a guarantee of claims payment. BCBSRI will follow the HIPAA search rule as described in Section 1.4.8 of the *270/271 5010 Technical Report Type 3 (TR3)*. BCBSRI will respond to eligibility requests with all coverage information available for the patient identified as of the eligibility date requested (or the current date).

Valid Submitters: BCBSRI will only accept transactions from valid trading partners whose submitter IDs are on file. BCBSRI will reject any transmission if the submitter ID cannot be validated.

Enveloping Data: The 270 Real-Time requests must be limited to one patient request per ISA-IEA, GS-GE and ST-SE envelope configuration. BCBSRI will accept single GS-GE groups within a single ISA-IEA of the transaction envelope for Real-Time transaction.. Each group must be of the same transaction type

The only exceptions to this rule are Batch requests. BCBSRI will accept multiple GS-GE groups within a single ISA-IEA of the transaction envelope for Batch 270 transactions.

Note: Real-Time and Batch transactions cannot be mixed in the same ISA-IEA, GS-GE grouping

Transaction Editing: All HIPAA (005010X279A1) *5010 Technical Reports Type 3 (TR3s)* and *Errata's* data requirements must be met including the required data elements to support the HIPAA search rules. If the required data elements are not sent within the transaction set ST-SE, the eligibility response will be returned with the appropriate AAA segment value

The following are specific BCBSRI rules applicable to 270 Eligibility Inquiry transactions:

Item	Loop ID Segment Description and Element Name	Reference (REF) Designator	HIPAA TR3 Page Number	Comments
1.	Header Level Hierarchical Structure Code	BHT01	63	Value 0022.
	Transaction Set Purpose Code	BHT02	64	Only value 13 is applicable to BCBSRI eligibility requests.
2.	2100A – INFORMATION SOURCE NAME Entity Identifier Code	NM101	69	Value PR (Payer).
	Identification Code Qualifier	NM108	71	Value PI.
	Information Source Primary Identifier	NM109	71	Submitters value with 00370 or 00870.
3.	2100B -- INFORMATION RECEIVER NAME Identify the eligibility/benefit receiver	NM108	77	Value XX
		NM109	78	NPI is required.

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4.	2000C- SUBSCRIBER TRACE NUMBER Trace Number	TRN02	91	Required when subscriber is the patient
5.	2100C – SUBSCRIBER NAME Subscriber Last Name Subscriber First Name Subscriber Primary Identifier Provider Information Reference Qualifier Reference Code Subscriber Date of Birth Subscriber Date of Eligibility	NM103 NM104 NM109 PRV02 PRV03 DMG02 DTP	93 93 96 105 106 108 123	Required if subscriber is patient. Required if subscriber is the patient. Always required. Note: Use BCBSRI ID exactly as it appears on the member’s ID card, this includes the alpha prefix. Value HPI NPI is required Required if subscriber is patient. If no date submitted, BCBSRI will assume request is for eligibility status for the current date. If the date submitted is in the future, BCBSRI will only respond with status as of the current date valid until end of current month. If eligibility request is previous to current date, it must be within 1 year of the transaction date. Accumulated remaining deductible and out of pocket maximum are only returned for current date of request.
6.	2110C – SUBSCRIBER ELIGIBILITY OR BENEFIT INQUIRY INFORMATION	EQ	125	BCBSRI allows only a single EQ segment per request. BCBSRI recommends to use a specific HIPAA service type(s) in EQ01 Refer to APPENDIX A for HIPAA Service Types
7.	2100D – DEPENDENT NAME Dependent Last Name Dependent First Name Dependent Date of Birth Dependent Date	NM103 NM104 DMG02 DTP	152 152 165 180	Required if Dependent is patient. Required if Dependent is patient. Required if Dependent is patient. If no date submitted, BCBSRI will assume request is for eligibility status for the current date. If the date submitted is in the future, BCBSRI will only respond with status as of the current date valid until end of current month. If eligibility request is previous to current date, it must be within 1 year of the transaction date Accumulated remaining deductible and out of pocket maximum are only returned for current date of request.
8.	2110D – DEPENDENT ELIGIBILITY OR BENEFIT INQUIRY INFORMATION	EQ	182	BCBSRI allows only a single EQ segment per request. BCBSRI recommends to use a specific HIPAA service type(s) in EQ01

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				Refer to Common Service types/APPENDIX A
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7.2 271 Eligibility Response

The following are specific BCBSRI rules applicable to 271 Eligibility Response transactions:

Item	Loop ID Segment Description and Element Name	Reference (REF) Designator	HIPAA TR3 Page Number	Comments
1.	2100B – INFORMATION RECEIVER NAME NM1 Segment	NM1	233	Will return information as received on the 270 transaction.
2.	2100C – SUBSCRIBER NAME NM1 Segment	NM1	249	Will return information as stored in the BCBSRI system when we uniquely identify the subscriber in the 270 request.
3.	2110C – SUBSCRIBER ELIGIBILITY OR BENEFIT INFORMATION	EB	289	Eligibility and benefit information will be returned at this level if the subscriber is the patient.
4.	2100D – DEPENDENT NAME NM1 Segment	NM1	354	Will return information as stored in the BCBSRI system when we uniquely identify the member in the 270 request.
5.	2110D – DEPENDENT ELIGIBILITY OR BENEFIT INFORMATION	EB	393	Eligibility information will be returned at this level if the member is the patient.

7.3 Common Service Types (Baseline Service Types)

Baseline service types are HIPAA service types which are not supported for specific service type response and will return response with plan level and common benefits associated with members eligibility. Please refer to Appendix B. for all Service types expected to respond as baseline service types.

For example, when the Information Source (Blue Cross & Blue Shield of Rhode Island) receives a benefit request for Orthopedic (service type BK), the response will be Baseline Response as shown in Appendix A.

****If there is no benefit for the request type the system will not generate that service type in the response.**

** 271 responses will include Service Type 30 (Plan level Coverage) in all responses.

APPENDIX A: Baseline response (Plan level and common benefits for member)			
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
30	Health Benefit Plan Coverage	30	Plan Level Benefits (Deductible, Copayments, Coinsurance)
	** These service types will return with Active or Inactive only *** will return with Active or Inactive and 'SPECIALIST' message text when benefits returned is for specialist	1**	Medical Care
		86**	Emergency Services
		47**	Hospital
		MH **	Mental Health
		98***	Primary Care Physician Office Visit, Office Visit, Hospital Based Clinic Visit, Hospital Based Pediatric Clinic Visit, Minute Clinic
		33	Chiropractic
		35	Dental Care
		48	Hospital - Inpatient
		50	Hospital - Outpatient
		52	Hospital - Emergency Medical
		AL	Vision/Optomety
		BY	Professional Office Visit: Sick
		BZ	Professional Office Visit: Well
		UC	Urgent Care

APPENDIX B: List of all Baseline service types	
The following Service Types will return Baseline response (same as Service Type 30)	
15	Alternate Method Dialysis
22	Social Work

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32	Plan Waiting Period
43	Home Health Prescriptions
46	Respite Care
54	Long Term Care
58	Cabulance
63	Donor Procedures
71	Audiology Exam
85	AIDS
87	Cancer
95	Podiatry - Nursing Home Visits
96	Professional (Physician)
A1	Professional (Physician) Visit - Nursing Home
A2	Professional (Physician) Visit - Skilled Nursing Facility
AQ	Non-medically Necessary Physical
BA	Independent Medical Evaluation
BD	Cognitive Therapy
BE	Massage Therapy
BJ	Skin
BK	Orthopedic
BL	Cardiac
BM	Lymphatic
BN	Gastrointestinal
BP	Endocrine
BQ	Neurology
BR	Eye
BS	Invasive Procedures
B1	Burn Care
B2	Brand Name Prescription Drug Formulary
B3	Brand Name Prescription Drug – Non Formulary
BW	Mail Order Prescription Drug: Brand Name
BX	Mail Order Prescription Drug: Generic
C1	Coronary Care
CA	Private Duty Nursing – Inpatient
CB	Private Duty Nursing – Home
CC	Surgical Benefits – Professional (Physician)
CD	Surgical Benefits - Facility
CP	Eye Wear and Eye Wear Associates
CQ	Case Management
DG	Dermatology
DS	Diabetic Supplies
GY	Allergy
IC	Intensive Care
GF	Generic Prescription Drug – Formulary

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GN	Generic Prescription Drug – Non-Formulary
NI	Neonatal Intensive Care
ON	Oncology
PU	Pulmonary
RN	Renal
RT	Residential Psychiatric Treatment
TC	Transitional Care
TN	Transitional Nursery Care

****If there is no benefit for the request type the system will not generate that service type in the response.**

APPENDIX B: DETAILED BENEFITS RETURNED BY SERVICE TYPE			
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
60	General Benefits	60	General Benefits
1	Medical Care	1	Medical Care (For this code, only Active/Inactive)
		2	Surgical
		4	Diagnostic X-Ray
		5	Diagnostic Lab
		7	Anesthesia
		8	Surgical Assistance
		9	Other Medical
		20	Second Surgical Opinion
		30	Health Benefit Plan Coverage
		42	Home Health Care
		45	Hospice
		48	Hospital - Inpatient
		50	Hospital - Outpatient
		51	Hospital - Emergency Accident
		52	Hospital - Emergency Medical
		53	Hospital - Outpatient Surgery
		61	In-vitro Fertilization
		62	MRI/CAT Scan

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		69	Maternity
		73	Diagnostic Medical
		76	Dialysis
		83	Infertility
		92	Generic Prescription Drug
		98	Primary Care Physician Office Visit, Office Visit, Hospital Based Clinic Visit, Hospital Based Pediatric Clinic Visit, Minute Clinic
		99	Professional (Physician) Visit-Inpatient
		AO	Professional (Physician) Visit-Outpatient
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		A3	Professional (Physician) Visit-Home
		A6	Psychotherapy
		A7	Mental Health - Inpatient
		A8	Mental Health - Outpatient, Individual Sessions, Group Sessions
		AB	Rehabilitation - Inpatient
		AG	Skilled Nursing Care
		BB	Partial Hospitalization (Psychiatric)
		BT	Gynecological
		BU	Obstetrical
		BY	Professional Office Visit: Sick
		CE	Mental Health Provider - Inpatient
		CF	Mental Health Provider - Outpatient
2	Surgical	2	Surgical
		7	Anesthesia
		8	Surgical Assistance
		20	Second Surgical Opinion
3	Consultation	3	Consultation
		30	Health Benefit Plan Coverage
		33	Chiropractic Visits
		34	Chiropractic Office Visits

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		81	Routine Physical
		98	Professional (Physician) Visit- Office
		99	Professional (Physician) Visit- Inpatient
		BT	Gynecological
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		UC	Urgent Care
4	Diagnostic X-Ray	4	Diagnostic X-Ray
		5	Diagnostic Lab
		30	Health Benefit Plan Coverage
		62	Diagnostic MRI, CAT Scan
		CK	Screening X-Ray
		CN	Mammogram, Low Risk Patient
5	Diagnostic Lab	5	Diagnostic Lab: Preventative Machine Tests, Diagnostic Machine Tests, Diagnostic Lab, Preventative Lab, Lead Screening, Screening - Pap Smears, Screening - Prostate Specific Antigen Test
		30	Health Benefit Plan Coverage
		BT	Gynecological
		CL	Screening Laboratory
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		CK	Screening X-Ray
6	Radiation Therapy	6	Radiation Therapy, Radiation Therapy - Treatment Planning
		30	Health Benefit Plan Coverage
7	Anesthesia	7	Anesthesia
		30	Health Benefit Plan Coverage
8	Surgical Assistance	8	Surgical Assistance
		30	Health Benefit Plan Coverage
9	Other Medical	9	Other Medical, Early Intervention Services
		30	Health Benefit Plan Coverage
10	Blood Charges	10	Blood Charges
		30	Health Benefit Plan Coverage
11	Used Durable Medical Equipment	11	Used Durable Medical Equipment
		12	Durable Medical Equipment-Purchase
		30	Health Benefit Plan Coverage
		DM	Durable Medical Equipment
12	Durable Medical Equipment Purchase	12	Durable Medical Equipment, Hearing Aids, Therapeutic Shoes - Diabetes Only, Custom-molded Shoe Inserts - Diabetes Only, Depth

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			Shoe Inserts - Diabetes Only, Medical Supplies
		30	Health Benefit Plan Coverage
		DM	Durable Medical Equipment
13	Ambulatory Service Center Facility	13	Ambulatory Service Center Facility
		30	Health Benefit Plan Coverage
14	Renal Supplies in the Home	14	Renal Supplies in the Home
		12	Medical Supplies
		30	Health Benefit Plan Coverage
15	Alternate Method Dialysis	15	Alternate Method Dialysis
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		88	Pharmacy
		98	Professional (Physician) Office Visit
		AL	Vision(Optomety)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
16	Chronic Renal Disease (CRD) Equipment	16	Chronic Renal Disease (CRD) Equipment
		12	Durable Medical Equipment-Purchase
		30	Health Benefit Plan Coverage
		DM	Durable Medical Equipment
17	Pre-Admission Testing	17	Pre-Admission Testing
		4	Diagnostic X-Ray

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		5	Diagnostic Lab, Diagnostic Machine Tests
		30	Health Benefit Plan Coverage
		62	Diagnostic MRI, CAT Scan
18	Durable Medical Equipment Rental	18	Durable Medical Equipment – Rental
		12	Durable Medical Equipment- Purchase
		30	Health Benefit Plan Coverage
		DM	Durable Medical Equipment
19	Pneumonia Vaccine	19	Pneumonia Vaccine
		80	Immunizations
		30	Health Benefit Plan Coverage
		CO	Flu Vaccination
20	Second Surgical Opinion	20	Second Surgical Opinion
		30	Health Benefit Plan Coverage
		98	Professional (Physician) Visit Office
		BY	Physician Office Visit: Sick
21	Third Surgical Opinion	21	Third Surgical Opinion
		30	Health Benefit Plan Coverage
		98	Professional (Physician) Visit Office
		BY	Physician Office Visit: Sick
22	Social Work	22	Social Work
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Office Visit
		AL	Vision(Optomtry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care

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23	Diagnostic Dental	23	Diagnostic Dental
		30	Health Benefit Plan Coverage
		35	Dental Care
24	Periodontics	24	Periodontics
		30	Health Benefit Plan Coverage
		35	Dental Care
25	Restorative	25	Restorative
		30	Health Benefit Plan Coverage
		35	Dental Care
26	Endodontics	26	Endodontics
		30	Health Benefit Plan Coverage
		35	Dental Care
27	Maxillofacial Prosthetics	27	Maxillofacial Prosthetics
		30	Health Benefit Plan Coverage
		35	Dental Care
28	Adjunctive Dental Services	28	Adjunctive Dental Services
		30	Health Benefit Plan Coverage
		35	Dental Care
30	Health Benefit Plan Coverage	30	Health Benefit Plan Coverage
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Office Visit
		AL	Vision(Optomtry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
32	Plan Waiting Period	32	Plan Waiting Period

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		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Office Visit
		AL	Vision(Optomety)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
33	Chiropractic	33	Chiropractic Visits, Subluxation
		30	Health Benefit Plan Coverage
		34	Chiropractic Office Visits
		4	Diagnostic Imaging
		62	Diagnostic MRI, CAT Scan
34	Chiropractic Office Visits	34	Chiropractic Office Visits
		30	Health Benefit Plan Coverage
		33	Chiropractic Visits, Subluxation
		4	Diagnostic Imaging
		62	Diagnostic MRI, CAT Scan

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270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
35	Dental Care	35	Dental Care
		23	Diagnostic Dental
		24	Periodontics
		25	Restorative
		26	Endodontics
		27	Maxillofacial Prosthetics
		28	Adjunctive Dental Services
		30	Health Benefit Plan Coverage
		36	Dental Crowns
		37	Dental Accident
		38	Orthodontics
		39	Prosthodontics
		40	Oral Surgery
		41	Routine (Preventive) Dental
36	Dental Crowns	36	Dental Crowns
		30	Health Benefit Plan Coverage
		35	Dental Care
37	Dental Accident	37	Dental Accident
		30	Health Benefit Plan Coverage
		35	Dental Care
38	Orthodontics	38	Orthodontics
		30	Health Benefit Plan Coverage
		35	Dental Care
39	Prosthodontics	39	Prosthodontics
		30	Health Benefit Plan Coverage
		35	Dental Services - General
40	Oral Surgery	40	Dental - Oral Surgery
		25	Dental Services - General
		30	Health Benefit Plan Coverage
		35	Dental Care
41	Routine (Preventive) Dental	41	Routine (Preventive) Dental
		30	Health Benefit Plan Coverage
		35	Dental Care
42	Home Health Care	42	Home Health Care, Infusion Therapy, Infused Drugs
		30	Health Benefit Plan Coverage
		A3	Professional (Physician) Visit - Home
43	Home Health Prescriptions	43	Home Health Prescriptions

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		1	Medical Care
		30	Health Benefit Plan Coverage
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
44	Home Health Visits	44	Home Health Visits
		30	Health Benefit Plan Coverage
		42	Home Health Care
45	Hospice	45	Hospice
		30	Health Benefit Plan Coverage
46	Respite Care	46	Respite Care
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit
		AL	Vision (Optometry)
		BY	Physician Visit: Sick
		BZ	Physician Visit: Well
		MH	Mental Health
		UC	Urgent Care

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270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
47	Hospital	47	Hospital
		30	Health Benefit Plan Coverage
		48	Hospital - Inpatient
		50	Hospital - Outpatient
		51	Hospital - Emergency Accident
		52	Hospital - Emergency Medical
		53	Hospital - Outpatient Surgery
		98	Professional (Physician) Visit Office
		99	Hospital - Inpatient Physician Services
		AB	Rehabilitation - Inpatient
		A0	Professional (Physician) Visit - Outpatient
		BY	Physician Office Visit: Sick
48	Hospital - Inpatient	48	Hospital - Inpatient
		30	Health Benefit Plan Coverage
		99	Professional (Physician) Visit- Inpatient
		AB	Rehabilitation - Inpatient
49	Hospital - Room and Board	49	Hospital - Room and Board
		30	Health Benefit Plan Coverage
		48	Hospital - Inpatient
50	Hospital - Outpatient	50	Hospital - Outpatient
		30	Health Benefit Plan Coverage
		51	Hospital - Emergency Accident
		52	Hospital - Emergency Medical
		53	Hospital - Outpatient Surgery
		98	Professional (Physician) Visit Office
		A0	Professional (Physician) Visit - Outpatient
		BY	Physician Office Visit: Sick
51	Hospital - Emergency Accident	51	Hospital - Emergency Accident
		30	Health Benefit Plan Coverage
		52	Hospital - Emergency Medical
52	Hospital - Emergency Medical	52	Hospital - Emergency Medical
		30	Health Benefit Plan Coverage
53	Hospital - Ambulatory Surgical	53	Hospital - Ambulatory Surgical

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		30	Health Benefit Plan Coverage
54	Long Term Care	54	Long Term Care
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		1	Medical
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
55	Major Medical	55	Major Medical
		30	Health Benefit Plan Coverage
56	Medically Related Transportation	56	Medically Related Transportation
		30	Health Benefit Plan Coverage
		57	Air Transportation
		59	Licensed Ambulance
57	Air Transportation	57	Air Transportation
		30	Health Benefit Plan Coverage
58	Cabulance	58	Cabulance
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit

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		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		MH	Mental Health
		UC	Urgent Care
59	Licensed Ambulance	59	Licensed Ambulance
		30	Health Benefit Plan Coverage
60	General Benefits	60	General Benefits
		30	Health Benefit Plan Coverage
61	In-vitro Fertilization	61	In-vitro Fertilization
		30	Health Benefit Plan Coverage
		83	Infertility
62	MRI/CAT Scan	62	MRI/CAT Scan
		30	Health Benefit Plan Coverage
63	Donor Procedures	63	Donor Procedures
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit-Well
		MH	Mental Health
		UC	Urgent Care
64	Acupuncture	64	Acupuncture
		30	Health Benefit Plan Coverage
65	Newborn Care	65	Newborn Care
		30	Health Benefit Plan Coverage
		99	Professional (Physician) Visit - Inpatient
66	Pathology	66	Pathology

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		5	Diagnostic Lab
		30	Health Benefit Plan Coverage
		BT	Gynecological
67	Smoking Cessation	67	Smoking Cessation
		30	Health Benefit Plan Coverage
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
68	Well Baby Care	68	Well Baby Care
		5	Diagnostic Lab
		30	Health Benefit Plan Coverage
		80	Immunizations
		BH	Pediatric
		BZ	Physician Office Visit: Well
69	Maternity	69	Pregnancy Services
		30	Health Benefit Plan Coverage
		BU	Obstetrical
70	Transplants	70	Organ Transplants
		2	Surgical
		7	Anesthesia
		8	Surgical Assistance
		30	Health Benefits Plan Coverage
		48	Hospital - Inpatient
71	Audiology Exam	71	Audiology Exam
		1	Medical Care
		30	Health Benefits Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
72	Inhalation Therapy	72	Respiratory Therapy

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		30	Health Benefit Plan Coverage
73	Diagnostic Medical	73	Diagnostic Medical
		4	Diagnostic X-Ray Diagnostic Imaging, Screening - Mammography, Diagnostic MRA, PT Scan, Nuclear Cardiology
		5	Diagnostic Lab,
		30	Health Benefit Plan Coverage
270 REQUEST		271 RESPONSE	
EQ01	<u>Service Description</u>	EB03	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		62	MRI/CAT Scan
		98	Professional (Physician) Visit - Office
		BY	Physician Office Visit: Sick
		CN	Mammogram, Low Risk Patient
74	Private Duty Nursing	74	Private Duty Nursing
		30	Health Benefit Plan Coverage
75	Prosthetic Device	75	Prosthetic Device
		30	Health Benefit Plan Coverage
76	Dialysis	76	Dialysis
		30	Health Benefit Plan Coverage
77	Otological Exam	77	Otological Exam
		30	Health Benefit Plan Coverage
78	Chemotherapy	78	Chemotherapy
		30	Health Benefit Plan Coverage
		AR	Experimental Drug Therapy
79	Allergy Testing	79	Allergy Testing
		30	Health Benefit Plan Coverage
		80	Immunizations
80	Immunizations	80	Immunizations
		30	Health Benefit Plan Coverage
		CO	Flu Vaccination
81	Routine Physical	81	Routine Physical
		5	Diagnostic Lab
		30	Health Benefit Plan Coverage
		98	Professional (Physician) Visit - Office
		BT	Gynecological
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
82	Family Planning	2	Surgical
		30	Health Benefit Plan Coverage
		81	Routine Physical

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		82	Family Planning
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		BT	Gynecological
		BY	Physician Office Visit: Sick
83	Infertility	83	Infertility
		30	Health Benefit Plan Coverage
		61	In-vitro Fertilization
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		92	Generic Prescription Drug
		BY	Physician Office Visit: Sick
84	Abortion	84	Abortion
		7	Anesthesia
		13	Ambulatory Service Center Facility
		30	Health Benefit Plan Coverage
		50	Hospital - Outpatient
85	AIDS	85	Aids
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Office Visit
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
86	Emergency Services	86	Emergency Services
		30	Health Benefit Plan Coverage
		51	Hospital - Emergency Accident
		52	Hospital - Emergency Medical
		57	Air Transportation
		59	Licensed Ambulance

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		86	Emergency Services
		98	Professional (Physician) Visit - Office
		BY	Physician Office Visit: Sick
		UC	Urgent Care
88	Pharmacy	88	Pharmacy Level Benefits, Injectable Drugs, Chemotherapy (Antineoplastics) for Cancer, Weight Loss Drugs, Lifestyle & Disease Mgt. Drugs, Specialty Drugs
		30	Health Benefit Plan Coverage
		90	Mail Order Prescription Drug
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		91	Brand Name Prescription Drugs, Non-Preferred Brand Name Drugs, Non-Preferred Brand Name Drugs - (Non-Maintenance, Maintenance), Brand Name Drugs - (Non-Maintenance, Maintenance), Non-generic Products
		92	Generic Prescription Drugs -
89	Free Standing Prescription Drug	89	Free Standing Prescription Drug
		30	Health Benefit Plan Coverage
		88	Pharmacy Level Benefits, Injectable Drugs, Chemotherapy (Antineoplastics) for Cancer, Weight Loss Drugs, Lifestyle & Disease Mgt. Drugs, Specialty Drugs
		91	Brand Name Prescription Drugs, Non-Preferred Brand Name Drugs - (Non-Maintenance, Maintenance), Brand Name Drugs - (Non-Maintenance, Maintenance), Non-generic Products
		92	Generic Prescription Drugs - (Non-Maintenance, Maintenance), Generic Products
90	Mail Order Prescription Drug	90	Mail Order Prescription Drug Mail Order Brand Name Drugs, Generic Drugs, Non-Preferred Brand Name Drugs, Prescription Drug, Nicotine Replacement Therapy, Glucometer, Diabetic Supplies - (Generic, Brand Name, Non-Preferred Brand Name), Non-Preferred Brand Name Drugs - (Non-Maintenance, Maintenance), Brand Name Drugs - (Non-Maintenance, Maintenance), Generic Drugs - (Non-Maintenance, Maintenance), Infertility - (Generic Drugs, Brand Name Drugs, Non-Preferred Brand Name Drugs, Injectable - (Generic Drugs - Non-Maintenance, Maintenance), Injectable - (Brand Name Drugs - Non-Maintenance, Maintenance), Injectable - Non-Preferred Brand Name Drugs (Non-Maintenance, Maintenance), Chemotherapy for Cancer - (Generic Drugs, Brand Name Drugs, Non-Preferred Brand Name Drugs), Generic Products,

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			Non-generic Products
		30	Health Benefit Plan Coverage
91	Brand Name Prescription Drug	91	Brand Name Prescription Drug
		30	Health Benefit Plan Coverage
		88	Pharmacy
270 REQUEST		271 RESPONSE	
EQ01	Service Description	EB03	Service Type Benefits Returned
Service Type Requested		Service Type Response	
92	Generic Prescription Drug	92	Generic Prescription Drugs, Infertility - Generic Drugs, Nicotine Replacement Therapy - Generic Drugs, Diabetic Supplies - Generic, Contraceptive Devices - Generic, Generic Drugs - Non-Maintenance, Generic Drugs - Maintenance, Oral Contraceptives - Generic Drugs, Erectile Dysfunction - Generic Drugs, Injectable - Generic Drugs - Non-Maintenance, Injectable - Generic Drugs - Maintenance, Chemotherapy (Antineoplastics) for Cancer - Generic Drugs, Generic Products
		30	Health Benefit Plan Coverage
93	Podiatry	93	Podiatry
		30	Health Benefit Plan Coverage
		94	Podiatry - Office Services Routine Foot Care - Office Visit, Non-Routine Foot Care - Office Visit
		BY	Physician Office Visit: Sick
94	Podiatry - Office Visits	94	Podiatry- Office Services Routine Foot Care - Office Visit, Non-Routine Foot Care - Office Visit
		30	Health Benefit Plan Coverage
		BY	Physician Office Visit: Sick
95	Podiatry – Nursing Home Visits	95	Podiatry – Nursing Home Visits
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care

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		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit-Office
		AL	Vision (Optometry)
		BY	Physician Office Visit-Sick
		BZ	Physician Office Visit-Well
		MH	Mental Health
		UC	Urgent Care
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
96	Professional Physician	96	Professional (Physician)
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit-Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
97	Anesthesiologist	97	Anesthesiologist
		7	Anesthesia
		30	Health Benefit Plan Coverage
		BY	Physician Office Visit: Sick
98	Professional (Physician) Visit Office	98	Professional (Physician) Visit –Office Primary Care Physician Office Visit, Office Visit, Hospital Based Clinic Visit, Hospital Based Pediatric Clinic Visit, Minute Clinic, Nutritional Counseling Visit, Diabetes Education

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		30	Health Benefit Plan Coverage
		BY	Physician Office Visit-Sick
		BZ	Physician Office Visit-Well
		UC	Urgent Care
99	Professional (Physician) Visit Inpatient	99	Professional (Physician) Visit- Inpatient
		30	Benefit Health Plan Coverage
A0	Professional (Physician) Visit Outpatient	A0	Professional (Physician) Visit - Outpatient
		98	Professional (Physician) Visit –Office Hospital Based Clinic Visit, Hospital Based Pediatric Clinic Visit
		30	Health Benefit Plan Coverage
270 REQUEST		271 RESPONSE	
EQ01	Service Description	EB03	Service Type Benefits Returned
Service Type Requested		Service Type Response	
		BY	Physician Office Visit: Well
A1	Professional(Physician) Visit-Nursing Home	A1	Professional (Physician) Visit-Nursing Home
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit-Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
A2	Professional (Physician) Visit-Skilled Nursing Facility	A2	Professional (Physician) Visit-Skilled Nursing Facility
		1	Medical Care
		30	Health Benefit Plan Coverage

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		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit-Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
A3	Professional (Physician) Visit Home	A3	Professional (Physician) Visit - Home
270 REQUEST		271 RESPONSE	
EQ01	Service Description	EB03	Service Type Benefits Returned
Service Type Requested		Service Type Response	
		30	Health Benefit Plan Coverage
		98	Professional (Physician) Visit –Office
		BY	Physician Office Visit: Sick
A4	Psychiatric	A4	Psychiatric
		30	Health Benefit Plan Coverage
		A7	Psychiatric- Inpatient
		A8	Psychiatric- Outpatient, Individual Sessions, Group Sessions, Medication Visits, Intensive Outpatient Program, Adult Intensive Services, Child Family Intensive Treatment
		BB	Partial Hospitalization (Psychiatric)
		CE	Mental Health Provider - Inpatient
		CF	Mental Health Provider - Outpatient
		CG	Mental Health Facility - Inpatient
		CH	Mental Health Facility - Outpatient
		MH	Mental Health
A5	Psychiatric - Room and Board	A5	Psychiatric- Room and Board
		30	Health Benefit Plan Coverage
		A7	Psychiatric- Inpatient
		CE	Mental Health Provider-Inpatient
		CG	Mental Health Facility-Inpatient
A6	Psychotherapy	A6	Psychotherapy
		30	Health Benefit Plan Coverage

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		A7	Psychiatric- Inpatient
		A8	Psychiatric- Outpatient, Individual Sessions, Group Sessions
		CE	Mental Health Provider - Inpatient
		CF	Mental Health Provider - Outpatient
		CG	Mental Health Facility - Inpatient
A7	Psychiatric Inpatient	A7	Mental Health - Inpatient
		30	Health Benefit Plan Coverage
		99	Professional (Physician) Visit- Inpatient
		A6	Psychotherapy
		CE	Mental Health Provider - Inpatient
		CG	Mental Health Facility – Inpatient

270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
A8	Psychiatric Outpatient	A8	Mental Health - Outpatient, Individual Sessions, Group Sessions, Medication Visits, Intensive Outpatient Program, Adult Intensive Services, Child Family Intensive Treatment
		9	Other Medical
		30	Health Benefit Plan Coverage
		A6	Psychotherapy
		BB	Partial Hospitalization (Psychiatric)
		CF	Mental Health Provider - Outpatient
		CH	
		MH	
A9	Rehabilitation	A9	Rehabilitation
		30	Health Benefit Plan Coverage
		99	Professional (Physician) Visit- Inpatient
		AB	Rehabilitation - Inpatient
		AD	Occupational Therapy - Following Admission, Occupational Therapy (Home)
		AE	Physical Medicine
		AF	Speech Therapy, Speech Therapy (Home)
		PT	Physical Therapy
AA	Rehabilitation - Room and Board	AA	Rehabilitation - Room and Board
		30	Health Benefit Plan Coverage

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		AB	Rehabilitation - Inpatient
AB	AB Rehabilitation - Inpatient	AB	Rehabilitation - Inpatient
		30	Health Benefit Plan Coverage
AC	Rehabilitation - Outpatient	AC	Rehabilitation - Outpatient
		30	Health Benefit Plan Coverage
		AD	Occupational Therapy
		AE	Physical Medicine
		AF	Speech Therapy
		PT	Physical Therapy
AD	Occupational Therapy	AD	Occupational Therapy - Following Admission, Occupational Therapy (Home)
		9	Other Medical
		30	Health Benefit Plan Coverage
AE	Physical Medicine	AE	Physical Therapy - Following Admission, Physical Therapy (Home)
		9	Other Medical
		30	Health Benefit Plan Coverage
		PT	Physical Therapy
AF	Speech Therapy	AF	Speech Therapy (Home)
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		9	Other Medical
		30	Health Benefit Plan Coverage
AG	Skilled Nursing Care	AG	Skilled Nursing Care
		30	Health Benefit Plan Coverage
AH	Skilled Nursing Care - Room and Board	AH	Skilled Nursing Care - Room and Board
		30	Health Benefit Plan Coverage
		AG	Skilled Nursing Care
AI	Substance Abuse	AI	Substance Abuse--Chemical Dependency- Inpatient Rehabilitation, Partial Hospitalization Program, Inpatient Detoxification, Individual Sessions, Group Sessions, Intensive Outpatient Program, Inpatient, Outpatient
		30	Health Benefit Plan Coverage
		CI	Substance Abuse Facility - Inpatient
		CJ	Substance Abuse Facility - Outpatient
AJ	Alcoholism	AJ	Alcoholism
		30	Health Benefit Plan Coverage
		AI	Substance Abuse--Chemical Dependency-

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			Inpatient Rehabilitation, Partial Hospitalization Program, Inpatient Detoxification, Individual Sessions, Group Sessions, Intensive Outpatient Program, Inpatient, Outpatient
		CI	Substance Abuse Facility - Inpatient
		CJ	Substance Abuse Facility - Outpatient
AK	Drug Addiction	AK	Drug Addiction
		30	Health Benefit Plan Coverage
		AI	Substance Abuse--Chemical Dependency - Inpatient Rehabilitation, Inpatient Detoxification, Individual Sessions, Group Sessions, Inpatient, Outpatient
		CI	Substance Abuse Facility - Inpatient
		CJ	Substance Abuse Facility - Outpatient
AL	Vision (Optometry)	AL	Vision (Optometry) Non-routine Vision Care Visits,
		30	Health Benefit Plan Coverage
		AM	Frames
		AN	Routine Eye Exam
		AO	Lenses
AM	Frames	AM	Frames
		30	Health Benefit Plan Coverage
AN	Routine Exam	AN	Routine Exam
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		30	Health Benefit Plan Coverage
		AL	Vision (Optometry)
AO	Lenses	AO	Lenses - Single Vision, Bifocal (Single), Bifocal (Double), Trifocal, Aphakic Lenses - Glass, Plastic, Aspheric, Case Hardening, Contact Lenses
		30	Health Benefit Plan Coverage
AQ	Non-medically Necessary Physical	AQ	Non-Medically Necessary Physical
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical

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		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
AR	Experimental Drug Therapy	AR	Experimental Drug Therapy, Experimental Drug Therapy - for Cancer
		30	Health Benefit Plan Coverage
BA	Independent Medical Evaluation	BA	Independent Medical Evaluation
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
BB	Partial Hospitalization (Psychiatric)	BB	Partial Hospitalization (Psychiatric)
		30	Health Benefit Plan Coverage
		CH	Mental Health Facility - Outpatient
BC	Day Care (Psychiatric)	BC	Day Care (Mental Health)
		30	Health Benefit Plan Coverage

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		BB	Partial Hospitalization (Psychiatric)
		CH	Mental Health Facility - Outpatient
		A8	Psychiatric –Outpatient - Intensive Outpatient Program, Adult Intensive Services, Child Family Intensive Treatment
BD	Cognitive Therapy	BD	Cognitive Therapy
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
BE	Massage Therapy	BE	Massage Therapy
		1	Medical Care
		30	Health Benefit Plan Coverage
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care

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BF	Pulmonary Rehabilitation	BF	Pulmonary Rehabilitation
		30	Health Benefit Plan Coverage
		72	Inhalation Therapy
BG	Cardiac Rehabilitation	BG	Cardiac Rehabilitation
		30	Health Benefit Plan Coverage
BH	Pediatric	BH	Pediatric
		5	Diagnostic Lab Lead Screening
		30	Health Benefit Plan Coverage
		68	Well Baby Care
		80	Immunizations - Pediatric
		BZ	Physician Office Visit: Well
BI	Nursery	65	Newborn Care
		30	Health Benefit Plan Coverage
		BI	Nursery
BJ	Skin	BJ	Skin
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
270 REQUEST		271 RESPONSE	
EQ01	<u>Service Description</u>	EB03	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
BK	Orthopedic	BK	Orthopedic
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital

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		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
BL	Cardiac	BL	Cardiac
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
BM	Lymphatic	BM	Lymphatic
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy

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		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
BN	Gastrointestinal	BN	Gastrointestinal
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
BP	Endocrine	BP	Endocrine
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health

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		UC	Urgent Care
BQ	Neurology	BQ	Neurology
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
BR	Eye	BR	Eye
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
BS	Invasive Procedures	BS	Invasive Procedures
		1	Medical Care
		30	Health Benefit Plan Coverage

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		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
B1	Burn Care	B1	Burn Care
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
B2	Brand Name Prescription Drug Formulary	B2	Brand Name Prescription Drug - Formulary
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care

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		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
B3	Brand Name Prescription Drug Non-Formulary	B3	Brand Name Prescription Drug – Non- Formulary
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
BT	Gynecological	2	Surgical
		5	Diagnostic Lab
		30	Health Benefit Plan Coverage
		81	Routine Physical
		82	Family Planning
		83	Infertility
270 REQUEST		271 RESPONSE	
EQ01	Service Description	EB03	Service Type Benefits Returned
Service Type Requested		Service Type Response	
		88	Pharmacy
		91	Brand Name Prescription Drugs
		92	Generic Prescription Drug
		98	Professional (Physician) Visit –Office

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		BT	Gynecological
		BY	Physician Office Visit: Sick
BU	Obstetrical	69	Maternity
		30	Health Benefit Plan Coverage
		BU	Obstetrical
		BY	Physician Office Visit: Sick
BV	Obstetrical / Gynecological	5	Diagnostic Lab
		7	Anesthesia
		13	Ambulatory Service Center Facility Center
		30	Health Benefit Plan Coverage
		50	Hospital Outpatient
		69	Maternity
		81	Routine Physical
		83	Infertility
		84	Abortion
		88	Pharmacy
		91	Brand Name Prescription Drugs
		92	Generic Prescription Drug
		BT	Gynecological
		BU	Obstetrical
		BV	Obstetrical/Gynecological
		BY	Physician Office Visit: Sick
BW	Mail Order Prescription Drug Brand Name	BW	Mail Order Prescription Drug – Brand Name
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well

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		MH	Mental Health
		UC	Urgent Care
BX	Mail Order Prescription Drug Generic	BX	Mail Order Prescription Drug - Generic
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
BY	Physician Visit – Office: Sick	3	Consultation
		30	Health Benefit Plan Coverage
		33	Chiropractic
		34	Chiropractic Office Visits
		81	Routine Physical
		98	Professional (Physician) Visit –Office
		99	Professional (Physician) Visit – Inpatient
		A0	Professional (Physician) Visit - Outpatient
		A3	Professional (Physician) Visit - Home
		BT	Gynecological
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		UC	Urgent Care

270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	

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BZ	Physician Visit – Office: Well	5	Diagnostic Lab
		30	Health Benefit Plan Coverage
		68	Well Baby Care
		81	Routine Physical
		98	Professional (Physician) Visit –Office
		BT	Gynecological
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
C1	Coronary Care	C1	Coronary Care
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
CA	Private Duty Nursing - Inpatient	CA	Private Duty Nursing - Inpatient
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
270 REQUEST		271 RESPONSE	
EQ01	Service	EB03	Service Type Benefits Returned

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<u>Service Type Requested</u>	<u>Description</u>	<u>Service Type Response</u>	
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
CB	Private Duty Nursing – Home	CB	Private Duty Nursing - Home
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit: Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
CC	Surgical Benefits Professional (Physician)	CC	Surgical Benefits Professional (Physician)
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
270 REQUEST		271 RESPONSE	

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EQ01	<u>Service Description</u>	EB03	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
CD	Surgical Benefits Facility	CD	Surgical Benefits Facility
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
	UC	Urgent Care	
CE	Mental Health Provider - Inpatient	99	Professional (Physician) Visit – Inpatient
		30	Health Benefit Plan Coverage
		A5	Psychiatric Room and Board
		A6	Psychotherapy
		A7	Psychiatric Inpatient
		CE	Mental Health Provider - Inpatient
	CG	Mental Health Facility - Inpatient	
CF	Mental Health Provider - Outpatient	9	Other Medical
		30	Health Benefit Plan Coverage
		A6	Psychotherapy
		A8	Mental Health - Outpatient, Individual Sessions, Group Sessions, Medication Visits, Intensive Outpatient Program, Adult Intensive Services, Child Family Intensive Treatment
		BB	Partial Hospitalization (Psychiatric)
		CF	Mental Health Provider- Outpatient
		CH	Mental Health Facility - Outpatient
		MH	Mental Health
CG	Mental Health Facility - Inpatient	99	Professional (Physician) Visit – Inpatient

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		30	Health Benefit Plan Coverage
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		A5	Psychiatric Room and Board
		A6	Psychotherapy
		A7	Psychiatric Inpatient
		BB	Partial Hospitalization (Psychiatric)
		CE	Mental Health Provider - Inpatient
		CG	Mental Health Facility - Inpatient
		CH	Mental Health Facility - Outpatient
CH	Mental Health Facility - Outpatient	BB	Partial Hospitalization (Psychiatric)
		30	Health Benefit Plan Coverage
		A6	Psychotherapy
		A8	Mental Health - Outpatient, Individual Sessions, Group Sessions, Medication Visits, Intensive Outpatient Program, Adult Intensive Services, Child Family Intensive Treatment
		9	Other Medical
		CF	Mental Health Provider - Outpatient
		CH	Mental Health Facility - Outpatient
		MH	Mental Health
CI	Substance Abuse Facility- Inpatient	AI	Substance Abuse
		30	Health Benefit Plan Coverage
		CI	Substance Abuse Facility - Inpatient
		CJ	Substance Abuse Facility - Outpatient
CJ	Substance Abuse Facility - Outpatient	AJ	Substance Abuse
		30	Health Benefit Plan Coverage
		AI	Substance Abuse
		CI	Substance Abuse Facility - Inpatient
		CJ	Substance Abuse Facility - Outpatient
CK	Screening X-ray	4	Diagnostic X-ray
		5	Diagnostic Lab
		30	Health Benefit Plan Coverage
		62	MRI/CAT Scan
		CK	Screening X-Ray
		CN	Mammogram, Low Risk Patient

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CL	Screening Laboratory	5	Diagnostic Lab
		30	Health Benefit Plan Coverage
		BT	Gynecological
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		CL	Screening Laboratory
CM	Mammogram, High Risk Patient	4	Diagnostic X-ray
		5	Diagnostic Lab
		30	Health Benefit Plan Coverage
		62	MRI/CAT Scan
		CK	Screening X-Ray
		CM	Mammogram, High Risk Patient
		CN	Mammogram, Low Risk Patient
CN	Mammogram, Low Risk Patient	4	Diagnostic X-ray
		5	Diagnostic Lab
		30	Health Benefit Plan Coverage
		62	MRI/CAT Scan
		CK	Screening X-Ray
		CN	Mammogram, Low Risk Patient
CO	Flu Vaccination	80	Immunization
		30	Health Benefit Plan Coverage
		CO	Flu Vaccination
CP	Eye Wear and Eye Wear Associates	CP	Eye Wear and Eye Wear Associates
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health

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		UC	Urgent Care
CQ	Case Management	CQ	Case Management
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
DG	Dermatology	DG	Dermatology
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
DM	Durable Medical Equipment	11	Used Durable Medical Equipment
		12	Durable Medical Equipment Purchase
		18	Durable Medical Equipment Rental

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		30	Health Benefit Plan Coverage
		75	Prosthetic Device
		DM	Durable Medical Equipment
DS	Diabetic Supplies	DS	Diabetic Supplies
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
GF	Generic Prescription Drug Formulary	GF	Generic Prescription Drug Formulary
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care

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GN	Generic Prescription Drug Non-Formulary	GN	Generic Prescription Drug Non-Formulary
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
270 REQUEST		271 RESPONSE	
EQ01	Service Description	EB03	Service Type Benefits Returned
Service Type Requested		Service Type Response	
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
GY	Allergy	GY	Allergy
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
IC	Intensive Care	IC	Intensive Care
		1	Medical Care
		30	Health Benefit Plan Coverage

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		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
270 REQUEST		271 RESPONSE	
EQ01	Service Description	EB03	Service Type Benefits Returned
Service Type Requested		Service Type Response	
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
MH	Mental Health	9	Other Medical
		30	Health Benefit Plan Coverage
		99	Professional (Physician)Visit - Inpatient
		A6	Psychotherapy
		A7	Psychiatric Inpatient
		A8	Mental Health - Outpatient, Individual Sessions, Group Sessions, Medication Visits, Intensive Outpatient Program, Adult Intensive Services, Child Family Intensive Treatment
		BB	Partial Hospitalization (Psychiatric)
		CE	Mental Health Provider - Inpatient
		CF	Mental Health Provider - Outpatient
		CG	Mental Health Facility - Inpatient
		CH	Mental Health Facility - Outpatient
NI	Neonatal Intensive Care	NI	Neonatal Intensive Care
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy

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		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
ON	Oncology	ON	Oncology
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
PT	Physical Therapy	9	Other Medical
		30	Health Benefit Plan Coverage
		A9	Rehabilitation
		AE	Physical Medicine
		PT	Physical Therapy
PU	Pulmonary	PU	Pulmonary
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy

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		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
RN	Renal	RN	Renal
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
RT	Residential Psychiatric Treatment	RT	Residential Psychiatric Treatment
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick

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		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
TC	Transitional Care	TC	Transitional Care
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
270 REQUEST		271 RESPONSE	
<u>EQ01</u>	<u>Service Description</u>	<u>EB03</u>	<u>Service Type Benefits Returned</u>
<u>Service Type Requested</u>		<u>Service Type Response</u>	
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
TN	Transitional Nursery Care	TN	Transitional Nursery Care
		1	Medical Care
		30	Health Benefit Plan Coverage
		33	Chiropractic
		35	Dental Care
		47	Hospital
		48	Hospital Inpatient
		50	Hospital Outpatient
		52	Hospital Emergency Medical
		86	Emergency Services
		88	Pharmacy
		98	Professional (Physician) Visit - Office
		AL	Vision (Optometry)
		BY	Physician Office Visit : Sick
		BZ	Physician Office Visit: Well
		MH	Mental Health
		UC	Urgent Care
UC	Urgent Care	UC	Urgent Care

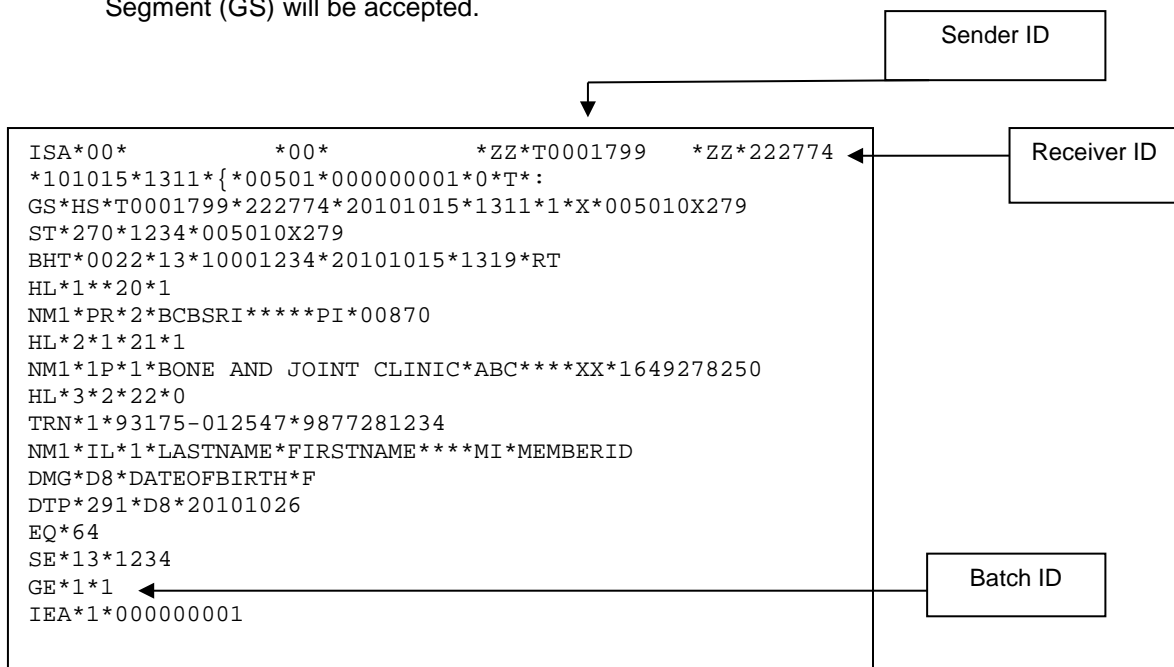
		30	Health Benefit Plan Coverage
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7.4 270 Eligibility Inquiry Submission (Example)

In the following explanation, the prefix "T" signifies "test," and the prefix "P" signifies "production."

As illustrated in the example below:

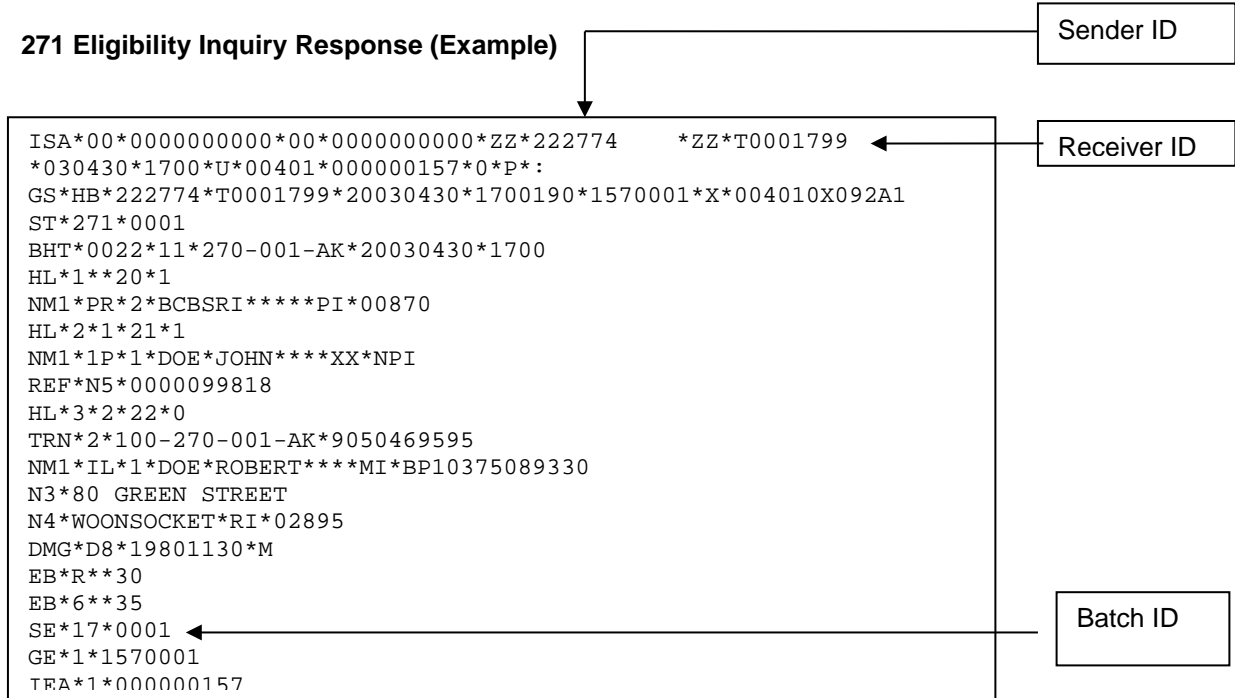
- the ISA Sender ID for Real-Time or batch submissions are **TXXXXXXX or PXXXXXXX**.
- in 270 Real-Time submissions, the GS02 Sender ID is **TRXXXXXX or PRXXXXXX**.
- the Receiver ID for Real-Time is GS **R222774**.
- one Real-Time request within one Transaction Set Header (ST) or one Group Segment (GS) will be accepted.



For Real-Time, the GS segment would appear as follows:

GS*HS*TR001799*222774*20101015*1311*1*X*005010X279

7.5 271 Eligibility Inquiry Response (Example)



When a request is for a non-BCBSRI member, a submitter will receive a 271 transaction indicating the request was forwarded to another entity. If multiple requests are submitted within an ST/SE, the 271 responses from the other entities will be received individually. If Real-Time is indicated, requests will be handled as non Real-Time.

8.0 999 Implementation Acknowledgement

The 999 informs the submitter that the functional group arrived at the destination. It may include information about the syntactical quality of the functional group and the implementation guide compliance.

Level 2 editing will be performed. A 999 would occur if a transaction set resulted in both Level 1 and Level 2 errors. If a Real-Time 270 is received without NPI information, a 271 Real-Time will be returned with **AAA*N**43*C~**. If a 270 Batch file is received without NPI information, the system will return a 999 & Plain Language report detailing the errors.

8.1 999 Implementation Acknowledgement (Rejection/Error)

In the event that a transmission is rejected, a 999 Implementation Acknowledgment (Rejection/Error), detailing the reasons for rejection will be issued for the convenience of the trading partner.

BCBSRI meets all requirements of SNIP, (Strategic National Implementation Process), (HIPAA) Level 4 for all inbound transactions.

Multiple 999s could occur if a transaction set resulted in both Level 1, 2 and/or Level 4 errors.

The following is a **999 Implementation Acknowledgement (Rejection/Error)** sample report:

```
ISA*00*                *00*                *ZZ*222774                *ZZ*U0001799
*101026*1637*{*00501*000000001*0*T*:
GS*FA*222774*U0001799*20101026*1637*1*X*005010X279
ST*999*0001*005010X279
AK1*HS*1*005010X279
AK2*270*1234*005010X279
IK3*DMG*10*2100C*8
IK4*2**2
IK5*R*5
AK9*R*1*1*0
SE*8*0001
GE*1*1
IEA*1*000000001
```

9.0 Certification and Testing

BCBSRI has partnered with Foresight to provide a 24/7 online tool for self-service transaction validation. To use this tool, download the Trading Partner Registration (TPR) form from the www.bcbsri.com Web site. Complete the form and return to the EDI Trading Partner Coordinator at the address given. Upon receipt of this signed TPR, BCBSRI will provide you with a User ID and password allowing you to access the Foresight HIPAA Web site.

10.0 Document Version Control

Version Number	Date	Modified By	Comments/Revision Details
0.1	October 20, 2010	L. Merola	Initial DRAFT
	October 22, 2010	L. Merola	Updating Appendix A for 5010
	October 25, 2010	L. Merola C. Conley D. Santos	DRAFT
	October 27, 2010	L. Merola	Appendix A completed Section 8.1: Inserted 999 sample report
	November 1, 2010	L. Merola	DRAFT: Final
	November 16, 2010	J. Harvey	DRAFT: Final (reviewed/edited formatting)
.1	March 18, 2011	L. DaSilva M. Hegarty	DRAFT: Final (appendix modified)
1.0	April 29, 2011	L. DaSilva M. Hegarty	Published version for 5010 format
1.1	July 1, 2011	M. Hegarty	Updated document for Level 4 (SNIP) editing Section 8.1
1.2	February 15, 2012	D. Santos	Updated section 5.3 connectivity options
1.21	October 27, 2014	D. Santos	Update section 4.1 Help Desk toll free number