Blue Cross & Blue Shield of Rhode Island

834 Health Care Benefit Enrollment and Maintenance Companion Guide

HIPAA version 5010

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This *Companion Guide* may be revised and republished if and when Blue Cross & Blue Shield of Rhode Island makes improvements and/or changes to any referenced product, process or program.

PREFACE

This Companion Guide supplements the ASC X12 834 (005010X220A1) 5010 Technical Report Type 3 (TR3) 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 Technical Reports Type 3 (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).

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 (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 Technical Reports Type 3 (TR3s)* and Errata adhere to the final HIPAA Transaction Regulations and have been established as the standards of compliance for electronic transactions. The *5010 Technical Reports Type 3 (TR3s)* are available electronically at www.wpc-edi.com.

2.0 Scope

This *834 Health Care Benefit Enrollment and Maintenance Companion Guide* is designed for use in conjunction with the *ANSI ASC X12N 834 (005010X220A1) Health Care Benefit Enrollment and Maintenance 5010 Technical Report Type 3 (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 *Technical Report Type 3 (TR3s).*

The table in **Section 7.0** details 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/providers/hipaa-transactions/hipaa-transaction-documents

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 transmission/receipt of 834 Group Enrollment and Maintenance transactions:

Call the Information Technology (IT) Service Desk, which supports BCBSRI, at 401-751-1673 or 1-800-343-5743.

5.0   Payer Connectivity/Communications

5.1 Transmission Administrative Procedures

BCBSRI Operations personnel will establish logons, passwords and a HIPAA transaction mailbox for each trading partner approved for testing.

5.2 Retransmission Procedures

In the event that issues arise requiring trading partners to resubmit transactions, BCBSRI 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 initial communications will utilize Internet browser technology (IP Protocol) to the secure BCBSRI Sterling File Gateway using HTTPS (with certificate) 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 enables trading partners to:

- Submit (send) HIPAA transactions;
- Receive HIPAA transaction responses; and
- View history files (directory) of all transactions sent and received for the past 15 days

5.3.1   Passwords

Trading partner access will be verified by the logon 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, then **HIPAA Transactions,** then **HIPAA Transaction Documents** to view or print *BCBSRI Sterling File Gateway*, a document that provides detailed instructions on how to connect to the BCBSRI Sterling File Gateway. If necessary, also reference the *BCBSRI HTTPS or SFTP documents* 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 Submitter ID provided by BCBSRI in the Trading Partner Agreement 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 Separator Delimiter (ISA 11)**

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:

Functional Identifier Code	GS01	BE
Application's Sender Code	GS02	TXXXXXXX(test) PXXXXXXX(production)
Application's Receivers Code		222774F
Date	GS04	ccyymmdd
Time	GS05	hhmm
Group Control Number	GS06	Required
Responsible Agency Code	GS07	X
Version/Release/Industry Identifier Code	GS08	*005010X220A1*

7.0 BCBSRI Specific Business Rules and Limitations

Models Supported: BCBSRI will process in batch mode only.

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

Invalid Special Characters are: [$ * ; < > ? !]

The following are specific BCBSRI rules applicable to benefit enrollment and maintenance transactions:

Item	Loop ID Segment Description and Element Name	Reference (REF) Designator	HIPAA TR3 Page Number	Comments
1.	**HEADER** Transaction Set Header Beginning Segment Transaction Set Policy Number	ST03 BGN08 REF02	35 35 36	005010X220A1 For Full File send RX or 4, Changes only send 2 Your Master Identification Code will be assigned upon completion of the Trading Partner Agreement.
2.	**1000A – SPONSOR NAME** Identification Code Qualifier Identification Code	N103 N104	40 40	FI = Federal Taxpayer's Identification Number Enter your Federal Taxpayer's Identification Number using the format '99-9999999'. **Failure to provide the Federal Taxpayer's ID in the prescribed format will result in the rejection of the transmission.**
3.	**1000B - PAYER** Identification Code Qualifier Identification Code	N103 N104	42 42	FI = Federal Taxpayer's Identification Number Use **05-0158952**.
4.	**1000C – TPA/BROKER NAME** Identification Code Qualifier Identification Code	N103 N104	44 44	FI = Federal Taxpayer's Identification Number Enter TPA Federal Taxpayer's Identification Number using the format '99-9999999'. **Failure to provide the Federal Taxpayer's ID in the prescribed format will result in the rejection of the transmission.**

Item	Loop ID Segment Description and Element Name	Reference (REF) Designator	HIPAA TR3 Page Number	Comments
5.	**2000 - MEMBER LEVEL DETAIL** Individual Relationship Code	INS02	48	01 = Spouse 05 = Grandson or Granddaughter 09 = Adopted Child 17 = Stepson or Stepdaughter 18 = Self 19 = Child 25 = Ex-spouse 53 = Life Partner Note: When using '53' Life Partner, Domestic partner requires marital status of 'B' Life Partner. Common law requires marital status of 'M' for married.
	Maintenance Type Code	INS03	49	For full-file processing use Codes 030 (adds, changes) and 024 (cancels). 001 = Change 021 = Addition 024 = Cancellation or Termination 030 = Audit or Compare If using '024', must use Maintenance/Termination Reason in INS04 and DTP with Termination Date (349) in 2300 Loop

2000 — MEMBER LEVEL DETAIL			

Maintenance Reason Code	INS04	49	**A Maintenance Reason Codes is required by BCBSRI when processing a termination.** The following Maintenance Reason Codes are used :
			
			    01 Divorce D
			    03 Death D & S
			    04 Retirement S
			    07 Termination of Benefits) D
			    08 Termination of Employment S
			    14 Voluntary Withdrawal S
			    15 Primary Care Provider D & S
			    16 Quit S
			    17 Fired S
			    22 Plan Change (not intended to identify
			        changes to a plan) S
			    26 Declined Coverage S
			    40 Lay Off without Benefits S
			    XN Notification Only S
			
			Note: Where Maintenance Reason Codes are not maintained and a termination is being submitted, default to code **07** for a dependent transaction and code **08** for a subscriber transaction. If a full file, then INS03= 030(ADD /CHG) and INS04=XN default value can be used.

Member Group or Policy Number	REF01 REF02	56 56	1L Group or Policy Number Use this segment when the group number applies to all coverage data. Enter the BCBSRI assigned 8-digit group ID, followed by the 4 digit subgroup #. Group and subgroup IDs must be 12 characters left justified, zero filled. Example group id/sub group of 1226 1, send 000012260001
Member Supplemental Identifier	REF01	57	Use Qualifier '**ZZ**' for Employee ID Use Qualifier '**DX**' for Department ID Use Qualifier'**6O**' for Annuitant SSN Use Qualifier '**23**' for Subscriber ID (Client Number) Use Qualifier '**F6**' for Medicare ID Use Qualifier **'3H'** for Dependent **Numbers(case number#)** Use Qualifier "**17**" for Unique Exchange ID (Client Reporting Category)

2000 – Member Level Detail Member Supplemental Identifier	REF02	58	Send Employee ID (Mutually Defined) Send Department ID when required by contract- **must be 4 digit alpha numeric** Send SSN of Annuitant Send BCBSRI assigned Subscriber ID for Client Number Send Medicare ID Number **Send BCBSRI assigned three digit Dependent Number for Case number** Send Unique Exchange ID – **for Exchange accounts only**	
Date Time Qualifier	DTP01	59	The following Date/Time Qualifier Codes are used: ▪ 303 Maintenance Effective ▪ 336 Employment Begin (optional/subscriber only) ▪ 338 Medicare Begin ▪ 339 Medicare End ▪ 340 Consolidated Omnibus Budget Reconciliation Act (COBRA) Begin ▪ 341 Consolidated Omnibus Budget Reconciliation Act (COBRA) End	

6.	**2100A Member Name**			
	Entity Identifier Code	NM101	62	74 = Corrected Insured ; IL = Insured or Subscriber
	Member Last Name	NM103	63	Maximum 60 characters. BCBSRI will only allow 35 characters in our system. Multiple adjacent spaces are not allowed within name. **Send Mixed Case**
	Member First Name	NM104	63	Maximum 35 characters. BCBSRI will only allow 15 characters in our system. Multiple adjacent spaces are not allowed within name. **Send Mixed Case**
	Member Middle Initial	NM105	63	Maximum 1 character.
	Member Name Suffix	NM107	63	Maximum 3 characters. Titles can only be: II, III, IV, V, JR, SR
	Identification Code Qualifier	NM108	64	34 = Social Security Number
	Member Address Line 1	N301	68	Maximum 55 characters. BCBSRI will only allow 40 characters in our system. First position cannot be '#' (pound sign). Multiple adjacent spaces not allowed. No punctuation characters (ampersand, period, comma, etc.) **Send Mixed Case**
	Member Address Line 2	N302	68	Maximum 55 characters. BCBSRI will only allow 40 characters in our system. First position cannot be '#' (pound sign). Multiple adjacent spaces not allowed. No punctuation characters (ampersand, period, comma, etc.) **Send Mixed Case**

2100A Member Name Subscriber City Name	N401	69	Maximum 30 characters. BCBSRI will only allow 19 characters in our system. Multiple adjacent spaces not allowed. **Send Mixed Case**
State or Province Code	N402	69	Maximum 2 characters.
Postal (Zip) Code	N403	70	Maximum 15-position numeric code. BCBSRI will allow 5 digits in our system.

Marital Status Code	DMG04	72	Required for Subscriber transactions by BCBSRI. Values Accepted by BCBSRI:
			
			    M = Married
			     I = Single
			    D = Divorced
			    W = Widowed
			    S = Separated
			    X = Legally Separated
			    B = Life Partner
			    U = Unmarried

Identification Code Qualifier	LUI01	84	**LE** (Three-letter ISO 639 -2 Language Code)
Language Code	LUI02	85	Required by BCBSRI when BlueCHiP product and the member's language is other than English. Following is a list of the more commonly used Language Codes: **Language** **Code** Arabic ARA Armenian ARM Cambodian KHM Creole CPF French FRE German GER Hmong HMN Hungarian HUN Italian ITA Loa LOA Malayalam MAL Polish POL Portuguese POR Russian RUS Spanish SPA Tamil TAM Vietnamese VIE

7.	**2300 – HEALTH COVERAGE**			
	Maintenance Type Code	HD01	140	BCBSRI uses codes: 001, 021, 024 and 030. For full-file processing, use Codes 030 (adds, changes) and 024 (cancels).
	Insurance Line Code	HD03	141	Use Values: DEN Dental HLT Health PDG Prescription Drug VIS Vision

	Plan Coverage Description	HD04	141	Required by BCBSRI to denote the coverage levels of subscriber and dependent(s).
				
				For Class id enrollment (most employer 834 accounts):
				Enter 4-digit class id - including leading zeroes.
				
				Position 1 - 4 Class id (4) - required
				        5 - 12 blank spaces (8)
				        13 - 16 CDH indicator (4) - if applicable
				        17 - 18 Communication Method (2) - optional
				        19 - 43 Best Time to Contact (25) - optional
				
				HD04 example (Class id):
				HD*0003 IHRAHP01:00 - 04:00 PM
				
				For Product id enrollment (Exchange accounts / new 834 employer accounts):
				Enter 8-digit product id - HD loop required for each product member has selected.
				Position 1 - 4 blank spaces (4)
				        5 - 12 Product id (8) - required
				        13 - 16 CDH indicator (4) - if applicable
				        17 - 18 Communication Method (2) - optional
				        19 - 43 Best Time to Contact (25) - optional
				
				HD04 example (Product id):
				HD* MHD00022IHRACP04PM
				
				Class IDs, Product IDs and CDH indicators will be provided to the Sponsor upon completion of the Trading Partner Agreement (TPA).
				
				Preferred communication Method
				HP Home Phone
				WP Work Phone
				CP Cell phone
				FX Fax
				EM Email
				ML US mail
				Best time to call - Free form 25-digit value example:
				Weeknights after 6:00 PM

Coverage Level Code/ Contract Type	HD05	142	BCBSRI requires Coverage Level Code be reported for all Subscriber and Dependent transactions (ADD, CHG, CNC). IND Individual FAM Family ESP Employee and spouse E1D Employee and 1 child ECH Employee and children
Date/Time Qualifier	DTP01	143	The following Date/Time Qualifier Codes are used: ▪ 303 Maintenance Effective ▪ 348 Benefit Begin ▪ 349 Benefit End (Term date)
Health Coverage Policy Number	REF01	146	Use Qualifier **1L** for Group or Policy Number
2300 – HEALTH COVERAGE Insured Group or Policy Number	REF02	147	**Group** - This segment is use to identify the Group Number for a particular insurance product. (See element HD03 in the 834 TR3.) Required when insurance products (i.e., Lines of Business) have different Group Numbers. Supply this REF02 when using qualifier "1L". **Use the Member Policy Number segment (Loop 2000/ Insured Group Number) when the Group Number applies to all coverage data**. This should be the 8-digit group number followed by the 4-digit subgroup number which includes the leading zeroes.

8.	**2310 — PROVIDER INFORMATION** Assigned Number	LX	152	This Loop is required for BlueCHiP Coordinated Health Plan coverage to report the member's PCP selection.
	Entity Identifier Code	NM101	153	Use **P3.**
	Identification Code Qualifier	NM108	155	Use XX for National Provider Identification Qualifier code.
	Provider Identifier	NM109	155	Enter primary care provider's National Provider Identification number when NM108= XX

8.0 Functional Acknowledgement/Reports

8.1 999 Transaction Acceptance Report

Upon receipt of an 834, BCBSRI will respond with a 999 functional acknowledgement transaction to inform the submitter that the transaction has arrived. The 999 transaction may include information regarding the syntactical quality of the 834 transmission, or the extent to which the syntax complies with the standards for transaction sets and functional groups.

```
ISA*00*      *00*      *ZZ*222774F      *ZZ*U0001799
*101129*2248*;*00501*000000001*0*P*:
GS*FA*222774F*U0001799*20101129*2248*1*X*005010X220A1
ST*999*0001*005010X220
AK1*BE*100000611*005010X220A1
AK2*834*000000013*005010X220A1
IK5*A
AK9*A*1*1*1
SE*6*0001
GE*1*1
IEA*1*000000001
```

8.2 999 Plain Language Report (Acceptance)

A plain language report confirming the acceptance of a transmission will be issued for the convenience of the trading partner.

```
BLUE CROSS AND BLUE SHIELD OF RHODE ISLAND
PAPERLESS TRANSMISSION ACKNOWLEDGEMENT
FUNCTIONAL ACKNOWLEDGEMENT REPORT
Sender ID Number: 222774F
ISA CTRL#:000027673

FUNCTIONAL GROUP INFORMATION
REPORT DATE-20101110
REPORT TIME-15:00:25
SUBMITTER ID: U0001799
Report ID:-276730001-160051

TRANSACTION INFORMATION
FUNCTIONAL GROUP CONTROL #: 160051
NUMBER OF INCLUDED TRANSACTION SETS: 1
NUMBER OF RECEIVED TRANSACTION SETS: 1
NUMBER OF ACCEPTED TRANSACTION SETS: 1
```

8.3 999 Plain Language Report (Rejection/Error)

In the event that a transmission is rejected, a plain language report detailing the reasons for rejection will be issued for the convenience of the trading partner. This is a 999 Rejection Report converted to plain language. The following is a sample report:

```
        BLUE CROSS AND BLUE SHIELD OF RHODE ISLAND
        PAPERLESS TRANSMISSION ACKNOWLEDGEMENT
        FUNCTIONAL ACKNOWLEDGEMENT REPORT
        Sender ID Number: 222774F
        ISA CTRL#:000027692

        FUNCTIONAL GROUP INFORMATION
        REPORT DATE-20101123
        REPORT TIME-06:07:59
        SUBMITTER ID: U0001799
        Report ID:-276920001-290791

        TRANSACTION INFORMATION
        FUNCTIONAL GROUP CONTROL #: 290791
        NUMBER OF INCLUDED TRANSACTION SETS: 1
        NUMBER OF RECEIVED TRANSACTION SETS: 1
        NUMBER OF ACCEPTED TRANSACTION SETS: 0

        TRANSACTION SET INFORMATION
        TRANSACTION SET CONTROL #: 000000001
        TRANSACTION SET ACKNOWLEDGEMENT STATUS: R
        TRANSACTION SET ERROR REASON: One or More Segments is in Error

        DATA SEGMENT(S) IN ERROR
         ERROR NUMBER:  1
         DATA SEGMENT ERROR: SEGMENT HAS DATA ELEMENT ERRORS
          ANSI LOOP ID:
         POSITION WITHIN TRANSACTION SET: 57
         BAD SEGMENT: NM1
        DATA ELEMENT(S) IN ERROR
         POSITION IN SEGMENT: 3
         DATA ELEMENT ERROR CODE: MANDATORY DATA ELEMENT MISSING
         BAD DATA ELEMENT:
```

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 (Phase1 Testing).

10.0 Document Version Control

Version Number	Date	Modified By	Comments/Revision Details
0.1	December 1, 2010	G. Ruggiero D. Santos M. Hegarty	Made changes for HIPAA 5010 Draft version
1.0	April 29. 2011	G. Ruggiero D. Santos M. Hegarty	Made changes for HIPAA 5010 Published
1.1	August 16, 2011	D. Santos	Clarification for Cancel Records on Full Files.
1.2	December 22, 2011	D.Santos	Updated GS02, Section 6.2
1.3	February 16, 2012	D.Santos	Updated Section 5.3 connectivity options Updated Section 7.0 to clarify Mixed Case
1.4	April 3, 2012	D.Santos	Updated Section 7.0 Marital Status codes
1.5	July 13, 2012	D.Santos	Updated document for Current processing system.
1.6	July 1, 2013	G. Ruggiero	Updated document with more current information.
1.7	August 12, 2014	G. Ruggiero	Made changes to the 2000 and 2300 loop, REF segments.
2.0	October 16, 2014	G. Ruggiero M. Angell	New version for Private Exchange
2.1	July 7, 2015	G. Ruggiero	Combining class and product id into one companion guide