| CMS Manual System |  <br> Human Services (DHHS) |
| :--- | :--- |
| Pub 100-20 One-Time Notification |  <br> Medicaid Services (CMS) |
| Transmittal 656 | Date: March 19, 2010 |
|  | Change Request 6849 |

SUBJECT: Health Insurance Portability and Accountability Act (HIPAA) 005010837 Institutional (837I) Edits and 005010837 Professional (837P) Edits - July Version
I. SUMMARY OF CHANGES: The purpose of this Change Request is to provide the July 2010 updated edits spreadsheets to specific Part A and Part B (A/B) MACs which are, as of this time, in a position to implement 005010, specifically the following Jurisdictions: J1, J3, J4, J5, J9, J10, J12, J13, and J14, as well as the Common Electronic Data Interchange contractor.

## EFFECTIVE DATE: July 1, 2010 <br> IMPLEMENTATION DATE: July 6, 2010

Disclaimer for manual changes only: The revision date and transmittal number apply only to red italicized material. Any other material was previously published and remains unchanged. However, if this revision contains a table of contents, you will receive the new/revised information only, and not the entire table of contents.
II. CHANGES IN MANUAL INSTRUCTIONS: (N/A if manual is not updated)

R=REVISED, $\mathrm{N}=\mathrm{NEW}, \mathrm{D}=\mathrm{DELETED}$.

| R/N/D | CHAPTER / SECTION / SUBSECTION / TITLE |
| :--- | :--- |
| N/A |  |

## III. FUNDING:

For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs) and/or Carriers: N/A

## For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

## IV. ATTACHMENTS:

## One-Time Notification

*Unless otherwise specified, the effective date is the date of service.

# Attachment - One-Time Notification 

| Pub. 100-20 | Transmittal: 656 | Date: March 19, 2010 | Change Request: 6849 |
| :--- | :--- | :--- | :--- |

## SUBJECT: Health Insurance Portability and Accountability Act (HIPAA) 005010837 Institutional (837I) Edits and 005010837 Professional (837P) Edits - July Version

Effective Date: July 1, 2010

Implementation Date: July 6, 2010

## I. GENERAL INFORMATION

A. Background: The purpose of this change request Change Request (CR) is to provide the July 2010 updated edits spreadsheets to specific Part A and Part B (A/B) MACs which are, as of this time, in a position to implement 005010, specifically the following Jurisdictions: J1, J3, J4, J5, J9, J10, J12, J13, and J14, as well as the Common Electronic Data Interchange (CEDI) contractor. Other MACs, not currently in a position to implement 005010, shall provide level of effort estimates only if they will be in a position to become 5010 operational prior to the effective date of this CR. A/B MACs currently in Corrective Action Plan or under a protest condition need not reply to this CR at this time. A future CR will address these MAC jurisdictions. Additionally, this CR directs Shared Systems and CEDI to implement the Common Edits Module (CEM) which will reside at the Local Data Center via the attached updated edits spreadsheets.

The July 2010 edits spreadsheets have been modified from previous versions. The worksheets tabs for "balancing" and "style sheet" have been removed from this version. The balancing edits have been incorporated into the body of the edit spreadsheet. The style sheet has been replaced with an "edit rule" worksheet tab. This new worksheet tab provides clarification of the guiding principles of the document as well as the details that users will need to know to understand how to use the edits document.

Contractors and shared systems maintainers shall use the attached edits spreadsheets as replacements for the original edits spreadsheets distributed with CRs $6475,6476,6610,6611$, and 6676 . Contractors are not required to replicate work already done, but are only expected to use the updates to the spreadsheets to build upon their core deliverables from the above listed CRs. Contractors will find a detailed list of the spreadsheet changes in the "change log" worksheet tab.

Estimates for this CR should include a breakdown as part of the Level of Effort response, utilizing the following table to be included in the "Estimate-Specific Comments" portion of the LOE template, to follow the Investment Lifecycle Phases.

| Investment Lifecycle Phase | Total Hours | Total Cost |
| :--- | :--- | :--- |
| Pre-Implementation/CR Review |  |  |
| Design \& Engineering Phase |  |  |
| Development Phase |  |  |
| Testing Phase |  |  |
| Implementation Phase |  |  |

NOTE: The Pre-Implementation/CR Review costs will not be funded under the unique funding situation for the 5010/D. 0 project, but instead out of the MAC's pot of hours for Pre-Implementation/CR Review.

The CMS expects to implement ASC X12 version 005010 transaction over multiple releases. The intent is for CMS to be ready to exchange ASC X12 version 005010 transactions after December 31, 2010. During the
transition period, CMS expects to exchange HIPAA test and production transactions in both 004010A1 and 005010 versions.
B. Policy: The Administrative Simplification provisions of HIPAA require the Secretary of DHHS to adopt standard electronic transactions and code sets for administrative health care transactions. The Secretary may also modify these standards periodically.

## II. BUSINESS REQUIREMENTS TABLE



## III. PROVIDER EDUCATION TABLE

| Number | Requirement | Responsibility (place an " X " in each applicable column) |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  | $\begin{aligned} & \hline \mathrm{A} \\ & 1 \\ & \mathrm{~B} \\ & \\ & \mathrm{M} \\ & \mathrm{~A} \\ & \mathrm{C} \\ & \hline \end{aligned}$ | $\begin{gathered} \hline \mathrm{D} \\ \mathrm{M} \\ \mathrm{E} \\ \mathrm{M} \\ \mathrm{~A} \\ \mathrm{C} \\ \hline \end{gathered}$ | I | C <br> A <br> R <br> R <br> R <br> I <br>  <br> E <br> R | $\begin{gathered} \mathrm{R} \\ \mathrm{H} \\ \mathrm{H} \\ \mathrm{I} \end{gathered}$ | Shared-System Maintainers |  |  |  | OTHER |
|  |  |  |  |  |  |  | $\mathrm{F}$ | $\mathrm{M}$ | $\begin{aligned} & \mathrm{V} \\ & \mathrm{M} \end{aligned}$ | C |  |
|  |  |  |  |  |  |  | $\begin{aligned} & 1 \\ & \mathrm{~S} \end{aligned}$ | S | S | F |  |
|  |  |  |  |  |  |  | S |  |  |  |  |
|  | None. |  |  |  |  |  |  |  |  |  |  |

## IV. SUPPORTING INFORMATION

Section A: for any recommendations and supporting information associated with listed requirements, use the box below:

| X-Ref <br> Requireme <br> nt <br> Number | Recommendations or other supporting information: |
| :--- | :--- |
|  |  |

Section B: For all other recommendations and supporting information, use this space:
The attached July version of the 837i and 837p edits spreadsheets are a result of an extensive edit consistency review along with incorporating appropriate POC comments previously received.

## V. CONTACTS

Pre-Implementation Contact(s): Matt Klischer, Matthew.Klischer@cms.hhs.gov, 410.786.7488
Brian Reitz, Brian.Reitz@cms.hhs.gov, 410.786.5001
Post-Implementation Contact(s): Matt Klischer, Matthew.Klischer@cms.hhs.gov, 410.786.7488
Brian Reitz, Brian.Reitz@cms.hhs.gov, 410.786.5001

## VI. FUNDING

Section A: For Fiscal Intermediaries (FIs), Regional Home Health Intermediaries (RHHIs), and/or Carriers:

## N/A

## Section B: For Medicare Administrative Contractors (MACs):

The Medicare Administrative Contractor is hereby advised that this constitutes technical direction as defined in your contract. CMS does not construe this as a change to the MAC Statement of Work. The contractor is not obligated to incur costs in excess of the amounts allotted in your contract unless and until specifically authorized by the Contracting Officer. If the contractor considers anything provided, as described above, to be outside the current scope of work, the contractor shall withhold performance on the part(s) in question and immediately notify the Contracting Officer, in writing or by e-mail, and request formal directions regarding continued performance requirements.

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ISA | INTERCHANGE CONTROL HEADER |  | 1 | R |  | 1 |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | ISA must be present. |
| ISA |  |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | Only one iteration of ISA is allowed. |
| ISA01 | Authorization Information Qualifier | ID | 2-2 | R |  |  | 00, 03 | TA1 | R | TA105: 010 "Invalid Authorization Information Qualifier Value". | ISA01 must be present. |
| ISA01 |  |  |  |  |  |  |  | TA1 | R | TA105: 010 "Invalid Authorization Information Qualifier Value". | ISA01 must be valid values. |
| ISA02 | Authorization Information | AN | 10-10 | R |  |  |  | TA1 | R | TA105: 011 "Invalid Authorization Information Value". | ISA02 must be present. |
| ISA02 |  |  |  |  |  |  |  | TA1 | R | TA105: 011 "Invalid Authorization Information Value". | ISA02 must be 10 characters. |
| ISA02 |  |  |  |  |  |  |  | TA1 | R | TA105: 011 "Invalid Authorization Information Value". | ISA02 must be populated with accepted AN characters. |
| ISA03 | Security Information Qualifier | ID | 2-2 | R |  |  | 00, 01 | TA1 | R | TA105: 012 "Security Information Qualifier Value". | ISA03 must be present. |
| ISA03 |  |  |  |  |  |  |  | TA1 | R | TA105: 012 "Security Information Qualifier Value". | ISA03 must be valid values. |
| ISA04 | Security Information | AN | 10-10 | R |  |  |  | TA1 | R | TA105: 013 "Security Information Value". | ISA04 must be present. |
| ISA04 |  |  |  |  |  |  |  | TA1 | R | TA105: 013 "Security Information Value". | ISA04 must be 10 characters. |
| ISA04 |  |  |  |  |  |  |  | TA1 | R | TA105: 013 "Security Information Value". | ISA04 must be populated with accepted AN characters. |
| ISA05 | Interchange ID Qualifier | ID | 2-2 | R |  |  | $\begin{gathered} \hline 01,14,20,27,28, \\ 29,30,33, \mathrm{zz} \\ \hline \end{gathered}$ | TA1 | R | TA105: 005 "Invalid Interchange ID Qualifier for Sender". | ISA05 must be present. |
| ISA05 |  |  |  |  |  |  |  | TA1 | R | TA105: 005 "Invalid Interchange ID Qualifier for Sender". | ISA05 must be "27", "28" or "ZZ". |
| ISA06 | Interchange Sender ID | AN | 15-15 | R |  |  |  | TA1 | R | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must be present. |
| ISA06 |  |  |  |  |  |  |  | TA1 | R | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must be 15 characters. |
| ISA06 |  |  |  |  |  |  |  | TA1 | R | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must contain at least one non-space character. |
| ISA06 |  |  |  |  |  |  |  | TA1 | R | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must be populated with accepted AN characters. |
| ISA07 | Interchange ID Qualifier | ID | 2-2 | R |  |  | $\begin{gathered} \hline 01,14,20,27,28, \\ 29,30,33, \mathrm{zz} \\ \hline \end{gathered}$ | TA1 | R | TA105: 007 "Invalid Interchange ID Qualifier for Receiver". | ISA07 must be present. |
| ISA07 |  |  |  |  |  |  |  | TA1 | R | TA105: 007 "Invalid Interchange ID Qualifier for Receiver". | ISA07 must be "27", "28" or "ZZ". |
| ISA08 | Interchange Receiver ID | AN | 15-15 | R |  |  |  | TA1 | R | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must be present. |
| ISA08 |  |  |  |  |  |  |  | TA1 | R | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must be 15 characters. |
| ISA08 |  |  |  |  |  |  |  | TA1 | R | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must contain at least one non-space character. |
| ISA08 |  |  |  |  |  |  |  | TA1 | R | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must be populated with accepted AN characters. |
| ISA09 | Interchange Date | DT | 6-6 | R |  |  | YYMMDD | TA1 | R | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be present. |
| ISA09 |  |  |  |  |  |  |  | TA1 | R | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be a valid date in YYMMDD format. |
| ISA09 |  |  |  |  |  |  |  | TA1 | R | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be a the date of the interchange; must not be a future date. |
| ISA10 | Interchange Time | TM | 4-4 | R |  |  | HHMM | TA1 | R | TA105: 015 "Invalid Interchange Time Value". | ISA10 must be present. |
| ISA10 |  |  |  |  |  |  |  | TA1 | R | TA105: 015 "Invalid Interchange Time Value". | ISA10 must be a valid time in HHMM format. |
| ISA11 | Repetition Separator |  | 1-1 | R |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | ISA11 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ISA11 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content" | ISA11 must be 1 character. |
| ISA11 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content" | ISA11 must contain at least one non-space character. |
| ISA12 | Interchange Control Version Number | ID | 5-5 | R |  |  | 00501 | TA1 | R | TA105: 017 "Invalid Interchange Version ID Value". | ISA12 must be present. |
| ISA12 |  |  |  |  |  |  |  | TA1 | R | TA105: 017 "Invalid Interchange Version ID Value". | ISA12 must be "00501". |
| ISA13 | Interchange Control Number | NO | 9-9 | R |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value" | ISA13 must be present. |
| ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be numeric. |
| ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be 9 characters. |
| ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be > 0 . |
| ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be unsigned. |
| ISA14 | Acknowledgement Requested | ID | 1-1 | R |  |  | 0, 1 | TA1 | R | TA105: 019 "Invalid Acknowledgment Requested Value". | ISA14 must be present. |
| ISA14 |  |  |  |  |  |  |  | TA1 | R | TA105: 019 "Invalid Acknowledgment Requested Value". | ISA14 must be valid values. |
| ISA15 | Usage Indicator | ID | 1-1 | R |  |  | P, T | TA1 | R | TA105: 020 "Invalid Test Indicator Value". | ISA15 must be present. |
| ISA15 |  |  |  |  |  |  |  | TA1 | R | TA105: 020 "Invalid Test Indicator Value". | ISA15 must be valid values. |
| ISA16 | Component Element Separator |  | 1-1 | R |  |  |  | TA1 | R | TA105: 027 "Invalid Component Element Separator" | ISA16 must be present. |
| ISA16 |  |  |  |  |  |  |  | TA1 | R | TA105: 027 "Invalid Component Element Separator" | ISA16 must be 1 character. |
| ISA16 |  |  |  |  |  |  |  | TA1 | R | TA105: 027 "Invalid Component Element Separator" | ISA16 must contain at least one non-space |
| ISA16 |  |  |  |  |  |  |  | TA1 | R | TA105: 027 "Invalid Component | ISA16 must be populated with accepted AN characters. |
| GS | Functional Groups |  |  |  |  | >1 |  |  |  |  |  |
| GS | FUNCTIONAL GROUP HEADER |  | 1 | R |  | 1 |  | TA1 | R | TA105: 024 Invalid GS Segment | GS must be present. |
| GS |  |  |  |  |  |  |  | 999 | R | AK905: 1 "Functional Group Not Supported". | Only one iteration of GS is allowed. |
| GS01 | Functional Identifier Code | ID | 2-2 | R |  |  | HC | 999 | R | AK905: 1 "Functional Group Not Supported". | GS01 must be present. |
| GS01 | Functional Identifier Code | ID | 2-2 | R |  |  | HC | 999 | R | AK905: 1 "Functional Group Not Supported". | GS01 must be "HC". |
| GS02 | Application Sender Code | AN | 2-15 | R |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must be present. |
| GS02 |  |  |  |  |  |  |  | 999 | R | AK905: 14 "Unknown Security Oriqinator". | GS02 must be 2-15 characters. |
| GS02 |  |  |  |  |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GSO2 must contain at least two non-space characters. |
| GS02 |  |  |  |  |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must be populated with accepted AN characters. |
| GS03 | Application Receiver Code | AN | 2-15 | R |  |  |  | 999 | R | AK905: 13 "Unknown Security Recipient". | GS03 must be present. |
| GS03 |  |  |  |  |  |  |  | 999 | R | AK905: 13 "Unknown Security Recipient". | GS03 must be 2-15 characters. |
| GS03 |  |  |  |  |  |  |  | 999 | R | AK905: 13 "Unknown Security Recipient". | GS03 must contain at least two non-space characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| GS03 |  |  |  |  |  |  |  | 999 | R | AK905: 13 "Unknown Security Recipient". | GS03 must be populated with accepted AN characters. |
| GS04 | Date | DT | 8-8 | R |  |  | CCYYMMDD | TA1 | R | TA105: 024 Invalid GS Segment | GS04 must be present. |
| GS04 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS04 must be a valid date in CCYYMMDD format. |
| GS04 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GSO4 must be the date the functional group is created; must not be a future date. |
| GS05 | Time | TM | 4-8 | R |  |  | HHMM | TA1 | R | TA105: 024 Invalid GS Segment | GS05 must be present. |
| GS05 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS05 must be a valid time in a valid format. |
| GS06 | Group Control Number | NO | 1-9 | R |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be present. |
| GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be numeric. |
| GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be > 0 . |
| GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be <= 999,999,999. |
| GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 19 "Functional Group Control Number not Unique within Interchange. | GS06 must be unique within the interchange. |
| GS07 | Responsible Agency Code | ID | 1-2 | R |  |  | X | TA1 | R | TA105: 024 Invalid GS Segment | GS07 must be present. |
| GS07 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS07 must be "X". |
| GS08 | Version Identifier Code | AN | 1-12 | R |  |  | 005010×222 | 999 | R | AK905: 2 "Functional Group Version Not Supported" | GS08 must be present. |
| GS08 |  |  |  |  |  |  |  | 999 | R | AK905: 2 "Functional Group Version Not Supported" | GS08 must be "005010×222". |
| ST | Transaction Sets |  |  |  |  | >1 |  |  |  |  |  |
| ST | TRANSACTION SET HEADER |  | 1 | R |  | >1 |  | 999 | R | IK502: 6 "Missing or Invalid Transaction Set Identifier". | ST must be present. |
| ST |  |  |  |  |  |  |  | 999 | R | IK502: 1 "Transaction Set Not Supported". | Only one iteration of ST is allowed. |
| ST01 | Transaction Set Identifier Code | ID | 3-3 | R |  |  | 837 | 999 | R | IK502: 6 "Missing or Invalid Transaction Set Identifier". | ST01 must be present. |
| ST01 |  |  |  |  |  |  |  | 999 | R | IK502: 6 "Missing or Invalid Transaction Set Identifier". | ST01 must be "837". |
| ST02 | Transaction Set Control Number | AN | 4-9 | R |  |  |  | 999 | R | IK502: 7 "Missing or Invalid Transaction Set Control Number" | ST02 must be present. |
| ST02 |  |  |  |  |  |  |  | 999 | R | IK502: 7 "Missing or Invalid Transaction Set Control Number" | ST02 must be 4-9 characters. |
| ST02 |  |  |  |  |  |  |  | 999 | R | IK502: 7 "Missing or Invalid <br> Transaction Set Control Number" | ST02 must contain at least four non-space characters. |
| ST02 |  |  |  |  |  |  |  | 999 | R | IK502: 7 "Missing or Invalid Transaction Set Control Number" | STO2 must be populated with accepted AN characters. |
| ST02 |  |  |  |  |  |  |  | 999 | R | IK502: 23 "Transaction Set Control Number Not Unique within the Functional Group". | ST02 must be a unique number within the ISA-IEA envelope. |
| ST03 | Implementation Guide Version Name | AN | 1-35 | R |  |  |  | 999 | R | IK502: I6 "Implementation Convention Not Supported". | ST03 must be present. |
| ST03 |  |  |  |  |  |  |  | 999 | R | IK502: I6 "Implementation Convention Not Supported". | ST03 must be "005010X222". |
| BHT | BEGINNING OF HIERARCHICAL TRANSACTION |  | 1 | R |  | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | BHT must be present. |
| BHT |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of BHT is allowed. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| BHTO1 | Hierarchical Structure Code | ID | 4-4 | R |  |  | 0019 | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT01 must be present. |
| BHTO1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | BHT01 must be "0019". |
| BHT02 | Transaction Set Purpose Code | ID | 2-2 | R |  |  | 00, 18 | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT02 must be present. |
| BHT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | BHT02 must be valid values. |
| BHT03 | Originator Application Transaction ID | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT03 must be present. |
| BHT03 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | BHT03 must be 1-30 characters. |
| BHTO3 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | BHT03 must be populated with accepted AN characters. |
| BHT04 | Transaction Set Creation Date | DT | 8-8 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT04 must be present. |
| BHTO4 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | BHT04 must be a valid date in CCYYMMDD format. |
| BHT05 | Transaction Set Creation Time | TM | 4-8 | R |  |  | HHMM, HHMMSS, HHMMSSD, HHMMSSDD | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT05 must be present. |
| BHT05 |  |  |  |  |  |  |  | 999 | R | IK403 = 9: "Invalid Time" | BHT05 must a valid time in a valid time format. |
| BHT06 | Claim or Encounter ID | ID | 2-2 | R |  |  | 31, CH, RP | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT06 must be present. |
| BHT06 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | BHT06 must be"CH". |
|  | SUBMITTER NAME loop |  | 1 | R | 1000A | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 1000A is allowed. |
| NM1 | SUBMITTER NAME |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 1000A.NM1 must be present. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 41 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000A.NM101 must be "41". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000A.NM102 must be valid values. |
| NM103 | Submitter Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.NM103 must be 1-60 characters. |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM103 must contain at least one nonspace character. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM103 must be populated with accepted AN characters. |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM104 | Submitter First Name | AN | 1-35 | S |  |  |  | 999 | R | \|K403 = I13: "Implementation Dependent "Not Used" Data Element Present" | If 1000A.NM102 is "2", 1000A.NM104 must not be present. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TAA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM104 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 1000A.NM104 must be 1-35 characters. |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM104 |  |  |  |  |  |  |  | 999 | R | 1K403 = 6: "Invalid Character in Data Element" | 1000A.NM104 must contain at least one nonspace character. |
| NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM104 must be populated with accepted AN characters. |
| NM105 | Submitter Middle Name | AN | 1-25 | s |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 1000A.NM105 must contain at least one non- space character. |
| NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | If 1000A.NM102 is "2", 1000A.NM105 must not be present. |
| NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.NM105 must be 1-25 characters. |
| NM105 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 1000A.NM105 must be populated with accepted AN characters. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | 46 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 1000A.NM108 must be "46". |
| NM109 | Submitter Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.NM109 must be present. |
| NM109 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \\ & \hline \end{aligned}$ | 1000A.NM109 must contain at least two non- space characters. |
| NM109 |  |  |  |  |  |  |  | 999 | R | K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 1000A.NM109 must be 2-80 characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/1 } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM109 must be populated with accepted AN characters. |
| NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 1000A.NM109 must be an approved electronic submitter. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | \|K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PER | SUBMITTER EDI CONTACT INFORMATION |  | 2 | R | 1000A |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 1000A.PER must be present. |
| PER | SUBMITTER EDI CONTACT INFORMATION |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 1000A.PER are allowed. |
| PER01 | Contact Function Code | ID | 2-2 | R |  |  | IC | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.PER01 must be present. |
| PER01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000A.PER01 must be "IC". |
| PER02 | Submitter Contact Name | AN | 1-60 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER02 must contain at least one nonspace character. |
| PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | For the 1st 1000A.PER transmitted, 1000A.PER02 must not $=1000$ A. NM103. |
| PER02 |  |  |  |  |  |  |  | 999 | R | \|K403 = I13: "Implementation Dependent "Not Used" Data Element Present" | For the 2nd 1000A.PER transmitted, 1000A.PER02 must not be present. |
| PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.PER02 must be $1-60$ characters. |
| PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER02 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{gathered} \text { TA1/1 } \\ 999 / \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PER03 | Communication Number Qualifier | ID | 2-2 | R |  |  | EM, FX. TE | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.PER03 must be present. |
| PER03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000A.PER03 must be valid values. |
| PER04 | Communication Number | AN | 1-256 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.PER04 must be present. |
| PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER04 must contain at least one nonspace character. |
| PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.PER04 must be 1-256 characters. |
| PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER04 must be populated with accepted AN characters. |
| PER05 | Communication Number Qualifier | ID | 2-2 | S |  |  | EM, EX, FX, TE | 999 | R | IK403 = 7: "Invalid Code Value" | 1000A.PER05 must be valid values. |
| PER05 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | If 1000A.PER05 is "EX", 1000A.PER03 must be "TE". |
| PER06 | Communication Number | AN | 1-256 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 1000A.PER06 is present, 1000A.PER05 must be present. |
| PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER06 must contain at least one nonspace character. |
| PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.PER06 must be 1-256 characters. |
| PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER06 must be populated with accepted AN characters. |
| PER07 | Communication Number Qualifier | ID | 2-2 | S |  |  | EM, EX, FX, TE | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 1000A.PER05 is present, 1000A.PER07 may be present. |
| PER07 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000A.PER07 must be valid values. |
| PER07 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | If 1000A.PER07 is "EX", 1000A.PER05 must |
| PER08 | Communication Number | AN | 1-256 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 1000A.PER08 is present, 1000A.PER07 must be present. |
| PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER08 must contain at least one nonspace character. |
| PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.PER08 must be 1-256 characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER08 must be populated with accepted AN characters. |
| PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  | 999 | E | \|K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
|  | RECEIVER NAME Loop |  | 1 | R | 1000B | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 1000B is allowed. |
| NM1 | RECEIVER NAME |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 1000B.NM1 must be present. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 40 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000B.NM101 must be "40". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000B.NM102 must be "2". |
| NM103 | Receiver Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000B.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000B.NM103 must be populated with accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000B.NM103 must contain at least one non space character. |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | 46 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000B.NM108 must be "46". |
| NM109 | Receiver Primary Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM109 must be present. |
| NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 1000B.NM109 must be [contractor put receiver code here] |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/1 } \\ 999 / 2 \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
|  | BILLING PROVIDER Loop |  |  |  | 2000A | >1 |  | 999 | R | IK304 = 17: "Implementation Loop Occurs Under Minimum Times" | 2000A must be present. |
|  | BILLING PROVIDER HIERARCHICAL LEVEL |  |  |  | 2000A | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2000A is allowed. |
| HL | BILLING PROVIDER HIERARCHICAL LEVEL |  | 1 | R | 2000A | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2000A.HL must be present. |
| HL |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000A.HL is allowed. |
| HLO1 | Hierarchical ID Number | AN | 1-12 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A. HL01 must be present. |
| HLO1 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2000A.HL01 must be 1-12 characters. |
| HLO1 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000A.HL01 must be numeric. |
| HL01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | The first HL01 must be "1". |
| HL02 | Hierarchical Parent ID Number | AN | 1-12 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HLO3 | Hierarchical Level Code | ID | 1-2 | R |  |  | 20 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.HL03 must be present. |
| HL03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000A.HL03 must be "20". |
| HL04 | Hierarchical Child Code | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A. HL04 must be present. |
| HL04 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000A.HL04 must be "1'. |
| PRV | BILLING PROVIDER SPECIALTY INFORMATION |  | 1 | S | 2000A |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000A.PRV is allowed. |
| PRV01 | Provider Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A PRV01 must be present. |
| PRV01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000A.PRV01 must be "BI". |
| PRV02 | Reference Identification Qualifier | ID | 2-3 | R |  |  | PXC | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.PRV02 must be present. |
| PRV02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000A.PRV02 must be "PXC". |
| PRV03 | Provider Taxonomy Code | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.PRV03 must be present. |
| PRV03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 145: "Entity's specialty/taxonomy code" <br> FIC. 85 Billina Provider | 2000A.PRV03 must be a valid Provider Taxonomy Code |
| PRV04 | State or Province Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PRV05 | PROVIDER SPECIALTY INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PRV06 | Provider Organization Code | ID | 3-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CUR | FOREIGN CURRENCY INFORMATION |  | 1 | S | 2000A |  |  | 999 | E | IK304 = 14: "Implementation "Not Used" Segment Present" | 2000A.CUR must not be present. |
| CUR |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 681: "Claim Currency Not Supported" |  |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  | Billing Provider Name Loop |  | 1 | R | 2010AA | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2010AA is allowed. |
| NM1 | Billing Provider Name |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.NM1 must be present. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 85 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.NM101 must be "85". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.NM102 must be valid values. |
| NM103 | Billing Provider Last or Organizational Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM103 must contain at least one non-space character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. 85 Billing Provider |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM103 must be populated with accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC. 85 Billina Provider |  |
| NM104 | Billing Provider First Name | AN | 1-35 | S |  |  |  | 999 | E | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | If 2010AA.NM102 is "2", 2010AA.NM104 must not be present. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC: A8 "Acknowledgement / Rejected for relational field.. CSC 505: "Entity's First Name" |  |
| NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM104 must contain at least one non-space character. |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.NM104 must be 1-35 characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC. 85_Billina Provider |  |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM104 must be populated with accepted AN characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC. 85 Billina Provider |  |
| NM105 | Billing Provider Middle Name | AN | 1-25 | S |  |  |  | 999 | E | 1 K403 = 113: "Implementation Dependent "Not Used" Data Element Present" | If 2010AA.NM102 is "2", 2010AA.NM105 must not be present. |
| NM105 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC: A8 "Acknowledgement / } \\ & \text { Rejected for relational field..." } \\ & \text { CSC 514: "Entity's Middle Name" } \\ & \hline \end{aligned}$ |  |
| NM105 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010AA.NM105 must contain at least one non-space character. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.NM105 must be 1-25 characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. 85_Billina-Provider |  |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM105 must be populated with accepted AN characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC. 85 Billina Provider |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |
| NM107 | Billing Provider Name Suffix | AN | 1-10 | S |  |  |  | 999 | E | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | If 2010AA.NM102 is "2", 2010AA.NM107 must not be present. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A8: "Acknowledgement / Rejected for relational field in error." CSC 125: "Entity's Name" EIC: 85 Billing Provider |  |
| NM107 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2010AA.NM107 must contain at least one non-space character. |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.NM107 must be 1-10 characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC. 85_Billina-Provider |  |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM107 must be populated with accepted AN characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | S |  |  | XX | 277 | C | CSCC A8: "Acknowledgement / Rejected for relational field in error." TBD01: "Situational segment/element required for adjudication." EIC: 85 Billing Provider | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier". |
| NM108 |  |  |  |  |  |  |  | 277 | C | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." <br> EIC: 85 Billing Provider | 2010AA.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.NM108 must be "XX". |
| NM109 | Billing Provider Identifier | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2010AA.NM109 must be present if 2010AA.NM108 is present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC. 85 _Billing Provider | 2010AA.NM109 must be valid according to the NPI algorithm. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC. 85 Billing Provider | 2010AA.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" FIC. 85-Billina-Provider | The first position of 2010AA.NM109 must be a "1". |
| NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2010AA.NM109 billing provider must be "associated" to the submitter (from a trading partner management perspective) in 1000A. NM109. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | BILLING PROVIDER ADDRESS |  | 1 | R | 2010AA |  |  | 999 | R | \|K304 = 3: "Required Segment Missing" | 2010AA.N3 must be present. |
| N3 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \mid \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only one iteration of 2010AA.N3 is allowed. |
| N301 | Billing Provider Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N301 must contain at least one nonspace character. |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA. N301 must be 1-55 characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" FIC 85 Billina Provider |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N301 must be populated with accepted AN characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" FlC. 85_Billina_Provider |  |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 503: "Entity's Street Address" | 2010AA.N301 must not contain the following exact phrases (not case sensitive): "Post Office Box", "P.O. Box", "PO Box", "P O Box", "Lock Box", "Lock Bin". |
| N302 | Billing Provider Address Line | AN | 1-55 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N302 must contain at least one nonspace character. |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.N302 must be 1-55 characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{array}{r} \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" FIC. 85_Billino Provider |  |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N302 must be populated with accepted AN characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" FIC. 85 Billing Provider |  |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 503: "Entity's Street Address" EIC: 85 Billing Provider | 2010AA.N302 must not contain the following exact phrases (not case sensitive): "Post Office Box", "P.O. Box", "PO Box", "P O Box", "Lock Box", "Lock Bin". |
| N4 | BILLING PROVIDER CITYISTATEIZIP CODE |  | 1 | R | 2010AA |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.N4 must be present. |
| N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AA.N4 is allowed. |
| N401 | Billing Provider City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N401 must contain at least two nonspace characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010AA.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" FIC. 85 _Billina_Provider |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 502: "Entity's City" FIC: 85 Billina Provider |  |
| N402 | Billing Provider State or Province Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2010AA.N404 is not present, 2010AA.N402 must be present. |
| N402 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 501: "Entity's State/Province" <br> FIC. 85 Billina Provider | 2010AA.N402 must be a valid State Code. |
| N403 | Billing Provider Postal Zone or ZIP Code | ID | 3-15 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2010AA.N404 is not present, 2010AA.N403 must be present. |
| N403 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" EIC: 85 Billing Provider | 2010AA.N403 must be a valid 9 digit Zip Code. |
| N404 | Country Code | ID | 2-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N407 | Country Subdivision Code | ID | 1-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF | BILLING PROVIDER TAX IDENTIFICATION |  | 1 | R | 2010AA |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.REF must be present. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AA.REF with REF01 = "EI" or "SY" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | El, SY | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.REF01 must be valid values. |
| REF02 | Billing Provider Additional Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 128: "Entity's tax id" EIC: 85 Billing Provider |  |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 128: "Entity's tax id" ElC: 85 Billing Provider | 2010AA.REF02 must be nine digits with no punctuation. |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A8: "Acknowledgement / Rejected for relational field in error" CSC 562: "Entity's National Provider Identifier (NPI)" CSC 128: "Entity's tax id" EIC: 85 Billing Provider | 2010AA.REF must be associated with the provider identified in 2010AA.NM109 |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | BILLING PROVIDER UPIN/LICENSE INFORMATION |  | 2 | S | 2010AA |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2010AA.REF with REF01 = "1G" may be present when 2010AA.NM1 is present and 2010AA.NM109 is not present. |
| REF |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Only one iteration of 2010AA.REF with REF01 $=$ " 1 G " is allowed. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2010AA.REF must not be present. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.REF01 must be "1G". |
| REF02 | Billing Provider Additional | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 164: "Entity's contract/member number" <br> FIC. 85-Billina-Provider | When 2010AA.REF01 = "1G", 2010AA.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |
|  |  |  |  |  |  |  |  |  |  |  |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| PER | BILLING PROVIDER CONTACT INFORMATION |  | 2 | S | 2010AA |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2010AA.NM1 is present, 2010AA.PER may be present. |
| PER |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2010AA.PER are allowed. |
| PER01 | Contact Function Code | ID | 2-2 | R |  |  | IC | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.PER01 must be present. |
| PER01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.PER01 must be "IC". |
| PER02 | Billing Provider Contact Name | AN | 1-60 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | For the 1st 2010AA.PER transmitted, 2010AA.PER02 must be present. |
| PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | For the 2nd 2010AA.PER transmitted, 2010AA.PER02 must not be present. |
| PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | 2010AA.PER02 must not $=1000 \mathrm{~A}$. PER02. |
| PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER02 must contain at least one non-space character. |
| PER02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER02 must be 1-60 characters. |
| PER02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 561: "Entity's Contact Name" FlC. 85_Billinn_Provider |  |
| PER02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER02 must be populated with accepted AN characters. |
| PER02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 561: "Entity's Contact Name" FIC. 85 Billina Provider |  |
| PER03 | Communication Number Qualifier | ID | 2-2 | R |  |  | EM, FX, TE | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.PER03 must be present. |
| PER03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.PER03 must be valid values. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PER04 | Communication Number | AN | 1-256 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.PER04 must be present. |
| PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER04 must contain at least one non-space character. |
| PER04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER04 must be 1-256 characters. |
| PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Phone Number" FIC. 85 Billina Provider |  |
| PER04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER04 must be populated with accepted AN characters. |
| PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FIC. 85 billina Provider |  |
| PER05 | Communication Number Qualifier | ID | 2-2 | S |  |  | EM, EX, FX, TE | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.PER05 must be valid values. |
| PER05 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | If 2010AA.PER05 is "EX" 2010AA.PER03 must be "TE" |
| PER06 | Communication Number | AN | 1-256 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2010AA.PER05 is present 2010AA.PER06 must be present. |
| PER06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER04 must be 1-256 characters. |
| PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Phone Number" |  |
| PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER06 must contain at least one non-space character. |
| PER06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER06 must be populated with accepted AN characters. |
| PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FIC. 85 billina Provider |  |
| PER07 | Communication Number Qualifier | ID | 2-2 | S |  |  | EM, EX, FX, TE | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2010AA.PER05 is present, 2010AA.PER07 may be present. |
| PER07 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.PER07 must be valid values. |
| PER07 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | If 2010AA.PER07 is "EX", 2010AA.PER05 |
| PER08 | Communication Number | AN | 1-256 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2010AA.PER07 is present, 2010AA.PER08 must be present. |
| PER08 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER08 must be $1-256$ characters. |
| PER08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" EIC: 85 billing Provider |  |
| PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER08 must contain at least one non-space character. |
| PER08 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER08 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PER08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FIC. 85 hilling Provider |  |
| PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM1 | PAY-TO ADDRESS NAME |  | 1 | S | 2010AB | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2010AB.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 87 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AB.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AB.NM101 must be "87". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AB.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AB.NM102 must be valid values. |
| NM103 | Pay-to Provider Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM104 | Pay-to Provider First Name | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM105 | Pay-to Provider Middle Name | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Pay-to Provider Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM109 | Pay-to Provider Identifier | AN | 2-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | PAY-TO ADDRESS |  | 1 | R | 2010AB |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2010AB.NM1 is present, 2010AB.N3 must be present. |
| N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AB.N3 is allowed. |
| N301 | Pay-to Provider Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AB.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N301 must contain at least one non- space character. |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AB. N301 must be 1-55 characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" FIC. 87 Pav-to Provider |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N301 must be populated with accepted AN character. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 503: "Entity's Street address" FIC. 87 Pav-tم_Provider |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N302 | Pay-to Provider Address Line | AN | 1-55 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N302 must contain at least one nonspace character. |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AB.N302 must be 1-55 characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" |  |
| N302 |  |  |  |  |  |  |  | 277 | T | for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 503: "Entity's Street address" <br> EIC: 87 Pay-to Provider |  |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N302 must be populated with accepted AN character. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" FIC. 87 Pav-tn Provider |  |
| N4 | PAY-TO ADDRESS CITYISTATEIZIP CODE |  | 1 | R | 2010AB |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2010AB.NM1 is present, 2010AB.N4 must be present. |
| N4 |  |  |  |  |  |  |  | 999 | R | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AB.N4 is allowed. |
| N401 | Pay-to Address City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AB. N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | 1K403 = 6: "Invalid Character in Data Element" | 2010AB.N401 must contain at least two non- space characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010AB.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" FlC. 87 Pav-to Provider |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 502: "Entity's City" FlC. 87 Pav-to Provider |  |
| N402 | Pay-to Address State Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2010AB.N404 is not present, 2010AB.N402 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N402 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province Code" <br> FIC. 87 Pav-to Provider | 2010AB.N402 must be a valid State Code. |
| N403 | Pay-to Address Postal Zone or ZIP Code | ID | 3-15 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2010AB.N404 is not present, 2010AB.N403 must be present. |
| N403 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" EIC: 87 Pay-to Provider | N403 must be a valid Zip Code. |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N404 | Country Code | ID | 2-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N407 | Country Subdivision Code | ID | 1-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | PAY-TO PLAN NAME |  | 1 | S | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.NM1 must not be present |
| N3 | PAY-TO PLAN ADDRESS |  | 1 | R | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.N3 must not be present. |
| N4 | PAY-TO PLAN CITYISTATEIZIP CODE |  | 1 | R | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.N4 must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/I } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF | PAY-TO PLAN SECONDARY IDENTIFICATION NUMBER |  | 1 | R | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.REF must not be present. |
| REF | PAY-TO PLAN TAX IDENTIFICATION NUMBER |  | 1 | R | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.REF must not be present. |
|  | SUBSCRIBER Loop |  |  |  | 2000B | >1 |  | 999 | R | IK304 = 17: "Implementation Loop Occurs Under Minimum Times" | 2000B must be present. |
| HL | SUBSCRIBER HIERARCHICAL LEVEL |  | 1 | R | 2000B | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2000B. HL must be present. |
| HL |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2000B.HL is allowed. |
| HLO1 | Hierarchical ID Number | AN | 1-12 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.HL01 must be present. |
| HLO1 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2000B. HL01 must be 1-12 characters. |
| HLO1 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000B.HL01 must be numeric. |
| HLO1 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2000B.HL01 must be equal the value of the previous HLO1 (2000A.HL01) plus one. |
| HLO2 | Hierarchical Parent ID Number | AN | 1-12 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.HL02 must be present. |
| HLO2 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2000B.HL02 must be equal to the value of the HLO1 (2000A.HLO1) of the parent HL. |
| HLO3 | Hierarchical Level Code | ID | 1-2 | R |  |  | 22 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B. HL03 must be present. |
| HL03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000B. HL03 must be "22". |
| HLO4 | Hierarchical Child Code | ID | 1-1 | R |  |  | 0, 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.HL04 must be present. |
| HLO4 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not support this qualifier." | 2000B.HL04 must be "0". |
| SBR | SUBSCRIBER INFORMATION |  | 1 | R | 2000B | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2000B.SBR must be present. |
| SBR |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000B.SBR is allowed. |
| SBR01 | Payer Responsibility Sequence <br> Number Code | ID | 1-1 | R |  |  | $\begin{gathered} \text { A, B, C, D, E, F, G, } \\ H, P, S, T, U \end{gathered}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.SBR01 must be present. |
| SBR01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000B.SBR01 must be valid values. |
| SBR01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not support this qualifier." | 2000B.SBR01 must be "S" or "P". |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SBR01 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 286: "Other payer's Explanation of Benefits/payment information" | If 2000B.SBRO1 = "S" there must be at least one 2320.SBR01 with a value equal to "P". |
| SBR02 | Individual Relationship Code | ID | 2-2 | S |  |  | 18 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.SBR02 must be present. |
| SBR02 |  |  |  |  |  |  | 18 | 999 | R | IK403 = 7: "Invalid Code Value" | 2000B.SBR02 must be "18". |
| SBR03 | Subscriber Group or Policy Number | AN | 1-50 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000B.SBR03 must contain at least one nonspace character. |
| SBR03 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2000B.SBR03 must be 1-50 characters. |
| SBR03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 163: "Entity's Policy Number" FIC. Il Subscriher |  |
| SBR03 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2000B.SBR03 must be populated with accepted AN characters. |
| SBR03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 163: "Entity's policy number" FIC. Il Subscriher |  |
| SBR04 | Insured Group Name | AN | 1-60 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2000B.SBR03 is present, 2000B.SBR04 must not be present. |
| SBR04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000B.SBR04 must contain at least one nonspace character. |
| SBR04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2000B.SBR04 must be 1-60 characters. |
| SBR04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 663: "Entity's Group Name" FIC. ll Subscriher |  |
| SBR04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2000B.SBR04 must be populated with accepted AN characters. |
| SBR04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 663: "Entity's Group Name" FIC. II Subscriher |  |
| SBR05 | Insurance Type Code | ID | 1-3 | S |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000B.SBR05 must be valid values. |
| SBR05 |  |  |  |  |  |  | $\begin{gathered} 12,13,14,15,16, \\ 41,42,43,47 \\ \hline \end{gathered}$ | 999 | E | IK403 = 2 "Conditional Required Data Element Missing" | If 2000B.SBR01 is "P", 2000B.SBR05 must not be present. |
| SBR05 |  |  |  |  |  |  |  | 277 | C | CSCC A8: "Acknowledgement / Rejected for relational field in error" CSC 578: "Insurance Type Code" EIC: IL Subscriber | If 2000B.SBR01 is not "P", 2000B.SBR05 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SBR06 | Coordination of Benefits Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SBR07 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SBR08 | Employment Status Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SBR09 | Claim Filing Indicator Code | ID | 1-2 | S |  |  | 11, 12, 13, 14, 15, 16, 17, AM, BL, CH, $\mathrm{CI}, \mathrm{DS}, \mathrm{FI}, \mathrm{HM}, \mathrm{LM}$, MA, MB, MC, OF, TV, VA, WC, zZ | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not support this qualifier." | 2000B.SBR09 must be "MB". |
| PAT | PATIENT INFORMATION |  | 1 | S | 2000B |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000B.PAT is allowed. |
| PATO1 | Individual Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PAT02 | Patient Location Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PATO3 | Employment Status Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PAT04 | Student Status Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PAT05 | Date Time Period Format Qualifier | ID | 2-3 | S |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 20008.PAT05 must be "D8" |
| PAT06 | Patient Death Date | AN | 1-35 | S |  |  | CCYYMMDD | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2000B.PAT05 is present, 2000B. PAT06 must be present. |
| PAT06 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2000B.PAT06 must be a valid date in CCYYMMDD format. |
| PAT07 | Unit or Basis for Measurement Code | ID | 2-2 | S |  |  | 01 | 999 | R | IK403 = 7: "Invalid Code Value" | 2000B.PAT07 must be "01". |
| PAT08 | Patient Weight | R | 1-10 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2000B.PAT07 is present, 2000B.PAT08 must be present. |
| PAT08 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2000B.PAT08 must be > 0 and < $=$ 9,999.99 |
| PAT08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 273: "Weight" <br> FIC. $1 /$ Subscriher |  |
| PAT08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 273: "Weight" <br> FIC. ll_ Subscriber | 2000B.PAT08 is limited to 0,1 or 2 decimal positions. |
| PAT09 | Pregnancy Indicator | ID | 1-1 | S |  |  | Y | 999 | R | IK403 = 7: "Invalid Code Value" | 2000B.PAT09 must be "Y". |
| NM1 | SUBSCRIBER NAME |  | 1 | R | 2010BA | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010BA.NM1 must be present. |
| NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2010BA.NM1 allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | IL | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010BA.NM101 must be "IL". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM102 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM102 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not sunport this qualifier." | 2010BA.NM102 must be "1". |
| NM103 | Subscriber Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM103 must contain at least one non-space character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. Il Subscriher |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM103 must be populated with accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC: ll Subscriber |  |
| NM104 | Subscriber First Name | AN | 1-35 | S |  |  |  | 277 | C | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> CSC 505: "Entity's First Name" FIC:ll_ Subscriber | 2010BA.NM104 must be present. |
| NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM104 must contain at least one non-space character. |
| NM104 |  | AN | 1-35 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.NM104 must be 1-35 characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC. 11 _ Subscriher |  |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM104 must be populated with accepted AN characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC: ll Subscriber |  |
| NM105 | $\underset{\substack{\text { Subscriber Middle Name or } \\ \text { Initial }}}{ }$ | AN | 1-25 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM105 must contain at least one non-space character. |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.NM105 must be 1-25 characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 514: "Entity's Middle Name" <br> FIC. IL Subscriher |  |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM105 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC. II Subscriher |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Subscriber Name Suffix | AN | 1-10 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM107 must contain at least one non-space character. |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.NM107 must be 1-10 characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC. 11 Subscriher |  |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM107 must be populated with accepted AN characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" CSC 125: "Entity's Name" FIC. 1 .l Subscriher |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | II, MI | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010BA.NM108 must be "MI". |
| NM109 | Subscriber Primary Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM109 must be present. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 164: "Entity's contract/member | If Medicare IDs: <br> 2010BA.NM109 must be $10-11$ positions in the format of NNNNNNNNNA or NNNNNNNNNAA or NNNNNNNNNAN where " $A$ " represents an alpha character and " N " represents a numeric digit. <br> OR |
|  |  |  |  |  |  |  |  |  |  | number" <br> EIC: IL Subscriber | If Railroad IDs: <br> 2010BA.NM109 must be $7-12$ positions in the format of ANNNNNN or AANNNNNN or AANNNNNNNNN or AAANNNNNN or AAANNNNNNNNN where " $A$ " represents an alpha character and " N " represents a numeric digit. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | SUBSCRIBER ADDRESS |  | 1 | R | 2010BA |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.N3 is allowed. |
| N301 | Subscriber Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N301 must contain at least one nonspace character. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.N301 must be 1-55 characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 503: "Entity's Street Address" <br> FIC. لl Subscriher |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N301 must be populated with accepted AN characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" EIC:IL_Subscriber |  |
| N302 | Subscriber Address Line | AN | 1-55 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N302 must contain at least one nonspace character. |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.N302 must be 1 - 55 characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 503: "Entity's Street Address" FIC. ll Subscriher |  |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N302 must be populated with accepted AN characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" FIC. لll Subscriher |  |
| N4 | SUBSCRIBER CITYISTATEIZIP CODE |  | 1 | R | 2010BA |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010BA.N4 must be present. |
| N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.N4 is allowed. |
| N401 | Subscriber City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N401 must contain at least two non- space characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010BA.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" FIC. 1 - Subscriher |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 502: "Entity's City" FIC. l﹎ Subscriher |  |
| N402 | Subscriber State Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2010BA.N404 is not present, 2010BA.N402 must be present. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DMG06 | Citizenship Status Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| DMG07 | Country Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| DMG08 | Basis of Verification Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| DMG09 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| DMG10 | Code List Qualifier Code | ID | 1-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| DMG11 | Industry Code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| REF | SUBSCRIBER SECONDARY IDENTIFICATION |  | 1 | S | 2010BA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2010BA.REF with REF01 = "SY" must not be present. |
| REF | PROPERTY AND CASUALTY CLAIM NUMBER |  | 1 | S | 2010BA |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.REF with REF01 = "Y4" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | Y4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010BA.REF01 must be 'Y4". |
| REF02 | Property Casualty Claim Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.REFO2 must contain at least one non-space character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 629: "Property Casualty Claim Number" FIC. ll Subscriher |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 629: "Property Casualty Claim Number" FIC. U Subscriher |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PER | PROPERTY AND CASUALTY SUBSCRIBER CONTACT INFORMATION |  | 1 | S | 2010BA |  |  | 999 | R | ІК304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.PER is allowed. |
| PER01 | Contact Function Code | ID | 2-2 | R |  |  | IC | 999 | R | IK403 = 7: "Invalid Code Value" | 2010BA.PER01 must be "IC". |
| PER02 | Information Contact Name | AN | 1-60 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.PER02 must be 1-60 characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PER02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 561: "Entity's Contact Name" FIC. II Subscriher |  |
| PER02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.PER02 must be populated with accepted AN characters. |
| PER02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 561: "Entity's Contact Name" FIC: 11 Subscriber |  |
| PER03 | Communication Number Qualifier | ID | 2-2 | R |  |  | TE | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.PER03 must be present. |
| PER03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010BA.PER03 must be "TE". |
| PER04 | Communication Number | AN | 1-256 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.PER04 must contain at least one non-space character. |
| PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.PER04 must be present. |
| PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A6: "Acknowledgement / Rejected for Missing Information" CSC 127: "Entity's Phone Number" EIC: ll. Subscriber |  |
| PER04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.PER04 must be 1-256 characters. |
| PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Phone Number" |  |
| PER04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.PER04 must be populated with accepted AN characters. |
| PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FIC:لll_Subscriber |  |
| PER05 | Communication Number Qualifier | ID | 2-2 | S |  |  | EX | 999 | R | IK403 = 7: "Invalid Code Value" | 2010BA.PER05 must be "EX". |
| PER06 | Communication Number | AN | 1-256 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.PER06 must contain at least one non-space character. |
| PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2010BA.PER05 is present 2010BA.PER06 must be present. |
| PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A8: "Acknowledgement / Rejected for relational field in error." CSC 127: "Entity's Phone Number" EIC: IL Subscriber |  |
| PER06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.PER06 must be 1-256 characters. |
| PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Phone Number" FIC. Il Subscriher |  |
| PER06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.PER06 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{array}{r} \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FIC. 11 Subscriher |  |
| PER07 | Communication Number Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I IO: "Implementation "Not Used" Element Present" | Must not be present. |
| PER08 | Communication Number | AN | 1-256 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM1 | PAYER NAME |  | 1 | R | 2010BB | 1 |  | 999 | R | \|K304 = 3: "Required Segment Missing" | 2010BB.NM1 must be present. |
| NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2010BB.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | PR | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010BB.NM101 must be "PR". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010BB.NM102 must be "2". |
| NM103 | Payer Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM103 must contain at least one non-space character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BB.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. PR Paver |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM103 must be populated with accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" EIC: PR Paver |  |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | PI, XV | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010BB.NM108 must be "Pl". |
| NM109 | Payer Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM109 must be present. |
| NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM109 must contain at least two non-space characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 21: "Missing or Invalid Information" CSC 153: "Entity ID Number" EIC "PR" Payer CSC 153: "Entity ID Number" EIC 40: "Reciever" | 2010BB.NM109 must be the same value as 1000B.NM109. |
| NM109 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2010BB.NM109 must be 2-80 characters. |
| NM109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 53: "Entity ID Number" FIC PR Paver |  |
| NM109 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM109 must be populated with accepted AN characters. |
| NM109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 53: "Entity ID Number" FIC PR Paver |  |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | PAYER ADDRESS |  | 1 | R | 2010BB |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BB.N3 is allowed. |
| N301 | Payer Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N301 must contain at least one non- space character. |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BB.N301 must be 1-55 characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 503: "Entity's Street Address" FIC PR Paver |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N301 must be populated with accepted AN characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" FIC.PR Paver |  |
| N302 | Payer Address Line | AN | 1-55 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N302 must contain at least one non- space character. |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BB.N302 must be 1-55 characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | TA1/ 999/ <br> 277CA | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street Address" FIC.PR Paver |  |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N302 must be populated with accepted AN characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" FIC PR Paver |  |
| N4 | PAYER CITYISTATEIZIP CODE |  | 1 | R | 2010BB |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010BB.N4 must be present. |
| N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BB.N4 is allowed. |
| N401 | Payer City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N401 must contain at least two nonspace characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2010BB.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" FIC.PR Paver |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 502: "Entity's City" <br> FIC PR Paver |  |
| N402 | Payer State Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2010BB.N404 is not present, 2010BB.N402 must be present. |
| N402 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" EIC PR Paver | 2010BB.N402 must be a valid State Code. |
| N403 | Payer Postal Zone or ZIP Code | ID | 3-15 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2010BB.N404 is not present, 2010BB.N403 must be present. |
| N403 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" EIC PR Payer | 2010BB.N403 must be a valid Zip Code. |
| N404 | Payer Country Code | ID | 2-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N407 | Country Subdivision Code | ID | 1-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF | PAYER SECONDARY IDENTIFICATION |  | 3 | S | 2010BB |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2010BB.REF with REF01 = "2U", "EI", "FY" or "NF" must not be present. |
| REF | BILLING PROVIDER SECONDARY IDENTIFICATION |  | 2 | S | 2010BB |  |  | 999 | R | IK304 = 2: "Unexpected Segment" | 2010BB.REF with REF01 = "G2" must be present when 2010AA.NM109 is not present. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2010BB.REF with REF01 = "G2" or "LU" are allowed. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2010BB.REF must not be present. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010BB.REF01 must be valid values. |
| REF02 | Payer Additional Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.REF02 must contain at least onenone space character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | When 2010BB.REF01 = "G2" or "LU", 2010BB.REF02 must be 1 - 50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 560: "Entity's Additional/Secondary Identifier" FIC PR Paver |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | When 2010BB.REF01 = "G2" or "LU", 2010BB.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 560: "Entity's Additional/Secondary Identifier" Fle PR Paver |  |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2010BB.REF02 billing provider must be "associated" to the submitter (from a trading partner management perspective) in 1000A.NM109. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HL | PATIENT HIERARCHICAL LEVEL |  | 1 | S | 2000C | >1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Loop must not be present. |
| PAT | PATIENT INFORMATION |  | 1 | R | 2000C |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
| NM1 | PATIENT NAME |  | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Loop must not be present. |
| N3 | PATIENT ADDRESS |  | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
| N4 | PATIENT CITYISTATEIZIP CODE |  | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
| DMG | PATIENT DEMOGRAPHIC INFORMATION |  | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
| REF | PROPERTY AND CASUALTY CLAIM NUMBER |  | 1 | S | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
| PER | PROPERTY AND CASUALTY PATIENT CONTACT INFORMATION |  | 1 | S | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
| CLM Loop | CLAIM INFORMATION Loop |  |  |  | 2300 | 100 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only 100 iterations of the 2300 loop are allowed. |
| CLM | CLAIM INFORMATION |  | 1 | R | 2300 | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2300.CLM must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CLM |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CLM is allowed. |
| CLM01 | Patient Control Number | AN | 1-38 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM01 must be present. |
| CLM01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.CLM01 must contain at least one nonspace character. |
| CLM01 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.CLM01 must be 1-38 characters. |
| CLM01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TPD12. "Claim cubmittor'cidantifior" |  |
| CLM01 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.CLM01 must be populated with accepted AN characters. |
| CLM01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" TBD12: "Claim submitter's identifier" |  |
| CLM02 | Total Claim Charge Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM02 must be present. |
| CLM02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.CLM02 must be numeric. |
| CLMO2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 178. "Submitted Charges" | 2300.CLM02 must be >= 0 . |
| CLM02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.CLM02 must be <= 99,999.99. |
| CLM02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 178: "Submitted Charaes" |  |
| CLM02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 697: "Too many decimal positions" <br> CSC 178: "Submitted Charaes" | 2300.CLM02 is limited to 0,1 or 2 decimal positions. |
| CLM02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 178: "Submitted Charges" | 2300.CLM02 must equal the sum of all 2400.SV102 amounts. |
| CLMO2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 400: "Claim is out of Balance" CSC 672 "Payer's payment information is out of balance" | CLM02 must equal the sum of all 2320 \& 2430 CAS amounts and the 2320 AMTO2 (AMT01=D). |
| CLM03 | Claim Filing Indicator Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CLM04 | Non-Institutional Claim Type Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CLM05 | HEALTH CARE SERVICE LOCATION INFORMATION |  |  | R |  |  |  |  |  |  |  |
| CLM05-1 | Facility Type Code | AN | 1-2 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM05-1 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CLM05-1 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 249: "Place of service" | 2300.CLM05-1 must be a valid POS code. Code must be valid for the transaction set creation date (BHTO4). |
| CLM05-2 | Facility Code Qualifier | ID | 1-2 | R |  |  | B | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM05-2 must be present. |
| CLM05-2 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CLM05-2 must be "B". |
| CLM05-3 | Claim Frequency Code | ID | 1-1 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM05-3 must be present. |
| CLMO5-3 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 535: "Claim Frequency Code" | 2300.CLM05-3 must be "1". |
| CLM06 | Provider or Supplier Signature Indicator | ID | 1-1 | R |  |  | N, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM06 must be present. |
| CLM06 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CLM06 must be valid values. |
| CLM07 | Medicare Assignment Code | ID | 1-1 | R |  |  | A, B, C | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM07 must be present. |
| CLM07 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CLM07 must be valid values. |
| CLM08 | Benefits Assignment Certification Indicator | ID | 1-1 | R |  |  | N, W, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM08 must be present. |
| CLM08 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CLM08 must be valid values. |
| CLM09 | Release of Information Code | ID | 1-1 | R |  |  | I, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM09 must be present. |
| CLM09 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CLM09 must be valid values. |
| CLM10 | Patient Signature Source Code | ID | 1-1 | S |  |  | P | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CLM10 must be "P". |
| CLM11 | RELATED CAUSES INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2300.DTP with DTP01 $=439$ is present, then 2300.CLM11 must be present. |
| CLM11-1 | Related Causes Code | ID | 2-3 | R |  |  | AA, EM, OA | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM11-1 must be present. |
| CLM11-1 | Related Causes Code | ID | 2-3 | R |  |  | AA, EM, OA | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CLM11-1 must be valid values. |
| CLM11-2 | Related Causes Code | ID | 2-3 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300.CLM11-2 is present 2300.CLM11-1 must be present. |
| CLM11-2 |  |  |  |  |  |  | AA, EM, OA | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CLM11-2 must be valid values. |
| CLM11-3 | Related Causes Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CLM11-4 | Auto Accident State or Province Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2300.CLM11-1 or 2300.CLM11-2 is "AA", then 2300.CLM11-4 must be present. |
| CLM11-4 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" | If 2300. CLM11-4 must be a valid State Code. |
| CLM11-5 | Country Code | ID | 2-3 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2300.CLM11-1 or 2300.CLM11-2 is "AA" and 2300.CLM11-4 is not present, then 2300.CLM11-5 must be present. |
| CLM11-5 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 680: "Entity's Country" | 2300.CLM11-5 must be a valid Country Code. |
| CLM12 | Special Program Indicator | ID | 2-3 | S |  |  | 02, 03, 05, 09 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CLM12 must be valid values. |
| CLM13 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CLM14 | Level of Service Code | ID | 1-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CLM15 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CLM16 | Participation Agreement | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CLM17 | Claim Status Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CLM18 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CLM19 | Claim Submission Reason Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CLM20 | Delay Reason Code | ID | 1-2 | S |  |  | $\begin{gathered} 1,2,3,4,5,6,7,8, \\ 9,10,11,15 \\ \hline \end{gathered}$ | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CLM20 must be valid values. |
| DTP | DATE - ONSET OF CURRENT ILLNESS OR SYMPTOM |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "431" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 431 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "431". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Onset of Current Illness or Injury Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 397: "Date of onset/exacerbation of illness/condition" CSC 510: "Future date" | 2300.DTP03 must not be a future date. |
| DTP | DATE - INITIAL TREATMENT |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "454" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 454 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "454". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Initial Treatment Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 510: "Future date" CSC 701:" "nitial Treatment-Date" | 2300.DTP03 must not be a future date. |
| DTP | DATE - DATE LAST SEEN |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "304" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 304 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be"304". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Last Seen Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP | DATE - ACUTE MANIFESTATION |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2300.CR208 = "A" or "M" then 2300.DTP with DTP01 = "453" must be present. |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2300.DTP with DTP01 = "453" is allowed. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/I } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 453 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "453". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Acute Manifestation Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" TBD28: "Acute Manifestation Date" | 2300.DTP03 must not be a future date. |
| DTP | DATE - ACCIDENT |  | 1 | S | 2300 |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2300.CLM11-1 or CLM11-2 = "AA" or "OA" then 2300.DTP with DTP01 = "439" must be present. |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "439" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 439 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "439". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8, | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Accident Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 248: "Accident date, state, descrintion and cause" | 2300.DTP03 must not be a future date. |
| DTP | DATE-LAST MENSTRUAL PERIOD |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "484" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 484 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "484". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Last Menstrual Period Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 191: "Date of Last Menstrual Period (LMP)" | 2300.DTP03 must not be a future date. |
| DTP | DATE - LAST X-RAY |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "455" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 455 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "455". |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Last X-Ray Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 210: "Date of the last x-rav." | 2300.DTP03 must not be a future date. |
| DTP | DATE - HEARING AND VISION PRESCRIPTION DATE |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "471" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 471 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "471". |
| DTP02 | Date Time Period Format Oualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Prescription Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 214: "Original date of orescrintion/orders/referral" | 2300.DTP03 must not be a future date. |
| DTP | DATE - DISABILITY DATES |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "314", "360" or " 361 " is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 314, 360, 361 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be valid values. |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8, RD8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be valid values. |
| DTP03 | Disability From Date | AN | 1-35 | R |  |  | CCYYMMDD or CCYYMMDDCCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | If 2300.DTP02 = "D8" then 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | If 2300.DTP02 = "RD8" then 2300.DTP03 must be a valid date in CCYYMMDDCCYYMMDD format. |
| DTP | DATE - LAST WORKED |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "297" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 297 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "297". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Last Worked Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 581: "Last Worked Date" | 2300.DTP03 must not be a future date. |
| DTP | DATE - AUTHORIZED RETURN TO WORK |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "296" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 296 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "296". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Work Return Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP | DATE - ADMISSION |  | 1 | S | 2300 |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 189: "Facility admission date" | If 2300.CLM05-1 or 2400.SV105 = "21", " 51 " or " 61 " then 2300.DTP with DTP01 = " 435 " must be present. |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "435" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 435 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "435". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Related Hospitalization Admission Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 394: "Date(s) of most recent hospitalization related to service" | 2300.DTP03 must not be a future date. |
| DTP | DATE - DISCHARGE |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "096" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 096 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "096". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Related Hospitalization Discharge Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 394: "Related Hospitalization Discharge_Date" | 2300.DTP03 must not be a future date. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP | DATE - ASSUMED AND RELINQUISHED CARE DATES |  | 2 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iteration of 2300.DTP with DTP01 = "090" or "091" are allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 090, 091 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be valid values. |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Assumed or Relinquished Care Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP | DATE - PROPERTY AND CASUALTY DATE OF FIRST CONTACT |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "444" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 444 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "444". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Order Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| DTP | DATE - REPRICER RECEIVED DATE |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "050" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 050 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "050". |
| DTP02 | $\underset{\substack{\text { Date Time Period Format } \\ \text { Qualifier }}}{ }$ | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |
| DTP03 | Order Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |
| PWK | CLAIM SUPPLEMENTAL INFORMATION |  | 10 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of 2300.PWK are allowed. |
| PWK01 | Attachment Report Type Code | ID | 2-2 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.PWK01 must be present. |
| PWK01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.PWK01 must be valid values. |
| PWK02 | Attachment Transmission Code | ID | 1-2 | R |  |  | $\begin{array}{\|c\|} \hline \mathrm{AA}, \mathrm{BM}, \mathrm{EL}, \mathrm{EM}, \mathrm{FT}, \\ \mathrm{FX} \\ \hline \end{array}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.PWK02 must be present. |
| PWK02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.PWK02 must be valid values. |
| PWK03 | Report Copies Needed | NO | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK04 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK05 | Identification Code Qualifier | ID | 1-2 | S |  |  | AC | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | When 2300.PWK05 is present, 2300.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |
| PWK05 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.PWK05 must be "AC". |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PWK06 | Attachment Control Number | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | When 2300.PWK06 is present, 2300.PWK02 must be "BM", "EL", "EM", "FX" or "FT" |
| PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2300.PWK06 must be 2-50 characters. |
| PWK06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 489: "Attachment Control Number" |  |
| PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.PWK06 must be populated with accepted AN characters. |
| PWK06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 489: "Attachment Control Number" |  |
| PWK06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.PWK06 must contain at least two nonspace characters. |
| PWK07 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK08 | ACTIONS INDICATED |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK09 | Request Category Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CN1 | CONTRACT INFORMATION |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300.CN1 must not be present. |
| AMT | PATIENT AMOUNT PAID |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.AMT is allowed. |
| AMT01 | Amount Qualifier Code | ID | 1-3 | R |  |  | F5 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.AMT01 must be present. |
| AMT01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.AMT01 must be "F5". |
| AMT02 | Patient Amount Paid | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.AMT02 must be numeric. |
| AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.AMT02 must be $<=99,999.99$. |
| AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 183: "Amount entity has paid" FIC عم "Patient" |  |
| AMT02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 183: "Amount entity has paid" Ele_"Patient" | 2300.AMT02 must be >= 0 . |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 183: "Amount entity has paid" EIC_CO "Patient" | 2300.AMT02 is limited to 0,1 or 2 decimal positions. |
| AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | SERVICE AUTHORIZATION EXCEPTION CODE |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $\mathbf{2 3 0 0}$.REF with REF01 = " 4 N " is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 4N | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "4N". |
| REF02 | Service Authorization Exception Code | AN | 1-50 | R |  |  | 1, 2, 3, 4, 5, 6, 7 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF02 must be valid values. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | MANDATORY MEDICARE (SECTION 4081) CROSSOVER INDICATOR |  | 1 | S | 2300 |  |  | 999 | E | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300.REF with REF01 = "F5" must not be present. |
| REF | MAMMOGRAPHY CERTIFICATION NUMBER |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "EW" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | EW | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be"EW". |
| REF02 | Mammography Certification Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" |  |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 252: "Authorization /certification number" (MAY NOT BE SPECIFIC ENOUGH FOR MAMMOGRAPHY |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" |  |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 252: "Authorization /certification number" (MAY NOT BE SPECIFIC ENOUGH FOR MAMMOGRAPHY CERT \#) |  |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 252: "Authorization/certification number" | 2300.REF02 must be a valid Mammography Certification Number. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | REFERRAL NUMBER |  | 1 | S | 2300 |  |  | 999 | R | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "9F" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9F | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be"9F". |
| REF02 | Prior Authorization or Referral Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC. 48- "referral/Authorization" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 511: "Invalid character" CSC 48: "Referral/authorization." |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | PRIOR AUTHORIZATION |  | 1 | S | 2300 |  |  | 999 | R | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "G1" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "G1". |
| REF02 | Prior Authorization or Referral Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 252: "Authorization/Certification Number" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 252: "Authorization/ certification numberr" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF | PAYER CLAIM CONTROL NUMBER |  | 1 | S | 2300 |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not support this qualifier." | 2300.REF with REF01 = "F8" must not be present. |
| REF | CLINICAL LABORATORY IMPROVEMENT AMENDMENT (CLIA) NUMBER |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "X4" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | X4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "X4". |
| REF02 | Clinical Laboratory Improvement Amendment Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 630: "Referring CLIA Number" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 630: "Referring CLIA Number" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | REPRICED CLAIM NUMBER |  | 1 | S | 2300 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only one iteration of 2300.REF with REF01 = "9A" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9A | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "9A". |
| REF02 | Repriced Claim Reference Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 702: "Repriced Claim Reference Number" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 702: "Repriced Claim Reference Number" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | ADJUSTED REPRICED CLAIM NUMBER |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2300.REF with REF01 $=$ " 9 C " is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9 C | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF01 must be "9C". |
| REF02 | Adjusted Repriced Line Item Reference Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. REF02 must contain at least one non- space character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 517: "Adjusted Repriced Claim Reference Number" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 517: "Adjusted Repriced Claim Reference Number" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | INVESTIGATIONAL DEVICE EXEMPTION NUMBER |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $\mathbf{2 3 0 0}$.REF with REF01 = "LX" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | LX | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "LX". |
| REF02 | Investigational Device Exemption Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 579: "Investigational Device Exemntion Identifier" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 579: "Investigational Device Exemntion_dentifier" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | CLAIM IDENTIFIER FOR TRANSMISSION INTERMEDIARIES |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "D9" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | D9 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "D9". |
| REF02 | Clearinghouse Trace Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. REF02 must contain at least one non- space character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-20 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 543: "Clearinghouse or Value Added Network Trace" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 543: "Clearinghouse or Value Added Network Trace" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | MEDICAL RECORD NUMBER |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "EA" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | EA | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "EA". |
| REF02 | Medical Record Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. REF02 must contain at least one non- space character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 588: "Medical Record Number" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 588: "Medical Record Number" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | DEMONSTRATION PROJECT IDENTIFIER |  | 1 | S | 2300 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only one iteration of 2300.REF with REF01 = "P4" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | P4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "P4". |
| REF02 | Demonstration Project Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 556: "Demonstration Project Identifier" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | CARE PLAN OVERSIGHT |  | 1 | S | 2300 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only one iteration of 2300.REF with REF01 = "1J" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 1 J | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "1J". |
| REF02 | Care Plan Oversight Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> TBD27: "Care Plan Oversight Number" | 2300.REF02 must be valid according to the NPI algorithm. |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Prov TBD27: "Care Plan Oversight Number" | The first position of 2300 .REF02 must be a "1". |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| K3 | FILE INFORMATION |  | 10 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of K3 are allowed. |
| K301 | Fixed Format Information | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.K301 must be present. |
| K301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. K301 must contain at least one non- space character. |
| K301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.K301 must be 1-80 characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| K301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 569: "Fixed Format Information" |  |
| K301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.K301 must be populated with accepted AN characters. |
| K301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 569: "Fixed Format Information" |  |
| K302 | Record Format Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| K303 | COMPOSITE UNIT OF MEASURE |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NTE | CLAIM NOTE |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.NTE is allowed. |
| NTE01 | Note Reference Code | ID | 3-3 | R |  |  | $\begin{gathered} \hline \text { ADD, CER, DCP, } \\ \text { DGN, TPO } \\ \hline \end{gathered}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.NTE01 must be present. |
| NTE01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.NTE01 must be valid values. |
| NTE02 | Claim Note Text | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.NTE02 must be present. |
| NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must contain at least one nonspace character. |
| NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.NTE02 must be 1-80 characters. |
| NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 297: "Medical Notes/Renort" |  |
| NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must be populated with accepted AN characters. |
| NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 297: "Medical Notes/Renort" |  |
| CR1 | AMBULANCE TRANSPORT INFORMATION |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CR1 is allowed. |
| CR1 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 337: "Ambulance certification/documentation" | If 2300. CR1 is present, 2300.CLM05-1 must be "41" or "42". |
| CR101 | Unit or Basis for Measurement Code | ID | 2-2 | S |  |  | LB | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CR101 must be "LB". |
| CR102 | Patient Weight | R | 1-10 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If $2300 . C R 101$ is present, then 2300.CR102 must be present. |
| CR102 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 273: "Weight" <br> CSC 337: "Ambulance <br> cortification/documentation" | 2300.CR102 must be > 0 and <= 9,999.99 |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CR103 | Ambulance Transport Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR104 | Ambulance Transport Reason Code | ID | 1-1 | R |  |  | A, B, C, D, E | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CR104 must be present. |
| CR104 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . C R 104$ must be valid values. |
| CR105 | Unit or Basis for Measurement Code | ID | 2-2 | R |  |  | DH | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CR105 must be present. |
| CR105 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CR105 must be "DH". |
| CR106 | Transport Distance | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CR106 must be present. |
| CR106 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.CR106 must be numeric. |
| CR106 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 267: "Number of miles patient was transported" | 2400.CR106 must be => 0 |
| CR106 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 267 "Number of miles patient was transnorted" | 2400.CR106 must be 1-4 digits. |
| CR107 | Address Information | AN | 1-55 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR108 | Address Information | AN | 1-55 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR109 | Round Trip Purpose Description | AN | 1-80 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.CR109 must be 1-80 characters. |
| CR109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 266: "Facility point of origin and destination - ambulance" |  |
| CR109 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.CR109 must be populated with accepted AN characters. |
| CR109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 266: "Facility point of origin and destination - ambulance" |  |
| CR109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.CR109 must contain at least one nonspace character. |
| CR110 | Stretcher Purpose Description | AN | 1-80 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.CR110 must contain at least one nonspace character. |
| CR110 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.CR110 must be 1-80 characters. |
| CR110 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> TBD24: "Stretcher Purnose: |  |
| CR110 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.CR110 must be populated with accepted AN characters. |
| CR110 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" TBD24: "Stretcher Purpose: |  |

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| Segment or Element | Description | ID | Min. <br> Max | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CR2 | SPINAL MANIPULATION SERVICE INFORMATION |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CR2 is allowed. |
| CR201 | Treatment Series Number | NO | 1-9 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| CR202 | Treatment Count | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR203 | Subluxation Level Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR204 | Subluxation Level Code | ID | 2-3 | N/U |  |  |  | 999 | E | \|K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR205 | Unit or Basis for Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR206 | Treatment Period Count | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR207 | Monthly Treatment Count | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR208 | Patient Condition Code | ID | 1-1 | R |  |  | A, C, D, E, F, G, M | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CR208 must be present. |
| CR208 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CR208 must be valid values. |
| CR209 | Complication Indicator | ID | 1-1 | N/U |  |  |  | 999 | E | $\qquad$ Used" Element Present" | Must not be present. |
| CR210 | Patient Condition Description |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.CR210 must contain at least one nonspace character. |
| CR210 |  | AN | 1-80 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.CR210 must be 1-80 characters. |
| CR210 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD26: "Patient Condition Descrintion" |  |
| CR210 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.CR210 must be populated with accepted AN characters. |
| CR210 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" TBD26: "Patient Condition Descrintion" |  |
| CR211 | Patient Condition Description |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.CR211 must contain at least one nonspace character. |
| CR211 |  | AN | 1-80 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.CR211 must be 1-80 characters. |
| CR211 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD26: "Patient Condition Descrintion" |  |
| CR211 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.CR211 must be populated with accepted AN characters. |
| CR211 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" TBD26: "Patient Condition Descrintion" |  |
| CR212 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CRC | AMBULANCE CERTIFICATION |  | 3 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only three iterations of 2300.CRC with CRC01 = "07" are allowed. |
| CRC |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 337: "Ambulance certification/documentation" | If 2300.CRC is present, 2300.CLM05-1 must be "41" or "42". |
| CRC01 | Code Category | ID | 2-2 | R |  |  | 07 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC01 must be present. |
| CRC01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC01 must be "07". |
| CRC02 | Certification Condition Indicator | ID | 1-1 | R |  |  | N, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC02 must be present. |
| CRC02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC02 must be valid values. |
| CRCO3 | Condition Code | ID | 2-3 | R |  |  | $\begin{gathered} 01,04,05,06,07, \\ 08,09,12 \end{gathered}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC03 must be present. |
| CRC03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC03 must be valid values. |
| CRC04 | Condition Code | ID | 2-3 | S |  |  | $\begin{gathered} 01,04,05,06,07, \\ 08,09,12 \\ \hline \end{gathered}$ | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . C R C 04$ must be valid values. |
| CRC05 | Condition Code | ID | 2-3 | S |  |  | $\begin{gathered} 01,04,05,06,07, \\ 08,09,12 \\ \hline \end{gathered}$ | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300.CRC05 can only be present if 2300.CRC04 is present. |
| CRC05 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{CRC05}$ must be valid values. |
| CRC06 | Condition Code | ID | 2-3 | S |  |  | $\begin{gathered} \hline 01,04,05,06,07, \\ 08,09,12 \\ \hline \end{gathered}$ | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300.CRC06 can only be present if 2300.CRC05 is present. |
| CRC06 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC06 must be valid values. |
| CRC07 | Condition Code | ID | 2-3 | S |  |  | $\begin{gathered} 01,04,05,06,07, \\ 08,09,12 \\ \hline \end{gathered}$ | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300.CRC07 can only be present if 2300.CRC06 is present. |
| CRC07 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{CRC07}$ must be valid values. |
| CRC | PATIENT CONDITION INFORMATION: VISION |  | 3 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only three iterations of 2300.CRC with CRC01 = "E1", "E2" or "E3" are allowed. |
| CRC01 | Code Category | ID | 2-2 | R |  |  | E1, E2, E3 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC01 must be present. |
| CRC01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC01 must be valid values. |
| CRC02 | Certification Condition Indicator | ID | 1-1 | R |  |  | N, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC02 must be present. |
| CRC02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC02 must be valid values. |
| CRC03 | Condition Code | ID | 2-3 | R |  |  | L1, L2, L3, L4, L5 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC03 must be present. |
| CRC03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC03 must be valid values. |
| CRC04 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC04 must be valid values. |
| CRC05 | Condition Code | ID | 2-3 | S |  |  | L1, L2, L3, L4, L5 | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300.CRC05 can only be present if 2300.CRC04 is present. |
| CRC05 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{CRC05}$ must be valid values. |
| CRC06 | Condition Code | ID | 2-3 | S |  |  | L1, L2, L3, L4, L5 | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300.CRC06 can only be present if 2300.CRC05 is present. |
| CRC06 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC06 must be valid values. |
| CRC07 | Condition Code | ID | 2-3 | S |  |  | L1, L2, L3, L4, L5 | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300.CRC07 can only be present if 2300.CRC06 is present. |
| CRC07 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{CRC07}$ must be valid values. |
| CRC | HOMEBOUND INDICATOR |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CRC with CRC01 = "75" is allowed. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CRC01 | Code Category | ID | 2-2 | R |  |  | 75 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC01 must be present. |
| CRC01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC01 must be "75". |
| CRC02 | Certification Condition Indicator | ID | 1-1 | R |  |  | Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC02 must be present. |
| CRC02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC02 must be "Y". |
| CRC03 | Homebound Indicator | ID | 2-3 | R |  |  | IH | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC03 must be present. |
| CRC03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC03 must be "IH". |
| CRC04 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CRC05 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CRC06 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CRC07 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CRC | EPSDT REFERRAL |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CRC with CRC01 = "ZZ" is allowed. |
| CRC01 | Code Category | ID | 2-2 | R |  |  | zZ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC01 must be present. |
| CRC01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC01 must be "ZZ". |
| CRC02 | Certification Condition Indicator | ID | 1-1 | R |  |  | N, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC02 must be present. |
| CRC02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{CRC02}$ must be valid values. |
| CRC03 | Condition Code | ID | 2-3 | R |  |  | AV, NU, S2, ST | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC03 must be present. |
| CRC03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | If $2300 . C R C 02$ is " $Y$ ", 2300.CRC03 must be valid values. |
| CRC03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | If $2300 . C R C 02$ is "N", 2300.CRC03 must be "NU". |
| CRC04 | Condition Code | ID | 2-3 | S |  |  | AV, NU, S2, ST | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.CRC04 must be valid values. |
| CRC05 | Condition Code | ID | 2-3 | S |  |  | AV, NU, S2, ST | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{CRC05}$ must be valid values. |
| CRC06 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CRC07 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI | HEALTH CARE DIAGNOSIS CODE |  | 1 | R | 2300 |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2300. HI with HI01-1 = "BK" must be present. |
| HI |  |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2300. HI with HI01-1 = "BK" or "ABK" must be present. |
| HI |  |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2300. HI with HI01-1 = "ABK" must be present. |
| HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .HI with HI01-1 = "BK" is allowed. |
| Hi |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with HI01-1 = "BK" or "ABK" is allowed. |
| HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.HI with HI01-1 = "ABK" is allowed. |
| HIO1 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| HI01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABK, BK | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300. HI01-1 must be present. |
| H101-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H O1-1 must = "BK" |
| H101-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO1-1}$ must be "BK" or "ABK". |

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| Segment or Element | Description | ID | $\begin{aligned} & \text { min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 101-1$ must = "ABK" |
| H01-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.H101-2 must be present. |
| H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 254: "Primary diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "1" and 2300.HI01-1 is "BK" then 2300.HIO1-2 must be a valid ICD-9-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-9-CM Diagnosis Code list. |
| H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 254: "Primary diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "1" and 2300.HIO1-1 is "BK" then 2300.H01-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-9-CM Diagnosis Code list. |
| H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 254: "Primary diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "1" and 2300. HI01-1 is "ABK" then 2300.HI01-2 must be a valid ICD-10CM Principal Diagnosis code on the date in 2400 DTP03 when DTP01 = "472" |
| H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 254: "Primary diagnosis code" TBDO4: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is " 1 " \& 2300. H 101 -1 is "ABK" then 2300. HIO1-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the CMS subset of the ICD-10-CM Diagnosis Codes. |
| H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 254: "Primary diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "1" and 2300. H101-1 is "BK" then 2300. HIO1-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. |
| H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 254: "Primary diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines" | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not " 1 " and 2300.HIO1-1 is "BK", 2300.HI01-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. |
| H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 254: "Primary diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "1" (all lines) and 2300.HI01 1 is "ABK" then 2300.HI01-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim |
| H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 254: "Primary diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines" | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "1" (all lines) and 2300.HI01 1 is "ABK", 2300. HIO1-2 must be a valid ICD 10-CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{gathered} \hline \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HIO1-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.HI01-2 must not contain a "." |
| HIO1-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 254: "Primary diagnosis code" |  |
| H101-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO1-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO1-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H102 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  |  |  |  |  |
| H102-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H102-1 must be "BF" or "ABF". |
| H102-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO2}-1$ must = "BF" |
| H102-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H I02-1 must = "ABF" |
| HIO2-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "2" and 2300. H102-1 is "BF" then 2300. H102-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9CM Diannosis Code list |
| HIO2-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "2" and $2300 . \mathrm{HIO2}-1$ is "BF" then 2300.HIO2-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the CMS subset of the ICD-9-CM Diagnosis Code list. |
| HIO2-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "2" and 2300.HIO2-1 is "ABF" then 2300. HIO2-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-10-CM Diaanosis Code list |
| H102-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "2" \& 2300.HIO2-1 is "ABF" then 2300.HIO2-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-10-CM Diagnosis cades |
| HIO2-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not " 2 " and 2300. $\mathrm{H} 102-1$ is "BF" then 2300.HIO2-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/I } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HIO2-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400. SV107-1, SV107-2, SV107-3 \& SV107-4 are not "2" and 2300.HIO2-1 is "BF", 2300.HIO2-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. |
| HIO2-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "2" and 2300.H102-1 is "ABF" then 2300.HIO2-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim |
| HIO2-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "2" and 2300.H102-1 is "ABF", 2300.HIO2-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. |
| H102-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data <br> Element" | 2300.HIO2-2 must not contain a "." |
| HIO2-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaanosis code" |  |
| HIO2-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H103 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO}$ can only be present if 2300.HI02 is present. |
| H103-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H I03-1 must be "BF" or "ABF". |
| HIO3-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HIO3-1 must = "BF" |
| H103-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 103-1$ must = "ABF" |
| HIO3-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "3" and 2300.H03-1 is "BF" then 2300.HIO3-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-9- CM Diaanosis Code list |
| HIO3-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 3 " and $2300 . \mathrm{HIO} 0-1$ is "BF" then 2300. HIO3-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-9-CM Diagnosis Code list. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HIO3-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 3 " and $2300 . \mathrm{HIO} 0-1$ is "ABF" then 2300. HIO3-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 $=$ " 472 ", based on the ICD-10-CM Diaanosis Conde list |
| HIO3-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "3" \& 2300.HI03-1 is "ABF" then 2300.HIO3-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the CMS subset of the ICD-10-CM Diagnosis Codec |
| HIO3-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not " 3 " and $2300 . \mathrm{H} 103-1$ is "BF" then 2300.HIO3-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. |
| H103-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not " 3 " and 2300. H103-1 is "BF", 2300.HIO3-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. |
| HIO3-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not " 3 " and 2300. H103-1 is "ABF" then 2300.HIO3-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim |
| HIO3-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not " 3 " and 2300. H103-1 is "ABF", 2300.HIO3-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. |
| HIO3-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.HIO3-2 must not contain a "." |
| HIO3-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaanosis code" |  |
| HIO3-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO3-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO3-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO3-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H104 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300. HI04 can only be present if $2300 . \mathrm{HIO} 3$ is present. |


| Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|l} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{aligned} & 5010 \\ & \text { values } \end{aligned}$ | $\begin{aligned} & \hline \text { TA1/1 } \\ & 9991 \end{aligned}$ $277 C A$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H104-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H104-1 must be "BF" or "ABF". |
| H104-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H H04-1 must = "BF" |
| H104-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO4-1}$ must = "ABF" |
| H104-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | c | CsCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is "4" and 2300.H104-1 is "BF" then 2300.HIO4-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9CM Diannosis Cade list |
| H104-2 |  |  |  |  |  |  |  | 277 | c | cSCC A7: "Acknowledgement Rejected for Invalid Information... CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400 .SV107-1, SV107-2, SV107-3, or SV107-4 is "4" and 2300.H104-1 is "BF" then 2300. HI04-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-9-CM Diagnosis Code list. |
| H104-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 255: "Diagnosis code" | f 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "4" and 2300.HIO4-1 is "ABF" then $2300 . \mathrm{H} 04-2$ must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-10-CM Diannosis Cade list |
| H104-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement Rejected for Invalid Information... CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "4" \& 2300. H104-1 is "ABF" then 2300. H104-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-10-CM Diagnosis cones |
| H104-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | if 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "4" and 2300. H104-1 is "BF" then 2300. H104-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. |
| H104-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "4" and 2300.HI04-1 is "BF", 2300.HI04-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. |
| H104-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "4" and 2300.H104-1 is "ABF" then 2300.H04-2 must be a a alid ICD- 10-CM Principal Diagnosis code for every date in the date of service range for this claim |
| H104-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "4" and 2300.H104-1 is "ABF", 2300.HIO4-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. |
| H104-2 |  |  |  |  |  |  |  | 999 | E | \|K403 = 6: "Invalid Character in Data Element" | 2300.H104-2 must not contain a "." |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HIO4-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaanosis code" |  |
| H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI04-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO4-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H105 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300.HI05 can only be present if 2300 .HI04 is present. |
| H105-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 105-1$ must be "BF" or "ABF". |
| H105-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H I05-1 must = "BF" |
| H105-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H I05-1 must = "ABF" |
| H105-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 5 " and $2300 . \mathrm{HIO5-1}$ is "BF" then 2300.H105-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9CM Diannosis Code list |
| H105-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 5 " and $2300 . \mathrm{HI} 05-1$ is "BF" then 2300. HI05-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-9-CM Diagnosis Code list. |
| HIO5-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 5 " and $2300 . \mathrm{H} 105-1$ is "ABF" then 2300. HO5-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-10-CM Diaanosis Code list |
| HIO5-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 5 " \& 2300. H105-1 is "ABF" then 2300. HIO5-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-10-CM Diagnosis cades |
| HIO5-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not " 5 " and $2300 . \mathrm{HI} 05-1$ is "BF" then 2300.HI05-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/I } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H105-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400. SV107-1, SV107-2, SV107-3 \& SV107-4 are not " 5 " and 2300.HIO5-1 is "BF", 2300.HIO5-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. |
| HIO5-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not " 5 " and $2300 . \mathrm{H} 105-1$ is "ABF" then 2300.HI05-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim |
| HIO5-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not " 5 " and 2300.HI05-1 is "ABF", 2300.HI05-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. |
| H105-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data <br> Element" | 2300.HI05-2 must not contain a "." |
| HIO5-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaanosis code" |  |
| H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO5-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO5-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H106 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO6}$ can only be present if 2300.H05 is present. |
| H.06-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H106-1 must be "BF" or "ABF". |
| HIO6-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HIO6-1 must = "BF" |
| H106-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{HI} 06-1$ must = "ABF" |
| HIO6-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "6" and 2300. HIO6-1 is "BF" then 2300. HI06-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTPO1 = " 472 ", based on the ICD-9CM Diannosis Code list |
| HIO6-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 6 " and $2300 . \mathrm{H} 106-1$ is "BF" then 2300. HIO6-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-9-CM Diagnosis Code list. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HIO6-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "6" and $2300 . \mathrm{H} 106-1$ is "ABF" then 2300 . HIO6-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 $=$ " 472 ", based on the ICD-10-CM Diaanosis Code list |
| HIO6-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 6 " \& $2300 . \mathrm{H} 06-1$ is "ABF" then 2300.HIO6-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-10-CM Diagnosis cades |
| HIO6-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "6" and 2300.H106-1 is "BF" then 2300.HIO6-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. |
| HIO6-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "6" and 2300.HI06-1 is "BF", 2300.HI06-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. |
| HIO6-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "6" and 2300.HIO6-1 is "ABF" then 2300.HIO6-2 must be a valid ICD- 10-CM Principal Diagnosis code for every date in the date of service range for this claim |
| H106-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not " 6 " and 2300.HI06-1 is "ABF", 2300.HI06-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. |
| HIO6-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.HIO6-2 must not contain a "." |
| HIO6-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaanosis code" |  |
| H106-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO6-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO6-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO6-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO6-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300.HIO7 can only be present if 2300.HI06 is present. |


| Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|l} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{aligned} & 5010 \\ & \text { values } \end{aligned}$ | $\begin{aligned} & \hline \text { TA1/1 } \\ & 9991 \end{aligned}$ $277 C A$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H07-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H07-1 must be "BF" or "ABF". |
| H107-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H H07-1 must = "BF" |
| H107-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H107-1}$ must = "ABF" |
| H07-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | c | CsCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "7" and 2300. H107-1 is "BF" then 2300. H107-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9CM Diannosis Cade list |
| H107-2 |  |  |  |  |  |  |  | 277 | c | cSCC A7: "Acknowledgement Rejected for Invalid Information... CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400 .SV107-1, SV107-2, SV107-3, or SV107-4 is "7" and 2300.H107-1 is "BF" then 2300. HI07-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-9-CM Diagnosis Code list. |
| H107-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 255: "Diagnosis code" | f2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "7" and 2300.HIO7-1 is "ABF" then 2300.H07-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-10-CM Diannosis Cade list |
| H07-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement Rejected for Invalid Information... CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "7" \& 2300. H107-1 is "ABF" then 2300. H107-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-10-CM Diagnosis cades |
| H107-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | if 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "7" and $2300 . \mathrm{HIO7}-1$ is "BF" then 2300.H107-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. |
| H07-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines" | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "7" and 2300. H107-1 is "BF", 2300.H107-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. |
| H107-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "7" and 2300.H107-1 is "ABF" then 2300.H107-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim |
| H107-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "7" and 2300.H107-1 is "ABF", 2300.HIO7-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. |
| H07-2 |  |  |  |  |  |  |  | 999 | E | \|K403 = 6: "Invalid Character in Data Element" | 2300.H107-2 must not contain a "." |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HI07-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaanosis code" |  |
| HI07-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI07-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H108 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300.HIO8 can only be present if 2300 .HI07 is present. |
| H108-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO} 08-1$ must be "BF" or "ABF". |
| H108-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{HI} 08-1$ must = "BF" |
| H108-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H I08-1 must = "ABF" |
| H108-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 8 " and $2300 . \mathrm{H} 08-1$ is "BF" then 2300 .HIO8-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-9CM Diannosis Conde list |
| HIO8-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is "8" and $2300 . \mathrm{HI} 08-1$ is "BF" then 2300.HI08-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-9-CM Diagnosis Code list. |
| HIO8-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "8" and 2300. H108-1 is "ABF" then 2300 .HI08-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-10-CM Diaanosis Code list |
| HIO8-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is "8" \& 2300.HI08-1 is "ABF" then 2300. H108-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-10-CM Diagnosis codes |
| HIO8-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" | If 2400.SV107-1, SV107-\$2, SV107-3, and SV107-4 are not " 8 " and $2300 . \mathrm{H} 108-1$ is "BF" then 2300.HIO8-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11/ } \\ 9999 \\ 277 C A \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H108-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "8" and 2300. HI08-1 is "BF", 2300.H 108 - 2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. |
| H108-2 |  |  |  |  |  |  |  | 277 | c | CsCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code | If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "8" and 2300 .H108-1 is "ABF" then 2300. HIO8-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim |
| H108-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". | If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not " 8 " and 2300. $\mathrm{HI} 08-1$ is "ABF", 2300.HI08-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. |
| H08-2 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { \|K403 = } 6: \text { "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.H108-2 must not contain a ${ }^{\text {"." }}$ |
| H008-2 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 511: "Invalid character" } \\ & \text { CSC 255:" }{ }^{\text {Diaanosis code" }} \end{aligned}$ |  |
| H108-3 | Date Time Period Format | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| H108-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |
| H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK03 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| H108-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| H09 | HEALTH CARE CODE |  |  | s |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | $2300 . \mathrm{HIO9}$ can only be present if $2300 . \mathrm{HIO} 08$ is present. |
| H109-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.HIO9-1 must be "BF" or "ABF". |
| H109-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.H109-2 must be present. |
| H109-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H109-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HIO9-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H109-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H109-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H109-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H109-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H109-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H109-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" |  |
| HIO9-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 255: "Diaanosis code" |  |
| H109-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO9-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO9-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |
| H10 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300. HI10 can only be present if 2300 .HI09 is present. |

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| Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | Usage | Loop | $\underset{\text { Loop }}{\text { Repeat }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{aligned} & \hline \text { TA1/ } \\ & 999 / \end{aligned}$ 277CA | $\begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H110-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK 403 = 7: "Invalid Code Value" | 2300.H110-1 must be "BF" or "ABF". |
| H110-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.H110-2 must be present. |
| H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBDO4: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code |  |
| H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines", |  |
| H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement Rejected for Invalid Information... CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H110-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6 : "Invalid Character in Data Element" |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HI10-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaanosis code" |  |
| H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300.HI11 can only be present if 2300 .HI10 is present. |
| H111-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BF" or "ABF". |
| H111-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.HI11-2 must be present. |
| H111-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H111-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H111-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| HI11-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H111-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{aligned} & 5010 \\ & \text { Values } \end{aligned}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H111-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H111-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H111-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H111-2 |  |  |  |  |  |  |  | 999 | E | \|K403 = 6: "Invalid Character in Data |  |
| HI11-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diannosis code" |  |
| H111-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H12 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2300. HI12 can only be present if 2300 .HI11 is present. |
| H112-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BF" or "ABF". |
| H112-2 | Diagnosis Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.H112-2 must be present. |
| HI12-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| HI12-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HI12-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H112-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H112-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H112-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| HI12-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" |  |
| H112-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis code" TBD04: "This code is not allowed under this payer's policy/contract/coverage guidelines". |  |
| H112-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" |  |
| HI12-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diannosis code" |  |
| H112-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H112-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HI | ANESTHESIA RELATED PROCEDURE |  | 1 | S | 2300 |  |  | 999 | R | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H101-1 = "BP" is allowed. |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| HIO1-1 | Code List Qualifier | ID | 1-3 | R |  |  | BP | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.H101-1 must be present. |
| HI01-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H101-1 must be "BP". |
| HIO1-2 | Anesthesia Related Surgical Procedure | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.H101-2 must be present. |
| H.01-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 465: "Principal Procedure Code for Service(s) Rendered" | 2300.HIO1-2 must be a valid HCPCS Principle Procedure code. |
| H101-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H101-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H102 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  |  |  |  |  |
| H102-1 | Code List Qualifier | ID | 1-3 | R |  |  | BO | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HIO2-1 must be "BO". |
| HIO2-2 | Anesthesia Related Surgical Procedure | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 454: "Procedure code for services rendered" | 2300.HIO2-2 must be a valid HCPCS Principle Procedure code. |
| HIO2-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H103 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| H06 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Flement Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |
| H110 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI | CONDITION INFORMATION |  | 2 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iteration of 2300. HI with HI01-1 = "BG" are allowed. |
| H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |
| H.01-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.HI01-1 must be present. |
| H101-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HI01-1 must be "BG". |
| HIO1-2 | Condition Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.HIO1-2 must be present. |
| HIO1-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HI01-2 must be a valid Condition code. |
| H101-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H101-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H02 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300. HIO1 is present then 2300 .HIO2 may be present. |
| H102-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H102-1 must be "BG". |
| HIO2-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HIO2-2 must be a valid Condition code. |
| HIO2-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO2-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H103 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300. HIO2 is present then 2300. HI03 may be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HIO3-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HIO3-1 must be "BG". |
| HIO3-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HI03-2 must be a valid Condition code. |
| HIO3-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO3-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO3-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H104 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO3}$ is present then $2300 . \mathrm{H} 04$ may be present. |
| H104-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO4-1}$ must be "BG". |
| HIO4-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HI04-2 must be a valid Condition code. |
| H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO4-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI04-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H105 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO4}$ is present then 2300 . H 05 may be present. |
| H105-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HI05-1 must be "BG". |
| HIO5-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HIO5-2 must be a valid Condition code. |
| H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO5-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO5-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO5-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H06 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | $\qquad$ |
| H106-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HI06-1 must be "BG". |
| HIO6-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HIO6-2 must be a valid Condition code. |
| HIO6-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO6-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO6-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H07 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | $\qquad$ |
| H107-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HI07-1 must be "BG". |
| HIO7-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HIO7-2 must be a valid Condition code. |
| H107-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H107-9 | Yes/No Condition or response $\qquad$ | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H108 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300. HIO7 is present then 2300 .HI08 may be present. |
| H108-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HI08-1 must be "BG". |
| HIO8-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HI08-2 must be a valid Condition code. |
| H108-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HIO8-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI08-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H008-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HI08-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H108-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300.HIO8 is present then 2300.HI09 may be present. |
| H109-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HI09-1 must be "BG". |
| HIO9-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HI09-2 must be a valid Condition code. |
| H109-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H10 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO9}$ is present then 2300 .HI10 may |
| H110-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H110-1 must be "BG". |
| HI10-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HI10-2 must be a valid Condition code. |
| H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300.HI10 is present then 2300.HI11 may be present. |
| H111-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HI11-1 must be "BG". |
| H111-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HI11-2 must be a valid Condition code. |
| H111-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H12 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI11 is present then 2300 .HI12 may be present. |
| H112-1 | Code List Qualifier | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BG". |
| HI12-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | 2300.HI12-2 must be a valid Condition code. |
| H112-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| H112-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| H112-9 | Yes/No Condition or response $\qquad$ | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HCP | CLAIM PRICING/REPRICING INFORMATION |  | 1 | S | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $\mathbf{2 3 0 0 .}$ HCP is allowed. |
| HCPO1 | Pricing Methodology | ID | 2-2 | R |  |  | $\begin{gathered} \hline 00,01,02,03,04, \\ 05,07,08,09,10, \\ 11.12 .13 .14 \end{gathered}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.HCP01 must be present. |
| HCP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HCP01 must be valid values. |
| HCP02 | Repriced Allowed Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.HCP02 must be present. |
| HCP02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.HCP02 must be <= 99,999.99 |
| HCP02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD15: "Repriced Allowed Amount" |  |
| HCP03 | Repriced Saving Amount | R | 1-18 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.HCP03 must be $<=99,999.99$ |
| HCP03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 637: "Repriced Saving Amount" |  |
| HCP04 | Repricing Organization Identifier | AN | 1-50 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP04 must contain at least one nonspace character. |
| HCP04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.HCP04 must be 1-50 characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HCP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 153: "Entity's ID Number" EIC TU Third Party Repricing Oramization (TPO) |  |
| HCP04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP04 must be populated with accepted AN characters. |
| HCP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 153: "Entity's ID Number" EIC TU Third Party Repricing Orcanization_(TP) |  |
| HCP05 | Repricing Per Diem or Flat Rate Amount | R | 1-9 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.HCP05 must be 1 to 9 digits. |
| HCP05 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 638: "Repricing Per Diem or Flat Rate_Amount" |  |
| HCP06 | Repriced Approved Ambulatory Patient Group Code | AN | 1-50 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP06 must contain at least one nonspace character. |
| HCP06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.HCP06 must be 1-50 characters. |
| HCP06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 635 "Repriced Approved Ambulatory Patient Groun" |  |
| HCP06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP06 must be populated with accepted AN characters. |
| HCP06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 635 "Repriced Approved Ambulatorv Patient_Groun" |  |
| HCP07 | Repriced Approved Ambulatory Patient Group Amount | R | 1-18 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.HCP07 must be <= 99,999.99 |
| HCP07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TDB18: "Repriced Approved Ambulatory Patient Group Amount" |  |
| HCP08 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HCP09 | Product or Service ID Qualifier | ID | 2-2 | S |  |  | ER, HC, IV, WK | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HCP10 | Procedure Code | AN | 1-48 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HCP11 | Unit or Basis for Measurement | ID | 2-2 | S |  |  | MJ, UN | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HCP12 | Repriced Approved Service Unit Count | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HCP13 | Reject Reason Code | ID | 2-2 | S |  |  | $\begin{gathered} \hline \mathrm{T} 1, \mathrm{~T} 2, \mathrm{~T} 3, \mathrm{~T} 4, \mathrm{~T} 5, \\ \mathrm{~T} 6 \\ \hline \end{gathered}$ | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HCP13 must be valid values. |
| HCP14 | Policy Compliance Code | ID | 1-2 | S |  |  | 1, 2, 3, 4, 5 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. HCP14 must be valid values. |
| HCP15 | Exception Code | ID | 1-2 | S |  |  | 1, 2, 3, 4, 5, 6 | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{HCP} 15$ must be valid values. |
| NM1 | REFERRING PROVIDER NAME Loop |  |  |  | 2310A | 2 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Two iterations of this loop are allowed. |
| NM1 | REFERRING PROVIDER NAME |  | 1 | S | 2310A |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310A.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | DN, P3 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310A.NM101 must be valid values. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | For the first iteration of the referring provider loop, 2310A.NM101 must be "DN". |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | For the second iteration of the referring provider loop, 2310A.NM101 must be "P3". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310A.NM102 must be "1". |
| NM103 | Referring Provider Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM103 must contain at least one non- space character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310A.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. DN Referrino Provider |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM103 must be populated with accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC: DN Referrina Provider |  |
| NM104 | Referring Provider First Name | AN | 1-35 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM104 must contain at least one nonspace character. |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310A.NM104 must be 1-35 characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC. DN Referrino Provider |  |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM104 must be populated with accepted AN characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC- DN Referrino Provider |  |
| NM105 | Referring Provider Middle Name | AN | 1-25 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM105 must contain at least one non- space character. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310A.NM105 must be 1-25 characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. DN Referrino Provider |  |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM105 must be populated with accepted AN characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC: DN Referrina Provider |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Referring Provider Name Suffix | AN | 1-10 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM107 must contain at least one non- space character. |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310A.NM107 must be 1-10 characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 125: "Entity's Name" <br> FIC. DN Referrina Provider |  |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM107 must be populated with accepted AN characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 125: "Entity's Name" <br> FIC. DN Referrino Provider |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | S |  |  | XX | 277 | C | CSCC A8: "Acknowledgement / Rejected for relational field in error." TBD01: "Situational segment/element required for adjudication." EIC: DN Referring Provider | 2310A.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier". |
| NM108 |  |  |  |  |  |  |  | 277 | C | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> TBD01: "Situational segment/element required for adjudication." <br> EIC: DN Referring Provider | 2310A.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310A.NM108 must be "XX". |
| NM109 | Referring Provider Identifier | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2310A.NM109 must be present if 2310A.NM108 is present. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: DN Referrina_Provider | 2310A.NM109 must be valid according to the NPI algorithm. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC. DN Referrina Provider | The first position of 2310A.NM109 must be a "1". |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC. DN Referrina Provider |  |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | REFERRING PROVIDER SECONDARY IDENTIFICATION |  | 3 | S | 2310A |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2310A.NM1 is present, 2310A.REF with REF01 = "1G" or "0B" may be present when 2310A.NM109 is not present. |
| REF |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Only two iterations of 2310A.REF with REF01 = "0B"or "IG" are allowed. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310A.REF must not be present. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310A.REF01 must be valid values. |
| REF02 | Referring Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | When 2310A.REF01 = "OB", 2310A.REF02 must contain at least one non-space character. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC: A8 "Acknowledgement / Rejected for relational field..." CSC 560: "Entity's Additional/Secondary Identifier" CSC 133: "Entity's UPIN" FIC- DN Referrino Provider | When 2310A.REF01 = "1G", 2310A.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | When 2310A.REF01 = "OB", 2310A.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 133: "Entity's UPIN" FIC. DN_Referrina Provider |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | When 2310A.REF01 = "OB", 2310A.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 133: "Entity's UPIN" FIC. DN Referrina Provider |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM1 | RENDERING PROVIDER NAME |  | 1 | S | 2310B | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310B.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 82 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310B.NM101 must be "82". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310B.NM102 must be valid values. |
| NM103 | Rendering Provider Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM103 must contain at least one nonspace character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310B.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. 82 Renderina Provider |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM103 must be populated with accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC. 82 Renderino Provider |  |
| NM104 | Rendering Provider First Name | AN | 1-35 | S |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | $\begin{aligned} & \text { If 2310B.NM102 = "2" then 2310B.NM104 } \\ & \text { must not be present. } \end{aligned}$ |
| NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310B. NM104 must contain at least one non- space character. |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310B.NM104 must be 1-35 characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC. 82 Renderino Provider |  |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM104 must be populated with accepted AN characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC. 82 Renderino Provider |  |
| NM105 | Rendering Provider Middle Name | AN | 1-25 | S |  |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | If 2310B.NM102 = "2" then 2310B.NM105 must not be present. |
| NM105 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310B.NM105 must contain at least one non- space character. |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310B.NM105 must be 1-25 characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. 82 Renderino Provider |  |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM105 must be populated with accepted AN characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC: 82 Renderina Provider |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Rendering Provider Name Suffix | AN | 1-10 | S |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | If 2310B.NM102 = "2" then 2310B.NM107 must not be present. |
| NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM107 must contain at least one non- space character. |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | If 2310B.NM107 must be 1-10 characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC. 82 Renderino Provider |  |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM107 must be populated with accepted AN characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" FlC: 82 Renderina Provider |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | S |  |  | XX | 277 | C | CSCC A8: "Acknowledgement / Rejected for relational field in error." TBD01: "Situational segment/element required for adjudication." EIC: 82 Rendering Provider | 2310B.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier". |
| NM108 |  |  |  |  |  |  |  | 277 | C | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." EIC: 82 Rendering Provider | 2310B.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310B.NM108 must be "XX". |
| NM109 | Rendering Provider Identifier | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | $\begin{aligned} & \text { 2310B.NM109 must be present if } \\ & \text { 2310B.NM108 is present. } \end{aligned}$ |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC: 82 Renderina Provider | 2310B.NM109 must be valid according to the NPI algorithm. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{array}{r} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC. 82 Renderina Provider | 2310B.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC. 82 Renderina-Provider | The first position of 2310B.NM109 must be a "1". |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PRV | RENDERING PROVIDER SPECIALTY INFORMATION |  | 1 | S | 2310B |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2310B.NM1 is present, 2310B.PRV with PRV01 = "PE" may be present. |
| PRV |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310B.PRV with PRV01 = "PE" is allowed. |
| PRV01 | Provider Code | ID | 1-3 | R |  |  | PE | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.PRV01 must be present. |
| PRV01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310B.PRV01 must be "PE". |
| PRV02 | Reference Identification Qualifier | ID | 2-3 | R |  |  | PXC | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.PRV02 must be present. |
| PRV02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310B.PRV02 must be "PXC". |
| PRV03 | Provider Taxonomy Code | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.PRV03 must be present. |
| PRV03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 145: "Entity's specialty/taxonomy code" <br> FIC. 82 Renderina-Provider | 2310B.PRV03 must be a valid Provider Taxonomy Code |
| PRV04 | State or Province Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PRV05 | PROVIDER SPECIALTY INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PRV06 | Provider Organization Code | ID | 3-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | RENDERING PROVIDER SECONDARY IDENTIFICATION |  | 4 | S | 2310B |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2310B.NM1 is present, 2310B.REF with REF01 = "1G", "0B", "G2" or "LU" may be present when 2310B.NM109 is not present. |
| REF |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Only four iterations of 2310B.REF with REF01 = "1G", "0B", "G2" or "LU" are allowed. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310B.REF must not be present. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 0B, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.REF01 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF01 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restriction on the number of repetitions" | 2310B.REF01 must be "1G", "OB", "G2", or "LU". |
| REF02 | Rendering Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | When 2310B.REF01 = = "OB", "G2" or "LU", 2310B.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 133: "Entity's UPIN" CSC 560: "EIC: <br> FIC 82 Renderino Provider" | When 2310B.REF01 = "1G", 2310B.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | When 2310B.REF01 = "0B", "G2" or "LU", 2310B.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 133: "Entity's UPIN" FIC. 82 Renderino_Provider" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | When 2310B.REF01 = = "OB", "G2" or "LU", 2310B.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 133: "Entity's UPIN" FIC 82 Renderino Provider" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM1 | SERVICE FACILITY LOCATION NAME |  | 1 | S | 2310C | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310C.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 77 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310C.NM101 must be"77". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310C.NM102 must be "2". |
| NM103 | Laboratory or Facility Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM103 must contain at least one nonspace character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310C.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. 77 Service location |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM103 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC. 77 Service L مcation |  |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | S |  |  | xX | 999 | R | IK403 = 7: "Invalid Code Value" | 2310C.NM108 must be "XX". |
| NM109 | Laboratory or Facility Primary Identifier | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2310C.NM108 is present, 2310C.NM109 must be present. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> ElC: 77 Service Location | 2310C.NM109 must be valid according to the NPI algorithm. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC: 77 Service Location | The first position of 2310C.NM109 must be a "1". |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | SERVICE FACILITY LOCATION ADDRESS |  | 1 | R | 2310 C |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2310C.NM1 is present, 2310.N3 must be present. |
| N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310C.N3 is allowed. |
| N301 | Laboratory or Facility Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.N301 must contain at least one non- space character. |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310C.N301 must be 1-55 characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" FIC. 77-Service - مcation |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310C.N301 must be populated with accepted AN characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" EIC. 77-Service」_ocation |  |
| N302 | Laboratory or Facility Address Line | AN | 1-55 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.N302 must contain at least one non- space character. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA11/ } \\ 999 / \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310C.N302 must be 1-55 characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" FIC. 77 Service I مcation |  |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data <br> Element" | 2310C.N302 must be populated with accepted AN characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" EIC: 77 Service $ـ$ - 0 cation |  |
| N4 | SERVICE FACILITY LOCATION CITYISTATEIZIP |  | 1 | R | 2310C |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2310C.NM1 is present, 2310.N4 must be present. |
| N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310C.N4 is allowed. |
| N401 | Laboratory or Facility City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.N401 must contain at least two nonspace characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2310C.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" FIC. 77 Service I مcation |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310C.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 502: "Entity's City" <br> FIC. 77 Service - مcation |  |
| N402 | Laboratory or Facility State or Province Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2310C.N404 is not present, 2310C.N402 must be present. |
| N402 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 501: "Entity's State/Province" EIC: 77 Service Location | 2310C.N402 must be a valid State Code. |
| N403 | Laboratory or Facility Postal Zone ZIP Code | ID | 3-15 | S |  |  |  | 999 | R | K 403 = 2 "Conditional Required Data Element Missing" | If 2310C.N404 is not present, 2310C.N403 must be present. |
| N403 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" EIC: 77 Service Location | 2310C.N403 must be a valid 9 digit Zip Code. |
| N404 | Laboratory or Facility Country Code | ID | 2-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N407 | Country Subdivision Code | ID | 1-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | SERVICE FACILITY LOCATION SECONDARY IDENTIFICATION |  | 3 | S | 2310 C |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2310C.REF must not be present. |
| PER | SERVICE FACILITY CONTACT INFORMATION |  | 1 | S | 2310C |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2310C.NM1 is present, 2310C.PER may be present. |
| PER |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310C.PER is allowed. |
| PER01 | Contact Function Code | ID | 2-2 | R |  |  | IC | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.PER01 must be present. |
| PER01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310C.PER01 must be "IC". |
| PER02 | Submitter Contact Name | AN | 1-60 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310C.PER02 must be 1-60 characters. |
| PER02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 561: "Entity's Contact Name" FIC. 77 Service Incation |  |
| PER03 | Communication Number Qualifier | ID | 2-2 | R |  |  | TE | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.PER03 must be present. |
| PER03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310C.PER03 must be "TE". |
| PER04 | Communication Number | AN | 1-256 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.PER04 must be present. |
| PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.PER04 must contain at least one non- space character. |
| PER04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310C.PER04 must be 1-256 characters. |
| PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Phone Number" FIC. 77 Service Incation |  |
| PER04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310C.PER04 must be populated with accepted AN characters. |
| PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FIC: 77 Service_Location |  |
| PER05 | Communication Number Qualifier | ID | 2-2 | S |  |  | EX | 999 | R | IK403 = 7: "Invalid Code Value" | 2310C.PER05 must be "EX". |
| PER05 |  |  |  |  |  |  | EM, EX, FX, TE | 999 | R | IK403 = 7: "Invalid Code Value" | 2310C.PER05 must be valid values. |
| PER06 | Communication Number | AN | 1-256 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2310C.PER05 is present, 2310C.PER06 must be present. |
| PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.PER06 must contain at least one nonspace character. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PER06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310C.PER06 must be 1-256 characters. |
| PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Phone Number" FIC. 77 Service Iocation |  |
| PER06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310C.PER06 must be populated with accepted AN characters. |
| PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FIC: 77 Service Location |  |
| PER07 | Communication Number Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PER08 | Communication Number | AN | 1-256 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| NM1 | SUPERVISING PROVIDER NAME |  | 1 | S | 2310D | 1 |  | 999 | R | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration 2310D.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | DQ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310D.NM101 must be "DQ". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310D.NM102 must be "1". |
| NM103 | Supervising Provider Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM103 must contain at least one non- space character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC مO_Sunervisina Phvsician |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM103 must be populated with accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC_Snnervisina_Phvsician |  |
| NM104 | Supervising Provider First Name |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM104 must contain at least one non space character. |
| NM104 |  | AN | 1-35 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM104 must be 1-35 characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC 0 O_Sunervisino Phvsician |  |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM104 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{array}{r} \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC مO_Sunervisina Phvsician |  |
| NM105 | Supervising Provider Middle Name |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM105 must contain at least one nonspace character. |
| NM105 |  | AN | 1-25 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM105 must be 1-25 characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC OLSunervisino Phvsician |  |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM105 must be populated with accepted AN characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC DO_Sunervisino Phvsician |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Supervising Provider Name Suffix |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM107 must contain at least one non- space character. |
| NM107 |  | AN | 1-10 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM107 must be 1-10 characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" Flosumervisino Physician |  |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM107 must be populated with accepted AN characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" FICDOnervisino-Phvsician |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | S |  |  | XX | 277 | C | CSCC A8: "Acknowledgement / Rejected for relational field in error." TBD01: "Situational segment/element required for adjudication." EIC DQ Supervising Physician | 2310D.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier". |
| NM108 |  |  |  |  |  |  |  | 277 | C | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." EIC DQ Supervising Physician | 2310D.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310D.NM108 must be "XX". |
| NM109 | Supervising Provider Identifier | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2310D.NM108 is present, 2310D.NM109 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC DO_Sunervisina Physician | 2310D.NM109 must be valid according to the NPI algorithm. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC م O Sunervisina Phvsician | The first position of 2310D.NM109 must be a "1". |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | SUPERVISING PROVIDER SECONDARY IDENTIFIER |  | 4 | S | 2310D |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 3 iterations of 2310D.REF are allowed. |
| REF |  |  |  |  |  |  |  | 999 | R | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not subport this qualifier." | 2310D.REF01 must be "0B", "1G"or "LU". |
| REF02 | Supervising Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | When 2310D.REF01 = "0B" or "LU", 2310D.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 133: "Entity's UPIN" | When 2310D.REF01 = "1G", 2310D.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric diait). |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | When 2310D.REF01 = "OB" or "LU", 2310D.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 629: "Property Casualty Claim Number" <br> Fle مn_ Sunervisino Phvsician |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | When 2310D.REF01 = "0B" or "LU", 2310D.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 629: "Property Casualty Claim Number" <br> FIC DO_Sunervisina Phvsician |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM1 | AMBULANCE PICK UP LOCATION |  | 1 | S | 2310E | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration 2310E.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | PW | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310E.NM101 must be "PW". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310E.NM102 must be "2". |
| NM103 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |
| NM109 | Identification Code | AN | 2-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | AMBULANCE PICK UP LOCATION ADDRESS |  | 1 | R | 2310E |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2310E.NM1 is present, 2310E.N3 must be present. |
| N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310E.N3 is allowed. |
| N301 | Ambulance Pick Up Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N301 must contain at least one nonspace character. |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310E.N301 must be 1-55 characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 126: "Entity's Address" CSC 266 Facility point of origin and |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310E.N301 must be populated with accepted AN characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 266 "Facility point of origin and destination - ambulance" |  |
| N302 | Ambulance Pick Up Address Line | AN | 1-55 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N302 must contain at least one nonspace character. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310E.N302 must be 1-55 characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" CSC 266 "Facility point of origin and destination - ambulance" |  |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310E.N302 must be populated with accepted AN characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 266 "Facility point of origin and destination - ambulance" |  |
| N4 | AMBULANCE PICK UP LOCATION CITYISTATEIZIP |  | 1 | R | 2310E |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2310E.NM1 is present, 2310E.N4 must be present. |
| N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310E.N4 is allowed. |
| N401 | Ambulance Pick Up City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N401 must contain at least two non- space characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2310E.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" CSC 266 "Facility point of origin and destination - ambulance" |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310E.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 502: "Entity's City" <br> CSC 266 "Facility point of origin and destination - ambulance" |  |
| N402 | Ambulance Pick Up State or $\qquad$ | ID | 2-2 | S |  |  |  | 999 | R | K 403 = 2 "Conditional Required Data Element Missing" | If 2310E.N404 is not present, 2310E.N402 must be present. |
| N402 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" CSC 266 "Facility point of origin and destination - ambulance" | 2310E.N402 must be a valid State Code. |
| N403 | Ambulance Pick Up Postal Zone ZIP Code | ID | 3-15 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2310E.N404 is not present, 2310E.N403 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N403 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" CSC 266 "Facility point of origin and destination - ambulance" | 2310E.N403 must be a valid Zip Code. |
| N404 | Ambulance Pick Up Country Code | ID | 2-3 | S |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| N407 | Country Subdivision Code | ID | 1-3 | S |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
|  |  |  |  |  |  |  |  |  |  |  |  |
| NM1 | AMBULANCE DROP OFF LOCATION |  | 1 | S | 2310F | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration 2310F.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 45 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310F.NM101 must be "45". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310F.NM102 must be "2". |
| NM103 | Ambulance Drop Off Location |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM103 must contain at least one nonspace character. |
| NM103 |  | AN | 1-60 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310F.NM103 must be 1 - 60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" CSC 266 "Facility point of origin and destination - ambulance" |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM103 must be populated with accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" CSC 266 "Facility point of origin and destination - ambulance" |  |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 | Identification Code | AN | 2-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | AMBULANCE DROP OFF LOCATION ADDRESS |  | 1 | R | 2310F |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2310F.NM1 is present, 2310F.N3 must be present. |
| N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310F.N3 is allowed. |
| N301 | Ambulance Drop Off Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.N301 must contain at least one non- space character. |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310F.N301 must be 1-55 characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" CSC 266 Facility point of origin and destination - ambulance |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310F.N301 must be populated with accepted AN characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 266 Facility point of origin and destination - ambulance |  |
| N302 | Ambulance Drop Off Address Line | AN | 1-55 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.N302 must contain at least one nonspace character. |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310F.N302 must be 1-55 characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" CSC 266 "Facility point of origin and |  |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310F.N302 must be populated with accepted AN characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 266 "Facility point of origin and destination - ambulance" |  |
| N4 | AMBULANCE DROP OFF LOCATION CITYISTATEIZIP |  | 1 | R | 2310F |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2310F.NM1 is present, 2310F.N4 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{array}{r} \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310F.N4 is allowed. |
| N401 | Ambulance Drop Off City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.N401 must contain at least two nonspace characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2310F.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 502: "Entity's City" <br> CSC 266 "Facility point of origin and |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310F.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 502: "Entity's City" <br> CSC 266 "Facility point of origin and destination - ambulance" |  |
| N402 | Ambulance Drop Off State or Province Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2310F.N404 is not present, 2310F.N402 must be present. |
| N402 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" CSC 266 "Facility point of origin and destination - ambulance" | 2310F.N402 must be a valid State Code. |
| N403 | Ambulance Drop Off Postal Zone ZIP Code | ID | 3-15 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2310F.N404 is not present, 2310F.N403 must be present. |
| N403 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" CSC 266 "Facility point of origin and destination - ambulance" | 2310F.N403 must be a valid Zip Code. |
| N404 | Ambulance Drop Off Country Code | ID | 2-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N407 | Country Subdivision Code | ID | 1-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
|  |  |  |  |  |  |  |  |  |  |  |  |
| SBR | OTHER SUBSCRIBER LOOP |  |  |  | 2320 | 10 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only ten iterations of the 2320 loop are allowed. |
| SBR | OTHER SUBSCRIBER INFORMATION |  | 1 | S | 2320 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.SBR is allowed. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SBR01 | Payer Responsibility Sequence Number Code | ID | 1-1 | R |  |  | $\begin{gathered} \text { A, B, C, D, E, F, G, } \\ H, P, S, T, U \end{gathered}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.SBR01 must be present. |
| SBR01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | $2320 . S B R 01$ must be valid values. |
| SBR01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | Each iteration of 2320. SBR01 must contain a different code value (each code value may appear in one and only one SBR01 element). |
| SBR01 |  |  |  |  |  |  |  | 277 | C | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> CSC 286 "Other payer's Explanation of Benefits/payment information" | If 2000B.SBR01 = "S", 2320.SBR01 ="P" must be present. |
| SBR02 | Individual Relationship Code | ID | 2-2 | R |  |  | $\begin{gathered} 01,18,19,20,21, \\ 39,40,53, G 8 \\ \hline \end{gathered}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.SBR02 must be present. |
| SBR02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2320.SBR02 must be valid values. |
| SBR03 | Insured Group or Policy Number |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR03 must contain at least one nonspace character. |
| SBR03 |  | AN | 1-50 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.SBR03 must be 1-50 characters. |
| SBR03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 163: "Entity's policy number" FIC. GB Other Insured |  |
| SBR03 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR03 must be populated with accepted AN characters. |
| SBR03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 163: "Entity's policy number" FIC. GB Other Insured |  |
| SBR04 | Other Insured Group Name | AN | 1-60 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.SBR03 is present, 2320.SBR04 must not be present. |
| SBR04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 SBR04 must contain at least one non- space character. |
| SBR04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.SBR04 must be 1-60 characters. |
| SBR04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 663: "Entity's Group Name" FIC. GB Other Insured |  |
| SBR04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR04 must be populated with accepted AN characters. |
| SBR04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 663: "Entity's Group Name" FIC. GB Other Insured |  |
| SBR05 | Insurance Type Code | ID | 1-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SBR06 | Coordination of Benefits Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SBR07 | Yes/No Condition or Response <br> Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SBR08 | Employment Status Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SBR09 | Claim Filing Indicator Code | ID | 1-2 | S |  |  | 11, 12, 13, 14, 15, 16, 17, AM, BL, CH, CI, DS, FI ,HM, LM, MA, MB, MC, OF, TV VA WC 77 | 999 | R | IK403 = 7: "Invalid Code Value" | 2320.SBR09 must be valid values. |
| SBR09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 480: "Other Carrier Claim filing indicator is missind or invalid" | 2320.SBR09 must not = "MA" or "MB". |
| CAS | CLAIM LEVEL ADJUSTMENTS |  | 5 | S | 2320 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320. SBR is present, 2320.CAS may be present. |
| CAS |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only 5 iterations of 2320.CAS are allowed. |
| CAS01 | Claim Adjustment Group Code | ID | 1-2 | R |  |  | CO, CR, OA, PI, PR | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.CAS01 must be present. |
| CASO1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2320.CAS01 must be valid values. |
| CASO1 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 696: "Claim Adjustment Group <br> Code" <br> FIC. GB Other Insured | If 2320.CAS01 = "CR" then 2330B.DTP or 2430.DTP (if used) with DTP01 = "573" must be prior to 01/01/2012. |
| CAS02 | Adjustment Reason Code | ID | 1-5 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.CAS02 must be present. |
| CAS02 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement/ Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | If 2330B.DTP03 with DTP01 = " 573 " is present, 2320.CAS02 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = " 573 ". |
| CAS02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | If 2330B.DTP03 with DTP01 = "573" is not present, 2320.CAS02 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTPO3s when DTP01 = "573". |
| CAS03 | Adjustment Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.CAS03 must be present. |
| CAS03 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS03 must be numeric. |
| CAS03 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { 1Rejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero" } \\ & \text { CSC 519: "Adjustment Amount" } \\ & \text { FIC. GB Other Insured. } \end{aligned}$ | 2320.CAS03 must not $=0$. |
| CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other-Insured | 2320.CAS03 is limited to 0,1 or 2 decimal positions. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS03 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2320.CAS03 must be >= -99,999.99. and } \\ & <=99,999.99 \text {. } \end{aligned}$ |
| CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |
| CAS04 | Adjustment Quantity | R | 1-15 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS04 must be 1-15 digits. |
| CAS04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |
| CAS04 |  |  |  |  |  |  |  | 277 | T | ```CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" CSC 520: "Adjustment Quantity" FIC. GB Other Insured``` | 2320.CAS04 must not $=0$. |
| CAS05 | Adjustment Reason Code | ID | 1-5 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS02 is present, 2320.CAS05 may be present. |
| CAS05 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | If 2330B.DTP03 with DTP01 = " 573 " is present, 2320.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 $=$ " 573 ". |
| CAS05 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CAS05 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTPO3s when DTP01 = "573". |
| CAS06 | Adjustment Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2320.CAS05 is present, 2320.CAS06 must be present. |
| CAS06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS06 must be numeric. |
| CAS06 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { 1Rejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero" } \\ & \text { CSC 519: "Adjustment Amount" } \\ & \text { FIC. GBOther Insured } \end{aligned}$ | 2320.CAS06 must not $=0$. |
| CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2320.CAS06 is limited to 0,1 or 2 decimal positions. |
| CAS06 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2320.CAS06 must be >=-99,999.99. and <= 99,999.99. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/I } \\ 999 / \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GR Other Insured |  |
| CAS07 | Adjustment Quantity | R | 1-15 | S |  |  |  | 999 | R | $\qquad$ Violated" | If 2320.CAS05 is present, 2320.CAS07 may be present. |
| CAS07 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS07 must be 1-15 digits. |
| CAS07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" <br> FIC. GB Other Insured |  |
| CAS07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FIC. GR Other Insured | 2320.CAS07 must not $=0$. |
| CAS08 | Adjustment Reason Code | ID | 1-5 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320. CAS05 is present, 2320.CAS08 may be present. |
| CAS08 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | If 2330B.DTP03 with DTP01 = "573" is present, 2320.CAS08 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = " 573 ". |
| CAS08 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / <br> Rejected for relational field in error. <br> CSC 521: Adjustment Reason Code <br> CSC 516: Adjudication or Payment <br> Date <br> EIC: GB Other Insured | If 2330B.DTP03 with DTP01 = "573" is not present, 2320.CAS08 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = "573". |
| CAS09 | Adjustment Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2320.CAS08 is present, 2320.CAS09 must be present. |
| CAS09 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS09 must be numeric. |
| CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FIC. GB مther Insured | 2320.CAS09 must not $=0$. |
| CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FlC. GR Other Insured | 2320.CAS09 is limited to 0,1 or 2 decimal positions. |
| CAS09 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2320.CAS09 must be >=-99,999.99. and } \\ & <=99,999.99 \text {. } \end{aligned}$ |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GR Other Insured |  |
| CAS10 | Adjustment Quantity | R | 1-15 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS08 is present, 2320.CAS10 may be present. |
| CAS10 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS10 must be 1-15 digits. |
| CAS10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |
| CAS10 |  |  |  |  |  |  |  | 277 | T | ```CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" CSC 520: "Adjustment Quantity" FIC. GB Other Insured``` | 2320.CAS10 must not $=0$. |
| CAS11 | Adjustment Reason Code | ID | 1-5 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS08 is present, 2320.CAS11 may be present. |
| CAS11 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | If 2330B.DTP03 with DTP01 = "573" is present, 2320.CAS11 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = " 573 ". |
| CAS11 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CAS11 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTPO3s when DTP01 = "573". |
| CAS12 | Adjustment Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2320.CAS11 is present, 2320.CAS12 must be present. |
| CAS12 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS12 must be numeric. |
| CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FIC. GROther Insured | 2320.CAS12 must not $=0$. |
| CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2320.CAS12 is limited to 0,1 or 2 decimal positions. |
| CAS12 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2320.CAS12 must be >= -99,999.99. and } \\ & <=99,999.99 . \end{aligned}$ |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GR Other Insured |  |
| CAS13 | Adjustment Quantity | R | 1-15 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320. CAS11 is present, 2320.CAS13 may be present. |
| CAS13 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS13 must be 1-15 digits. |
| CAS13 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |
| CAS13 |  |  |  |  |  |  |  | 277 | T | ```CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" CSC 520: "Adjustment Quantity" FIC. GB Other Insured``` | 2320.CAS13 must not $=0$. |
| CAS14 | Adjustment Reason Code | ID | 1-5 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS11 is present, 2320.CAS14 may be present. |
| CAS14 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | If 2330B.DTP03 with DTP01 = "573" is present, 2320.CAS14 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = " 573 ". |
| CAS14 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CAS14 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTPO3s when DTP01 = "573". |
| CAS15 | Adjustment Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2320.CAS14 is present, 2320.CAS15 must be present. |
| CAS15 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS15 must be numeric. |
| CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FIC. GROther Insured | 2320.CAS15 must not $=0$. |
| CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2320.CAS15 is limited to 0,1 or 2 decimal positions. |
| CAS15 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2320.CAS15 must be >= -99,999.99. and } \\ & <=99,999.99 \text {. } \end{aligned}$ |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GR Other-Insured |  |
| CAS16 | Adjustment Quantity | R | 1-15 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS14 is present, 2320.CAS16 may be present. |
| CAS16 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS16 must be 1-15 digits. |
| CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GBOther Insured |  |
| CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" <br> FIC. GB Other Insured | $2320 . C A S 16$ must not $=0$. |
| CAS17 | Adjustment Reason Code | ID | 1-5 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS14 is present, 2320.CAS17 may be present. |
| CAS17 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | If 2330B.DTP03 with DTP01 = "573" is present, 2320.CAS17 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". |
| CAS17 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 521: Adjustment Reason Code EIC: GB Other Insured | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CAS17 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTPO3s when DTP01 = "573" |
| CAS18 | Adjustment Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2320. CAS17 is present, 2320. CAS18 must be present. |
| CAS18 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS18 must be numeric. |
| CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CsC 694: "Amount must not be equal <br> to zero" <br> CSC 519: "Adjustment Amount" <br> FIC. GR Other Insured <br> CSCAF:"A. | 2320.CAS18 must not $=0$. |
| CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2320.CAS18 is limited to 0,1 or 2 decimal positions. |
| CAS18 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2320.CAS18 must be >=-99,999.99. and } \\ & <=99,999.99 . \end{aligned}$ |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GR Other insured |  |
| CAS19 | Adjustment Quantity | R | 1-15 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS17 is present, 2320.CAS19 may be present. |
| CAS19 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS19 must be 1-15 digits. |
| CAS19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" <br> FIC. GB Other Insured |  |
| CAS19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FIC. GB Other Insured | $2320 . \mathrm{CAS} 19$ must not $=0$. |
| AMT | COB PAYER PAID AMOUNT |  | 1 | S | 2320 |  |  | 999 | R | IK 304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.AMT with AMT01 = "D" may be present. |
| AMT |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.AMT with AMT01 = "D" is allowed. |
| AMT |  |  |  |  |  |  |  | 277 | C | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> CSC 286: "Other payer's <br> Explanation of Benefits/payment information" | If 2000B.SBR01 = "S" then one 2320 loop with an AMT segment with AMT01 = "D" must be present. |
| AMT01 | Amount Qualifier Code | ID | 1-3 | R |  |  | D | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.AMT01 must be present. |
| AMT01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2320.AMT01 must be "D". |
| AMT02 | Payer Paid Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .AMT02 must be numeric. |
| AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.AMT02 must be <= 99,999.99. |
| AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 183: "Amount entity has paid" CSC 286: Other payer's Explanation of Benefits/payment information |  |
| AMT02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 183: "Amount entity has paid" CSC 286: Other payer's Explanation of Benefits/payment information | 2320.AMT02 must be >= 0 . |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 183: "Amount entity has paid" CSC 286: Other payer's Explanation of Benefits/payment information | 2320.AMT02 is limited to 0,1 or 2 decimal positions. |
| AMT02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 672: "Other Payer's payment information is out of balance" CSC 286: Other payer's Explanation of Benefits/payment information | 2320 AMT02 must = the sum of all 2430.SVD02 payer paid amounts (when the value in 2430. SVD01 is the same as the value in 2330B.NM109) minus the sum of all claim level adjustments ( 2320 CAS adjustment amounts) for the same payer. |
| AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| AMT | COB TOTAL NON-COVERED AMOUNT |  | 1 | S | 2320 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.AMT with AMT01 = "A8" may be present. |
| AMT |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.AMT with AMT01 = "A8" is allowed. |
| AMT01 | Amount Qualifier Code | ID | 1-3 | R |  |  | A8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.AMT01 must be present. |
| AMT01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2320.AMT01 must be "A8". |
| AMT02 | Non-Covered Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .AMT02 must be numeric. |
| AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.AMT02 must be <= 99,999.99. |
| AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 596: "Non-covered Charge Amount" <br> FIC. GROther Incured |  |
| AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 596: "Non-covered Charge Amount" <br> FIC. GB مther Insured | 2320.AMT02 is limited to 0,1 or 2 decimal positions. |
| AMT02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 596: "Non-covered Charge Amount" <br> FIC. GB Other Insured | 2320.AMT02 (with AMT01 = "A8") elements must $=2300$. CLM02. |
| AMT02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 596: "Non-covered Charge Amount" FIC. GR Other Incured | 2320.AMT02 must be >= 0 . |
| AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| AMT | REMAINING PATIENT LIABILITY |  | 1 | S | 2320 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.AMT with AMT01 = "EAF" may be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MOA01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2320.MOA01 must be >= 0.0 and $<=1.0$. |
| MOA01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" | 2320.MOA01 is limited to 0,1 or 2 decimal positions. |
| MOAO2 | HCPCS Payable Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.MOA02 must be numeric. |
| MOAO2 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MOA02 must be <= 99,999.99. |
| MOAO2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 574: "HCPCS Payable Amount Home Health" |  |
| MOA02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 574: "HCPCS Payable Amount Home Health" | 2320.MOA02 must be >= 0 . |
| MOA02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 574: "HCPCS Payable Amount Home Healh" | 2320.MOA02 is limited to 0,1 or 2 decimal positions. |
| MOA03 | Remark Code | AN | 1-50 | S |  |  |  | 277 | C | CSCC A8 "Acknowledgement/ <br> Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = " 573 " is present, 2320.MOA03 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 $=$ " 573 ". |
| MOA03 |  |  |  |  |  |  |  | 277 | C | CSCC A8 "Acknowledgement / <br> Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = "573" is not present, 2320.MOA03 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when- |
| MOAO4 | Remark Code | AN | 1-50 | S |  |  |  | 277 | C | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = " 573 " is present, 2320.MOA04 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". |
| MOA04 |  |  |  |  |  |  |  | 277 | C | CSCC A8 "Acknowledgement / <br> Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = " 573 " is not present, 2320.MOA04 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 = " 573 " |
| MOA05 | Remark Code | AN | 1-50 | S |  |  |  | 277 | C | CSCC A8 "Acknowledgement/ <br> Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = "573" is present, 2320.MOA05 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". |
| MOA05 |  |  |  |  |  |  |  | 277 | C | CSCC A8 "Acknowledgement / <br> Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = "573" is not present, 2320.MOA05 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 $=$ " $573 "$ |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MOA06 | Remark Code | AN | 1-50 | S |  |  |  | 277 | C | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = " 573 " is present, 2320.MOA06 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". |
| MOA06 |  |  |  |  |  |  |  | 277 | c | CSCC A8 "Acknowledgement / Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = "573" is not present, 2320.MOA06 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when 0 TP01 $=$ " 573 " |
| MOA07 | Remark Code | AN | 1-50 | S |  |  |  | 277 | C | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = " 573 " is present, 2320.MOA07 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". |
| MOA07 |  |  |  |  |  |  |  | 277 | C | CSCC A8 "Acknowledgement/ Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = "573" is not present, 2320.MOA07 must be a valid Remittance Advice Remark Code for the high/low date range of the 2430.DTP03s when DTP01 = "573" |
| MOA08 | End Stage Renal Disease Payment Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .MOA08 must be numeric. |
|  |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MOA08 must be <= 99,999.99. |
| MOA08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 534: "Claim ESRD Payment Amount" |  |
| MOA08 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 534: "Claim ESRD Payment Amount" | 2320.MOA08 must be >= 0 . |
| MOA08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 534: "Claim ESRD Payment Amount" | 2320.MOA08 is limited to 0,1 or 2 decimal positions. |
| MOA09 | Non-Payable Professional Component Billed Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .MOA09 must be numeric. |
| MOA09 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MOA09 must be <= 99,999.99. |
| MOA09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 598: "Non-payable Professional Component Billed Amount" |  |
| MOA09 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 598: "Non-payable Professional Component Billed Amount" | 2320.MOA09 must be >= 0 . |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| MOA09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 598: "Non-payable Professional Component Billed Amount" | 2320.MOA09 is limited to 0,1 or 2 decimal positions. |
| NM1 | OTHER SUBSCRIBER NAME |  | 1 | R | 2330A | 1 |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2320SBR is present, 2330A.NM1 must be present. |
| NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2330A.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | IL | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330A.NM101 must be "IL". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330A.NM102 must be valid values. |
| NM103 | Other Insured Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330AN.M103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. GB Other Insured |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM103 must be populated with accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" EIC: GB Other Insured |  |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM103 must contain at least one nonspace character. |
| NM104 | Other Insured First Name | AN | 1-35 | S |  |  |  | 999 | R | \|K403 = I13: "Implementation Dependent "Not Used" Data Element Present" | If 2330A.NM102 is "2", 2330A.NM104 must not be present. |
| NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM104 must contain at least one non- space character. |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.NM104 must be 1-35 characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's First Name" FIC. GB Other Insured |  |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM104 must be populated with accepted AN characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC. GB Other Insured |  |
| NM105 | Other Insured Middle Name | AN | 1-25 | S |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent "Not Used" Data Element Present" | If 2330A.NM102 is "2", 2330A.NM105 must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM105 must contain at least one nonspace character. |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.NM105 must be 1-25 characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. GB Other Insured |  |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM105 must be populated with accepted AN characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC. GB Other Insured |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |
| NM107 | Other Insured Name Suffix | AN | 1-10 | S |  |  |  | 999 | R | \|K403 = I13: "Implementation <br> Dependent "Not Used" Data Element Present" | If 2330A.NM102 is "2", 2330A.NM107 must not be present. |
| NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM107 must contain at least one non- space character. |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.NM107 must be 1-10 characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC. GR Other Insured |  |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM107 must be populated with accepted AN characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" FIC. GB Other Insured |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | II, MI | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330A.NM108 must be valid values. |
| NM109 | Other Insured Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.NM109 must be present. |
| NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM109 must contain at least two non- space characters. |
| NM109 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2330A.NM109 must be 2-80 characters. |
| NM109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 153: "Entity's ID Number" FIC. GB Other Insured |  |
| NM109 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM109 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N401 | Other Subscriber City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.N401 must contain at least two nonspace characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2330A.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" FIC. GB Other Insured |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330A.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 502: "Entity's City" <br> FIC. GB Other Insured |  |
| N402 | Other Subscriber State or Province Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If $2330 \mathrm{~A} . \mathrm{N} 404$ is not present, 2330A.N402 must be present. |
| N402 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" ElC: GB Other Insured | 2330A.N402 must be a valid State Code. |
| N403 | Other Subscriber Postal Code | ID | 3-15 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If $2330 \mathrm{~A} . \mathrm{N} 404$ is not present, 2330A.N403 must be present. |
| N403 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" EIC: GB Other Insured | 2330A.N403 must be a valid Zip Code. |
| N404 | Other Subscriber Country code | ID | 2-3 | S |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 680: "Entity's Country" EIC: GB Other Insured | 2330A.N404 must be a valid 2 character Country Code. |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N407 | Country Subdivision Code | ID | 1-3 | S |  |  |  | 277 | C | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 695: "Entity's Country <br> Subdivision Code" <br> FIC. GB Other Insured | 2330A.N407 must be a valid Country Subdivision Code. |
| REF | OTHER SUBSCRIBER SECONDARY IDENTIEICATION |  | 1 | S | 2330A |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2330A.NM1 is present, 2330A.REF may be present. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330A.REF is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | SY | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310A.REF01 must be "SY". |
| REF02 | Other Insured Additional Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.REF02 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \hline \text { TA1/I } \\ 999 / \\ 277 \mathrm{CA} \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 148: "Entity's Social Security Number" EIC: GB Other Insured | 2330A.REF02 must be 9 digits, with no punctuation. <br> The first 3 digits cannot be higher than 772, and digits 1-3, 4-5, and 6-9 cannot be zeros. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM1 | OTHER PAYER NAME |  | 1 | R | 2330B | 1 |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2320.SBR is present, 2330B.NM1 must be present. |
| NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2330B.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | PR | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.NM101 must be "PR". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.NM102 must be "2". |
| NM103 | Other Payer Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.NM103 must contain at least one non- space character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300B.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" CSC 286: Other payer's Explanation of Benefits/payment information |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330B.NM103 must be populated with accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" CSC 286: Other payer's Explanation of Benefits/payment information |  |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | R |  |  | PI, XV | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.NM108 must be valid values. |
| NM109 | Other Payer Primary Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM109 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2330B. NM 109 must $=2430$. SVD01 . |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization $\qquad$ | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | OTHER PAYER ADDRESS |  | 1 | S | 2330B |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2330B.NM1 is present, 2330B.N3 may be present. |
| N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.N3 is allowed. |
| N301 | Other Payer Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.N301 must contain at least one nonspace character. |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330B.N301 must be 1-55 characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" CSC 286: Other payer's Explanation of Benefits/payment information |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330B.N301 must be populated with accepted AN characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 286: Other payer's Explanation of Benefits/payment information |  |
|  |  |  |  |  |  |  |  |  |  |  |  |
| N302 | Other Payer Address Line | AN | 1-55 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.N302 must contain at least one nonspace character. |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330B.N302 must be 1-55 characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" CSC 286: Other payer's Explanation of Benefits/payment information |  |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330B.N302 must be populated with accepted AN characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 286: Other payer's Explanation of Benefits/payment information |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N4 | OTHER PAYER CITYISTATEIZIP CODE |  | 1 | R | 2330B |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.N4 must be present. |
| N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.N4 is allowed. |
| N401 | Other Payer City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.N401 must contain at least two non- space characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2330B.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" CSC 286: Other payer's Explanation of Benefits/payment information |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330B.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 502: "Entity's City" <br> CSC 286: Other payer's Explanation of Benefits/payment information |  |
| N402 | Other Payer State or Province Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2330B.N404 is not present, 2330B.N402 must be present. |
| N402 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" CSC 286: Other payer's Explanation of Benefits/payment information | 2330B.N402 must be a valid State Code. |
| N403 | Other Payer Postal Code | ID | 3-15 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2330B.N404 is not present, 2330B.N403 must be present. |
| N403 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" CSC 286: Other payer's Explanation of Benefits/payment information | 2330B.N403 must be a valid Zip Code. |
| N404 | Other Payer Country Code | ID | 2-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N407 | Country Subdivision Code | ID | 1-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | $\begin{aligned} & \text { min. } \\ & \text { Max. } \end{aligned}$ | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{aligned} & 5010 \\ & \text { Values } \end{aligned}$ | $\begin{array}{\|c} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP | DATE - CLAIM CHECK OR REMITTANCE DATE |  | 1 | s | 2330B |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2330B.NM1 is present, 2330B.DTP may be present. |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.DTP is allowed. |
| DTP |  |  |  |  |  |  |  | 999 | R | 1K304 = 2: "Unexpected Segment" | If 2330B.NM1 is present and 2430.DTP with DTP01 = "573" is not present, 2330B.DTP may be present. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 573 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330B.DTP01 must be "573". |
| DTP02 | Date Time Period Format Oualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B. DTP02 must be "D8". |
| DTP03 | Adjudication or Payment Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "IIvalid Date" | 2330B.DTP03 must a valid date in CCYYMMDD format. |
| DTP03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 510: "Future date" CSC 516 "Adjudication or Payment Date" | 2330B.DTP03 must not be a future date. |
| REF | OTHER PAYER SECONDARY IDENTIFICATION |  | 2 | s | 2330B |  |  | 999 | R | IK 304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with 2330B.REF01 = "2U", "EI", "FY" or "NF" may be present. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2330B.REF with 2330B.REF01 = "2U", "El", "FY" or "NF" are allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 2U, El, FY, NF | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330B.REF01 must be valid values. |
| REF02 | Other Payer Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missinq" | 2330B.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 128: "Entity's tax id" CSC 286: Other payer's Explanation of Benefits/payment information | If 2330B.REF01 = "EI", 2330B.REF02 must be 9 digits with no punctuation. <br> Cannot be zeros. |
| REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must be must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 128: "Entity's tax id" CSC 286: Other payer's Explanation of Benefits/payment information |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 128: "Entity's tax id" CSC 286: Other payer's Explanation of Benefits/payment information |  |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must contain at least one nonspace character |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | OTHER PAYER PRIOR AUTHORIZATION |  | 2 | S | 2330B |  |  | 999 | R | "IK304 = I6: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with 2330B.REF with REF01 = "G1" may be present. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "G1" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.REF01 must be "G1". |
| REF02 | Other Payer Prior Authorization Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330B.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 48: "Referral/authorization" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 48: "Referral/authorization" CSC 286: Other payer's Explanation of Benefits/payment information |  |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must contain at least one nonspace character. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | OTHER PAYER REFERRAL NUMBER |  | 1 | S | 2330B |  |  | 999 | R | "IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with 2330B.REF with REF01 = "9F" may be present. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "9F" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9F | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.REF01 must be "9F". |
| REF02 | Other Payer Referral Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330B.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 48: "Referral/authorization" CSC 286: Other payer's Explanation of |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 48: "Referral/authorization" CSC 286: Other payer's Explanation of Benefits/payment information |  |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.REFO2 must contain at least one nonspace character. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | OTHER PAYER CLAIM ADJUSTMENT INDICATOR |  | 1 | S | 2330B |  |  | 999 | R | "IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with 2330B.REF with REF01 = "T4" may be present. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "T4" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | T4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.REF01 must be "T4". |
| REF02 | Other Payer Claim Adjustment Indicator | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.REF02 must be "Y". |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | OTHER PAYER CLAIM CONTROL NUMBER |  | 1 | S | 2330B |  |  | 999 | R | "IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with 2330B.REF with REF01 = "F8" may be present. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "F8" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | F8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.REF01 must be "F8". |
| REF02 | Other Payer Claim Control Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330B.REF02 must be 1-50 characters. |
|  |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 464: "Payer Assigned Claim Control Number" CSC 286: Other payer's Explanation of Benefits/payment information |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 464: "Payer Assigned Claim Control Number" CSC 286: Other payer's Explanation of Benefits/payment information |  |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must contain at least one nonspace character. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
|  |  |  |  |  |  |  |  |  |  |  |  |
|  | OTHER PAYER REFERRING PROVIDER Loop |  |  |  | 2330 C |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Loop must not be present. |
| NM1 | OTHER PAYER REFERRING PROVIDER |  | 1 | S | 2330C |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
| REF | OTHER PAYER REFERRING PROVIDER SECONDARY IDENTIFIER |  | 3 | R | 2330 C |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
|  | OTHER PAYER RENDERING PROVIDER Loop |  |  |  | 2330D | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Loop must not be present. |
| NM1 | OTHER PAYER RENDERING PROVIDER |  | 1 | S | 2330D | 1 |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/I } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF | OTHER PAYER RENDERING PROVIDER SECONDARY IDENTIFICATION |  | 3 | R | 2330D |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
|  | OTHER PAYER SERVICE FACILITY LOCATION Loop |  |  |  | 2330E |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Loop must not be present. |
| NM1 | OTHER PAYER SERVICE FACILITY LOCATION |  | 1 | S | 2330E | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
| REF | OTHER PAYER SERVICE <br> FACILITY LOCATION SECONDARY IDENTIFIER |  | 3 | R | 2330E |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
|  | OTHER PAYER SUPERVISING PROVIDER Loop |  |  |  | 2330F | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Loop must not be present. |
| NM1 | OTHER PAYER SUPERVISING PROVIDER |  | 1 | S | 2330F | 1 |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
| REF | OTHER PAYER SUPERVISING PROVIDER SECONDARY IDENTIFICATION |  | 3 | R | 2330F |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
|  | OTHER PAYER BILLING PROVIDER Loop |  |  |  | 2330G | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Loop must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM1 | OTHER PAYER BILLING PROVIDER |  | 1 | S | 2330G | 1 |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
| REF | OTHER PAYER BILLING PROVIDER SECONDARY IDENTIFICATION |  | 2 | R | 2330G |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Segment must not be present. |
| Line Loop | Service Line Loop |  |  |  | 2400 | 50 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only 50 iterations of the $\mathbf{2 4 0 0}$ loop are allowed. |
| LX | SERVICE LINE |  | 1 | R | 2400 |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2400.LX must be present. |
| LX |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2400 . \mathrm{LX}$ is allowed. |
| LX01 | Assigned Number | NO | 1-6 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.LX01 must be present. |
| LX01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.LX01 must be numeric. |
| LX01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2400.LX01 must be must be > 0 and <= 50. |
| LX01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | The first 2400.LX01 must be "1". |
| LX01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | Subsequent 2400.LX01 values must increment by 1. |
| SV1 | PROFESSIONAL SERVICE |  | 1 | R | 2400 |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2400.SV1 must be present. |
| SV1 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.SV1 is allowed. |
| SV101 | COMPOSITE MEDICAL PROCEDURE IDENTIFIER |  |  | R |  |  |  |  |  |  |  |
| SV101-1 | Product or Service ID Qualifier | ID | 2-2 | R |  |  | ER, HC, IV, WK | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV101-1 must be present. |
| SV101-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.SV101-1 must be "HC". |
| SV101-2 | Procedure Code | AN | 1-48 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV101-2 must be present. |
| SV101-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 507: "HCPCS" | When 2400.SV101-1 = "HC", 2400.SV101-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = " 472 ". |
| SV101-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 507: "HCPCS" | When 2400.SV101-1 = "HC", 2400.SV101-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = "472". <br> OR <br> When 2400.SV101-1 = "HC", 2400.SV101-2 <br> must be a 5 character alphanumeric value. |
| SV101-3 | Procedure Modifier | AN | 2-2 | S |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV101-3 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SV101-3 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV101-3 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". |
| SV101-3 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 544: "Clinical Laboratory Improvement Amendment" |  |
| SV101-4 | Procedure Modifier | AN | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2400. SV101-4 is present, $2400 . S V 101-3$ must be present. |
| SV101-4 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV101-4 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". |
| SV101-4 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 544: "Clinical Laboratory Improvement Amendment" |  |
| SV101-5 | Procedure Modifier | AN | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2400. SV101-5 is present, 2400.SV101-4 must be present. |
| SV101-5 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV101-5 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". |
| SV101-5 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 544: "Clinical Laboratory Improvement Amendment" |  |
| SV101-6 | Procedure Modifier | AN | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2400. SV101-6 is present, 2400.SV101-5 must be present. |
| SV101-6 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV101-6 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". |
| SV101-6 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 544: "Clinical Laboratory ImprovementAmendment" |  |
| SV101-7 | Description | AN | 1-80 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.SV101-7 must contain at least one nonspace character. |
| SV101-7 |  |  |  |  |  |  |  | 277 | C | CSCC A8: "Acknowledgement / Rejected for relational field in error" CSC 306 Detailed description of service | 2400.SV101-7 must be present. when $2400 . \mathrm{SV} 101-2$ is present on the table of procedure codes that require a description. |
| SV101-7 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.SV101-7 must be 1-80 characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SV101-7 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 306 Detailed description of service |  |
| SV101-7 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.SV101-7 must be populated with accepted AN characters. |
| SV101-7 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 306 Detailed description of service |  |
| SV101-8 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | R | 1K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV102 | Line Item Charge Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV102 must be present. |
| SV102 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.SV102 must be numeric. |
| SV102 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.SV102 must be <= 99,999.99. |
| SV102 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 583: "Line Item Charge Amount" |  |
| SV102 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 583: "Line Item Charge Amount" | 2400.SV102 must be >= 0 |
| SV102 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" CSC 583: "Line Item Charge Amount" | 2400 .SV102 is limited to 0,1 or 2 decimal positions. |
| SV102 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 400: "Claim is out of balance: CSC 583:"Line Item Charge Amount" CSC 643: "Service Line Paid Amount" | SV102 must = the sum of all payer amounts paid found in 2430 SVD02 and the sum of all line adjustments found in 2430 CAS Adjustment Amounts. |
| SV103 | Unit or Basis for Measurement Code | ID | 2-2 | R |  |  | MJ, UN | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV103 must be present. |
| SV103 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD29: Anesthesia Unit Qualifier | 2400.SV103 must be "MJ" when SV101-3, SV101-4, SV101-5, or SV101-6 is an anesthesia modifier (AA, AD, QK, QS, QX, OY or OZ). Otherwise. must be "UN". |
| SV104 | Service Unit Count | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV104 must be present. |
| SV104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.SV104 must be numeric. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{array}{r} \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SV104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 476: "Missing or invalid units of senvice" | If $2400 . \mathrm{SV} 103=$ "MJ", $2400 . \mathrm{SV} 104$ must be 1 to 3 digits with no decimal. |
| SV104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 476: "Missing or invalid units of senvice" | $\begin{aligned} & \text { If } 2400 . \text { SV103 = "UN", } 2400 . \text { SV104 must be } \\ & >0 \text { and <= } 999.9 \end{aligned}$ |
| SV104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 476: "Missing or invalid units of service" | $\begin{aligned} & \text { If } 2400 . \text { SV103 = "UN", } 2400 . \text { SV104 must be } \\ & >0 \text { and <= 9,999.9. } \end{aligned}$ |
| SV104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 476: "Missing or invalid units of service" | $\begin{aligned} & \text { If } 2400 . \mathrm{SV} 103=\text { "MJ", } 2400 . \text { SV104 must be } \\ & >0 \text { and }<=9,999 . \end{aligned}$ |
| SV104 |  |  |  |  |  |  |  | 277 | T | CSCC A8: "Acknowledgement / Rejected for relational field in error" CSC 476: "Missing or invalid units of service" <br> CSC 454: Procedure code for services rendered. |  |
| SV104 |  |  |  |  |  |  |  | 277 | T | CSCC A8: "Acknowledgement / Rejected for relational field in error" CSC 476: "Missing or invalid units of service" <br> CSC 454: Procedure code for services rendered. |  |
| SV105 | Place of Service Code | AN | 1-2 | S |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 249: "Place of service" | 2400.SV105 must be a valid Place of Service Code on the date in BHT04. |
| SV106 | Service Type Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV107 | COMPOSITE DIAGNOSIS CODE POINTER |  |  | R |  |  |  |  |  |  |  |
| SV107-1 | Diagnosis Code Pointer | NO | 1-2 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV107-1 must be present. |
| SV107-1 |  |  |  |  |  |  |  | 277 | C | CSCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restriction on the number of repetitions" CSC 477: "Diagnosis code pointer is missinonorinvalid" | 2400.SV107-1 must be $>=1$ and $<=8$. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SV107-1 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 477: "Diagnosis code pointer is missina or invalid" | 2400.SV107-1 must be >= 1 and $<=12$. |
| SV107-1 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 477: "Diagnosis code pointer is missing or invalid" | There must be a corresponding diagnosis code in 2300 . HI where HIO1-1 is "ABK" or "BK" for the pointer value entered. <br> Example 1: if 2400. SV107-1 $=3$, when 2300.HI01-1 with "BK" or "ABK", 2300.HIO32 must be poplulated. <br> Example 2: if 2400. SV107-1 $=5$, when 2300.HIO1-1 with "BK" or "ABK", 2300.HIO52 must be poplulated. |
| SV107-2 | Diagnosis Code Pointer | NO | 1-2 | S |  |  |  | 999 | E | IK403 = 10: "Exclusion Condition Violated" | If SV107-1 is present, 2400.SV107-2 may be present. |
| SV107-2 |  |  |  |  |  |  |  | 277 | C | CSCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restriction on the number of repetitions" CSC 477: "Diagnosis code pointer is missina or invalid" | 2400.SV107-2 must be >= 1 and <= 8 . |
| SV107-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 477: "Diagnosis code pointer is missing or invalid" | 2400.SV107-2 must be >= 1 and <= 12. |
| SV107-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 477: "Diagnosis code pointer is missing or invalid" | There must be a corresponding diagnosis code in 2300 . HI where $\mathrm{HIO1}-1$ is "ABK" or "BK" for the pointer value entered. <br> Example 1: if $2400 . \mathrm{SV} 107-1=3$, when 2300.HIO1-1 with "BK" or "ABK", 2300.HIO3- <br> 2 must be poplulated. <br> Example 2: if $2400 . \mathrm{SV} 107-1=5$, when 2300.HI01-1 with "BK" or "ABK", 2300.HI052 must be poplulated. |
| SV107-3 | Diagnosis Code Pointer | NO | 1-2 | S |  |  |  | 999 | E | IK403 = 10: "Exclusion Condition Violated" | If SV107-2 is present, 2400.SV107-3 may be present. |
| SV107-3 |  |  |  |  |  |  |  | 277 | C | CSCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restriction on the number of repetitions" CSC 477: "Diagnosis code pointer is missina or invalid" | 2400. SV107-3 must be $>=1$ and $<=8$. |
| SV107-3 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 477: "Diagnosis code pointer is missing or invalid" | 2400.SV107-3 must be >= 1 and $<=12$. |
| SV107-3 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 477: "Diagnosis code pointer is missing or invalid" | There must be a corresponding diagnosis code in 2300 . HI where HIO1-1 is "ABK" or "BK" for the pointer value entered. <br> Example 1: if 2400.SV107-1 = 3, when 2300.HI01-1 with "BK" or "ABK", 2300.HIO32 must be poplulated. <br> Example 2: if 2400.SV107-1 = 5, when 2300.HI01-1 with "BK" or "ABK", 2300.HIO52 must be poplulated. |
| SV107-4 | Diagnosis Code Pointer | NO | 1-2 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If SV107-3 is present, 2400.SV107-4 may be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SV107-4 |  |  |  |  |  |  |  | 277 | C | CSCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restriction on the number of repetitions" CSC 477: "Diagnosis code pointer is missino or invalid" | 2400.SV107-4 must be >= 1 and <= 8 . |
| SV107-4 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 477: "Diagnosis code pointer is missina or invalid" | 2400.SV107-4 must be >= 1 and <= 12. |
| SV107-4 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 477: "Diagnosis code pointer is missing or invalid" | There must be a corresponding diagnosis code in 2300 . HI where $\mathrm{HIO1}-1$ is " ABK " or "BK" for the pointer value entered. <br> Example 1: if 2400. SV107-1 = 3, when 2300.HI01-1 with "BK" or "ABK", 2300.HIO3- <br> 2 must be poplulated. <br> Example 2: if 2400.SV107-1 = 5, when 2300.HI01-1 with "BK" or "ABK", 2300.HI052 must be poplulated. |
| SV108 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV109 | Emergency Indicator | ID | 1-1 | S |  |  | Y | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.SV109 must be "Y"'. |
| SV110 | Multiple Procedure Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV111 | EPSDT Indicator | ID | 1-1 | S |  |  | Y | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.SV111 must be "Y"'. |
| SV112 | Family Planning Indicator | ID | 1-1 | S |  |  | Y | 999 | R | IK403 = 7: "Invalid Code Value" | $2400 . S V 112$ must be "Y"'. |
| SV113 | Review Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV114 | National or Local Assigned Review Value | AN | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| SV115 | Co-Pay Status Code | ID | 1-1 | S |  |  | 0 | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.SV115 must be "0". |
| SV116 | Health Care Professional Shortage Area Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV117 | Reference Identification | AN | 1-50 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV118 | Postal Code | ID | 3-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV119 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV120 | Level of Care Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV121 | Provider Agreement Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV5 | DURABLE MEDICAL EQUIPMENT SERVICE |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2400.SV5 must not be present. |
| SV5 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" |  |
| SV501 | COMPOSITE MEDICAL PROCEDURE |  |  | R |  |  |  |  |  |  |  |
| SV501-1 | Procedure Identifier | ID | 2-2 | R |  |  | HC | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| SV501-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| SV501-2 | Procedure Code | AN | 1-48 | R |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SV501-3 | Procedure Modifier | AN | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV501-4 | Procedure Modifier | AN | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV501-5 | Procedure Modifier | AN | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV501-6 | Procedure Modifier | AN | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV501-7 | Desription | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV501-8 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| SV502 | Unit or Basis for Measurement Code | ID | 2-2 | R |  |  | DA | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| SV502 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| SV503 | Length of Medical Necessity | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| SV503 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |
| SV503 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" |  |
| SV503 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 260 "Length of medical necessity includina heain date" |  |
| SV503 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 402: "Amount must be greater than 0" CSC 260 "Length of medical necessity includina heain date" |  |
| SV504 | DME Rental Price | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| SV504 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |
| SV504 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 185: "Rental price for durable medical ecuinment" |  |
| SV504 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" |  |
| SV504 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 185: "Rental price for durable medical eawinment" |  |
| SV504 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 185: "Rental price for durable medical eacuinment" |  |
| SV505 | DME Purchase Price | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SV505 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |
| SV505 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 184: "Purchase price for the rented durable_medical_eauinment" |  |
| SV505 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" |  |
| SV505 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 184: "Purchase price for the rented durable medical eauinment" |  |
| SV505 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 184: "Purchase price for the rented durable_medical eawinment" |  |
| SV506 | Rental Unit Price Indicator | ID | 1-1 | R |  |  | 1, 4, 6 | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| SV506 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| SV507 | Prognosis Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK | LINE SUPPLEMENTAL INFORMATION |  | 10 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of 2400.PWK are allowed. |
| PWK01 | Attachment Report Type Code | ID | 2-2 | R |  |  | 03, 04, 05, 06, 07, $08,09,10,11,13$, 15, 21, A3, A4, AM, AS, B2, B3, B4, BR, BS, BT, CB, CK, CT, D2, DA, DB, DG, DJ, DS, EB, HC, HR, I5, IR, LA, M1, MT, NN, OB, OC, OD, OE, OX, OZ, P4, P5, PE, $\mathrm{PN}, \mathrm{PO}, \mathrm{PQ}, \mathrm{PY}, \mathrm{PZ}$, RB, RR, RT, RX, SG, V5, XP | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.PWK01 must be present. |
| PWK01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.PWK01 must be valid values. |
| PWK02 | Attachment Transmission Code | ID | 1-2 | R |  |  | $\begin{gathered} \hline \mathrm{AA}, \mathrm{BM}, \mathrm{EL}, \mathrm{EM}, \mathrm{FT}, \\ \mathrm{FX} \\ \hline \end{gathered}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.PWK02 must be present. |
| PWK02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.PWK02 must be valid values. |
| PWK03 | Report Copies Needed | NO | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK04 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK05 | Identification Code Qualifier | ID | 1-2 | S |  |  | AC | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | When 2400.PWK05 is present, 2400.PWK02 must be "BM", "EL", "EM", "FX" or "FT" . |
| PWK05 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.PWK05 must be "AC". |
| PWK06 | Identification Code | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | When 2400.PWK06 is present, 2400.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PWK06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.PWK06 must contain at least two non- space characters. |
| PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2400.PWK06 must be 2-50 characters. |
| PWK06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 489: "Attachment Control Number" |  |
| PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.PWK06 must be populated with accepted AN characters. |
| PWK06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 489: "Attachment Control Number" |  |
| PWK07 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK08 | ACTIONS INDICATED |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK09 | Request Category Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK | DURABLE MEDICAL EQUIPMENT CERTIFICATE OF medical necessity INDICATOR |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2400.PWK must not be present. |
| PWK |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" |  |
| PWK |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" |  |
| PWK01 | Attachment Report Type Code | ID | 2-2 | R |  |  | CT | 999 | R | IK403 = 1: "Required Data Element Missing" | Must not be present. |
| PWK01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | Must not be present. |
| PWK02 | Attachment Transmission Code | ID | 1-2 | R |  |  | AB, AD, AF, AG, NS | 999 | R | IK403 = 1: "Required Data Element Missing" | Must not be present. |
| PWK02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | Must not be present. |
| PWK03 | Report Copies Needed | NO | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK04 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK05 | Identification Code Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK06 | Identification Code | AN | 2-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK07 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK08 | ACTIONS INDICATED |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PWK09 | Request Category Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR1 | AMBULANCE TRANSPORT INFORMATION |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.CR1 is allowed. |
| CR101 | Unit or Basis for Measurement Code | ID | 2-2 | S |  |  | LB | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If $2400 . C R 102$ is present, 2400. CR101 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CR101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CR101 must be valid values. |
| CR102 | Patient Weight | R | 1-10 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2400. CR101 is present, then 2400.CR102 must be present. |
| CR102 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.CR102 must be >0 and <= 9,999.99. |
| CR102 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 337: "Ambulance certification/documentation" c.sc. 273 Weinht |  |
| CR103 | Ambulance Transport Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR104 | Ambulance Transport Reason Code | ID | 1-1 | R |  |  | A, B, C, D, E | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.CR104 must be present. |
| CR104 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CR104 must be valid values. |
| CR105 | Unit or Basis for Measurement Code | ID | 2-2 | R |  |  | DH | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.CR105 must be present. |
| CR105 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CR105 must be "DH". |
| CR106 | Transport Distance | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.CR106 must be present. |
| CR106 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.CR106 must be numeric. |
| CR106 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 267: "Number of miles patient was transported" | 2400.CR106 must be => 0 |
| CR106 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.CR106 must be 1-4 digits. |
| CR106 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 267 "Number of miles patient was transnorted" |  |
| CR107 | Address Information | AN | 1-55 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR108 | Address Information | AN | 1-55 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR109 | Round Trip Purpose Description | AN | 1-80 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.CR109 must be 1-80 characters. |
| CR109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 337: "Ambulance certification/documentation" |  |
| CR109 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.CR109 must be populated with accepted AN characters. |
| CR109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 337: "Ambulance certification/documentation" |  |
| CR109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.CR109 must contain at least one nonspace character. |
| CR110 | Stretcher Purpose Description | AN | 1-80 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.CR110 must contain at least one nonspace character. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA11/ } \\ 999 / \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CR110 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.CR110 must be 1-80 characters. |
| CR110 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD24: "Stretcher Purnose: |  |
| CR110 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.CR110 must be populated with accepted AN characters. |
| CR110 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" TBD24: "Stretcher Purnose: |  |
| CR3 | DURABLE MEDICAL EQUIPMENT CERTIFICATION |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2400.CR3 must not be present. |
| CR3 |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" |  |
| CR3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" |  |
| CR301 | Certification Type Code | ID | 1-1 | R |  |  | I,R,S | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| CR301 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| CR301 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| CR302 | Unit or Basis for Measurement Code | ID | 2-2 | R |  |  | MO | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| CR302 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| CR303 | Durable Medical Equipment Duration | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| CR303 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" |  |
| CR303 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 352: "Duration of treatment plan" |  |
| CR303 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |
| CR303 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 402: "Amount must be greater than 0 " <br> CSC 352: "Duration of treatment plan" |  |
| CR304 | Insulin Dependent Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CR305 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CRC |  |  |  |  | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 3 iterations of 2400.CRC with CRC01 = "07", "70" or "09" are allowed. |
| CRC |  |  |  |  | 2400 |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not support this qualifier." |  |
| CRC | AMBULANCE CERTIFICATION |  | 3 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 3 iterations of 2400.CRC with CRC01 $=$ " 07 " are allowed. |
| CRC | AMBULANCE CERTIFICATION |  | 3 | S | 2400 |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not support this qualifier." |  |
| CRC01 | Code Category | ID | 2-2 | R |  |  | 07 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.CRC01 must be present. |
| CRC01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CRC01 must be "07". |
| CRC02 | Certification Condition Indicator | ID | 1-1 | R |  |  | N, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.CRC02 must be present. |
| CRC02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CRC02 must be valid values. |
| CRC03 | Condition Code | ID | 2-3 | R |  |  | $\begin{gathered} \hline 01,04,05,06,07, \\ 08,09,12 \\ \hline \end{gathered}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.CRC03 must be present. |
| CRC03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CRC03 must be valid values. |
| CRC04 | Condition Code | ID | 2-3 | S |  |  | $\begin{gathered} 01,04,05,06,07, \\ 08,09,12 \\ \hline \end{gathered}$ | 999 | R | IK403 = 10: "Exclusion Condition Violated" | $\begin{aligned} & \text { If } 2400 . \text { CRC } 03 \text { is present, } 2400 . \text { CRC04 may } \\ & \text { be present. } \end{aligned}$ |
| CRC04 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CRC04 must be valid values. |
| CRC05 | Condition Code | ID | 2-3 | S |  |  | $\begin{gathered} 01,04,05,06,07, \\ 08,09,12 \\ \hline \end{gathered}$ | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2400. CRC04 is present, 2400. CRC05 may be present. |
| CRC05 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CRC05 must be valid values. |
| CRC06 | Condition Code | ID | 2-3 | S |  |  | $\begin{gathered} 01,04,05,06,07, \\ 08,09,12 \\ \hline \end{gathered}$ | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2400 . C R C 05$ is present, 2400. CRC06 may be present. |
| CRC06 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CRC06 must be valid values. |
| CRC07 | Condition Code | ID | 2-3 | S |  |  | $\begin{gathered} \hline 01,04,05,06,07, \\ 08,09,12 \\ \hline \end{gathered}$ | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2400 . C R C 06$ is present, $2400 . C R C 07$ may be present. |
| CRC07 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CRC07 must be valid values. |
| CRC | HOSPICE EMPLOYEE INDICATOR |  | 1 | S | 2400 |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD01: "Situational segment/element required for adjudication." | If 2300.CLM05-1 = "34" or 2400.SV105 = "34", 2400.CRC with CRC01 = "70" must be present. |
| CRC |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2400.CRC with CRC01 $=$ " 70 " is allowed. |
| CRC |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD01: "Situational segment/element required for adjudication." |  |
| CRC01 | Code Category | ID | 2-2 | R |  |  | 70 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.CRC01 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/1 } \\ 999 / 2 \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CRC01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CRC01 must be "70". |
| CRC02 | Hospice Employed Provider Indicator | ID | 1-1 | R |  |  | N, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.CRC02 must be present. |
| CRC02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CRC02 must be valid values. |
| CRC03 | Condition Indicator | ID | 2-3 | R |  |  | 65 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.CRC03 must be present. |
| CRC03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.CRC03 must be "65". |
| CRC04 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CRC05 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CRC06 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| CRC07 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CRC | CONDITION INDICATORI DURABLE MEDICAL EOUIPMENT |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2400.CRC must not be present. |
| CRC |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" |  |
| CRC |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" |  |
| CRC01 | Code Category | ID | 2-2 | R |  |  | 09 | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| CRC01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| CRC02 | Certification Condition Indicator | ID | 1-1 | R |  |  | N, Y | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| CRC02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| CRC03 | Condition Indicator | ID | 2-3 | R |  |  | 38, ZV | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| CRC03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| CRC03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 527: "Certification Condition Indicator" |  |
| CRC04 | Condition Indicator | ID | 2-3 | S |  |  | 38, ZV | 999 | R | IK403 = 10: "Exclusion Condition Violated" |  |
| CRC04 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| CRC04 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 527: "Certification Condition Indicator" |  |
| CRC05 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| CRC06 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CRC07 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| DTP | DATE - SERVICE DATE |  | 1 | R | 2400 |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2400.DTP with DTP01 = "472" must be present. |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with DTP01 = "472" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 472 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP01 must be "472". |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | TA1/ 999/ <br> 277CA | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8, RD8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP02 must be valid values. |
| DTP03 | Service Date | AN | 1-35 | R |  |  | CCYYMMDD, CCYYMMDDCCYY MMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | If 2400.DTP02 is D8, then 2400.DTP03 must be a valid date in the format of CCYYMMDD. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | If 2400.DTP02 is RD8, then 2400.DTP03 must be a valid date in the format of CCYYMMDD-CCYYMMDD. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 187: "Date(s) of service" | If 2400. DTP02 is D8, 2400.DTP03 must not be a future date. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 187: "Date(s) of service" | If 2400. DTP02 is RD8, 2400.DTP03 must not be a future date. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 187: "Date(s) of service" | If 2400.DTP02 is RD8, the first date listed in 2400.DTP03 must be a date prior or equal to the second date listed in 2400.DTP03. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 187: "Date(s) of service" |  |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 510: "Future date" <br> CSC 187: "Date(s) of service" |  |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 187: "Date(s) of service" |  |
| DTP | DATE - PRESCRIPTION DATE |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with DTP01 = "471" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 471 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP01 must be "471". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP02 must be "D8". |
| DTP03 | Prescription Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2400.DTP03 must be a valid date in the format of CCYYMMDD. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 214: "Original date of prescrintion/orders/referral." | 2400.DTP03 must not be a future date. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP | DATE - CERTIFICATION REVISION/RECERTIFICATION DATE |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2400.DTP with DTP01 = "607" must not be present. |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" |  |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 607 | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| DTP03 | Certification Revision Recertification Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" |  |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 510: "Future date" <br> CSC 529: "Certification Revision Date" |  |
| DTP | DATE-BEGIN THERAPY DATE |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" Present" | 2400.DTP with DTP01 = "463" must not be present. |
| DTP |  |  | 1 | S |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" |  |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" |  |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 463 | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| DTP03 | Begin Therapy Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" |  |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" |  |
| DTP | DATE - LAST CERTIFICATION DATE |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2400.DTP with DTP01 = "461" must not be present. |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" |  |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" |  |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 461 | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| DTP03 | Last Certification Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 580 "Last Certification Date" |  |
| DTP | DATE - DATE LAST SEEN |  | 1 | S | 2400 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with DTP01 = "304" is allowed. |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" |  |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 304 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP01 must be "304". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP02 must be "D8". |
| DTP03 | Last Seen Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2400.DTP03 must be a valid date in the format of CCYYMMDD. |
| DTP | DATE - TEST DATE |  | 2 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2400.DTP with DTP01 = "738" or "739" are allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 738, 739 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP01 must be valid values. |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP02 must be "D8". |
| DTP03 | Test Performed Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2400.DTP03 must be a valid date in the format of CCYYMMDD. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 510: "Future date" CSC 653 "Test Performed Date" | 2400.DTP03 must not be a future date. |
| DTP | DATE - SHIPPED DATE |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with DTP01 = "011" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 011 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP01 must be "011". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP02 must be "D8". |
| DTP03 | Shipped Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2400.DTP03 must be a valid date in the format of CCYYMMDD. |
| DTP | DATE - LAST X-RAY |  | 1 | S | 2400 |  |  | 999 | R | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with DTP01 = "455" is allowed. |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" |  |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 455 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP01 must be "455". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP02 must be "D8". |
| DTP03 | Last X-Ray Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2400.DTP03 must be a valid date in the format of CCYYMMDD. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 210 "Date of the Last X-rav" | 2400.DTP03 must not be a future date. |
| DTP | DATE - INITIAL TREATMENT DATE |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with DTP01 = "454" is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 454 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP01 must be "454". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP02 must be present. |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.DTP02 must be "D8". |
| DTP03 | Initial Treatment Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2400.DTP03 must be a valid date in the format of CCYYMMDD. |
| DTP03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 701 "Initial Treatment Date" | 2400.DTP03 must not be a future date. |
| QTY | AMBULANCE PATIENT COUNT |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with QTY01 = "PT" is allowed. |
| QTY01 | Quantity Qualifier | ID | 2-2 | R |  |  | PT | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.QTY01 must be present. |
| QTY01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.QTY01 must be "PT". |
| QTY02 | Ambulance Patient Count | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.QTY02 must be present. |
| QTY02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.QTY02 must be numeric. |
| QTY02 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2400.QTY02 must be > 1. |
| QTY02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.QTY02 must be 1-2 digits. |
| QTY02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's apolication system" |  |
| QTY03 | COMPOSITE UNIT OF MEASURE |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| QTY04 | Free-Form Message | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| QTY | OBSTETRIC ANESTHESIA ADDITIONAL UNITS |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.DTP with QTY01 = "FL" is allowed. |
| QTY01 | Quantity Qualifier | ID | 2-2 | R |  |  | FL | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.QTY01 must be present. |
| QTY01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.QTY01 must be "FL". |
| QTY02 | Obstetric Additional Units | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.QTY02 must be present. |
| QTY02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.QTY02 must be numeric. |
| QTY02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 402: "Amount must be greater than 0" <br> TBD25: "Obstetric Additional Units" | 2400.QTY02 must be >0. |
|  |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.QTY02 must be 1-2 digits. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| QTY02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD25: "Obstetric Additional Units" |  |
| QTY03 | COMPOSITE UNIT OF MEASURE |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| QTY04 | Fee-Form Message | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| MEA | TEST RESULTS |  | 5 | S | 2400 |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only 5 iterations of 2400.DTP are allowed. |
| MEA01 | Measurement Reference Identification Code | ID | 2-2 | R |  |  | OG, TR | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.MEA01 must be present. |
| MEA01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.MEA01 must be valid values. |
| MEA02 | Measurement Qualifier | ID | 1-3 | R |  |  | HT, R1, R2, R3, R4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.MEA02 must be present. |
| MEA02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.MEA02 must be valid values. |
| MEA03 | Test Result | R | 1-20 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.MEA03 must be present. |
| MEA03 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.MEA03 must be numeric. |
| MEA03 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.MEA03 must be $>=0$ and $<=99.9$. |
| MEA03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 300 "Lab/test renort/notes/results" |  |
| MEA03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..."CSC 697: "Too many decimal positions" CSC 300 "Lab/test renort/notos/results" | 2400.MEA03 is limited to 1 decimal position. |
| MEA04 | COMPOSITE UNIT OF MEASURE |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| MEA05 | Range Minimum | R | 1-20 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| MEA06 | Range Maximum | R | 1-20 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| MEA07 | Measurement Significance Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| MEA08 | Measurement Attribute Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| MEA09 | Surface/Layer/Position Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| MEA10 | Measurement Method or Device | ID | 2-4 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| MEA11 | Code List Qualifier Code | ID | 1-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| MEA12 | Industry Code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CN1 | CONTRACT INFORMATION |  | 1 | S | 2400 |  |  | 999 | E | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF | REPRICED LINE ITEM REFERENCE NUMBER |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2400.REF with REF01 = "9B" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9B | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF01 must be "9B". |
| REF02 | $\underset{\substack{\text { Repriced Line Item Reference } \\ \text { Number }}}{\text { Rum }}$ | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 636: "Repriced Line Item Reference Number" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 636: "Repriced Line Item Reference Number" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | \|K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | ADJUSTED REPRICED LINE ITEM REFERENCE NUMBER |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2400.REF with REF01 $=$ "9D" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9D | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF01 must be "9D". |
| REF02 | Adjusted Repriced Line Item Reference Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400 .REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 518: "Adjusted Repriced Line item Reference Number" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 518: "Adjusted Repriced Line item Reference_Number" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | PRIOR AUTHORIZATION |  | 5 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 5 iterations of 2400.REF with REF01 = "G1" are allowed. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF01 must be "G1". |
| REF02 | Prior Authorization or Referral Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 252: "Authorization/ certification numberr" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 252: "Authorization/ certification numberr" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  |  |  |  |  |  |  |  |  |
| REF04-1 | Reference Identifier Qualifier | ID | 2-3 | R |  |  | 2 U | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF04-1 must be "2U". |
| REF04-2 | Other Payer Primary Idenitifer | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2400.REF04-1 is present, 2400.REF04-2 must be present. |
| REF04-2 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2400. REF04-2 must $=2330 \mathrm{~B}$. NM 109 |
| REF04-3 | Reference Identification Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04-4 | Reference Identification | AN | 1-50 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04-5 | Reference Identification Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04-6 | Reference Identification | AN | 1-50 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | LINE ITEM CONTROL NUMBER |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2400.REF with REF01 $=$ " $6 R$ " is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 6R | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF01 must be "6R". |
| REF02 | Line Item Control Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-30 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 584: "Line Item Control Number" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 584: "Line Item Control Number" |  |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 584: "Line Item Control Number" | 2400.REF02 must be unique within a single iteration of 2300.CLM01. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| REF | MAMMOGRAPHY CERTIFICATION NUMBER |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.REF with REF01 = "EW" is allowed. |
| REF01 | Reference identification Qualifier | ID | 2-3 | R |  |  | EW | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF01 must be "EW". |
| REF02 | Mammography Certification Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" |  |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 252: "Authorization/certification number" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" |  |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 252: "Authorization/certification number" |  |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 252: "Authorization/certification number" | 2400.REF02 must be a valid Mammography Certification Number. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | CLINICAL LABORATORY IMPROVEMENT AMENDMENT (CLIA) IDENTIFICATION |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.REF with REF01 = "X4" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | X4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF01 must be "X4". |
| REF02 | Clinical Laboratory Improvement Amendment Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one nonspace character. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 544: "Clinical Laboratory Imnrovement Amendment" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 544: "Clinical Laboratory Imorovement Amendment" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | REFERRING CLINICAL LABORATORY IMPROVEMENT AMENDMENT (CLIA) FACILITY |  | 1 | S | 2400 |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 544: "Clinical Laboratory Improvement Amendment" |  |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.REF with REF01 = "F4" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | F4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF01 must be "F4". |
| REF02 | Referring CLIA Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 544: "Clinical Laboratory Imnrovement Amendment" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 544: "Clinical Laboratory improvement Amendment" |  |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one nonspace character. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | IMMUNIZATION BATCH NUMBER |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.REF with REF01 = "BT" is allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | BT | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF01 must be "BT". |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 | Immunization Batch Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 576: "Immunization Batch Number" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 576: "Immunization Batch Number" |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | REFERRAL NUMBER |  | 5 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 5 iterations of 2400.REF with REF01 = "9F" are allowed. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9 F | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF01 must be "9F". |
| REF02 | Referral Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 48- "Referral/authorization" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 48: "Referral/authorization." |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  |  |  |  |  |  |  |  |  |
| REF04-1 | Reference Identifier Qualifier | ID | 2-3 | R |  |  | 2 U | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.REF04-1 must be "2U". |
| REF04-2 | Other Payer Primary Idenitifer | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2400.REFO4-1 is present, 2400.REF04-2 must be present. |
| REF04-2 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2400. REF04-2 must $=2330 \mathrm{~B} . \mathrm{NM} 109$ |
| REF04-3 | Reference Identification Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04-4 | Reference Identification | AN | 1-50 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04-5 | Reference Identification Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF04-6 | Reference Identification | AN | 1-50 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |
| AMT | SALES TAX AMOUNT |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.AMT with AMT01 = "T" is allowed. |
| AMT01 | Amount Qualifier Code | ID | 1-3 | R |  |  | T | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.AMT01 must be present. |
| AMT01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.AMT01 must be "T". |
| AMT02 | Sales Tax Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.AMT02 must be present. |
| AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.AMT02 must be numeric. |
| AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.AMT02 Must be <= 99,999.99. |
| AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 645. "Service Tax Amount" |  |
| AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" <br> CSC 645. "Service Tax Amount" | 2400.AMT02 is limited to 0,1 or 2 decimal positions. |
| AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| AMT | POSTAGE CLAIMED AMOUNT |  | 1 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.AMT with AMT01 = "F4" is allowed. |
| AMT01 | Amount Qualifier Code | ID | 1-3 | R |  |  | F4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.AMT01 must be present. |
| AMT01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.AMT01 must be "F4". |
| AMT02 | Postage Claimed Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.AMT02 must be present. |
| AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.AMT02 must be numeric. |
| AMT02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 402: "Amount must be greater than 0" CSC 617: "Postage Claimed Amount" | 2400.AMT02 must be $>0$. |
| AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" CSC 617: "Postage Claimed Amount" | 2400.AMT02 is limited to 0,1 or 2 decimal positions. |
| AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| K3 | FILE INFORMATION |  | 10 | S | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of 2400.K3 are allowed. |
| K301 | Fixed Format Information | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.K301 must be present. |
| K301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.K301 must be 1-80 characters |
| K301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 569: "Fixed Format Information" |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| K301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | $2400 . \mathrm{K} 301$ must be populated with accepted AN characters. |
| K301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 569: "Fixed Format Information" |  |
| K301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.K301 must contain at least one nonspace character. |
| K302 | Record Format Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| K303 | COMPOSITE UNIT OF MEASURE |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NTE | LINE NOTE |  | 1 | S | 2400 |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 586: "Line note text". |  |
| NTE |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.NTE with NTE01 = "ADD" or "DCP"is allowed. |
| NTE01 | Note Reference Code | ID | 3-3 | R |  |  | ADD, DCP | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400. NTE01 must be present. |
| NTE01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.NTE01 must be valid values. |
| NTE02 | Line Note Text | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.NTE02 must be present. |
| NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.NTE02 must contain at least one non- space character. |
| NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.NTE02 must be 1-80 characters. |
| NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 586: "Line Note Text" |  |
| NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.NTE02 must be populated with accepted AN characters. |
| NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 586: "Line-Note-Text" |  |
| NTE | THIRD PARTY ORGANIZATION NOTE |  | 1 | S | 2400 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.NTE with NTE01 = "TPO" is allowed. |
| NTE01 | Third Party Organization Notes | ID | 3-3 | R |  |  | TPO | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.NTE01 must be present. |
| NTE01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.NTE01 must be "TPO". |
| NTE02 | Line Note Text | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.NTE02 must be present. |
| NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.NTE02 must contain at least one non- space character. |
| NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.NTE02 must be 1-80 characters. |
| NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 586: "Line Note Text" EIC TU Third Party Repricing \| |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.NTE02 must be populated with accepted AN characters. |
| NTE02 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 511: "Invalid character" } \\ & \text { CSC 586: "Line Note Text" } \\ & \text { EIC TU Third Party Repricing } \\ & \text { Oraanization(TPO) } \end{aligned}$ |  |
| PS1 | PURCHASED SERVICE PROVIDER IDENTIFIER |  | 1 | S | 2400 |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD01: "Situational segment/element required for adjudication." | If 2420B.NM1 with NM101 = "QB" is present, 2400.PS1 must be present. |
| PS1 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.NTE "TPO"is allowed. |
| PS101 | Purchased Service Provider Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.PS101 must be present. |
| PS101 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | $\begin{aligned} & \text { 2400.PS101 must }=2420 \text { B. } \mathrm{NM} 109 \text { or } \\ & \text { 2420B.REF02 } \end{aligned}$ |
| PS101 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.PS102 must be > 0 and <= 99,999.99. |
| PS102 | Purchased Service Charge Amount | R | 1-18 | R |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 469: "Purchase Service Charge" |  |
| PS103 | State or Province Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |
| HCP | LINE PRICING REPRICING INFORMATION |  | 1 | S | 2400 |  |  | 999 | R | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.HCP is allowed. |
| HCPO1 | Pricing Methodology | ID | 2-2 | R |  |  | $\begin{aligned} & 00,01,02,03,04, \\ & 05,06,07,08,09 \\ & 10,11.12 .13,14 \\ & \hline \end{aligned}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.HCP01 must be present. |
| HCP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.HCP01 must be valid values. |
| HCP02 | Repriced Allowed Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.HCP02 must be present. |
| HCP02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.HCP02 must be <= 99,999.99 |
| HCP02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD15: "Repriced Allowed Amount" |  |
| HCP03 | Repriced Saving Amount | R | 1-18 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | $2400 . \mathrm{HCP} 03$ must be $<=99,999.99$ |
| HCP03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 637: "Repriced Saving Amount" |  |
| HCP04 | Repricing Organization Identifier | AN | 1-50 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.HCP04 must contain at least one nonspace character. |
| HCP04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | $2400 . \mathrm{HCP} 04$ must be 1-50 characters. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HCP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 153: "Entity's ID Number" EIC TU Third Party Repricing Oraanization (TPO) |  |
| HCP04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.HCP04 must be populated with accepted AN characters. |
| HCP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 153: "Entity's ID Number" EIC TU Third Party Repricing Organization(TPO) |  |
| HCP05 | Repricing Per Diem or Flat Rate Amount | R | 1-9 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | $2400 . \mathrm{HCP} 05$ must be 1 to 9 digits. |
| HCP05 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 638: "Repricing Per Diem or Flat Rate Amount" |  |
| HCP06 | Repriced Approved Ambulatory Patient Group Code | AN | 1-50 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.HCP06 must contain at least one nonspace character. |
| HCP06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.HCP06 must be 1-50 characters. |
| HCP06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 635: "Repriced Approved Ambulatorv Patient Groun" |  |
| HCP06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.HCP06 must be populated with accepted AN characters. |
| HCP06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 635: "Repriced Approved Ambulatorv Patient_Groun" |  |
| HCP07 | Repriced Approved Ambulatory Patient Group Amount |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD05 must be numeric. |
|  |  | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.HCP07 must be << 99,999.99 |
| HCP07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TDB18: "Repriced Approved Ambulatory Patient Group Amount" |  |
| HCP08 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| HCP09 | Product or Service ID Qualifier | ID | 2-2 | s |  |  | ER, HC, IV, WK | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.HCP09 must be valid values. |
| HCP09 |  |  |  |  |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If $2400 . \mathrm{HCP} 10$ is present, 2400. HCP09 must be present. |
| HCP10 | Procedure Code | AN | 1-48 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If $2400 . \mathrm{HCP} 09$ is present, $2400 . \mathrm{HCP10}$ must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HCP10 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 507: "HCPCS" | When 2400.HCP09 = "HC", 2400.HCP10 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = " 472 ". |
| HCP11 | Unit or Basis for Measurement Code | ID | 2-2 | S |  |  | MJ, UN | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.HCP11 must be valid values. |
| HCP11 |  |  |  |  |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If $2400 . \mathrm{HCP} 12$ is present, $2400 . \mathrm{HCP} 11$ must be present. |
| HCP12 | Repriced Approved Service Unit <br> Count | R | 1-15 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If $2400 . \mathrm{HCP11}$ is present, $2400 . \mathrm{HCP} 12$ must be present. |
| HCP12 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | $2400 . \mathrm{HCP} 12$ must be 1-8 digits. |
| HCP12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD21: "Repriced Approved Service Unit Count" |  |
| HCP12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Invalid Decimal Precision" TBD21: "Repriced Approved Service Unit Count" | 2400.HCP12 is limited to 0 to 3 decimal positions. |
| HCP13 | Reject Reason Code | ID | 2-2 | S |  |  | $\begin{gathered} \hline \mathrm{T} 1, \mathrm{~T} 2, \mathrm{~T} 3, \mathrm{~T} 4, \mathrm{~T} 5, \\ \mathrm{~T} 6 \end{gathered}$ | 999 | R | IK403 = 7: "Invalid Code Value" | 2400.HCP13 must be valid values. |
| HCP14 | Policy Compliance Code | ID | 1-2 | S |  |  | 1, 2, 3, 4, 5 | 999 | R | IK403 = 7: "Invalid Code Value" | 2400. HCP14 must be valid values. |
| HCP15 | Exception Code | ID | 1-2 | S |  |  | 1, 2, 3, 4, 5, 6 | 999 | R | IK403 = 7: "Invalid Code Value" | 2400. HCP15 must be valid values. |
| LIN | DRUG IDENTIFICATION |  | 1 | S | 2410 | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2410.LIN is allowed. |
| LINO1 | Assigned Identification | AN | 1-20 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LINO2 | Product or Service ID Qualifier | ID | 2-2 | R |  |  | N4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.LINO2 must be present. |
| LIN02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2410.LINO2 must be "N4". |
| LINO3 | National Drug Code | AN | 1-48 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.LIN03 must be present. |
| LINO3 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 218: "NDC number" | 2410.LINO3 must be a valid NDC code. |
| LIN03 |  |  |  |  |  |  |  | 277 | C | CSCC A8: Acknowledgement / Rejected for relational field in error. CSC 218: "NDC number" CSC 507: "HCPCS" |  |
| LIN03 |  |  |  |  |  |  |  | 277 | C | CSCC A8: Acknowledgement / Rejected for relational field in error. CSC 218: "NDC number" CSC 507: "HCPCS" |  |
| LINO4 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN05 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN06 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN07 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/I } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| LIN08 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN09 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN10 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN11 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN12 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN13 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN14 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN15 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN16 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN17 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN18 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN19 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN20 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN21 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN22 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN23 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN24 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN25 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN26 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN27 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN28 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN29 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN30 | Product/Service ID Qualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LIN31 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP | DRUG PRICING |  | 1 | R | 2410 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2410.LIN is present, 2410.CTP must be present. |
| CTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2410.CTP is allowed. |
| CTP01 | Class of Trade Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP02 | Price Identifier Code | ID | 3-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP03 | Unit Price | R | 1-17 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP04 | National Drug Unit Count | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.CTP04 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CTP04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2410.CTP04 must be }>0 \text { and } \\ & <=9,999,999.999 \text {. } \end{aligned}$ |
| CTP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 216 "Drucinformation" |  |
| CTP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 216 "Druoinformation" | 2410.CTP04 is limited to 3 decimal positions. |
| CTP05 | COMPOSITE UNIT OF MEASURE |  |  | R |  |  |  |  |  |  | If CTP04 is present then CPT05 must be present. |
| CTP05-1 | Unit or Basis For Measurement Code | ID | 2-2 | R |  |  | F2, GR, ME, ML, UN | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410. CTP05-1 must be present. |
| CTP05-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2410.CTP05-1 must be valid values. |
| CTP05-2 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-3 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-4 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-5 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-6 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-7 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-8 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-9 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-10 | Unit or Basis For Measurement <br> Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-11 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-12 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-13 | Unit or Basis For Measurement <br> Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP05-14 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |
| CTP05-15 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP06 | Price Multiplier Qualifier | ID | 3-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP07 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP08 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP09 | Basis of Unit Price Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP10 | Condition Value | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| CTP11 | Multiple Price Quantity | NO | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF | PRESCRIPTION OR COMPOUND DRUG ASSOCIATION NUMBER |  | 1 | S | 2410 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2410 . LIN is present, 2410.REF may be present. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2410.REF is allowed. |
| REF |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 219: "Prescription number." | If SV101-3, SV101-4,SV101-5 or SV101-6 are = "J1", 2410.REF with REF01 = "XZ" must be present. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | VY, XZ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2410.REF01 must be valid values. |
| REF02 | Prescription Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2410.REF02 must be at least one non-space character |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2410.REF02 must be 1-50 characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2410.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 511: "Invalid character" CSC 219: "Prescription number" |  |
| REF03 | Desciption | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM1 | RENDERING PROVIDER NAME |  | 1 | S | 2420A | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420A.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 82 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420A.NM101 must be "82". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1,2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420A.NM102 must be valid values. |
| NM103 | Rendering Provider Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM103 must contain at least one non space character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420A.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC 82 Renderino Provider |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM103 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC 82 Renderina Provider |  |
| NM104 | Rendering Provider First Name | AN | 1-35 | S |  |  |  | 999 | R | IK403 = I13: "Implementation <br> Dependent "Not Used" Data Element Present" | If 2420A.NM102 is "2", 2420A.NM104 must not be present. |
| NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM104 must contain at least one nonspace character. |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420A.NM104 must be 1-35 characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC 82 Rendering Provider |  |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM104 must be populated with accepted AN characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC 82 Rendering Provider |  |
| NM105 | Rendering Provider Middle Name | AN | 1-25 | S |  |  |  | 999 | R | IK403 = I13: "Implementation <br> Dependent "Not Used" Data Element Present" | If 2420A.NM102 is "2", 2420A.NM105 must not be present. |
| NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM105 must contain at least one nonspace character. |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420A.NM105 must be 1-25 characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC 82 Renderina Provider |  |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM105 must be populated with accepted AN characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC 82 Renderino Provider |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | Must not be present. |
| NM107 | Rendering Provider Name Suffix | AN | 1-10 | S |  |  |  | 999 | R | IK403 = I13: "Implementation <br> Dependent "Not Used" Data Element Present" | If 2420A.NM102 is "2", 2420A.NM107 must not be present. |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420A.NM107 must be 1-10 characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC 82 Renderino Provider |  |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM107 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" FIC 82 Renderino Provider |  |
| NM108 | Identlfication CodeQualifier | ID | 1-2 | S |  |  | XX | 277 | C | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC 82 Rendering Provider | 2420C.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. |
| NM108 |  |  |  |  |  |  |  | 277 | C | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> TBD01: "Situational segment/element required for adjudication." <br> EIC 82 Rendering Provider | 2420C.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420A.NM108 must be "XX". |
| NM109 | Rendering Provider Identifier | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420A.NM108 is present, 2420A.NM109 must be present. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC 82 Renderina Provider | 2420A.NM109 must be valid according to the NPI algorithm. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC 82 Renderina Provider | 2420A.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC 82 Renderina Provider | The first position of 2420A.NM109 must be a "1". |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PRV | RENDERING PROVIDER SPECIALTY INFORMATION |  | 1 | S | 2420A |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2420A.NM1 is present, 2420A.PRV may be present. |
| PRV |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420A.PRV is allowed. |
| PRV01 | Provider Code | ID | 1-3 | R |  |  | PE | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.PRV01 must be present |
| PRV01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420A.PRV01 must be "PE". |
| PRV02 | Reference Identification Qualifier | ID | 2-3 | R |  |  | PXC | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.PRV02 must be present. |
| PRV02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420A.PRV02 must be "PXC". |
| PRV03 | Provider Taxonomy Code | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.PRV03 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PRV03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 145: "Entity's specialty/taxonomy code" <br> FIC 82 Renderino Provider | 2420A.PRV03 must be valid Taxonomy Code |
| PRV04 | State or Province Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PRV05 | PROVIDER SPECIALTY INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PRV06 | Provider Organization Code | ID | 3-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | RENDERING PROVIDER SECONDARY IDENTIFICATION |  | 20 | S | 2420A |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2420A.NM1 is present and 2420A.NM109 is not present, 2420A. REF with REF01 = "0B", "1G", "G2" or "LU" may be present. |
| REF |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Only four iterations of 2420A.REF with REF01 = "1G", "0B", "G2" or "LU" are allowed. |
| REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420A.REF must not be present. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420A.REF01 must be valid values. |
| REF02 | Rendering Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 277 | C | $\begin{array}{\|l} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..." } \\ \text { CSC 133: "Entity's UPIN" } \\ \text { CSC 560: "Entity's } \\ \text { Additional/Secondary Identifier" } \\ \hline \text { FIC 82 Renderino Provider } \\ \hline \end{array}$ | When 2420A.REF01 = "1G", 2420A.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | When 2420A.REF01 = "OB", "G2" or "LU", 2420A.REF02 must be $1-50$ characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 560: "Entity's Additional/Secondary Identifier" |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | When 2420A.REF01 = "OB", "G2" or "LU", 2420A.REF02 must be populated with accepted AN characters |
|  |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" CSC 560: "Entity's Additional/Secondary Identifier" EIC 82 Rendering Provider |  |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | When 2310A.REF01 = "OB", "G2" or "LU", 2310A.REF02 must contain at least one nonspace character. |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | CSC 128: "Entity's tax id" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF04 | REFERENCE IDENTIFIER |  |  | S |  |  |  |  |  |  |  |
| REF04-1 | Reference Identifier Qualifier | ID | 2-3 | R |  |  | 2 U | 999 | R | IK403 = 7: "Invalid Code Value" | 2420A.REF04-1 must be "2U". |
| REF04-2 | Other Payer Primary Idenitifer | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420A.REF04-1 is present, 2420A.REF042 must be present. |
| REF04-2 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2420A,REF04-2 must $=2330 \mathrm{~B} . \mathrm{NM109}$. |
| REF04-3 | Reference Identification Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04-4 | Reference Identification | AN | 1-50 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04-5 | Reference Identification Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04-6 | Reference Identification | AN | 1-50 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM1 | PURCHASED SERVICE PROVIDER NAME |  | 1 | S | 2420B | 1 |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD01: "Situational segment/element required for adjudication." | If 2400.PS1 is present, 2420B.NM1 with NM101 = "QB" must be present. |
| NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420B.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | QB | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420B.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420B.NM101 must be "QB". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420B.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420B.NM102 must be valid values. |
| NM103 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM104 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | S |  |  | XX | 277 | C | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC QB Purchased Service Provider | 2420B.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier". |
| NM108 |  |  |  |  |  |  |  | 277 | C | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." EIC QB Purchased Service Provider | 2420B.NM108 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420B.NM108 must be "XX". |
| NM109 | Purchased Service Provider Identifier | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420B.NM108 is present, 2420B.NM109 must be present. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" EIC QB Purchased Service Provider | 2420B.NM109 must be valid according to the NPI algorithm. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" EIC QB Purchased Service Provider | The first position of 2420B.NM109 must be a "1". |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | PURCHASED SERVICE PROVIDER SECONDARY IDENTIFICATION |  | 20 | S | 2420B |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2420B.NM1 is present and 2420B.NM109 is not present, 2420B.REF with REF01 = "1G" may be present. |
| REF |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of 2420B.REF with REF01 $=" 1 \mathrm{G}$ " is allowed. |
| REF |  |  |  |  |  |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420B.REF01 must be present |
| REF01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not support this qualifier." | 2420B.REF01 must be "1G". |
| REF02 | Purchased Service Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420B.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 133: "Entity's UPIN" EIC QB Purchased Service Provider | 2420B.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | Reference Identifier Qualifier |  |  |  |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM1 | SERVICE FACILITY LOCATION NAME |  | 1 | S | 2420C | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | One one iteration of 2420C.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 77 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420C.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420C.NM101 must be "77". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420C.NM102 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420C.NM102 must be "2". |
| NM103 | Laboratory or Facility Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420C.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM103 must be at least one nonspace character |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420C.NM103 must be 1-50 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. 77 Service I مcation |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM103 must be populated wih accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC. 77 Service ل مcation |  |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | S |  |  | XX | 999 | R | IK403 = 7: "Invalid Code Value" | 2420C.NM108 must be "XX". |
| NM109 | Laboratory or Facility Primary Identifier | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420C.NM108 is present, 2420C.NM109 must be present. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC. 77 Service ل مcation | 2420C.NM109 must be valid according to the NPI algorithm. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC: 77 Service _ ocation | The first position of 2420C.NM109 must be a "1". |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | SERVICE FACILITY LOCATION ADDRESS |  | 1 | R | 2420C |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2420C.NM1 is presnt, 2420C.N3 must be present. |
| N3 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only one iteration of 2420C.N3 is allowed. |
| N301 | Laboratory or Facility Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420C.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.N301 must contain at least one non- space character. |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420C.N301 must be 1 - 55 characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" FIC. 77 Service لمcation |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420C.N301 must be populated with accepted AN characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" EIC: 77 Service__ocation |  |
| N302 | Laboratory or Facility Address Line | AN | 1-55 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.N302 must contain at least one nonspace character. |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420C.N302 must be 1-55 characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 503: "Entity's Street address" <br> FIC. 77 Service I مcation |  |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420C.N302 must be populated with accepted AN characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" FIC: 77 Service Location |  |
| N4 | SERVICE FACILITY LOCATION CITYISTATEIZIP |  | 1 | R | 2420C |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2420C.NM1 is presnt, 2420C.N4 must be present. |
| N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420C.N4 is allowed. |
| N401 | Laboratory or Facility City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420C.N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.N401 must contain at least two non- space characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2420C.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 502: "Entity's City" <br> FIC. 77 Service ل مcation |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420C.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 502: "Entity's City" FIC. 77 Service I مcation |  |
| N402 | Laboratory or Facility State or Province Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420C.N404 is not present, 2420C.N402 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{array}{r} \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N402 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" EIC: 77 Service Location | 2420C. N402 must be a valid State Code. |
| N403 | Laboratory or Facility Postal Zone or ZIP Code | ID | 3-15 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420C.N404 is not present, 2420C.N403 must be present. |
| N403 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" EIC: 77 Service Location | 2420C.N403 must be a valid 9 digit Zip Code. |
| N404 | Service Facility Location Country Code | ID | 2-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N407 | Country Subdivision Code | ID | 1-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | SERVICE FACILITY LOCATION SECONDARY IDENTIFICATION |  | 3 | S | 2420C |  |  | 277 | T | CSCC A7: "Acknowledgement RRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2420C. REF must not be present. |
| NM1 | SUPERVISING PROVIDER NAME |  | 1 | S | 2420D | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420D.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | DQ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420D.NM101 must be "DQ". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420D.NM102 must be "1". |
| NM103 | Supervising Provider Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM103 must contain at least one non- space character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420D.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. DO_Sunervisina Provider |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM103 must be populated with accepted AN characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC: DO Sunervisina Provider |  |
| NM104 | Supervising Provider Name First | AN | 1-35 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM104 must contain at least one non space character. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420D.NM104 must be 1-35 characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC. DO_Sunervisina Provider |  |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM104 must be populated with accepted AN characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC: DO Sunervisina Provider |  |
| NM105 | Supervising Provider Middle Name or Initial | AN | 1-25 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM105 must contain at least one non- space character. |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420D.NM105 must be 1-25 characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. مO Sunervisina Provider |  |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM105 must be populated with accepted AN characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC: DO Sunervisina Provider |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Supervising Provider Name Suffix | AN | 1-10 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM107 must contain at least one non- space character. |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420D.NM107 must be 1-10 characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC. SمO.Sunervisina Provider |  |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM107 must be populated with accepted AN characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" FIC- DOLUnervisina Provider |  |
| NM108 | Identification Code Qualifier | ID | 1-2 | S |  |  | XX | 277 | C | CSCC A8: "Acknowledgement / Rejected for relational field in error." TBD01: "Situational segment/element required for adjudication." EIC: DQ Supervising Provider | 2420D.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier". |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/I } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM108 |  |  |  |  |  |  |  | 277 | C | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> TBD01: "Situational segment/element required for adjudication." <br> EIC: DQ Supervising Provider | 2420D.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420D.NM108 must be "XX". |
| NM109 | Supervising Provider Identifier | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420D.NM108 is present, 2420D.NM109 must be present. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC. مD_Sunervisina Provider | 2420D.NM109 must be valid according to the NPI algorithm. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC- DO_Sunervisina Provider | The first position of 2420D.NM109 must be a "1". |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | SUPERVISING PROVIDER SECONDARY IDENTIFICATION |  | 20 | S | 2420D |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2420D.NM1 is present and 2420D.NM109 is not present, 2420D.REF with REF01 = "0B", "1G" or "LU" may be nresent. |
| REF |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Only 3 iterations of 2420D.REF with REF01 = "0B", "1G" or "LU" are allowed |
| REF |  |  |  |  |  |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420D.REF01 must be valid values. |
| REF02 | Supervising Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 133: "Entity's UPIN" <br> CSC 560 : "Entity's <br> Additional/Secondary Identifier" <br>  | When 2420D.REF01 = "1G", 2420D.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |
| REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | When 2420D.REF01 = "OB" or "LU", 2420D. REF02 must contain at least one nonspace character. |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | When 2420D.REF01 = "0B" or "LU", <br> 2420D.REF02 must be $1-50$ characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{array}{r} \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 560 : "Entity's Additional/Secondary Identifier" FIC. - Comervisino Provider |  |
| REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | When 2420D.REF01 = "OB" or "LU", 2420D.REF02 must be populated with accepted AN characters. |
| REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 560: "Entity's Additional /Secondary Identifier" FIC. DO Sunervisina Provider |  |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | REFERENCE IDENTIFIER |  |  | S |  |  |  |  |  |  |  |
| REF04-1 | Reference Identifier Qualifier | ID | 2-3 | R |  |  | 2 U | 999 | R | IK403 = 10: "Exclusion Condition Violated" | $\begin{aligned} & \text { If 2420D.REF01 = "LU", 2420D.REF04-1 } \\ & \text { may be present. } \end{aligned}$ |
| REF04-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420D.REF04-1 must be "2U". |
| REF04-2 | Other Payer Primary Idenitifer | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | If 2420D.REF04-1 is present, 2420D.REF04- 2 must be present. |
| REF04-2 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2420D,REF04-2 must $=2330 \mathrm{~B} . \mathrm{NM} 109$. |
| REF04-3 | Reference Identification Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |
| REF04-4 | Reference Identification | AN | 1-50 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04-5 | Reference Identification Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04-6 | Reference Identification | AN | 1-50 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM1 | ORDERING PROVIDER NAME |  | 1 | S | 2420E | 1 |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" |  |
| NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420E.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | DK | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420E.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420E.NM101 must be "DK". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420E.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420E.NM102 must be "1". |
| NM103 | Ordering Provider Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420E.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420E.NM103 must contain at least one non- space character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420E.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" Flc. OK Orderino Phusician |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420E.NM103 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC. DK Orderino Phusician |  |
| NM104 | Ordering Provider First Name | AN | 1-35 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420E.NM104 must contain at least one nonspace character. |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420E.NM104 must be 1-35 characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" Flc. DK Orderino Phusician |  |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420E.NM104 must be populated with accepted AN characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC. DK Orderino Phusician |  |
| NM105 | Ordering Provider Middle Name or Initial | AN | 1-25 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420E.NM105 must contain at least one non- space character. |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420E.NM105 must be 1-25 characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. DK Orderino Phusician |  |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420E.NM105 must be populated with accepted AN characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC. DK Ordering Phusician |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Ordering Provider Name Suffix | AN | 1-10 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420E.NM107 must contain at least one non- space character. |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420E.NM107 must be 1-10 characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 125: "Entity's Name" <br> FIC. DK Ordering Phusician |  |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420E.NM107 must be populated with accepted AN characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" FIC. DK Orderina Phusician |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM108 | Identification Code Qualifier | ID | 1-2 | S |  |  | XX | 277 | C | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC: DK Ordering Phusician | 2420E.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier". |
| NM108 |  |  |  |  |  |  |  | 277 | C | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." <br> EIC: DK Ordering Phusician | 2420E.NM108 must be present. |
| NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420E.NM108 must be "XX". |
| NM109 | Ordering Provider Identifier | AN | 2-80 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420E.NM108 is present, 2420E.NM109 must be present. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC: DK Orderina Phusician | 2420E.NM109 must be valid according to the NPI algorithm. |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC: DK Orderina Phusician | The first position of 2420E.NM109 must be a "1". |
| NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC: DK Referrina Provider |  |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | ORDERING PROVIDER ADDRESS |  | 1 | R | 2420E |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2420E.NM1 is present, 2420E.N3 may be present. |
| N3 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK304= 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2420E.N3 is allowed. |
| N301 | Ordering Provider Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420E.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420E.N301 must contain at least one non- space character. |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | Location.N301 must be 1-55 characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" FIC. DK Ordering Phusician |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420E.N301 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" EIC. DK Orderino_Phusician |  |
| N302 | Ordering Provider Address Line | AN | 1-55 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420E.N302 must contain at least one nonspace character. |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420E.N302 must be 1-55 characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" FIC. OK Orderino Phusician |  |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420E.N302 must be populated with accepted AN characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" FIC. DK Ordering Phusician |  |
| N4 | ORDERING PROVIDER CITYISTATEIZIP CODE |  | 1 | R | 2420E |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2420E.NM1 is present, 2420E.N4 may be present. |
| N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420E.N4 is allowed. |
| N401 | Ordering Provider City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420E.N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420E.N401 must contain at least two non- space characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2420E.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information...." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" FIC. DK Orderina Phusician |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420E.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 502: "Entity's City" FIC. DK Orderino Phusician |  |
| N402 | Ordering Provider State or Province Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420E.N404 is not present, 2420E.N402 must be present. |
| N402 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" ElC: DK Orderina Phvsician | 2420E.N402 must be a valid State Code. |
| N403 | Ordering Provider Postal Zone or ZIP Code | ID | 3-15 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420E.N404 is not present, 2420E.N403 must be present. |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N403 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" EIC: DK Ordering Physician | 2420E.N403 must be a valid Zip Code. |
| N404 | Ordering Provider Country Code | ID | 2-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N407 | Country Subdivision Code | ID | 1-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF | $\qquad$ |  | 20 | S | 2420E |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2420E.NM1 is present, 2420E.REF may be present. |
| REF |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iterations of 2420E.REF are allowed. |
| REF |  |  |  |  |  |  |  | 999 | R | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2 | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not sunnort this qualifier." | 2420E.REF01 must be "1G". |
| REF02 | Ordering Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420E.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 133: "Entity's UPIN" <br> CSC 560: "Entity's <br> Additional/Secondary Identifier" <br> FIC. DK Orderina Phusician | 2420E.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | Reference Identifier |  |  | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| PER | ORDERING PROVIDER CONTACT INFORMATION |  | 1 | S | 2420E |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2420E.NM1 is present, 2420E.PER may be present. |
| PER |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2400. CR 3 is present, 2420E.PER must be present. |
| PER |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | One iteration of 2420E.PER is allowed. |
| PER01 | Contact Function Code | ID | 2-2 | R |  |  | 1 C | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420E.PER01 must be present. |
| PER01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420E.PER01 must be "IC". |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PER02 | Ordering Provider Contact Name | AN | 1-60 | S |  |  |  | 999 | R | IK403 = 19 "Implementation Dependent <br> Data Element Missing" | 2420E.PER02 must be present. |
| PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420E.PER02 must contain at least one non- space character. |
| PER02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420E.PER02 must be 1-60 characters. |
| PER02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 561: "Entity's Contact Name" FIC. OK Orderino Phusician. |  |
| PER02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420E.PER02 must be populated with accepted AN characters. |
| PER02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 561: "Entity's Contact Name" FIC: DK Orderina Phusician |  |
| PER03 | Communication Number Qualifier | ID | 2-2 | R |  |  | EM, FX, TE | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420E.PER03 must be present. |
| PER03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420E.PER03 must be valid values. |
| PER04 | Communication Number | AN | 1-256 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420E.PER04 must be present. |
| PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | Pace character. |
| PER04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420E.PER04 must be 1-256 characters. |
| PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Phone Number" FIC. DK Ordering Phusician |  |
| PER04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420E.PER04 must be populated with accepted AN characters. |
| PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FlC. DK Orderino Phusician |  |
| PER05 | Communication Number Qualifier | ID | 2-2 | S |  |  | EM, EX, FX, TE | 999 | R | IK403 = 7: "Invalid Code Value" | 2420E.PER05 must be valid values. |
| PER05 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | If 2420E.PER05 is "EX", 2420E.PER03 must be "TE". |
| PER06 | Communication Number | AN | 1-256 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420E.PER06 is present, 2420E.PER05 must be present. |
| PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420E.PER06 must contain at least one nonspace character. |
| PER06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420E.PER06 must be 1-256 characters. |
| PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 127: "Entity's Phone Number" FIC. DK Ordering Phusician |  |
| PER06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420E.PER06 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FIC. DK Ordering Phusician |  |
| PER07 | Communication Number Qualifier | ID | 2-2 | S |  |  | EM, EX, FX, TE | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2420E.PER05 is present, 2420E.PER07 may be present. |
| PER07 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420E.PER07 must be valid values. |
| PER07 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | If 2420E.PER07 is "EX", 2420E.PER05 must be "TE". |
| PER08 | Communication Number | AN | 1-256 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420E.PER08 is present, 2420E.PER07 must be present. |
| PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420E.PER08 must contain at least one non- space character. |
| PER08 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420E.PER08 must be 1-256 characters. |
| PER08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Phone Number" FIC. DK Ordering Phusician |  |
| PER08 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420E.PER08 must be populated with accepted AN characters. |
| PER08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FIC. DK Ordering Phusician |  |
| PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| Referring Loop | REFERRING PROVIDER NAME Loop |  |  |  | 2420F | 2 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Two iterations of this loop are allowed. |
| NM1 | REFERRING PROVIDER NAME |  | 1 | S | 2420F |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420F.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | DN, P3 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420F.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | For the first iteration of the 2420F loop, 2420F.NM101 must be "DN". |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | For the second iteration of the 2420F loop, 2420F.NM101 must be "P3". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420F.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420F.NM102 must be "1". |
| NM103 | Referring Provider Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420F.NM103 must be present. |
| NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420F.NM103 must contain at least one non- space character. |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420F.NM103 must be 1-60 characters. |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. DN Referring Provider |  |
| NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420F.NM103 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC. DN Referrino Provider |  |
| NM104 | Referring Provider First Name | AN | 1-35 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420F.NM104 must contain at least one nonspace character. |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420F.NM104 must be 1-35 characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC. DN Referring Provider |  |
| NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420F.NM104 must be populated with accepted AN characters. |
| NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC- DN Referrino Provider |  |
| NM105 | Referring Provider Middle Name or Initial | AN | 1-25 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420F.NM105 must contain at least one non- space character. |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420F.NM105 must be 1-25 characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC DN Referrina Provider |  |
| NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420F.NM105 must be populated with accepted AN characters. |
| NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC. DN Referrina Provider |  |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Referring Provider Name Suffix | AN | 1-10 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420F.NM107 must contain at least one non- space character. |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420F.NM107 must be 1-10 characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's application system" <br> CSC 125: "Entity's Name" <br> FlC. DN Referrina Provider |  |
| NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420F.NM107 must be populated with accepted AN characters. |
| NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" FIC- DN Referrina Provider |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 Values | $\begin{gathered} \hline \text { TA1/ } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420F.REF01 must be present. |
| REF01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not sumport this qualifier." | 2420E.REF01 must be"1G". |
| REF02 | Referring Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420F.REF02 must be present. |
| REF02 |  |  |  |  |  |  |  | 277 | C | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 133: "Entity's UPIN" } \\ & 560 \text { Entity's Additional/Secondary } \\ & \text { Identifier } \\ & \text { FIC._ ON. Referrino Provider } \end{aligned}$ | 2420F.REFO2 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |
| REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| REF04 | Reference Qualifier |  |  | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM1 | AMBULANCE PICK UP LOCATION |  | 1 | S | 2420G | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420G.NM1 is allowed. |
| NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | PW | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420G.NM101 must be present. |
| NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420G.NM101 must be "PW". |
| NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420G.NM102 must be present. |
| NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420G.NM102 must be "2". |
| NM103 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM109 | Identification Code | AN | 2-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | AMBULANCE PICK UP LOCATION ADDRESS |  | 1 | R | 2420G |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2420G.NM1 is present, 2420G.N3 must be present. |
| N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420G.N3 is allowed. |
| N301 | Ambulance Pick Up Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420G.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420G.N301 must contain at least one non- space character. |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420G.N301 must be 1-55 characters. |

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| Segment or Element | Description | ID | Min. | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \\ \hline \end{gathered}$ | $\left\|\begin{array}{\|c\|} \text { Accept/Rej } \\ \text { ect } \end{array}\right\|$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" CSC 266: "Facility point of origin and |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6 : "Invalid Character in Data Element" | 2420G.N301 must be populated with accepted AN characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 266: "Facility point of origin and |  |


| N302 | Ambulance Pick Up Address Line | AN | 1-55 | s |  | 999 | R | $\underset{\substack{\text { IK } \\ \text { Element" } \\ \text { Ele } \\ \text { " "Invalid Character in Data }}}{ }$ | 2420G.N302 must contain at least one non- |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N302 |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420G.N302 must be 1-55 characters. |
| N302 |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" CSC 266: "Facility point of origin and destination- ambulance" |  |
| N302 |  |  |  |  |  | 999 | E | $\underset{\substack{\text { IK } \\ \text { IKement" } \\ \text { Elem: "Invalid Character in Data }}}{\substack{\text { and }}}$ | 2420G.N302 must be populated with accepted AN characters. |
| N302 |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 266: "Facility point of origin and dectination - ambulance" |  |
| N4 | AMBULANCE PICK UP LOCATION CITYISTATEIZIIP |  | 1 | R | 2420 G | 999 | R | IK 304 = I6: "Implementation Dependent Segment Missing" | If 2420G.NM1 is present, 2420G.N4 must be present. |
| N4 |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420G.N4 is allowed. |
| N401 | Ambulance Pick Up City Name | AN | 2-30 | R |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2420G.N401 must be present. |
| N401 |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420G.N401 must contain at least two nonspace characters. |
| N401 |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2420G.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" CSC 266: "Facility point of origin and |  |
| N401 |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420G.N401 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/1 } \\ 999 / 2 \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM108 | Identification Code Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM109 | Identification Code | AN | 2-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N3 | AMBULANCE DROP OFF LOCATION ADDRESS |  | 1 | R | 2420H |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If $2420 \mathrm{H} . \mathrm{NM} 1$ is present, $\mathbf{2 4 2 0 H}$.N3 must be present. |
| N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds | Only one iteration of $\mathbf{2 4 2 0 \mathrm { H } . \mathrm { N } 3 \text { is allowed. }}$ |
| N301 | Ambulance Drop Off Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420H.N301 must be present. |
| N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420H.N301 must contain at least one nonspace character. |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420H.N301 must be 1-55 characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" CSC 266: "Facility point of origin and dectination_ - ambulance" |  |
| N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420H.N301 must be populated with accepted AN characters. |
| N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 266: "Facility point of origin and destination - ambulance" |  |
| N302 | Ambulance Drop Off Address Line | AN | 1-55 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420H.N302 must contain at least one nonspace character. |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420H.N302 must be 1-55 characters. |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" CSC 266: "Facility point of origin and dectination- ambulance" |  |
| N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420H.N302 must be populated with accepted AN characters. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/1 } \\ 999 / 2 \\ 277 C A \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 266: "Facility point of origin and destination-ambulance" |  |
| N4 | AMBULANCE DROP OFF LOCATION CITYISTATEIZIP |  | 1 | R | 2420H |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2420H.NM1 is present, 2420H.N4 must be present. |
| N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2420H.N4 is allowed. |
| N401 | Ambulance Drop Off City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420H.N401 must be present. |
| N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420 H. N401 must contain at least two non- space characters. |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2420H.N401 must be 2-30 characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" CSC 266: "Facility point of origin and dectination -ambulance" |  |
| N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420H.N401 must be populated with accepted AN characters. |
| N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 502: "Entity's City" <br> CSC 266: "Facility point of origin and destination - ambulance" |  |
| N402 | Ambulance Drop Off State or Province Code | ID | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If $2420 \mathrm{H} . \mathrm{N} 404$ is not present, $2420 \mathrm{H} . \mathrm{N} 402$ must be present. |
| N402 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" CSC 266: "Facility point of origin and destination - ambulance" | 2420H.N402 must be a valid State Code. |
| N403 | Ambulance Drop Off Postal Zone ZIP Code | ID | 3-15 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2420H.N404 is not present, 2420H.N403 must be present. |
| N403 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" CSC 266: "Facility point of origin and destination - ambulance" | 2420H.N403 must be a valid Zip Code. |
| N404 | Ambulance Drop Off Country Code | ID | 2-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/I } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| N407 | Country Subdivision Code | ID | 1-3 | S |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
|  | Line Adjudication Loop |  |  |  | 2430 | 15 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | 15 iterations of this loop are allowed. |
| SVD | LINE ADJUDICATION INFORMATION |  | 1 | S | 2430 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2430.SVD is allowed. |
| SVD01 | Other Payer Primary Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.SVD01 must be present. |
| SVD01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2430. SVD01 must $=2330$ B. NM109 (for the same payer). |
| SVD02 | Service Line Paid Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.SVD02 must be present. |
| SVD02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD02 must be numeric. |
| SVD02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 643: "Service Line Paid Amount" | 2430.SVD02 must be >= 0 . |
| SVD02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.SVD02 must be $<=99,999.99$. |
| SVD02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's apolication svstem" |  |
| SVD02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 643: "Service Line Paid Amount" CSC 697: "Too many decimal positions" | 2430.SVD02 is limited to 0,1 or 2 decimal positions. |
| SVD02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" | 2430.SVD02 is limited to 0,1 or 2 decimal positions. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/I } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SVD03 | COMPOSITE MEDICAL PROCEDURE IDENTIFIER |  |  | R |  |  |  |  |  |  |  |
| SVD03-1 | Product or Service ID Qualifier | ID | 2-2 | R |  |  | ER, HC, IV, WK | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.SVD03-1 must be present. |
| SVD03-1 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD03: "This Line of Business does not sunnort this aualifier." | 2430.SVD03-1 must be "HC". |
| SVD03-2 | Procedure Code | AN | 1-48 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.SVD03-2 must be present. |
| SVD03-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 507: "HCPCS" <br> TBD22: "Line Adjudication Information" | When 2430.SVD03-1 = "HC", 2430.SVD03-2 must be a valid HCPCS Code on the date in 2400. DTP03 when DTP01 = " 472 ". |
| SVD03-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 507: "HCPCS" <br> TBD22: "Line Adjudication <br> Information" | When 2430.SVD03-1 = "HC", 2430.SVD03-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = "472". <br> OR <br> When 2430.SVD03-1 = "HC", 2430.SVD03-2 must be a 5 character alphanumeric value. |
| SVD03-3 | Procedure Modifier | AN | 2-2 | S |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" TBD22: "Line Adjudication Information" | 2430.SVD03-3 must be valid procedure modifier. |
| SVD03-4 | Procedure Modifier | AN | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2430.SVD03-4 is present, 2430.SVD03-3 must be present. |
| SVD03-4 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" TBD22: "Line Adjudication Information" | 2430.SVD03-4 must be valid procedure modifier. |
| SVD03-5 | Procedure Modifier | AN | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2430.SVD03-5 is present, 2430.SVD03-4 must be present. |
| SVD03-5 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" TBD22: "Line Adjudication Information" | 2430.SVD03-5 must be valid procedure modifier. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SVD03-6 | Procedure Modifier | AN | 2-2 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2430.SVD03-6 is present, 2430.SVD03-5 must be present. |
| SVD03-6 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" TBD22: "Line Adjudication Information" | 2430.SVD03-6 must be valid procedure modifier. |
| SVD03-7 | Procedure Code Description | AN | 1-80 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD03-7 must contain at least one nonspace character. |
| SVD03-7 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.SVD03-7 must be 1-80 characters. |
| SVD03-7 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 306: "Detailed description of service" <br> TBD22: "Line Adjudication |  |
| SVD03-7 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD03-7 must be populated with accepted AN characters. |
| SVD03-7 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 306: "Detailed description of service" TBD22: "Line Adjudication information" |  |
| SVD03-8 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I 10 : "Implementation "Not Used" Element Present" | Must not be present. |
| SVD04 | Product or Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |
| SVD05 | Paid Service Unit Count | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.SVD05 must be present. |
| SVD05 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD05 must be numeric. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| SVD05 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.SVD05 must be >= 0 and < $=999.9$. |
| SVD05 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 476: "Missing or invalid units of service" |  |
| SVD05 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.SVD05 must be $>=0$ and $<=9,999.9$. |
| SVD05 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 476: "Missing or invalid units of service" |  |
| SVD05 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD05 must be an integer (whole number). |
| SVD06 | Bundled or Unbundled Line Number | NO | 1-6 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD06 must be numeric. |
| SVD06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD06 must be a integer (whole number). |
| SVD06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.SVD06 must 1-6 digits. |
| SVD06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" |  |
| CAS | LINE ADJUSTMENT |  | 5 | S | 2430 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2430.SVD is present, 2430.CAS may be present. |
| CAS |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 5 iterations of 2430.CAS are allowed. |
| CAS01 | Claim Adjustment Group Code | ID | 1-2 | R |  |  | CO, CR, OA, PI, PR | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.CAS01 must be present. |
| CAS01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2430.CAS01 must be valid values. |
| CASO1 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 696: "Claim Adjustment Group Code" FlC: GB Other Insured | If 2430.CAS01 = "CR" then 2430.DTP with DTP01 = " 573 " must be prior to 01/01/2012. |
| CAS02 | Adjustment Reason Code | ID | 1-5 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.CAS02 must be present. |
| CAS02 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | 2430.CASO2 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". |
| CAS03 | Adjustment Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.CAS03 must be present. |
| CAS03 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS03 must be numeric. |
| CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2430.CAS03 must not $=0$. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{array}{r} \hline \text { TA1/ } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" <br> FlC. GR Other Insured | 2430.CAS03 is limited to 0,1 or 2 decimal positions. |
| CAS03 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS03 must be }>=-99,999.99 \text { and } \\ & <=99,999.99 \text {. } \end{aligned}$ |
| CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |
| CAS04 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS04 must be 1-15 digits. |
| CASO4 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |
| CAS04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FIC. GB Other Insured | 2430.CAS04 must not $=0$. |
| CAS05 | Adjustment Reason Code | ID | 1-5 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS02 is present, 2430.CAS05 may be present. |
| CAS05 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | 2430.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". |
| CAS06 | Adjustment Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2430.CAS05 is present, 2430.CAS06 must be present. |
| CAS06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS06 must be numeric. |
| CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FlC. GB Other lnsured | 2430. CAS06 must not $=0$. |
| CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FlC. GB Other Insured | 2430.CAS06 is limited to 0,1 or 2 decimal positions. |
| CAS06 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2430.CAS06 must be $>=-99,999.99$. and $<=$ 99,999.99. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | TA1/ 999/ <br> 277CA | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" FIC. GB Other Incured |  |
| CAS07 | Adjustment Quantity | R | 1-15 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS05 is present, 2430.CAS07 may be present. |
| CASO7 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS07 must be 1-15 digits. |
| CAS07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" FIC. GBOther Insured |  |
| CAS07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" <br> FIC. GBOther Insured | 2430.CAS07 must not $=0$. |
| CAS08 | Adjustment Reason Code | ID | 1-5 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS05 is present, 2430.CAS08 may be present. |
| CAS08 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / <br> Rejected for relational field in error. <br> CSC 521: Adjustment Reason Code <br> CSC 516: Adjudication or Payment <br> Date <br> EIC: GB Other Insured | 2430.CAS08 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". |
| CAS09 | Adjustment Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2430.CAS08 is present, 2430.CAS09 must be present. |
| CAS09 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS09 must be numeric. |
| CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FlC. GB Other Insured | 2430.CAS09 must not $=0$. |
| CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FlC. GB Other Insured | 2430.CAS09 is limited to 0,1 or 2 decimal positions. |
| CAS09 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS09 must be >=-99,999.99. and } \\ & <=99,999.99 \text {. } \end{aligned}$ |
| CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |
| CAS10 | Adjustment Quantity | R | 1-15 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430. CAS08 is present, 2430. CAS10 may be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/I } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS10 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS10 must be 1-15 digits. |
| CAS10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FlC. GB Other Insured |  |
| CAS10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FIC. GB Other Insured | 2430. CAS10 must not $=0$. |
| CAS11 | Adjustment Reason Code | ID | 1-5 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS08 is present, 2430.CAS11 may be present. |
| CAS11 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date EIC: GB Other Insured | 2430.CAS011 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". |
| CAS12 | Adjustment Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2430.CAS11 is present, 2430.CAS12 must be present. |
| CAS12 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS12 must be numeric. |
| CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2430.CAS12 must not $=0$. |
| CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2430.CAS12 is limited to 0,1 or 2 decimal positions. |
| CAS12 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2430.CAS12 must be $>=-99,999.99$. and $<=99,999.99$. |
| CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |
| CAS13 | Adjustment Quantity | R | 1-15 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430. CAS11 is present, 2430.CAS13 may be present. |
| CAS13 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS13 must be 1-15 digits. |
| CAS13 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | TA1/ 999/ <br> 277CA | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS13 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FlC. GB مther Insured | 2430.CAS13 must not $=0$. |
| CAS14 | Adjustment Reason Code | ID | 1-5 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS11 is present, 2430.CAS14 may be present. |
| CAS14 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / <br> Rejected for relational field in error. <br> CSC 521: Adjustment Reason Code <br> CSC 516: Adjudication or Payment <br> Date <br> EIC: GB Other Insured | 2430.CAS014 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". |
| CAS15 | Adjustment Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2430.CAS14 is present, 2430.CAS15 must be present. |
| CAS15 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS15 must be numeric. |
| CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FlC. GB Other Insured | 2430. CAS15 must not $=0$. |
| CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2430.CAS15 is limited to 0,1 or 2 decimal positions. |
| CAS15 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS15 must be >= -99,999.99. and } \\ & <=99,999.99 . \end{aligned}$ |
| CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" Fle. GB مther Insured |  |
| CAS16 | Adjustment Quantity | R | 1-15 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430. CAS14 is present, 2430. CAS16 may be present. |
| CAS16 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS16 must be 1-15 digits. |
| CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |
| CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FIC. GB Other Insured | 2430. CAS16 must not $=0$. |
| CAS17 | Adjustment Reason Code | ID | 1-5 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS14 is present, 2430.CAS17 may be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA11/ } \\ 999 / \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| CAS17 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / <br> Rejected for relational field in error. <br> CSC 521: Adjustment Reason Code <br> CSC 516: Adjudication or Payment <br> Date <br> EIC: GB Other Insured | 2430.CAS017 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". |
| CAS18 | Adjustment Amount | R | 1-18 | S |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | If 2430. CAS17 is present, 2430. CAS18 must be present. |
| CAS18 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS18 must be numeric. |
| CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" <br> FIC. GB Other Insured | 2430. CAS18 must not $=0$. |
| CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB_Other Insured | 2430.CAS18 is limited to 0,1 or 2 decimal positions. |
| CAS18 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS15 must be >=-99,999.99. and } \\ & <=99,999.99 \text {. } \end{aligned}$ |
| CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |
| CAS19 | Adjustment Quantity | R | 1-15 | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430. CAS17 is present, 2430.CAS19 may be present. |
| CAS19 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.CAS19 must be 1-15 digits. |
| CAS19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |
| CAS19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FlC. GR Other-Incured | 2430.CAS19 must not $=0$. |
| DTP | LINE CHECK OR REMITTANCE DATE |  | 1 | R | 2430 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2430. SVD is present, 2430.DTP must be present. |
| DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2430.DTP is allowed. |
| DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 573 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.DTP01 must be present. |
| DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2430.DTP01 must be "573". |
| DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.DTP02 must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $5010$ Values | $\begin{gathered} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/Rej } \\ \text { ect } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2430.DTP02 must be "D8". |
| DTP03 | Adjudication or Payment Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.DTP03 must be present. |
| DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2430.DTP03 must be a valid date in the format of CCYYMMDD. |
| AMT | REMAINING PATIENT LIABILITY |  | 1 | S | 2430 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2430. SVD is present, 2430.AMT may be present. |
| AMT |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2430.AMT is allowed. |
| AMT01 | Amount Qualifier Code | ID | 1-3 | R |  |  | EAF | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.AMT01 must be present. |
| AMT01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2430.AMT01 must be "EAF". |
| AMT02 | Remaining Patient Liability Amount | R | 1-18 | R |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2430.AMT02 must be numeric. |
| AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.AMT02 must be $<=99,999.99$. |
| AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 6: "Balance due from the subscriber" FIC. GB Other Incured |  |
| AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 6: "Balance due from the subscriber" <br> FIC. GR Other Incured | 2430.AMT02 is limited to 0,1 or 2 decimal positions. |
| AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |
| LQ | Form Identification Form Loop |  |  |  | 2440 | >1 |  |  |  |  |  |
| LQ | FORM IDENTIFICATION CODE |  | 1 | S | 2440 | 1 |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | 2440.LQ must not be present. |
| LQ |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 698: "Form Type Identifier." |  |
| LQ |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" |  |
| LQ01 | Code List Qualifier Code | ID | 1-3 | R |  |  | AS, UT | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| LQ01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| LQ02 | Form Identifier | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| LQ02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 698 "Form Type Identifier." |  |
| LQ02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 698 "Form Type Identifier." |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| LQ02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |
| FRM | SUPPORTING DOCUMENTATION |  | 99 | R | 2440 |  |  | 999 | R | IK304 = 2: "Unexpected Segment" | 2440.FRM must not be present. |
| FRM |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD01: "Situational segment/element required for adjudication." |  |
| FRM |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD01: "Situational segment/element required for adjudication." |  |
| FRM |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD01: "Situational segment/element required for adjudication." |  |
| FRM |  |  |  |  |  |  |  | 999 | R | IK304 = 2: "Unexpected Segment" |  |
| FRM |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" |  |
| FRM01 | Question Number/Letter | AN | 1-20 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" |  |
| FRM01 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" |  |
| FRM01 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM01 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM01 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM02 | Question Response | ID | 1-1 | S |  |  | N, W, Y | 999 | R | IK403 = 7: "Invalid Code Value" |  |
| FRM02 |  |  |  |  |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" |  |
| FRM02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD01: "Situational segment/element required for adjudication." |  |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| FRM03 | Question Response | AN | 1-50 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |
| FRM03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM03 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" |  |
| FRM03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM03 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" |  |
| FRM03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM03 |  |  |  |  |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" |  |
| FRM03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD01: "Situational segment/element required for adjudication." |  |
| FRM04 | Question Response | DT | 8-8 | S |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" |  |

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| Segment or Element | Description | ID | Min. Max. | Usage Req. | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \hline \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| FRM04 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM04 |  |  |  |  |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" |  |
| FRM04 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD01: "Situational segment/element required for adjudication." |  |
| FRM05 | Question Response | R | 1-6 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" |  |
| FRM05 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM05 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 699: "Question/Response from Supporting Documentation Form." |  |
| FRM05 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal nositions" |  |
| FRM05 |  |  |  |  |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" |  |
| SE | TRANSACTION SET TRAILER |  | 1 | R |  | >1 |  | 999 | R | IK502: $\mathbf{2}$ "Transaction Set Trailer Missing". | SE must be present. |
| SE01 | Transaction Segment Count | NO | 1-10 | R |  |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be present. |
| SE01 |  |  |  |  |  |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be numeric. |
| SE01 |  |  |  |  |  |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must equal the transaction segment count. |
| SE01 |  |  |  |  |  |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be > 0 . |
| SE02 | Transaction Set Control Number | AN | 4-9 | R |  |  |  | 999 | R | IK502: 3 "Transaction Set Control Number in Header and Trailer Do Not Match". | SE02 must be present. |
| SE02 |  |  |  |  |  |  |  | 999 | R | IK502: 3 "Transaction Set Control Number in Header and Trailer Do Not Match". | SE02 must = ST02. |
| GE | Functional Group Trailer |  | 1 | R |  |  |  | 999 | R | AK905: 3 "Functional Group Trailer Missing" | GE must be present. |

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| Segment or Element | Description | ID | Min. <br> Max. | Usage Req. | Loop | Loop Repeat | 5010 <br> Values | $\begin{gathered} \text { TA1/I } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/Rej ect | Disposition / Error Code | Proposed 5010 Edits Part B |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| GE01 | Number of Transaction Sets Included | NO | 1-6 | R |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be present. |
| GE01 |  |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be numeric. |
| GE01 |  |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must equal the number of transaction sets included in the functional group. |
| GE01 |  |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be > 0 . |
| GE02 | Group Control Number | AN | 4-9 | R |  |  |  | 999 | R | AK905: 4 "Group Control Number in the Functional Group Header and Trailer Do Not Agree". | GE02 must be present. |
| GE02 |  |  |  |  |  |  |  | 999 | R | AK905: 4 "Group Control Number in the Functional Group Header and Trailer Do Not Agree". | GE02 must = GS06. |
| IEA | Interchange Control Header |  | 1 | R |  |  |  | TA1 | R | TA105: 023 Improper (Premature) <br> End-of-File (Transmission) | IEA must be present. |
| IEA |  |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | Only one iteration of IEA is allowed. |
| IEA01 | Number of Included Functional Groups | NO | 1-6 | R |  |  |  | TA1 | R | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must be present. |
| IEA01 |  |  |  |  |  |  |  | TA1 | R | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must be numeric. |
| IEA01 |  |  |  |  |  |  |  | TA1 | R | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must equal the number of functional groups included in the interchange. |
| IEA01 |  |  |  |  |  |  |  | TA1 | R | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must be > 0 . |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| ISA must be present. |  |
| Only one iteration of ISA is allowed. | This error means there can't be more than one ISA segment in this set, not that there can't be more than 1 in a physical file. |
| ISA01 must be present. |  |
| ISA01 must be valid values. |  |
| ISA02 must be present. |  |
| ISA02 must be 10 characters. |  |
| ISA02 must be populated with accepted AN characters. |  |
| ISA03 must be present. |  |
| ISA03 must be valid values. |  |
| ISA04 must be present. |  |
| ISA04 must be 10 characters. |  |
| ISA04 must be populated with accepted AN characters. |  |
| ISA05 must be present. |  |
| ISA05 must be "27", "28" or "ZZ". |  |
| ISA06 must be present. |  |
| ISA06 must be 15 characters. |  |
| ISA06 must contain at least one non-space character. |  |
| ISA06 must be populated with accepted AN characters. |  |
| ISA07 must be present. |  |
| ISA07 must be "27", "28" or "ZZ". |  |
| ISA08 must be present. |  |
| ISA08 must be 15 characters. |  |
| ISA08 must contain at least one non-space character. |  |
| ISA08 must be populated with accepted AN characters. |  |
| ISA09 must be present. |  |
| ISA09 must be a valid date in YYMMDD format. |  |
| ISA09 must be a the date of the interchange; must not be a future date. |  |
| ISA10 must be present. |  |
| ISA10 must be a valid time in HHMM format. |  |
| ISA11 must be present. | 01/20: Companion Guide Note needed. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| ISA11 must be 1 character. |  |
| ISA11 must contain at least one non-space character. |  |
| ISA12 must be present. |  |
| ISA12 must be "00501". |  |
| ISA13 must be present. |  |
| ISA13 must be numeric. |  |
| ISA13 must be 9 characters. |  |
| ISA13 must be > 0 . |  |
| ISA13 must be unsigned. |  |
| ISA14 must be present. |  |
| ISA14 must be valid values. |  |
| ISA15 must be present. |  |
| ISA15 must be valid values. |  |
| ISA16 must be present. |  |
| ISA16 must be 1 character. |  |
| ISA16 must contain at least one non-space character |  |
| ISA16 must be populated with accepted AN characters. |  |
| GS must be present. |  |
| Only one iteration of GS is allowed. |  |
| GS01 must be present. |  |
| GS01 must be present. |  |
| GS02 must be present. |  |
| GS02 must be 2-15 characters. |  |
| GS02 must contain at least two non-space characters. |  |
| GSO2 must be populated with accepted AN characters. |  |
| GS03 must be present. |  |
| GS03 must be 2-15 characters. |  |
| GS03 must contain at least two non-space characters. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| GS03 must be populated with accepted AN characters. |  |
| GS04 must be present. |  |
| GS04 must be a valid date in CCYYMMDD format. |  |
| GS04 must be the date the functional group is created; must not be a future date. |  |
| GS05 must be present. |  |
| GS05 must be a valid time in a valid format. |  |
| GS06 must be present. |  |
| GS06 must be numeric. |  |
| GS06 must be > 0 . |  |
| GS06 must be $<=999,999,999$. |  |
| GS06 must be unique within the interchange |  |
| GS07 must be present. |  |
| GS07 must be "X". |  |
| GS08 must be present. |  |
| GS08 must be "005010x222". |  |
| ST must be present. |  |
| Only one iteration of ST is allowed. | This error means there can't be more than one ST segment in this set, not that there can't be more than 1 within the GS. |
| ST01 must be present. |  |
| ST01 must be "837". |  |
| ST02 must be present. |  |
| ST02 must be 4-9 characters. |  |
| ST02 must contain at least four non-space characters. |  |
| STO2 must be populated with accepted AN characters. |  |
| ST02 must be a unique number within the ISA-IEA envelope. |  |
| ST03 must be present. |  |
| ST03 must be "005010X222". |  |
| BHT must be present. |  |
| Only one iteration of BHT is allowed. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| BHT01 must be present. |  |
| BHT01 must be "0019". |  |
| BHT02 must be present. |  |
| BHT02 must be valid values. |  |
| BHT03 must be present. |  |
| BHT03 must be 1-30 characters. |  |
| BHT03 must be populated with accepted AN characters. |  |
| BHT04 must be present. |  |
| BHT04 must be a valid date in CCYYMMDD format. |  |
| BHT05 must be present. |  |
| BHT05 must a valid time in a valid time format. |  |
| BHT06 must be present. |  |
| BHT06 must be"CH". |  |
| Only one iteration of 1000A is allowed. |  |
| 1000A.NM1 must be present. |  |
| 1000A.NM101 must be present. |  |
| 1000A.NM101 must be "41". |  |
| 1000A.NM102 must be present. |  |
| 1000A.NM102 must be valid values. |  |
| 1000A.NM103 must be present. |  |
| 1000A.NM103 must be 1-60 characters. |  |
|  |  |
| 1000A.NM103 must contain at least one non- <br> space character. <br> locoA.NM103 must be populated with <br> accented AN characters. |  |
| If 1000A.NM102 is " 2 ", 1000A.NM104 must not be present. |  |




| Proposed 5010 Edits <br> CEDI  | Misc. Notes |
| :--- | :--- |



| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| Must not be present. |  |
| 2000A must be present. |  |
| Only one iteration of 2000A is allowed. | Companion guide note needed |
| 2000A.HL must be present. |  |
| Only one iteration of 2000A.HL is allowed. | This error means there can only be one HL in each iteration of the loop. |
| 2000A.HL01 must be present. |  |
| 2000A.HL01 must be 1-12 characters. |  |
| 2000A.HL01 must be numeric. |  |
| The first HLO1 must be "1". |  |
| Must not be present. |  |
| 2000A.HL03 must be present. |  |
| 2000A. HL03 must be "20". |  |
| 2000A.HL04 must be present. |  |
| 2000A.HL04 must be "1'. |  |
| Only one iteration of 2000A.PRV is allowed. |  |
| 2000A PRV01 must be present. |  |
| 2000A.PRV01 must be "BI". |  |
| 2000A.PRV02 must be present. |  |
| 2000A.PRV02 must be "PXC". |  |
| 2000A.PRV03 must be present. |  |
| 2000A.PRV03 must be a valid Provider Taxonomy Code | Valid Provider Taxonomy Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2000A.CUR must not be present. | Medicare does not support submisssion of foreign currency. <br> 01/20: Companion Guide Note needed. |
|  |  |




| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
| 2010AA.NM109 must be valid according to <br> the NPI algorythm. |  |
| 2010AA.NM109 must be a valid NPI on the <br> Crosswalk when evaluated with <br> 1000B.NM109. | Valid NPI Crosswalk must be available for this <br> edit. |
| The first position of 2010AA.NM109 must be <br> a "1". | 11/25: reference CR 6198. |
| 2010AA.NM109 billing provider must be <br> "associated" to the submitter (from a trading <br> partner management perspective) in <br> 1000A.NM109. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2010AA.N3 must be present. |  |
| Only one iteration of 2010AA.N3 is <br> allowed. |  |
| 2010AA.N301 must be present. |  |
| 2010AA.N301 must contain at least one non- <br> space character. |  |
| 2010AA.N301 must be 1 - 55 characters. |  |
|  |  |
| 2010AA.N301 must not contain the following <br> exact phrases (not case sensitive): "Post must be a street address, not a post office <br> Office Box", "P.O. Box", "PO Box", "P O or lock box. <br> Box", "Lock Box", "Lock Bin". <br> 2010AA.N302 must contain at least one non- <br> space character. |  |
| 2010AA.N302 must be 1 - 55 characters. |  |
| 2010AA.N301 must be populated with <br> accepted AN characters. |  |
|  |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
|  |  |
| 2010AA.N302 must be populated with accepted AN characters. |  |
|  |  |
| 2010AA.N302 must not contain the following exact phrases (not case sensitive): "Post Office Box", "P.O. Box", "PO Box", "P O Box", "Lock Box", "Lock Bin". | N302 must be a street address, not a post office box or lock box. |
| 2010AA.N4 must be present. |  |
| Only one iteration of 2010AA.N4 is allowed. |  |
| 2010AA.N401 must be present. |  |
| 2010AA.N401 must contain at least two nonspace characters. |  |
| 2010AA. N401 must be 2-30 characters. |  |
|  |  |
| 2010AA.N401 must be populated with accepted AN characters. |  |
| If 2010AA.N404 is not present, 2010AA.N402 must be present. |  |
| 2010AA.N402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| If 2010AA.N404 is not present, 2010AA.N403 must be present. |  |
| 2010AA.N403 must be a valid 9 digit Zip Code. | Valid Zip Code reference must be available for this edit. |
| Must not be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2010AA.REF must be present. |  |
| Only one iteration of 2010AA.REF with REF01 = "El" or "SY" is allowed. |  |
| 2010AA.REF01 must be present. |  |
| 2010AA.REF01 must be valid values. |  |
| 2010AA.REF02 must be present. |  |
| 2010AA.REF02 must be populated with accepted AN characters. |  |
| 2010AA.REF02 must be nine digits with no punctuation. |  |
| 2010AA.REF must be associated with the provider identified in 2010AA.NM109 | Valid NPI Crosswalk must be available for this edit. The NPI crosswalk is used to validate the tax information submitted in this loop. |
| Must not be present. |  |
| Must not be present. |  |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |




| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
|  |  |
| Must not be present. |  |
| Only one iteration of 2010AB.NM1 is <br> allowed. |  |
| 2010AB.NM101 must be present. |  |
| 2010AB.NM101 must be "87". |  |
| 2010AB.NM102 must be present. |  |
| 2010AB.NM102 must be valid values. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2010AB.N301 must be populated with |  |
| accepted AN character. |  |
| must be present. is present, 2010AB.N3 |  |
| Only one iteration of 2010AB.N3 is <br> allowed. |  |
| 2010AB.N301 must be present. |  |
| 2010AB.N301 must contain at least one non- |  |
| space character. |  |
| 2010AB.N301 must be 1 - 55 characters. |  |
|  |  |

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| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
| 2010AB.N302 must contain at least one non- <br> space character. |  |
|  |  |
| 2010AB.N302 must be 1-55 characters. |  |
|  |  |
|  |  |
|  |  |
| 2010AB.N302 must be populated with <br> accepted AN character. |  |
|  |  |
| If 2010AB.N404 is not present, |  |
| 2010AB.N402 must be present. |  |
| 2010AB.N401 must be 2-30 characters. |  |
| If 2010AB.NM1 is present, 2010AB.N4 <br> must be present. |  |
| Only one iteration of 2010AB.N4 is <br> allowed. |  |
| 2010AB.N401 must be present. |  |
| 2010AB.N401 must contain at least two non- <br> space characters. |  |
| 2010AB.N401 must be populated with <br> accepted AN characters. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2010AB.N402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| If 2010AB.N404 is not present, 2010AB.N403 must be present. |  |
| N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
|  |  |
| 2010AC.NM1 must not be present | Loop not accepted by Medicare. 11/20: Companion Guide Note needed. |
| 2010AC.N3 must not be present. | Loop not accepted by Medicare. <br> 11/20: Companion Guide Note needed. |
| 2010AC.N4 must not be present. | Loop not accepted by Medicare. <br> 11/20: Companion Guide Note needed. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2010AC.REF must not be present. | Loop not accepted by Medicare. <br> 11/20: Companion Guide Note needed. |
| 2010AC.REF must not be present. | Loop not accepted by Medicare. <br> 11/20: Companion Guide Note needed. |
| 2000B must be present. |  |
| 2000B. HL must be present. |  |
| Only one iteration of 2000B.HL is allowed. | This error means there can only be one HL in each iteration of the loop. |
| 2000B. HL01 must be present. |  |
| 2000B.HL01 must be 1-12 characters. |  |
| 2000B.HL01 must be numeric. |  |
| 2000B.HL01 must be equal the value of the previous HLO1 (2000A.HLO1) plus one. |  |
| 2000B. HL02 must be present. |  |
| 2000B. HL02 must be equal to the value of the HL01 (2000A.HL01) of the parent HL. |  |
| 2000B. HL03 must be present. |  |
| 2000B.HL03 must be "22". |  |
| 2000B.HL04 must be present. |  |
| 2000B.HL04 must be "0". |  |
| 2000B.SBR must be present. |  |
| Only one iteration of 2000B.SBR is allowed. |  |
| 2000B.SBR01 must be present. |  |
| 2000B.SBR01 must be valid values. |  |
| 2000B.SBR01 must be "S" or "P". |  |



| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2000B.SBR09 must be "MB". |  |
| Only one iteration of 2000B.PAT is allowed. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 20008.PAT05 must be "D8" |  |
| If 2000B.PAT05 is present, 2000B.PAT06 must be present. <br> 2000B.PAT06 must be a valid date in |  |
| 2000B.PAT07 must be "01". |  |
| If 2000B.PAT07 is present, 2000B.PAT08 must be present. |  |
| 2000B. PAT08 must be > 0 and $<=9,999.99$ |  |
|  |  |
| 2000B.PAT08 is limited to 0,1 or 2 decimal positions. |  |
| 2000B.PAT09 must be "Y". |  |
| 2010BA.NM1 must be present. |  |
| Only one iteration of 2010BA.NM1 allowed. |  |
| 2010BA.NM101 must be present. |  |
| 2010BA.NM101 must be "LL". |  |
| 2010BA.NM102 must be present. |  |



| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
|  | Misc. Notes |
| Must not be present. |  |
| 2010BA.NM107 must contain at least one <br> non-space character. |  |
| 2010BA.NM107 must be 1-10 characters. |  |
|  |  |
| 2010BA.NM107 must be populated with <br> accepted AN characters. |  |
|  |  |
| Only one iteration of 2010BA.N3 is allowed. |  |
| 2010BA.N301 must be present. |  |
| 2010BA.N301 must contain at least one non- |  |
| space character. |  |

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| Proposed 5010 Edits <br> CEDI <br>  <br> 2010BA.N301 must be 1-55 characters. <br>  |  |
| :--- | :--- |
|  |  |
| 2010BA.N301 must be populated with |  |
| accepted AN characters. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2010BA.N402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| 2010BA.N402 must be a valid state or province code. | Valid State Code reference must be available for this edit. |
| If 2010BA.N404 is not present, 2010BA.N403 must be present. |  |
| 2010BA.N403 must be a valid postal/zip Code | Valid Zip Code reference must be available for this edit. |
| 2010BA.N404 must be a valid 2 character Country Code. | Valid alpha-2 Country Code reference must be available for this edit. (from Part 1 of ISO 3166) |
| Must not be present. |  |
| Must not be present. |  |
| 2010BA.N407 must be a valid Country Subdivision Code. | Valid Country Subdivision Code reference must be available for this edit. (from Part 2 of ISO 3166) |
| 2010BA.DMG must be present. |  |
| Only one iteration of 2010BA.DMG is allowed. |  |
| 2010BA.DMG01 must be present. |  |
| 2010BA.DMG01 must be "D8". |  |
| 2010BA.DMG02 must be present. |  |
| 2010BA.DMG02 must be a valid date in format CCYYMMDD |  |
| 2010BA.DMG02 must not be a future date. | 06/04: Companion Guide Note needed. |
| 2010BA.DMG03 must be present. |  |
| 2010BA.DMG03 must be valid values. |  |
| Must not be present. |  |
| Must not be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2010BA.REF with REFO1 = "SY" must not be present. | Medicare doesn't support this segment. Companion Guide Note needed. |
| Only one iteration of 2010BA.REF with REF01 = "Y4" is allowed. | Pass through, syntax only. |
| 2010BA.REF01 must be present. |  |
| 2010BA.REF01 must be 'Y4". |  |
| 2010BA.REF02 must be present. |  |
| 2010BA.REF02 must contain at least one non-space character. |  |
| 2010BA.REF02 must be 1-50 characters. |  |
|  |  |
| 2010BA.REF02 must be populated with accepted AN characters. |  |
| Must not be present. |  |
| Must not be present. |  |
| Only one iteration of 2010BA.PER is allowed. | Pass through, syntax only. |
| 2010BA.PER01 must be "IC". |  |
| 2010BA.PER02 must be 1-60 characters. |  |



| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
|  | Misc. Notes |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2010BB.NM1 must be present. |  |
| Only one iteration of 2010BB.NM1 is <br> allowed. |  |
| 2010BB.NM101 must be present. |  |
| 2010BB.NM101 must be "PR". |  |
| 2010BB.NM102 must be present. |  |
| 2010BB.NM102 must be "2". |  |
| 2010BB.NM103 must be present. |  |
| 2010BB.NM103 must contain at least one |  |
| non-space character. |  |
| 2010BB.NM103 must be 1 - 60 characters. |  |
|  |  |
| 2010BB.NM109 must be present. |  |
| 2010BB.NM108 must be "PI". |  |
| Must not be present. |  |
| Must not be present. |  |
| 2010BB.NM103 must be populated with be present. |  |
| accepted AN characters. |  |




| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
|  |  |
| 2010BB.REF with REF01 = "2U", "EI", "FY" or "NF" must not be present. | Not accepted by Medicare. <br> 03/31: Companion Guide Note needed. |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. 01/20: Companion Guide Note needed. |
| 2010BB.REF must not be present. | Everyone but Trailblazer. <br> 01/20: Companion Guide Note needed. |
| 2010BB.REF01 must be present. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| 2010BB.REF01 must be valid values. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| 2010BB.REF02 must be present. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| When 2010BB.REF01 = "G2" or "LU", <br> 2010BB.REF02 must be $1-50$ characters. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. 01/20: Companion Guide Note needed. |
| When 2010BB.REF01 = "G2" or "LU", 2010BB.REF02 must be populated with accepted AN characters. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. 01/20: Companion Guide Note needed. |
| 2010BB.REF02 must be valid from a trading partner management perspective when evaluated with 1000A.NM109. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| Must not be present. |  |
| Must not be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Loop must not be present. | 01/20: Companion Guide Note needed. |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Loop must not be present. | 01/20: Companion Guide Note needed. |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Only 100 iterations of the 2300 loop are allowed. |  |
| 2300.CLM must be present. |  |


| Proposed 5010 Edits <br> CEDD | Misc. Notes |
| :--- | :--- |
| Only one iteration of 2300.CLM is <br> allowed. |  |
| 2300.CLM01 must be present. |  |
| 2300.CLM01 must contain at least one non- <br> space character. |  |
| 2300.CLM01 must be 1 - 38 characters. | Companion Guide Note Needed - only positions 1 |
| -20 will be storedreturned |  |$|$|  |
| :--- |
| 2300.CLM01 must be populated with <br> accepted AN characters. |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
| 2300.CLM05-1 must be a valid POS code. | Valid Place of Service reference must be <br> available for this edit. |
| 2300.CLM05-2 must be present. |  |
| 2300.CLM05-2 must be "B". |  |
| 2300.CLM05-3 must be present. |  |
| 2300.CLM05-3 must be "1". | Medicare Part B only accepts original claims <br> 01120: Companion Guide Note needed. |
| 2300.CLM06 must be present. |  |
| 2300.CLM06 must be valid values. |  |
| 2300.CLM07 must be present. |  |
| 2300.CLM07 must be valid values. |  |
| 2300.CLM08 must be present. |  |
| 2300.CLM08 must be valid values. |  |
| 2300.CLM09 must be present. |  |
| 2300.CLM09 must be valid values. |  |
| 2300.CLM10 must be "P". |  |
| If 2300.DTP with DTP01 $=439$ <br> then is present, |  |
| 2300.CLM11 must be resent. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| Must not be present. |  |
| 2300.CLM20 must be valid values. |  |
| Only one iteration of 2300.DTP with DTP01 = "431" is allowed. |  |
| 2300.DTP01 must be present. |  |
| 2300.DTP01 must be "431". |  |
| 2300.DTP02 must be present. |  |
| 2300.DTP02 must be "D8". |  |
| 2300.DTP03 must be present. |  |
| 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
| 2300.DTP03 must not be a future date. |  |
| Only one iteration of 2300.DTP with DTP01 = "454" is allowed. |  |
| 2300.DTP01 must be present. |  |
| 2300.DTP01 must be "454". |  |
| 2300.DTP02 must be present. |  |
| 2300.DTP02 must be "D8". |  |
| 2300.DTP03 must be present. |  |
| 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
| 2300.DTP03 must not be a future date. |  |
| Only one iteration of 2300.DTP with DTP01 = "304" is allowed. |  |
| 2300.DTP01 must be present. |  |
| 2300.DTP01 must be"304". |  |
| 2300.DTP02 must be present. |  |
| 2300.DTP02 must be "D8". |  |
| 2300.DTP03 must be present. |  |
| 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
| If 2300.CR208 = "A" or "M" then 2300.DTP with DTP01 = "453" must be present. |  |
| Only 1 iteration of 2300.DTP with DTP01 = "453" is allowed. |  |


| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
| 2300.DTP01 must be present. |  |
| 2300.DTP01 must be "453". |  |
| 2300.DTP02 must be present. |  |
| 2300.DTP02 must be "D8". |  |
| 2300.DTP03 must be present. |  |
| 2300.DTP03 must be a valid date in |  |
| CCYYMMDD format. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2300.DTP02 must be present. |  |
| 2300.DTP02 must be "D8". |  |
| 2300.DTP03 must be present. |  |
| 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
| 2300.DTP03 must not be a future date. |  |
| Only one iteration of 2300.DTP with DTP01 = "471" is allowed. |  |
| 2300.DTP01 must be present. |  |
| 2300.DTP01 must be "471". |  |
| 2300.DTP02 must be present. |  |
| 2300.DTP02 must be "D8". |  |
| 2300.DTP03 must be present. |  |
| 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
| 2300.DTP03 must not be a future date. |  |
| Only one iteration of 2300.DTP with DTP01 = "314", "360" or "361" is allowed. | Future dates are allowed in this situation. 01/20: Companion Guide Note needed. |
| 2300.DTP01 must be present. |  |
| 2300. DTP01 must be valid values. |  |
| 2300.DTP02 must be present. |  |
| 2300. DTP02 must be valid values. |  |
| 2300.DTP03 must be present. |  |
| If 2300.DTP02 = "D8" then 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
| If 2300.DTP02 = "RD8" then 2300.DTP03 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| Only one iteration of 2300.DTP with DTP01 = "297" is allowed. |  |
| 2300.DTP01 must be present. |  |
| 2300.DTP01 must be "297". |  |
| 2300.DTP02 must be present. |  |
| 2300.DTP02 must be "D8". |  |
| 2300.DTP03 must be present. |  |


| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
| 2300.DTP03 must be a valid date in <br> CCYYMMDD format. |  |
| 2300.DTP03 must not be a tuture date. |  |
| Only one iteration of 2300.DTP with <br> DTP01 $=$ "296" is allowed. |  |
| 2300.DTP01 must be present. |  |
| 2300.DTP01 must be "296". |  |
| 2300.DTP02 must be present. |  |
| 2300.DTP02 must be "D8". |  |
| 2300.DTP03 must be present. |  |
| 2300.DTP03 must be a valid date in |  |
| CCYYMMDD format. |  |


| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
| Only two iteration of 2300.DTP with <br> DTP01 = "090" or "091" are allowed. |  |
| 2300.DTP01 must be present. |  |
| 2300.DTP01 must be valid values. |  |
| 2300.DTP02 must be present. |  |
| 2300.DTP02 must be "D8". |  |
| 2300.DTP03 must be present. |  |
| 2300.DTP03 must be a valid date in |  |
| CCYYMMDD format. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| When 2300.PWK06 is present, 2300.PWK02 must be "BM", "EL", "EM", "FX" or "FT" |  |
| 2300.PWK06 must be 2-50 characters. | IG note limiting to 50 |
| 2300.PWK06 must be populated with accepted AN characters. |  |
| 2300.PWK06 must contain at least two non- space characters. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300.CN1 must not be present. | IG note that CN1 is not for HIPAA claims. |
| Only one iteration of 2300.AMT is allowed. |  |
| 2300.AMT01 must be present. |  |
| 2300.AMT01 must be "F5". |  |
| 2300.AMT02 must be numeric. |  |
| 2300.AMT02 must be <= 99,999.99. |  |
|  | 11/25: Medicare specific limitation. <br> 01/20: Companion Guide Note needed. |
| 2300.AMT02 must be >= 0 . |  |






| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| Must not be present. |  |
| Only one iteration of 2300 .REF with REF01 = "D9" is allowed. | Pass through, syntax only |
| 2300.REF01 must be present. |  |
| 2300.REF01 must be "D9". |  |
| 2300.REF02 must be present. |  |
| 2300.REF02 must contain at least one nonspace character. |  |
| 2300. REF02 must be 1-20 characters. |  |
| 2300.REF02 must be populated with accepted AN characters. |  |
| Must not be present. |  |
| Must not be present. |  |
| Only one iteration of 2300.REF with REF01 = "EA" is allowed. |  |
| 2300.REF01 must be present. |  |
| 2300.REF01 must be "EA". |  |
| 2300.REF02 must be present. |  |
| 2300.REF02 must contain at least one nonspace character. |  |
| 2300.REF02 must be 1-50 characters. |  |
|  |  |
| 2300.REF02 must be populated with accepted AN characters. |  |


| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
|  |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
|  |  |
| 2300.K301 must be populated with accepted AN characters. |  |
| Must not be present. |  |
| Must not be present. |  |
| Only one iteration of $\mathbf{2 3 0 0}$.NTE is allowed. |  |
| 2300. NTE01 must be present. |  |
| 2300.NTE01 must be valid values. |  |
| 2300.NTE02 must be present. |  |
| 2300.NTEO2 must contain at least one nonspace character. |  |
| 2300.NTE02 must be 1-80 characters. |  |
|  |  |
| 2300.NTE02 must be populated with accepted AN characters. |  |
| Only one iteration of 2300.CR1 is allowed. |  |
| If 2300.CR1 is present, 2300.CLM05-1 must be "41" or "42". | 02/04: Companion Guide Note needed. |
| 2300.CR101 must be "LB". |  |
| If 2300.CR101 is present, then 2300.CR102 must be present. |  |
| 2300.CR102 must be >0 and <= 9,999.99 | 12/2: Companion Guide note needed - instruct submitters to send <TBD> if transport was not actually conducted. <br> 02/11: Submitted a HIR to X12 to clarify the submission requirements and provide a workaround. |



| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Only one iteration of 2300.CR2 is allowed. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300.CR208 must be present. |  |
| $2300 . \mathrm{CR} 208$ must be valid values. |  |
| Must not be present. |  |
| 2300.CR210 must contain at least one non- space character. |  |
| 2300.CR210 must be 1-80 characters. |  |
|  |  |
| 2300.CR210 must be populated with accepted AN characters. |  |
|  |  |
| 2300. CR211 must contain at least one nonspace character. |  |
| $2300 . C R 211$ must be $1-80$ characters. |  |
|  |  |
| 2300.CR211 must be populated with |  |
|  |  |
| Must not be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Only three iterations of 2300.CRC with CRC01 = "07" are allowed. |  |
| If 2300.CRC is present, 2300.CLM05-1 must be "41" or "42". |  |
| 2300.CRC01 must be present. |  |
| 2300.CRC01 must be "07". |  |
| 2300.CRC02 must be present. |  |
| 2300.CRC02 must be valid values. |  |
| 2300.CRC03 must be present. |  |
| 2300.CRC03 must be valid values. |  |
| $2300 . \mathrm{CRC04}$ must be valid values. |  |
| 2300.CRC05 can only be present if 2300.CRC04 is present. |  |
| $2300 . C R C 05$ must be valid values. |  |
| 2300.CRC06 can only be present if 2300.CRC05 is present. |  |
| $2300 . C R C 06$ must be valid values. |  |
| 2300.CRC07 can only be present if 2300.CRC06 is present. |  |
| $2300 . C R C 07$ must be valid values. |  |
| Only three iterations of 2300.CRC with CRC01 = "E1", "E2" or "E3" are allowed. |  |
| 2300.CRC01 must be present. |  |
| 2300.CRC01 must be valid values. |  |
| $2300 . \mathrm{CRC02}$ must be present. |  |
| 2300.CRC02 must be valid values. |  |
| 2300.CRC03 must be present. |  |
| 2300.CRC03 must be valid values. |  |
| 2300.CRC04 must be valid values. |  |
| 2300.CRC05 can only be present if 2300.CRC04 is present. |  |
| $2300 . C R C 05$ must be valid values. |  |
| 2300.CRC06 can only be present if 2300.CRC05 is present. |  |
| 2300.CRC06 must be valid values. |  |
| 2300.CRC07 can only be present if 2300.CRC06 is present. |  |
| $2300 . C R C 07$ must be valid values. |  |
| Only one iteration of 2300.CRC with CRC01 = "75" is allowed. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2300.CRC01 must be present. |  |
| 2300.CRC01 must be "75". |  |
| 2300.CRC02 must be present. |  |
| 2300.CRC02 must be "Y". |  |
| 2300.CRC03 must be present. |  |
| 2300.CRC03 must be "IH". |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Only one iteration of 2300.CRC with CRC01 = "ZZ" is allowed. | Pass Through Syntax Only |
| 2300.CRC01 must be present. |  |
| 2300.CRC01 must be "ZZ". |  |
| 2300.CRC02 must be present. |  |
| 2300.CRC02 must be valid values. |  |
| $2300 . \mathrm{CRC03}$ must be present. |  |
| If $2300 . \mathrm{CRC02}$ is " $Y$ ", 2300.CRC03 must be valid values. |  |
| If 2300.CRC02 is " N ", 2300.CRC03 must be "NU". |  |
| $2300 . C R C 04$ must be valid values. |  |
| $2300 . C R C 05$ must be valid values. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300. HI with H101-1 = "BK" must be present. | ICD-9 Only period |
| 2300.HI with HI01-1 = "BK" or "ABK" must be present. | Transition period |
| 2300. HI with HI01-1 = "ABK" must be present. | ICD-10 Only period - assumes no dual-use after mandated date. |
| Only one iteration of 2300. HI with H101-1 = "BK" is allowed. | ICD-9 Only period |
| Only one iteration of $2300 . \mathrm{HI}$ with H101-1 = " BK " or " ABK " is allowed. | Transition period |
| Only one iteration of 2300.HI with H101-1 = "ABK" is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| 2300.HI01-1 must be present. |  |
| 2300. $\mathrm{HIO1}-1$ must = "BK" | ICD-9 Only period |
| 2300.HI01-1 must be "BK" or "ABK". | Transition period |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2300. H01-1 must "ABK" | ICD-10 Only period - assumes no dual-use after mandated date. |
| 2300.H01-2 must be present. |  |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "1" and 2300.H01-1 is "BK" then 2300.H01-2 must be a valid ICD-9-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9-CM Diagnosis Code list. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "1" and 2300.HIO1-1 is "BK" then 2300. H01-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-9-CM Diagnosis Code list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "1" and 2300.HI01-1 is "ABK" then 2300.HI01-2 must be a valid ICD-10CM Principal Diagnosis code on the date in 2400 DTP03 when DTP01 = "472" | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is " 1 " \& 2300.H01-1 is "ABK" then 2300. HIO1-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-10-CM Diagnosis Codes. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not " 1 " and 2300. H101-1 is "BK" then 2300.HIO1-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "1" and 2300.H101-1 is "BK", 2300.H01-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "1" (all lines) and 2300.HI01 1 is "ABK" then 2300.HI01-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "1" (all lines) and 2300.H101 1 is "ABK", 2300.HIO1-2 must be a valid ICD 10-CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
| 2300.HIO1-2 must not contain a "." | REMOVE PERIODS FROM DIAG CODES IN <br> TRANSLATION |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. | Transition period |
| Must not be present. | ICD-9 Only period |
| mandated date. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "2" and 2300.HIO2-1 is "BF", 2300.HIO2-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "2" and 2300. H102-1 is "ABF" then 2300.HIO2-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "2" and 2300.H02-1 is "ABF", 2300. HIO2-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| 2300.H102-2 must not contain a "." |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300.HIO3 can only be present if 2300.HIO2 is present. |  |
| 2300. H I03-1 must be "BF" or "ABF". | Transition period |
| 2300. $\mathrm{HIO} 03-1$ must = "BF" | ICD-9 Only period |
| 2300. H I03-1 must = "ABF" | ICD-10 Only period - assumes no dual-use after mandated date. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "3" and 2300.HIO3-1 is "BF" then 2300. HIO3-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9CM Diannosis Conde list | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 3 " and $2300 . \mathrm{HIO}-1$ is "BF" then 2300. HIO3-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the CMS subset of the ICD-9-CM Diagnosis Code list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 3 " and 2300. HIO3-1 is "ABF" then 2300.HIO3-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 $=$ " 472 ", based on the ICD-10-CM Diaanosis Code list | Transition period and ICD-10 Only period. Valid ICD-10-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 3 " \& 2300.HI03-1 is "ABF" then 2300. HIO3-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 $=$ " 472 ", based on the CMS subset of the ICD-10-CM Diagnosis cades | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "3" and 2300. $\mathrm{H} 103-1$ is "BF" then 2300.HIO3-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not " 3 " and 2300. HI03-1 is "BF", 2300.HIO3-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "3" and 2300.HIO3-1 is "ABF" then 2300.HIO3-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not " 3 " and 2300. HIO -1 1 is "ABF", 2300. HIO3-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| 2300.H103-2 must not contain a "." |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300. H104 can only be present if 2300 .HIO3 is present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| .H104-1 must be "BF" or "ABF" | on period |
| 2300. H H04-1 must = "BF" | ICD-9 Only period |
| 2300.H104-1 must = "ABF" | ICD-10 Only period - assumes no dual-use after mandated date. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "4" and 2300.H104-1 is "BF" then 2300. H104-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9CM Diannasic Coda list | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "4" and 2300.HIO4-1 is "BF" then 2300. HIO4-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the CMS subset of the ICD-9-CM Diagnosis Code list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "4" and 2300.HI04-1 is "ABF" then 2300.HIO4-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Diagnosis Code reference must <br> be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "4" \& 2300. HIO4-1 is "ABF" then 2300 .HIO4-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the CMS subset of the ICD-10-CM Diagnosis cades | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "4" and 2300. H104-1 is "BF" then 2300 .H104-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "4" and 2300 .H104-1 is "BF", 2300.H104-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "4" and 2300.H104-1 is "ABF" then 2300.HI04-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this am | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "4" and 2300.H104-1 is "ABF", 2300. HI04-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| 2300.H104-2 must not contain a ${ }^{\text {"." }}$ |  |


| Proposed 5010 Edits <br> CEDI |  |
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| Proposed 5010 Edits CEDI | Misc. Notes |
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| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "5" and 2300. H105-1 is "BF", 2300.HI05-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not " 5 " and 2300. H 105-1 is "ABF" then 2300.HIO5-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not " 5 " and $2300 . \mathrm{H} 105-1$ is "ABF", 2300.HI05-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| 2300.H105-2 must not contain a "." |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300. HI06 can only be present if 2300 .HI05 is present. |  |
| 2300. H I06-1 must be "BF" or "ABF". | Transition period |
| 2300. H I06-1 must = "BF" | ICD-9 Only period |
| 2300. H H06-1 must $=$ "ABF" | ICD-10 Only period - assumes no dual-use after mandated date. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "6" and 2300.H106-1 is "BF" then 2300. HIO6-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9CM Diannosis Conde list | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 6 " and $2300 . \mathrm{H} 106-1$ is "BF" then 2300. HIO6-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the CMS subset of the ICD-9-CM Diagnosis Code list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 6 " and 2300. HI06-1 is "ABF" then 2300 .HIO6-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 $=$ " 472 ", based on the ICD-10-CM Diaanosis Code list | Transition period and ICD-10 Only period. Valid ICD-10-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "6" \& 2300.H106-1 is "ABF" then 2300. HI06-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 $=$ " 472 ", based on the CMS subset of the ICD-10-CM Diagnosis codes | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "6" and 2300. $\mathrm{H} 106-1$ is "BF" then 2300.HIO6-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "6" and 2300.H106-1 is "BF", 2300.HI06-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "6" and 2300.H106-1 is "ABF" then 2300.HOO6-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "6" and 2300. H106-1 is "ABF", 2300.HI06-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| 2300.HI06-2 must not contain a "." |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300. HI07 can only be present if 2300 .HI06 is present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2300.H107-1 must be "BF" or "ABF", | Transition period |
| 2300.H107-1 must = "BF" | ICD-9 Only period |
| 2300. $\mathrm{H} 107-1$ must = "ABF" | ICD-10 Only period - assumes no dual-use after mandated date. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "7" and $2300 . \mathrm{HI} 07-1$ is "BF" then 2300. HI07-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-9CM Diannosis Conde list | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is "7" and 2300.H107-1 is "BF" then 2300. HIO7-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the CMS subset of the ICD-9-CM Diagnosis Code list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "7" and 2300. H07-1 is "ABF" then 2300.HIO7-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Diagnosis Code reference must <br> be available for this edit. |
| If 2400. SV107-1, SV107-2, SV107-3, or SV107-4 is "7" \& 2300.H107-1 is "ABF" then 2300. HIOT-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-10-CM Diagnosis | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "7" and 2300. H107-1 is "BF" then 2300 .HIO7-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "7" and 2300.H107-1 is "BF", 2300.H07-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "7" and 2300.H107-1 is "ABF" then 2300.HI07-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this laim | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "7" and 2300.H107-1 is "ABF", 2300. HI07-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| 2300.H107-2 must not contain a "." |  |


| Proposed 5010 Edits <br> CEDI |  |
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| Proposed 5010 Edits CEDI | Misc. Notes |
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| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "8" and 2300. H108-1 is "BF", 2300.HI08-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "8" and 2300.HI08-1 is "ABF" then 2300.HI08-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "8" and 2300. H108-1 is "ABF", 2300 .HIO8-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| 2300.H08-2 must not contain a "." |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300. HIO9 can only be present if $2300 . \mathrm{H} 08$ <br> is present. | 03/31: Pass through, syntax only. <br> 02/17: Companion Guide note needed. |
| 2300. H I09-1 must be "BF" or "ABF". |  |
| 2300.H109-2 must be present. |  |
| If 2400 .SV107-1, SV107-2, SV107-3, or SV107-4 is "9" and 2300. H109-1 is "BF" then 2300.HIO9-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-9CM Diagnosis Code list. | 04/07: Edits for HIO9 - HI12 added back for CEDI only. <br> ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Diagnosis Code reference must he available for this edit |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 9 " and $2300 . \mathrm{H} 109-1$ is " BF " then 2300. HIO9-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the CMS subset of the ICD-9-CM Diagnosis Code list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is " 9 " and 2300. HIO9-1 is "ABF" then 2300.HI09-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 $=$ " 472 ", based on the ICD-10-CM Diannosis Code list | Transition period and ICD-10 Only period. Valid ICD-10-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "9" \& 2300.HI09-1 is "ABF" then 2300. HI09-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 $=$ " 472 ", based on the CMS subset of the ICD-10-CM Diagnosis cades | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "9" and 2300. H109-1 is "BF" then 2300.HIO9-2 must be a valid ICD-9-CM Principal Diagnosis code for every date in the date of service range for this claim. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "9" and 2300.HI09-1 is "BF", 2300.HIO9-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "9" and 2300.H109-1 is "ABF" then 2300.HIO9-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "1" and 2300. HI09-1 is "ABF", 2300.HIO9-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| 2300.H109-2 must not contain a "." |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300.H110 can only be present if $2300 . \mathrm{HIO9}$ is present. | 03/31: Pass through, syntax only. <br> 02/17: Companion Guide note needed. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2300.H110-1 must be "BF" or "ABF". |  |
| 2300.H110-2 must be present. |  |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "10" and $2300 . \mathrm{HI} 10-1$ is "BF" then 2300.HI10-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the ICD-9CM Diannosis Code list | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "10" and $2300 . \mathrm{HI} 10-1$ is "BF" then 2300.HI10-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-9-CM Diagnosis Code list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "10" and 2300.HI10-1 is "ABF" then 2300.HI10-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the -DCD-10-CM Diannosis Code list | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Diagnosis Code reference must <br> be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "10" \& 2300. H110-1 is "ABF" then 2300 .H110-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-10-CM Diagnosis Codos | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "10" and $2300 . \mathrm{H} 110-1$ is "BF" then 2300. H110-2 must be a valid ICD-9 CM Principal Diagnosis code for every date in the date of service range for this claim. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "10" and 2300. H110-1 is "BF", 2300. H110-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "10" and 2300.HI10-1 is "ABF" then 2300.HI10-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "10" and 2300. HI $10-1$ is "ABF", 2300. H110-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit |
| 2300.H110-2 must not contain a "." |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300. Hl11 can only be present if 2300.H110 is present. | 03/31: Pass through, syntax only. <br> 02/17: Companion Guide note needed. |
| 2300. H 111 -1 must be "BF" or "ABF". |  |
| 2300.HI11-2 must be present. |  |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "11" and 2300. HI11-1 is "BF" then 2300.HI11-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9CM Diannosic Code list | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "11" and $2300 . \mathrm{HI} 11-1$ is "BF" then 2300.HI11-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the CMS subset of the ICD-9-CM Diagnosis Code list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "11" and 2300. HI11-1 is "ABF" then 2300. HI11-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-10-CM Diaanosis Code list | Transition period and ICD-10 Only period. Valid ICD-10-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "11" \& 2300.HI11-1 is "ABF" then 2300.H111-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-10-CM Diagnosis cades | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "11" and 2300.HI11-1 is "BF" then 2300.HI11-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the date of service range for this claim. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "11" and 2300. H111-1 is "BF", 2300.H111-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "11" and 2300.HI11-1 is "ABF" then 2300. HI11-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "11" and 2300.H111-1 is "ABF", 2300.HI11-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| 2300.HI11-2 must not contain a "." |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300 .H112 can only be present if 2300.HI11 is present. | 03/31: Pass through, syntax only. 02/17: Companion Guide note needed. |
| 2300.H112-1 must be "BF" or "ABF". |  |
| 2300.H112-2 must be present. |  |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "12" and 2300.H112-1 is "BF" then 2300.HI12-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the ICD-9CM Diannosis Cade list | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "12" and $2300 . \mathrm{HI} 12-1$ is "BF" then 2300.H112-2 must be a valid ICD-9-CM Diagnosis code on the date in 2400.DTP03 when DTP01 = " 472 ", based on the CMS subset of the ICD-9-CM Diagnosis Code list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "12" and 2300. HI $12-1$ is "ABF" then 2300. HI12-2 must be a valid ICD-10CM Diagnosis code on the date in 2400.DTP03 when DTP01 $=$ " 472 ", based on the ICD-10-CM Diaanosis Code list | Transition period and ICD-10 Only period. Valid ICD-10-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 is "12" \& 2300. H112-1 is "ABF" then 2300.HI12-2 must be a valid ICD-10-CM Principal Diagnosis code on the date in 2400.DTP03 when DTP01 = "472", based on the CMS subset of the ICD-10-CM Diagnosis cadoc | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, or SV107-4 are not "12" and 2300.H112-1 is "BF" then 2300.H112-2 must be a valid ICD-9 CM Principal Diagnosis code for every date in the date of service range for this claim. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "12" and 2300.H112-1 is "BF", 2300.HI12-2 must be a valid ICD-9CM Principal Diagnosis code for every date in the DOS range for this claim., based on the CMS subset of the ICD-9-CM Diag list. | ICD-9 Only period and Transition period. <br> Valid Shared System Subset of the ICD-9-CM Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3, and SV107-4 are not "12" and 2300.H112-1 is "ABF" then 2300.H112-2 must be a valid ICD-10-CM Principal Diagnosis code for every date in the date of service range for this claim | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| If 2400.SV107-1, SV107-2, SV107-3 \& SV107-4 are not "12" and 2300. H112-1 is "ABF", 2300.HI12-2 must be a valid ICD-10CM Principal Diagnosis for every date in the DOS range for this claim., based on the CMS subset of the ICD-10-CM Diag list. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit. |
| 2300.H112-2 must not contain a "." |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Only one iteration of $2300 . \mathrm{HI}$ with HI01-1 = "BP" is allowed. |  |
| 2300.HI01-1 must be present. |  |
| 2300.HIO1-1 must be "BP". |  |
| 2300.HIO1-2 must be present. | Valid HCPCS reference must be available for this edit. |
| 2300.HI01-2 must be a valid HCPCS Principle Procedure code. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300.HIO2-1 must be "BO". |  |
| 2300.HIO2-2 must be a valid HCPCS Principle Procedure code. | Valid HCPCS reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Only two iteration of 2300. HI with HI01-1 = "BG" are allowed. | 12/4: Pass-through, syntax only |
| 2300.HIO1-1 must be present. |  |
| 2300. $\mathrm{HIO1-1}$ must be "BG". |  |
| 2300.HIO1-2 must be present. |  |
| 2300.HI01-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2300. HIO1 is present then 2300 .HIO2 may be present. |  |
| 2300. $\mathrm{HIO2-1}$ must be "BG". |  |
| 2300.HIO2-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If $2300 . \mathrm{HIO}$ is present then $2300 . \mathrm{HIO}$ may be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2300.HIO3-1 must be "BG". |  |
| 2300.HIO3-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If $2300 . \mathrm{HIO3}$ is present then $2300 . \mathrm{H} 104$ may be present. |  |
| 2300. $\mathrm{HIO4-1}$ must be "BG". |  |
| 2300.HIO4-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2300 .HI04 is present then 2300 .HI05 may be present. |  |
| 2300. HI05-1 must be "BG". |  |
| 2300.HIO5-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| If 2300. HIO5 is present then 2300 .HI06 may be present. |  |
| 2300.HI06-1 must be "BG". |  |
| 2300.HIO6-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2300. HIO6 is present then 2300 .HIO7 may |  |
| 2300.HI07-1 must be "BG". |  |
| 2300.HIO7-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If $2300 . \mathrm{H} 107$ is present then $2300 . \mathrm{H} 108$ may be present. |  |
| 2300. $\mathrm{HIO} 08-1$ must be "BG". |  |
| 2300.HI08-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |


| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2300.HI08 is present then 2300.HI09 may |  |
| be present. |  |
| 2300.HI09-1 must be "BG". |  |
| 2300.HI09-2 must be a valid Condition code. | Valid NUBC Condition Code reference must be |
| available for this edit. |  |



| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
|  |  |
|  |  |
| 2300.HCP04 must be populated with <br> accepted AN characters. |  |
|  |  |
| 2300.HCP05 must be 1 to 9 digits. |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2300.HCP06 present. |  |
| 2300.HCP06 must contain at least one non- |  |
|  |  |
| 2300. 50 characters. |  |
| accepted AN characters. |  |




| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| The first position of 2310A.NM109 must be a "1". |  |
| If any SV101-3 through SV101-6 (procedure code modifier) not = "EY", 2310A NM109 must be valid on PECOS file (match include NPI + 1st four characters of last name +1 st character of first name) |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| 2310A.REF must not be present. | Everyone but Trailblazer <br> 01/20: Companion Guide Note needed. |
| 2310A.REF01 must be present. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| 2310A.REF01 must be valid values. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| 2310A.REF02 must be present. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| When 2310A.REF01 = "OB", 2310A.REF02 must contain at least one non-space character. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| When 2310A.REF01 = "1G", 2310A.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| When 2310A.REF01 = "OB", 2310A.REF02 must be 1-50 characters. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| When 2310A.REF01 = "OB", 2310A.REF02 must be populated with accepted AN characters. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |



| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
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| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
| 2310B.NM109 must be a valid NPI on the <br> Crosswalk when evaluated with <br> 1000B.NM109. |  |
| The first position of 2310B.NM109 must be a <br> "1". |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2310B.NM1 is present, 2310B.PRV with <br> PRV01 = "PE" may be present. |  |
| Only one iteration of 2310B.PRV with <br> PRV01 = "PE" is allowed. |  |
| 2310B.PRV01 must be present. |  |
| 2310B.PRV01 must be "PE". |  |
| 2310B.PRV02 must be present. |  |
| 2310B.PRV02 must be "PXC". |  |
| 2310B.PRV03 must be present. |  |
| On10B.REF must not be present. |  |
| 2310B.PRV03 must be a valid Provider Trailblazer. |  |
| Taxonomy Code | Everyone but Trailblazer <br> 01/20: Companion Guide Note needed. |
| Valid Taxonomy reference must be available for |  |
| this edit. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| O1/20: Companion Geeded. |  |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
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|  |  |
|  |  |
|  |  |
| 2310C.NM103 must be populated with |  |
| accepted AN characters. |  |
| Must not be present. |  |
| Must not be present. |  |
| Only one iteration of 2310C.NM1 is |  |
| allowed. |  |
| 2310C.NM101 must be present. |  |
| 2310C.NM101 must be"77". |  |
| 2310C.NM102 must be present. |  |
| 2310C.NM102 must be "2". |  |
| 2310C.NM103 must be present. |  |
| 2310C.NM103 must contain at least one non- <br> space character. |  |
| 2310C.NM103 must be 1 - 60 characters. |  |
|  |  |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2310C.NM108 must be "XX". |  |
| If 2310C.NM108 is present, 2310C.NM109 |  |
| must be present. |  |
| 2310C.NM109 must be valid according to <br> the NPI algorithm. |  |
| The first position of 2310C.NM109 must be a <br> "1". |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2310C.N302 must contain at least one non- <br> 2310ce character. <br> present. |  |
| Only one iteration of 2310C.N3 is allowed. |  |
| 2310C.N301 must be present. |  |
| 2310C.N301 must contain at least one non- <br> space character. |  |
| 2310C.N301 must be 1 - 55 characters. |  |
|  |  |
| 2310C.N301 must be populated with <br> accepted AN characters. |  |




| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
| 2310C.PER06 must be 1-256 characters. |  |
|  |  |
|  |  |
| 2310C.PER06 must be populated with <br> accepted AN characters. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Only one iteration 2310D.NM1 is allowed. |  |
| 2310D.NM101 must be present. |  |
| 2310D.NM101 must be "DQ". |  |
| 2310D.NM102 must be present. |  |
| 2310D.NM102 must be "1". |  |
| 2310D.NM103 must be present. |  |
| 2310D.NM103 must contain at least one non- <br> space character. |  |
| 2310D.NM103 must be 1 - 60 characters. |  |
|  |  |
| a310D.NM104 must be populated with |  |
| 2310D.NM104 must contain at least one non- |  |
| 2310D. character. |  |
| 2310D.NM104 must be 1 - 35 characters. |  |
| accepted AN characters. |  |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :---: | :---: |
| 2310D.NM105 must contain at least one non |  |
| 2310D.NM105 must be 1-25 characters. |  |
| 2310D.NM105 must be populated with accepted AN characters. |  |
| Must not be present. |  |
| 2310D.NM107 must contain at least one non space character. |  |
| 2310D. NM107 must be 1-10 characters. |  |
| 2310D.NM107 must be populated with |  |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| 2310D.NM108 must be present. | Everyone but Trailblazer <br> 01/20: Companion Guide Note needed |
| 2310D.NM108 must be "XX". |  |
| If 2310D.NM108 is present, 2310D.NM109 must be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2310D.NM109 must be valid according to the NPI algorithm. |  |
| The first position of 2310D.NM109 must be a "1". |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Only 2 iterations of 2310D.REF are allowed. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| Must not be present. | Everyone but Trailblazer |
| 2310D.REF01 must be present. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| 2310D.REF02 must be present. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| When 2310D.REF01 = "OB" or "LU", 2310D.REF02 must contain at least one nonspace character. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| When 2310D.REF01 = "OB" or "LU", 2310D.REF02 must be 1-50 characters. | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| When 2310D.REF01 = "OB" or "LU", 2310D.REF02 must be populated with | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| Must not be present. |  |
| Must not be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Only one iteration 2310E.NM1 is allowed. |  |
| 2310E.NM101 must be present. |  |
| 2310E.NM101 must be "PW". |  |
| 2310E.NM102 must be present. |  |
| 2310E.NM102 must be "2". |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2310E.NM1 is present, 2310E.N3 must be present. |  |
| Only one iteration of 2310E.N3 is allowed. |  |
| 2310E.N301 must be present. |  |
| 2310E.N301 must contain at least one nonspace character. |  |
| 2310E.N301 must be 1-55 characters. |  |
|  |  |
| 2310E.N301 must be populated with accepted AN characters. |  |
|  |  |
| 2310E.N302 must contain at least one nonspace character |  |



| Proposed 5010 Edits <br> CEDI Misc. Notes |  |
| :--- | :--- |
| 2310E.N403 must be a valid Zip Code. | Valid Zip Code reference must be available for <br> this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must |  |
| Mnly one iteration 2310F.NM1 is allowed. |  |
| 2310F.NM101 must be present. |  |
| 2310F.NM101 must be "45". |  |
| 2310F.NM102 must be present. |  |
| 2310F.NM102 must be "2". |  |
| 2310F.NM103 must contain at least one non- |  |
| space character. |  |
| 2310F.NM103 must be 1 - 60 characters. |  |
|  |  |


| Proposed 5010 Edits <br> CEDI <br> Must not be present. | Misc. Notes |
| :--- | :--- |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2310F.NM1 is present, 2310F.N3 must <br> be present. |  |
| Only one iteration of 2310F.N3 is allowed. |  |
| 2310F.N301 must be present. |  |
| 2310F.N301 must contain at least one non- <br> space character. |  |
| 2310F.N301 must be 1-55 characters. |  |
|  |  |
|  |  |
| 2310F.N301 must be populated with |  |
| accepted AN characters. |  |
| 2310F.N302 must contain at least one non- |  |
| space character. |  |
| 2310F.N302 must be 1-55 characters. |  |
|  |  |
| If 2310F.NM1 is present, 2310F.N4 must <br> be present. |  |
| 2310F.N302 must be populated with |  |
| accepted AN characters. |  |


| Proposed 5010 Edits <br> CEDI <br> Only one iteration of 2310F.N4 is allowed. | Misc. Notes |
| :--- | :--- |
| 2310F.N401 must be present. |  |
| 2310F.N401 must contain at least two non- |  |
| space characters. |  |
| 2310F.N401 must be 2-30 characters. |  |
|  |  |
| 2310F.N401 must be populated with <br> accepted AN characters. |  |
| Valis State Code reference must be available for |  |
| this edit. |  |



| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| $2320 . S B R 09$ must be valid values. |  |
| 2320.SBR09 must not = "MA" or "MB". |  |
| If $2320 . S B R$ is present, 2320.CAS may be present. | 02/10: 04/01/2010 is the date the Final Rule mandates the use of 5010. After that date, this code (which was allowed in 4010) is not a compliant code |
| Only 5 iterations of 2320.CAS are allowed. |  |
| 2320.CAS01 must be present. | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| 2320.CAS01 must be valid values. |  |
| If 2320.CAS01 = "CR" then 2330B.DTP with DTP01 = "573" must be prior to 01/01/2012. |  |
| 2320.CAS02 must be present. |  |
| If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS02 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = " 573 " |  |
| If 2330B.DTP03 with DTP01 = "573" is not present, 2320.CAS02 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = "573". |  |
| 2320.CAS03 must be present. |  |
| 2320.CAS03 must be numeric. |  |
| 2320.CAS03 must not $=0$. |  |
| 2320.CAS03 is limited to 0,1 or 2 decimal positions. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| $\begin{aligned} & \text { 2320.CAS03 must be >=-99,999.99. and } \\ & <=99,999.99 . \end{aligned}$ |  |
|  | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed. |
| 2320.CAS04 must be 1-15 digits. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| 2320.CAS04 must not $=0$. |  |
| If 2320.CAS02 is present, 2320.CAS05 may be present. | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = " 573 ". |  |
| If 2330B.DTP03 with DTP01 = "573" is not present, 2320.CAS05 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = "573". |  |
| 2320.CAS05 is present, 2320.CAS06 must be present. |  |
| $2320 . C A S 06$ must be numeric. |  |
| 2320.CAS06 must not $=0$. |  |
| 2320.CAS06 is limited to 0,1 or 2 decimal positions. | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed. |
| $\begin{aligned} & \text { 2320.CAS03 must be }>=-99,999.99 \text {. and } \\ & <=99,999.99 . \end{aligned}$ |  |



| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
|  |  |
| If 2320.CAS08 is present, 2320.CAS10 may be present. |  |
| 2320.CAS10 must be 1-15 digits. |  |
|  |  |
| 2320. CAS10 must not $=0$. |  |
| If 2320.CAS08 is present, 2320.CAS11 may be present. | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| If 2330B.DTP03 with DTP01 = "573" is present, 2320.CAS11 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". |  |
| If 2330B.DTP03 with DTP01 = " 573 " is not present, 2320.CAS11 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = "573". |  |
| 2320.CAS11 is present, 2320.CAS12 must be present. |  |
| 2320.CAS12 must be numeric. |  |
| 2320.CAS12 must not $=0$. | 11/25: Medicare specific limitation. <br> 01/20: Companion Guide Note needed. |
| 2320.CAS12 is limited to 0,1 or 2 decimal positions. |  |
| $\begin{aligned} & \text { 2320.CAS12 must be >= -99,999.99. and } \\ & <=99,999.99 . \end{aligned}$ | 11/25: Medicare specific limitation. <br> 01/08: Not brought into Core System, so no Medicare size limit is needed. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
|  |  |
| If 2320. CAS11 is present, 2320. CAS13 may be present. |  |
| 2320.CAS13 must be 1-15 digits. |  |
|  |  |
| 2320. CAS13 must not $=0$. |  |
| If 2320.CAS11 is present, 2320.CAS14 may be present. | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| If 2330B.DTP03 with DTP01 = "573" is present, 2320.CAS14 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". |  |
| If 2330B.DTP03 with DTP01 = "573" is not present, 2320.CAS14 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTPO3s when DTP01 = "573". |  |
| 2320.CAS14 is present, 2320.CAS15 must be present. |  |
| 2320.CAS15 must be numeric. |  |
| 2320.CAS15 must not $=0$. | 11/25: Medicare specific limitation. <br> 01/20: Companion Guide Note needed. |
| 2320.CAS15 is limited to 0,1 or 2 decimal positions. |  |
| $\begin{aligned} & \text { 2320.CAS15 must be >= -99,999.99. and } \\ & <=99,999.99 . \end{aligned}$ | 11/25: Medicare specific limitation. <br> 01/08: Not brought into Core System, so no Medicare size limit is needed. |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :---: | :---: |
| If 2320.CAS14 is present, 2320.CAS16 may |  |
| $2320 . C A S 16$ must be $1-15$ digits. |  |
| 2320.CAS16 must not $=0$. |  |
| If 2320.CAS14 is present, 2320.CAS17 may be present. | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| If 2330B.DTP03 with DTP01 = "573" is present, 2320.CAS17 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573" |  |
| If 2330B.DTP03 with DTP01 = "573" is not present, 2320.CAS17 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = "573" |  |
| If 2320.CAS17 is present, 2320.CAS18 |  |
| 2320.CAS18 must be numeric. |  |
| 2320.CAS18 must not $=0$. | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed. |
| 2320.CAS18 is limited to 0,1 or 2 decimal positions. |  |
| 2320.CAS18 must be $>=-99,999.99$. and $<=99,999.99$. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed. |



| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2320.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| 2320 AMT02 must = the sum of all 2430.SVD02 payer paid amounts (when the value in 2430. SVD01 is the same as the value in 2330B.NM109) minus the sum of all claim level adjustments (2320 CAS adjustment amounts) for the same payer. |  |
| Must not be present. |  |
| If 2320.SBR is present, 2320.AMT with AMT01 = "A8" may be present. | Pass through, syntax only. |
| Only one iteration of 2320.AMT with AMT01 = "A8" is allowed. | Pass through, syntax only. |
| 2320.AMT01 must be present. |  |
| 2320.AMT01 must be "A8". |  |
| 2320 .AMT02 must be numeric. |  |
| 2320.AMT02 must be $<=99,999.99$. | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed |
| 2320.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| The sum of all 2320.AMT02 (with AMT01 $=$ "A8") elements must = 2300.CLM02. |  |
| 2320.AMT02 must be >= 0 . |  |
| Must not be present. |  |
| If 2320.SBR is present, 2320.AMT with AMT01 = "EAF" may be present. | Pass through, syntax only. |





| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
| 2320.MOA09 is limited to 0, 1 or 2 decimal <br> positions. |  |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
| 2330A.NM105 must contain at least one non- |  |
| space character. |  |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2330A.NM1 is present, 2330A.N3 may be <br> present. |  |
| Only one iteration of 2330A.N3 is allowed. |  |
| 2330A.N301 must be present. |  |
| 2330A.N301 must contain at least one non- <br> space character. |  |
| 2330A.N301 must be 1 - 55 characters. |  |
|  |  |
| If 2330A.NM1 is present, 2330A.N4 must <br> be present. |  |
| Only one iteration of 2330A.N4 is allowed. |  |
|  |  |
| 2330A.N302 must be populated with <br> accepted AN characters. |  |
| 2330A.N301 must be populated with <br> accepted AN characters. |  |
|  |  |
| 2330A.N302 must contain at least one non- |  |
| space character. |  |
| 2330A.N302 must be 1-55 characters. |  |



| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2330A.REF02 must be 9 digits, with no punctuation. <br> The first 3 digits cannot be higher than 772, and digits $1-3,4-5$, and $6-9$ cannot be zeros. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2320.SBR is present, 2330B.NM1 must be present. |  |
| Only one iteration of 2330B.NM1 is allowed. |  |
| 2330B.NM101 must be present. |  |
| 2330B.NM101 must be "PR". |  |
| 2330B.NM102 must be present. |  |
| 2330B.NM102 must be "2". |  |
| 2330B.NM103 must be present. |  |
| 2330B.NM103 must contain at least one non- space character. |  |
| 2300B. NM103 must be 1-60 characters. |  |
|  |  |
| 2330B.NM103 must be populated with accepted AN characters. |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2330B.NM108 must be present. |  |
| 2330B.NM108 must be valid values. |  |
| 2330B.NM109 must be present. |  |

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Professional Edits

| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| When sending Line Adjudication Information for this payer, 2330B.NM109 must = 2430.SVD01. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2330B.NM1 is present, 2330B.N3 may be present. |  |
| 23308.N301 must be present. |  |
| 2330 B. N301 must contain at least one non- space character. |  |
| 23308. N301 must be 1-55 characters. |  |
|  |  |
| 2330B.N301 must be populated with |  |
|  |  |
| 2330B.N302 must contain at least one non- space character. |  |
| 23308. N302 must be 1-55 characters. |  |
|  |  |
| 2330B.N302 must be populated with |  |
|  |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| If 2330B.NM1 is present, 2330B.N4 must be present. |  |
| Only one iteration of 2330B.N4 is allowed. |  |
| 2330B.N401 must be present. |  |
| 2330B.N401 must contain at least two nonspace characters. |  |
| 2330B. N401 must be 2-30 characters. |  |
|  |  |
| 2330B.N401 must be populated with accepted AN characters. |  |
| If 2330B.N404 is not present, 2330B.N402 must be present. |  |
| 2330B.N402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| If 2330B.N404 is not present, 2330B.N403 must be present. |  |
| 2330B.N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |


| Proposed 5010 Edits <br> CEDI |
| :--- | :--- |


| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
|  | Misc. Notes |
| If 2330B.REFO1 = "UU", "FY" or "NF", |  |
| 2330B.REFO2 must be populated with |  |
| accepted AN characters. |  |
|  |  |


| Proposed 5010 Edits <br> CEDI <br>  |  |
| :--- | :--- |
|  |  |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
| 2330B.REF02 must be populated with <br> accepted AN characters. |  |
|  |  |
| 2330B.REF02 must contain at least one non- <br> space character. |  |
| Must not be present. |  |
| Must not be present. |  |
| Segment must not be present. |  |
| Soogment must not be present. | 01/20: Companion Guide Note needed. |
|  |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Loop must not be present. |  |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Loop must not be present. |  |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Loop must not be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Segment must not be present. | 01/20: Companion Guide Note needed. |
| Only 50 iterations of the 2400 loop are allowed. |  |
| 2400.LX must be present. |  |
| Only one iteration of $2400 . \mathrm{LX}$ is allowed. |  |
| 2400.LX01 must be present. |  |
| 2400.LX01 must be numeric. |  |
| 2400.LX01 must be must be > 0 and <= 50 . |  |
| The first 2400.LX01 must be "1". |  |
| Subsequent $2400 . \mathrm{LX01}$ values must increment by 1. |  |
| 2400.SV1 must be present. |  |
| Only one iteration of 2400.5 V 1 is allowed. |  |
| 2400.SV101-1 must be present. |  |
| 2400.SV101-1 must be "HC". |  |
| 2400.SV101-2 must be present. |  |
| When 2400.SV101-1 = "HC", 2400.SV101-2 must be a valid HCPCS Code on the date in 2400. DTP03 when DTP01 = "472". | Valid CMS Proprietary HCPCS reference must be available for this edit. |
| When 2400.SV101-1 = "HC", 2400.SV101-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = "472". <br> OR <br> When 2400.SV101-1 = "HC", 2400.SV101-2 must be a valid HCPCS Code from the DME subset on the date in 2400.DTP03 | 12/16: Fallback edits: used only if primary edit above is determined to be unworkable. Review this before finalizing. <br> Valid HCPCS reference must be available for this edit (full external code list). |
| 2400.SV101-3 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". | Valid CMS Proprietary Procedure Code Modlfier to Procedure Code reference must be available for this edit. |


| $\underset{\text { CEDI }}{\text { Proposed } 5010 \text { Edits }}$ | Misc. Notes |
| :---: | :---: |
| 2400.SV101-3 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". | 12/16: Fallback edits:used only if primary edit above is determined to be unworkable. Review this before finalizing. <br> Valid Procedure Code Modlfier reference must be available for this edit (full external code list). |
| If 2400.SV101-3 = "90" 2400 .REF with REF01 = "F4" must be present. |  |
| If 2400.SV101-4 is present, 2400.SV101-3 must be present. | Valid CMS Proprietary Procedure Code Modlfier to Procedure Code reference must be available for this edit. |
| 2400.SV101-4 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". |  |
| If 2400.SV101-4 = "90" 2400.REF with <br> REF01 = "F4" must be present. |  |
| If $2400 . \mathrm{SV} 101-5$ is present, $2400 . \mathrm{SV} 101-4$ must be present. | Valid CMS Proprietary Procedure Code ModIfier to Procedure Code reference must be available for this edit. |
| 2400.SV101-5 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472". |  |
| If 2400.SV101-5 = "90" 2400.REF with REF01 = "F4" must be present. |  |
| If $2400 . \mathrm{SV} 101-6$ is present, 2400.SV101-5 must be present. | Valid CMS Proprietary Procedure Code ModIfier to Procedure Code reference must be available for this edit. |
| 2400.SV101-6 must be valid procedure modifier on the date in 2400.DTP03 when DTP01 = "472" |  |
| If 2400.SV101-6 = "90" 2400 .REF with REF01 = "F4" must be present. |  |
| 2400.SV101-7 must contain at least one non space character. | Valid CMS Proprietary table of Procedure Codes that require a description must be available for this edit. |
| 2400.SV101-7 must be present. when 2400. SV101-2 is present on the table of procedure codes that require a description. |  |
| 2400.SV101-7 must be 1-80 characters. |  |



| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| If 2400.SV103 = "MJ", 2400.SV104 must be 1 to 3 digits with no decimal. | 12/16: Medicare specific limitation. Companion Guide Note needed. |
| $\begin{aligned} & \text { If } 2400 . \text { SV103 = "UN", } 2400 . \text { SV104 must be } \\ & >0 \text { and <= 999.9 } \end{aligned}$ | 02/17: Medicare specific limitation. Companion Guide Note needed. |
| If 2400. SV103 $=$ "UN", 2400. SV104 must be $>0$ and $<=9,999.9$. | 01/08: Placeholder edit: This edit will replace the edit above after the MCS field expansion. |
| If 2400. SV103 = "MJ", 2400. SV104 must be $>0$ and < $=9.999$. $>0$ and <= 9,999. | 03/31: Placeholder edit: This edit will replace the edit above after the MCS field expansion. |
| When 2400.SV101-2 is associated with a proc option of "DR" or "PP", 2400.SV104 must be = "1" or "2". |  |
| When 2400.SV101-2 is associated with a proc option of "DR" or "PP" and 2400.SV104 = "2", one of 2400.SV101-3, SV101-4, SV101-5 or SV101-6 must = "RT" and one must = "LT". |  |
| 2400.SV105 must be a valid Place of Service Code on the date in GS04. | Valid Place of Service reference must be available for this edit. <br> OR <br> Valid CMS Proprietary Place of Service Code to Procedure Code reference must be available for this edit |
| Must not be present. |  |
|  | Pre-ICD-10 CMS will only accept pointers 1 through 8. If a claim uses pointers 9 through 12, the claim will be rejected. When ICD-10 is accepted, CMS will accept pointers 1 through 12 03/31: Companion Guide note needed. |
| 2400.SV107-1 must be present. |  |
| 2400.SV107-1 must be >= 1 and $<=12$. | ICD-9 Only period. 04/07: Revised edit. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2400.SV107-1 must be >= 1 and <= 12. | ICD-10 Only period. <br> Valid ICD-10-CM Diagnosis Code reference must be available for this edit. |
| There must be a corresponding diagnosis code in 2300 . HI where $\mathrm{HIO1}-1$ is "ABK" or " $B K$ " for the pointer value entered. <br> Example 1: if 2400.SV107-1 = 3, when 2300.HIO1-1 with "BK" or "ABK", 2300.HIO32 must be poplulated. <br> Example 2: if 2400.SV107-1 = 5, when 2300.HI01-1 with "BK" or "ABK", 2300.HI052 must be poplulated. |  |
| If SV107-1 is present, 2400.SV107-2 may be present. |  |
| 2400. SV107-2 must be >= 1 and $<=12$. | ICD-9 Only period. 04/07: Revised edit. |
| 2400.SV107-2 must be >= 1 and <= 12. | ICD-10 Only period. <br> Valid ICD-10-CM Diagnosis Code reference must be available for this edit. |
| There must be a corresponding diagnosis code in 2300 . HI where HIO1-1 is "ABK" or "BK" for the pointer value entered. <br> Example 1: if 2400. SV107-1 = 3, when 2300.HIO1-1 with "BK" or "ABK", 2300.HIO32 must be poplulated. <br> Example 2: if 2400.SV107-1 = 5, when 2300.HIO1-1 with "BK" or "ABK", 2300.HI052 must be poplulated. |  |
| If SV107-2 is present, 2400.SV107-3 may be present. |  |
| 2400.SV107-3 must be >= 1 and $<=12$. | ICD-9 Only period. 04/07: Revised edit. |
| 2400.SV107-3 must be >= 1 and $<=12$. | ICD-10 Only period. <br> Valid ICD-10-CM Diagnosis Code reference must be available for this edit. |
| There must be a corresponding diagnosis code in 2300 . HI where HIO1-1 is "ABK" or "BK" for the pointer value entered. <br> Example 1: if 2400.SV107-1 = 3, when 2300.HI01-1 with "BK" or "ABK", 2300.HIO3- <br> 2 must be poplulated. <br> Example 2: if 2400.SV107-1 = 5, when 2300.HI01-1 with "BK" or "ABK", 2300.HI052 must be poplulated. |  |
| If SV107-3 is present, 2400.SV107-4 may be present. |  |


| Proposed 5010 Edits <br> CEDI <br> 2400.SV107-4 must be >= 1 and <= 12. | Misc. Notes |
| :--- | :--- |
| ICD-9 Only period. |  |
| O4/07: Revised edit. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2400.Sv502 must be present. |  |
| $2400 . S V 502$ must be "DA". |  |
| 2400.SV503 must be present. |  |
| 2400.SV503 must be numeric. |  |
| 2400.SV503 must be $1-3$ digits. | 03/31: Medicare specific limitation. Companion Guide Note needed. |
| $2400 . \mathrm{Sv} 503$ must be > 0 . |  |
| 2400. Sv504 must be present. |  |
| 2400.SV504 must be numeric. |  |
| 2400.SV504 is limited to 0,1 or 2 decimal positions. |  |
| 2400.SV504 must be <= 99,999.99. | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed. |
| 2400. SV504 must be > $=0$. |  |
| 2400.SV505 must be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 244.SV505 must be numeric. |  |
| $2400 . \mathrm{SV} 505$ is limited to 0,1 or 2 decimal positions. |  |
| 2400.SV505 must be <= 99,999.99. | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed |
| $2400 . \mathrm{SV} 505$ must be >= 0 . |  |
| 2400. Sv506 must be present. |  |
| $2400 . \mathrm{SV} 506$ must be valid values. |  |
| Must not be present. |  |
| Only ten iterations of 2400.PWK are allowed. |  |
| 2400.PWK01 must be present. |  |
| 2400.PWK01 must be valid values. |  |
| 2400.PWK02 must be present. |  |
| 2400. PWK02 must be valid values. |  |
| Must not be present. |  |
| Must not be present. |  |
| When 2400.PWK05 is present, 2400.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |  |
| 2400.PWK05 must be "AC". |  |
| When 2400.PWK06 is present, 2400.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |  |





| Proposed 5010 Edits | Misc. Notes |
| :---: | :---: |
|  | 12:23 Regardless of qualifier, only 3 iterations of this segment are allowed in this position. |
| Only 3 iterations of 2400.CRC with CRC01 = "09" are allowed. | 02/19: The "07" and "70" qualifiers are not accepted on Medicare DME claims. |
|  | 12:23 Regardless of qualifier, only 3 iterations of this segment are allowed in this position. |
| No iterations of 2400.CRC with CRC01 = "07" are allowed. | 02/19: Segments with the "07" qualifier are not accepted by Medicare for DME. |
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|  |  |
|  | 12:23 Regardless of qualifier, only 3 iterations of this segment are allowed in this position. 02/19: Segments with the "70" qualifier are not accepted by Medicare for DME. |
|  | 02/19: Segments with the "70" qualifier are not accepted by Medicare for DME. |
| No iterations of 2400.CRC with CRC01 = "70" are allowed. | 02/19: Segments with the "70" qualifier are not accepted by Medicare for DME. |
|  |  |
|  |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
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|  |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
|  |  |
| Only 3 iterations of 2400.CRC with CRC01 $=$ "09" are allowed. | 12:23 Regardless of qualifier, only 3 iterations of this segment are allowed in this position. |
| If 2400. CR 3 is present, one iteration of 2400.CRC with CRC01 = "09" must be bresent. |  |
| 2400.CRC01 must be present. |  |
| 2400.CRC01 must be "09". |  |
| 2400.CRC02 must be present. |  |
| 2400.CRC02 must be valid values. |  |
| 2400.CRC03 must be present. |  |
| $2400 . \mathrm{CRC03}$ must be valid values. |  |
| If 2400. CRC04 is not "38", 2400.CRC03 |  |
| If 2400. CRC03 is present, 2400. CRC04 may be present. |  |
| $2400 . C R C 04$ must be valid values. |  |
| If 2400. CRC03 is not " 38 ", 2400.CRC04 must be " 38 ". |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2400.DTP with DTP01 $=$ " 472 " must be present. |  |
| Only one iteration of 2400.DTP with DTP01 = "472" is allowed. |  |
| 2400.DTP01 must be present. |  |
| 2400.DTP01 must be "472". |  |


| Proposed 5010 Edits CEDI CEDI | Misc. Notes |
| :---: | :---: |
| 2400.DTP02 must be present. |  |
| 2400. DTP02 must be valid values. |  |
| 2400.DTP03 must be present. |  |
| If 2400.DTP02 is D8, then 2400.DTP03 must be a valid date in the format of CCYYMMDD |  |
| If 2400.DTP02 is RD8, then 2400.DTP03 must be a valid date in the format of CCYYMMDD-CCYYMMDD. |  |
| If 2400.DTP02 is D8,2400.DTP03 must not be a future date. |  |
| If 2400.DTP02 is RD8, the first date listed in 2400.DTP03 must not be a future date. |  |
| If 2400.DTP02 is RD8, the first date listed in 2400.DTP03 must be a date prior to the second date listed in 2400.DTP03. |  |
| Reject the claim if 2400. DTP02=D8 or 2400.DTP02 $=$ RD8 and the CCYYMM portion of the first date and the CCYYMM portion of the second date are equal and 2400.SV101-3, SV101-4, SV101-5 or SV101$6=$ "RR" and 2400. SV104 is not $=$ " 1 ". |  |
| When 2400.DTP02 = RD8 and the second date is a future date, one of the following proc options must exist for the procedure: "IS", "PA", "PE", "PI", "PK", "PL", "PP", "PS" or"PX". |  |
| Reject the claim if 2400.DTP02 = "RD8" and the first date is not = the second date and SV101-2 is not "E0935" or "E0936", \& the proc option "GL" or "IS" does NOT exist, \& the proc option "DF", "DI", "DR", "LP", "OC", "OG", "OL" or "OP does exist. |  |
| Only one iteration of 2400.DTP with DTP01 = "471" is allowed. |  |
| 2400.DTP01 must be present. |  |
| 2400.DTP01 must be "471". |  |
| 2400.DTP02 must be present. |  |
| 2400.DTP02 must be "D8". |  |
| 2400.DTP03 must be a valid date in the format of CCYYMMDD. |  |
| 2400.DTP03 must not be a future date. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
|  | 06/04: Companion Guide Note needed. |
| One iteration of 2400.DTP with DTP01 = "607" must be present when 2400.CR301 = "R" or "S". |  |
| 2400.DTP01 must be present. |  |
| 2400.DTP01 must be "607". |  |
| 2400.DTP02 must be present. |  |
| 2400.DTP02 must be "D8". |  |
| 2400.DTP03 must be a valid date in the format of CCYYMMDD. |  |
| 2400.DTP03 must not be a future date. |  |
|  | 06/04: Companion Guide Note needed. |
| If 2400. CR3 is present, 2400 .DTP with DTP01 = "463" must be present. |  |
| Only one iteration of 2400.DTP with DTP01 = "463" is allowed. |  |
| 2400.DTP01 must be present. |  |
| 2400. DTP01 must be "463". |  |
| 2400.DTP02 must be present. |  |
| 2400.DTP02 must be "D8". |  |
| 2400.DTP03 must be a valid date in the format of CCYYMMDD. |  |
| 2400.DTP03 must not be a future date. |  |
|  | 06/04: Companion Guide Note needed. |
| 2400.DTP with DTP01 = "461" must be present when 2400.CRC01 = "09" and CRC03 or CRC04 = "38" and CRC02 = " Y ". |  |
| Only one iteration of 2400.DTP with DTP01 = "461" is allowed. |  |
| 2400.DTP01 must be present. |  |
| 2400.DTP01 must be "461". |  |
| 2400.DTP02 must be present. |  |
| 2400.DTP02 must be "D8". |  |
| 2400.DTP03 must be a valid date in the format of CCYYMMDD. |  |




| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
|  |  |
|  | Misc. Notes |
| Must not be present. |  |
| Must not be present. |  |
| Only 5 iterations of 2400.DTP are allowed. |  |
| 2400.MEA01 must be present. |  |
| 2400.MEA01 must be valid values. |  |
| 2400.MEA02 must be present. |  |
| 2400.MEA02 must be valid values. |  |
| 2400.MEA03 must be present. |  |
| 2400.MEA03 must be numeric. |  |
| 2400.MEA03 must be >= 0 and <= 99.9. |  |
|  | Medicare does not support post-adjudicated claim |
| processing (a non-HIPAA mandated use). |  |
|  |  |
| Companion Guide Note needed. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
|  |  |


| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
| Only 1 iteration of 2400.REF with REF01 <br> = "9B" is allowed. | Pass through, syntax only. |
| 2400.REF01 must be present. |  |
| 2400.REF01 must be "9B". |  |
| 2400.REF02 must be present. |  |
|  |  |
| 2400.REF02 must be 1-50 characters. |  |
|  |  |
|  |  |
| 2400.REF02 must be populated with |  |
| accepted AN characters. |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Only 5 iterations of 2400.REF with REF01 |  |
| "G1" are allowed. |  |



| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
|  | Misc. Notes |
|  |  |
| 2400.REF02 must be unique within a single <br> iteration of 2300.CLM01. |  |
| Must not be present. |  |
| Must not be present. |  |
| Only one iteration of 2400.REF with <br> REF01 = "EW" is allowed. |  |
| 2400.REF01 must be present. |  |
| 2400.REF01 must be "EW". |  |
| 2400.REF02 must be present. |  |
| 2400.REF02 must contain at least one non- <br> space character. |  |
| 2400.REF02 must be 1-50 characters. |  |
|  |  |
| REF01 = "X4" is allowed. |  |
| 2400.REF02 must be present. |  |
| 2400.REF01 must be present. |  |
| 2400.REF02 must contain at least one non- |  |
| space character. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2400.REF02 must be populated with MQSA reference must be available for this |  |
| accepted AN characters. |  |
|  |  |



| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2400.REF02 must be present. |  |
| 2400.REF02 must contain at least one non- |  |
| 2400.REF02 must be 1-50 characters. |  |
|  |  |
| 2400 REF02 must be populated with accepted $A N$ characters. |  |
|  |  |
| Must not be present. |  |
| Must not be present. |  |
| Only 5 iterations of 2400.REF with REF01 = "9F" are allowed. |  |
| 2400.REF01 must be present. |  |
| 2400.REF01 must be "9F". |  |
| 2400.REF02 must be present. |  |
| 2400.REF02 must contain at least one nonspace character. |  |
| 2400.REF02 must be 1-50 characters. |  |
|  |  |
| 2400.REF02 must be populated with accepted AN characters. |  |
|  |  |
| Must not be present. |  |
|  |  |
| 2400.REF04-1 must be "2U". |  |
| $\begin{aligned} & \text { If } 2400 . \text { REF04-1 is present, } 2400 . \text { REF04-2 } \\ & \text { must be present. } \end{aligned}$ |  |
| 2400.REF04-2 must $=2330 \mathrm{~B}$. Nm 109 |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |


| Proposed 5010 Edits | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| Only one iteration of 2400.AMT with AMT01 = "T" is allowed. | 06/04: Pass through, syntax only |
| 2400.AMT01 must be present. |  |
| 2400.AMT01 must be "T". |  |
| 2400.AMT02 must be present. |  |
| 2400.AMT02 must be numeric. |  |
| 2400.AMT02 Must be <= 99,999.99. |  |
|  |  |
| 2400.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| Must not be present. |  |
| Only one iteration of 2400.AMT with АМT01 = "F4" is allowed. | 06/04: Pass through, syntax only |
| 2400.AMT01 must be present. |  |
| 2400.AMT01 must be "F4". |  |
| 2400.AMT02 must be present. |  |
| 2400.AMT02 must be numeric. |  |
| 2400.AMT02 must be $>0$. |  |
| 2400.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| Must not be present. |  |
| Only ten iterations of 2400.K3 are allowed. |  |
| 2400. K301 must be present. |  |
| $2400 . \mathrm{K} 301$ must be 1-80 charcacters |  |
|  |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2400.K301 must be populated with accepted AN characters. |  |
| 2400.K301 must contain at least one nonspace character. |  |
| Must not be present. |  |
| Must not be present. |  |
| 2400.NTE with NTE01 = "ADD" or "DCP" must be present when 2400 .SV101-2 is associated with a proc option of " JK ". | CEDI only <br> Proprietary Procedure Code/Option file reference must be available for this edit. |
| Only one iteration of 2400 .NTE with NTE01 = "ADD" or "DCP"is allowed. |  |
| 2400.NTE01 must be present. |  |
| 2400. NTE01 must be valid values. |  |
| 2400.NTE02 must be present. |  |
| 2400.NTEO2 must contain at least one nonspace character. |  |
| 2400. NTE02 must be 1 - 80 characters. |  |
| 2400.NTEO2 must be populated with accepted AN characters. |  |
| Only one iteration of 2400.NTE with NTE01 = "TPO" is allowed. | Pass through, syntax only. |
| 2400.NTE01 must be present. |  |
| 2400.NTE01 must be "TPO". |  |
| 2400.NTE02 must be present. |  |
| 2400.NTE02 must contain at least one non- |  |
| 2400.NTE02 must be 1-80 characters. |  |
|  |  |





| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not not be be presesent. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2410. |  |
| present. is present, only |  |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
| 2410.CTP04 must be $>0$ and <br> <9,999,999.999. | O3/31: Medicare specific limitation. <br> Companion Guide Note needed. |
|  |  |
| 2410. CTP04 is limited to 3 decimal positions. | O3/31: Medicare specific linitation. <br> Companion Guide Note needed. |
|  |  |
| 2410. CTP05-1 must be present. |  |
| 2410.CTP05-1 must be valid values. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| If 2410. LIN is present, 2410.REF may be present. | 06/04: Pass-through, syntax only. |
| Only one iteration of 2410.REF is allowed. |  |
| If SV101-3, SV101-4,SV101-5 or SV101-6 are = "J1", 2410.REF with REF01 = "XZ" must be present. |  |
| 2410.REF01 must be present. |  |
| 2410. REF01 must be valid values. |  |
| 2410.REF02 must be present. |  |
| 2410.REFO2 must be at least one non-space character |  |
| 2410.REF02 must be 1-50 characters. |  |
|  |  |
| 2410.REF02 must be populated with accepted AN characters. |  |
| Must not be present. |  |
| Must not be present. |  |
| Only one iteration of 2420A.NM1 is allowed. |  |
| 2420A.NM101 must be present. |  |
| 2420A.NM101 must be "82". |  |
| 2420A.NM 102 must be present. |  |
| 2420A.NM102 must be valid values. |  |
| 2420A.NM 103 must be present. |  |
| 2420A.NM103 must contain at least one nonspace character. |  |
| 2420A.NM103 must be 1-60 characters. |  |
|  |  |
| 2420A.NM103 must be populated with accepted AN characters. |  |


| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
|  | Misc. Notes |
| If 2420A.NM102 is "2", 2420A.NM104 must <br> not be present. |  |
| 2420A.NM104 must contain at least one non- <br> space character. |  |
| 2420A.NM104 must be 1 - 35 characters. |  |
|  |  |
|  |  |
| 2420A.NM104 must be populated with <br> accepted AN characters. |  |
|  |  |
| 2420A.NM107 must be populated with |  |
| accepted AN characters. |  |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
|  |  |
|  | Trailbazer Only <br> 01/20: Companion Guide Note needed. |
|  |  |
|  |  |
| Everyone butTraiblazer. |  |
| 01/20: Companion Guide Note needed. |  |


| Proposed 5010 Edits <br> CEDI <br> 2420A.PRV03 must be valid Taxonomy <br> Code <br> Must not be present. <br> Valid Provider Taxonomy Code reference must be <br> available for this edit. |  |
| :--- | :--- |
| Must not be present. |  |
| Must not be present. |  |
|  | Only Trailblazer. |
| 01/20: Companion Guide Note needed. |  |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
|  |  |
| If 2400.PS1 is present, 2420B.NM1 with |  |
| NM101 = "QB" must be present. |  |
| 2420B.NM108 must be present. |  |
| Only one iteration of 2420B.NM1 is but Trailbaazer |  |
| allowed. |  |
| 2420B.NM101 must be present. |  |
| 2420B.NM101 must be "QB". |  |
| 2420B.NM102 must be present. |  |
| 2420B.NM102 must be valid values. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
|  |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2420B.NM108 must be "XX". |  |
| If 2420B.NM108 is present, 2420B.NM109 must be present. |  |
| 2420B.NM109 must be valid according to the NPI algorithm. |  |
| The first position of 2420B.NM109 must be a "1". |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2420B.NM1 is present and 2420B.NM109 is not present, 2420B.REF with REF01 = "1G" may be present. | Traillazer Only |
| Only 1 iteration of 2420B.REF with REF01 $=$ " 1 G " is allowed. | Traillazer Only |
| Must not be present. | Everyone but Traillazer |
| 2420B.REF01 must be present |  |
| 2420B.REF01 must be "1G". | Traillazer Only |
| 2420B.REF02 must be present. |  |
| 2420B.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| Must not be present. |  |
| Must not be present. |  |
| One one iteration of 2420C.NM1 is allowed. |  |
| 2420C.NM101 must be present. |  |
| 2420C.NM101 must be "77". |  |
| 2420C.NM102 must be present. |  |





| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2420D.NM104 must be 1-35 characters. |  |
|  |  |
| 2420D.NM104 must be populated with |  |
| 2420D.NM105 must contain at least one nonspace character. |  |
| 2420D. NM105 must be 1-25 characters. |  |
|  |  |
| 2420D.NM105 must be populated with accepted AN characters. |  |
| Must not be present. |  |
| 2420D.NM107 must contain at least one nonspace character. |  |
| 24200.NM107 must be 1-10 characters. |  |
|  |  |
| 2420D.NM107 must be populated with |  |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2420D.NM108 must be present. | Everyone but Trailblazer <br> 01/20: Companion Guide Note needed. |
| 2420D.NM108 must be "XX". |  |
| If 2420D.NM108 is present, 2420D.NM109 must be present. |  |
| 2420D.NM109 must be valid according to the NPI algorithm. |  |
| The first position of 2420D.NM109 must be a "1". |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2420D.NM1 is present and 2420D.NM109 is not present, 2420D.REF with REF01 = "0B", "1G" or "LU" may be oresent. | Trailblazer Only <br> 11/20: G2 is not valid for Medicare. <br> 01/20: Companion Guide Note needed. |
| Only 3 iterations of 2420D.REF with REF01 = "0B", "1G" or "LU" are allowed | Trailblazer Only |
| Must not be present. | Everyone but Trailblazer |
| 2420D.REF01 must be present. | Trailblazer Only |
| 2420D.REF01 must be valid values. | Trailblazer Only |
| 2420D.REF02 must be present. | Trailblazer Only |
| When 2420D.REF01 = "1G", 2420D.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). | Trailblazer Only |
| When 2420D.REF01 = "OB" or "LU", 2420D.REF02 must contain at least one nonspace character. | Trailblazer Only |
| When 2420D.REF01 = "0B" or "LU", <br> 2420D.REF02 must be 1-50 characters. | Trailblazer Only |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
|  |  |
|  | Traiblazer Only |
| When 2420D.REF01 $==$ "OB" or "LU", <br> 24200.REF20 must be populated with | Traiblazer Only |
| accepted AN characters. |  |



| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| 2420E.NM108 must be present. | Everyone but Trailblazer 01/20: Companion Guide Note needed. |
| 2420E.NM108 must be "XX". |  |
| If 2420E.NM108 is present, 2420E.NM109 must be present. |  |
| 2420E.NM109 must be valid according to the NPI algorithm. |  |
| The first position of $2420 \mathrm{E} . \mathrm{NM} 109$ must be a "1". |  |
| If any SV101-3 through SV101-6 (procedure code modifier) not = "EY", 2310A NM109 must be valid on PECOS file (match include NPI +1 st four characters of last name +1 st |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2420E.NM1 is present, $2420 \mathrm{E} . \mathrm{N} 3$ may be present. |  |
| Only one iteration of 2420E.N3 is allowed. |  |
| 2420E.N301 must be present. |  |
| 2420E.N301 must contain at least one non- space character. |  |
| Location.N301 must be 1-55 characters. |  |
|  |  |
| 2420E.N301 must be populated with accepted AN characters. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
|  |  |
| 2420E.N302 must contain at least one nonspace character. |  |
| 2420E.N302 must be 1-55 characters. |  |
|  |  |
| 2420E.N302 must be populated with accepted AN characters. |  |
| If 2420E.NM1 is present, 2420E.N4 may be present. |  |
| Only one iteration of 2420E.N4 is allowed. |  |
| 2420E.N401 must be present. |  |
| 2420E.N401 must contain at least two nonspace characters. |  |
| 2420E.N401 must be 2-30 characters. |  |
|  |  |
| 2420E.N401 must be populated with accepted AN characters. |  |
| If 2420E.N404 is not present, 2420E.N402 must be present. |  |
| 2420E.N402 must be a valid State Code. | Valid State Code reference must be available for this edit. |
| If 2420E.N404 is not present, 2420E.N403 must be present |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2420E.N403 must be a valid Zip Code. | Valid Zip Code reference must be available for this edit. |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2420E.NM1 is present and 2420E.NM109 is not present, 2420E.REF may be present. | Trailblazer Only |
| Only 1 iteration of 2420E.REF are allowed. | Trailblazer Only |
| Must not be present. | Everyone but Trailblazer |
| 2420E.REF01 must be "1G". | Trailblazer Only <br> 11/20: G2 is not valid for Medicare. 01/20: Companion Guide Note needed. <br> 1/06: 0 B and G 2 are not valid for Medicare. |
| 2420E.REF02 must be present. |  |
| 2420E.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and $N$ is a numeric digit). |  |
| Must not be present. |  |
| Must not be present. | Only used with G2. |
| If 2420E.NM1 is present, 2420E.PER may be present. |  |
| If 2400. CR 3 is present, 2420E.PER must be present. |  |
| One iteration of 2420E.PER is allowed. |  |
| 2420E.PER01 must be present. |  |
| 2420E.PER01 must be "IC". |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2420E.PER02 must be present. |  |
| 2420E.PERO2 must contain at least one nonspace character. |  |
| 2420E.PER02 must be 1-60 characters. |  |
|  |  |
| 2420E.PERO2 must be populated with accepted AN characters. |  |
|  |  |
| 2420E.PER03 must be present. |  |
| 2420 E.PER03 must be valid values. |  |
| 2420E.PER04 must be present. |  |
| 2420E.PER04 must contain at least one nonspace character. |  |
| 2420 E. PER04 must be 1-256 characters. |  |
|  |  |
| 2420E.PER04 must be populated with |  |
|  |  |
| 2420 E . PER05 must be valid values. |  |
| If 2420E.PER05 is "EX", 2420E.PER03 must be "TE". |  |
| If 2420E.PER06 is present, 2420E.PER05 |  |
| 2420E.PER06 must contain at least one non- |  |
| 2420E.PER06 must be 1-256 characters. |  |
|  |  |
| 2420E.PER06 must be populated with accepted AN characters. |  |


| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
|  | Misc. Notes |
|  |  |
| If 2420E.PER05 is present, 2420E.PER07 <br> may be present. |  |
| 2420E.PER07 must be valid values. |  |
| If 2420E.PER07 is "EX", 2420E.PER05 must <br> be "TE". |  |
| If 2420E.PER08 is present, 2420E.PER07 <br> must be present. |  |
| 2420E.PER80 must contain at least one non- <br> space character. |  |
| 2420E.PER08 must be 1-256 characters. |  |
|  |  |
| 2420F.NM103 must be populated with <br> accepted AN characters. |  |
| 2420E.PER08 must be populated with <br> accepted AN characters. |  |
|  |  |
| Two iterations of this loop are allowed. |  |
| Only one iteration of 2420F.NM1 is |  |
| allowed. |  |
| 2420F.NM101 must be present. |  |
| For the first iteration of the 2420F loop, <br> 2420F.NM101 must be "DN". |  |
| For the second iteration of the 2420F loop, |  |
| 2420F.NM101 must be "P3". |  |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
|  |  |
| 2420F.NM104 must contain at least one non- <br> space character. |  |
| 2420F.NM104 must be 1 - 35 characters. |  |
|  |  |
| 2420F.NM104 must be populated with <br> accepted AN characters. |  |
|  |  |
| 2420F.NM107 must be populated with |  |
| accepted AN characters. |  |
| 2420F.NM105 must contain at least one non- |  |
| 2420Fe character. |  |
|  |  |
| Mus105 must be 1 - 25 characters. |  |
| 2420F.NM107 must contain at least one non- <br> space character. |  |
| 2420F.NM107 must be 1 - 10 characters. |  |
|  |  |
| 2420F.NM105 must be populated with <br> accepted AN characters. |  |
|  |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
|  | Only Trailblazer. <br> 01/20: Companion Guide Note needed. |
| 2420F.NM108 must be present. | Everyone but Trailblazer <br> 01/20: Companion Guide Note needed. |
| 2420F.NM108 must be "XX". |  |
| 2420F.NM109 must be valid according to the NPI algorithm. |  |
| The first position of 2420F.NM109 must be a "1". |  |
| 2420F.NM109 must not $=$ 2310A.NM109. |  |
| 2420F. NM 109 must not $=2310 \mathrm{~F} . \mathrm{NM} 109$. |  |
| If any SV101-3 through SV101-6 (procedure code modifier) not = "EY", 2420F NM109 must be valid on PECOS file (match include NPI +1 st four characters of last name +1 st character of first name). |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2420F.NM1 is present and 2420F.NM109 is not present, 2420F.REF may be present. | Trailblazer Only <br> Companion Guide Note needed. |
| Only 1 iterations of 2420F.REF is allowed | Trailblazer Only Companion Guide Note needed. |
| 2420F.REF must not be present. | Everyone butTrailblazer. <br> Companion Guide Note needed. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2420F.REF01 must be present. |  |
| 2420E.REF01 must be "1G". | 11/20: G2 is not valid for Medicare. 01/20: Companion Guide Note needed. 1/06: 0 B and G 2 are not valid for Medicare. |
| 2420F.REF02 must be present. |  |
| 2420F.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| Must not be present. |  |
| Must not be present. |  |
| Only one iteration of 2420G.NM1 is allowed. |  |
| 2420G.NM101 must be present. |  |
| 2420G.NM101 must be "PW". |  |
| 2420G.NM102 must be present. |  |
| 2420G.NM102 must be "2". |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If 2420G.NM1 is present, 2420G.N3 must be present. |  |
| Only one iteration of 2420G.N3 is allowed |  |
| 2420G.N301 must be present. |  |
| 2420G.N301 must contain at least one nonspace character. |  |
| 2420G.N301 must be 1-55 characters. |  |

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Professional Edits


| Proposed 5010 Edits <br> CEDI <br>  | Misc. Notes |
| :--- | :--- |
|  |  |
| 2420G.N402 must be a valid State Code. | Valid State Code reference must be available for <br> this edit. |
| If 2420G..N404 is not present, 2420G.N402 |  |
| mue present. |  |
| 2420G.N403 must be a valid Zip code. | Valid Zip code reference must be available for <br> this edit. |
| must be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| Must not be present. |  |
| If $\mathbf{2 4 2 0 H}$.NM1 is present, $\mathbf{2 4 2 0 H}$.N3 must be present. |  |
| Only one iteration of $2420 \mathrm{H} . \mathrm{N} 3$ is allowed. |  |
| 2420H.N301 must be present. |  |
| 2420H.N301 must contain at least one nonspace character. |  |
| 2420H.N301 must be 1-55 characters. |  |
|  |  |
| 2420H.N301 must be populated with accepted AN characters. |  |
|  |  |
| 2420H.N302 must contain at least one nonspace character. |  |
| 2420H.N302 must be 1-55 characters. |  |
|  |  |
| 2420H.N302 must be populated with accepted AN characters. |  |


| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
|  | Misc. Notes |
| If 2420H.NM1 is present, 2420H.N4 must <br> be present. |  |
| Only one iteration of 2420H.N4 is allowed. |  |
| 2420H.N401 must be present. |  |
| 2420H.N401 must contain at least two non- <br> space characters. |  |
| 2420H.N401 must be 2-30 characters. |  |
| 2420H.N403 must be a valid Zip Code. |  |
| Must not be present. |  |
| Valid Zip Codit. |  |
| If 2420H.N404 is not present, 2420H.N403 must be available for |  |
| must be present. |  |
| 2420H.N402 must be a valid State Code. |  |
| Valid State Code reference must be available for |  |
| this edit. |  |
| accepted AN characters. |  |
| If 2420H.N404 is not present, 2420H.N402 |  |
| must be present. |  |
|  |  |

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Professional Edits

| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
| Must not be present. |  |
| Must not be present. |  |
| 15 iterations of this loop are allowed. |  |
| Only 1 iteration of 2430.SVD is allowed. |  |
| 2430.SVD01 must be present. |  |
| 2430.SVD01 must = 2330B.NM109 (for the |  |
| same payer). |  |
| 2430.SVD02 is limited to 0, 1 or 2 decimal |  |
| positions. |  |
| 2430.SVD02 must be present. |  |
| 2430. SVD02 must be numeric. |  |
|  |  |
| 2430.SVD02 must be <= 99,999.99. |  |
|  |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
|  |  |
| 2430.SVD03-1 must be present. |  |
| 2430.SVD03-1 must be "HC". | 01/08: Medicare only accepts "HC". Claims with "ER", "IV" or "WK" will be rejected. 01/20: Companion Guide Note needed. |
| 2430.SVD03-2 must be present. |  |
| When 2430.SVD03-1 = "HC", 2430.SVD03-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = "472". | Valid CMS Proprietary HCPCS reference must be available for this edit. |
| When 2430.SVD03-1 = "HC", 2430.SVD03-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 $=$ " 472 ". <br> OR <br> When 2430.SVD03-1 = "HC", 2430.SVD03-2 must be a valid HCPCS Code from the DME subset on the date in 2400.DTP03 when DTP01 = "472".M2289 | 12/16: Fallback edits: used only if primary edit above is determined to be unworkable. Review this before finalizing. <br> Valid HCPCS reference must be available for this edit (full external code list). |
| 2430.SVD03-3 must be valid procedure modifier. | Valid Procedure Code Modifier reference must be available for this edit. |
| 2430.SVD03-4 is present, 2430.SVD03-3 must be present. |  |
| 2430.SVD03-4 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| 2430.SVDO3-5 is present, 2430. SVD03-4 must be present. |  |
| 2430.SVD03-5 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit |


| Proposed 5010 Edits <br> CEDI | Misc. Notes |
| :--- | :--- |
| 2430.SVD03-6 is present, 2430.SVD03-5 <br> must be present. |  |
| 2430.sVD03-6 must be valid procedure <br> modifier. | Valid Procedure Code Modlfier reference must <br> be available for this edit. |
| 2430.sVD03-7 must contain at least one non <br> space character. |  |
| 2430.SVD03-7 must be 1-80 characters. |  |
| Must not be present. |  |
| 2430.SVD03-7 must be populated with |  |
| accepted AN characters. |  |
| Must not be present. |  |
|  |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2430.SVD05 must be >= 0 and << 999.9 . | 01/08: Medicare size limit 999.9. <br> 02/17: Companion Guide note needed. |
| 2430.SVD05 must be >= 0 and <= 9,999.9. | 01/08: Placeholder edit: Medicare size limit 9999.9. <br> This edit will replace the edit above after the MCS field expansion. |
| 2430.SVD05 must be an integer (whole number). | Companion Guide note needed. |
| 2430. SVD06 must be numeric. |  |
| 2430. SVD06 must be a integer (no |  |
| 2430. SVD06 must 1-6 digits. | Medicare business edit Companion quide item |
| If 2430.SVD is present, 2430.CAS may be present. |  |
| Only 5 iterations of 2430.CAS are allowed. |  |
| 2430.CAS01 must be present. |  |
| $2430 . \mathrm{CAS} 01$ must be valid values. |  |
| If 2430.CAS01 = "CR" then 2430.DTP with DTP01 = "573" must be prior to 01/01/2012. | 02/10: 04/01/2010 is the date the Final Rule mandates the use of 5010 . After that date, this code (which was allowed in 4010) is not a compliant code. |
| 2430.CAS02 must be present. |  |
| 2430.CAS02 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| 2430.CAS03 must be present. |  |
| $2430 . C A S 03$ must be numeric. |  |
| 2430. CAS03 must not $=0$. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2430.CAS03 is limited to 0,1 or 2 decimal positions. |  |
| $\begin{aligned} & \text { 2430.CASO3 must be >=-99,999.99 and } \\ & <=99,999.99 . \end{aligned}$ | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed. |
| 2320.CAS04 must be 1-15 digits. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| $2430 . C A S 04$ must not $=0$. |  |
| If 2430.CAS02 is present, 2430.CAS05 may be present. |  |
| 2430.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| If 2430.CAS05 is present, 2430.CAS06 must be present. |  |
| 2430.CAS06 must be numeric. |  |
| $2430 . C A S 06$ must not $=0$. |  |
| 2430.CAS06 is limited to 0,1 or 2 decimal positions. |  |
| 2430.CAS06 must be >=-99,999.99. and <= 99,999.99. | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed. |


| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
|  | Misc. Notes |
|  |  |
| If 2430.CAS05 is present, 2430.CAS07 may <br> be present. |  |
| 2320.CAS07 must be 1-15 digits. | 11/25: Medicare specific limitation. <br> 01/08: Not brought into Core System, so no <br> Medicare size limit is needed. |
|  |  |
| 2430.CAS07 must not $=0$. |  |
| 0. |  |
| If |  |
| If 2430.CAS05 is present, 2430.CAS08 may <br> be present. |  |
| be present. |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2320.CAS10 must be 1-15 digits. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| 2430. CAS10 must not $=0$. |  |
| If 2430.CAS08 is present, 2430.CAS11 may be present. |  |
| 2430.CAS011 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| If 2430.CAS11 is present, 2430.CAS12 mus be present. |  |
| 2430.CAS12 must be numeric. |  |
| 2430. CAS12 must not $=0$. |  |
| 2430.CAS 12 is limited to 0,1 or 2 decimal positions. |  |
| $\begin{aligned} & \text { 2430.CAS12 must be >= -99,999.99. and } \\ & <=99,999.99 . \end{aligned}$ | 11/25: Medicare specific limitation. <br> 01/20: Companion Guide Note needed. |
| If 2430.CAS11 is present, 2430.CAS13 may be present. |  |
| 2320.CAS13 must be 1-15 digits. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed. |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2430. CAS13 must not $=0$. |  |
| If 2430.CAS11 is present, 2430.CAS14 may be present. |  |
| 2430.CASO14 must be a valid Claim Adjustment Reason Code on the date in 2430. DTP03 when DTP01 = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| If 2430.CAS14 is present, 2430.CAS15 must be present. |  |
| 2430.CAS15 must be numeric. |  |
| 2430. CAS15 must not $=0$. |  |
| 2430.CAS15 is limited to 0,1 or 2 decimal positions. |  |
| $\begin{aligned} & \text { 2430.CAS15 must be }>=-99,999.99 \text {. and } \\ & <=99,999.99 \text {. } \end{aligned}$ | 11/25: Medicare specific limitation. 1/20: Companion Guide Note needed. |
| If 2430.CAS14 is present, 2430.CAS16 may be present. |  |
| 2320.CAS16 must be 1-15 digits. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| 2430. CAS16 must not $=0$. |  |
| If 2430.CAS14 is present, 2430.CAS17 may be present |  |


| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2430.CAS017 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| If 2430.CAS17 is present, 2430.CAS18 must be present. |  |
| 2430.CAS18 must be numeric. |  |
| 2430. CAS18 must not $=0$. |  |
| 2430.CAS18 is limited to 0,1 or 2 decima positions. |  |
| 2430.CAS15 must be $>=-99,999.99$. and $<=99,999.99$. | 11/25: Medicare specific limitation. 01/20: Companion Guide Note needed. |
| If 2430.CAS17 is present, 2430.CAS19 may be present. |  |
| 2320.CAS19 must be 1-15 digits. | 11/25: Medicare specific limitation. 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| 2430. CAS19 must not $=0$. |  |
| If 2430. SVD is present, 2430.DTP must be present. |  |
| Only one iteration of 2430.DTP is allowed. |  |
| 2430.DTP01 must be present. |  |
| 2430.DTP01 must be "573". |  |
| 2430.DTP02 must be present. |  |



| Proposed 5010 Edits CEDI | Misc. Notes |
| :---: | :---: |
| 2440.LQ02 must contain at least one nonspace character. |  |
| If 2440. LQ is present, 2440.FRM must be present. |  |
| If $2440 . \mathrm{LQ}=$ " 484.03 ", occurrences of 2440.FRM with FRM01 = ("1A" or "1B") and FRM01 = " 1 C " and FRM01 = "05" are required. |  |
| If $2440 . \mathrm{LQ}=$ " 484.03 " and 2440.FRM01 $=$ " 1 A " and FRM03 >= 56.0 and $<=59.0$, one occurrence of 2440.FRM with FRM01 = "07", "08" or "09" is required. |  |
| If 2440.LQ $=$ "484.03" and 2440.FRM01 = "1B" and FRM03 >= 89.0, one occurrence of 2440. FRM with $\operatorname{FRM} 01=$ " 07 ", "08" or "09" is required. |  |
| If 2400.PWK with PWK01 = "CT" is present, 2440.FRM must be present. |  |
| Only 99 iterations of 2440.FRM are allowed. |  |
| 2440.FRM01 must be present. |  |
| 2440.FRM01 must be valid for the value in 2440.LQ02. |  |
| If 2440.LQ02='484.03' and 2440.FRM01='05 <br> is present and the value in FRM03 is > ' 4 ', <br> an occurrence of FRM 01 with the value of <br> ' $6 A^{\prime}$ or ' $6 \mathrm{~B}^{\prime}$ is required. |  |
| If 2440.LQ02='484.03' and <br> 2440.FRM01='6A' or '6B', an occurrence of <br> FRM01 with the value of ' 6 C ' is required. |  |
| If 2440.LQ02='484.03' and <br> 2440.FRM01='6C', an occurrence of FRM01 <br> with the value of ' $6 A^{\prime}$ ' or ' $6 B^{\prime}$ ' is required. |  |
| 2440.FRM02 must be valid values. <br> If 2440.FRM03 and 2440.FRM04 and 2440. FRM05 are not present, 2440.FRM02 must be present. |  |
| If $2440 . \mathrm{LQ} 02=$ ' 484.03 ' and 2440 FRM with FRM01 = "04", "07", "08" or "09" is present, then 2440.FRM02 must be present. |  |



| Proposed 5010 Edits <br> CEDI |  |
| :--- | :--- |
|  | Misc. Notes |
| 2440.FRM04 must not be a future date. |  |
| If 2440.LQ02 = '484.03" and 2440 FRM with |  |
| FRM0.FRM02 and 2440.FRM03 and 2440. |  |
| FRM05 are not present, 2440.FRM04 must |  |
| be present. |  |$\quad$| must be present. |
| :--- |


| Proposed 5010 Edits <br> CEDI <br> GE01 must be present. <br> GE01 must be numeric. Notes |  |
| :--- | :--- |
| GE01 must equal the number of transaction <br> sets included in the functional group. |  |
| GE01 must be > 0. |  |
| GE02 must be present. |  |
| GE02 must $=$ GS06. |  |
| IEA must be present. | This error means there can't be more than one <br> IEA segment in this set, not that there can't be |
| Only one iteration of IEA is allowed. |  |
| IEA01 must be present. |  |
| IEA01 must be numeric. |  |
| IEA01 must equal the number of functional |  |
| groups included in the interchange. |  |
| IEA01 must be > 0. |  |


| Location | Change |
| :---: | :---: |
| GS04 | Corrected typo. |
| BHT | Added "999" in column J. |
| 2010AA.REF03 (1G) | Added "must not be present". |
| 2010AA.REF04 (1G) | Added "must not be present". |
| 2000B.SBR01 | Corrected location information. |
| 2010BA.N302 | Changed to match the corresponding institutional edit. |
| 2010BA.N407 | Changed to match the corresponding institutional edit. |
| 2010BA.REF01 (SY) | Changed the misc note for consistency with similar messages. |
| 2010BB.N302 | Changed to match the corresponding institutional edit. |
| 2300.PWK05 | Changed the edit to "If 05 is present, 02 must be =......". |
| 2300.PWK05 | Changed to match the corresponding institutional edit. |
| 2300.PWK06 | Changed the edit to "If 06 is present, 02 must be =......". |
| 2300.AMT02 (F5) | Removed the miscellaneous note. |
| 2300.CR106 | Removed the miscellaneous note. |
| 2310A.N407 | Changed to match the corresponding institutional edit. |
| 2400.PWK05 | Changed to match the corresponding institutional edit. |
| 2400.PWK06 | Changed to match the corresponding institutional edit. |
| 2400.DTP03 (472) | Changed to match the corresponding institutional edit. |
| GS06 | Added triad seperators. |
| 2000B.PAT08 | Added triad separators. |
| 2300.CLM02 | Added triad seperators. |
| 2300.CN102 | Added triad seperators. |
| 2300.AMT02 (F5) | Added triad seperators. |
| 2300.REF02 (9A) | Changed to match the corresponding institutional edits. |
| 2300.REF02 (9C) | Changed to match the corresponding institutional edits. |
| 2300.CR102 | Added triad seperators. |
| 2300.CR106 | Added triad seperators. |
| 2300.HI01-5 (BE) | Added triad seperators. |
| 2300.HI02-5 (BE) | Added triad seperators. |
| 2300.HI03-5 (BE) | Added triad seperators. |
| 2300.HI04-5 (BE) | Added triad seperators. |
| 2300.HI05-5 (BE) | Added triad seperators. |
| 2300.HI06-5 (BE) | Added triad seperators. |
| 2300.HI07-5 (BE) | Added triad seperators. |
| 2300.HI08-5 (BE) | Added triad seperators. |
| 2300.HI09-5 (BE) | Added triad seperators. |
| 2300.HI10-5 (BE) | Added triad seperators. |
| 2300.HI11-5 (BE) | Added triad seperators. |
| 2300.HI12-5 (BE) | Added triad seperators. |
| 2300.HI02 (BG) | Changed to match the corresponding institutional edit. |

Change Log
Changes to the version included for POC Review

| 2300.HI03 (BG) | Changed to match the corresponding institutional edit. |
| :---: | :---: |
| 2300.HI04 (BG) | Changed to match the corresponding institutional edit. |
| 2300.HI05 (BG) | Changed to match the corresponding institutional edit. |
| 2300.HI06 (BG) | Changed to match the corresponding institutional edit. |
| 2300.HI07 (BG) | Changed to match the corresponding institutional edit. |
| 2300.HI08 (BG) | Changed to match the corresponding institutional edit. |
| 2300.HI09 (BG) | Changed to match the corresponding institutional edit. |
| 2300.HI10 (BG) | Changed to match the corresponding institutional edit. |
| 2300.HI11 (BG) | Changed to match the corresponding institutional edit. |
| 2300.HI12 (BG) | Changed to match the corresponding institutional edit. |
| 2300.HCP02 | Added triad seperators. |
| 2300.HCP03 | Added triad seperators. |
| 2300.HCP07 | Added triad seperators. |
| 2400.SV104 | Added triad seperators. |
| 2400.CR102 | Added triad seperators. |
| 2400.PS102 | Added triad seperators. |
| 2400.HCP02 | Added triad seperators. |
| 2400.HCP03 | Added triad seperators. |
| 2400.HCP05 | Added triad seperators. |
| 2400.HCP07 | Added triad seperators. |
| 2400.HCP12 | Added triad seperators. |
| 2410.CTP04 | Added triad seperators. |
| 2430.SVD05 | Added triad seperators. |
| 2430.SVD06 | Added triad seperators. |
| 2000B.HL04 | Changed to match the corresponding institutional edit. |
| 2000A.CUR | Changed to the standard wording "must not be present." |
| 2310B.REF (1G,0B,G2,LU) | Changed error code to I9. |
| 2310C.PER | Changed error code to 19. |
| 2320.CAS03 | Added 2nd CSC code (519). |
| 2320.CAS09 | Added 2nd CSC code (519). |
| 2320.CAS12 | Added 2nd CSC code (519). |
| 2320.CAS15 | Added 2nd CSC code (519). |
| 2320.CAS18 | Added 2nd CSC code (519). |
| 2330A.N3 | Changed error code to I9. |
| 2330B.NM1 | Changed error code to I9. |
| 2330B.NM109 | Changed to match the corresponding institutional edit. |
| 2330B.N4 | Changed to match the corresponding institutional edit. |
| 2400.REF (6R) | Changed to match the corresponding institutional edit. |
| 2400.NTE02 (ADD/DCP) | Changed to match the corresponding institutional edit. |
| 2410.CTP05 | Changed to match the corresponding institutional edit. |
| 2420A.NM107 | Changed to match the corresponding institutional edit and corrected location info. |

Change Log
Changes to the version included for POC Review

| 2420A.NM108 | Corrected error code. |
| :---: | :---: |
| 2420A.REF (1G,0B,G2,LU) | Changed to match the corresponding institutional edit. |
| 2420A.REF01 (1G,0B,G2,LU) | Changed error code to "New CSC: "Payer specific restriction on the number of repetitions". Added the list of valid values. |
| 2420F.NM109 | Changed to match the corresponding institutional edits. |
| 2420F.REF (1G) | Changed to match the corresponding institutional edit and misc note. |
| 2420F.REF01 (1G) | Added "not used" highlighting. |
| 2430.SVD05 | Changed to match the corresponding institutional edit. |
| 2430.SVD06 | Changed to match the corresponding institutional edit. |
| 2430.CAS01 | Changed to match the corresponding institutional edit. |
| 2430.CAS03 | Added 2nd CSC code (519). |
| 2430.CAS06 | Added 2nd CSC code (519). |
| 2430.CAS09 | Added 2nd CSC code (519). |
| 2430.CAS12 | Added 2nd CSC code (519). |
| 2430.CAS15 | Added 2nd CSC code (519). |
| 2430.CAS18 | Added 2nd CSC code (519). |
| SE | Corrected location typo. |
| 2300.REF (F8) | Replaced 999/I9 with 277/compliant qualifiers restricted. |
| 2310A.NM108 | Changed to 277/situational data required. |
| 2310B.NM108 | Changed to 277/situational data required. |
| 2310C.NM108 | Changed to 277/situational data required. |
| 2310D.NM108 | Changed to 277/situational data required. |
| 2400.LX01 | Changed to match the corresponding institutional edit. |
| 2420A.NM108 | Changed to 277/situational data required. |
| 2420B.NM108 | Changed to 277/situational data required. |
| 2420D.NM108 | Changed to 277/situational data required. |
| 2420E.NM108 | Changed to 277/situational data required. |
| 2420F.NM108 | Changed to 277/situational data required. |
| 2420F.REF01 (1G) | Changed to match the corresponding institutional edit. |
| 2430.SVD06 | Changes 476 to 526 and remove the note. |
| 2430.SVD03-1 | Moved the SVD03-1 edit to an SVD03-1 line and removed it from the SVD03 line. |
| GS | Changed the error code to an AK905 error code. |
| GS01 | Changed the error codes to AK905 error codes. |
| GS02 | Changed the error codes to AK905 error codes. |
| GS03 | Changed the error codes to AK905 error codes. |
| GS04 | Removed the IK403 error code, no replacement defined. |
| GS05 | Removed the IK403 error code, no replacement defined. |

Change Log
Changes to the version included for POC Review

| GS06 | Changed the error codes to AK905 error codes. |
| :---: | :---: |
| GS07 | Removed the IK403 error code, no replacement defined. |
| GS08 | Changed the error codes to AK905 error codes. |
| ST | Changed the error codes to AK502 error codes. |
| ST01 | Changed the error codes to AK502 error codes. |
| ST02 | Changed the error codes to AK502 error codes. |
| ST03 | Changed the error codes to AK502 error codes. |
| 2010AA.REF (1G) | Changed error code to I9. |
| 2010AA.PER | Changed error code to I9. |
| 2310A.REF (0B/IG) | Changed error code to I9. |
| 2310B.PRV | Changed error code to I9. |
| 2330A.REF (SY) | Changed error code to 19. |
| 2330B.N3 | Changed error code to I9. |
| 2330B.DTP (573) | Changed error code to I9. |
| 2330B.REF (2U/EI/FY/ NF) | Changed error code to I9. |
| 2330B.REF (G1) | Changed error code to I9. |
| 2330B.REF (9F) | Changed error code to I9. |
| 2330B.REF (T4) | Changed error code to I9. |
| 2330B.REF (F8) | Changed error code to I9. |
| 2410.CTP04 | Changed the edit to >0 from >= 0 . |
| 2410.REF (XZ) | Changed error code to I9. |
| 2420A.PRV | Changed error code to I9. |
| 2420A.REF (1G,0B,G2,LU) | Changed error code to I9. |
| 2420B.REF (1G) | Changed error code to I9. |
| 2420B.REF (0B/1G/LU) | Changed error code to I9. |
| 2420E.N3 | Changed error code to I9. |
| 2420E.N4 | Changed error code to I9. |
| 2420E.REF (1G) | Changed error code to I9. |
| 2420E.PER | Changed error code to I9. |
| 2420F.REF (1G) | Changed error code to 19. |
| 2430.CAS | Changed error code to I9. |
| 2430.AMT (EAF) | Changed error code to I9. |
| SE | Changed the error code to an AK502 error. |
| SE01 | Changed the error code to an AK502 error. |
| SE02 | Changed the error code to an AK502 error. |
| GE | Changed the error code to an AK905 error. |
| GE01 | Changed the error code to an AK905 error. |
| GE02 | Changed the error code to an AK905 error. |
| 2010AA.NM108 | Changed "= 31" to "is a valid VA identifier". |

Change Log
Changes to the version included for POC Review

| 2310A.NM108 | Changed "= 31" to "is a valid VA identifier". |
| :---: | :---: |
| 2310B.NM108 | Changed "=31" to "is a valid VA identifier". |
| 2310C.NM108 | Changed "= 31" to "is a valid VA identifier". |
| 2310D.NM108 | Changed "= 31" to "is a valid VA identifier". |
| 2320.CAS | Changed to match the corresponding institutional edit. |
| 2320.CAS01 | Changed to match the corresponding institutional edit. |
| 2320.AMT (D) | Changed to match the corresponding institutional edit. |
| 2320.AMT (A8) | Changed to match the corresponding institutional edit. |
| 2320.AMT (EAF) | Changed to match the corresponding institutional edit. |
| 2320.MOA | Changed to match the corresponding institutional edit. |
| 2420A.NM108 | Changed "=31" to "is a valid VA identifier". |
| 2420B.NM108 | Changed "= 31" to "is a valid VA identifier". |
| 2420D.NM108 | Changed "= 31" to "is a valid VA identifier". |
| 2420E.NM108 | Changed "= 31" to "is a valid VA identifier". |
| 2420F.NM108 | Changed "= 31" to "is a valid VA identifier". |
| ISA05 | Added explicit values. |
| ISA07 | Added explicit values. |
| GS01 | Added explicit values. |
| 2010AA.N302 | Changed location reference loop name and element name in edit and note. |
| 2010BA.DMG02 | Added companion guide note. |
| 2010BB.NM109 | Changed edit to require 2010BB.NM109 to be the same as 1000B.NM109 and removed the standard edits. |
| 2300.CLM11-2 | Added edit requiring CLM11-1 if CLM11-2 is present. |
| 2320.MOA | Removed "Medicare" from segment name. |
| 2330B.REF (2U/EI/FY/ NF) | Added pass-thru note. |
| 2330B.REF (9F) | Removed miscellaneous note. |
| 2400.SV101-3 | Corrected spelling of "modifier". |
| 2400.SV101-4 | Corrected spelling of "modifier". |
| 2400.SV101-5 | Corrected spelling of "modifier". |
| 2400.SV101-6 | Corrected spelling of "modifier". |
| 2400.SV103 | Corrected spelling of "modifier". |
| 2400.DTP (607) | Added note for "companion guide note needed". |
| 2400.DTP (463) | Added note for "companion guide note needed". |
| 2400.DTP (461) | Added note for "companion guide note needed". |
| 2400.HCP09 | Replaced explicit value with "valid value" edit. |
| 2410.REF (XZ) | Added "pass-thru" note. |
| 2430.SVD03-2 | Corrected spelling of "modifier". |
| 2430.SVD03-3 | Corrected spelling of "modifier". |
| 2430.SVD03-4 | Corrected spelling of "modifier". |
| 2430.SVD03-5 | Corrected spelling of "modifier". |
| 2430.SVD03-6 | Corrected spelling of "modifier". |
| 2430.CAS01 | Corrected segment name. |

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| 2010AA.N301 | Corrected the location reference loop name. |
| :---: | :---: |
| 2300.CLM02 | Changed the CSC code to the code approved by the committee (697) |
| 2300.DTP03 (454) | Changed the CSC code to the code approved by the committee (701) |
| 2300.DTP03 (435) | Changed the CSC code to the code approved by the committee (394) |
| 2300.DTP03 (096) | Changed the CSC code to the code approved by the committee (394) |
| 2300.AMT02 (F5) | Changed the CSC code to the code approved by the committee (697) |
| 2320.CAS03 | Changed the CSC code to the code approved by the committee (697) |
| 2320.CAS06 | Changed the CSC code to the code approved by the committee (697) |
| 2320.CAS09 | Changed the CSC code to the code approved by the committee (697) |
| 2320.CAS12 | Changed the CSC code to the code approved by the committee (697) |
| 2320.CAS15 | Changed the CSC code to the code approved by the committee (697) |
| 2320.CAS18 | Changed the CSC code to the code approved by the committee (697) |
| 2320.AMT02 (D) | Changed the CSC code to the code approved by the committee (697) |
| 2320.AMT02 (A8) | Changed the CSC code to the code approved by the committee (697) |
| 2320.MOA01 | Changed the CSC code to the code approved by the committee (697) |
| 2320.MOA02 | Changed the CSC code to the code approved by the committee (697) |
| 2320.MOA08 | Changed the CSC code to the code approved by the committee (697) |
| 2320.MOA09 | Changed the CSC code to the code approved by the committee (697) |
| 2400.SV102 | Changed the CSC code to the code approved by the committee (697) |
| 2400.SV504 | Changed the CSC code to the code approved by the committee (697) |
| 2400.SV505 | Changed the CSC code to the code approved by the committee (697) |
| 2400.MEA03 | Changed the CSC code to the code approved by the committee (697) |
| 2400.AMT02 (T) | Changed the CSC code to the code approved by the committee (697) |
| 2400.AMT02 (F4) | Changed the CSC code to the code approved by the committee (697) |
| 2400.HCP10 | Changed the CSC code to the code approved by the committee (697) |
| 2410.CTP04 | Changed the CSC code to the code approved by the committee (697) |
| 2430.SVD02 | Changed the CSC code to the code approved by the committee (697) |
| 2430.CAS03 | Changed the CSC code to the code approved by the committee (697) |
| 2430.CAS06 | Changed the CSC code to the code approved by the committee (697) |
| 2430.CAS09 | Changed the CSC code to the code approved by the committee (697) |
| 2430.CAS12 | Changed the CSC code to the code approved by the committee (697) |
| 2430.CAS15 | Changed the CSC code to the code approved by the committee (697) |
| 2430.CAS18 | Changed the CSC code to the code approved by the committee (697) |
| 2440.LQ | Changed the CSC code to the code approved by the committee (698) |
| 2440.LQ02 | Changed the CSC code to the code approved by the committee (698) |
| 2440.FRM01 | Changed the CSC code to the code approved by the committee (699) |
| 2440.FRM03 | Changed the CSC code to the code approved by the committee (699) |
| 2440.FRM05 | Changed the CSC code to the code approved by the committee (699) |
| 2440.FRM05 | Changed the CSC code to the code approved by the committee (697) |
| 2440.FRM05 | Corrected the location reference. |
| 2000A.PRV02 | Corrected the location reference. |

Change Log
Changes to the version included for POC Review

| 2000A.PRV03 | Corrected the location reference. |
| :--- | :--- |
| 2010BA.N407 | Removed the edit added 4/21 - WG decided against that edit during calls. |
| 2300.HI08-2(BF) | Corrected location reference typo. |
| 2300.HI09-2(BF) | Corrected location reference typo. |
| 2300.HI010-2(BF) | Corrected location reference typo. |
| 2300.HI011-2(BF) | Corrected location reference typo. |
| 2300.HI012-2(BF) | Corrected the location reference. |
| 2310A.NM108 | Removed the "must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109" edit. . |
| 2310A.NM109 | Corrected the location reference. |
| 2310A.NM109 | Corrected the location reference. |
| 2310B.NM107 | Corrected the location reference. |
| 2310B.NM108 | Corrected the location reference. |
| 2310C.NM107 | Corrected the location reference. |
| 2310D.NM108 | Corrected the location reference. |
| 2330A.NM107 | Corrected the location references. |
| 2400.REF02 (6R) | Corrected the location references. |
| 2400.AMT02 (T) | Removed the edit added 4/26. |
| 2400.AMT02 (F4) | Corrected the location reference. |
| 2410.CTP05 | Corrected the location reference. |
| 2420A.NM108 | Corrected the location reference. |
| 2420A.PRV01 | Corrected the location reference. |
| 2420A.PRV02 | Corrected the location reference. |
| 2420A.PRV03 | Corrected the location reference. |
| 2420B.NM108 | Corrected the location reference. |
| 2420D.NM108 | Corrected the location reference. |
| 2420E.NM108 | Removed "must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109" edit |
| 2420F.NM108 | Changed the segment to "not allowed" for Part B. Removed all element level edits for Part B. |
| 2420F.NM109 | Changed the segment to "not allowed" for Part B. |
| 2440.LQ | Changed the segment to "not allowed" for Part B. Removed all element level edits for Part B. |
| 2440.LQ | Added misc note |
| 2440.FRM | Added misc note |
| ISA | Removed edit "If 1000A.NM102 is "1", 1000A.NM104 must be present". |
| ST | Changed 999 edit to "IK403 = I12: "Implementation Pattern Match Failure" |
| 1000A.NM104 | Added 277 edit for punctuation |
| 1000A.PER02 | Added 277 edit for punctuation |
| 1000A.PER04 | Ad7 edit for punctuation |
| 1000A.PER06 | 1000A.N301 is present, 2010AA.N302 may be present". |
| 1000A.PER08 | 2000A.HL |

Change Log
Changes to the version included for POC Review

| 2010AA.REF02 | Added 999 edit "2010AA.REF02 must be populated with accepted AN characters". |
| :---: | :---: |
| 2010AA.REF02 | Added 277 edit "2010AA.REF02 must be nine digits with no punctuation". |
| 2010AA.REF02 | Modified misc note |
| 2000B.HL04 | Added misc note. |
| IEA | Changed TA1 error code to "TA105: 023 Improper (Premature) End-of-File (Transmission)" |
| IEA | Added misc note |
| 2300.HI | Added new rows for 277 instructions and CSCCs to all the HI segments. |
| All N/U Elements | Added new row(s) with 277 instructions for each N/U element in the spreadsheet. |
| GS01 | Added new row(s) with 277 instructions. |
| GS02 | Added new row(s) with 277 instructions. |
| GS03 | Added new row(s) with 277 instructions. |
| GS03 | Added new row(s) with 277 instructions. |
| BHT03 | Added new row(s) with 277 instructions. |
| BHT04 | Added CSCC. |
| BHT06 | Added CSCC. |
| 1000A.NM103 | Added new row(s) with 277 instructions. |
| 1000A.NM104 | Added new row(s) with 277 instructions. |
| 1000A.NM105 | Added new row(s) with 277 instructions. |
| 1000A.NM109 | Added CSCC. |
| 1000A.PER02 | Added new row(s) with 277 instructions. |
| 1000A.PER04 | Added new row(s) with 277 instructions. |
| 1000B.NM103 | Added new row(s) with 277 instructions. |
| 1000B.NM109 | Added CSCC. |
| 2000A.CUR | Added CSCC. |
| 2000A.PRV03 | Added CSCC. |
| 2010AA.NM103 | Added new row(s) with 277 instructions. |
| 2010AA.NM104 | Added new row(s) with 277 instructions. |
| 2010AA.NM105 | Added new row(s) with 277 instructions. |
| 2010AA.NM107 | Added new row(s) with 277 instructions. |
| 2010AA.NM108 | Added CSCC. |
| 2010AA.NM109 | Added new row(s) with 277 instructions. |
| 2010AA.NM109 | Added CSCC. |
| 2010AA.N301 | Added new row(s) with 277 instructions. |
| 2010AA.N301 | Added CSCC. |
| 2010AA.N302 | Added new row(s) with 277 instructions. |
| 2010AA.N302 | Added CSCC. |
| 2010AA.N401 | Added new row(s) with 277 instructions. |
| 2010AA.N402 | Added CSCC. |
| 2010AA.N404 | Added CSCC. |
| 2010AA.N407 | Added CSCC. |
| 2010AA.REF01 (1G) | Added CSCCs. |

Change Log
Changes to the version included for POC Review

| 2010AA.REF02 (El/SY) | Added new row(s) with 277 instructions. |
| :---: | :---: |
| 2010AA.REF02 (1G) | Added CSCCs. |
| 2010AA.PER02 | Added new row(s) with 277 instructions. |
| 2010AA.PER04 | Added new row(s) with 277 instructions. |
| 2010AA.PER06 | Added new row(s) with 277 instructions. |
| 2010AA.PER08 | Added new row(s) with 277 instructions. |
| 2010AB.N301 | Added new row(s) with 277 instructions. |
| 2010AB.N301 | Added CSCC. |
| 2010AB.N302 | Added new row(s) with 277 instructions. |
| 2010AB.N302 | Added CSCC. |
| 2010AB.N401 | Added new row(s) with 277 instructions. |
| 2010AB.N402 | Added CSCC. |
| 2010AB.N403 | Added CSCC. |
| 2010AB.N404 | Added CSCC. |
| 2010AB.N407 | Added CSCC. |
| 2010AC Loop | Added CSCCs. |
| 2000B.SBR01 | Added CSCC. |
| 2000B.SBR04 | Added new row(s) with 277 instructions. |
| 2000B.SBR09 | Added CSCCs. |
| 2000B.PAT08 | Added CSCCs. |
| 2010BA.NM102 | Added CSCCs. |
| 2010BA.NM103 | Added new row(s) with 277 instructions. |
| 2010BA.NM104 | Added new row(s) with 277 instructions. |
| 2010BA.NM104 | Added CSCCs. |
| 2010BA.NM105 | Added new row(s) with 277 instructions. |
| 2010BA.NM107 | Added new row(s) with 277 instructions. |
| 2010BA.NM109 | Added CSCCs. |
| 2010BA.N301 | Added new row(s) with 277 instructions. |
| 2010BA.N302 | Added new row(s) with 277 instructions. |
| 2010BA.N401 | Added new row(s) with 277 instructions. |
| 2010BA.N401 | Added CSCCs. |
| 2010BA.N404 | Added CSCCs. |
| 2010BA.N407 | Added CSCCs. |
| 2010BA.DMG02 | Added CSCCs. |
| 2010BA.REF01 (SY) | Added CSCCs. |
| 2010BA.REF01 (Y4) | Added new row(s) with 277 instructions. |
| 2010BA.REF02 (Y4) | Added new row(s) with 277 instructions. |
| 2010BA.PER01 | Added new row(s) with 277 instructions. |
| 2010BA.PER02 | Added new row(s) with 277 instructions. |
| 2010BA.PER03 | Added new row(s) with 277 instructions. |
| 2010BA.PER04 | Added new row(s) with 277 instructions. |

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Change Log
Changes to the version included for POC Review

| 2010BA.PER05 | Added new row(s) with 277 instructions. |
| :---: | :---: |
| 2010BA.PER06 | Added new row(s) with 277 instructions. |
| 2010BB.NM103 | Added new row(s) with 277 instructions. |
| 2010BB.N301 | Added new row(s) with 277 instructions. |
| 2010BB.N302 | Added new row(s) with 277 instructions. |
| 2010BB.N401 | Added new row(s) with 277 instructions. |
| 2010BB.N403 | Added CSCCs. |
| 2010BB.N404 | Added CSCCs. |
| 2010BB.N407 | Added CSCCs. |
| 2010BB.REF (U/EI/FY/NF) | Added CSCCs. |
| 2000C Loop | Added CSCCs. |
| 2300.CLM01 | Added new row(s) with 277 instructions. |
| 2300.CLM02 | Added CSCCs. |
| 2300.CLM02 | Added CSCCs. |
| 2300.CLM05-1 | Added CSCCs. |
| 2300.CLM05-3 | Added CSCCs. |
| 2300.CLM11-4 | Added CSCCs. |
| 2300.CLM11-5 | Added CSCCs. |
| 2300.DTP03 (431) | Added CSCCs. |
| 2300.DTP03 (454) | Added CSCCs. |
| 2300.DTP03 (453) | Added CSCCs. |
| 2300.DTP03 (435) | Added CSCCs. |
| 2300.DTP03 (439) | Added CSCCs. |
| 2300.DTP03 (484) | Added CSCCs. |
| 2300.DTP03 (471) | Added CSCCs. |
| 2300.DTP03 (455) | Added CSCCs. |
| 2300.DTP03 (471) | Added CSCCs. |
| 2300.DTP03 (297) | Added CSCCs. |
| 2300.DTP03 (435) | Added CSCCs. |
| 2300.DTP03 (096) | Added CSCCs. |
| 2300.PWK06 | Added new row(s) with 277 instructions. |
| 2300.AMT02 (F5) | Added CSCCs. |
| 2300.REF02 (EW) | Added new row(s) with 277 instructions. |
| 2300.REF02 (EW) | Added CSCCs. |
| 2300.REF02 (9F) | Added new row(s) with 277 instructions. |
| 2300.REF02 (G1) | Added new row(s) with 277 instructions. |
| 2300.REF02 (F8) | Added CSCCs. |
| 2300.REF02 (X4) | Added new row(s) with 277 instructions. |
| 2300.REF02 (9A) | Added new row(s) with 277 instructions. |
| 2300.REF02 (9C) | Added new row(s) with 277 instructions. |
| 2300.REF02 (LX) | Added new row(s) with 277 instructions. |

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Change Log
Changes to the version included for POC Review

| 2300.REF02 (D9) | Added new row(s) with 277 instructions. |
| :---: | :---: |
| 2300.REF02 (D9) | Added CSCCs. |
| 2300.REF02 (EA) | Added new row(s) with 277 instructions. |
| 2300.REF02 (1J) | Added CSCCs. |
| 2300.K301 | Added new row(s) with 277 instructions. |
| 2300.NTE02 | Added new row(s) with 277 instructions. |
| 2300.CR1 | Added CSCCs. |
| 2300.CR102 | Added CSCCs. |
| 2300.CR106 | Added CSCCs. |
| 2300.CR109 | Added new row(s) with 277 instructions. |
| 2300.CR110 | Added new row(s) with 277 instructions. |
| 2300.CR210 | Added new row(s) with 277 instructions. |
| 2300.CR211 | Added new row(s) with 277 instructions. |
| 2300.CRC | Added CSCCs. |
| 2300.HCP04 | Added new row(s) with 277 instructions. |
| 2300.HCP06 | Added new row(s) with 277 instructions. |
| 2310A.NM103 | Added new row(s) with 277 instructions. |
| 2310A.NM104 | Added new row(s) with 277 instructions. |
| 2310A.NM105 | Added new row(s) with 277 instructions. |
| 2310A.NM108 | Added CSCC. |
| 2310A.NM109 | Added CSCC. |
| 2310A.REF (0B/IG) | Added new row(s) with 277 instructions. |
| 2310A.REF (0B/IG) | Added CSCC. |
| 2310B.NM104 | Added new row(s) with 277 instructions. |
| 2310B.NM105 | Added new row(s) with 277 instructions. |
| 2310B.NM108 | Added CSCC. |
| 2310B.NM109 | Added CSCC. |
| 2310B.PRV03 | Added CSCC. |
| 2310A.REF (0B/IG) | Added CSCC. |
| 2310C.NM103 | Added new row(s) with 277 instructions. |
| 2310C.NM109 | Added CSCC. |
| 2310C.N301 | Added new row(s) with 277 instructions. |
| 2310C.N302 | Added new row(s) with 277 instructions. |
| 2310C.N401 | Added new row(s) with 277 instructions. |
| 2310C.N403 | Added CSCCs. |
| 2310C.N404 | Added CSCCs. |
| 2310C.N407 | Added CSCCs. |
| 2310C.REF | Added CSCC. |
| 2310D.NM103 | Added new row(s) with 277 instructions. |
| 2310D.NM104 | Added new row(s) with 277 instructions. |
| 2310D.NM105 | Added new row(s) with 277 instructions. |

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| 2310D.NM108 | Added CSCC. |
| :---: | :---: |
| 2310D.NM109 | Added CSCC. |
| 2310D.REF (0B/1G/LU) | Added CSCC. |
| 2310E.N301 | Added new row(s) with 277 instructions. |
| 2310E.N302 | Added new row(s) with 277 instructions. |
| 2310E.N401 | Added new row(s) with 277 instructions. |
| 2310E.N403 | Added CSCCs. |
| 2310E.N404 | Added CSCCs. |
| 2310E.N407 | Added CSCCs. |
| 2310F.NM103 | Added new row(s) with 277 instructions. |
| 2310F.N301 | Added new row(s) with 277 instructions. |
| 2310F.N302 | Added new row(s) with 277 instructions. |
| 2310F.N401 | Added new row(s) with 277 instructions. |
| 2310F.N403 | Added CSCCs. |
| 2310F.N404 | Added CSCCs. |
| 2310F.N407 | Added CSCCs. |
| 2320.SBR01 | Added CSCC. |
| 2320.SBR04 | Added new row(s) with 277 instructions. |
| 2320.SBR09 | Added CSCC. |
| 2320.CAS03 | Added CSCC. |
| 2320.CAS04 | Added CSCC. |
| 2320.CAS05 | Added CSCC. |
| 2320.CAS06 | Added CSCC. |
| 2320.CAS07 | Added CSCC. |
| 2320.CAS08 | Added CSCC. |
| 2320.CAS09 | Added CSCC. |
| 2320.CAS10 | Added CSCC. |
| 2320.CAS11 | Added CSCC. |
| 2320.CAS12 | Added CSCC. |
| 2320.CAS13 | Added CSCC. |
| 2320.CAS14 | Added CSCC. |
| 2320.CAS15 | Added CSCC. |
| 2320.CAS16 | Added CSCC. |
| 2320.CAS17 | Added CSCC. |
| 2320.CAS18 | Added CSCC. |
| 2320.CAS19 | Added CSCC. |
| 2320.AMT02 (D) | Added CSCC. |
| 2320.AMT02 (A8) | Added CSCC. |
| 2320.AMT (EAF) | Added CSCC. |
| 2320.MOA01 | Added CSCC. |
| 2320.MOA02 | Added CSCC. |

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| 2320.MOA03 | Added CSCC. |
| :--- | :--- |
| 2320.MOA04 | Added CSCC. |
| 2320.MOA05 | Added CSCC. |
| 2320.MOA06 | Added CSCC. |
| 2320.MOA07 | Added CSCC. |
| 2320.MOA08 | Added CSCC. |
| 2320.MOA09 | Added CSCC. |
| 2330A.NM103 | Added new row(s) with 277 instructions. |
| 2330A.NM104 | Added new row(s) with 277 instructions. |
| 2330A.NM105 | Added new row(s) with 277 instructions. |
| 2330A.NM107 | Added new row(s) with 277 instructions. |
| 2330A.NM109 | Added new row(s) with 277 instructions. |
| 2330A.N301 | Added new row(s) with 277 instructions. |
| 2330A.N302 | Added new row(s) with 277 instructions. |
| 2330A.N401 | Added new row(s) with 277 instructions. |
| 2330A.N403 | Added CSCCs. |
| 2330A.N404 | Added CSCCs. |
| 2330A.N407 | Added CSCCs. |
| 2330A.REF (SY) | Added CSCCs. |
| 2330B.NM103 | Added new row(s) with 277 instructions. |
| 2330B.N301 | Added new row(s) with 277 instructions. |
| 2330B.N302 | Added new row(s) with 277 instructions. |
| 2330B.N401 | Added new row(s) with 277 instructions. |
| 2330A.N403 | Added CSCCs. |
| 2330A.N404 | Added CSCCs. |
| 2330A.N407 | Added CSCCs. |
| 2330B.DTP (573) | Added CSCCs. |
| 2330B.REF (2U/EI/FY/ NF) | Added CSCCs. |
| 2330B.REF02 (G1) | Added new row(s) with 277 instructions. |
| 2330B.REF02 (9F) | Added new row(s) with 277 instructions. |
| 2330B.REF02 (F8) | Added new row(s) with 277 instructions. |
| 2330C.REF (1G/0B) | Added CSCCs. |
| 2330D.REF (0B/LU) | Added CSCCs. |
| 2330E.REF (0B/LU) | Added CSCCs. |
| 2330F.REF (0B/LU) | Added CSCCs. |
| A330G.REF (G2/LU) | Added CSCCs. |
| 2400.SV101-2 | Added CSCCs. |
| 2400.SV101-3 |  |
| 2400.SV101-4 | CSCCS. |
| 2400.SV101-5 |  |

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| 2400.SV101-7 | Added new row(s) with 277 instructions. |
| :---: | :---: |
| 2400.SV102 | Added CSCCs. |
| 2400.SV103 | Added CSCCs. |
| 2400.SV104 | Added CSCCs. |
| 2400.SV107-1 | Added CSCC. |
| 2400.SV107-2 | Added CSCC. |
| 2400.SV107-3 | Added CSCC. |
| 2400.SV107-4 | Added CSCC. |
| 2400.SV503 | Added CSCC. |
| 2400.SV504 | Added CSCC. |
| 2400.SV505 | Added CSCC. |
| 2400.PWK06 | Added new row(s) with 277 instructions. |
| 2400.CR102 | Added CSCC. |
| 2400.CR106 | Added CSCC. |
| 2400.CR109 | Added new row(s) with 277 instructions. |
| 2400.CR110 | Added new row(s) with 277 instructions. |
| 2400.CR303 | Added CSCC. |
| 2400.CRC (09) | Added CSCC. |
| 2400.CRC (07) | Added CSCC. |
| 2400.CRC (70) | Added CSCC. |
| 2400.CRC03 | Added CSCC. |
| 2400.CRC04 | Added CSCC. |
| 2400.DTP03 (472) | Added CSCC. |
| 2400.DTP03 (471) | Added CSCC. |
| 2400.DTP03 (607) | Added CSCC. |
| 2400.DTP03 (463) | Added CSCC. |
| 2400.DTP03 (461) | Added CSCC. |
| 2400.DTP03 (738) | Added CSCC. |
| 2400.DTP03 (455) | Added CSCC. |
| 2400.DTP03 (454) | Added CSCC. |
| 2400.QTY02 (PT) | Added CSCC. |
| 2400.QTY02 (FL) | Added CSCC, corrected the location reference. |
| 2400.MEA03 | Added CSCC. |
| 2400.REF (G1) | Added new row(s) with 277 instructions. |
| 2400.REF02 (6R) | Added new row(s) with 277 instructions. |
| 2400.REF02 (EW) | Added new row(s) with 277 instructions. |
| 2400.REF02 (X4) | Added new row(s) with 277 instructions. |
| 2400.REF02 (F4) | Added new row(s) with 277 instructions. |
| 2400.REF (F4) | Added CSCC. |
| 2400.REF02 (BT) | Added new row(s) with 277 instructions. |
| 2400.REF02 (9F) | Added new row(s) with 277 instructions. |

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| 2400.AMT02 (T) | Added CSCC. |
| :---: | :---: |
| 2400.AMT02 (F4) | Added CSCC. |
| 2400.K301 | Added new row(s) with 277 instructions. |
| 2400.NTE02 (ADD/DCP) | Added new row(s) with 277 instructions. |
| 2400.NTE (ADD/DCP) | Added CSCC. |
| 2400.NTE02 (TPO) | Added new row(s) with 277 instructions. |
| 2400.PS1 | Added CSCC. |
| 2400.PS102 | Added CSCC. |
| 2430.SVD03-1 | Added CSCC. |
| 2400.HCP04 | Added new row(s) with 277 instructions. |
| 2400.HCP06 | Added new row(s) with 277 instructions. |
| 2400.HCP09 | Added CSCC, correctrd the location reference. |
| 2400.HCP10 | Added CSCC. |
| 2410.CTP04 | Added CSCC. |
| 2410.REF (XZ) | Added new row(s) with 277 instructions. |
| 2410.REF (XZ) | Added CSCC. |
| 2420A.NM103 | Added new row(s) with 277 instructions. |
| 2420A.NM104 | Added new row(s) with 277 instructions. |
| 2420A.NM105 | Added new row(s) with 277 instructions. |
| 2420A.NM107 | Added new row(s) with 277 instructions. |
| 2420A.NM109 | Added CSCC. |
| 2420A.REF (1G/0B/G2/LU) | Added CSCC. |
| 2420B.NM1 | Added CSCC. |
| 2420B.NM109 | Added CSCC. |
| 2420B.REF (1G) | Added CSCC. |
| 2420C.NM103 | Added new row(s) with 277 instructions. |
| 2420C.NM109 | Added CSCC. |
| 2420C.N301 | Added new row(s) with 277 instructions. |
| 2420C.N302 | Added new row(s) with 277 instructions. |
| 2420C.N401 | Added new row(s) with 277 instructions. |
| 2420C.N404 | Added CSCCs. |
| 2420C.REF | Added CSCC. |
| 2420D.NM103 | Added new row(s) with 277 instructions. |
| 2420D.NM104 | Added new row(s) with 277 instructions. |
| 2420D.NM105 | Added new row(s) with 277 instructions. |
| 2420D.NM107 | Added new row(s) with 277 instructions. |
| 2420D.NM109 | Added CSCC. |
| 2420D.REF (0B/1G/LU) | Added new row(s) with 277 instructions. |
| 2420D.REF (0B/1G/LU) | Added new row(s) with 277 instructions. |
| 2420D.REF (0B/1G/LU) | Added CSCC. |
| 2420E.NM103 | Added new row(s) with 277 instructions. |

Change Log
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| 2420E.NM104 | Added new row(s) with 277 instructions. |
| :---: | :---: |
| 2420E.NM105 | Added new row(s) with 277 instructions. |
| 2420E.NM107 | Added new row(s) with 277 instructions. |
| 2420E.NM109 | Added CSCC. |
| 2420E.N301 | Added new row(s) with 277 instructions. |
| 2420E.N302 | Added new row(s) with 277 instructions. |
| 2420E.N401 | Added new row(s) with 277 instructions. |
| 2420E.N404 | Added CSCCs. |
| 2420E.REF (1G) | Added CSCC. |
| 2420E.PER02 | Added new row(s) with 277 instructions. |
| 2420E.PER04 | Added new row(s) with 277 instructions. |
| 2420E.PER06 | Added new row(s) with 277 instructions. |
| 2420E.PER08 | Added new row(s) with 277 instructions. |
| 2420F.NM103 | Added new row(s) with 277 instructions. |
| 2420F.NM104 | Added new row(s) with 277 instructions. |
| 2420F.NM105 | Added new row(s) with 277 instructions. |
| 2420F.NM107 | Added new row(s) with 277 instructions. |
| 2420F.NM109 | Added CSCC. |
| 2420F.REF01 (1G) | Added CSCC. |
| 2420F.REF02 (1G) | Added CSCC. |
| 2420G.NM103 | Added new row(s) with 277 instructions. |
| 2420G.N301 | Added new row(s) with 277 instructions. |
| 2420G.N302 | Added new row(s) with 277 instructions. |
| 2420G.N401 | Added new row(s) with 277 instructions. |
| 2420G.N404 | Added CSCCs. |
| 2420H.NM103 | Added new row(s) with 277 instructions. |
| 2420H.N301 | Added new row(s) with 277 instructions. |
| 2420H.N302 | Added new row(s) with 277 instructions. |
| 2420H.N401 | Added new row(s) with 277 instructions. |
| 2420H.N404 | Added CSCCs. |
| 2430.SVD02 | Added CSCCs. |
| 2430.SVD03-1 | Added CSCCs. |
| 2430.SVD05 | Added CSCCs. |
| 2430.SVD06 | Added CSCCs. |
| 2430.CAS03 | Added CSCCs. |
| 2430.CAS06 | Added CSCCs. |
| 2430.CAS09 | Added CSCCs. |
| 2430.CAS12 | Added CSCCs. |
| 2430.CAS15 | Added CSCCs. |
| 2430.CAS18 | Added CSCCs. |
| 2440.LQ | Added CSCCs. |

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| 2440.LQ02 | Added CSCCs. |
| :---: | :---: |
| 2440.FRM | Added CSCCs. |
| 2440.FRM01 | Added CSCCs. |
| 2440.FRM02 | Added CSCCs. |
| 2440.FRM03 | Added new row(s) with 277 instructions. |
| 2440.FRM03 | Added CSCCs. |
| 2440.FRM04 | Added CSCCs. |
| GS01 | Changed 999 from E to R when element does not contain HC, also removed 277 edits due to redundancy |
| GS02 | Removed 277 edit since this is before loop 2000 |
| GS03 | Removed 277 edit since this is before loop 2000 |
| GS04 | Removed 277 edit since this is before loop 2000 |
| GS07 | 999 was missing on the first reject edit for missing element - added |
| GS07 | 999 was missing on the second edit for invalid value "X" - added |
| GS07 | Removed 277 edit since this is before loop 2000 |
| BHT03 | Removed 277 edits since this is before loop 2000 |
| BHT04 | Removed 277 edit since this is before loop 2000 |
| BHT06 | Changed from 277 edit to 999 for invalid code value |
| 1000B.NM103 | Removed 277 edits since 277 does not contain an STC for the informaiton source |
| 1000B.NM104 | Removed 277 edits since 277 does not contain an STC for the informaiton source |
| 1000B.NM105 | Removed 277 edits since 277 does not contain an STC for the informaiton source |
| 1000B.NM106 | Removed 277 edits since 277 does not contain an STC for the informaiton source |
| 1000B.NM107 | Removed 277 edits since 277 does not contain an STC for the informaiton source |
| 1000B.NM109 | Removed 277 edits since 277 does not contain an STC for the informaiton source |
| 1000B.NM110 | Removed 277 edits since 277 does not contain an STC for the informaiton source |
| 1000B.NM111 | Removed 277 edits since 277 does not contain an STC for the informaiton source |
| 1000B.NM112 | Removed 277 edits since 277 does not contain an STC for the informaiton source |
| Amout Elements | Updated all monetary amounts to reflect flat file pictures of S9(8)V99 |
| 2300.HCP13-15 | Modified the element edits from 2400.HCP to 2300.HCP |
| X222.121.2010BA.NM109.020 | Joined the edits for Medicare IDs and Railroad IDs with an OR condition |
| X222.305.2320.AMT02.060 | Modified edit to include impact of CAS amounts |
| X222.257.2310A.NM109.040 | Removed edit for "2310A.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109." |
| X222.299.2320.CAS01.030 | Corrected the date in the CEDI Edit column to reflect the current compliance date of 01/01/2012 |
| X222.484.2430.CAS02.010 | Corrected the date in the CEDI Edit column to reflect the current compliance date of 01/01/2012 |
| X222.319.2330A.REF02.020 | Change the CSC to 148 to reflect the SSN rather than the EIN <br> Added "The first 3 digits cannot be higher than 772, and digits 1-3, 4-5, and 6-9 cannot be zeros." |
| X222.326.2330B.REF02.020 | Added "Cannot be zeros." |
| X222.226.2300. HI | Updated the diagnosis code pointer the correct values |
| X222.157.2300.CLM02.040 | Modifed picture clause to 9(5)V99. |
| X222.295.2320.SBR05.010 | Removed edit - does not apply for Medicare |
| X222.C7..GS04 | Added TA1 error for invalid GS information |


| X222.C7..GS05 | Added TA1 error for invalid GS information |
| :---: | :---: |
| X222.070..ST | Added errors for ST segment |
| X222.226.2300.HI01-2 | Corrected references to the principle diagnosis code (254) |
| X222.104.2010AB.N403.010 | Added Entity Identifier Code |
| X222.104.2010AB.N404.010 | Added Entity Identifier Code |
| X222.211.2300.CR106 | Synchronized the edits for CR106 between claim and service line level |
| X222.104.2010AB.N404.010 | Changed CSC to 680 for entity's country rather the entities country subdivision |
| X222.176.2300.DTP. 010 | Added bolded text If 2300.CLM05-5 or 2400. SV105 = "21", "51" or " 61 " then 2300. DTP with DTP01 = "435" must be present. |
| X222.351.2400.SV105.010 | Modified the date reference from GS04 to BHT04 Transaction Set Creation Date |
| X222.299.2320.CAS01.030 | Added a test for 2430.DTP(when used) |
| X222.332.2330C.NM1.010 | Changed to loop must not be present (for Medicare) since only NPI is allowed under HIPAA |
| X222.332.2330C.NM1.020 | Changed to segment must not be present (for Medicare) since only NPI is allowed under HIPAA |
| X222.334.2330C.REF. 010 | Changed to segment must not be present (for Medicare) since only NPI is allowed under HIPAA |
| 2330D / 2330E / 2330F / 2330G | Change to match 2330C - must not be present (for Medicare) |
| X222.460.2420E.REF. 020 | Modified the number of repeats for 5010 from 2 to 1 since only 1 code is allowed. |
| X222.434.2420A.REF02.050 | Corrected the reference to 2420A. Also removed the extra = |
| X222.452.2420D.REF02.030 | Corrected the reference to 2420D. Also remove the extra = |
| X222.124.2010BA.N301 | Corrected references from N302 to N301 |
| X222.306.2320.AMT02.060 | Changed CSC 183 to CSC 596 for edit "must be >=0" |
| X222.306.2320.AMT02.050 | Removed the "sum of all" since there is only one amount for the equality test |
| X222.380.2400.DTP03.060 | Added "or equal to" for consistency with the TR3. |
| X222.167.2300.DTP. 010 | Change the repeat for the segment from 5 to 1 |
| X222.199.2300.REF01.010 | Changed the code reference from 9B to 9A for REPRICED CLAIM NUMBER |
| X222.200.2300.REF01.010 | Changed the code reference from 9D to 9D for ADJUSTED REPRICED CLAIM NUMBER |
| X222.207.2300.K301.050 | Corrected the incorrect to the REF segment in the 5010 and CEDI columns |
| X222.214.2300.CR211.010 | Corrected the reference to CR210 in the 5010 and CEDI columns |
| X222.214.2300.CR211.020 | Corrected the reference to CR210 in the 5010 and CEDI columns |
| X222.214.2300.CR211.040 | Corrected the reference to CR210 in the 5010 and CEDI columns |
| X222.257.2310A.NM109.040 | Added validation for NPI for CEDI based upon PECOS file match |
| X222.454.2420E.NM109.040 | Added validation for NPI for CEDI based upon PECOS file match |
| X222.257.2420F.NM109.050 | Added validation for NPI for CEDI based upon PECOS file match |
| X222.439.2420B.REF | Added notes for Trailblazer only for legacy identifiers and added new edit for everyone but Trailblazer as must not be present |
| X222.452.2420D.REF | Added notes for Trailblazer only for legacy identifiers and added new edit for everyone but Trailblazer as must not be present |
| X222.460.2420E.REF | Added notes for Trailblazer only for legacy identifiers and added new edit for everyone but Trailblazer as must not be present |
| X222.320.2330B.NM109.030 | This edit was incorrectly placed on the N3 segment following this NM1 segment. Modified the CSC code to reflect the incorrect payer ID. |

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| X222.092.2010AA.N403.020 | Removed check for N404 which is now not allowed except for the subscriber (other insured) |
| :---: | :---: |
| X222.092.2010AA.N404.010 | Change to must not be present |
| X222.104.2010AB.N403.020 | Removed check for N404 which is now not allowed except for the subscriber (other insured) |
| X222.104.2010AB.N404.010 | Change to must not be present |
| X222.136.2010BB.N403.020 | Removed check for N404 which is now not allowed except for the subscriber (other insured) |
| X222.136.2010BB.N404.010 | Change to must not be present |
| X222.273.2310C.N403.020 | Removed check for N404 which is now not allowed except for the subscriber (other insured) |
| X222.273.2310C.N404.010 | Change to must not be present |
| X222.288.2310E.N403.020 | Removed check for N404 which is now not allowed except for the subscriber (other insured) |
| X222.288.2310E.N404.010 | Change to must not be present |
| X222.293.2310F.N403.020 | Removed check for N404 which is now not allowed except for the subscriber (other insured) |
| X222.293.2310F.N404.010 | Change to must not be present |
| X222.323.2330B.N403.020 | Removed check for N404 which is now not allowed except for the subscriber (other insured) |
| X222.323.2330B.N404.010 | Change to must not be present |
| X222.445.2420C.N403.020 | Removed check for N404 which is now not allowed except for the subscriber (other insured) |
| X222.445.2420C.N404.010 | Change to must not be present |
| X222.458.2420E.N403.020 | Removed check for N404 which is now not allowed except for the subscriber (other insured) |
| X222.458.2420E.N404.010 | Change to must not be present |
| X222.473.2420G.N403.020 | Removed check for N404 which is now not allowed except for the subscriber (other insured) |
| X222.473.2420G.N404.010 | Change to must not be present |
| X222.478.2420H.N403.020 | Removed check for N404 which is now not allowed except for the subscriber (other insured) |
| X222.478.2420H.N404.010 | Change to must not be present |
| X222.351.2400.SV103.020 | Added the anesthesia modifiers currently identified. (AA, AD, QK, QS, QX, QY or QZ) |
| X222.484.2430.CAS02.020 | Changed the disposition for this claim adjustment reason code to match the others within the segment. |
| X222.257.2310A.NM108.010 | Change to E Accept for further processing |
| Topic Parking Lot | Removed. Issue tracked provide no guidance or benefit for the implementation of the CR |
| X222.C7..GS. 010 | Change from 999 to TA1 and added disposition of "TA105: 024 Invalid GS Segment" |
| X222.299.2320.CAS06.050 | Changed Accept/Reject to E |
| X222.299.2320.CAS09.050 | Changed Accept/Reject to E |
| X222.299.2320.CAS15.050 | Changed Accept/Reject to E |
| X222.299.2320.CAS12.050 | Added missing edit for too short long. Old X222.299.2320.CAS12.050 renumbered to X222.299.2320.CAS12.060 |
| X222.299.2320.CAS18.050 | Changed Accept/Reject to E |
| X222.299.2320.CAS18.050 | Added missing edit for too short long. Old X222.299.2320.CAS18.050 renumbered to X222.299.2320.CAS18.060 |
| X222.252.2300.HCP | For all CEDI edits changed incorrect reference of 2400 to 2300 |
| X222.084.2000A.CUR. 010 | Added new 999E edit for CUR segment as a not used for implementation error. This caused the current X222.084.2000A.CUR. 010 edit to be pushed down to the second edit (.020) for the CUR segment. |
| X222.116.2000B.SBR01.020 | Changed from R to E and swapped 030 and 040 edit to get corresponding 277 under 999E |
| All 277 rows | Added T \& C to indicate errors which identified in the translator ( T ) and which errors are identified in the CEM ( C ) |

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| X222.323.2330B.N403.020 <br> X222.445.2420C.N403.020 <br> X222.458.2420E.N403.020 <br> X222.473.2420G.N403.020 <br> X222.478.2420H.N403.020 <br> X222.092.2010AA.N403.020 <br> X222.104.2010AB.N403.020 <br> X222.125.2010BA.N403.030 <br> X222.136.2010BB.N403.020 <br> X222.273.2310C.N403.020 <br> X222.288.2310E.N403.020 <br> X222.288.2310E.N403.020 <br> X222.293.2310F.N403.020 <br> $X 222.439242 B . R E 01.020$ | Added check if N404 is not present then validate zip code |
| :---: | :---: |
| X222.439.2420B.REF01.020 | Added note "Trailblazer Only" |
| X222.480.2430.SVD03-7.030 | Removed the edit description. The 277 is paired with the previous 999E edit. |
| X222.283.2310D.REF01.030 | Removed per comment and Brian's agreement. |
| X222.157.2300.CLM05-1.020 | Change reference to the BHT segment from BHT05 to BHT04 for the date. |
| X222.351.2400.SV101-7.020 | Removed 999E edit. This edit will be performed in the CEM. Remaining edits moved up. |
| X222.176.2300.DTP. 010 | Changed CLM05-5 to CLM05-1 |
| $\mathrm{X} 222.299 .2320 . \mathrm{CAS} 05.020$ <br> $\times 222.299 .2320 . \mathrm{CAS} 05.030$ <br> $\times 222.299 .2320 . \mathrm{CAS08.020}$ | Changed reference from CAS02 to CAS05 |
| X222.299.2320.CAS08.020 X222.299.2320.CAS08.030 | Changed reference from CAS02 to CAS08 |
| X222.299.2320.CAS11.020 X222.299.2320.CAS11.030 | Changed reference from CAS02 to CAS11 |
| X222.299.2320.CAS14.020 X222.299.2320.CAS14.030 | Changed reference from CAS02 to CAS14 |
| $\mathrm{X} 222.299 .2320 . \mathrm{CAS17.020}$ $\times 222.299 .2320 . \mathrm{CAS} 17.030$ | Changed reference from CAS02 to CAS17 |
| X222.260.2310A.REF. 030 | Changed reference from 2310AA to 2310A in column R |
| X222.454.2420E.NM109.040 | Changed qualifier for Entity Identifier Code from DN to DK |
| X222.257.2420F.NM109.050 | Changed reference to 2310A to 2420F in column S |
| X222.494.2440.FRM03.080 | Removed the language in columns R and S. Incorrect for element FRM03 |
| X222.074.1000A.NM103.020 | Changed from 999R to 999E |
| X222.074.1000A.NM104.025 | Inserted 277 to match change for X222.074.1000A.NM103.020 |
| X222.098.2010AA.PER04.030 | Changed from 999R to 999E |
| X222.116.2000B.SBR04.060 | Changed from 999R to 999E |
| X222.192.2300.REF02.045 | Added edit for invalid length to coorespond with the previous 999E edit |
| X222.199.2300.REF02.070 | Removed duplicate edit to X222.199.2300.REF02.060 |
| X222.252.2300.HCP02.020 | Changed from 999R to 999E |
| X222.252.2300.HCP03.010 | Changed from 999R to 999E |

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| X222.277.2310C.PER04.030 | Changed from 999R to 999E |
| :---: | :---: |
| X222.405.2400.REF02.030 | Removed incorrect language from 5010 edit column |
| X222.406.2400.REF02.035 | Added 277 edit for invalid size |
| X222.407.2400.REF02.035 | Added 277 edit for invalid size |
| X222.423.2410.LIN01.020 | Removed 277 edit, not needed for LIN01 since it is not used (999E) |
| X222.491.2430.AMT02.020 | Changed from 999R to 999E |
| X222.070..ST.020 | Changed edit to IK502: 1 "Transaction Set Not Supported". |
| X222.071..BHT03.020 | Deleted non-space character edit |
| X222.074.1000A.NM105.030 | Added EIC 41 to edit |
| X222.092.2010AA.N403.020 | Added edit to CEDI "If 2010AA.N404 is not present, 2010AA.N403 must be a valid 9 digit Zip Code". |
| X222.091.2010AA.N302.010 | Changed Accept/Reject to E |
| X222.091.2010AA.N302.020 | Added edit CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 512: "Length Invalid" <br> CSC 126: "Entity's Address" <br> Entity Identifier Code: 85 Billing Provider |
| X222.092.2010AA.N407.020 | Added edit to CEDI "If 2010AA.N407 is present, then 2010AA.N404 must not = "US" or CAN". |
| X222.125.2010BA.N402.030 | Added edit to CEDI "2010BA.N402 must be a valid state or province code". |
| X222.104.2010AB.N403.020 | Added edit to CEDI "If 2010AB.N404 is not present, 2010AB.N403 must be a valid Zip Code". |
| X222.106.2010AC.NM1.Loop.01 $0$ | Changed edit for all 2010AC segments to "CSCC A3: "Acknowledgement /Returned as unprocessable claim" |
| X222.157.2300.CLM05-3.02 | Changed T to C |
| X222.182.2300.PWK06.060 | Changed edit to reflect "two" non-space characters |
| X222.182.2300.PWK06.060 | Changed edit to 999 R |
| X222.199.2300.REF02.010 | Changed element name to "Repriced Claim Reference Number" |
| X222.199.2300.REF02.040 | Replaced "CSC 636" with "TBD13" to align with X223 spreadsheet |
| X222.199.2300.REF02.060 | Replaced "CSC 636" with "TBD13" to align with X223 spreadsheet |
| X222.205.2300.REF02.020 | Added edit "2300.REF02 must contain at least one non-space character". |
| X222.205.2300.REF02.030 | Added edit "2300.REF02 must be 1-50 characters". |
| X222.205.2300.REF02.040 | Added 277T edit |
| X222.223.2300.CRC. 010 | Changed EPSDT CRC to Pass Through Syntax Only. |
| X222.223.2300.CRC05.010 | Deleted edit "2300.CRC05 can only be present if 2300.CRC04 is present". |
| X222.226.2300.HI.010 | Changed to IK304 = 3: "Required Segment Missing" |
| X222.226.2300.HI. 020 | Changed to IK304 = 3: "Required Segment Missing" |
| X222.226.2300.HI.030 | Changed to IK304 = 3: "Required Segment Missing" |
| X222.295.2320.SBR. 010 | Added loop repeat (10) |
| X222.295.2320.SBR01.040 | Changed disposition to CSCC A6: "Acknowledgement/Rejected for Missing Information..." |
| X222.299.2320.CAS02.030 | Added CSC 516: Adjudication or Payment Date |
| X222.299.2320.CAS05.030 | Changed to "CSCC A8 Acknowledgement / Rejected for relational field in error" and added "CSC 516: Adjudication or Payment Date". |
| X222.299.2320.CAS08.030 | Changed to "CSCC A8 Acknowledgement / Rejected for relational field in error" and added "CSC 516: Adjudication or Payment Date". |


| X222.299.2320.CAS11.030 | Changed to "CSCC A8 Acknowledgement / Rejected for relational field in error" and added "CSC 516: Adjudication or Payment Date". |
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| X222.299.2320.CAS13.020 | Changed to 999E |
| X222.299.2320.CAS14.030 | Changed to "CSCC A8 Acknowledgement / Rejected for relational field in error" and added "CSC 516: Adjudication or Payment Date". |
| X222.305.2320.AMT. 030 | Changed to CSCC A6: "Acknowledgement/Rejected for Missing Information..." |
| X222.401.2400.REF02.070 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information..." |
| X222.423.2410.LIN03.020 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information..." |
| X222.426.2410.CTP05.010 | Added edit "If CTP04 is present then CPT05 must be present". |
| X222.430.2420A.NM109.020 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information..." |
| X222.430.2420A.NM109.030 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information..." |
| X222.480.2430.SVD03-3.010 | Added "TBD22: "Line Adjudication Information" |
| X222.480.2430.SVD03-4.020 | Added "TBD22: "Line Adjudication Information" |
| X222.480.2430.SVD03-5.020 | Added "TBD22: "Line Adjudication Information" |
| X222.480.2430.SVD03-6.020 | Added "TBD22: "Line Adjudication Information" |
| X222.484.2430.CAS09.060 | Added "CSC 519: "Adjustment Amount" and "EIC: GB Other Insured" |
| X222.484.2430.CAS15.060 | Added "CSC 519: "Adjustment Amount" and "EIC: GB Other Insured" |
| X222.491.2430.AMT02.040 | Line added |
| Global | Changed all TBD10 to CSC 127 "Entity's Phone Number" |
| Global | Changed all TBD11 to CSC 53: "Entity ID Number" |
| Global | Changed all TBD13 to CSC 702: "Repriced Claim Reference Number" |
| Global | Changed all TBD16 to CSC 153: "Entity's ID Number" |
| Global | Changed all TBD20 to CSC 153: "Entity's ID Number" |
| X222.087.2010AA.NM104.050 | Changed CSC to CSC 512: "Length invalid" |
| X222.087.2010AA.NM105.050 | Changed CSC to CSC 512: "Length invalid" |
| X222.087.2010AA.NM107.050 | Changed CSC to CSC 512: "Length invalid" |
| X222.103.2010AB.N302.050 | Line added |
| X222.214.2300.CR210.030 | Added CSC 512: "Length invalid" |
| X222.299.2320.CAS07.030 | Line added |
| X222.299.2320.CAS10.030 | Line added |
| X222.299.2320.CAS13.030 | Line added |
| X222.299.2320.CAS16.030 | Line added |
| X222.299.2320.CAS19.030 | Line added |
| X222.411.2400.K301.020 | Changed to 999E |
| X222.116.2000B.SBR04.030 | Changed CSCC to A7: "Acknowledgement /Rejected for Invalid Information..." and added CSC 512: "Length invalid" |
| X222.116.2000B.SBR04.050 | Changd CSC to CSC 511: "Invalid character" |
| X222.310.2320.MOA08.020 | Added "999E IK403 = 5: "Data Element Too Long" |
| X222.310.2320.MOA09.050 | Added CSC 598: "Non-payable Professional Component Billed Amount" |
| X222.322.2330B.N3.020 | Added "999R IK304 = 5: "Segment Exceeds Maximum Use" |
| X222.320.2330B.NM109.030 | Changed to "999R IK403 = I12: "Implementation Pattern Match Failure" |


| X222.326.2330B.REF. 010 | Changed 999R to "IK304 = 16: "Implementation Dependent Segment Missing" |
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| X222.326.2330B.REF02.020 | Changed T to C |
| X222.328.2330B.REF. 010 | Changed 999R to "IK304 = I6: "Implementation Dependent Segment Missing" |
| X222.329.2330B.REF. 010 | Changed 999R to "IK304 = 16: "Implementation Dependent Segment Missing" |
| X222.330.2330B.REF. 010 | Changed 999R to "IK304 = 16: "Implementation Dependent Segment Missing" |
| X222.331.2330B.REF. 010 | Changed 999R to "IK304 = 16: "Implementation Dependent Segment Missing" |
| X222.413.2400.NTE02.040 | Removed EIC TU |
| X222.413.2400.NTE02.060 | Removed EIC TU |
| X222.430.2420A.NM108.020 | Changed T to C |
| X222.465.2420F.NM108.010 | Changed to CSCC A6: "Acknowledgement/Rejected for Missing Information..." |
| X222.465.2420F.NM108.020 | Changed to CSCC A6: "Acknowledgement/Rejected for Missing Information..." |
| X222.390.2400.DTP03.020 | Added "CSC 701 "Initial Treatment Date" |
| X222.389.2400.DTP03.020 | Added "CSC 210 "Date of the Last X-ray" |
| X222.387.2400.DTP03.020 | Added "CSC 653 "Test Performed Date" |
| X222.385.2400.DTP03.020 | Added "CSC 580 "Last Certification Date" |
| X222.081.2000A..010 | Added "IK304 = 17: "Implementation Loop Occurs Under Minimum Times" |
| X222.114.2000B.. 010 | Added "IK304 = 17: "Implementation Loop Occurs Under Minimum Times" |
| X222.116.2000B.SBR. 010 | Changed from >1 to 1 |
| X222.081.2000A..020 | Added "IK304 = 4: "Loop Occurs Over Maximum Times" |
| X222.087.2010AA.NM108.010 | Changed to "CSCC A8: "Acknowledgement / Rejected for relational field in error" and added EIC 85 |
| X222.087.2010AA.NM108.020 | Changed to "CSCC A6: "Acknowledgement/Rejected for Missing Information..." and changed T to C |
| X222.257.2310A.NM108.020 | Changed to "CSCC A8: "Acknowledgement / Rejected for relational field in error", added EIC DN, and changed T to C |
| X222.257.2310A.NM108.030 | Changed to "CSCC A6: "Acknowledgement/Rejected for Missing Information...", added EIC DN, and changed T to C |
| X222.262.2310B.NM108.010 | Changed to "CSCC A8: "Acknowledgement / Rejected for relational field in error" and added EIC 82 |
| X222.262.2310B.NM108.020 | Changed to "CSCC A6: "Acknowledgement/Rejected for Missing Information..." and changed T to C |
| X222.280.2310D.NM108.010 | Changed to "CSCC A8: "Acknowledgement / Rejected for relational field in error" and added EIC DQ |
| X222.280.2310D.NM108.020 | Changed to "CSCC A6: "Acknowledgement/Rejected for Missing Information..." and added EIC DQ |
| X222.430.2420A.NM108.010 | Changed to "CSCC A8: "Acknowledgement / Rejected for relational field in error" |
| X222.436.2420B.NM108.020 | Changed to "CSCC A6: "Acknowledgement/Rejected for Missing Information...", added EIC QB, and changed T to C |
| X222.449.2420D.NM108.010 | Changed to "CSCC A8: "Acknowledgement / Rejected for relational field in error" and added EIC DQ |
| X222.449.2420D.NM108.020 | Changed to "CSCC A6: "Acknowledgement/Rejected for Missing Information...", added EIC DQ, and changed T to C |
| X222.454.2420E.NM108.020 | Changed to "CSCC A6: "Acknowledgement/Rejected for Missing Information...", added EIC DK, and changed T to C |
| X222.465.2420F.NM108.010 | Changed to "CSCC A8: "Acknowledgement / Rejected for relational field in error" and added EIC DN |
| X222.257.2310A.NM108.030 | Changed to 999R and moved below other NM108 edits |
| X222.465.2420F.NM108.040 | Removed edit 999R "IK403 = 2 "Conditional Required Data Element Missing"...If 2420F.NM108 is present, 2420F.NM109 must be present. |


| X222.305.2320.AMT02.010 | Added "2320.AMT02 must be <= 99,999.99" to CEDI column |
| :---: | :---: |
| X222.480.2430.SVD06.030 | Removed edit 277 T "CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& "CSC 526: "Bundled or Unbundled Line Number" 2430.SVD06 must be > 0 |
| X222.484.2430.CAS. 020 | Changed to IK304 = 5: "Segment Exceeds Maximum Use" |
| X222.484.2430.CAS01.030 | Added EIC GB |
| X222.484.2430.CAS03.040 | Added CSC 519: "Adjustment Amount" and EIC GB |
| X222.484.2430.CAS12.060 | Added CSC 519: "Adjustment Amount" and EIC GB |
| X222.484.2430.CAS17.020 | Added CSCC A8 Acknowledgement / Rejected for relational field in error, CSC 521: Adjustment Reason Code, CSC 516: Adjudication or Payment Date, and EIC: GB Other Insured |
| X222.484.2430.CAS13.020 | Changed 999R to 999E |
| X222.484.2430.CAS18.060 | Added CSC 519: "Adjustment Amount" and EIC GB |
| X222.484.2430.CAS06.060 | Added CSC 519: "Adjustment Amount" and EIC GB |
| X222.484.2430.CAS04.020 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information...", CSC 512: "Length invalid for receiver's application system", CSC 519: "Adjustment Amount", and EIC: GB Other Insured |
| X222.484.2430.CAS07.030 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information...", CSC 512: "Length invalid for receiver's application system", CSC 519: "Adjustment Amount", and EIC: GB Other Insured |
| X222.484.2430.CAS10.030 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information...", CSC 512: "Length invalid for receiver's application system", CSC 519: "Adjustment Amount", and EIC: GB Other Insured |
| X222.484.2430.CAS13.030 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information...", CSC 512: "Length invalid for receiver's application system", CSC 519: "Adjustment Amount", and EIC: GB Other Insured |
| X222.484.2430.CAS16.030 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information...", CSC 512: "Length invalid for receiver's application system", CSC 519: "Adjustment Amount", and EIC: GB Other Insured |
| X222.484.2430.CAS19.030 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information...", CSC 512: "Length invalid for receiver's application system", CSC 519: "Adjustment Amount", and EIC: GB Other Insured |
| X222.104.2010AB.N403.020 | Changed from T to C |
| X222.452.2420D.REF02.030 | Corrected loop reference in edit from 2310B to 2420D |
| X222.142.2000C.HL. 010 | Changed T to C |
| X222.144.2000C.PAT. 010 | Changed T to C |
| X222.147.2010CA.NM1.010 | Changed T to C |
| X222.149.2010CA.N3.010 | Changed T to C |
| X222.150.2010CA.N4.010 | Changed T to C |
| X222.152.2010CA.DMG. 010 | Changed T to C |
| X222.154.2010CA.REF. 010 | Changed T to C |
| X222.155.2010CA.PER. 010 | Changed T to C |
| X222.125.2010BA.N403.030 | Loop references corrected from 2010AB to 2010BA |
| X222.074.1000A.NM103.040 | Changed to 999R |
| X222.074.1000A.NM104.060 | Changed to 999R |
| X222.074.1000A.NM105.060 | Changed to 999R |
| X222.074.1000A.NM109.050 | Changed to 999R |
| X222.076.1000A.PER02.080 | Changed to 999R |
| X222.076.1000A.PER04.050 | Changed to 999R |

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| X222.076.1000A.PER06.050 | Changed to 999R |
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| X222.104.2010AB.N403.010 | Changed to 999R |
| X222.125.2010BA.N403.010 | Changed to 999R |
| X222.076.1000A.PER08.050 | Changed to 999R |
| X222.326.2330B.REF02.040 | Changed to 999E |
| X222.434.2420A.REF02.040 | Changed to 999E |
| X222.104.2010AB.N403.030 | Edit deactivated (hidden) |
| X222.125.2010BA.N403.030 | Edit deactivated (hidden) |
| X222.136.2010BB.N403.020 | Changed to CSCC A8: "Acknowledgement / Rejected for relational field in error" |
| X222.288.2310E.N403.020 | Changed to CSCC A8: "Acknowledgement / Rejected for relational field in error" |
| X222.293.2310F.N403.020 | Changed to CSCC A8: "Acknowledgement / Rejected for relational field in error" |
| X222.317.2330A.N403.020 | Changed to CSCC A8: "Acknowledgement / Rejected for relational field in error" |
| X222.323.2330B.N403.020 | Changed to CSCC A8: "Acknowledgement / Rejected for relational field in error" |
| X222.458.2420E.N403.020 | Added: CSCC A8: "Acknowledgement / Rejected for relational field in error" |
| X222.473.2420G.N403.020 | Added: CSCC A8: "Acknowledgement / Rejected for relational field in error" |
| X222.478.2420H.N403.020 | Added: CSCC A8: "Acknowledgement / Rejected for relational field in error" |
| X222.131.2010BA.PER06.020 | Changed to 999R |
| X222.074.1000A.NM103.020 | Changed to 999R |
| X222.074.1000A.NM104.010 | Changed to 999R |
| X222.074.1000A.NM104.030 | Changed to 999R |
| X222.074.1000A.NM104.050 | Changed to 999R |
| X222.074.1000A.NM105.020 | Changed to 999R |
| X222.074.1000A.NM105.040 | Changed to 999R |
| X222.074.1000A.NM109.030 | Changed to 999R |
| X222.074.1000A.NM109.070 | Changed to 999R and changed to IK403=I12 |
| X222.076.1000A.PER02.020 | Changed to 999R |
| X222.076.1000A.PER02.040 | Changed to 999R |
| X222.076.1000A.PER02.060 | Changed to 999R |
| X222.076.1000A.PER04.030 | Changed to 999R |
| X222.076.1000A.PER06.030 | Changed to 999R |
| X222.076.1000A.PER08.030 | Changed to 999R |
| X222.103.2010AB.N302.060 | Added: IK403 = 6: "Invalid Character in Data Element" |
| X222.133.2010BB.NM109.050 | Added to CEDI: 2010BB.NM109 must be populated with accepted AN characters. |
| X222.277.2310C.PER04.050 | Added to CEDI: 1000A.PER04 must be populated with accepted AN characters. |
| X222.277.2310C.PER06.050 | Added to CEDI: 1000A.PER06 must be populated with accepted AN characters. |
| X222.397.2400.REF02.050 | Added to CEDI: 2400.REF02 must be populated with accepted AN characters. |
| X222.398.2400.REF02.050 | Added to CEDI: 2400.REF02 must be populated with accepted AN characters. |
| X222.326.2330B.REF02.045 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 128: "Entity's tax id" EIC: TBD for "Other Payer" |
| X222.434.2420A.REF02.045 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 560: "Entity's Additional/Secondary Identifier" EIC 82 Rendering Provider |


| X222.098.2010AA.PER06.020 | Changed to 999E |
| :---: | :---: |
| X222.098.2010AA.PER06.025 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length Invalid" CSC 127: "Entity's Phone Number" EIC: 85 Billing Provider |
| X222.098.2010AA.PER08.02 | Changed to 999E |
| X222.098.2010AA.PER08.025 | NEW EDIT: 277T CSCC A7: "Acknowledgement/Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" EIC: 85 billing Provider |
| X222.131.2010BA.PER04.050 | Added: CSC 512: "Length Invalid" |
| X222.157.2300.CLM01.040 | Added: CSC 512: "Length Invalid" |
| X222.328.2330B.REF02.025 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length Invalid" CSC 48: "Referral/authorization" EIC: TBD for "Other Payer" |
| X222.329.2330B.REF02.020 | Changed to 999E |
| X222.329.2330B.REF02.025 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length Invalid" CSC 48: "Referral/authorization" EIC: TBD for "Other Payer" |
| X222.331.2330B.REF02.020 | Changed to 999E |
| X222.331.2330B.REF02.025 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length Invalid" CSC 464: "Payer Assigned Claim Control Number" EIC: TBD for "Other Payer" |
| X222.359.2400.SV503.025 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| X222.359.2400.SV504.035 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| X222.359.2400.SV505.035 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| X222.368.2400.CR102.015 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| X222.368.2400.CR106.035 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| X222.371.2400.CR303.015 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| X222.391.2400.QTY02.035 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| X222.392.2400.QTY02.035 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| X222.393.2400.MEA03.025 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| X222.415.2400.PS101.025 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| X222.426.2410.CTP04.015 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| X222.428.2410.REF02.035 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length Invalid" CSC 219: "Prescription number" |
| X222.475.2420H.NM103.025 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length Invalid" CSC 504: "Entity's Last Name" CSC 266: "Facility point of origin and destination - ambulance" |
| X222.480.2430.SVD06.030 | Changed to 999E |
| X222.480.2430.SVD06.035 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length Invalid" |
| X222.326.2330B.REF02.030 | Changed to 999E |
| X222.326.2330B.REF02.035 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length Invalid" CSC 128: "Entity's tax id" EIC: TBD for "Other Payer" |
| X222.434.2420A.REF02.030 | Changed to 999E |
| X222.434.2420A.REF02.035 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length Invalid" CSC 560: "Entity's Additional/Secondary Identifier" EIC 82 Rendering Provider |
| X222.480.2430.SVD05.025 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |


| X222.480.2430.SVD05.035 | NEW EDIT: 999E IK403 = 5: "Data Element Too Long" |
| :---: | :---: |
| X222.434.2420A.REF02.050 | Changed to IK403 = 6: "Invalid Character in Data Element" |
| X222.116.2000B.SBR04.060 | Changed to 999R |
| X222.131.2010BA.PER04.020 | Changed to 999R |
| X222.116.2000B.SBR01.020 | Changed to 999R |
| X222.074.1000A.NM104.025 | Edit deactivated (hidden) |
| X222.074.1000A.NM103.050 | Edit deactivated (hidden) |
| X222.074.1000A.NM104.020 | Edit deactivated (hidden) |
| X222.074.1000A.NM104.040 | Edit deactivated (hidden) |
| X222.074.1000A.NM104.070 | Edit deactivated (hidden) |
| X222.074.1000A.NM105.030 | Edit deactivated (hidden) |
| X222.074.1000A.NM105.050 | Edit deactivated (hidden) |
| X222.074.1000A.NM105.070 | Edit deactivated (hidden) |
| X222.074.1000A.NM109.040 | Edit deactivated (hidden) |
| X222.074.1000A.NM109.060 | Edit deactivated (hidden) |
| X222.076.1000A.PER02.030 | Edit deactivated (hidden) |
| X222.076.1000A.PER02.050 | Edit deactivated (hidden) |
| X222.076.1000A.PER02.070 | Edit deactivated (hidden) |
| X222.076.1000A.PER02.090 | Edit deactivated (hidden) |
| X222.076.1000A.PER04.040 | Edit deactivated (hidden) |
| X222.076.1000A.PER04.060 | Edit deactivated (hidden) |
| X222.076.1000A.PER06.040 | Edit deactivated (hidden) |
| X222.076.1000A.PER06.060 | Edit deactivated (hidden) |
| X222.076.1000A.PER08.040 | Edit deactivated (hidden) |
| X222.076.1000A.PER08.060 | Edit deactivated (hidden) |
| X222.351.2400.SV103.020 | Changed to 277C and CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD29: Anesthesia Unit Qualifier |
| 2010AA.NM108 | Changed all to 277/situational data required. |
| X222.328.2330B.REF02.020 | Changed to 999E |
| X222.428.2410.REF03.010 | Changed to 999E |
| X222.428.2410.REF04.010 | Changed to 999E |
| X222.087.2010AA.NM109.050 | Changed to 999R and IK403 = I12: "Implementation Pattern Match Failure" |
| X222.480.2430.SVD05.050 | Changed to IK403 = 6: "Invalid Character in Data Element" |
| X222.305.2320.AMT02.020 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.305.2320.AMT02.040 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.305.2320.AMT02.050 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.305.2320.AMT02.060 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.320.2330B.NM103.040 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.320.2330B.NM103.060 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.322.2330B.N301.040 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.322.2330B.N301.060 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |


| X222.322.2330B.N302.040 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| :---: | :---: |
| X222.322.2330B.N302.060 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.323.2330B.N401.040 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.323.2330B.N401.060 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.323.2330B.N402.020 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.323.2330B.N403.020 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.323.2330B.N407.010 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.326.2330B.REF02.020 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.326.2330B.REF02.035 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.326.2330B.REF02.045 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.328.2330B.REF02.025 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.328.2330B.REF02.040 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.329.2330B.REF02.025 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.329.2330B.REF02.040 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.331.2330B.REF02.025 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.331.2330B.REF02.040 | Replaced a TBD EIC with CSC 286: Other payer's Explanation of Benefits/payment information |
| X222.106.2010AC. 010 | Edit deactivated (hidden) |
| X222.106.2010AC.NM1.010 | Changed to 277T |
| X222.108.2010AC.N3.010 | Changed to 277T |
| X222.109.2010AC.N4.010 | Changed to 277T |
| X222.111.2010AC.REF. 010 | Changed to 277T |
| X222.113.2010AC.REF. 020 | Changed to 277T |
| X222.142.2000C.HL. 010 | Changed to 277T |
| X222.144.2000C.PAT. 010 | Changed to 277T |
| X222.147.2010CA.NM1.010 | Changed to 277T |
| X222.149.2010CA.N3.010 | Changed to 277T |
| X222.150.2010CA.N4.010 | Changed to 277T |
| X222.152.2010CA.DMG. 010 | Changed to 277T |
| X222.154.2010CA.REF.010 | Changed to 277T |
| X222.155.2010CA.PER.010 | Changed to 277T |
| X222.092.2010AA.N407.010 | Edit deactivated (hidden) |
| X222.092.2010AA.N407.020 | Edit deactivated (hidden) |
| X222.092.2010AA.N407.005 | NEW EDIT: 999E IK403 = I10: "Implementation "Not Used" Element Present" |
| X222.104.2010AB.N407.005 | NEW EDIT: 999E IK403 = I10: "Implementation "Not Used" Element Present" |
| X222.104.2010AB.N407.010 | Edit deactivated (hidden) |
| X222.104.2010AB.N407.020 | Edit deactivated (hidden) |
| X222.136.2010BB.N407.005 | NEW EDIT: 999E IK403 = I10: "Implementation "Not Used" Element Present" |
| X222.136.2010BB.N407.010 | Edit deactivated (hidden) |
| X222.273.2310C.N407.005 | NEW EDIT: 999E IK403 = I10: "Implementation "Not Used" Element Present" |
| X222.273.2310C.N407.010 | Edit deactivated (hidden) |
| X222.288.2310E.N407.005 | NEW EDIT: 999E IK403 = I10: "Implementation "Not Used" Element Present" |

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| X222.288.2310E.N407.010 | Edit deactivated (hidden) |
| :---: | :---: |
| X222.293.2310F.N407.005 | NEW EDIT: 999E IK403 = I10: "Implementation "Not Used" Element Present" |
| X222.293.2310F.N407.010 | Edit deactivated (hidden) |
| X222.323.2330B.N407.005 | NEW EDIT: 999E IK403 = I10: "Implementation "Not Used" Element Present" |
| X222.323.2330B.N407.010 | Edit deactivated (hidden) |
| X222.445.2420C.N407.005 | NEW EDIT: 999E IK403 = I10: "Implementation "Not Used" Element Present" |
| X222.445.2420C.N407.010 | Edit deactivated (hidden) |
| X222.458.2420E.N407.005 | NEW EDIT: 999E IK403 = I10: "Implementation "Not Used" Element Present" |
| X222.458.2420E.N407.010 | Edit deactivated (hidden) |
| X222.473.2420G.N407.005 | NEW EDIT: 999E IK403 = I10: "Implementation "Not Used" Element Present" |
| X222.473.2420G.N407.010 | Edit deactivated (hidden) |
| X222.478.2420H.N407.005 | NEW EDIT: 999E IK403 = I10: "Implementation "Not Used" Element Present" |
| X222.478.2420H.N407.010 | Edit deactivated (hidden) |
| X222.127.2010BA.DMG04.020 | Edit deactivated (hidden) |
| X222.074.1000B.NM109.020 | NEW EDIT: 999R IK403 = 6: "Invalid Character in Data Element" |
| X222.074.1000B.NM109.030 | NEW EDIT: 999R IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" |
| X222.074.1000B.NM109.040 | NEW EDIT: 999R IK403 = 6: "Invalid Character in Data Element" |
| X222.133.2010BB.NM109.025 | NEW EDIT: 277 C CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 21: "Missing or Invalid Information" <br> CSC 153: "Entity ID Number" <br> EIC "PR" Payer <br> CSC 153: "Entity ID Number" <br> EIC 40: "Reciever" |
| X222.133.2010BB.NM109.030 | Corrected column R \& S language to reflect a "size" edit |
| X222.226.2300.HIO4-2.050 | Changed CSC to 255 "Diagnosis code" |
| X222.287.2310E.N301.040 | Changed EIC 266 to CSC 266 |
| X222.287.2310E.N301.060 | Changed EIC 266 to CSC 266 |
| X222.287.2310E.N302.040 | Changed EIC 266 to CSC 266 |
| X222.287.2310E.N302.060 | Changed EIC 266 to CSC 266 |
| X222.288.2310E.N401.040 | Changed EIC 266 to CSC 266 |
| X222.288.2310E.N401.060 | Changed EIC 266 to CSC 266 |
| X222.288.2310E.N402.020 | Changed EIC 266 to CSC 266 |
| X222.288.2310E.N403.020 | Changed EIC 266 to CSC 266 |
| X222.290.2310F.NM103.030 | Changed EIC 266 to CSC 266 |
| X222.290.2310F.NM103.050 | Changed EIC 266 to CSC 266 |
| X222.292.2310F.N301.040 | Changed EIC 266 to CSC 266 |
| X222.292.2310F.N301.060 | Changed EIC 266 to CSC 266 |
| X222.292.2310F.N302.040 | Changed EIC 266 to CSC 266 |
| X222.292.2310F.N302.060 | Changed EIC 266 to CSC 266 |
| X222.293.2310F.N401.040 | Changed EIC 266 to CSC 266 |

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| X222.293.2310F.N401.060 | Changed EIC 266 to CSC 266 |
| :--- | :--- |
| X222.293.2310F.N402.020 | Changed EIC 266 to CSC 266 |
| X222.293.2310F.N403.020 | Changed EIC 266 to CSC 266 |
| X222.091.2010AA.N302.005 | Edit relocated (X222.091.2010AA.N302.050) |
| X222.091.2010AA.N302.050 | Edit deactivated (hidden) |
| X222.103.2010AB.N302.020 | Edit deactivated (hidden) |
| X222.103.2010AB.N302.030 | Edit deactivated (hidden) |
|  | NEW EDIT: CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 512: "Length Invalid" <br> CSC 126: "Entity's Address" <br> EIC: 87 Pay-to Provider |
| X222.103.2010AB.N302.045 | Edit deactivated (hidden) |
| X222.124.2010BA.N302.010 | Edit deactivated (hidden) |
| X222.135.2010BB.N302.010 | Edit deactivated (hidden) |
| X222.272.2310C.N302.010 | Edit deactivated (hidden) |
| X222.287.2310E.N302.010 | Edit deactivated (hidden) |
| X222.292.2310F.N302.010 | Edit deactivated (hidden) |
| X222.316.2330A.N302.010 | Edit deactivated (hidden) |
| X222.322.2330B.N302.010 | Edit deactivated (hidden) |
| X222.444.2420C.N302.010 | Edit deactivated (hidden) |
| X222.457.2420E.N302.010 | Edit deactivated (hidden) |
| X222.472.2420G.N302.010 | Edit deactivated (hidden) |
| X222.477.2420H.N302.010 | Edit relocated (X222.316.2330A.N301.060) |
| X222.316.2330A.N301.015 | Edit deactivated (hidden) |
| X222.316.2330A.N301.060 | Edit deactivated (hidden) |
| X222.257.2420F.NM109.050 | NEW EDIT added |
| X222.465.2420F.NM109.050 | Edit deactivated (hidden) |
| X222.332.2330C.NM1.010 | NEW EDIT added |
| X222.332.2330C..010 | NEW EDIT: CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> TBD02: "Payer specific restrictions on the number of repetitions" |
| X222.336.2330D..010 | NEW EDIT: CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> TBD02: "Payer specific restrictions on the number of repetitions" |
| X222.340.2330E..010 | NEW EDIT: CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> TBD02: "Payer specific restrictions on the number of repetitions" |
| X222.343.2330F..010 | NEW EDIT: CSCC A7: "Acknowledgement /Rejected for Invalid Information..." |
| TBD02: "Payer specific restrictions on the number of repetitions" |  |
| X222.347.2330G..010 | Changed to 999R |
| X222.439.2420B.REF.030 | Changed to 999R |
| X222.452.2420D.REF.030 | NEW EDIT: 999R IK403 = I10: "Implementation "Not Used" Element Present" (Everyone but TrailBlazer) |
| $\times 222.283 .2310 D . R E F .015$ |  |

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| X222.277.2310C.PER04.050 | Corrected typo in loop reference (Column R) from 1000A to 2310C |
| :---: | :---: |
| X222.277.2310C.PER05.020 | Corrected typo in loop reference (Column R) from 1000A to 2310C |
| X222.277.2310C.PER06.020 | Corrected typo in loop reference (Column R) from 1000A to 2310C |
| X222.277.2310C.PER06.050 | Corrected typo in loop reference (Column R) from 1000A to 2310C |
| X222.277.2310C.PER04.020 | Corrected typo in loop reference (Column R) from 2010BA to 2310C |
| X222.182.2300.PWK06.070 | Edit deactivated (hidden) |
| X222.096.2010AA.REF02.030 | Edit deactivated (hidden) (replaced by X222.140.2010BB.REF02.070) |
| X222.140.2010BB.REF02.070 | NEW EDIT: 999R IK403 = I12: "Implementation Pattern Match Failure" (replaces X222.096.2010AA.REF02.030) |
| X222.092.2010AA.N402.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.092.2010AA.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.104.2010AB.N402.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.104.2010AB.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.125.2010BA.N402.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.125.2010BA.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.136.2010BB.N402.020 | Reworded proposed edit |
| X222.136.2010BB.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.273.2310C.N402.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.273.2310C.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.288.2310E.N402.020 | Reworded proposed edit |
| X222.293.2310F.N402.020 | Reworded proposed edit |
| X222.293.2310F.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.317.2330A.N402.020 | Reworded proposed edit |
| X222.317.2330A.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.323.2330B.N402.020 | Reworded proposed edit |
| X222.323.2330B.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.445.2420C.N402.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.445.2420C.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.458.2420E.N402.020 | Reworded proposed edit |
| X222.458.2420E.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.473.2420G.N402.020 | Reworded proposed edit |
| X222.473.2420G.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.478.2420H.N402.020 | Reworded proposed edit |
| X222.478.2420H.N403.020 | Changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." \& reworded proposed edit |
| X222.351.2400.SV101-3.010 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information..." |
| X222.351.2400.SV101-3.020 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information..." |
| X222.480.2430.SVD02.070 | Added CSCC A7: "Acknowledgement /Rejected for Invalid Information..." |
| X222.351.2400.SV102.025 | Edit reference number addded to row. Is not a new edit. |
| X222.119.2000B.PAT08.020 | Changed to 277C |

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| X222.119.2000B.PAT08.025 | NEW EDIT: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 697: "Too many decimal positions" <br> CSC 273: "Weight" <br> EIC: IL Subscriber |
| :---: | :---: |
| X222.114.2000B.HL04.020 | Changed to 277T |
| X222.305.2320.AMT02.060 | Revised proposed edits |
| X222.351.2400.SV102.060 | NEW EDIT: 277C CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 400: "Claim is out of balance: <br> CSC 583:"Line Item Charge Amount" <br> CSC 643: "Service Line Paid Amount" |
| X222.157.2300.CLM02.080 | NEW EDIT: 277C CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 400: "Claim is out of Balance" CSC 672 "Payer's payment information is out of balance" |
| General | Balancing tab removed. Balancing edits incorporated into spreadsheet |
| General | Edit rules worksheet added |
| General | Style sheet removed |
| X222.295.2320.SBR04.010 | Re-worded proposed edit language |
| X222.116.2000B.SBR04.070 | Edit deactivated (hidden) |
| X222.116.2000B.SBR04.015 | Edit relocated (X222.116.2000B.SBR04.060) |
| X222.116.2000B.SBR04.060 | Edit deactivated (hidden) |
| X222.328.2330B.REF02.025 | Added 277T |
| X222.124.2010BA.N301.020 | Corrected proposed edit reference from N302 to N301 |
| X222.121.2010BA.NM102.020 | Changed to 277C |
| X222.121.2010BA.NM104.010 | Changed to 277C |
| X222.391.2400.QTY02.035 | Corrected proposed edit reference from CR106 to QTY02 |
| X222.119.2000B.PAT08.015 | NEW EDIT added: 999E IK403 = 5: "Data Element Too Long" |
| X222.119.2000B.PAT08.020 | Changed to 277T |
| X222.C7..GS07.010 | Changed to TA1 |
| X222.C7..GS07.020 | Changed to TA1 |
| X222.074.1000B.NM109.050 | NEW EDIT added: IK403 = I12: "Implementation Pattern Match Failure" |
| X222.074.1000B.NM109.020 | Edit deactivated (hidden) see X222.074.1000B.NM109.050 above |
| X222.074.1000B.NM109.030 | Edit deactivated (hidden) see X222.074.1000B.NM109.050 above |
| X222.074.1000B.NM109.040 | Edit deactivated (hidden) see X222.074.1000B.NM109.050 above |
| X222.157.2300.CLM02.080 | Proposed edit language changed to read "CLM02 must equal the sum of all 2320 \& 2430 CAS amounts and the 2320 AMT02 (AMT01=D)." |
| X222.496..SE. 020 | Edit deactivated (hidden) |
| X222.C8..GE. 020 | Edit deactivated (hidden) |
| X222.252.2300.HCP01.010 | Removed value 06 from column N |
| Edits Rules | Changes made to row 105. Added new rows 58, 101, and 145. |
| X222.305.2320.AMT02.040 | Changed to 277C |
| X222.306.2320.AMT02.060 | Changed to 277C |


| X222.307.2320.AMT02.005 | Edit relocated (X222.307.2320.AMT02.030) |
| :---: | :---: |
| X222.307.2320.AMT02.030 | Edit deactivated (hidden) |
| X222.307.2320.AMT02.040 | Edit deactivated (hidden) |
| X222.307.2320.AMT02.025 | NEW EDIT added: 277T CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 697: "Too many decimal positions" <br> CSC 6 Balance due from the subscriber. <br> EIC: GB Other Insured |
| General | Removed 4010A1 values column |
| X222.116.2000B.SBR05.030 | Changed to 277C |
| X222.138.2010BB.REF. 010 | Changed to 277C |
| X222.310.2320.MOA02.040 | Changed to 277C |
| X222.310.2320.MOA08.040 | Changed to 277C |
| X222.310.2320.MOA09.040 | Changed to 277C |
| X222.351.2400.SV107-1.020 | Changed to 277C |
| X222.351.2400.SV107-2.020 | Changed to 277C |
| X222.351.2400.SV107-3.020 | Changed to 277C |
| X222.351.2400.SV107-4.020 | Changed to 277C |
| X222.410.2400.AMT02.030 | Changed to 277C |
| X222.351.2400.SV101-7.040 | Removed incorrect proposed edit language |
| X222.362.2400.PWK06.040 | Removed incorrect proposed edit language |
| X222.188.2300.AMT02.030 | Changed to 277C |

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| $1 / 6 / 2010$ | Spreadsheet consistency |
| $1 / 6 / 2010$ | Spreadsheet consistency |
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| $1 / 8 / 2010$ | Corrects page reference from 257 to 465 |
| $1 / 8 / 2010$ | Incorrect edit reference |
| $1 / 8 / 2010$ | Corrects edit reference from |
| X222.332.2330C.NM1.010 to X222.332.2330C.. 010 |  |
| $1 / 8 / 2010$ | VMS comment |
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| $1 / 8 / 2010$ | NHIC comment |
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| $1 / 13 / 2010$ | Per Gary |
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| $2 / 17 / 2010$ | Spreadsheet consistency |
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| $2 / 19 / 2010$ | FCSO comment |
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| $2 / 25 / 2010$ | CMS direction |
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| $2 / 25 / 2010$ | FCSO comment (873I) |
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| $2 / 25 / 2010$ | FCSO comment (873I) |
| $2 / 25 / 2010$ | FCSO comment (873I) |
|  |  |
| $2 / 25 / 2010$ |  |
|  | FCSO comment (873I) |
| $3 / 1 / 2010$ | CMS decision |
| $3 / 1 / 2010$ | FCSO comment |
| $3 / 1 / 2010$ | FCSO comment |
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| $3 / 1 / 2010$ | CMS |
| $3 / 1 / 2010$ | CMS |
| $3 / 1 / 2010$ | CMS |

## Spreadsheet Details

An Edit Identifier is used to uniquely identify each row in an Edit Spreadsheet. It consists of the following fields separated by periods:

* TR3 Identifier.
* TR3 Page reference for the segment identified.
* TR3 Loop ID (if there is no loop ID there will be two periods together).
* Segment ID and Element Position.
* Edit Number (within the Segment ID / Element Position).
- The "Accept/Reject" Column will be populated with one of the following values as indicated below:
* R - The transaction set (ST-SE) is rejected back to the submitter.
* E - The transaction set (ST-SE) is passed to the CEM where additional validation occurs. Rejections for both syntax and business reasons will occur at the claim level within the CEM.
* T- The error is identified in the translator and an STC record is added to the 837 flat file following the segment that had the error.
* C - The error is identified in the CEM, a 277CA flat file, including the business error information, will be generated.


## - Acronyms:

* CSC - Claim Status Code.
* CSCC - Claim Status Category Code.
* EIC - Entity Identifier Code.


## - Edit inclusion methodology:

* If a segment/element/composite is required, based on either guide usage or by situational rule interpretation, there will be an edit that indicates it must be present.
* If a segment/element/composite is not used, based on either guide usage or by situational rule interpretation, there will be an edit that indicates that it must not be present.
* If a segment/element/composite does not have either of those explicit notations, the edits listed will apply when the segment/element/component is present.


## - Assumptions:

instructions or add Medicare specific requirements. Unless otherwise explicitly specified in the EDITS worksheet, all X12 IG instructions must be followed.
constraints or business rules. This notation indicates that the information is stored on the repository but not used in any CMS system processing.

* Front End processing will determine billing criteria (inpatient, outpatient, POA, etc.) based on the NUBC manual. Specific criteria will not be included in this document.
included when they can be consistently enforced by a transaction receiver. In the absence of consistently enforceable criteria, no edit will be included to control inclusion/exclusion.
Example: 2320 COB Payer Amt Paid - there is no way for the receiver to determine whether the claim has been adjudicated by the payer in Loop 2330B, so no edit will be included for that criteria.
* Format definitions, rules, restrictions, guidance, or instructions published by the code set owner of an external code set must be met for a code from an external code set to be noted as "valid". qualifier clause (Only one iteration of $2300 . \mathrm{HI}$ with HI01-1 = "DR" is allowed), otherwise the segment edit will just include the number of iterations allowed (Only one iteration of 2310C.NM1 is allowed).


## - Valid dates - dates must be valid according to the calendar for the specific year.

* Only 01-12 are valid for the month positions of the date field.
* If month is "01", the day positions may be populated with 01-31.
* If month is "02", the day positions may be populated with 01-28, except during leap years (2008 was a leap year, leap years occur every 4 years) when the day positions may be populated with 01-29.
* If month is "03", the day positions may be populated with 01-31.
* If month is "04", the day positions may be populated with 01-30.
* If month is "05", the day positions may be populated with 01-31.
* If month is "06", the day positions may be populated with 01-30.
* If month is "07", the day positions may be populated with 01-31.
* If month is "08", the day positions may be populated with 01-31.
* If month is "09", the day positions may be populated with 01-30.
* If month is "10", the day positions may be populated with 01-31.
* If month is "11", the day positions may be populated with 01-30.
* If month is "12", the day positions may be populated with 01-31.


## - Future Date edits:

* Edits restricting a date field from being a "future date" should be evaluated against the date the file was received.


## - ICD Codes:

* Edits that are specific to the period when ICD-9 is allowed are highlighted in pink.
* Edits that are specific to the period when ICD-10 is allowed are highlighted in turquoise.


## - Numeric edits:

* Positive/Negative/Zero:
- Any numeric value with an edit that indicates it must be $>=0$ means that negative numbers are not allowed.
- Any numeric value with an edit that indicates it must be $>0$ means that neither zero nor negative numbers are allowed.
- If neither of these explicit edit are present, negative, zero, and positive numbers are allowed.
* If an edit references a numeric value (must be >=, <= or = with a numeric limitation) implies a numeric content requirement so the standard numeric check will not be included.
* The words "digit" or "digits" in an edit implies numeric content.
- Alphanumeric edits:
* The words "character" or "characters" in an edit implies alphanumeric content.
* If the data of an AN element or composite is from an external code list, the standard AN edits will not be included.
- If an edit contains a bracketed clause, [clause], each contractor must supply the information noted in the edit (e.g. receiver code).


## Terms and Definitions

The flow of the transactions is:

* Front end processing - commercial translator edits, specific to each contractor.
- EDI syntax integrity validation

Valid Segments (e.g. valid segment identifier, number of elements, delimiters)
Segment order (as defined by the X12 / NCPDP standard)
Element Attributes (e.g. X12 usage, repetitions, data type, and min/max size)
Numeric element validation (e.g. leading minus signs, decimal points for R data types)
X12 / NCPDP syntactical rules

- HIPAA syntax integrity validation based upon adopted specifications (X12 / NCPDP)

Repeat maximums for segments, loops, elements (when repeating element are used)

- Used and un-used qualifiers, (internal) codes, elements, and segments
- Intra-segment situational data elements (e.g. DTP for auto accident becomes required when

CLM011-1 or CLM11-2 is "AA" or "OA")

## * Common edit module - identical processing across contractors

- External code source validation
- All CMS business rule validation that is evaluated post-translation
- Balancing edits
- Situation based edits
- Code Set edits
- Product Type/Type of Service edits
* Shared system - CMS claims processing system.

277 - Denotes that a 277 acknowledgement will be returned to the submitter.
common edit module is invoked). When this type of error is identified an STC record is added to the 837 flat file following the segment with the identified error.
type of error is identified an STC record is added to the 277 flat file following the segment with the identified error.

999 - Denotes that a 999 acknowledgement will be returned to the submitter.
rejected back to the submitter. If multiple transaction sets are included in one functional group, only the transaction set with an identified 999R error will be rejected, not all the transaction sets in the functional set (ST-SE) will continue to be evaluated against the translator errors before being passed to the CEM for additional validation. When an error is identified an STC record is added to the 837 flat file following
Exception: If the 999E is based on usage of a "Not Used" element only a 999E will be generated and sent back to the submitter. No corresponding 277 will be created in the flat file for this type of error.

## Assumptions

277 acknowledgements and 999 acknowledgements are not mutually exclusive.

## General Edit Rules:

These are the priority rules. They supersede the secondary rules whenever there is a conflict between the instructions.

999R edits stand alone. They are not associated with a corresponding 277 error.
999E edits are always followed by a 277T edit.

* Exception: a 999E based on usage of a "Not Used" element stands alone.

277C edits stand alone. They are not associated with a corresponding 999 error.
277T edits are usually preceded by a 999E edit but can stand alone.

* Special Case: When an element has more than one error that can be identified in the translator, there can be multiple 277Ts following one 999E.
acknowledged as shown in the spreadsheet. If envelope errors result in a transaction not being recognized as an X12 transaction, contractors have flexibilty on how to acknowlege the transaction.

All Table 1 edits result in a 999R or TA1 rejection.

* Exception: "Not Used" elements will be associated with stand-alone 999E edits.

All Table 2 edits related to CMS business constraints will be associated with a 277 edit.

* EDI Syntax Integrity Validation (WEDI Level 1) or HIPAA Syntax Integrity Validation, which includes Situational Rule Validation (WEDI Level 2) edits will be associated with a 277T edit.
* Common Edit Module validation (WEDI Levels 3 through 6) edits will be associated with a 277C edit.

All Table 2 edits related to CMS technical constraints will be associated with a 999E followed by a 277T edit.

* Examples: amounts or quantities for which CMS's internal system size is smaller than the IG allowed maximum.


## Specific Edit Rules:

These are the secondary rules. They apply only when they do not violate the priority rules.
Loops that are not accepted based on Medicare business rules will be associated with a standalone 277T edit.

Segments that are not accepted based on Medicare business rules will be associated with a standalone 277T edit.

- All "... must be populated with accepted AN characters" edits will be associated with a 999E (IK403=6)/277T edit combination.

All "...must be \# - \#\# characters" edits will be associated with a 999E (IK403=4 or IK403=5)/277T edit combination.

- All "...must be $\{<,>,=,<=,>=\}$ " edits that establish element length will be associated with a 999E (IK403=4 or IK403=5)/277T edit combination.

All "...must contain at least \#\# non-space characters" edits will be associated with a 999R edit (IK403=6).

All "...must be present" edits at the segment level will be associated with a 999R edit (IK304=3).
Exception: if the edit reflects Medicare business rules instead of X12 syntax rules, the edit will be associated with a 277 T edit.

All "...must be present" edits at the element level will be associated with a 999R edit (IK403=1). Exception: if the edit reflects Medicare business rules instead of X12 syntax rules, the edit will be associated with a 277 T edit.

All "If ... is not present, ... must be present" edits at the segment level will be associated with a 999R edit (IK304=16).

- All "If ... is present, ... must be present" edits referring to a relationship between two elements within the same segment will be associated with a 999R edit (IK403=2).

All "If ... is present, ... must be present" edits referring to a relationship between two different segments will be associated with a 277 C edit.
. All "If ...is present, ....may be present" edits referring to a relationship between two elements within the same segment will be associated with a 999R edit (IK403=10).

All "If ... is present, ... may be present" edits referring to a relationship between two different segments will be associated with a 999R edit (IK304=19).

All "...must be valid values" edits will be associated with a 999R edit (IK304=7).

All "...must be \{explicit value\}" edits will be associated with a 999R edit (IK403=7).
All "...must be numeric" edits will be associated with a 999R edit (IK403=6).

All external code source edits will be associated with a 277C edit.

All "must be an integer" edits will be associated with a 999R edit (IK403=6).

All "must be a valid date" edits will be associated with a 999R edit (IK403=8).
All "must be a valid time" edits will be associated with a 999R edit (IK403=8).

All "must not be present" edits at the segment level will be associated with a 277T edit.
All "must not be present" edits at the element level will be associated with a 999E edit (IK403=I10). . All "If ...NM102 is " 2 ", ... must not be present" edits will be associated with a 999R edit (IK403=I13).

- All dollar amounts or numeric elements that use $<,>,=,<=$, or $>=$ to establish value limits will be associated with a 277 T edit.

All edits limiting the number of iterations of a segment will be associated with a 999R (IK304=5).

* Exception: All edits limiting the number of iterations of the first segment of a loop will be associated with a 999R (IK304=4).


## Segment or Element Specific Edit Rules:

## These are the tertiary rules. They apply only when they do not violate the priority or secondary

 rules.In Loops 1000A and 2010AA, NM109 edits referring to "approved electronic submitter" (trading partner management edits) will be associated with a 999R edit (trading partner management edits).

- Elements that are situational in the TR3 but listed as "must not be present" and shaded gray on the edits spreadsheets are not to be mapped to the flat file.

|  | If alternative formats of the 5010 Edits spreadsheet are required, please use the "Submit Feedback" feature at the bottom of the Technical Documentation web page, from which these documents were downloaded. <br> http://www.cms.hhs.gov/MFFS5010D0/20 Technical\%20Documentation.asp\#TopOfPage |  |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999 } \\ 277 C A \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| X223.C3..ISA. 010 | ISA | INTERCHANGE CONTROL HEADER |  | 1 | R | - | 1 |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | ISA must be present. |  |
| X223.C3..ISA. 020 | ISA |  |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | Only one iteration of ISA is allowed. | This error means there can't be more than one ISA segment in this set, not that there can't be more than 1 in a phvsical file |
| X223.C3..ISA01.010 | ISA01 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Authorization Information } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-2 | R |  |  | 00, 03 | TA1 | R | TA105: 010 "Invalid Authorization Information Qualifier Value". | ISA01 must be present. |  |
| х223.C3..ISA01.020 | ISA01 |  |  |  |  |  |  |  | TA1 | R | TA105: 010 "Invalid Authorization Information Qualifier Value". | ISA01 must be valid values. |  |
| X223.C3..ISA02.010 | ISA02 | Authorization Information | AN | 10-10 | R |  |  |  | TA1 | R | TA105: 011 "Invalid Authorization Information Value". | ISA02 must be present. |  |
| X223.C3..ISA02.020 | ISA02 |  |  |  |  |  |  |  | TA1 | R | TA105: 011 "Invalid Authorization Information Value". | ISA02 must be 10 characters. |  |
| X223.C3..ISA02.030 | ISA02 |  |  |  |  |  |  |  | TA1 | R | $\begin{aligned} & \text { TA105: } 011 \text { "Invalid Authorization } \\ & \text { Information Value". } \end{aligned}$ | ISA02 must be populated with accepted AN |  |
| X223.C3..ISA03.010 | ISA03 | Security Information Qualifier | ID | 2-2 | R |  |  | 00, 01 | TA1 | R | $\begin{aligned} & \text { TA105: } 012 \text { "Security Information } \\ & \text { Qualifier Value". } \end{aligned}$ | ISA03 must be present. |  |
| X223.C3.IISA03.020 | ISA03 |  |  |  |  |  |  |  | TA1 | R | TA105: 012 "Security Information Qualifier Value". | ISA03 must be vaild values. |  |
| X223.C3..ISA04.010 | ISA04 | Security Information | AN | 10-10 | R |  |  |  | TA1 | R | TA105: 013 "Security Information Value". | ISA04 must be present. |  |
| х223.C3..ISA04.020 | ISA04 |  |  |  |  |  |  |  | TA1 | R | TA105: 013 "Security Information Value". | ISA04 must be 10 characters. |  |
| X223.C3.ISA04.030 | ISA04 |  |  |  |  |  |  |  | TA1 | R | TA105: 013 "Security Information Value". | ISA04 must be populated with accepted AN characters. |  |
| х223.C3..ISA05.010 | ISA05 | Interchange ID Qualifier | ID | 2-2 | R |  |  | 01, 14, 20, 27, 28, 29, 30, 33, $z Z$ | TA1 | R | TA105: 005 "Invalid Interchange ID Oualifier for Sender". | ISA05 must be present. |  |
| X223.C3..ISA05.020 | ISA05 |  |  |  |  |  |  |  | TA1 | R | TA105: 005 "Invalid Interchange ID Qualifier for Sender". | ISA05 must be "27", "28" or "ZZ". |  |
| X223.C3..ISA06.010 | ISA06 | Interchange Sender ID | AN | 15-15 | R |  |  |  | TA1 | R | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must be present. |  |
| X223.C3..ISA06.020 | ISA06 |  |  |  |  |  |  |  | TA1 | R | $\begin{aligned} & \text { TA105: } 006 \text { "Invalid Interchange } \\ & \text { Sender ID". } \\ & \hline \end{aligned}$ | ISA06 must be 15 characters. |  |
| X223.C3..ISA06.030 | ISA06 |  |  |  |  |  |  |  | TA1 | R | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must contain at least one non-space character. |  |
| X223.C3..ISA06.040 | ISA06 |  |  |  |  |  |  |  | TA1 | R | TA105: 006 "Invalid Interchange Sender ID". | ISA06 must be populated with accepted AN |  |
| X223.C3.IISA07.010 | ISA07 | Interchange ID Qualifier | ID | 2-2 | R |  |  | $\begin{gathered} \hline 01,14,20,27,28,29,30,33, \\ z z \\ \hline \end{gathered}$ | TA1 | R | TA105: 007 "Invalid Interchange ID Qualifier for Receiver" | ISA07 must be present. |  |
| X223.C3.IISA07.020 | ISA07 |  |  |  |  |  |  |  | TA1 | R | TA105: 007 "Invalid Interchange ID Qualifier for Receiver". | ISA07 must be "27", "28" or "ZZ". |  |
| X223.C3.IISA08.010 | ISA08 | Interchange Receiver ID | AN | 15-15 | R |  |  |  | TA1 | R | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must be present. |  |
| X223.C3.IISA08.020 | ISA08 |  |  |  |  |  |  |  | TA1 | R | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must be 15 characters. |  |
| X223.C3.IISA08.030 | ISA08 |  |  |  |  |  |  |  | TA1 | R | TA105: 008 "Invalid Interchange Receiver ID" | ISA08 must contain at least one non-space character. |  |
| X223.C3..ISA08.040 | ISA08 |  |  |  |  |  |  |  | TA1 | R | TA105: 008 "Invalid Interchange Receiver ID". | ISA08 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA111 } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | $\begin{array}{\|c\|} \hline \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.C3..ISA09.010 | ISA09 | Interchange Date | DT | 6-6 | R |  |  |  | TA1 | R | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be present. |  |
| X223.C3..ISA09.020 | ISA09 |  |  |  |  |  |  |  | TA1 | R | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be a valid date in YYMMDD format. |  |
| X223.C3..ISA09.030 | ISA09 |  |  |  |  |  |  |  | TA1 | R | TA105: 014 "Invalid Interchange Date Value". | ISA09 must be a the date of the interchange; must not |  |
| X223.C3..ISA10.010 | ISA10 | Interchange Time | тм | 4-4 | R |  |  | HHMM | TA1 | R | TA105: 015 "Invalid Interchange Time Value". | ISA10 must be present. |  |
| X223.C3..ISA10.020 | ISA10 |  |  |  |  |  |  |  | TA1 | R | TA105: 015 "Invalid Interchange Time Value". | ISA10 must be a valid time in HHMM format. |  |
| X223.C3..ISA11.010 | ISA11 | Repetiton Seperator |  | 1-1 | R |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | ISA11 must be present. | $\begin{aligned} & \text { lo1/20: Companion Guide Note } \\ & \text { needed. } \end{aligned}$ |
| X223.C3..ISA11.020 | ISA11 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | ISA11 must be 1 character. |  |
| X223.C3..ISA11.030 | ISA11 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | ISA11 must contain at least one non-space character. |  |
| X223.C3..ISA12.010 | ISA12 | Interchange Control Version Number | ID | 5-5 | R |  |  | 00501 | TA1 | R | TA105: 017 "Invalid Interchange Version ID Value". | ISA12 must be present. |  |
| X223.C3..ISA12.020 | ISA12 |  |  |  |  |  |  |  | TA1 | R | TA105: 017 "Invalid Interchange Version ID Value". | ISA12 must be "00501". |  |
| X223.C3.1SA13.010 | ISA13 | Interchange Control Number | No | 9-9 | R |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be present. |  |
| X223.C3..ISA13.020 | ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be numeric. |  |
| X223.C3..ISA13.030 | ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be 9 characters. |  |
| X223.C3.ISA13.040 | ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value". | ISA13 must be > 0 . |  |
| X223.C3..ISA13.050 | ISA13 |  |  |  |  |  |  |  | TA1 | R | TA105: 018 "Invalid Interchange Conrol Number Value" | ISA13 must be unsigned. |  |
| X223.C3..ISA14.010 | ISA14 | Acknowledgement Requested | ID | 1-1 | R |  |  | 0, 1 | TA1 | R | TA105: 019 "Invalid Acknowledgment Requested Value". | ISA14 must be present. |  |
| X223.C3..ISA14.020 | ISA14 |  |  |  |  |  |  |  | TA1 | R | TA105: 019 "Invalid Acknowledgment Requested Value". | ISA14 must be valid values. |  |
| X223.C3..ISA15.010 | ISA15 | Usage Indicator | ID | 1-1 | R |  |  | P, T | TA1 | R | TA105: 020 "Invalid Test Indicator Value". | ISA15 must be present. |  |
| X223.C3..ISA15.020 | ISA15 |  |  |  |  |  |  |  | TA1 | R | TA105: 020 "Invalid Test Indicator Value". | ISA15 must be valid values. |  |
| X223.C3..ISA16.010 | ISA16 | $\begin{gathered} \text { Component Element } \\ \text { Separator } \end{gathered}$ |  | 1-1 | R |  |  |  | TA1 | R | TA105: 027 "Invalid Component Element Separator" | ISA16 must be present. |  |
| X223.C3..ISA16.020 | ISA16 |  |  |  |  |  |  |  | TA1 | R | TA105: 027 "Invalid Component Element Separator" 竍 | ISA16 must be 1 character |  |
| X223.C3..ISA16.030 | ISA16 |  |  |  |  |  |  |  | TA1 | R | TA105: 027 "Invalid Component Element Separator" | ISA16 must contain at least one non-space character. |  |
| X223.C3.IISA16.040 | ISA16 |  |  |  |  |  |  |  | TA1 | R | TA105: 027 "Invalid Component Element Separator" | ISA16 must be populated with accepted AN characters. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | GS | Functional Groups |  |  |  |  | >1 |  |  |  |  |  |  |
| X223.C7..GS. 010 | GS | FUNCTIONAL GROUP HEADER |  | 1 | R | - | 1 |  | TA1 | R | TA105: 024 Invalid GS Segment | GS must be present. |  |
| X223.C7..GS.020 | gs |  |  |  |  |  |  |  | 999 | R | AK905: 1 "Functional Group Not Supported". | Only one iteration of GS is allowed. |  |
| X223.C7..GS01.010 | GS01 | Functional Identifier Code | ID | 2-2 | R |  |  | HC | 999 | R | AK905: 1 "Functional Group Not Supported". | GS01 must be present. |  |
| X223.C7..GS01.020 | GS01 |  |  |  |  |  |  |  | 999 | R | AK905: 1 "Functional Group Not Supported". | GS01 must be "HC". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | $\begin{array}{\|c\|} \hline \text { Accept/l } \\ \text { Reject } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.C7..GS02.010 | GS02 | Application Sender Code | AN | 2-15 | R |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must be present. |  |
| X223.C7..GS02.020 | GS02 |  |  |  |  |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must be 2-15 characters. |  |
| X223.C7..GS02.030 | GS02 |  |  |  |  |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must contain at least two non-space characters. |  |
| X223.C7..GS02.040 | GS02 |  |  |  |  |  |  |  | 999 | R | AK905: 14 "Unknown Security Originator". | GS02 must be populated with accepted AN |  |
| X223.C7..GS03.010 | GS03 | Application Receiver Code | AN | 2-15 | R |  |  |  | 999 | R | AK905: 13 "Unknown Security | GS03 must be present. |  |
| X223.C7..GS03.020 | GS03 |  |  |  |  |  |  |  | 999 | R | AK905: 13 "Unknown Security Recipient". | GS03 must be 2-15 characters. |  |
| X223.C7..GS03.030 | GS03 |  |  |  |  |  |  |  | 999 | R | AK905: 13 "Unknown Security Recipient". | GS03 must contain at least two non-space characters. |  |
| x223.C7..GS03.040 | GS03 |  |  |  |  |  |  |  | 999 | R | AK905: 13 "Unknown Security Recipient". | GS03 must be populated with accepted AN |  |
| X223.C7..GS04.010 | GS04 | Date | DT | 8-8 | R |  |  | CCYYMMDD | TA1 | R | TA105: 024 Invalid GS Segment | GS04 must be present. |  |
| X223.C7..GS04.020 | GSO4 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS04 must be a valid date in CCYYMMDD format. |  |
| X223.C7..GS04.030 | GSO4 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GSO4 must be the date the functional group is created; must not be a future date. |  |
| X223.C7..GS05.010 | GS05 | Time | тм | 4-8 | R |  |  | HHMM, HHMMSS, HHMMSSD, HHMMSSDD | TA1 | R | TA105: 024 Invalid GS Segment | GS05 must be present. |  |
| X223.C7..GS05.020 | GS05 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS05 must be a valid time in a valid format. |  |
| X223.C7..GS06.010 | GS06 | Group Control Number | N0 | 1-9 | R |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be present. |  |
| X223.C7..GS06.020 | GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be numeric. |  |
| х223.C7..GS06.030 | GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be > 0 . |  |
| X223.C7..GS06.040 | GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 6 "Group Control Number Violates Syntax". | GS06 must be < =999,999,999. |  |
| X223.C7..GS06.050 | GS06 |  |  |  |  |  |  |  | 999 | R | AK905: 19 "Functional Group Control Number not Unique within Interchange. | GS06 must be unique within the interchange. |  |
| X223.C7..GS07.010 | GS07 | Responsible Agency Code | ID | 1-2 | R |  |  | x | TA1 | R | TA105: 024 Invalid GS Segment | GS07 must be present. |  |
| X223.C7..GS07.020 | GS07 |  |  |  |  |  |  |  | TA1 | R | TA105: 024 Invalid GS Segment | GS07 must be "X". |  |
| X223A1.23.GS08.010 | GS08 | Version Identifier Code | AN | 1-12 | R |  |  | 005010x223A1 | 999 | R | AK905: 2 "Functional Group Version Not Supported" | GS08 must be present. |  |
| $\begin{aligned} & \text { X223.C7..GS08.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223A1.23..GS08.020 | GS08 |  |  |  |  |  |  |  | 999 | R | AK905: 2 "Functional Group Version Not Supported" | GS08 must be "005010x223A1". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  | ST | Transaction Sets |  |  |  |  | >1 |  |  |  |  |  |  |
| X223.067..ST. 010 | ST | TRANSACTION SET HEADER |  | 1 | R | - | >1 |  | 999 | R | IK502: 6 "Missing or Invalid Transaction Set Identifier". | ST must be present. |  |
| X223.067..ST.020 | ST |  |  |  |  |  |  |  | 999 | R | IK502: 1 "Transaction Set Not Supported". | Only one iteration of ST is allowed. | This error means there can't be more than one ST segment in this set, not that there can't be more than 1 within the GS. |


| 8371 Edit Reference | Segment or | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.067..ST01.010 | ST01 | $\begin{array}{\|c\|} \hline \text { Transaction Set Identifier } \\ \text { Code } \\ \hline \end{array}$ | ID | 3-3 | R |  |  | 837 | 999 | R | IK502: 6 "Missing or Invalid | ST01 must be present. |  |
| X223.067..ST01.020 | ST01 |  |  |  |  |  |  |  | 999 | R | IK502: 6 "Missing or Invalid Transaction Set Identifier" | ST01 must be "837". |  |
| X223.067..ST02.010 | ST02 | Transaction Set Control Number | AN | 4-9 | R |  |  |  | 999 | R | IK502: 7 "Missing or Invalid Transaction Set Control Number". | ST02 must be present. |  |
| X223.067..ST02.020 | ST02 |  |  |  |  |  |  |  | 999 | R | IK502: 7 "Missing or Invalid Transaction Set Control Number" | STO2 must be 4-9 characters. |  |
| X223.067..ST02.030 | ST02 |  |  |  |  |  |  |  | 999 | R | IK502: 7 "Missing or Invalid Transaction Set Control Number". | ST02 must contain at least four non-space characters. |  |
| X223.067..ST02.040 | ST02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK502: } 7 \text { "Missing or Invalid } \\ & \text { Transaction Set Control Number". } \end{aligned}$ | STO2 must be populated with accepted AN characters |  |
| X223.067..ST02.050 | ST02 |  |  |  |  |  |  |  | 999 | R | IK502: 23 "Transaction Set Control Number Not Unique within the Functional Group". | ST02 must be a unique number within the ISA-IEA envelope. |  |
| X223A1.11..ST03.010 | ST03 | Version, Release, or Industry Identifier | AN | 1-35 | R |  |  | 005010X223A1 | 999 | R | \|K502: 16 "Implementation Convention Not Supported". | ST03 must be present. |  |
| X223.067..ST03.020 | ST03 |  |  |  |  |  |  |  | 999 | R | IK502: 16 "Implementation Convention Not Supported". | ST03 must be "005010X223A1". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.068..BHT.010 | BHT | BEGINNING OF HIERARCHICAL TRANSACTION |  | 1 | R | - | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | BHT must be present. |  |
| X223.068..ВНT. 020 | BHT |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only iteration of BHT is allowed. |  |
| X223.068..BHT01.010 | BHT01 | $\begin{gathered} \text { Hierarchical Structure } \\ \text { Code } \\ \hline \end{gathered}$ | ID | 4-4 | R |  |  | 0019 | 999 | R | IK403 = 1: "Required Data Element Missinq" | BHT01 must be present. |  |
| Х223.068..ВНT01.020 | В ${ }^{\text {¢ }}$ |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | BHT01 must be "019". |  |
| X223.068..ВНT02.010 | BHTO2 | Transaction Set Purpose Code | ID | 2-2 | R |  |  | 00, 18 | 999 | R | IK403 = 1: "Required Data Element Missinq" | BHT02 must be present. |  |
| Х223.068..ВНТ02.020 | BHT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | BHTO2 must be valid values. |  |
| Х223.068..ВНТ03.010 | ВНто3 | Originator Application Transaction ID | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | BHTO3 must be present. |  |
| х223.068..ВНто3.020 | внтоз |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | BHT03 must be 1-30 characters. |  |
| Х223.068..ВНТо3.030 | внто3 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | BHT03 must be populated with accepted AN |  |
| X223.068..ВНT04.010 | BHT04 | $\begin{array}{\|c\|} \hline \text { Transaction Set Creation } \\ \text { Date } \\ \hline \end{array}$ | DT | 8-8 | R |  |  | CCYYMMDD | 999 | R | 1K403 = 1: "Required Data Element Missina" | BHT04 must be present. |  |
| X223.068.. BHT 04.020 | внт04 |  |  |  |  |  |  |  | 999 | R | \|K403 = 8: "Invalid Date" | BHTO4 must be a valid date in CCYYMMDD format. |  |
| X223.068..BHT05.010 | BHT05 | Transaction Set Creation Time | TM | 4-8 | R |  |  | HHMM, HHMMSS, HHMMSSD, HHMMSSDD | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT05 must be present. |  |
| Х223.068..ВНT05.020 | BHT05 |  |  |  |  |  |  |  | 999 | R | 1K403 = 9: "Invalid Time" | BHT05 must be a valid time in a valid time format. |  |
| X223.068..ВНT06.010 | BHT06 | Claim or Encounter ID | ID | 2-2 | R |  |  | 31, CH, RP | 999 | R | IK403 = 1: "Required Data Element Missing" | BHT06 must be present. |  |
| X223.068.. ВНT06.020 | внто6 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | BHT06 must be"CH". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.010 |  | SUBMITTER NAME LOOP |  | 1 | R | 1000A | 1 |  | 999 | R | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 1000A is allowed. |  |
| X223.071.1000A.NM1.010 | NM1 | SUBMITTER NAME |  |  |  |  |  |  | 999 | R | IK 304 = 3: "Required Segment Missing" | 1000A.NM1 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.071.1000A.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 41 | 999 | R | IK403 = 1: "Required Data Element Missinq" | 1000A.NM101 must be present. |  |
| x223.071.1000A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000A.NM101 must be "41". |  |
| X223.071.1000A.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | R | IK403 = 1: "Required Data Element Missinq" | 1000A.NM102 must be present. |  |
| x223.071.1000A.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000A.NM102 must be valid values. |  |
| X223.071.1000A.NM103.010 | NM103 | Submitter Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missinq" | 1000A.NM103 must be present. |  |
| X223.071.1000A.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM103 must contain at least one non-space character. |  |
| х223.071.1000A.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM103 must be populated with accepted AN characters. |  |
| X223.071.1000A.NM103.040 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.NM103 must be 1-60 characters. |  |
| $\begin{aligned} & \text { X223.071.1000A.NM103.060 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM104.010 | NM104 | Submitter First Name | AN | 1-35 | s |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 1000A.NM102 is " 2 ", 1000A.NM104 must not be present. |  |
| X223.071.1000A.NM104.020 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM104.030 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.NM104 must be 1-35 characters. |  |
| X223.071.1000A.NM104.040 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM104.050 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM104 must contain at least one non-space character. |  |
| X223.071.1000A.NM104.060 | NM104 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM104 must be populated with accepted AN characters. |  |
| X223.071.1000A.NM104.070 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.071.1000A.NM105.010 | NM105 | Submitter Middle Name | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM105 must contain at least one non-space character. |  |
| X223.071.1000A.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 1000A.NM102 is "2", 1000A.NM105 must not be present. |  |
| X223.071.1000A.NM105.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.NM105 must be 1-25 characters. |  |
| $\begin{aligned} & \text { X223.071.1000A.NM105.050 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM105.060 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM105 must be populated with accepted AN characters. |  |
| $\begin{aligned} & \text { X223.071.1000A.NM105.070 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 1000A.NM106 must not be present. |  |
| X223.071.1000A.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 1000A.NM107 must not be present. |  |
| X223.071.1000A.NM108.010 | NM108 | $\begin{gathered} \hline \text { Identification Code } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 1-2 | R |  |  | 46 | 999 | R | IK403 = 1: "Required Data Element Missinq" | 1000A.NM108 must be present. |  |
| x223.071.1000A.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 1000A.NM108 must be "46". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop |  | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.071.1000A.NM109.010 | NM109 | Submitter Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 1000A.NM109 must be present. |  |
| X223.071.1000A.NM109.020 | NM109 |  |  |  |  |  |  |  | 999 | R | 1K403 = 6: "Invalid Character in Data Element" | 1000A.NM109 must contain at least two non-space characters. |  |
| X223.071.1000A.NM109.030 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 1000A. NM109 must be 2-80 characters. |  |
| X223.071.1000A.NM109.040 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM109.050 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.NM109 must be populated with accepted AN characters. |  |
| X223.071.1000A.NM109.060 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.071.1000A.NM109.070 | NM109 |  |  |  |  |  |  |  | 999 | R | 1K403 = I12: "Implementation Pattern Match Failure" | 1000A.NM109 must be an approved electronic submitter. |  |
| X223.071.1000A.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 1000A.NM110 must not be present. |  |
| X223.071.1000A.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | $1 \mathrm{~K} 403 \text { = I10: "Implementation "Not }$ <br> Used" Element Present" | 1000A.NM111 must not be present. |  |
| X223.071.1000A.NM112.010 | NM112 | $\underset{\text { Name }}{\text { Name Last or Organization }}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 1000A.NM112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER. 010 | PER | SUBMITTER ED CONTACT INFORMATION |  | 2 | R | 1000A |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 1000A.PER must be present. |  |
| X223.073.1000A.PER. 020 | PER |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 1000A.PER are allowed. |  |
| X223.073.1000A.PER01.010 | PER01 | Contact Function Code | ID | 2-2 | R |  |  | IC | 999 | R | IK403 = 1: "Required Data Element Missinq" | 1000A.PER01 must be present. |  |
| X223.073.1000A.PER01.020 | PER01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000A.PER01 must be "IC". |  |
| X223.073.1000A.PER02.010 | PER02 | Submitter Contact Name | AN | 1-60 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER02 must contain at least one non-space character. |  |
| X223.073.1000A.PER02.020 | PER02 |  |  |  |  |  |  |  | 999 | R | 1K403 = I12: "Implementation Pattern Match Failure" Match Failure" | For the 1st 1000A.PER transmitted, 1000A.PER02 must not = 1000A.NM103. |  |
| X223.073.1000A.PER02.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER02.040 | PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | For the 2nd 1000A.PER transmitted, 1000A.PER02 must not be present. |  |
| X223.073.1000A.PER02.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER02.060 | PER02 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.PER02 must be 1-60 characters. |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.073.1000A.PER02.070 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER02.080 | PER02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 6: "Invalid Character in Data Element" | 1000A.PER02 must be populated with accepted AN characters. |  |
| $\begin{array}{\|l\|} \hline \text { X223.073.1000A.PER02.090 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER03.010 | PER03 | Communication Number Qualifier | ID | 2-2 | R |  |  | EM, FX. TE | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.PER03 must be present. |  |
| X223.073.1000A.PER03.020 | PER03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 1000A.PER03 must be valid values. |  |
| X223.073.1000A.PER04.010 | PER04 | Communication Number | AN | 1-256 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000A.PER04 must be present. |  |
| X223.073.1000A.PER04.020 | PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER04 must contain at least one non-space character. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.073.1000A.PER04.030 | PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.PER04 must be 1-256 characters. |  |
| $\begin{aligned} & \text { X223.073.1000A.PER04.040 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER04.050 | PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER04 must be populated with accepted AN characters. |  |
| $\begin{aligned} & \text { X223.073.1000A.PER04.060 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER05.010 | PER05 | Communication Number Qualifier | ID | 2-2 | s |  |  | Em, EX, FX, TE | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000A.PER05 must be valid values. |  |
| X223.073.1000A.PER05.020 | PER05 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | If 1000A.PER05 is "EX", 1000A.PER03 must be "TE". |  |
| X223.073.1000A.PER06.010 | PER06 | Communication Number | AN | 1-256 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 1000A.PER06 is present, 1000A.PER05 must be present. |  |
| X223.073.1000A.PER06.020 | PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER06 must contain at least one non-space character. |  |
| X223.073.1000A.PER06.030 | PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.PER06 must be 1-256 characters. |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.073.1000A.PER06.040 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER06.050 | PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER06 must be populated with accepted AN characters. |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.073.1000A.PER06.060 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER07.010 | PER07 | $\begin{gathered} \hline \begin{array}{c} \text { Communication Number } \\ \text { Qualifier } \end{array} \\ \hline \end{gathered}$ | ID | 2-2 | s |  |  | EM, EX, FX, TE | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 1000A.PER05 is present, 1000A.PER07 may be present. |  |
| X223.073.1000A.PER07.020 | PER07 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000A.PER07 must be valid values. |  |
| X223.073.1000A.PER07.030 | PER07 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | If 1000A.PER07 is "EX", 1000A.PER05 must be "TE". |  |
| X223.073.1000A.PER08.010 | PER08 | Communication Number | AN | 1-256 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 1000A.PER08 is present, 1000A.PER07 must be present. |  |
| X223.073.1000A.PER08.020 | PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER08 must contain at least one non-space |  |
| X223.073.1000A.PER08.030 | PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 1000A.PER08 must be 1-256 characters. |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.073.1000A.PER08.040 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER08.050 | PER08 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000A.PER08 must be populated with accepted AN characters. |  |
| $\begin{aligned} & \text { X223.073.1000A.PER08.060 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.073.1000A.PER09.010 | PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 1000A.PER09 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.076.1000B. 010 |  | RECEIVER NAME Loop |  | 1 | R | 10008 | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 10008 is allowed. |  |
| X223.076.1000B.NM1.010 | NM1 | RECEIVER NAME |  |  |  |  |  |  | 999 | R | 1K304 = 3: "Required Segment Missing" | 1000B.NM1 must be present. |  |
| X223.076.1000B.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 40 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM101 must be present. |  |
| X223.076.1000B.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000B.NM101 must be "40". |  |
| X223.076.1000B.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM102 must be present. |  |
| X223.076.1000B.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000B.NM102 must be "2". |  |
| X223.076.1000B.NM103.010 | NM103 | Receiver Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM103 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.076.1000B.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 1000B.NM103 must be 1-60 characters. |  |
| X223.076.1000B.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 1000B.NM103 must be popoulated with accepted AN characters. |  |
| х223.076.1000B.Nм103.040 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 1000B.NM103 must contain at least one non-space character. |  |
| Х223.076.1000B.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.076.1000B.NM105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.076.1000B.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.076.1000B.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.076.1000B.NM108.010 | NM108 | Identification Code Oualifier | ID | 1-2 | R |  |  | 46 | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM108 must be present. |  |
| х223.076.1000B.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 1000B.NM108 must be "46". |  |
| X223.076.1000B.NM109.010 | NM109 | Receiver Primary Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 1000B.NM109 must be present. |  |
| X223.076.1000B.NM109.020 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 1000B.NM109 must be [contractor put receiver code here]. |  |
| X223.076.1000B.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.076.1000B.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = = 110: "Implementation "Not | Must not be present. |  |
| X223.076.1000B.NM112.010 | NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.078.2000A..010 |  | BILLING PROVIDER LOOP |  |  |  | 2000A | >1 |  | 999 | R | IK304 = 17: "Implementation Loop Occurs Under Minimum Times" | 2000A must be present. |  |
| X223.078.2000A.020 |  | $\underset{\substack{\text { BILLING PROVIDER } \\ \text { LOOP }}}{ }$ |  |  |  | 2000A | $1^{*}$ |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2000A is allowed. | *companion guide note needed |
| X223.078.2000A.HL. 010 | HL | BILLING/PAY-TO PROVIDER hierarchical level |  | 1 | R | 2000A |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2000A.HL must be present. |  |
| X223.078.2000A.HL.O20 | HL |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000A.HL is allowed. | This error means there can only be one HL in each iteration of the loop. |
| X223.078.2000A.HL01.010 | HL01 | Hierarchical ID Number | AN | 1-12 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.HL01 must be present. |  |
| х223.078.2000А.HL01.020 | HL01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2000A.HL01 must be 1-12 characters. |  |
| X223.078.2000A.HL01.030 | HL01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000A.HL01 must be numeric value. |  |
| Х223.078.2000А.HL01.040 | HL01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | The first HL01 must be "1". |  |
| X223.078.2000A.HL02.010 | HL02 | Hierarchical Parent ID Number | AN | 1-12 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not <br> Used" Element Present" | Must not be present. |  |
| х223.078.2000A.HL03.010 | HL03 | Hierarchical Level Code | ID | 1-2 | R |  |  | 20 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.HL03 must be present. |  |
| х223.078.2000А.HL03.020 | HL03 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000A.HL03 must be "20". |  |
| х223.078.2000A.HL04.010 | HL04 | Hierarchical Child Code | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A. HL04 must be present. |  |
| Х223.078.2000A.HL04.020 | HL04 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2000A.HL04 must be "1". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \\ & \hline \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | $\begin{gathered} \text { Accept/ } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.080.2000A.PRV. 010 | PRV | BILLING/PAY-TO PROVIDER SPECIALTY INFORMATION |  | 1 | s | 2000A |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" Maximum Use" | Only one iteration of 2000A.PRV is allowed. |  |
| X223.080.2000A.PRV01.010 | PRV01 | Provider Code | ID | 1-3 | R |  |  | B1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A PRV01 must be present. |  |
| X223.080.2000A.PRV01.020 | PRV01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2000A.PRV01 must be "Bl". |  |
| x223.080.2000A.PRV02.010 | PRV02 | Reference Identification Qualifier | ID | 2-3 | R |  |  | PXC | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.PRV02 must be present. |  |
| x223.080.2000A.PRV02.020 | PRV02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2000A.PRV02 must be "PXC". |  |
| x223.080.2000A.PRV03.010 | PRV03 | Provider Taxonomy Code | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000A.PRV03 must be present. |  |
| X223.080.2000A.PRV03.020 | PRV03 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 145: "Entity's specialty/taxonomy code" FIC. 85 Billina Provider | 2000A.PRV03 Must be a valid Provider Taxonomy Code. | Valid Provider Taxonomy Code reference must be available for this edit. |
| X223.080.2000A.PRV04.010 | PRV04 | State or Province Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| x223.080.2000A.PRV05.010 | PRV05 | PROVIDER SPECIALTY INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.080.2000A.PRV06.010 | PRV06 | $\begin{gathered} \text { Provider Organization } \\ \text { Code } \\ \hline \end{gathered}$ | ID | 3-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.081.2000A.CUR. 010 | CUR | FOREIGN CURRENCY information |  | 1 | s | 2000A |  |  | 999 | E | IK304 = 14: "Implementation "Not Used" Segment Present" | 2000A.CUR must not be present. | 01/20: Companion Guide Note needed. |
| X223.081.2000A.CUR.020 | CUR |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 681: "Claim Currency Not Supported" |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.084.2010AA..010 |  | Billing Provider Name Loop |  | 1 | R | 2010AA | 1 |  | 999 | R | 1K304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2010AA is allowed. |  |
| X223.084.2010AA.NM1.010 | NM1 | Billing Provider Name |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.NM1 must be present. |  |
| X223.084.2010AA.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 85 | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2010AA.NM101 must be present. |  |
| X223.084.2010AA.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.NM101 must be "85". |  |
| X223.084.2010AA.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.NM102 must be present. |  |
| х223.084.2010AA.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010AA.NM102 must be "2". |  |
| X223.084.2010AA.NM103.010 | NM103 | Billing Provider Last or Organizational Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.NM103 must be present. |  |
| X223.084.2010AA.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.NM103 must contain at least one non-space character. |  |
| X223.084.2010AA.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2010AA.NM103 must be 1-60 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Elemen | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { Acceptl/ } \\ \text { Reject } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х223.084.2010AA.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. 85 -Billinn_Provider |  |  |
| X223.084.2010AA.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | IK 403 = 6: "Invalid Character in Data Element" | 2010AA.NM103 must be populated with accepted AN characters. |  |
| х223.084.2010AA.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 504: "Entity's Last Name" EIC: 85 Billina Provider |  |  |
| X223.084.2010AA.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.084.2010AA.NM105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.084.2010AA.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.084.2010AA.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.084.2010AA.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC: 85 Billing Provider | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.084.2010AA.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | cscc A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." EIC: 85 Billing Provider | 2010AA.NM108 must be present. | Everyone butTrailblazer. <br> 01/20: Companion Guide Note needed. |
| X223.084.2010AA.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010AA.NM108 must be "XX". |  |
| X223.084.2010AA.NM109.010 | NM109 | Billing Provider Identifier | AN | 2-80 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | If 2010AA.NM108 is present, 2010AA.NM109 must be present. |  |
| X223.084.2010AA.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | C | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { IRejected for Invalid Information..." } \\ & \text { CSC 562: "Entity's National Provider } \\ & \text { Identifier (NPI)" } \\ & \text { FIC. } 85 \text { Billing Provider } \end{aligned}$ | 2010AA.NM109 must be valid according to the NPI algorithm. |  |
| X223.084.2010AA.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" FIC: 85 Billina Provider | The first position of 2010AA.NM109 must be a "1". |  |
| X223.084.2010AA.NM109.040 | NM109 |  |  |  |  |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A8: "Acknowledgement / } \\ & \text { Rejected for relational field in error." } \\ & \text { CSC 562: "Entity's National Provider } \\ & \text { Identifier (NPI)" } \\ & \text { FlC: } 85 \text { Billina Provider } \\ & \hline \end{aligned}$ | 2010AA.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109. | Valid NPI Crosswalk must be available for this edit. |
| X223.084.2010AA.NM109.050 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 112: "Implementation Pattern Match Failure" | 2010AA.NM109 billing provider must be "associated" to the submitter (from a trading partner management perspective) in 1000A.NM109. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.084.2010AA.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.084.2010AA.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.084.2010AA.NM112.010 | NM112 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Name Last or Organization } \\ \text { Name } \end{array} \\ \hline \end{array}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.087.2010AA.N3.010 | N3 | BILLING PROVIDER ADDRESS |  | 1 | R | 2010AA |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.N3 must be present. |  |
| X223.087.2010AA.N3.020 | N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AA.N3 is allowed. |  |
| X223.087.2010AA.N301.010 | N301 | Billing Provider Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.N301 must be present. |  |
| X223.087.2010AA.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2010AA.N301 must contain at least one non-space character. |  |
| X223.087.2010AA.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA. 3001 must be 1-55 characters. |  |
| X223.087.2010AA.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 126 "Entity's Address" <br> EIC 85 Billina Provider |  |  |
| X223.087.2010AA.N301.050 | N301 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010AA.N301 must be populated with accepted AN characters. |  |
| X223.087.2010AA.N301.060 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> 1Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 503: "Entity's Street address" <br> FIC. 85 Billino Provider |  |  |
| X223.087.2010AA.N301.070 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 503: "Entity's Street Address" ElC: 85 Billina Provider | 2010AA.N301 must not contain the following exact phrases (not case sensitive): "Post Office Box", "P.O. BOX", "PO BOX", "LOCK BOX", "LOCK BIN", "P O BOX". | N301 must be a street address, not a post office box or lock box. |
| X223.087.2010AA.N302.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.087.2010AA.N302.012 | N302 | Billing Provider Address Line | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If present, 2010AA.N302 must contain at least one non-space character. |  |
| ×223.087.2010AA.N302.015 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA. N302 must be 1-55 characters. |  |
| X223.087.2010AA.N302.020 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" FIC. 85 Billina Provider |  |  |
| X223.087.2010AA.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N302 must be populated with accepted AN characters. |  |
| X223.087.2010AA.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 503: "Entity's Street address" FIC: 85 Billina Provider |  |  |
| X223.087.2010AA.N302.050 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Csage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{array}{\|l\|} \hline \text { X223.087.2010AA.N302.060 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.088.2010AA.N4.010 | N4 | BILLING PROVIDER CITYISTATEIZIP CODE |  | 1 | R | 2010AA |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.N4 must be present. |  |
| X223.088.2010AA.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AA.N4 is allowed. |  |
| x223.088.2010AA.N401.010 | N401 | Billing Provider City Name | AN | 2-30 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2010AA.N401 must be present. |  |
| X223.088.2010AA.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.N401 must contain at least two non-space characters. |  |
| X223.088.2010AA.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010AA.N401 must be 2-30 characters. |  |
| X223.088.2010AA.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" FIC. 85 Billina Provider |  |  |
| X223.088.2010AA.N401.050 | N401 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403=6: \text { "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010AA.N401 must be populated with accepted AN characters. |  |
| X223.088.2010AA.N401.060 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 502: "Entity's City" FIC: 85 Billina Provider |  |  |
| X223.088.2010AA.N402.010 | N402 | Billing Provider State or Province Code | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AA.N404 is not present, 2010AA.N402 must be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.088.2010AA.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement 1Rejected for Invalid Information..." CSC 501: "Entity's State/Province" EIC: 85 Billina Provider | 2010AA.N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.088.2010AA.N403.010 | N403 | Billing Provider Postal Zone or ZIP Code | ID | 3-15 | S |  |  |  | 999 | R | $\begin{aligned} & \text { IK } 403=2 \text { "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If 2010AA.N404 is not present, 2010AA.N403 must be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.088.2010AA.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 500: "Entity's Postal/Zip Code" EIC: 85 Billing Provider | 2010AA.N403 must be a valid 9 digit zip code. | Valid Zip Code reference must be available for this edit. |
| X223.088.2010AA.N404.010 | N404 | Country Code | ID | 2-3 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.088.2010AA.N405.010 | N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.088.2010AA.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.088.2010AA.N407.010 | N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Ussed" Fement Present" } \end{aligned}$ | Must not be present. |  |
| $\begin{aligned} & \text { X223.088.2010AA.N407.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}$ | Accept Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.090.2010AA.REF. 010 | REF | BILLING PROVIDER TAX IDENTIFICATION |  | 1 | R | 2010AA |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010AA.REF must be present. |  |
| X223.090.2010AA.REF. 020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AA.REF with REF01 = "EI" is allowed. |  |
| X223.090.2010AA.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | El | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2010AA.REF01 must be present. |  |
| x223.090.2010AA.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.REF01 must be "El". |  |
| X223.090.2010AA.REF02.010 | REF02 | Billing Provider Additional Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.REF02 must be present. |  |
| x223.090.2010AA.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.REF02 must be populated with accepted AN characters. | 2010AA.REF02 must be populated with accepted AN characters. |
| X223.090.2010AA.REF02.030 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 128: "Entity's Tax ID" EIC: 85 Billina Provider |  |  |
| X223.090.2010AA.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 128: "Entity's tax id" EIC: 85 Billina Provider | 2010AA.REF02 must be 9 digits with no punctuation. | pass through, syntax only. |
| X223.090.2010AA.REF02.050 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" CSC 562: "Entity's National Provider Identifier (NPI)" <br> CSC 128: "Entity's tax id" FIC. 85 _Billina Provider | 2010AA.REF must be associated with the provider identified in 2010AA.NM109 |  |
| X223.090.2010AA.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.090.2010AA.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.091.2010AA.PER. 010 | PER | BILLING PROVIDER CONTACT INFORMATION |  | 2 | s | 2010AA |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | If 2010AA.NM1 is present, 2010AA.PER may be present. |  |
| X223.091.2010AA.PER. 020 | PER |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2010AA.PER are allowed. |  |
| X223.091.2010AA.PER01.010 | PER01 | Contact Function Code | ID | 2-2 | R |  |  | IC | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2010AA.PER01 must be present. |  |
| X223.091.2010AA.PER01.020 | PER01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2010AA.PER01 must be "IC". |  |
| X223.091.2010AA.PER02.010 | PER02 | $\begin{array}{l}\text { Billing Provider Contact } \\ \text { Name }\end{array}$ | AN | 1-60 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | For the 1st 2010AA.PER transmitted, 2010AA.PER02 must be present. |  |
| X223.091.2010AA.PER02.020 | PER02 |  |  |  |  |  |  |  | 999 | R | \|K403 = I13: "Implementation Dependent 'not used' Data Element Present" | For the 2nd 2010AA.PER transmitted, 2010AA.PER02 must not be present. |  |
| X223.091.2010AA.PER02.030 | PER02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 10: "Exclusion Condition | 2010AA. $\mathrm{PER02}$ must not $=1000 \mathrm{~A}$. PER02. |  |
| X223.091.2010AA.PER02.040 | PER02 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2010AA.PER02 must contain at least one non-space character. |  |
| X223.091.2010AA.PER02.050 | PER02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER02 must be 1-60 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Lop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | $\left\|\begin{array}{c} \text { Accept/ } \\ \text { Reject } \end{array}\right\|$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.091.2010AA.PER02.060 | PER02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 561: "Entity's Contact Name" FIC. 85 Billino Provider |  |  |
| X223.091.2010AA.PER02.070 | PER02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER02 must be populated with accepted AN characters. |  |
| X223.091.2010AA.PER02.080 | PER02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 561: "Entity's Contact Name" FIC: 85 Billina Provider |  |  |
| X223.091.2010AA.PER03.010 | PER03 | $\begin{gathered} \hline \text { Communication Number } \\ \text { Oualifier } \end{gathered}$ | ID | 2-2 | R |  |  | EM, FX, TE | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2010AA.PER03 must be present. |  |
| X223.091.2010AA.PER03.020 | PER03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010AA.PER03 must be valid values. |  |
| X223.091.2010AA.PER04.010 | PER04 | Communication Number | AN | 1-256 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AA.PER04 must be present. |  |
| X223.091.2010AA.PER04.020 | PER04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER04 must contain at least one non-space character. |  |
| X223.091.2010AA.PER04.030 | PER04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER04 must be 1-256 characters. |  |
| X223.091.2010AA.PER04.040 | PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Phone Number" FIC. 85 _Billina-Provider |  |  |
| X223.091.2010AA.PER04.050 | PER04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER04 must be populated with accepted AN characters. |  |
| X223.091.2010AA.PER04.060 | PER04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FIC. 85 b billina Provider |  |  |
| X223.091.2010AA.PER05.010 | PER05 | Communication Number Qualifier | ID | 2-2 | s |  |  | EM, EX, FX, TE | 999 | R | 11403 = 7: "Invalid Code Value" | 2010AA.PER05 must be valid values. |  |
| X223.091.2010AA.PER05.020 | PER05 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | If 2010AA.PER05 is "EX" 2010AA.PER03 must be "TE". |  |
| X223.091.2010AA.PER06.010 | PER06 | Communication Number | AN | 1-256 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010AA.PER05 is present 2010AA.PER06 must be present. |  |
| X223.091.2010AA.PER06.020 | PER06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AA.PER06 must contain at least one non-space character. |  |
| X223.091.2010AA.PER06.030 | PER06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER06 must be 1-256 characters. |  |
| X223.091.2010AA.PER06.035 | PER06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 127: "Entity's Phone Number" FIC. 85 Billino Provider |  |  |
| X223.091.2010AA.PER06.040 | PER06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2010AA.PER06 must be populated with accepted AN |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|c} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.091.2010AA.PER06.050 | PER06 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 511: "Invalid character" } \\ & \text { CSC 127: "Entity's Phone Number" } \\ & \text { FIC. 85 billina Provider } \end{aligned}$ |  |  |
| X223.091.2010AA.PER07.010 | PER07 | Communication Number Oualifier | ID | 2-2 | s |  |  | EM, EX, FX, TE | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2010AA.PER05 is present, 2010AA.PER07 may be present. |  |
| X223.091.2010AA.PER07.020 | PER07 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2010AA.PER07 must be valid values. |  |
| x223.091.2010AA.PER07.030 | PER07 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | If 2010AA.PER07 is "EX", 2010AA.PER05 must be "TE". |  |
| X223.091.2010AA.PER08.010 | PER08 | Communication Number | AN | 1-256 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | If 2010 AA.PER07 is present, 2010AA.PER08 must be present. |  |
| X223.091.2010AA.PER08.015 | PER08 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010AA.PER08 must contain at least one non-space character. |  |
| X223.091.2010AA.PER08.020 | PER08 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AA.PER08 must be 1-256 characters. |  |
| X223.091.2010AA.PER08.025 | PER08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 512" "Length invalid for receiver's application system" CSC 127: "Entity's Phone Number" EIC 85 Billina Provider |  |  |
| X223.091.2010AA.PER08.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.091.2010AA.PER08.040 | PER08 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data <br> Element" | 2010AA.PER08 must be populated with accepted AN characters. |  |
| X223.091.2010AA.PER08.050 | PER08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 127: "Entity's Phone Number" FIC: 85 billing Provider |  |  |
| X223.091.2010AA.PER09.010 | PER09 | Contact Inquiry Reference | AN | 1-20 | N/U |  |  |  | 999 | E | IK403 $=110: ~ " I m p l e m e n t a t i o n ~ " N o t ~$ Used" Element Present" | 2010AA.PER09 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.094.2010AB.NM1.010 | NM1 | PAY TO ADDRESS NAME |  | 1 | s | 2010AB | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | One iteration of 2010AB.NM1 is allowed. |  |
| X223.094.2010AB.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 87 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AB.NM101 must be preset. |  |
| X223.094.2010AB.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2010AB.NM101 must be "87". |  |
| X223.094.2010AB.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2010AB.NM102 must be present. |  |
| X223.094.2010AB.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2010AB.NM102 must be "2". |  |
| X223.094.2010AB.NM103.010 | NM103 | Pay-to Provider Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.094.2010AB.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.094.2010AB.NM105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.094.2010AB.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.094.2010AB.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.094.2010AB.NM108.010 | NM108 | $\begin{gathered} \hline \text { Identification Code } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 1-2 | R |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.094.2010AB.NM109.010 | NM109 | Pay-to Provider Identifier | AN | 2-80 | R |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.094.2010AB.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.094.2010AB.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.094.2010AB.NM112.010 | NM112 | $\underset{\text { Name }}{\text { Name Last or Organization }}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.096.2010AB.N3.010 | N3 | PAY-TO AdDress |  | 1 | R | 2010AB |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2010AB.NM1 is present, 2010AB.N3 must be present. |  |
| X223.096.2010AB.N3.020 | N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AB.N3 is allowed. |  |
| X223.096.2010AB.N301.010 | N301 | Pay-to Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010AB. 301 must be present. |  |
| X223.096.2010AB.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N301 must be at least one non-space character. |  |
| X223.096.2010AB.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AB. N301 must be 1-55 characters. |  |
| X223.096.2010AB.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" FIC. 87 Pav-to Provider |  |  |
| X223.096.2010AB.N301.050 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010AB.N301 must be populated with accepted AN characters. |  |
| X223.096.2010AB.N301.060 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 511: "Invalid character" CSC 503: "Entity's Street address" FIC: 87 Pav-to Provider |  |  |
| X223.096.2010AB.N302.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.096.2010AB.N302.020 | N302 | Pay-to Provider Address Line | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | If present, 2010AB.N302 must be at least one nonspace character. |  |
| $\begin{aligned} & \text { X223.096.2010AB.N302.030 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.096.2010AB.N302.040 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010AB.N302 must be 1-55 characters. |  |
| X223.096.2010AB.N302.050 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 126: "Entity's Address" FIC. 87 Pav-to Provider |  |  |
| X223.096.2010AB.N302.060 | N302 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010AB.N302 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | $\begin{array}{\|c\|} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.096.2010AB.N302.070 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 511: "Invalid character" CSC 503: "Entity's Street address" EIC: 87 Pav-to Provider |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.097.2010AB.N4.010 | N4 | PAY-TO ADDRESS CITYISTATEIZIP CODE |  | 1 | R | 2010AB |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2010AB.NM1 is present, 2010AB.N4 must be present. |  |
| X223.097.2010AB.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010AB.N4 is allowed. |  |
| X223.097.2010AB.N401.010 | N401 | Pay-to Adress City Name | AN | 2-30 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2010AB. N 401 must be present. |  |
| X223.097.2010AB.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data <br> Element" | 2010AB.N401 must contain at least two non-space characters. |  |
| X223.097.2010AB.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> K403 = 5: "Data Element Too Long" | 2010AB.N401 must be 2 -30 characters. |  |
| X223.097.2010AB.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> IRejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 502: "Entity's City" <br> EIC. 87 Paveroprovider |  |  |
| X223.097.2010AB.N401.050 | N401 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010AB.N401 must be populated with accepted AN characters. |  |
| X223.097.2010AB.N401.060 | N401 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 511: "Invalid character" } \\ & \text { CSC 502: "Entity's City" } \\ & \text { EIC. } 87 \text { Pav-to Provider } \end{aligned}$ |  |  |
| X223.097.2010AB.N402.010 | N402 | Pay-to-Address State Code | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data | If 2010AB.N404 is not present, 2010AB.N402 must be present. |  |
| X223.097.2010AB.N402.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.097.2010AB.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" EIC: 87 Pav-to Provider | 2010AB.N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.097.2010AB.N403.010 | N403 | Pay-to Address Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" Element Missing" | If 2010AB.N404 is not present, 2010AB.N403 must be present. |  |
| X223.097.2010AB.N403.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.097.2010AB.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 500: "Entity's Postal/Zip Code" EIC: 87 Pay-to Provider | 2010AB. N 403 must be a valid zip code. | Valid Zip Code reference must be available for this edit. |
| X223.097.2010AB.N404.010 | N404 | Country Code | ID | 2-3 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.097.2010AB.N405.010 | N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.097.2010AB.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.097.2010AB.N407.010 | N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | $\begin{array}{\|l\|l} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.097.2010AB.N407.020 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.099.2010AC.. 010 | NM1 | PAY-TO PLAN NAME Loop |  |  |  | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement IReturned as unprocessable claim" TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC loop must not be present. | 11/20: Companion Guide Note needed. |
| X223.099.2010AC.NM1.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.099.2010AC.NM1.020 | NM1 | PAY-TO PLAN NAME |  | 1 | s | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.NM1 must not be present |  |
| X223.101.2010AC.N3.010 | N3 | PAY-TO PLAN ADDRESS |  | 1 | R | 2010AC |  |  | 277 | T | $\begin{aligned} & \text { CSCC A3: "Acknowledgement } \\ & \text { Returned as unprocessable claim" } \\ & \text { TBDO2: "Payer specific restrictions } \\ & \text { on the number of repetitions" } \end{aligned}$ | 2010AC.N3 must not be present. |  |
| X223.102.2010AC.N4.010 | N4 | PAY-TO PLAN CITYISTATEIZIP CODE |  | 1 | R | 2010AC |  |  | 277 | T | CsCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.N4 must not be present. |  |
| X223.104.2010AC.REF.010 | REF | PAY-TO PLAN SECONDARY IDENTIFICATION |  | 1 | s | 2010AC |  |  | 277 | T | $\begin{aligned} & \text { CSCC A3: "Acknowledgement } \\ & \text { Returned as unprocessable claim" } \\ & \text { TBDO2: "Payer specific restrictions } \\ & \text { on the number of repetitions" } \end{aligned}$ | 2010AC.REF with REF01 $=\mathbf{2 U}$, FY, or NF must not be present. |  |
| X223.106.2010AC.REF. 020 | REF | PAY-TO PLAN TAX IDENTIFICATION |  | 1 | R | 2010AC |  |  | 277 | T | CSCC A3: "Acknowledgement /Returned as unprocessable claim" TBD02: "Payer specific restrictions on the number of repetitions" | 2010AC.REF with REF01 = El must not be present. |  |
| X223.078.2000B. 010 |  | SUBSCRIBER LOOP |  |  |  | 2000B | >1 |  | 999 | R | IK304 = 17: "Implementation Loop Occurs Under Minimum Times" | 20008 must be present. |  |
| X223.078.2000B.HL. 010 | HL | SUBSCRIBER hierarchical level |  | 1 | R | 2000B |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2000B.HL must be present. |  |
| X223.078.2000B.HL. 020 | HL |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 20008.HL is allowed. | This error means there can only be one HL in each iteration of the loop. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Csage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.107.2000B.HL01.010 | HL01 | Hierarchical ID Number | AN | 1-12 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2000B. HL01 must be present. |  |
| х223.107.2000B.HL01.020 | HL01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2000B.HLO1 must be 1-12 characters. |  |
| X223.107.2000B.HL01.030 | HL01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000B. HL01 must be numeric. |  |
| X223.107.2000B.HL01.040 | HL01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2000B. HL01 must equal the value of the previous HL01 (2000A.HL01) plus one. |  |
| х223.107.2000B.HL02.010 | HL02 | Hierarchical Parent ID Number | AN | 1-12 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.HL02 must be present. |  |
| х223.107.2000B.HL02.020 | HL02 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2000B.HLO2 must equal the value of the HLO1 (2000A.HL01) of the parent HL. |  |
| X223.107.2000B.HL03.010 | HL03 | Hierarchical Level Code | ID | 1-2 | R |  |  | 22 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.HLO3 must be present. |  |
| х223.107.2000B.HL03.020 | HL03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2000B.HL03 must be "22". |  |
| х223.107.2000B.HL04.010 | HL04 | Hierarchical Child Code | ID | 1-1 | R |  |  | 0, 1 | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2000B. HL04 must be present. |  |
| х223.107.2000B.HL04.020 | HL04 |  |  |  |  |  |  |  | 999 | E | 1K403 = 7: "Invalid Code Value" | 2000B.HLO4 must be "0". |  |
| X223.107.2000B.HL04.030 | HL04 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { TBDO3: "This Line of Business does } \\ & \text { not subport this qualifier." } \\ & \hline \end{aligned}$ | 2000B.HLO4 must be "0". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR.010 | SBR | SUBSCRIBER INFORMATION |  | 1 | R | 2000B |  |  | 999 | R | $\begin{array}{\|l\|l\|} \hline \text { \|K304 = 3: "Required Segment } \\ \text { Missing" } \end{array}$ | 2000B.SBR must be present. |  |
| X223.109.2000B.SBR.020 | SBR |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2000B.SBR is allowed. |  |
| X223.109.2000B.SBR01.010 | SBR01 | Payer Responsibility Sequence Number Code | ID | 1-1 | R |  |  | $\underset{\mathrm{A}, \mathrm{~B}, \mathrm{C}, \mathrm{D}, \mathrm{E}, \mathrm{~F}, \mathrm{G}, \mathrm{H}, \mathrm{P}, \mathrm{~S}, \mathrm{~T}}{\mathrm{U}}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.SBR01 must be present. |  |
| X223.109.2000B.SBR01.020 | SBR01 |  |  |  |  |  |  |  | 999 | E | 1K403 = 7: "Invalid Code Value" | 2000B.SBR01 must be valid values. |  |
| X223.109.2000B.SBR01.030 | SBR01 |  |  |  |  |  |  |  | 277 | T | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..." } \\ \text { TBDO3: "This Line of Business does } \\ \text { not sumport this qualifier." } \\ \hline \end{array}$ | 2000B.SBR01 must be "S" or "P". | Companion Guide Note needed. |
| X223.109.2000B.SBR01.040 | SBR01 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." CSC 286: "Other payer's Explanation of Benefits/payment information" | If 2000B.SBR01 = "S" there must be at least one 2320.SBR01 with a value equal to "P". |  |
| X223.109.2000B.SBR02.010 | SBR02 | Individual Relationship Code | ID | 2-2 | s |  |  | 18 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2000B.SBR02 must be present. |  |
| X223.109.2000B.SBR02.020 | SBR02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2000B.SBR02 must be "18". |  |
| X223.109.2000B.SBR03.010 | SBR03 | $\begin{gathered} \hline \text { Insured Group or Policy } \\ \text { Number } \\ \hline \end{gathered}$ | AN | 1-50 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2000B.SBR03 must contain at least one non-space character. |  |
| X223.109.2000B.SBR03.020 | SBR03 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2000B.SBR03 must be 1-50 characters. |  |
| X223.109.2000B.SBR03.030 | SBR03 |  |  |  |  |  |  |  | 277 | T |  |  |  |
| X223.109.2000B.SBR03.040 | SBR03 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 6: \text { "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2000B.SBR03 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.109.2000B.SBR03.050 | SBR03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. .. CSC 511: "Invalid character" CSC 163: "Entity's policy number" FIC: 11 Subscriber |  |  |
| X223.109.2000B.SBR04.010 | SBR04 | Insured Group Name | AN | 1-60 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2000B.SBR04 is present, 2000B.SBR03 must not be present. |  |
| X223.109.2000B.SBR04.015 | SBR04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2000B.SBR04 must contain at least one non-space character. |  |
| X223.109.2000B.SBR04.020 | SBR04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2000B.SBR04 must be 1-60 characters. |  |
| X223.109.2000B.SBR04.030 | SBR04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 663: "Entity's Group Name" FIC. Il Subscriher |  |  |
| X223.109.2000B.SBR04.040 | SBR04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2000B.SBR04 must be populated with accepted AN characters. |  |
| X223.109.2000B.SBR04.050 | SBR04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 663: "Entity's Group Name" FIC:ll_Subscriber |  |  |
| $\begin{aligned} & \text { X223.109.2000B.SBR04.060 } \\ & \text { edit deactivated } \end{aligned}$ | SBR04 |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR04.070 <br> edit deactivated | SBR04 |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.109.2000B.SBR05.010 | SBR05 | Insurance Type Code | ID | 1-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2000B.SBR05 must not be present. |  |
| X223.109.2000B.SBR06.010 | SBR06 | $\begin{aligned} & \hline \text { Coordination of Benefits } \\ & \text { Code } \end{aligned}$ | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2000B.SBR06 must not be present. |  |
| X223.109.2000B.SBR07.010 | SBR07 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2000B.SBR07 must not be present. |  |
| X223.109.2000B.SBR08.010 | SBR08 | Employment Status Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2000B.SBR08 must not be present. |  |
| X223.109.2000B.SBR09.010 | SBR09 | Claim Filing Indicator Code | ID | 1-2 | s |  |  | 11, 12, 13, 14, 15, 16, 17, AM, BL, CH, CI, DS, FI, HM, LM, MA, MB, MC, OF, TV, VA, WC MA, MB, MZ ZZ | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBDO3: "This Line of Business does not support this qualifier." | 2000B.SBR09 must be "MA". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.112.2010BA.NM1.010 | NM1 | SUBSCRIBER NAME |  | 1 | R | 2010BA | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010BA.NM1 must be present. |  |
| X223.112.2010BA.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | 1K304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2010BA.NM1 is allowed. |  |
| X223.112.2010BA.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM101 must be present. |  |
| X223.112.2010BA.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 2010BA.NM101 must be "LL". |  |
| X223.112.2010BA.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1, 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM102 must be present. |  |
| X223.112.2010BA.NM102.020 | NM102 |  |  |  |  |  |  |  | 277 | c |  | 2010BA.NM102 must be "1". |  |
| X223.112.2010BA.NM103.010 | NM103 | Subscriber Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM103 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.112.2010BA.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM103 must contain at least one non-space |  |
| X223.112.2010BA.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 20108A.NM103 must be 1-60 characters. |  |
| х223.112.2010BA.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC- Il Subscriher |  |  |
| X223.112.2010BA.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | Element" | 2010BA.NM103 must be populated with accepted AN characters. |  |
| X223.112.2010BA.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC: لl. Subscriber |  |  |
| х223.112.2010BA.NM104.010 | NM104 | Subscriber First Name | AN | 1-35 | s |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." CSC 505: "Entity's First Name" EIC: IL Subscriber | 2010BA.NM104 must be present. |  |
| X223.112.2010BA.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | R | 1K403 = 6: "Invalid Character in Data Element" | 2010BA.NM104 must contain at least one non-space character. |  |
| X223.112.2010BA.NM104.030 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 20108A.NM104 must be 1-35 characters. |  |
| X223.112.2010BA.NM104.040 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC. لll Subscriher |  |  |
| X223.112.2010BA.NM104.050 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM104 must be populated with accepted AN characters. |  |
| X223.112.2010BA.NM104.060 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC: lll Subscriber |  |  |
| X223.112.2010BA.NM105.010 | NM105 | Subscriber Middle Name | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.NM105 must contain at least one non-space character. |  |
| X223.112.2010BA.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 20108A.NM105 must be 1-25 characters. |  |
| х223.112.2010BA.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. Il Subscriher |  |  |
| х223.112.2010BA.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2010BA.NM105 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|l\|l} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.112.2010BA.NM105.050 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC. IL Subscriber |  |  |
| X223.112.2010BA.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2010BA.NM106 must not be present. |  |
| X223.112.2010BA.NM107.010 | NM107 | Subscriber Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data <br> Element" | 2010BA.NM107 must contain at least one non-space |  |
| X223.112.2010BA.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 20108A.NM107 must be 1-10 characters. |  |
| X223.112.2010BA.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { Rejected for Invalid Information.." } \\ & \text { CCS 512: "Length invalid for receiver's } \\ & \text { application system" } \\ & \text { CSC 125: "Entity"s Name" } \\ & \text { FIC. .il Suscriber } \end{aligned}$ |  |  |
| X223.112.2010BA.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | E | $\underset{\substack{\text { IK403 }=6: ~ " I n v a l i d ~ C h a r a c t e r ~ i n ~ D a t a ~}}{\text { Element" }}$ | 2010BA.NM107 must be populated with accepted AN characters. |  |
| X223.112.2010BA.NM107.050 | NM107 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { 1Rejected for Invalid Information..." } \\ & \text { CSC 511: "Invalid character" } \\ & \text { CSC 125: "Entity's Name" } \\ & \text { FIC:U.\|_Subscriber } \end{aligned}$ |  |  |
| X223.112.2010BA.NM108.010 | NM108 | $\begin{aligned} & \text { Identification Code } \\ & \text { Qualifier } \end{aligned}$ | ID | 1-2 | R |  |  | II, MI | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.NM108 must be present. | 2010BA.NM108 must be present. |
| X223.112.2010BA.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 20108A.NM108 must be "MII". | 2010BA.NM108 must be "MI". |
| X223.112.2010BA.NM109.010 | NM109 | Subscriber Primary Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2010BA.NM109 must be present. |  |
| X223.112.2010BA.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 164: "Entity's contract/member <br> number" <br> EIC: IL Subscriber | NM109 must be 10-11 positions in the format of NNNNNNNNNA or NNNNNNNNNAA or NNNNNNNNNAN where "A" represents an alpha character and " N " represents a numeric digit. | 01/20: Companion Guide Note needed. |
| X223.112.2010BA.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 164: "Entity's contract/member number" EIC: IL Subscriber | NM109 must be 7-12 positions in the format of ANNNNNN or AANNNNNN or AANNNNNNNNN or AAANNNNNN or AAANNNNNNNNN where " A " represents an alpha character and " N " represents a numeric digit. | 01/20: Companion Guide Note needed. |
| X223.112.2010BA.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2010BA.NM110 must not be present. |  |
| X223.112.2010BA.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2010BA.NM111 must not be present. |  |
| X223.112.2010BA.NM112.010 | NM112 | $\substack{\text { Name Last or Organization } \\ \text { Name }}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2010BA.NM112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.115.2010BA.N3.010 | N3 | SUBSCRIBER ADDRESS |  | 1 | s | 2010BA |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.N3 is allowed. |  |
| X223.115.2010BA.N301.010 | N301 | Subscriber Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element | 2010BA.N301 must be present. |  |
| X223.115.2010BA.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2010BA.N301 must contain at least one non-space character. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA111 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.115.2010BA.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.N301 must be 1-55 characters. |  |
| X223.115.2010BA.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street Address" FIC. Il Subscriher |  |  |
| X223.115.2010BA.N301.050 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N301 must be populated with accepted AN characters. |  |
| X223.115.2010BA.N301.060 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement 1Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" EIC:.l_ Subscriber |  |  |
| $\begin{array}{\|l\|} \hline \text { 223.115.2010BA.N302.010 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.115.2010BA.N302.020 | N302 | Subscriber Address Line | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If present 2010BA.N302 must contain at least one non space character. |  |
| х223.115.2010BA.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA. 3302 must be 1-55 characters. |  |
| X223.115.2010BA.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street Address" FIC. 1 L Subscriher |  |  |
| X223.115.2010BA.N302.050 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N302 must be populated with accepted AN |  |
| X223.115.2010BA.N302.060 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 503: "Entity's Street address" FIC:لll_Subscriber |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.116.2010BA.N4.010 | N4 | SUBSCRIBER CITYISTATEIZIP CODE |  | 1 | R | 2010BA |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010BA.N4 must be present. |  |
| X223.116.2010BA.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.N4 is allowed. |  |
| X223.116.2010BA.N401.010 | N401 | Subscriber City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.N401 must be present. |  |
| X223.116.2010BA.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N401 must contain at least two non-space characters. |  |
| X223.116.2010BA.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2010BA. N401 must be 2-30 characters. |  |
| X223.116.2010BA.N401.040 | N401 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 512: "Length hinalid for receiver's application system" CS5 502: "Entity's C City" EIC . IL Subscriher |  |  |
| X223.116.2010BA.N401.050 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BA.N401 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.116.2010BA.N401.060 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement RRejeted for Invalid Information..." CsC 511: "Invalid character" CSC 502: "Entity's City" EIC: لll_ Subscriber |  |  |
| X223.116.2010BA.N402.010 | N402 | Subscriber State Code | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010BA.N404 is not present, 2010BA.N402 must be present. |  |
| X223.116.2010BA.N402.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.116.2010BA.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" EIC: IL_ Subscriber | 2010BA.N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.116.2010BA.N403.010 | N403 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Subscriber Postal Zone or } \\ \text { ZIP Code } \end{array} \\ \hline \end{array}$ | ID | 3-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010BA.N404 is not present, 2010BA.N403 must be present. |  |
| X223.116.2010BA.N403.020 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.116.2010BA.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" EIC: IL Subscriber | 2010BA.N403 must be a valid zip code. | Valid Zip Code reference must be available for this edit. |
| X223.116.2010BA.N404.010 | N404 | Country Code | ID | 2-3 | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 680: "Entity's Country" EIC: IL Subscriber | 2010BA.N404 must be a valid 2 character Country Code. | Valid alpha-2 Country Code reference must be available for this edit. (from Part 1 of ISO 3166) |
| X223.116.2010BA.N405.010 | N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2010BA.N405 must not be present. |  |
| X223.116.2010BA.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.116.2010BA.N407.010 | N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 695: "Entity's Country Subdivision Code" <br> EIC: IL Subscriber | 2010BA.N407 must be a valid Country Subdivision Code. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.118.2010BA.DMG. 010 | DMG | SUBSCRIBER DEMOGRAPHIC INFORMATION |  | 1 | s | 2010BA |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | 2010BA.DMG must be present. |  |
| X223.118.2010BA.DMG. 020 | DMG |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 20108A.DMG is allowed. |  |
| X223.118.2010BA.DMG01.010 | DMG01 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.DMG01 must be present. |  |
| X223.118.2010BA.DMG01.020 | DMG01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010BA.DMG01 must be "D8". |  |
| X223.118.2010BA.DMG02.010 | DMG02 | Subscriber Birth Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 20108A.DMG02 must be present. |  |
| X223.118.2010BA.DMG02.020 | DMG02 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2010BA.DMGO2 must be a valid date in CCYYMMDD format. |  |
| X223.118.2010BA.DMG02.030 | DMG02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 510: "Future date" CSC 158: "Entity's date of birth" | 2010BA.DMG02 must not be a future date. | 01/20: Companion Guide Note needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.118.2010BA.DMG03.010 | DMG03 | Subscriber Gender Code | ID | 1-1 | R |  |  | F, M, U | 999 | R | 1K403 = 1: "Required Data Element | 2010BA.DMG03 must be present. |  |
| X223.118.2010BA.DMG03.020 | DMGO3 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010BA.DMG03 must be valid values. |  |
| X223.118.2010BA.DMG04.010 | DMG04 | Marital Status Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.118.2010BA.DMG05.010 | DMG05 | Race or Ethnicity Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.118.2010BA.DMG06.010 | DMG06 | Citizenship Status Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.118.2010BA.DMG07.010 | DMG07 | Country Code | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.118.2010BA.DMG08.010 | DMG08 | Basis of Verification Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.118.2010BA.DMG09.010 | DMG09 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.118.2010BA.DMG10.010 | DMG10 | Code List Qualifier Code | ID | 1-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.118.2010BA.DMG11.010 | DMG11 | Industry Code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.120.2010BA.REF. 010 | REF | SUBSCRIBER SECONDARY IDENTIFICATION |  | 1 | s | 2010BA |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2010BA.REF with REF01 $=$ "SY" must not be present. | Companion Guide Note needed. |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.121.2010BA.REF. 010 | REF | PROPERTY AND CASUALTY CLAIM NUMBER |  | 1 | s | 2010BA |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BA.REF with REF01 = " Y 4 " is allowed. | pass-through |
| X223.121.2010BA.REF01.010 | REF01 | $\begin{gathered} \hline \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | Y4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BA.REF01 must be present. |  |
| X223.121.2010BA.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010BA.REF01 must be "Y4". |  |
| X223.121.2010BA.REF02.010 | REF02 | $\begin{array}{\|c} \hline \text { Property Casualty Claim } \\ \text { Number } \\ \hline \end{array}$ | AN | 1-50 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2010BA.REF02 must be present. |  |
| X223.121.2010BA.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2010BA.REF02 must contain at least one non-space character |  |
| X223.121.2010BA.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2010BA.REF02 must be 1-50 characters. |  |
| X223.121.2010BA.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 629: "Property Casualty Claim Number" EIC. 1 . Suhscriher |  |  |
| X223.121.2010BA.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { El. I. Sunhribher } \\ & \text { IK403 =6 "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2010BA.REFO2 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. Max. | Usage Req. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.121.2010BA.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 629: "Property Casualty Claim Number" <br> FIC. ll Subscriher |  |  |
| X223.121.2010BA.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.121.2010BA.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = = 10: "Implementation "Not } \\ & \text { USed" Iement Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x223.122.20108B.NM1.010 | NM1 | PAYER NAME |  | 1 | R | 2010BB | 1 |  | 999 | R | IK304 = 3: "Required Segment | 2010BB.NM1 must be present. |  |
| x223.122.2010BB.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK304=4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 20108B.NM1 is allowed. |  |
| х223.122.20108B.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | PR | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM101 must be present. |  |
| X223.122.2010BB.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010BB.NM101 must be "PR". |  |
| X223.122.20108B.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 20108B,NM102 must be present. |  |
| X223.122.2010BB.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2010BB.NM102 must be "2". |  |
| х223.122.20108B.Nм103.010 | NM103 | Payer Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM103 must be present. |  |
| х223.122.20108B.Nм103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM103 must contain at least one non-space character. |  |
| х223.122.20108B.Nм103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 20108B.NM103 must be 1-60 characters. |  |
| х223.122.20108B.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { RRejected for Invalid Information..." } \\ & \text { CSS 512: "Length invalid for receiver's } \\ & \text { application system" } \\ & \text { CSC 504. "Entity's Last Name" } \\ & \text { EIC. PR: Paver } \end{aligned}$ |  |  |
| х223.122.20108B.Nм103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM103 must be populated with accepted AN characters. |  |
| X223.122.2010BB.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 504: "Entity's Last Name" EIC: PR Paver |  |  |
| х223.122.20108B.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = =110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.122.20108B.NM105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.122.20108B.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.122.2010BB.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.122.20108B.NM108.010 | NM108 | $\begin{gathered} \hline \text { Identification Code } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 1-2 | R |  |  | PI, XV | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM108 must be present. |  |
| х223.122.20108B.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 20108B.NM108 must be "PI". |  |
| X223.122.2010BB.Nм109.010 | NM109 | Payer Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.NM109 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Lepeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х223.122.20108B.NM109.020 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM109 must contain at least two non-space characters. |  |
| X223.122.2010BB.NM109.030 | NM109 |  |  |  |  |  |  |  | 999 | E | K403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 20108B.NM109 must be 2-80 characters. |  |
| X223.122.2010BB.NM109.040 | NM109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 53: "Entity ID Number" EIC: "PR" |  |  |
| X223.122.2010BB.NM109.050 | NM109 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BB.NM109 must be populated with accepted AN characters. |  |
| X223.122.2010BB.NM109.060 | NM109 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 53: "Entity ID Number" EIC: "PR" |  |  |
| X223.122.2010BB.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.122.2010BB.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 10: "Implementation "Not } \\ & \text { USed" Flement Present" } \end{aligned}$ | Must not be present. |  |
| X223.122.2010BB.NM112.010 | NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.124.2010BB.N3.010 | N3 | PAYER ADDRESS |  | 1 | s | 2010BB |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BB.N3 is allowed. |  |
| X223.124.20108B.N301.010 | N301 | Payer Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB. 301 must be present. |  |
| X223.124.20108B.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 20108BB.N301 must contain at least one non-space character. |  |
| х223.124.20108B.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 20108B. 3301 must be 1-55 characters. |  |
| X223.124.2010BB.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "nntity's Street Address" EIC. PR: Paver |  |  |
| X223.124.20108B.N301.050 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N301 must be populated with accepted AN characters. |  |
| X223.124.2010BB.N301.060 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 503: "Entity's Street address" FlC: PR Paver |  |  |
| $\begin{array}{\|l\|} \hline \text { X223.124.2010BB.N302.010 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.124.20108B.N302.020 | N302 | Payer Address Line | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If present, 2010BB. N302 must contain at least one non-space character. |  |
| х223.124.20108B.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 20108B. N302 must be 1-55 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.124.2010BB.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street Address" FIC. PR Paver |  |  |
| X223.124.20108B.N302.050 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N302 must be populated with accepted AN characters. |  |
| X223.124.2010BB.N302.060 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 503: "Entity's Street address" ElC: PR Paver |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.125.2010BB.N4.010 | N4 | PAYER CITYISTATEIZIP CODE |  | 1 | R | 2010BB |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2010BB.N4 must be present. |  |
| X223.125.2010BB.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BB.N4 is allowed. |  |
| X223.125.2010BB.N401.010 | N401 | Payer City Name | AN | 2-30 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2010BB.N401 must be present. |  |
| X223.125.2010BB.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N401 Must contain at least two non-space characters. |  |
| X223.125.2010BB.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2010BB.N401 must be 2-30 characters. |  |
| X223.125.2010BB.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 502: "Entity's City" <br> EIC PR: PR Paver |  |  |
| X223.125.2010BB.N401.050 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BB.N401 must be populated with accepted AN characters. |  |
| X223.125.2010BB.N401.060 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 502: "Entity's City" FIC: PR Paver |  |  |
| X223.125.2010BB.N402.010 | N402 | Payer State Code | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2010BB.N404 is not present, 2010BB.N402 must be present. |  |
| $\begin{array}{\|l\|} \hline \text { 223.125.2010BB.N402.020 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.125.2010BB.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 501: "Entity's State/Province" } \\ & \text { EIC: PR Paver } \\ & \hline \end{aligned}$ | 2010BB.N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.125.2010BB.N403.010 | N403 | Payer Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If 2010BB.N404 is not present, 2010BB.N403 must be present. |  |
| $\begin{array}{\|l\|} \hline \text { 223.125.2010BB.N403.020 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.125.2010BB.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 500: "Entity's Postal/Zip Code" EIC: PR Payer | 2010BB. N 403 must be a valid zip code. | Valid Zip Code reference must be available for this edit. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { min. } \\ \text { Max. } \end{gathered}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { TA11/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.125.20108B.N404.010 | N404 | Country Code | ID | 2-3 | s |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.125.2010BB.N405.010 | N405 | Location Qualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| х223.125.20108B.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not | Must not be present. |  |
| X223.125.20108B.N407.010 | N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.127.2010BB.REF.010 | REF | PAYER SECONDARY IDENTIFICATION |  | 3 | s | 2010BB |  |  | 277 | c | CSCC A7: "Acknowled for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2010BB.REF with REF01 = "2U, "El", "FY", or "NF" must not be present. | Companion Guide Note needed. |
| X223.129.2010BB.REF.010 | REF | BILLING PROVIDER SECONDARY IDENTIFICATION |  | 1 | s | 2010BB |  |  | 999 | R | 1K304 = 2: "Unexpected Segment" | 2010BB.REF with REF01 = "G2" must be present when 2010AA.NM109 is not present. | Trailblazer Only <br> 01/20: Companion Guide Note needed. |
| X223.129.2010BB.REF.020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2010BB.REF with REF01 = "G2" is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.129.2010BB.REF. 330 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2010BB.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| X223.129.2010BB.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G2, LU | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2010BB.REF01 must be present. |  |
| X223.129.2010BB.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2010bB.REF01 must be valid values. |  |
| X223.129.2010BB.REFO2.010 | REF02 | Payer Additional Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2010BB.REF02 must be present. |  |
| х223.129.2010BB.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2010BB.REF02 must contain at least one-none space character. |  |
| X223.129.2010BB.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 20108B.REF02 must be 1-50 characters. |  |
| X223.129.2010BB.REFO2.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> IRejected for Invalid Information..." <br> Csc 512: "Length invalid for receiver's <br> application ssystem" <br> CSc 560: "Entity's <br> Additional/Secondary Identifier" |  |  |
| X223.129.2010BB.REFO2.050 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2010BB.REF02 must be populated with accepted AN characters. |  |
| X223.129.2010BB.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC AT: "Acknowledgement /Rejected for Invalid Information..." CCC 511: "Inalid character" CSC 560: "Entity's Addititonal//Secondary Identifier" EIC. PR Paver |  |  |
| X223.129.2010BB.REF02.070 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2010BB.REFO2 billing provider must be "associated" to the submitter (from a trading partner management perspective) in 1000A.NM109. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\substack{\text { Loop }}}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA111 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.129.2010BB.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.129.2010BB.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.131.2000C.HL. 010 | HL | PATIENT HIERARCHICAL LEVEL |  | 1 | s | 2000C | >1 |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2000C.HL must not be present. | 01/20: Companion Guide Note needed. |
| X223.133.2000C.PAT. 010 | PAT | PATIENT INFORMATION | ID | 1 | R | 2000C |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2000C.PAT must not be present. |  |
| X223.135.2010CA.NM1.010 | NM1 | PATIENT NAME | ID | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2010CA.NM1 must not be present. |  |
| X223.137.2010CA.N3.010 | N3 | PATIENT ADDRESS |  | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2010CA.N3 must not be present. |  |
| X223.138.2010CA.N4.010 | N4 | PATIENT CITYISTATEIZIP CODE |  | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2010CA.N4 must not be present. |  |
| X223.140.2010CA.DMG. 010 | DMG | PATIENT DEMOGRAPHIC INFORMATION |  | 1 | R | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2010CA.DMG must not be present. |  |
| X223.142.2010CA.REF. 010 | REF | PROPERTY AND CASUALTY CLAIM NUMBER |  | 1 | s | 2010CA |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2010CA.REF must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.143.2300.CLM.010 | CLM | cLaim information Loop |  |  |  | 2300 | 100 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only 100 iterations of the $\mathbf{2 3 0 0}$ loop are allowed. |  |
| X223.143.2300.CLM. 020 | CLM | CLAIM Information |  | 1 | R | 2300 | 1 |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2300.CLM must be present. |  |
| X223.143.2300.CLM.030 | CLM |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 1 iteration of 2300.CLM is allowed. |  |
| X223.143.2300.CLM01.010 | CLM01 | Patient Control Number | AN | 1-38 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missina" | 2300.CLM01 must be present. |  |
| x223.143.2300.CLM01.020 | CLM01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.CLM01 must contain at least one-non-space character. |  |
| X223.143.2300.CLM01.030 | CLM01 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.CLM01 must be 1-38 characters. | Companion Guide Note Needed - <br> only positions 1-20 will be stored/returned |
| X223.143.2300.CLM01.040 | CLM01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD12: "Claim submitter's identifier" <br> Suagest use CSCC A6 |  |  |
| X223.143.2300.CLM01.050 | CLM01 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 =6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.CLM01 must be populated with accepted AN characters. |  |
| X223.143.2300.CLM01.060 | CLM01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" TBD12: "Claim submitter's identifier" |  |  |
| X223.143.2300.CLM02.010 | CLM02 | Total Claim Charge Amount | R | 1-18 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element | 2300.CLM02 must be present. |  |
| X223.143.2300.CLM02.020 | CLM02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK } 403=\text { = : "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.CLM02 must be numeric. |  |
| X223.143.2300.CLM02.030 | CLM02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 693: "Amount must be greater than or equal to zero" CSC 178: "Submitted Charaes" | 2300.CLM02 must be >= 0 . |  |
| X223.143.2300.CLM02.040 | CLM02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.CLM02 must be <= 99,999,999.99. |  |
| X223.143.2300.CLM02.050 | CLM02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 178: "Submitted Charaes" | 2300.CLM02 must be <= 99,999,999.99. | 2300.CLM02 must be <= 99,999,999.99. |
| X223.143.2300.CLM02.060 | CLM02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" CSC 178: "Submitted Charaes" | 2300.CLMO2 is limited to 0,1 or 2 decimal positions. |  |
| X223.143.2300.CLM02.070 | CLM02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 400: "Claim is out of balance CSC 178: "Submitted Charaes" | 2300.CLM02 must equal the sum of all 2400. SV203 amounts. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.143.2300.CLM02.080 | CLM02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 400: "Claim is out of Balance" CSC 672 "Payer's payment information is out of balance" | CLMO2 must equal the sum of all 2320 CAS amounts \& all 2430 CAS amounts and 2320 AMT02 (when AMT01=D). |  |
| X223.143.2300.CLM03.010 | CLM03 | Claim Filing Indicator Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM04.010 | CLM04 | Non-Institutional Claim Type Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM05.010 | CLM05 | HEALTH CARE SERVICE LOCATION INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| х223.143.2300.CLM05-1.010 | CLM05-1 | Facility Type Code | AN | 1-2 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM05-1 must be present. |  |
| х223.143.2300.CLM05-1.020 | CLM05-1 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 228: "Type of bill for UB claim" | 2300.CLM05-1 must be the 1st and 2nd positions of a valid Uniform Bill Type Code. | Valid Uniform Bill Type Code reference must be available for this edit. |
| X223.143.2300.CLM05-2.010 | CLM05-2 | Facility Code Qualifier | ID | 1-2 | R |  |  | A | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2300.CLM05-2 must be present. |  |
| X223.143.2300.CLM05-2.020 | CLM05-2 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.CLM05-2 must be"A". |  |
| X223.143.2300.CLM05-3.010 | CLM05-3 | Claim Frequency Code | ID | 1-1 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM05-3 must be present. |  |
| х223.143.2300.CLM05-3.020 | CLM05-3 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 228:"Type of bill for UB claim" | 2300.CLMO5-3 must be the 3rd position of a valid Uniform Bill Type Code. | Valid Uniform Bill Type Code reference must be available for this edit edit. |
| X223.143.2300.CLM06.010 | CLM06 | Provider or Supplier Signature Indicator | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM07.010 | CLM07 | Medicare Assignment Code | ID | 1-1 | R |  |  | A, B, C | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM07 must be present. |  |
| X223.143.2300.CLM07.020 | CLM07 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.CLM07 must be valid values. |  |
| X223.143.2300.CLM08.010 | CLM08 | Benefits Assignment Certification Indicator | ID | 1-1 | R |  |  | N, W, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM08 must be present. |  |
| X223.143.2300.CLM08.020 | CLM08 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.CLM08 must be valid values. |  |
| X223.143.2300.CLM09.010 | CLm09 | $\begin{gathered} \hline \begin{array}{c} \text { Release of Information } \\ \text { Code } \end{array} \\ \hline \end{gathered}$ | ID | 1-1 | R |  |  | I, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CLM09 must be present. |  |
| X223.143.2300.CLM09.020 | CLM09 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.CLM09 must be valid values. |  |
| X223.143.2300.CLM10.010 | CLM10 | Patient Signature Source Code | ID | 1-1 | N/U |  |  | P | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM11.010 | CLM11 | RELATED CAUSES INFORMATION |  |  | N/U |  |  |  | 999 | E | \|K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM12.010 | CLM12 | Special Program Indicator | ID | 2-3 | N/U |  |  | 02, 03, 05, 09 | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM13.010 | CLM13 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM14.010 | CLM14 | Level of Service Code | ID | 1-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM15.010 | CLM15 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM16.010 | CLM16 | Participation Agreement | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not | Must not be present. |  |
| X223.143.2300.CLM17.010 | CLM17 | Claim Status Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM18.010 | CLM18 | Yes/No Condition or Response Code | ID | 1-1 | R |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.143.2300.CLM19.010 | CLM19 | Claim Submission Reason Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.143.2300.CLM20.010 | CLM20 | Delay Reason Code | ID | 1-2 | s |  |  | 1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.CLM20 must be valid values. |  |
| X223.149.2300.DTP. 010 | DTP | DATE - DISCHARGE HOUR |  | 1 | s | 2300 |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | 2300.DTP with DTP01 ="096" must be present on all final inpatient claims. Final impatient claims are ones with a TOB Freq eual to ' 1 ' or ' 4 '. |  |
| X223.149.2300.DTP. 020 | DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "096" is allowed. |  |
| X223.149.2300.DTP01.010 | DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 096 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |  |
| X223.149.2300.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2300.DTP01 must be "096". |  |
| X223.149.2300.DTP02.010 | DTP02 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | тм | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| X223.149.2300.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "TM". |  |
| X223.149.2300.DTP03.010 | DTP03 | Discharge Hour | AN | 1-35 | R |  |  | нНмM | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| X223.149.2300.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 9: "Invalid Time" | 2300.DTP03 must be a valid time in HHMM format. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.150.2300.DTP. 010 | DTP | dATE-STATEMENT DATES | ID | 1 | R | 2300 |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2300.DTP must be present. |  |
| X223.150.2300.DTP. 020 | DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "434" is allowed. |  |
| X223.150.2300.DTP01.010 | DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 434 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |  |
| X223.150.2300.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.DTP01 must be "434". |  |
| X223.150.2300.DTP02.010 | DTP02 | Date Time Period Format Qualifier | AN | 2-3 | R |  |  | RD8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| X223.150.2300.DTP02.010 | DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be "RD*". |  |
| X223.150.2300.DTP03.010 | DTP03 | $\begin{gathered} \hline \text { Statement From or To } \\ \text { Date } \end{gathered}$ | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| X223.150.2300.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.151.2300.DTP. 010 | DTP | DATE - ADMISSION DATEIHOUR |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | 2300.DTP with DTP01 = "435" must be present for all inpatient claims. |  |
| ×223.151.2300.DTP. 020 | DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP with DTP01 = "435" is allowed. |  |
| X223.151.2300.DTP01.010 | DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 435 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |  |
| X223.151.2300.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | IK 403 = 7: "Invalid Code Value" | 2300.DTP01 must be "435". |  |
| X223.151.2300.DTP02.010 | DTP02 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8, DT | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| X223.151.2300.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP02 must be valid values. |  |
| X223.151.2300.DTP03.010 | DTP03 | Admission Date and Hour | AN | 1-35 | R |  |  | CCYYMMDD, CCYYMMDDHHMM | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| X223.151.2300.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 8: "Invalid Date" | If 2300.DTP02 equals D8, then 2300.DTP03 must be a valid date in CCYYMMDD format. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.151.2300.DTP03.030 | DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | If 2300.DTP02 equals DT, then 2300.DTP03 must be a valid date in CCYYMMDDHHMM format. | 3/17: Companion Guide note needed - CMS prefers use of the DT code and inclusion of the time. |
| X223.151.2300.DTP03.040 | DTP03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 189: "Facility admission date" | 2300.DTP03 must not be a future date. | Companion Guide note needed |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.152.2300.DTP. 010 | DTP | DATE-REPRICER RECEIVED DATE |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.DTP is allowed. | pass through, syntax only. |
| X223.152.2300.DTP01.010 | DTP01 | Date Time Qualifier | ID | 3-3 | R |  |  | 050 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP01 must be present. |  |
| X223.152.2300.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.DTP01 must be "050". |  |
| X223.152.2300.DTP02.010 | DTP02 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP02 must be present. |  |
| X223.152.2300.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.DTP02 must be "D8". |  |
| X223.152.2300.DTP03.010 | DTP03 | Order Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.DTP03 must be present. |  |
| X223.152.2300.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | 2300.DTP03 must be a valid date in CCYYMMDD format. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.153.2300.CL1.010 | CL1 | INSTITUTIONAL CLAIM CODE |  | 1 | R | 2300 |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2300.CL1 must be present. |  |
| x223.153.2300.CL1.020 | CL1 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CL1 is allowed. |  |
| X223.153.2300.CL101.010 | CL101 | Admission Type Code | ID | 1-1 | s |  |  |  | 999 | R | K K 03 = 2: "Conditional Required Data Element Missing" | 2300.CL101 must be present when 2300.CLM05-1 is "11", "12". "18", "21", "22" or "41". |  |
| X223.153.2300.CL101.020 | CL101 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | $2300 . \mathrm{CL101}$ must be 1 character. |  |
| x223.153.2300.CL101.030 | CL101 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 231: "Hospital admission type" | 2300.CL101 must be a valid Admission Type Code. | Valid Admission Type Code reference must be available for this edit. |
| X223.153.2300.CL102.010 | CL102 | Admission Source Code | ID | 1-1 | s |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CL102 must be present. |  |
| X223.153.2300.CL102.020 | CL102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300. CL102 must be 1 character. |  |
| X223.153.2300.CL102.030 | CL102 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 229: "Hospital admission source" | 2300.CL102 must be a valid Admission Source Code. | Valid Admission Source Code reference must be available for this edit. |
| X223.153.2300.CL103.010 | CL103 | Patient Status Code | ID | 1-2 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missinq" | 2300.CL103 must be present. |  |
| X223.153.2300.CL103.020 | CL103 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 234: "Patient discharge status" | 2300.CL103 must be a valid Patient Status Code. | Valid Patient Status Code reference must be available for this edit. |
| X223.153.2300.CL104.010 | CL104 | Nursing Home Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.154.2300.PWK. 010 | PWK | CLAIM SUPPLEMENTAL INFORMATION |  | 10 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of 2300.PWK are allowed. | pass through, syntax only. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | $\begin{gathered} \text { Accept/ } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.154.2300.PWK01.010 | PWK01 | Attachment Report Type Code | ID | 2-2 | R |  |  | $03,04,05,06,07,08,09,10$, $11,13,15,21, ~ A 3, ~ A 4, ~ A M, ~ A S$, B2, B3, B4, BR, BS, BT, CB, CK, CT, D2, DA, DB, DG, DJ, DS, EB, HC, HR, I5, IR, LA, M1, MT, NN, OB, OC, OD, OE, OX, OZ, P4, P5, PE, PN, PO, PQ, PY, PZ, RB, RR, RT, RX, | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.PWK01 must be present. |  |
| X223.154.2300.PWK01.020 | PWK01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.PWK01 must be valid values. |  |
| ×223.154.2300.PWK02.010 | PWK02 | Attachment Transmission Code | ID | 1-2 | R |  |  | AA, BM, EL, EM, FT, FX | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.PWK02 must be present. |  |
| X223.154.2300.PWK02.020 | PWK02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.PWK02 must be valid values. |  |
| X223.154.2300.PWK03.010 | PWK03 | Report Copies Needed | No | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.154.2300.PWK04.010 | PWK04 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.154.2300.PWK05.010 | PWK05 | $\begin{gathered} \hline \text { Identification Code } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 1-2 | s |  |  | AC | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | When 2300.PWK05 is present, 2300.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |  |
| X223.154.2300.PWK05.020 | PWK05 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.PWK05 must be "AC". |  |
| X223.154.2300.PWK06.010 | PWK06 | Attachment Control Number | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | When 2300.PWK06 is present, 2300.PWK02 must be "BM", "EL", "EM", "FX" or "FT". |  |
| X223.154.2300.PWK06.020 | PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2300.PWK06 must be 2-50 characters. |  |
| ×223.154.2300.PWK06.030 | PWK06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 489: "Attachment Control Number" |  |  |
| X223.154.2300.PWK06.040 | PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.PWK06 must be populated with accepted AN characters. |  |
| ×223.154.2300.PWK06.050 | PWK06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 489: "Attachment Control Number" |  |  |
| X223.154.2300.PWK06.060 | PWK06 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2300.PWK06 must contain at least two non-space characters. |  |
| X223.154.2300.PWK07.010 | PWK07 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.154.2300.PWK08.010 | PWK08 | ACTIONS INDICATED |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.154.2300.PWK09.010 | PWK09 | Request Category Code | ID | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.158.2300.CN1.010 | CN1 | CONTRACT INFORMATION | ID | 1 | s | 2300 |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300.CN1 must not be present. | IG note that CN1 is not for HIPAA claims. |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.160.2300.AMT. 010 | AMT | PATIENT ESTIMATED AMOUNT DUE |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.AMT is allowed. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.160.2300.AMT01.010 | AMT01 | Amount Qualifier Code | ID | 1-3 | R |  |  | F3 | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2300.AMT01 must be present. |  |
| X223.160.2300.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.AMT01 must be "F3". |  |
| X223.160.2300.AMT02.010 | AMT02 | Patient Responsibility Amount | R | 1-18 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missinq" | 2300.AMT02 must be present. |  |
| X223.160.2300.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | AMTO2 must be numeric. |  |
| X223.160.2300.AMT02.030 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 565: "Estimated Claim Due Amount" EIC: QC "Patient" | 2300.AMT02 must be $>=0$. |  |
| X223.160.2300.AMT02.040 | AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.AMT02 must be <=99,999,999.99. |  |
| X223.160.2300.AMT02.050 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 565: "Estimated Claim Due Amount" |  |  |
| X223.160.2300.AMT02.060 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." Csc CoS ti97: "Too many decimal positions" CsC 565: "Estimated Claim Due Amount" | 2300.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| X223.160.2300.AMT03.010 | AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.161.2300.REF. 010 | REF | SERVICE AUTHORIZATION EXCEPTION CODE |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .REF with REF01 = "4N" is allowed. | pass through, syntax only. |
| X223.161.2300.REF01.010 | REF01 | Reference Identification Qualifier |  |  |  |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.161.2300.REF01.020 | REF01 |  | ID | 2-3 | R |  |  | 4N | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "4N". |  |
| X223.161.2300.REF02.030 | REF02 | Service Authorization Exception Code | ID | 1-50 | R |  |  | 1, 2, 3, 4, 5, 6, 7 | 999 | R | K403 = 1: "Required Data Element Missinq" | 2300.REF02 must be present. |  |
| X223.161.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. REF02 must be valid values. |  |
| X223.161.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.161.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER | AN |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.163.2300.REF. 010 | REF | REFERRAL NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .REF with REF01 = "9F" is allowed. |  |
| X223.163.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9 F | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.163.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "9F". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|c\|} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\left\|\begin{array}{c} \text { Accept/ } \\ \text { Reject } \end{array}\right\|$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.163.2300.REF02.010 | REF02 | Prior Authorization or Referral Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2300.REF02 must be present. |  |
| X223.163.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.163.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| X223.163.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 48: "referral/Authorization" |  |  |
| X223.163.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| X223.163.2300.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> 1Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 48: "Referrallauthorization." |  |  |
| X223.163.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not | Must not be present. |  |
| X223.163.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.164.2300.REF. 010 | REF | PRIOR AUTHORIZATION |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "G1" is allowed. |  |
| X223.164.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.164.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "G1". |  |
| X223.164.2300.REF02.010 | REF02 | Prior Authorization Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300. REF02 must be present. |  |
| X223.164.2300.REFO2.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.164.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| X223.164.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 252: "Authorization/Certification Number" |  |  |
| X223.164.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| X223.164.2300.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 252: "Authorization/ certification number" |  |  |
| X223.164.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.164.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\underset{\text { Min. }}{\text { Max. }}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.166.2300.REF. 010 | REF | PAYER CLAIM CONTROL NUMBER | ID | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. REF with REF01 $=$ "F8" is allowed. | Required when CLM05-3 (Claim Frequency Code) indicates this claim is a replacement or void to a previously adjudicated claim. |
| X223.166.2300.REF. 010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | F8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.166.2300.REF01.010 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "F8". |  |
| X223.166.2300.REF02.010 | REF02 | PAYER CLAIM CONTROL NUMBER | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.166.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character character. |  |
| X223.166.2300.REF02.030 | REFF2 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| X223.166.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 464: "Payer Assigned Claim |  |  |
| X223.166.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| X223.166.2300.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 464: "Payer Assigned Claim Control Number" |  |  |
| X223.166.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.166.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | \|K403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.167.2300.REF. 010 | REF | REPRICED CLAIM NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "9A" is allowed. | pass through, syntax only. |
| X223.167.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9A | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.167.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.REF01 must be "9A". |  |
| X223.167.2300.REF02.010 | REF02 | Repriced Claim Reference <br> Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.167.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.167.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| X223.167.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 702. "Renticed Claim Reference |  |  |
| X223.167.2300.REFO2.050 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA111 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | $\begin{aligned} & \text { Accept// } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.167.2300.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 702: "Repriced Claim Reference Number" |  |  |
| X223.167.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.167.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.168.2300.REF. 010 | REF | ADJUSTED REPRICED CLAIM NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. REF with REF01 $=$ "9C" is allowed. | pass through, syntax only. |
| X223.168.2300.REF01.010 | REF01 | $\begin{gathered} \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | 9 C | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.168.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "9C". |  |
| X223.168.2300.REF02.010 | REF02 | Adjusted Repriced Claim Reference Number | AN | 1-50 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.168.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.168.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300. REF02 must be 1-50 characters. |  |
| X223.168.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 517: "Adjusted Repriced Claim Reference Number" |  |  |
| X223.168.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| X223.168.2300.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 517: "Adjusted Repriced Claim Reference Number" |  |  |
| X223.168.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.168.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.169.2300.REF. 010 | REF | INVESTIGATIONAL DEVICE EXEMPTION NUMBER |  | 5 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "LX" is allowed. | CMS is only accepting one iteration. |
| X223.169.2300.REF01.010 | REF01 | $\begin{gathered} \text { Reference Identification } \\ \text { Qualifier } \end{gathered}$ | ID | 2-3 | R |  |  | LX | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. | 03/30: Companion Guide Note needed. |
| X223.169.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "LX". |  |
| X223.169.2300.REF02.010 | REF02 | Investigational Device Exemption Number | AN | 1-50 | R |  |  |  | 999 | R | K 403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.169.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.REF02 must contain at least one non-space character. |  |
| Х223.169.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.169.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 579: "Investigational Device Exemntion_dentifior" |  |  |
| X223.169.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REFO2 must be populated with accepted AN characters. |  |
| X223.169.2300.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 579: "Investigational Device Exemption Identifier" |  |  |
| X223.169.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.169.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.170.2300.REF. 010 | REF | CLAIM IDENTIFIER FOR TRANSMISSION INTERMEDIARIES |  | 1 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "D9" is allowed. | pass through, syntax only. |
| X223.170.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | D9 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.170.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.REF01 must be "D9" |  |
| X223.170.2300.REF02.010 | REF02 | Value Added Network Trace Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.170.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.170.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-20 characters. |  |
| X223.170.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 543: "Clearinghouse or Value Added Network Trace" |  |  |
| X223.170.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.REFO2 must be populated with accepted AN characters. |  |
| X223.170.2300.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 543: "Clearinghouse or Value Added Network Trace" |  |  |
| X223.170.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = =110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.170.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.172.2300.REF. 010 | REF | auto accident state |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds | Only one iteration of 2300.REF with REF01 = "LU" | pass through, syntax only. |
| X223.172.2300.REF01.010 | REFO1 | $\begin{gathered} \hline \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | LU | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.172.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.REF01 must be "LU". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA111 } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | $\begin{array}{\|c\|} \hline \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.172.2300.REF02.010 | REF02 | Auto Accident State or Province | AN | 1-50 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 501: "Entity's State/Province" CSC 171: Other insurance coverage information (health, liability, auto, etc.) | 2300.REF02 must be a valid State or Provience code. | Valid State Code reference must be available for this edit. |
| X223.172.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.172.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.173.2300.REF. 010 | REF | MEDICAL RECORD NUMBER |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "EA" is allowed. |  |
| X223.173.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | EA | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2300.REF01 must be present. |  |
| X223.173.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "EA". |  |
| X223.173.2300.REF02.010 | REF02 | Medical Record Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.173.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.173.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| X223.173.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 588. "medical Record Number" |  |  |
| X223.173.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | $\qquad$ | 2300.REF02 must be populated with accepted AN characters. |  |
| X223.173.2300.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 588: "Medical Record Number" |  |  |
| X223.173.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.173.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.174.2300.REF. 010 | REF | DEMONSTRATION PROJECT IDENTIFIER |  | 1 | s | 2300 |  |  | 999 | R | IK304=5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.REF with REF01 = "P4" is allowed. |  |
| X223.174.2300.REF01.010 | REF01 | $\begin{gathered} \hline \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | P4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.174.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.REF01 must be "P4". |  |
| X223.174.2300.REF02.010 | REF02 | Demonstration Project Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REFO2 must be present. |  |
| X223.175.2300.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.175.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Elemen | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.175.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 556: "Demonstration Project Identifier" |  |  |
| X223.174.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.174.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.175.2300.REF. 010 | REF | PEER REVIEW ORGANIZATION (PRO) APPROVAL NUMBER |  | 1 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .REF with REF01 $=$ " G 4 " is allowed. |  |
| X223.175.2300.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF01 must be present. |  |
| X223.175.2300.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{REF01}$ must be "G4". |  |
| X223.175.2300.REF02.010 | REF02 | PRO Number | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.REF02 must be present. |  |
| X223.175.2300.REF02.020 | REFF2 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.175.2300.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300.REF02 must be 1-50 characters. |  |
| X223.175.2300.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 611: "Peer Review Authorization Number" |  |  |
| X223.175.2300.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | \|K403 = 6: "Invalid Character in Data Element" | 2300.REF02 must be populated with accepted AN characters. |  |
| X223.175.2300.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 611: "Peer Review Authorization <br> Number" |  |  |
| X223.175.2300.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.175.2300.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.176.2300.к3.010 | K3 | FILE INFORMATION |  | 10 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of K3 are allowed. |  |
| х223.176.2300.K301.010 | K301 | Fixed Format Information | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | $2300 . \mathrm{K} 301$ must be present. |  |
| X223.176.2300.K301.020 | K301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.K301 must contain at least one non-space character. |  |
| X223.176.2300.K301.030 | K301 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | $2300 . \mathrm{K} 301$ must be 1-80 characters. |  |
| X223.176.2300.K301.040 | K301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 569: "Fixed Format Information" |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA111 } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | $\begin{array}{\|c\|} \hline \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.176.2300.K301.050 | K301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300. K301 must be populated with accepted AN characters. |  |
| X223.176.2300.K301.060 | K301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 569: "Fixed Format Information" |  |  |
| х223.176.2300.K302.010 | K302 | Record Format Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| х223.176.2300.к303.010 | K303 | COMPOSITE UNIT OF MEASURE |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.178.2300.NTE.010 | NTE | CLAIM NOTE |  | 10 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of 2300.NTE are allowed. |  |
| X223.178.2300.NTE01.010 | NTE01 | Note Reference Code | ID | 3-3 | R |  |  | ALG, DCP, DGN, DME, MED, NTR, ODT, RHB, RLH, RNH, SET, SFM, SPT, UPI | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.NTE01 must be present. |  |
| X223.178.2300.NTE01.020 | NTE01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.NTE01 must be valid values. |  |
| X223.178.2300.NTE02.010 | NTE02 | Claim Note Text | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.NTE02 must be present. |  |
| X223.178.2300.NTE02.020 | NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must be at least one non-space character. |  |
| X223.178.2300.NTE02.030 | NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.NTE02 must be 1-80 characters. |  |
| X223.178.2300.NTE02.040 | NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 297: "Medical Notes/Renort" |  |  |
| X223.178.2300.NTE02.050 | NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must be populated with accepted AN characters. |  |
| X223.178.2300.NTE02.060 | NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 297: "Medical Notes/Report |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.180.2300.NTE. 010 | NTE | BILLING NOTE |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.NTE is allowed. |  |
| X223.180.2300.NTE01.010 | NTE01 | Note Reference Code | ID | 3-3 | R |  |  | ADD | 999 | R | K403 = 1: "Required Data Element Missinq" | 2300.NTE01 must be present. |  |
| X223.180.2300.NTE01.020 | NTE01 |  |  |  |  |  |  |  | 999 | R | IK403 7: "Invalid Code Value" | 2300.NTE01 must be "ADD". |  |
| X223.180.2300.NTE02.010 | NTE02 | Billing Note Text | AN | 1-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2300.NTE02 must be present. |  |
| X223.180.2300.NTE02.020 | NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must be at least one non-space |  |
| X223.180.2300.NTE02.030 | NTE02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300.NTE02 must be 1-80 characters. |  |
| X223.180.2300.NTE02.040 | NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD14- "Billina Note Text" |  |  |
| X223.180.2300.NTE02.050 | NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.NTE02 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | $\begin{array}{\|l\|l} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.180.2300.NTE02.060 | NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" TBD14: "Billina Note Text" |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.181.2300.CRC. 010 | CRC | EPSDT REFERRAL |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.CRC with CRC01 = "ZZ" is allowed. | pass through, syntax only. |
| X223.181.2300.CRC01.010 | CRC01 | Code Category | ID | 2-2 | R |  |  | zz | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC01 must be present. |  |
| X223.181.2300.CRC01.020 | CRC01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.CRC01 must be "ZZ". |  |
| X223.181.2300.CRC02.010 | CRC02 | $\begin{aligned} & \hline \text { Certification Condition } \\ & \text { Indicator } \\ & \hline \end{aligned}$ | ID | 1-1 | R |  |  | N, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC02 must be present. |  |
| X223.181.2300.CRC02.020 | CRC02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "IIvalid Code Value" | $2300 . C R C 02$ must be valid values. |  |
| X223.181.2300.CRC03.010 | CRC03 | Condition Code | ID | 2-3 | R |  |  | AV, NU, S2, ST | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.CRC03 must be present. |  |
| X223.181.2300.CRC03.020 | CRC03 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.CRC03 must be valid values. |  |
| X223.181.2300.CRC04.010 | CRC04 | Condition Code | ID | 2-3 | S |  |  | AV, NU, S2, ST | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{CRC} 04$ must be valid values. |  |
| X223.181.2300.CRC05.010 | CRC05 | Condition Code | ID | 2-3 | S |  |  | AV, NU, S2, ST | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{CRC05}$ must be valid values. |  |
| X223.181.2300.CRC06.010 | CRC06 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.181.2300.CRC07.010 | CRC07 | Condition Indicator | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.184.2300.H1.010 | HI | PRINCIPAL DIAGNOSIS |  | 1 | R | 2300 |  |  | 999 | R | 1K304 = 3: "Required Segment Missing" | 2300.HI with H001-1 = "BK" must be present. | ICD-9 Only period |
| X223.184.2300.H1.020 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2300.HI with H01-1 = "BK" or "ABK" must be present. | Transition period |
| X223.184.2300.H1.030 | HI |  |  |  |  |  |  |  | 999 | R | $1 \mathrm{KK304}=3:$ "Required Segment Missing" | 2300.H1 with H101-1 = "ABK" must be present. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.184.2300.H1.040 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.HI with H101-1 = "BK" is allowed. | ICD-9 Only period |
| X223.184.2300.H1.050 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with $\mathrm{H} 101-1=$ "BK" or "ABK" is allowed. | Transition period |
| X223.184.2300.H1.060 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 . HI with H101-1 = "ABK" is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
|  | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.184.2300.H01-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABK, BK | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300. H101-1 must be present. |  |
| X223.184.2300.H101-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 01-1$ must be valid values. |  |
| X223.184.2300.H01-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BK". | ICD-9 Only period |
| X223.184.2300.H01-1.040 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must = "ABK". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.184.2300.H101-2.010 | H01-2 | Industry Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2300.H01-2 must be present. |  |
| X223.184.2300.H01-2.020 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 254: "Primary diagnosis code" | If 2300.HIO1-1 is "BK" then 2300.HO1-2 must be a valid ICD-9-CM Principal Diagnosis code (based on date of service). | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Diagnosis Code reference must be available for this edit |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. <br> Max. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\left\|\begin{array}{c} \text { Acceptl } \\ \text { Reject } \end{array}\right\|$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.184.2300.H101-2.030 | H101-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 254: "Primary diagnosis code" | If 2300.HIO1-1 is "ABK" then 2300. HIO1-2 must be a valid ICD-10-CM Principal Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Diagnosis Code reference must be available for this edit |
| X223.184.2300.H101-2.040 | H101-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H01-2 must not contain a ".." |  |
| X223.184.2300.H101-2.050 | H01-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 254: "Primary diagnosis code" |  |  |
| Х223.184.2300.H101-3.010 | H01-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-3 must not be present. |  |
| X223.184.2300.H101-4.010 | H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-4 must not be present. |  |
| X223.184.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-5 must not be present. |  |
| X223.184.2300.H101-6.010 | H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| X223.184.2300.H101-7.010 | H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| X223.184.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| х223.184.2300.H101-9.010 | H01-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H 101-9 must be valid values. |  |
| X223.184.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H02 must not be present. |  |
| X223.184.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H03 must not be present. |  |
| X223.184.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H004 must not be present. |  |
| X223.184.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H05 must not be present. |  |
| X223.184.2300.H106.010 | H106 | HEALTH CARE CODE |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106 must not be present. |  |
| X223.184.2300.H107.010 | H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107 must not be present. |  |
| X223.184.2300.H108.010 | H08 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H108 must not be present. |  |
| X223.184.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109 must not be present. |  |
| X223.184.2300.H110.010 | H110 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110 must not be present. |  |
| X223.184.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H111 must not be present. |  |
| X223.184.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l} \hline \begin{array}{l} \text { X223.187.2300.HI. } 010 \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ | HI |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.187.2300.HI. } 020 \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ | H |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.187.2300.HI. } 030 \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ | HI |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | Loop <br> Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\begin{aligned} & \text { X223.187.2300.HI. } 040 \\ & \text { edit deactivated } \end{aligned}$ | HI |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.187.2300.H1.050 | HI | ADMITTING DIAGNOSIS |  | 1 | R | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. HI with $\mathrm{HIO1-1}=$ "BJ" is allowed. | ICD-9 Only period |
| X223.187.2300.H1.060 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. HI with H101-1 = "BJ" or "ABJ" is allowed. | Transition period |
| X223.187.2300.H1.070 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H101-1 = "ABJ" is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.187.2300.H101.010 | H01 | HEALTH CARE CODE |  |  | R |  |  |  |  |  |  |  |  |
| X223.187.2300.H101-1.010 | H01-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABJ, BJ | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| X223.187.2300.H01-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 101-1$ must = "BJ". | ICD-9 Only period |
| х223.187.2300.H101-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 01-1$ must = "ABJ". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.187.2300.H101-2.010 | H01-2 | Admitting Diagnosis Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 232: "Admitting Diagnosis" | If 2300.HIO1-1 is "BJ" then 2300.HIO1-2 must be a valid ICD-9-CM Admitting Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Admitting Diagnosis Code reference must be available for this edit |
| X223.187.2300.H101-2.020 | H101-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 232: "Admitting Diagnosis" | If 2300.HIO1-1 is "ABJ" then 2300.HIO1-2 must be a valid ICD-10-CM Admitting Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Admitting <br> Diagnosis Code reference must be available for this edit |
| х223.187.2300.H101-2.030 | H101-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H01-2 must not contain a ".". |  |
| X223.187.2300.H101-2.040 | H01-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 232: "Admittina Diaanosis" |  |  |
| X223.187.2300.H101-3.010 | H01-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-3 must not be present. |  |
| X223.187.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-4 must not be present. |  |
| X223.187.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-5 must not be present. |  |
| х223.187.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| х223.187.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| X223.187.2300.H101-8.010 | H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H101-8 must not be present. |  |
| X223.187.2300.H101-9.010 | H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-9 must not be present. |  |
| X223.187.2300.H102.010 | H102 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102 must not be present. |  |
| X223.187.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H03 must not be present. |  |
| X223.187.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H04 must not be present. |  |
| X223.187.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H05 must not be present. |  |
| X223.187.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.187.2300.H107.010 | H107 | HEALTH CARE CODE |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.HIO7 must not be present. |  |
| X223.187.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H008 must not be present. |  |
| X223.187.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109 must not be present. |  |
| X223.187.2300.H110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110 must not be present. |  |
| X223.187.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111 must not be present. |  |
| X223.187.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.189.2300.HI. 010 <br> edit deactivated | HI |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.189.2300.HI. 020 edit deactivated | H |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.189.2300.HI. 030 | H |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.189.2300.HI. 040 | HI |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.189.2300.H1.050 | HI | PATIENT REASON FOR VISIT |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.HI with HI01-1 = "PR" is allowed. | ICD-9 Only period |
| X223.189.2300.H1.060 | H |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300.HI with H101-1 = "PR" or "APR" is allowed | Transition period |
| х223.189.2300.H1.070 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .HI with H101-1 = "APR" is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.189.2300.H01.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| х223.189.2300.H101-1.010 | H01-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | APR, PR | 999 | R | 1 1403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| Х223.189.2300.H101-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H101-1 must = "PR". | ICD-9 Only period |
| X223.189.2300.H101-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 101-1$ must = "APR". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.189.2300.H101-2.010 | H01-2 | Patient Reason For Visit | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 673: "Patient reason for visit" | If $2300 . \mathrm{HIO1}-1$ is "PR" then 2300 .HIO1-2 must be a valid ICD-9-CM Patient Reason for Visit code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Patient's Reason for Visit Code reference must be available for this edit |
| X223.189.2300.H101-2.020 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 673: "Patient reason for visit" | If 2300.HIO1-1 is "APR" then 2300.HIO1-2 must be a valid ICD-10-CM Patient Reason for Visit code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Patient's Reason for Visit Code reference must be available for this edit. |
| X223.189.2300.H101-2.030 | H01-2 |  |  |  |  |  |  |  | 999 | E | $\underset{\substack{\text { IK403 = 6: "Invalid Character in Data } \\ \text { Element" }}}{ }$ | 2300.H101-2 must not contain a ".". |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | Usage | Loop | $\underset{\text { Lepeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA111 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.189.2300.H101-2.040 | H101-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 673: "Patient reason for visit" |  |  |
| X223.189.2300.H101-3.010 | H101-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-3 must not be present. |  |
| X223.189.2300.H101-4.010 | H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-4 must not be present. |  |
| X223.189.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H101-5 must not be present. |  |
| х223.189.2300.H101-6.010 | H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| X223.189.2300.H101-7.010 | H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H101-7 must not be present. |  |
| X223.189.2300.H101-8.010 | H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| X223.189.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI01}$ is present then $2300 . \mathrm{HIO}$ may be |  |
| X223.189.2300.H102-1.010 | H102-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | APR, PR | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must be valid values. |  |
| X223.189.2300.H102-1.020 | H102-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must = "PR". | ICD-9 Only period |
| X223.189.2300.H102-1.030 | H102-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H102-1 must = "APR". | ICD-10 Only period - assumes no dual-use after mandated date |
| X223.189.2300.H102-2.010 | H102-2 | Patient Reason For Visit | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 673: "Patient reason for visit" | If 2300.HIO2-1 is "PR" then 2300.HIO2-2 must be a valid ICD-9-CM Patient Reason for Visit code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Patient's Reason for Visit Code reference must be available for this edit |
| X223.189.2300.H102-2.020 | H102-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 673: "Patient reason for visit" | If 2300.HIO2-1 is "APR" then 2300.HIO2-2 must be a valid ICD-10-CM Patient Reason for Visit code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Patient's Reason for Visit Code reference must be available for this edit |
| X223.189.2300.H102-2.030 | H102-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H102-2 must not contain a ".". |  |
| X223.189.2300.H102-2.040 | H102-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 673: "Patient reason for visit" |  |  |
| X223.189.2300.H102-3.010 | H102-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = = 110: "Implementation "Not Used" Element Present" | 2300.H102-3 must not be present. |  |
| X223.189.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-4 must not be present. |  |
| X223.189.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-5 must not be present. |  |
| X223.189.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | 2300.H102-6 must not be present. |  |
| X223.189.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-7 must not be present. |  |
| X223.189.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-8 must not be present. |  |
| X223.189.2300.H102-9.010 | H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-9 must not be present. |  |
| X223.189.2300.H103.010 | H03 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO} 02$ is present then 2300 . HIO3 may be |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. <br> Max. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.189.2300.H103-1.010 | H103-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | APR, PR | 999 | R | $11403=7$ : "Invalid Code Value" | 2300. $\mathrm{H} 103-1$ must be valid values. |  |
| X223.189.2300.H103-1.020 | H103-1 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H103-1 must = "PR". | ICD-9 Only period |
| X223.189.2300.H103-1.030 | H03-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H 103 -1 must = "APR". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.189.2300.H103-2.010 | H03-2 | Patient Reason For Visit | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 673: "Patient reason for visit" | If 2300 HIO3-1 is "PR" then 2300 .HIO3-2 must be a valid ICD-9-CM Patient Reason for Visit code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Patient's Reason for Visit Code reference must be available for this edit |
| X223.189.2300.H103-2.020 | H103-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 673: "Patient reason for visit" | If 2300.HIO3-1 is "APR" then 2300 .HIO3-2 must be a valid ICD-10-CM Patient Reason for Visit code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Patient's Reason for Visit Code reference must be available for this edit. |
| X223.189.2300.H103-2.030 | H103-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H03-2 must not contain a ".." |  |
| X223.189.2300.H103-2.040 | H103-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 511: "Invalid character" CSC 673: "Patient reason for visit" |  |  |
| Х223.189.2300.H103-3.010 | H103-3 | Date Time Period Format | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H103-3 must not be present. |  |
| х223.189.2300.H103-4.010 | H03-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H103-4 must not be present. |  |
| х223.189.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| х223.189.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-6 must not be present. |  |
| х223.189.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-7 must not be present. |  |
| X223.189.2300.H103-8.010 | H03-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-8 must not be present. |  |
| X223.189.2300.H103-9.010 | H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H103-9 must not be present. |  |
| X223.189.2300.H104.010 | H04 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H04 must not be present. |  |
| X223.189.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H05 must not be present. |  |
| X223.189.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106 must not be present. |  |
| X223.189.2300.H107.010 | H07 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H107 must not be present. |  |
| X223.189.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H08 must not be present. |  |
| X223.189.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H009 must not be present. |  |
| X223.189.2300.H110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110 must not be present. |  |
| X223.189.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111 must not be present. |  |
| X223.189.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H1.010 | HI | $\underset{\substack{\text { EXTERNAL CAUSE OF } \\ \text { INJURY }}}{ }$ |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with $\mathrm{HIO1-1}=$ "BN" is allowed. | CD-9 Only period |
| X223.193.2300.H1.020 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300. HI with HIO1-1 = "BN" or "ABN" is allowed. | Transition period |
| X223.193.2300.H1.030 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with HIO1-1 = "ABN" | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H01.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| х223.193.2300.H101-1.010 | H01-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| Х223.193.2300.H101-1.020 | H101-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H101-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO1-1}$ must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H101-2.010 | H01-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO1-1 is "BN" then 2300. HIO1-2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H101-2.020 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. HIO1-1 is "ABN" then 2300 .HI01-2 must be a valid ICD-10-CM External Cause of Injury code. valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H101-2.030 | H01-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H01-2 must not contain a ".". |  |
| X223.193.2300.H101-2.040 | H01-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H101-3.010 | H01-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-3 must not be present. |  |
| X223.193.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H101-4 must not be present. |  |
| X223.193.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H01-5 must not be present. |  |
| X223.193.2300.H101-6.010 | H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| X223.193.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| X223.193.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 101-8 must not be present. |  |
| X223.193.2300.H101-9.010 | H01-9 | $\begin{gathered} \text { Present on Admission } \\ \text { indicator } \end{gathered}$ | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H01-9 must be valid values. |  |
| X223.193.2300.H02.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI01}$ is present then 2300 .HI02 may be present. |  |
| х223.193.2300.H102-1.010 | H102-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must be valid values. |  |
| Х223.193.2300.H102-1.020 | H102-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.HIO2-1 must = "BN". | ICD-9 Only period |
| х223.193.2300.H102-1.030 | H102-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H102-1}$ must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H102-2.010 | H02-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO2-1 is "BN" then 2300. HIO2-2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H102-2.020 | H02-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. HIO2-1 is "ABN" then 2300 . HIO2-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| X223.193.2300.H102-2.030 | H02-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H102-2 must not contain a ".". |  |
| X223.193.2300.H102-2.040 | H02-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H102-3.010 | H102-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Oualifier } \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-3 must not be present. |  |
| X223.193.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-4 must not be present. |  |
| X223.193.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H102-5 must not be present. |  |
| X223.193.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-6 must not be present. |  |
| X223.193.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H102-7 must not be present. |  |
| X223.193.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-8 must not be present. |  |
| X223.193.2300.H102-9.010 | H102-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-9 must be valid values. |  |
| X223.193.2300.H103.010 | H03 | HEALTH CARE CODE |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI02 is present then $2300 . \mathrm{HIO}$ may be present. |  |
| х223.193.2300.H103-1.010 | H103-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must be valid values. |  |
| х223.193.2300.H103-1.020 | H03-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H103-1.030 | H003-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H I03-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H103-2.010 | H03-2 | External Cause of Injury | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If $2300 . \mathrm{HIO} 03$ - 1 is " BN " then 2300 . $\mathrm{HIO} 0-2$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H103-2.020 | H103-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO3-1 is "ABN" then 2300. HIO3-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H103-2.030 | H103-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H03-2 must not contain a ".". |  |
| X223.193.2300.H103-2.040 | H103-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| Х223.193.2300.H103-3.010 | H03-3 | Date Time Period Format Oualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H 103-3 must not be present. |  |
| X223.193.2300.H103-4.010 | H103-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-4 must not be present. |  |
| х223.193.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H103-5 must not be present. |  |
| X223.193.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H103-6 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \operatorname{min.} \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H103-7 must not be present. |  |
| X223.193.2300.H103-8.010 | H03-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H O03-8 must not be present. |  |
| Х223.193.2300.H103-9.010 | H103-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-9 must be valid values. |  |
| X223.193.2300.H04.010 | H04 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 03$ is present then $2300 . \mathrm{HIO4}$ may be present. |  |
| X223.193.2300.H104-1.010 | H104-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 104-1$ must be valid values. |  |
| X223.193.2300.H104-1.020 | H04-1 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 411-1$ must = "BN". | ICD-9 Only period |
| X223.193.2300.H104-1.030 | H04-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H104-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H104-2.010 | H104-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. H104-1 is "BN" then 2300 . HIO4-2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be |
| X223.193.2300.H104-2.020 | H104-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If $2300 . \mathrm{HIO4-1}$ is "ABN" then $2300 . \mathrm{H} 104-2$ must be a valid ICD-10-CM External Cause of Injury code. valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H104-2.030 | H104-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H104-2 must not contain a ".." |  |
| X223.193.2300.H104-2.040 | H104-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H104-3.010 | H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300. H104-3 must not be present. |  |
| X223.193.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H104-4 must not be present. |  |
| X223.193.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-5 must not be present. |  |
| X223.193.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-6 must not be present. |  |
| X223.193.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-7 must not be present. |  |
| X223.193.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-8 must not be present. |  |
| Х223.193.2300.H104-9.010 | H104-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 104-9$ must be valid values. |  |
| X223.193.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO} 04$ is present then 2300 .HIO5 may be present. |  |
| X223.193.2300.H105-1.010 | H105-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 105-1$ must be valid values. |  |
| X223.193.2300.H105-1.020 | H105-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO5-1}$ must = "BN". | ICD-9 Only period |
| X223.193.2300.H105-1.030 | H105-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H I05-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H105-2.010 | H105-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. $\mathrm{H} 105-1$ is "BN" then 2300 . HIO5-2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H105-2.020 | H105-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. HIO5-1 is "ABN" then 2300 . HIO5-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| X223.193.2300.H105-2.030 | H05-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H105-2 must not contain a "." |  |
| X223.193.2300.H105-2.040 | H105-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H105-3.010 | H105-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Oualifier } \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H O5-3 must not be present. |  |
| X223.193.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H105-4 must not be present. |  |
| X223.193.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H105-5 must not be present. |  |
| X223.193.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 105-6$ must not be present. |  |
| X223.193.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. $\mathrm{H} 105-7$ must not be present. |  |
| X223.193.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-8 must not be present. |  |
| X223.193.2300.H105-9.010 | H105-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 105-9$ must be valid values. |  |
| X223.193.2300.H106.010 | H106 | HEALTH CARE CODE |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI05 is present then $2300 . \mathrm{HIO6}$ may be present. |  |
| х223.193.2300.H106-1.010 | H106-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 106-1$ must be valid values. |  |
| х223.193.2300.H106-1.020 | H106-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H106-1.030 | H106-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H 106 -1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H106-2.010 | H106-2 | External Cause of Injury | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If $2300 . \mathrm{HIO6}-1$ is " BN " then $2300 . \mathrm{HIO6}-2$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H106-2.020 | H106-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO6-1 is "ABN" then 2300 .HIO6-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H106-2.030 | H106-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H06-2 must not contain a ".". |  |
| X223.193.2300.H106-2.040 | H106-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| Х223.193.2300.H106-3.010 | H106-3 | Date Time Period Format Oualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H106-3 must not be present. |  |
| X223.193.2300.H106-4.010 | H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-4 must not be present. |  |
| х223.193.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H106-5 must not be present. |  |
| X223.193.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H106-6 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 9999/ } \\ 277 C A \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H106-7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H 106-7 must not be present. |  |
| X223.193.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 106 -8 must not be present. |  |
| х223.193.2300.H106-9.010 | H106-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H106-9 must be valid values. |  |
| X223.193.2300.H107.010 | H07 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 . HIO6 is present then 2300 . HIO present. |  |
| х223.193.2300.H107-1.010 | H107-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | \|K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 07-1$ must be valid values. |  |
| Х223.193.2300.H107-1.020 | H07-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO7-1}$ must = "BN". | ICD-9 Only period |
| х223.193.2300.H107-1.030 | H07-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.HI07-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H107-2.010 | H107-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. HIOT-1 is "BN" then 2300 . HIO7-2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be |
| х223.193.2300.H107-2.020 | H07-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO7-1 is "ABN" then 2300 .HI07-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H107-2.030 | H107-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H107-2 must not contain a ".". |  |
| X223.193.2300.H107-2.040 | H107-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| Х223.193.2300.H107-3.010 | H107-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H107-3 must not be present. |  |
| X223.193.2300.H107-4.010 | H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H107-4 must not be present. |  |
| х223.193.2300.H107-5.010 | H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H107-5 must not be present. |  |
| х223.193.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-6 must not be present. |  |
| х223.193.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| X223.193.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H107-8 must not be present. |  |
| X223.193.2300.H107-9.010 | H107-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | IK403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 107-9$ must be valid values. |  |
| X223.193.2300.H108.010 | H08 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300. HI07 is present then 2300 . HI08 may be present. |  |
| х223.193.2300.H108-1.010 | H108-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 108-1$ must be valid values. |  |
| Х223.193.2300.H108-1.020 | H08-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H108-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H108-1.030 | H08-1 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.H108-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H108-2.010 | H108-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300 HIO8-1 is " BN " then $2300 . \mathrm{HIO}$ - 2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H108-2.020 | H08-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. HIO8-1 is "ABN" then 2300 . HIO8-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit. |
| X223.193.2300.H108-2.030 | H08-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H108-2 must not contain a ".". |  |
| X223.193.2300.H108-2.040 | H08-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H108-3.010 | H008-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Oualifier } \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-3 must not be present. |  |
| X223.193.2300.H108-4.010 | H008-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H108-4 must not be present. |  |
| X223.193.2300.H108-5.010 | H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H108-5 must not be present. |  |
| X223.193.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-6 must not be present. |  |
| X223.193.2300.H108-7.010 | H008-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H108-7 must not be present. |  |
| X223.193.2300.H108-8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-8 must not be present. |  |
| X223.193.2300.H108-9.010 | H108-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H 08-9 9 must be valid values. |  |
| X223.193.2300.H109.010 | H09 | HEALTH CARE CODE |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI08 is present then $2300 . \mathrm{HI09}$ may be present. |  |
| х223.193.2300.H109-1.010 | H109-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must be valid values. |  |
| х223.193.2300.H109-1.020 | H09-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H109-1.030 | H109-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" |  | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H109-2.010 | H109-2 | External Cause of Injury | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HI09-1 is "BN" then 2300. HIO9-2 must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H109-2.020 | H109-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300.HIO9-1 is "ABN" then 2300. HIO9-2 must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H109-2.030 | H109-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H09-2 must not contain a ".". |  |
| X223.193.2300.H109-2.040 | H109-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| Х223.193.2300.H109-3.010 | H109-3 | Date Time Period Format Oualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H109-3 must not be present. |  |
| X223.193.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-4 must not be present. |  |
| х223.193.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H109-5 must not be present. |  |
| X223.193.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H109-6 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 9999/ } \\ 277 C A \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-7 must not be present. |  |
| X223.193.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-8 must not be present. |  |
| х223.193.2300.H109-9.010 | H109-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-9 must be valid values. |  |
| X223.193.2300.H110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{H} 109$ is present then $2300 . \mathrm{H} 110$ may be present. |  |
| х223.193.2300.H110-1.010 | H110-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H110-1 must be valid values. |  |
| X223.193.2300.H110-1.020 | H110-1 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2300.H110-1 must = "BN". | ICD-9 Only period |
| х223.193.2300.H110-1.030 | H110-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H110-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H110-2.010 | H110-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If $2300 . \mathrm{HI} 10-1$ is "BN" then $2300 . \mathrm{HIO10}-2$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be |
| X223.193.2300.H110-2.020 | H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300 .HI $10-1$ is "ABN" then 2300 .HIO10-2 must be a valid ICD-10-CM External Cause of Injury code. valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H110-2.030 | H110-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H110-2 must not contain a ".". |  |
| X223.193.2300.H110-2.040 | H110-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H110-3.010 | H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-3 must not be present. |  |
| X223.193.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H110-4 must not be present. |  |
| X223.193.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-5 must not be present. |  |
| х223.193.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-6 must not be present. |  |
| X223.193.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-7 must not be present. |  |
| X223.193.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-8 must not be present. |  |
| X223.193.2300.H110-9.010 | H110-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{Hl10} 09$ must be valid values. |  |
| X223.193.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{Hl10}$ is present then 2300. H111 may be present. |  |
| х223.193.2300.H111-1.010 | H111-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be valid values. |  |
| Х223.193.2300.H111-1.020 | H111-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H111-1.030 | H111-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 111-1$ must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H111-2.010 | H111-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If $2300 . \mathrm{H} 111-1$ is "BN" then $2300 . \mathrm{H} 111-2$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. Max. | $\begin{array}{\|c\|} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|l\|l} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H111-2.020 | H111-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If $2300 . \mathrm{H} 111-1$ is "ABN" then $2300 . \mathrm{HI} 11-2$ must be a valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H111-2.030 | H111-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H111-2 must not contain a ".". |  |
| X223.193.2300.H111-2.040 | H111-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H111-3.010 | H111-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H111-3 must not be present. |  |
| X223.193.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H111-4 must not be present. |  |
| X223.193.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H111-5 must not be present. |  |
| X223.193.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-6 must not be present. |  |
| X223.193.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H111-7 must not be present. |  |
| X223.193.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H111-8 must not be present. |  |
| X223.193.2300.H111-9.010 | H111-9 | Present on Admission indicator | ID | 1-1 | s |  |  | $\mathrm{N}, \mathrm{U}, \mathrm{W}, \mathrm{Y}$ | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H111-9 must be valid values. |  |
| X223.193.2300.H112.010 | H12 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{H} 111$ is present then $2300 . \mathrm{H} 112$ may be present. |  |
| X223.193.2300.H112-1.010 | H12-1 | Diagnosis Type Code | ID | 1-3 | R |  |  | ABN, BN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be valid values. |  |
| Х223.193.2300.H112-1.020 | H112-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H112-1 must = "BN". | ICD-9 Only period |
| X223.193.2300.H112-1.030 | H12-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H12-1 must = "ABN". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.193.2300.H112-2.010 | H112-2 | External Cause of Injury Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. H112-1 is "BN" then $2300 . \mathrm{H} 112-2$ must be a valid ICD-9-CM External Cause of Injury code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H112-2.020 | H112-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 509: "E-Code" | If 2300. H112-1 is "ABN" then 2300 .HI12-2 must be a valid ICD-10-CM External Cause of Injury code. valid ICD-10-CM External Cause of Injury code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM External Cause of Injury Code reference must be available for this edit |
| X223.193.2300.H112-2.030 | H112-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H112-2 must not contain a ".." |  |
| X223.193.2300.H112-2.040 | H112-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 509: "E-Code" |  |  |
| X223.193.2300.H112-3.010 | H112-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-3 must not be present. |  |
| X223.193.2300.H112-4.010 | H112-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-4 must not be present. |  |
| X223.193.2300.H112-5.010 | H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-5 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ 999 / \\ 277 C A \end{array}\right\|$ | $\begin{array}{\|l\|l\|} \hline \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.193.2300.H112-6.010 | H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-6 must not be present. |  |
| X223.193.2300.H112-7.010 | H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-7 must not be present. |  |
| X223.193.2300.H112-8.010 | H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H1012-8 must not be present. |  |
| x223.193.2300.H112-9.010 | H112-9 | Present on Admission indicator | ID | 1-1 | s |  |  | $\mathrm{N}, \mathrm{U}, \mathrm{W}, \mathrm{Y}$ | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H112-9 must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.218.2300.H1.010 | HI | DIAGNOSIS RELATED GROUP (DRG) INFORMATION |  | 1 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with $\mathrm{H} 101-1=$ "DR" is allowed. | 03/27: not pass through |
| X223.218.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| x223.218.2300.H101-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | DR | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HI01-1 must be "DR". |  |
| X223.218.2300.HI01-2.010 | H01-2 | DRG Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 256: "DRG code(s)" | 2300.H101-2 must be a valid DRG code. | Valid Diagnosis Related Group (DRG) reference must be available for this edit. |
| X223.218.2300.H101-3.010 | H01-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-3 must not be present. |  |
| X223.218.2300.HI01-4.010 | H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-4 must not be present. |  |
| X223.218.2300.HI01-5.010 | H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H01-5 must not be present. |  |
| X223.218.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-6 must not be present. |  |
| X223.218.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-7 must not be present. |  |
| X223.218.2300.H101-8.010 | H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-8 must not be present. |  |
| X223.218.2300.H101-9.010 | H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-9 must not be present. |  |
| X223.218.2300.H102.010 | H102 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.HIO2 must not be present. |  |
| X223.218.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103 must not be present. |  |
| X223.218.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H004 must not be present. |  |
| X223.218.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105 must not be present. |  |
| X223.218.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106 must not be present. |  |
| X223.218.2300.H107.010 | H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H107 must not be present. |  |
| X223.218.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108 must not be present. |  |
| X223.218.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109 must not be present. |  |
| X223.218.2300.H110.010 | H110 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110 must not be present. |  |
| X223.218.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | 2300.H111 must not be present. |  |
| X223.218.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{array}$ | $\begin{aligned} & \text { Accept/ } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H1.010 | HI | OTHER DIAGNOSIS INFORMATION |  | 2 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300.HI with HIO1-1 = "BF" are allowed. | ICD-9 Only period |
| X223.220.2300.H1.020 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with H101-1 = "BF" or "ABF" are allowed. | Transition period |
| X223.220.2300.H1.030 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with H101-1 = "ABF" are allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| х223.220.2300.H01-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| X223.220.2300.H101-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 101-1$ must = "BF". | ICD-9 Only period |
| X223.220.2300.H101-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H001-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H101-2.010 | H01-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO1-1}$ is "BF" then 2300. HIO1-2 must be a valid ICD-9-CM Diagnosis code. valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| X223.220.2300.H101-2.020 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HOO1-1}$ is "ABF" then 2300 .HI01-2 must be a valid ICD-10-CM Diagnosis code. valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this |
| X223.220.2300.H101-2.030 | H101-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H101-2 must not contain a ". |  |
| X223.220.2300.H101-2.040 | H101-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diagnosis Code" |  |  |
| X223.220.2300.H101-3.010 | H01-3 | Date Time Period Format | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-3 must not be present. |  |
| X223.220.2300.H101-4.010 | H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-4 must not be present. |  |
| X223.220.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-5 must not be present. |  |
| X223.220.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | NU |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| X223.220.2300.H101-7.010 | H101-7 | Version Identifier | AN | 1-30 | v/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| X223.220.2300.H101-8.010 | H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| X223.220.2300.H101-9.010 | H01-9 | Present on Admission indicator | ID | 1-1 | S |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H101-9 must be valid values. |  |
| X223.220.2300.H102.010 | H102 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 . HI01 is present then $2300 . \mathrm{H} 102$ may be present. |  |
| х223.220.2300.H102-1.010 | H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must be valid values. |  |
| X223.220.2300.H102-1.020 | H102-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H102-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H102-1.030 | H102-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 102-1$ must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \\ \hline \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\begin{gathered} \text { Accept// } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H102-2.010 | H02-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300.HIO2-1 is "BF" then 2300.HIO2-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this dit |
| X223.220.2300.H102-2.020 | H102-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO2}-1$ is "ABF" then 2300. $\mathrm{H} 102-2$ must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this dit |
| X223.220.2300.H102-2.030 | H102-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H102-2 must not contain a ".." |  |
| X223.220.2300.H102-2.040 | H02-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaanosis Code" |  |  |
| X223.220.2300.H102-3.010 | H02-3 | Date Time Period Format Oualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = = I10: "Implementation "Not | 2300. H102-3 must not be present. |  |
| X223.220.2300.H102-4.010 | H02-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-4 must not be present. |  |
| X223.220.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H102-5 must not be present. |  |
| X223.220.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H102-6 must not be present. |  |
| х223.220.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-7 must not be present. |  |
| X223.220.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300. H I02-8 must not be present. |  |
| X223.220.2300.H102-9.010 | H102-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{HIO2}-9$ must be valid values. |  |
| X223.220.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If $2300 . \mathrm{HIO2}$ is present then $2300 . \mathrm{HIOO}$ may be present. |  |
| X223.220.2300.H103-1.010 | H03-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{HIO} 3-1$ must be valid values. |  |
| X223.220.2300.H103-1.020 | H103-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H103-1.030 | H03-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 103-1$ must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H103-2.010 | H103-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO3}-1$ is "BF" then $2300 . \mathrm{HIO3-2}$ must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this enit |
| X223.220.2300.H103-2.020 | H03-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO}-1$ is "ABF" then 2300 . H103-2 must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop |  | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|c} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H103-2.030 | H03-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H103-2 must not contain a ".". |  |
| X223.220.2300.H103-2.040 | H103-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 255: "Diadnosis Code" |  |  |
| X223.220.2300.H103-3.010 | H033-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H IO3-3 must not be present. |  |
| X223.220.2300.H103-4.010 | H03-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H103-4 must not be present. |  |
| х223.220.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| х223.220.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-6 must not be present. |  |
| X223.220.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-7 must not be present. |  |
| X223.220.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H103-8 must not be present. |  |
| X223.220.2300.H103-9.010 | H03-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H 103 -9 must be valid values. |  |
| X223.220.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 03$ is present then $2300 . \mathrm{HI} 04$ may be present. |  |
| х223.220.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2300. $\mathrm{H} 104-1$ must be valid values. |  |
| X223.220.2300.H104-1.020 | H104-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 104-1$ must = "BF". | ICD-9 Only period |
| X223.220.2300.H104-1.030 | H104-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 104-1$ must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H104-2.010 | H104-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO4-1}$ is "BF" then 2300 .HIO4-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this |
| X223.220.2300.H104-2.020 | H104-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 255: "Diagnosis Code" | If 2300. H104-1 is "ABF" then 2300 .HI04-2 must be a valid ICD-10-CM Diagnosis code. valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| X223.220.2300.H104-2.030 | H104-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H104-2 must not contain a ".". |  |
| X223.220.2300.H104-2.040 | H104-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaanosis Code" |  |  |
| X223.220.2300.H104-3.010 | H104-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H104-3 must not be present. |  |
| X223.220.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-4 must not be present. |  |
| X223.220.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H104-5 must not be present. |  |
| X223.220.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-6 must not be present. |  |
| X223.220.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-7 must not be present. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA111 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H104-8 must not be present. |  |
| х223.220.2300.H104-9.010 | H104-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H104-9 must be valid values. |  |
| X223.220.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 04$ is present then $2300 . \mathrm{HIO5}$ may be present. |  |
| X223.220.2300.H105-1.010 | H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H105-1 must be valid values. |  |
| X223.220.2300.H105-1.020 | H105-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 105-1$ must = "BF". | ICD-9 Only period |
| X223.220.2300.H105-1.030 | H105-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H105-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H105-2.010 | H105-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300 .HIO5-1 is "BF" then 2300. HIO5-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this |
| X223.220.2300. $\mathrm{H} 105-2.020$ | H105-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300. HIO5-1 is "ABF" then 2300 .HI05-2 must be a valid ICD-10-CM Diagnosis code. |  |
| X223.220.2300.H105-2.030 | H105-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H105-2 must not contain a ".". |  |
| X223.220.2300.H105-2.040 | H105-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diagnosis Code" |  |  |
| X223.220.2300.H105-3.010 | H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-3 must not be present. |  |
| X223.220.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { lK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-4 must not be present. |  |
| X223.220.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-5 must not be present. |  |
| X223.220.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-6 must not be present. |  |
| X223.220.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-7 must not be present. |  |
| X223.220.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300. H 105-8 must not be present. |  |
| X223.220.2300.H105-9.010 | H105-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H105-9 must be valid values. |  |
| X223.220.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO5}$ is present then $2300 . \mathrm{H} 106$ may be present. |  |
| X223.220.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 106-1$ must be valid values. |  |
| $\times 223.220 .2300 . \mathrm{H106-1.020}$ | H106-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H106-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H106-1.030 | H06-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H I06-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { Acceptl/ } \\ \text { Reject } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H106-2.010 | H06-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HIO6}-1$ is "BF" then $2300 . \mathrm{HIO6}-2$ must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| X223.220.2300.H106-2.020 | H106-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300.H106-1 is "ABF" then 2300.H106-2 must be a valid ICD-10-CM Diagnosis code. | edi Transition period and ICD-10 Only period. Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| X223.220.2300.H106-2.030 | H106-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H106-2 must not contain a ".". |  |
| X223.220.2300.H106-2.040 | H106-2 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 511: "Invalid character" } \\ & \text { CSC 255: "Diaanosis code" } \\ & \hline \end{aligned}$ |  |  |
| Х223.220.2300.H106-3.010 | H106-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H106-3 must not be present. |  |
| X223.220.2300. $\mathrm{H} 106-4.010$ | H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-4 must not be present. |  |
| X223.220.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H H06-5 must not be present. |  |
| X223.220.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H H06-6 must not be present. |  |
| X223.220.2300.H106-7.010 | H06-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H106-7 must not be present. |  |
| X223.220.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H106-8 must not be present. |  |
| X223.220.2300.H106-9.010 | H106-9 | $\begin{aligned} & \text { Present on Admission } \\ & \text { indicator } \\ & \hline \end{aligned}$ | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H106-9 must be valid values. |  |
| X223.220.2300. H 107.010 | H107 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI06}$ is present then $2300 . \mathrm{HIO7}$ may be present. |  |
| х223.220.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | $2300 . \mathrm{H} 107-1$ must be valid values. |  |
| Х223.220.2300.H107-1.020 | H07-1 |  |  |  |  |  |  |  | 999 | R | $1 \mathrm{~K} 403=7$ : "Invalid Code Value" | 2300.H107-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H107-1.030 | H07-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H I07-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H107-2.010 | H107-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300. $\mathrm{HI} 07-1$ is "BF" then 2300 . $\mathrm{HIO} 1-2$ must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| X223.220.2300.H107-2.020 | H107-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300. HIO7-1 is "ABF" then 2300 .HIO7-2 must be a valid ICD-10-CM Diagnosis code. valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| х223.220.2300.H107-2.030 | H107-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H107-2 must not contain a ".". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 9991 } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H107-2.040 | H107-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaanosis Code" |  |  |
| X223.220.2300.H107-3.010 | H107-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-3 must not be present. |  |
| х223.220.2300.H107-4.010 | H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H107-4 must not be present. |  |
| х223.220.2300.H107-5.010 | H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-5 must not be present. |  |
| X223.220.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-6 must not be present. |  |
| X223.220.2300.H107-7.010 | H07-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| X223.220.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-8 must not be present. |  |
| X223.220.2300.H107-9.010 | H07-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H107-9 must be valid values. |  |
| X223.220.2300.H108.010 | H08 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | $\begin{aligned} & \text { 1K403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If $2300 . \mathrm{H} 107$ is present then $2300 . \mathrm{H} 108$ may be present. |  |
| X223.220.2300.H108-1.010 | H08-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H108-1 must be valid values. |  |
| $\times 223.220 .2300 . \mathrm{H108-1.020}$ | H108-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H108-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H108-1.030 | H08-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H (08-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H108-2.010 | H108-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300 .HI08-1 is "BF" then 2300. HIO8-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this |
| X223.220.2300.H108-2.020 | H008-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300. HIO8-1 is "ABF" then 2300 .HI08-2 must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| X223.220.2300.H108-2.030 | H08-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H108-2 must not contain a ".". |  |
| X223.220.2300.H108-2.040 | H108-2 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 511: "Invalid character" } \\ & \text { CSC 255: "Diaanosis Code" } \end{aligned}$ |  |  |
| х223.220.2300.H108-3.010 | H108-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H108-3 must not be present. |  |
| X223.220.2300.H108-4.010 | H108-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-4 must not be present. |  |
| X223.220.2300.H108-5.010 | H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-5 must not be present. |  |
| X223.220.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-6 must not be present. |  |
| X223.220.2300.H108-7.010 | H008-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H108-7 must not be present. |  |
| X223.220.2300.H108-8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-8 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | $\begin{array}{\|l\|l} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H108-9.010 | H08-9 | Present on Admission indicator | ID | 1-1 | S |  |  | N, U, W, Y | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300. H I08-9 must be valid values. |  |
| X223.220.2300.H109.010 | H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300.HI08 is present then 2300 . H109 may be |  |
| X223.220.2300.H109-1.010 | H109-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H09-1 must be valid values. |  |
| X223.220.2300.H109-1.020 | H09-1 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300.H109-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H109-1.030 | H09-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H109-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H109-2.010 | H09-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300 .HIO9- 1 is "BF" then 2300 . H109-2 must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this |
| X223.220.2300.H109-2.020 | H09-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300. HIO9-1 is "ABF" then 2300 .HI09-2 must be a valid ICD-10-CM Diagnosis code. valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this |
| X223.220.2300.H109-2.030 | H009-2 |  |  |  |  |  |  |  | 999 | E | $\underset{\substack{\text { IK403 = 6: "Invalid Character in Data } \\ \text { Element" }}}{ }$ | 2300.H09-2 must not contain a ".." |  |
| X223.220.2300.H109-2.040 | H109-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 511: "Invalid character" CSC 255: "Diaanosis Code" |  |  |
| X223.220.2300.H109-3.010 | H109-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-3 must not be present. |  |
| х223.220.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H109-4 must not be present. |  |
| X223.220.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-5 must not be present. |  |
| X223.220.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-6 must not be present. |  |
| X223.220.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-7 must not be present. |  |
| X223.220.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-8 must not be present. |  |
| X223.220.2300.H109-9.010 | H109-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-9 must be valid values. |  |
| X223.220.2300.H110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition <br> Violated" | If $2300 . \mathrm{H} 109$ is present then $2300 . \mathrm{H} 110$ may be present. |  |
| X223.220.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H110-1 must be valid values. |  |
| $\times 223.220 .2300 . \mathrm{H110-1.020}$ | H110-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H110-1.030 | H110-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H110-2.010 | H110-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300 .HI10-1 is "BF" then 2300. HI10-2 must be a valid ICD- $9-\mathrm{CM}$ Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H110-2.020 | H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300.HI10-1 is "ABF" then 2300. $\mathrm{H} 110-2$ must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this |
| X223.220.2300.H110-2.030 | H110-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H110-2 must not contain a "..". |  |
| X223.220.2300.H110-2.040 | H110-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" <br> CSC 255: "Diaanosis Code" |  |  |
| X223.220.2300.H110-3.010 | H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300. H110-3 must not be present. |  |
| X223.220.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H110-4 must not be present. |  |
| X223.220.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H110-5 must not be present. |  |
| X223.220.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H110-6 must not be present. |  |
| X223.220.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-7 must not be present. |  |
| X223.220.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-8 must not be present. |  |
| x223.220.2300.H110-9.010 | H110-9 | $\begin{aligned} & \text { Present on Admission } \\ & \text { indicator } \\ & \hline \end{aligned}$ | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-9 must be valid values. |  |
| X223.220.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI10 is present then 2300 . HI11 may be present. |  |
| х223.220.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be valid values. |  |
| X223.220.2300.H111-1.020 | H111-1 |  |  |  |  |  |  |  | 999 | R | $1 \mathrm{~K} 403=7$ : "Invalid Code Value" | 2300.H111-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H111-1.030 | H111-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H111-2.010 | H111-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HI} 11-1$ is "BF" then $2300 . \mathrm{HI} 11-2$ must be a valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| X223.220.2300.H111-2.020 | H111-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300. H111-1 is "ABF" then 2300.HI11-2 must be a valid ICD-10-CM Diagnosis code. valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| X223.220.2300.H111-2.030 | H111-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H11-2 must not contain a ".". |  |
| X223.220.2300.H111-2.040 | H111-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 255: "Diaanosis Code" |  |  |
| X223.220.2300.H111-3.010 | H111-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-3 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ \text { TA99/ } \\ \text { 277CA } \end{gathered} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.220.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-4 must not be present. |  |
| X223.220.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-5 must not be present. |  |
| X223.220.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-6 must not be present. |  |
| X223.220.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-7 must not be present. |  |
| X223.220.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-8 must not be present. |  |
| X223.220.2300.H111-9.010 | H111-9 | Present on Admission indicator | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-9 must be valid values. |  |
| X223.220.2300.H112.010 | H12 | HEALTH CARE CODE |  |  | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300.HI11 is present then 2300 . H112 may be present. |  |
| х223.220.2300.H112-1.010 | H12-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | ABF, BF | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.H112-1 must be valid values. |  |
| х223.220.2300.H112-1.020 | H112-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must = "BF". | ICD-9 Only period |
| X223.220.2300.H112-1.030 | H12-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H12-1 must = "ABF". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.220.2300.H112-2.010 | H112-2 | Other Diagnosis | AN | 1-30 | R |  |  |  | 277 | c | CsCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If $2300 . \mathrm{HI} 12-1$ is "BF" then 2300 . $\mathrm{H} 112-2$ must be a valid ICD-9-CM Diagnosis code. valid ICD-9-CM Diagnosis code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Clinical Modification Diagnosis Code reference must be available for this dit |
| X223.220.2300.H112-2.020 | H112-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 255: "Diagnosis Code" | If 2300.H112-1 is "ABF" then 2300.HI12-2 must be a valid ICD-10-CM Diagnosis code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Clinical Modification Diagnosis Code reference must be available for this edit |
| X223.220.2300.H112-2.030 | H112-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H112-2 must not contain a ".". |  |
| X223.220.2300.H112-2.040 | H112-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 255: "Diaanosis Code" |  |  |
| X223.220.2300.H112-3.010 | H112-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-3 must not be present. |  |
| X223.220.2300.H112-4.010 | H12-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I11: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-4 must not be present. |  |
| X223.220.2300.H112-5.010 | H12-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-5 must not be present. |  |
| X223.220.2300.H112-6.010 | H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H112-6 must not be present. |  |
| X223.220.2300.H112-7.010 | H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-7 must not be present. |  |
| X223.220.2300.H112-8.010 | H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H1012-8 must not be present. |  |
| X223.220.2300.H112-9.010 | H112-9 | $\begin{gathered} \hline \text { Present on Admission } \\ \text { indicator } \\ \hline \end{gathered}$ | ID | 1-1 | s |  |  | N, U, W, Y | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-9 must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { Acceptl/ } \\ \text { Reject } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.239.2300.H1.010 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | 2300.HI with H101-1 = "BR" must be included on inpatient (not outpatient) claims when a procedure was performed. | ICD-9 Only period 3/26: only edit for valid procedure code. FISS will edit against revenue code if necessarv. |
| X223.239.2300.H1.020 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | 2300.HI with HI01-1 = "BR" "BBR" must be included on inpatient claims when a procedure was performed. | Transition period 3/26: only edit for valid procedure code. FISS will edit against revenue code if necessarv. |
| X223.239.2300.H1.030 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | 2300.HI with H101-1 = "BBR" must be included on inpatient claims when a procedure was performed. | ICD-10 Only period - assumes no dual-use after mandated date. 3/26: only edit for valid procedure code. FISS will edit against revenue code if necessarv. |
| X223.239.2300.H1.040 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300.HI with HI01-1 = "BR" "BBR" must not be included except on inpatient claims when a procedure was performed. |  |
| X223.239.2300.H1.050 | HI | PRINCIPAL PROCEDURE INFORMATION |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2300 .HI with H101-1 = "BR" is allowed. | ICD-9 Only period |
| X223.239.2300.H1. 060 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with HIO1-1 = "BR" "BBR" or is allowed. | Transition period |
| X223.239.2300.H1.070 | HI |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HI}$ with H101-1 = "BBR" or is allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.239.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| Х223.239.2300.H101-1.010 | H101-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBR, BR | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| х223.239.2300.H101-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H101-1 must = "BR" | ICD-9 Only period |
| X223.239.2300.H101-1.030 | H01-1 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300. $\mathrm{HIO1-1}$ must = "BBR" | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.239.2300.H101-2.010 | H101-2 | Principal Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 465: "Principal Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO1-1}$ is "BR" then $2300 . \mathrm{HIO1}-2$ must be a valid ICD-9-CM Principal Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Principal Procedure Code reference must be available for this edit |
| X223.239.2300.H101-2.020 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 465: "Principal Procedure Code for Service(s) Rendered" | If 2300 .HI01-1 is "BBR" then 2300 .HIO1-2 must be a valid ICD-10-CM Principal Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Principal Procedure Code reference must be available for this edit |
| $\begin{array}{\|l\|} \hline \begin{array}{l} 223.239 .2300 . \mathrm{HIO1}-2.030 \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.239.2300.H101-2.040 | H01-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H01-2 must not contain a ".". |  |
| X223.239.2300.H101-2.050 | H01-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" TBD08: "Advanced Billing Concepts (ABC) code" |  |  |
| X223.239.2300.H101-3.010 | H01-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | s |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H I01-3 must be valid values. |  |
| X223.239.2300.H101-4.010 | H101-4 | Date Time Period | AN | 1-35 | s |  |  |  | 999 | R | 1K403 = 8: "IIvalid Date" | 2300.HIO1-4 must be a valid date in CCYYMMDD |  |
| X223.239.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H101-5 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.239.2300.H101-6.010 | H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-6 must not be present. |  |
| X223.239.2300.H101-7.010 | H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H101-7 must not be present. |  |
| X223.239.2300.H101-8.010 | H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-8 must not be present. |  |
| X223.239.2300.H101-9.010 | H101-9 | $\begin{aligned} & \hline \begin{array}{c} \text { Present on Admission } \\ \text { indicator } \end{array} \\ & \hline \end{aligned}$ | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-9 must not be present. |  |
| X223.239.2300. HO 02.010 | H102 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \end{aligned}$ |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102 must not be present. |  |
| X223.239.2300. H 103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{HIO3}$ must not be present. |  |
| X223.239.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H004 must not be present. |  |
| X223.239.2300. H 105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105 must not be present. |  |
| X223.239.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106 must not be present. |  |
| х223.239.2300. H 107.010 | H107 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.HI07 must not be present. |  |
| х223.239.2300. H 108.010 | H108 | HEALTH CARE CODE |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H H08 must not be present. |  |
| X223.239.2300. H 109.010 | H109 | HEALTH CARE CODE NFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109 must not be present. |  |
| X223.239.2300. H 110.010 | H110 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H110 must not be present. |  |
| X223.239.2300. H 111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111 must not be present. |  |
| X223.239.2300. H 112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.242.2300.H1.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{aligned} & \text { X223.242.2300.HI. } 020 \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.242.2300.HI.030 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| $\begin{array}{\|l} \hline \text { X223.242.2300.HII.040 } \\ \text { edit deactivated } \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.242.2300.H1.050 | HI | OTHER PROCEDURE information |  | 2 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300 .HI with H101-1 = "BQ" are allowed. | ICD-9 Only period |
| X223.242.2300.H1. 060 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300.HI with H101-1 = "BQ" "BBO" are allowed | Transition period |
| X223.242.2300.H1.070 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with H101-1 = "BBQ" are allowed. | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H101.010 | H01 | HEALTH CARE CODE NFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.242.2300.H01-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must be valid values. |  |
| X223.242.2300.H01-1.020 | H01-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 101-1$ must = "BQ". | ICD-9 Only period |
| X223.242.2300.H101-1.030 | H001-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H H01-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H101-2.010 | H01-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO1}-1$ is "BQ" then $2300 . \mathrm{HIO1}-2$ must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H101-2.020 | H01-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300 .HIO1-1 is "BBQ" then 2300 .HIO1-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H101-2.030 | H101-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H101-2 must not contain a ".." |  |
| X223.242.2300.H101-2.040 | H01-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H101-3.010 | H01-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.HI01-3 must be "D8". |  |
| X223.242.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HIO1-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H101-5 must not be present. |  |
| X223.242.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-6 must not be present. |  |
| X223.242.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H101-7 must not be present. |  |
| х223.242.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H101-8 must not be present. |  |
| х223.242.2300.H101-9.010 | H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 101-9$ must not be present. |  |
| X223.242.2300.H102.010 | H02 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \end{aligned}$ |  |  | S |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300.HI01 is present then 2300.HIO2 may be present. |  |
| х223.242.2300.H102-1.010 | H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.H102-1 must be valid values. |  |
| X223.242.2300.H102-1.020 | H02-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H02-1 must = "BQ". | ICD-9 Only period |
| х223.242.2300.H102-1.030 | H102-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 102-1$ must = "BBQ". | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H102-2.010 | H102-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300. HIO2-1 is "BQ" then 2300. HIO2-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H102-2.020 | H102-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.... CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300 .HIO2-1 is "BBQ" then 2300 .HIO2-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H102-2.030 | H102-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H102-2 must not contain a ".." |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\left.\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered} \right\rvert\,$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H102-2.040 | H102-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H102-3.010 | H102-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H02-3 must be "D8". |  |
| X223.242.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HIO2-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-5 must not be present. |  |
| X223.242.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H102-6 must not be present. |  |
| X223.242.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H102-7 must not be present. |  |
| X223.242.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H102-8 must not be present. |  |
| X223.242.2300.H102-9.010 | H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-9 must not be present. |  |
| X223.242.2300.H03.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO2}$ is present then 2300 . HIO3 may be present. |  |
| х223.242.2300.H103-1.010 | H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 03 \mathrm{O}-1$ must be valid values. |  |
| Х223.242.2300.H103-1.020 | H103-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H103-1.030 | H03-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 103-1$ must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H103-2.010 | H103-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300 HIO3-1 is "BQ" then 2300 .HIO3-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H103-2.020 | H103-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO3-1 is "BBQ" then 2300.HIO3-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H103-2.030 | H103-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H103-2 must not contain a ".". |  |
| X223.242.2300.H103-2.040 | H103-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H103-3.010 | H03-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-3 must be "D8". |  |
| X223.242.2300.H103-4.010 | H03-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HIO3-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| X223.242.2300.H103-6.010 | H03-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H103-6 must not be present. |  |
| X223.242.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H103-7 must not be present. |  |
| X223.242.2300.H103-8.010 | H03-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H103-8 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. <br> Max. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H103-9.010 | H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-9 must not be present. |  |
| X223.242.2300.H104.010 | H04 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300. HIO3 is present then 2300 .H104 may be |  |
| х223.242.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{H} 104-1$ must be valid values. |  |
| X223.242.2300.H104-1.020 | H104-1 |  |  |  |  |  |  |  | 999 | R | 1 1403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 104-1$ must = "BQ". | ICD-9 Only period |
| ×223.242.2300.H104-1.030 | H104-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H 104 -1 must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date |
| X223.242.2300.H104-2.010 | H104-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300 HIO4-1 is "BQ" then $2300 . \mathrm{HIO4-2}$ must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H104-2.020 | H104-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300 .HIO4-1 is "BBQ" then 2300 .HIO4-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H104-2.030 | H104-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H104-2 must not contain a ".". |  |
| X223.242.2300.H104-2.040 | H104-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H104-3.010 | H104-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H104-3 must be "D8". |  |
| X223.242.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | \|K403 = 8: "Invalid Date" | 2300. HIO4-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H IO4-5 must not be present. |  |
| X223.242.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H104-6 must not be present. |  |
| х223.242.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-7 must not be present. |  |
| X223.242.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-8 must not be present. |  |
| х223.242.2300.H104-9.010 | H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-9 must not be present. |  |
| X223.242.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition <br> Violated" | If $2300 . \mathrm{HIO4}$ is present then 2300 .H105 may be present. |  |
| X223.242.2300.H105-1.010 | H05-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H105-1 must be valid values. |  |
| X223.242.2300.H105-1.020 | H105-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H105-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H105-1.030 | H105-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H (105-1 must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H105-2.010 | H105-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300 .HIO5-1 is "BQ" then 2300 .HIO5-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 9991 } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H105-2.020 | H05-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{H} 105-1$ is "BBQ" then $2300 . \mathrm{H} 105-2$ must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H105-2.030 | H105-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H105-2 must not contain a ".". |  |
| X223.242.2300.H105-2.040 | H105-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H105-3.010 | H105-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H105-3 must be "D8". |  |
| х223.242.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | S |  |  | CCYYMMDD | 999 | R | IK403 = 8: "IInvalid Date" | 2300.HI05-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-5 must not be present. |  |
| X223.242.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H105-6 must not be present. |  |
| X223.242.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-7 must not be present. |  |
| X223.242.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 105-8$ must not be present. |  |
| X223.242.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 105-9$ must not be present. |  |
| X223.242.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO}$ is present then 2300 . HIO6 may be present. |  |
| X223.242.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H106-1 must be valid values. |  |
| $\times 223.242 .2300 . \mathrm{H106-1.020}$ | H106-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H106-1.030 | H106-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H I06-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H106-2.010 | H106-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.... CsC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO6-1}$ is "BQ" then 2300 . HIO6-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H106-2.020 | H106-2 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{H} 106-1$ is "BBQ" then $2300 . \mathrm{H} 06-2$ must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H106-2.030 | H106-2 |  |  |  |  |  |  |  | 999 | E | \|K403 = 6: "Invalid Character in Data Element" | 2300.H106-2 must not contain a ".". |  |
| X223.242.2300.H106-2.040 | H06-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H106-3.010 | H106-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H06-3 must be "D8". |  |
| X223.242.2300.H106-4.010 | H106-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | \|K403 = 8: "Invalid Date" | $\begin{aligned} & 2300 . \text { HIO6-4 must be a valid date in CCYYMMDD } \\ & \text { format. }\end{aligned}$ |  |


| 8371 Edit Reference | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H 106-5 must not be present. |  |
| X223.242.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 106-6 must not be present. |  |
| X223.242.2300.H106-7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-7 must not be present. |  |
| X223.242.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 106-8$ must not be present. |  |
| X223.242.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. $\mathrm{H} 106-9$ must not be present. |  |
| X223.242.2300.H107.010 | H07 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO6}$ is present then $2300 . \mathrm{HIO7}$ may be |  |
| х223.242.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H007-1 must be valid values. |  |
| х223.242.2300.H107-1.020 | H107-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H107-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H107-1.030 | H107-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H107-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H107-2.010 | H07-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300.H107-1 is "BQ" then 2300.HIOT-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H107-2.020 | H107-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HIO7-1 is "BBQ" then 2300.HI07-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available |
| X223.242.2300.H107-2.030 | H107-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H107-2 must not contain a ".". |  |
| X223.242.2300.H107-2.040 | H07-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| х223.242.2300.H107-3.010 | H107-3 | Date Time Period Format Oualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H107-3 must be "D8". |  |
| X223.242.2300.H107-4.010 | H107-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300. HIO7-4 must be a valid date in CCYYMMDD format. |  |
| х223.242.2300.H107-5.010 | H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-5 must not be present. |  |
| X223.242.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H107-6 must not be present. |  |
| х223.242.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| X223.242.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-8 must not be present. |  |
| X223.242.2300.H107-9.010 | H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-9 must not be present. |  |
| X223.242.2300.H108.010 | H08 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If 2300 .HI07 is present then 2300 . HI08 may be present. |  |
| X223.242.2300.H108-1.010 | H008-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 108-1$ must be valid values. |  |
| х223.242.2300.H108-1.020 | H08-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H108-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H108-1.030 | H08-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H O8-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H108-2.010 | H08-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HIO} 0-1$ is "BQ" then $2300 . \mathrm{HIO}-2$ must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H108-2.020 | H08-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300 .HIO8-1 is "BBQ" then 2300 . HIO8-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H108-2.030 | H108-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H108-2 must not contain a ".." |  |
| X223.242.2300.H108-2.040 | H108-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H108-3.010 | H008-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H108-3 must be "D8". |  |
| X223.242.2300.H108-4.010 | H108-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HIO8-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H108-5.010 | H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 108-5$ must not be present. |  |
| X223.242.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H O08-6 must not be present. |  |
| X223.242.2300.H108-7.010 | H008-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-7 must not be present. |  |
| Х223.242.2300.H108-8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H 108-8 must not be present. |  |
| X223.242.2300.H108-9.010 | H108-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H 108 -9 must not be present. |  |
| X223.242.2300.H109.010 | H09 | $\begin{aligned} & \text { HEALTH CARE CODE } \\ & \text { INFORMATION } \end{aligned}$ |  |  | S |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300.HI08 is present then 2300 .HI09 may be present. |  |
| х223.242.2300.H109-1.010 | H109-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.H09-1 must be valid values. |  |
| Х223.242.2300.H109-1.020 | H09-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H09-1 must = "BQ". | ICD-9 Only period |
| х223.242.2300.H109-1.030 | H109-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. H I09-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H109-2.010 | H109-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300. HIO9-1 is "BQ" then 2300. HIO9-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H109-2.020 | H109-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.... CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300 .HIO9-1 is "BBQ" then 2300 .HIO9-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H109-2.030 | H109-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H109-2 must not contain a ".." |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\left.\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered} \right\rvert\,$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H109-2.040 | H109-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H109-3.010 | H109-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H09-3 must be "D8". |  |
| X223.242.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HI09-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-5 must not be present. |  |
| X223.242.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H109-6 must not be present. |  |
| X223.242.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H109-7 must not be present. |  |
| X223.242.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 109-8 must not be present. |  |
| X223.242.2300.H109-9.010 | H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-9 must not be present. |  |
| X223.242.2300.H110.010 | H110 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI09 is present then 2300 .HI10 may be present. |  |
| х223.242.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must be valid values. |  |
| X223.242.2300.H110-1.020 | H110-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H110-1.030 | H110-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-1 must = "BBQ" . | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H110-2.010 | H110-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HI} 10-1$ is "BQ" then 2300 . $\mathrm{H} 110-2$ must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H110-2.020 | H110-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300.H110-1 is "BBQ" then 2300 .HI10-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H110-2.030 | H110-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H110-2 must not contain a ".". |  |
| X223.242.2300.H110-2.040 | H110-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H110-3.010 | H110-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-3 must be "D8". |  |
| X223.242.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HI10-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-5 must not be present. |  |
| X223.242.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H110-6 must not be present. |  |
| X223.242.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H110-7 must not be present. |  |
| X223.242.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H110-8 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T991 } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H110-9.010 | H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-9 must not be present. |  |
| X223.242.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI10 is present then 2300 . HI11 may be present. |  |
| х223.242.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be valid values. |  |
| X223.242.2300.H111-1.020 | H111-1 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2300.H111-1 must = "BQ". | ICD-9 Only period |
| ×223.242.2300.H111-1.030 | H111-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 111-1$ must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date |
| X223.242.2300.H111-2.010 | H111-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{H} 111-1$ is "BQ" then $2300 . \mathrm{H} 111-2$ must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H111-2.020 | H111-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If 2300.HI11-1 is "BBQ" then 2300.HI11-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H111-2.030 | H111-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2300.H111-2 must not contain a ".". |  |
| X223.242.2300.H111-2.040 | H111-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H111-3.010 | H111-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H111-3 must be "D8". |  |
| X223.242.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | \|K403 = 8: "Invalid Date" | 2300.H111-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-5 must not be present. |  |
| X223.242.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-6 must not be present. |  |
| X223.242.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-7 must not be present. |  |
| X223.242.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-8 must not be present. |  |
| X223.242.2300.H111-9.010 | H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-9 must not be present. |  |
| X223.242.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition <br> Violated" | If 2300 . H111 is present then 2300 . HI12 may be present. |  |
| X223.242.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BBQ, BQ | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be valid values. |  |
| X223.242.2300.H112-1.020 | H112-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must = "BQ". | ICD-9 Only period |
| X223.242.2300.H112-1.030 | H12-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must = "BBQ" | ICD-10 Only period - assumes no dual-use after mandated date. |
| X223.242.2300.H112-2.010 | H112-2 | Procedure Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HI} 12-1$ is "BQ" then 2300 .HI12-2 must be a valid ICD-9-CM Other Procedure code. | ICD-9 Only period and Transition period. <br> Valid ICD-9-CM Other Procedure Code reference must be available for this edit |


| 8371 Edit Reference | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage Req. | Loop | Loop | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1I } \\ \text { TA99/ } \\ \text { 277CA } \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.242.2300.H112-2.020 | H112-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 490: "Other Procedure Code for Service(s) Rendered" | If $2300 . \mathrm{HI} 12-1$ is "BBQ" then 2300 .HI12-2 must be a valid ICD-10-CM Other Procedure code. | Transition period and ICD-10 Only period. <br> Valid ICD-10-CM Other Procedure Code reference must be available for this edit |
| X223.242.2300.H112-2.030 | H112-2 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.H112-2 must not contain a ".". |  |
| X223.242.2300.H112-2.040 | H112-2 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 490: "Other Procedure Code for Service(s) Rendered" |  |  |
| X223.242.2300.H112-3.010 | H112-3 | Date Time Period Format Qualifier | ID | 2-3 | s |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-3 must be "D8". |  |
| X223.242.2300.H112-4.010 | H112-4 | Date Time Period | AN | 1-35 | s |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HI12-4 must be a valid date in CCYYMMDD format. |  |
| X223.242.2300.H112-5.010 | H12-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H112-5 must not be present. |  |
| X223.242.2300.H112-6.010 | H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-6 must not be present. |  |
| X223.242.2300.H112-7.010 | H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-7 must not be present. |  |
| X223.242.2300.H112-8.010 | H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H112-8 must not be present. |  |
| X223.242.2300.H112-9.010 | H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H112-9 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.258.2300.H1.010 | HI | occurrence span information |  | 2 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with H101-1 = "BI" are allowed. |  |
| X223.258.2300.H01.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.258.2300.H101-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H101-1 must be "BI". |  |
| X223.258.2300.H101-2.010 | H01-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO1}-1$ is "BI" then $2300 . \mathrm{HIO1}-2$ must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H101-3.010 | H01-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H01-3 must be "RD8". |  |
| X223.258.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | \|K403 = 8: "Invalid Date" | 2300.HIO1-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H101-5.010 | H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-5 must not be present. |  |
| X223.258.2300.H101-6.010 | H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| X223.258.2300.H101-7.010 | H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| X223.258.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-8 must not be present. |  |
| х223.258.2300.H101-9.010 | H01-9 | Yes/No Condition or esponse Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H101-9 must not be present. |  |
| X223.258.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .HI01 is present then 2300.HIO2 may be present. |  |
| х223.258.2300.H102-1.010 | H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 102-1$ must be "BI". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \operatorname{Min.} \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.258.2300.H102-2.010 | H02-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HIO2}-1$ is "BI" then 2300 .HIO2-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H102-3.010 | H102-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | RD8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H102-3 must be "RD8". |  |
| X223.258.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HIO2-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-5 must not be present. |  |
| X223.258.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-6 must not be present. |  |
| X223.258.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-7 must not be present. |  |
| X223.258.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-8 must not be present. |  |
| X223.258.2300.H102-9.010 | H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not <br> Used" Element Present" | 2300.H102-9 must not be present. |  |
| X223.258.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition | If 2300 .HIO2 is present then $2300 . \mathrm{HIO}$ may be present. |  |
| x223.258.2300.H103-1.010 | H03-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must be "BII. |  |
| X223.258.2300.H103-2.010 | H103-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If 2300 . HIO3-1 is "BI" then 2300. HIO3-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H103-3.010 | H103-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | RD8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H03-3 must be "RD8. |  |
| X223.258.2300.H103-4.010 | H03-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HIO3-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| X223.258.2300.H103-6.010 | H03-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I 10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-6 must not be present. |  |
| X223.258.2300.H103-7.010 | H03-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I } 10 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-7 must not be present. |  |
| X223.258.2300.H103-8.010 | H03-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-8 must not be present. |  |
| X223.258.2300.H103-9.010 | H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H103-9 must not be present. |  |
| X223.258.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{H} 103$ is present then 2300 .HI04 may be present. |  |
| x223.258.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H104-1 must be "BII. |  |
| X223.258.2300.H104-2.010 | H04-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { (Rejected for Invalid Information..." } \\ & \text { Csc 462: "NUBC Occrrence Span } \\ & \text { Code(s) and Date(s)" } \\ & \hline \end{aligned}$ | If 2300 . HIO4-1 is "Bl" then $2300 . \mathrm{HIO4-2}$ must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H104-3.010 | H104-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | RD8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H004-3 must be "RD8. |  |
| X223.258.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300. HIO4-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-5 must not be present. |  |
| X223.258.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-6 must not be present. |  |
| X223.258.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-7 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | $\begin{aligned} & \text { Accept// } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.258.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-8 must not be present. |  |
| X223.258.2300.H104-9.010 | H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { Useu Elemen ITriesent } \\ & \text { IK403 = I10: "Implentation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-9 must not be present. |  |
| X223.258.2300.H05.010 | H05 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI04 is present then 2300. H105 may be |  |
| X223.258.2300.H105-1.010 | H05-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H105-1 must be "BI". |  |
| X223.258.2300.H105-2.010 | H105-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement <br> 1Rejected for Invalid Information..." <br> CSC 462: "NUBC Occrrence Span <br> Code(s) and Date(s)" | If $2300 . \mathrm{HIO5-1}$ is "BI" then $2300 . \mathrm{HIO5-2}$ must be a valid Occurrence Span code. valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H105-3.010 | H105-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H105-3 must be "RD8". |  |
| X223.258.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | \|K403 = 8: "Invalid Date" | 2300.HIO5-4 must be a valid date in CCYYMMDD- CCYYMMDD format. |  |
| X223.258.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-5 must not be present. |  |
| X223.258.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-6 must not be present. |  |
| X223.258.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-7 must not be present. |  |
| X223.258.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I IO: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-8 must not be present. |  |
| X223.258.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-9 must not be present. |  |
| X223.258.2300.H106.010 | H06 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \end{aligned}$ | If 2300 .HI05 is present then 2300. H106 may be |  |
| X223.258.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 106-1$ must be "BI". |  |
| X223.258.2300.H106-2.010 | H106-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement IRejected for Invalid Information... CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If 2300 .HIO6-1 is "BI" then 2300 . HIO6-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H106-3.010 | H106-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H106-3 must be "RD8". |  |
| X223.258.2300.H106-4.010 | H06-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | \|K403 = 8: "Invalid Date" | 2300. HIO6-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H106-5.010 | H06-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-5 must not be present. |  |
| X223.258.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-6 must not be present. |  |
| X223.258.2300.H106-7.010 | H06-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-7 must not be present. |  |
| X223.258.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H106-8 must not be present. |  |
| X223.258.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-9 must not be present. |  |
| X223.258.2300.H107.010 | H07 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition | If 2300 .HI06 is present then $2300 . \mathrm{HIO} 07$ may be present. |  |
| $\times 223.258 .2300 . \mathrm{HIO7}-1.010$ | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H107-1 must be "BII". |  |
| X223.258.2300.H107-2.010 | H07-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC AT: "Acknowledgement } \\ & \text { RRejected for Invalid Information..." } \\ & \text { CsC 462: "NUBC Occrence Span } \\ & \text { Code(s) and Date(s)" } \end{aligned}$ | If $2300 . \mathrm{HIO7}-1$ is "BI" then $2300 . \mathrm{HIO7}-2$ must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Lepeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA111 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.258.2300.H107-3.010 | H107-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H107-3 must be "RD8". |  |
| X223.258.2300.H107-4.010 | H107-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HIO7-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| Х223.258.2300.H107-5.010 | H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-5 must not be present. |  |
| X223.258.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-6 must not be present. |  |
| X223.258.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| X223.258.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-8 must not be present. |  |
| X223.258.2300.H107-9.010 | H107-9 | $\begin{aligned} & \text { Yes/No Condition or } \\ & \text { response Code } \end{aligned}$ | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-9 must not be present. |  |
| X223.258.2300.H108.010 | H08 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{H}$ - present. |  |
| х223.258.2300.H108-1.010 | H108-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.HIO8-1 must be "BII". |  |
| X223.258.2300.H108-2.010 | H08-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{H} 108-1$ is "BI" then $2300 . \mathrm{HIO}-2$ must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H108-3.010 | H008-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H08-3 must be "RD8". |  |
| X223.258.2300.H108-4.010 | H08-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HI08-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H108-5.010 | H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H I08-5 must not be present. |  |
| X223.258.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-6 must not be present. |  |
| X223.258.2300.H108-7.010 | H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-7 must not be present. |  |
| X223.258.2300.H108-8.010 | H008-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-8 must not be present. |  |
| X223.258.2300. H 108 -9.010 | H108-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | 2300.H108-9 must not be present. |  |
| X223.258.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI08 is present then 2300. HI09 may be |  |
| X223.258.2300.H109-1.010 | H09-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must be "BII. |  |
| X223.258.2300.H109-2.010 | H09-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { (Rejected for Invalid Information..." } \\ & \text { CSc 462: "NuBC Occrrence Span } \\ & \text { Coders and Datel(s)" } \\ & \hline \end{aligned}$ | If 2300. H109-1 is "BI" then 2300. H109-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H109-3.010 | H109-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H109-3 must be "RD8". |  |
| X223.258.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HIO9-4 must be a valid date in CCYYMMDD- |  |
| X223.258.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-5 must not be present. |  |
| X223.258.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-6 must not be present. |  |
| X223.258.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-7 must not be present. |  |
| X223.258.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = 110: "Implementation "Not | 2300. H109-8 must not be present. |  |
| X223.258.2300.H109-9.010 | H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK03 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-9 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { max. } \end{aligned}$ | $\begin{array}{\|c\|} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { Accept/l } \\ \text { Reject } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.258.2300.H110.010 | H10 | HEALTH CARE CODE |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300. H109 is present then 2300 .HI10 may be present. |  |
| X223.258.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H110-1 must be "BII". |  |
| X223.258.2300.H110-2.010 | H110-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HI} 10-1$ is "Bl" then $2300 . \mathrm{HI} 10-2$ must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H110-3.010 | H110-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-3 must be "RD8". |  |
| X223.258.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HI10-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-5 must not be present. |  |
| X223.258.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { LK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-6 must not be present. |  |
| X223.258.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-7 must not be present. |  |
| X223.258.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-8 must not be present. |  |
| X223.258.2300.H110-9.010 | H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-9 must not be present. |  |
| X223.258.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" Violated" | If 2300 .HI10 is present then 2300 .HI11 may be present. |  |
| X223.258.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BII. |  |
| X223.258.2300.H111-2.010 | H111-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If $2300 . \mathrm{HI} 11-1$ is "BI" then $2300 . \mathrm{HI} 11-2$ must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H111-3.010 | H111-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | RD8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H111-3 must be "RD8". |  |
| X223.258.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.H111-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-5 must not be present. |  |
| X223.258.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { LK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-6 must not be present. |  |
| X223.258.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { LK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-7 must not be present. |  |
| X223.258.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-8 must not be present. |  |
| X223.258.2300.H111-9.010 | H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-9 must not be present. |  |
| X223.258.2300.H112.010 | H12 | HEALTH CARE CODE |  |  | S |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .HI11 is present then 2300 .HI12 may be |  |
| X223.258.2300.H112-1.010 | H12-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BI | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BI". |  |
| X223.258.2300.H112-2.010 | H112-2 | Occurrence Span Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 462: "NUBC Occrrence Span Code(s) and Date(s)" | If 2300. HI12-1 is "Bl" then 2300.HI12-2 must be a valid Occurrence Span code. | Valid Occurrence Span Code reference must be available for this edit. |
| X223.258.2300.H112-3.010 | H12-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | RD8 | 999 | R | IK403 = 7: "IIvalid Code Value" | 2300.H112-3 must be "RD8". |  |
| X223.258.2300.H112-4.010 | H12-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD-CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.H112-4 must be a valid date in CCYYMMDDCCYYMMDD format. |  |
| X223.258.2300.H112-5.010 | H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-5 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | $\begin{aligned} & \text { Accept// } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.258.2300.H112-6.010 | H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H112-6 must not be present. |  |
| X223.258.2300.H112-7.010 | H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H112-7 must not be present. |  |
| X223.258.2300.H112-8.010 | H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-8 must not be present. |  |
| X223.258.2300.H112-9.010 | H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-9 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.271.2300.HI.010 | HI | OCCURRENCE INFORMATION |  | 2 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300.HI with HIO1-1 = "BH" are allowed. |  |
| X223.271.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| х223.271.2300.H101-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H01-1 must be "BH". |  |
| X223.271.2300.H101-2.010 | H01-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { (Rejected for Invalid Information..." } \\ & \text { Cac 461: "NBC Occurrence Code(s) } \\ & \text { and Date(s)" } \end{aligned}$ | If 2300.HIO1-1 is "BH" then 2300.HIO1-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H101-3.010 | H01-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H01-3 must be "D8". |  |
| X223.271.2300.H101-4.010 | H01-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HI01-4 must be a valid date in CCYYMMDD |  |
| X223.271.2300.H101-5.010 | H01-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-5 must not be present. |  |
| X223.271.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = = 110: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| х223.271.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-7 must not be present. |  |
| X223.271.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-8 must not be present. |  |
| х223.271.2300.H101-9.010 | H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-9 must not be present. |  |
| X223.271.2300.H02.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300. HI01 is present then 2300 . HIO2 may be present. |  |
| X223.271.2300.H102-1.010 | H02-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H02-1 must be "BH". |  |
| X223.271.2300.H102-2.010 | H102-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { Cac 461: "NBBC Occurrence Code(s) } \\ & \text { and Date(s)" } \end{aligned}$ | If 2300.HIO2-1 is "BH" then 2300. HIO2-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H102-3.010 | H102-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-3 must be "D8". |  |
| X223.271.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HIO2-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-5 must not be present. |  |
| X223.271.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-6 must not be present. |  |
| X223.271.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-7 must not be present. |  |
| X223.271.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H102-8 must not be present. |  |
| х223.271.2300.H102-9.010 | H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-9 must not be present. |  |
| X223.271.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .HI02 is present then 2300 . HIO3 may be |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ 999 / \\ 277 C A \end{array}\right\|$ | $\begin{array}{\|l\|l\|} \hline \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.271.2300.H103-1.010 | H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H103-1 must be "BH". |  |
| X223.271.2300.H103-2.010 | H103-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If 2300 HIO3-1 is "BH" then 2300 .HIO3-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| х223.271.2300.H103-3.010 | H103-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H103-3 must be "D8". |  |
| x223.271.2300. H 103 -4.010 | H103-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HIO3-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| X223.271.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.HIO3-6 must not be present. |  |
| X223.271.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-7 must not be present. |  |
| X223.271.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-8 must not be present. |  |
| X223.271.2300.H103-9.010 | H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-9 must not be present. |  |
| X223.271.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO3}$ is present then 2300 .HI04 may be present. |  |
| x223.271.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H104-1 must be "BH". |  |
| X223.271.2300.H104-2.010 | H104-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If 2300 HIO4-1 is "BH" then 2300 .HIO4-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H104-3.010 | H104-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. H104-3 must be "D8". |  |
| X223.271.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HIO4-4 must be a valid date in CCYYMMDD format. format. |  |
| X223.271.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-5 must not be present. |  |
| X223.271.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-6 must not be present. |  |
| X223.271.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-7 must not be present. |  |
| X223.271.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H104-8 must not be present. |  |
| X223.271.2300.H104-9.010 | H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 104-9$ must not be present. |  |
| X223.271.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .H104 is present then 2300 .HI05 may be present. |  |
| x223.271.2300.H105-1.010 | H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H105-1 must be "BH". |  |
| X223.271.2300.H105-2.010 | H105-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { 1Rejected for Invalid Information..." } \\ & \text { CSC 461: "NUBC Occurrence Code(s) } \\ & \text { and Date(s)" } \\ & \hline \end{aligned}$ | If 2300. H105-1 is "BH" then 2300. H105-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H105-3.010 | H105-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H105-3 must be "D8". |  |
| X223.271.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | 1K403 = 8: "Invalid Date" | 2300.HIO5-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H105-5 must not be present. |  |
| X223.271.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-6 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. <br> Max. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA111 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | $\left\lvert\, \begin{gathered} \text { Acceptl } \\ \text { Reject } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.271.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 105-7$ must not be present. |  |
| X223.271.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-8 must not be present. |  |
| X223.271.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-9 must not be present. |  |
| X223.271.2300.H106.010 | H06 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | 1K403 = 10: "Exclusion Condition Violated" | If 2300 .HI05 is present then 2300 .HI06 may be present. |  |
| X223.271.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H106-1 must be "BH". |  |
| X223.271.2300.H106-2.010 | H106-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HIO6}-1$ is "BH" then 2300. HIO6-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H106-3.010 | H106-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H106-3 must be "D8". |  |
| х223.271.2300.H106-4.010 | H106-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HIO6-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-5 must not be present. |  |
| X223.271.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H106-6 must not be present. |  |
| X223.271.2300.H106-7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-7 must not be present. |  |
| X223.271.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-8 must not be present. |  |
| X223.271.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H106-9 must not be present. |  |
| X223.271.2300.H107.010 | H107 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO} 06$ is present then 2300 . HIO present. |  |
| X223.271.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H107-1 must be "BH". |  |
| X223.271.2300.H107-2.010 | H07-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..." } \\ \text { CSC 461: "NUBC Occurrence Code(s) } \\ \text { and Date(s)" } \\ \hline \end{array}$ | If 2300. HIO7-1 is "BH" then 2300 . HIOT-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H107-3.010 | H107-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H107-3 must be "D8". |  |
| X223.271.2300.H107-4.010 | H107-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HIO7-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H107-5.010 | H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H107-5 must not be present. |  |
| X223.271.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-6 must not be present. |  |
| X223.271.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| X223.271.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H107-8 must not be present. |  |
| X223.271.2300.H107-9.010 | H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-9 must not be present. |  |
| X223.271.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .HI07 is present then 2300 .HI08 may be present. |  |
| х223.271.2300.H108-1.010 | H108-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H08-1 must be "BH". |  |
| X223.271.2300.H108-2.010 | H008-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { 1Rejected for Invalid Information..." } \\ & \text { CSC 461: "NUBC Occurrence Code(s) } \\ & \text { and Date(s)" } \end{aligned}$ | If 2300. HIO8-1 is "BH" then 2300. HIO8-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { Acceptl/ } \\ \text { Reject } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.271.2300.H108-3.010 | H108-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H108-3 must be "D8". |  |
| X223.271.2300. H 108 -4.010 | H08-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HIO8-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H108-5.010 | H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 108 -5 must not be present. |  |
| X223.271.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H -108-6 must not be present. |  |
| X223.271.2300.H108-7.010 | H08-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. $\mathrm{H} 108-7$ must not be present. |  |
| X223.271.2300. H 108 -8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 108-8 must not be present. |  |
| X223.271.2300.H108-9.010 | H08-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { K } 403=110: \text { "Implementation "Not } \\ & \text { Ussed" Flement Present" } \end{aligned}$ | 2300.H108-9 must not be present. |  |
| X223.271.2300.H109.010 | H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300.HI08 is present then 2300 .HI09 may be |  |
| X223.271.2300.H109-1.010 | H109-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H09-1 must be "BH". |  |
| X223.271.2300.H109-2.010 | H09-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HIO9-1}$ is "BH" then $2300 . \mathrm{HIO9-2}$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H109-3.010 | H09-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-3 must be "D8". |  |
| X223.271.2300.H109-4.010 | H09-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HIO9-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-5 must not be present. |  |
| X223.271.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H109-6 must not be present. |  |
| X223.271.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 109-7$ must not be present. |  |
| X223.271.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 109-8 must not be present. |  |
| X223.271.2300.H109-9.010 | H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H109-9 must not be present. |  |
| X223.271.2300.H110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $1 K 403=10: \text { "Exclusion Condition }$ | If 2300 .HI09 is present then 2300 .HI10 may be present. |  |
| X223.271.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. $\mathrm{H} 110-1$ must be "BH". |  |
| X223.271.2300.H110-2.010 | H110-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..." } \\ \text { CSC 461: "NUBC Occurrence Code(s) } \\ \text { and Date(s)" } \\ \hline \end{array}$ | If $2300 . \mathrm{H} 110-1$ is " BH " then 2300 . $\mathrm{H} 110-2$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H110-3.010 | H110-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H110-3 must be "D8". |  |
| X223.271.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300. HI110-4 must be a valid date in CCYYMMDD |  |
| X223.271.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-5 must not be present. |  |
| X223.271.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-6 must not be present. |  |
| X223.271.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-7 must not be present. |  |
| X223.271.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-8 must not be present. |  |
| X223.271.2300.H110-9.010 | H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-9 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. <br> Max. | $\left.\begin{array}{\|c\|} \text { Usage } \\ \text { Req. } \end{array} \right\rvert\,$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\left\|\begin{array}{c} \text { Acceptl } \\ \text { Reject } \end{array}\right\|$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.271.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | K 403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 10$ is present then 2300 . HI11 may be present. |  |
| X223.271.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BH". |  |
| X223.271.2300.H111-2.010 | H111-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HI} 11-1$ is "BH" then $2300 . \mathrm{HI} 11-2$ must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H111-3.010 | H111-3 | Date Time Period Format Qualifier | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H111-3 must be "D8". |  |
| х223.271.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HI11-4 must be a valid date in CCYYMMDD |  |
| X223.271.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-5 must not be present. |  |
| X223.271.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-6 must not be present. |  |
| X223.271.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-7 must not be present. |  |
| X223.271.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-8 must not be present. |  |
| X223.271.2300.H111-9.010 | H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-9 must not be present. |  |
| X223.271.2300.H112.010 | H12 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .H111 is present then 2300 .HI12 may be present. |  |
| х223.271.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BH | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BH". |  |
| X223.271.2300.H112-2.010 | H112-2 | Occurrence Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 461: "NUBC Occurrence Code(s) and Date(s)" | If $2300 . \mathrm{HI12-1}$ is "BH" then 2300. H112-2 must be a valid Occurrence code. | Valid Occurrence Code reference must be available for this edit. |
| X223.271.2300.H112-3.010 | H112-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | R |  |  | D8 | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H112-3 must be "D8". |  |
| X223.271.2300.H112-4.010 | H12-4 | Date Time Period | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | 2300.HI12-4 must be a valid date in CCYYMMDD format. |  |
| X223.271.2300.H112-5.010 | H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H112-5 must not be present. |  |
| X223.271.2300.H112-6.010 | H12-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-6 must not be present. |  |
| X223.271.2300.H112-7.010 | H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-7 must not be present. |  |
| X223.271.2300.H112-8.010 | H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H112-8 must not be present. |  |
| X223.271.2300.H112-9.010 | H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-9 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.284.2300.H1.010 | HI | VaLUE Information |  | 2 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300.HI with H101-1 = "BE" are allowed |  |
| X223.284.2300.H101.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.284.2300.H101-1.010 | H001-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H01-1 must be "BE". |  |
| X223.284.2300.H101-2.010 | H01-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HIO1}-1$ is "BE" then 2300.HIO1-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H101-3.010 | H01-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-3 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H101-4.010 | H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-4 must not be present. |  |
| X223.284.2300.H101-5.010 | H01-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2300.H01-5 must be numeric. |  |
| X223.284.2300.H101-5.020 | H01-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | 2300. H101-5 value must be > $=0$. |  |
| X223.284.2300.H01-5.030 | H01-5 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H101-5 must be <= 99,999,999.99. |  |
| х223.284.2300.H101-6.010 | H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| х223.284.2300.H101-7.010 | H101-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-7 must not be present. |  |
| X223.284.2300.H101-8.010 | H101-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| х223.284.2300.H101-9.010 | H101-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-9 must not be present. |  |
| X223.284.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI01 is present then 2300 .HI02 may be present. |  |
| x223.284.2300.H102-1.010 | H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H102-1 must be "BE". |  |
| X223.284.2300.H102-2.010 | H02-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300. HIO2-1 is "BE" then 2300. HIO2-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H102-3.010 | H102-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-3 must not be present. |  |
| X223.284.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-4 must not be present. |  |
| X223.284.2300.H102-5.010 | H102-5 |  | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H102-5 must be numeric. |  |
| X223.284.2300.H102-5.020 | H02-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | $2300 . \mathrm{H} 102-5$ value must be $>=0$. |  |
| X223.284.2300.H102-5.030 | H102-5 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H101-5 must be <= 99,999,999.99. |  |
| х223.284.2300.H102-6.010 | H02-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H102-6 must not be present. |  |
| х223.284.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-7 must not be present. |  |
| X223.284.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H102-8 must not be present. |  |
| X223.284.2300.H102-9.010 | H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-9 must not be present. |  |
| X223.284.2300.H103.010 | H03 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO} 02$ is present then 2300 .HI03 may be present. |  |
| х223.284.2300.H103-1.010 | H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H03-1 must be "BE". |  |
| X223.284.2300.H103-2.010 | H103-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300. HIO3-1 is "BE" then 2300. HIO3-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H103-3.010 | H03-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = =110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-3 must not be present. |  |
| X223.284.2300.H103-4.010 | H103-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-4 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|l\|l} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H103-5.010 | H03-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H103-5 must be numeric. |  |
| X223.284.2300.H103-5.020 | H103-5 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 463: "NUBC Value Code(s) and/or Amount(s)" | 2300. HIO3-5 value must be >= 0 . |  |
| Х223.284.2300.H103-5.030 | H03-5 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H103-5 must be <= 99,999,999.99. |  |
| Х223.284.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-6 must not be present. |  |
| х223.284.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-7 must not be present. |  |
| х223.284.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-8 must not be present. |  |
| х223.284.2300.H103-9.010 | H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-9 must not be present. |  |
| X223.284.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO3}$ is present then 2300 .HI04 may be present. |  |
| х223.284.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H104-1 must be "BE". |  |
| X223.284.2300.H104-2.010 | H104-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300. HIO4-1 is "BE" then 2300. H104-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H104-3.010 | H104-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-3 must not be present. |  |
| X223.284.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H104-4 must not be present. |  |
| X223.284.2300.H104-5.010 | H104-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H104-5 must be numeric. |  |
| X223.284.2300.H104-5.020 | H104-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | 2300. H104-5 value must be > $=0$. |  |
| Х223.284.2300.H104-5.030 | H104-5 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300.H104-5 must be <= 99,999,999.99. |  |
| х223.284.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H104-6 must not be present. |  |
| X223.284.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H104-7 must not be present. |  |
| X223.284.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-8 must not be present. |  |
| X223.284.2300.H104-9.010 | H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-9 must not be present. |  |
| X223.284.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .HI04 is present then 2300 .HI05 may be present. |  |
| х223.284.2300.H105-1.010 | H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H105-1 must be "BE". |  |
| X223.284.2300.H105-2.010 | H105-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { 1Rejected for Invalid Information..." } \\ \text { CSC 463: "NUBC Value Code(s) } \\ \hline \text { and/or Amount(s)" } \\ \hline \end{array}$ | If 2300. H105-1 is "BE" then 2300. HIO5-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H105-3.010 | H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 =10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-3 must not be present. |  |
| X223.284.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H105-4 must not be present. |  |
| X223.284.2300.H105-5.010 | H105-5 | $\underset{\substack{\text { Value Code Associated } \\ \text { Amount }}}{ }$ | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H105-5 must be numeric. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max. | $\begin{array}{\|c} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H105-5.020 | H105-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | 2300. HIO5-5 value must be > $=0$. |  |
| X223.284.2300.H105-5.030 | H105-5 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H105-5 must be <= 99,999,999.99. |  |
| х223.284.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H105-6 must not be present. |  |
| X223.284.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H105-7 must not be present. |  |
| X223.284.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H105-8 must not be present. |  |
| X223.284.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-9 must not be present. |  |
| X223.284.2300.H106.010 | H06 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI05 is present then $2300 . \mathrm{HIO6}$ may be |  |
| х223.284.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must be "BE". |  |
| X223.284.2300.H106-2.010 | H106-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300. HIO6-1 is "BE" then 2300. HIO6-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H106-3.010 | H106-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = =110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H106-3 must not be present. |  |
| X223.284.2300.H106-4.010 | H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-4 must not be present. |  |
| X223.284.2300.H106-5.010 | H106-5 | $\begin{aligned} & \text { Value Code Associated } \\ & \text { Amount } \end{aligned}$ | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.H106-5 must be numeric. |  |
| X223.284.2300.H106-5.020 | H106-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information... CSC 463: "NUBC Value Code(s) and/or_Amount(s)" | 2300. H106-5 value must be >= 0 . |  |
| X223.284.2300.H106-5.030 | H106-5 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H106-5 must be <= 99,999,999.99. |  |
| х223.284.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H106-6 must not be present. |  |
| X223.284.2300.H106-7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-7 must not be present. |  |
| X223.284.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H106-8 must not be present. |  |
| X223.284.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H106-9 must not be present. |  |
| X223.284.2300.H107.010 | H07 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{H} 106$ is present then 2300 .HI07 may be present. |  |
| х223.284.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H107-1 must be "BE". |  |
| X223.284.2300.H107-2.010 | H107-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300 .HIOT-1 is "BE" then 2300. HIOT-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H107-3.010 | H07-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = =110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H107-3 must not be present. |  |
| X223.284.2300.H107-4.010 | H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-4 must not be present. |  |
| X223.284.2300.H107-5.010 | H07-5 | $\underset{\substack{\text { Value Code Associated } \\ \text { Amount }}}{\text { V. }}$ | R | 1-18 | R |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.H107-5 must be numeric. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. <br> Max. | $\begin{array}{\|c} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H107-5.020 | H107-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | 2300. H107-5 value must be > $=0$. |  |
| X223.284.2300.H107-5.030 | H107-5 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H107-5 must be <= 99,999,999.99. |  |
| х223.284.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H107-6 must not be present. |  |
| X223.284.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H107-7 must not be present. |  |
| X223.284.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H107-8 must not be present. |  |
| X223.284.2300.H107-9.010 | H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-9 must not be present. |  |
| X223.284.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 07$ is present then 2300 . HI08 may be present. |  |
| х223.284.2300.H108-1.010 | H108-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H108-1 must be "BE". |  |
| X223.284.2300.H108-2.010 | H08-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{HIO} 0-1$ is "BE" then $2300 . \mathrm{HIO}-2$ must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H108-3.010 | H108-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = =110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H108-3 must not be present. |  |
| X223.284.2300.H108-4.010 | H108-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H108-4 must not be present. |  |
| X223.284.2300.H108-5.010 | H108-5 | $\begin{aligned} & \text { Value Code Associated } \\ & \text { Amount } \end{aligned}$ | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.H108-5 must be numeric. |  |
| X223.284.2300.H108-5.020 | H108-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information... CSC 463: "NUBC Value Code(s) and/or_Amount(s)" | 2300. HIO8-5 value must be >= 0 . |  |
| X223.284.2300.H108-5.030 | H108-5 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H108-5 must be <= 99,999,999.99. |  |
| х223.284.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 108-6$ must not be present. |  |
| X223.284.2300.H108-7.010 | H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-7 must not be present. |  |
| X223.284.2300.H108-8.010 | H008-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H108-8 must not be present. |  |
| X223.284.2300.H108-9.010 | H08-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-9 must not be present. |  |
| X223.284.2300.H109.010 | H109 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI08 is present then 2300. HI09 may be |  |
| х223.284.2300.H109-1.010 | H109-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H109-1 must be "BE". |  |
| X223.284.2300.H109-2.010 | H109-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300. HIO9-1 is "BE" then 2300. HIO9-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H109-3.010 | H109-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = =110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H109-3 must not be present. |  |
| X223.284.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-4 must not be present. |  |
| X223.284.2300.H109-5.010 | H109-5 | $\underset{\substack{\text { Value Code Associated } \\ \text { Amount }}}{\text { V. }}$ | R | 1-18 | R |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2300.H109-5 must be numeric. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\operatorname{Min}_{\text {Max }}$ | $\begin{array}{\|c} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \\ \hline \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H109-5.020 | H09-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 463: "NUBC Value Code(s) and/or Amount(s)" | $2300 . \mathrm{H} 109-5$ value must be $>=0$. |  |
| X223.284.2300.H109-5.030 | H09-5 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H109-5 must be <= 99,999,999.99. |  |
| X223.284.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-6 must not be present. |  |
| X223.284.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-7 must not be present. |  |
| X223.284.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { LK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-8 must not be present. |  |
| х223.284.2300.H109-9.010 | H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-9 must not be present. |  |
| X223.284.2300.H110.010 | H110 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI09 is present then 2300. HI10 may be present. |  |
| х223.284.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H110-1 must be "BE". |  |
| X223.284.2300.H110-2.010 | H110-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300 .HI10-1 is "BE" then 2300. HI10-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H110-3.010 | H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-3 must not be present. |  |
| X223.284.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-4 must not be present. |  |
| X223.284.2300.H110-5.010 | H110-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H110-5 must be numeric. |  |
| ×223.284.2300.H110-5.020 | H110-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | $2300 . \mathrm{H} 110-5$ value must be $>=0$. |  |
| X223.284.2300.H110-5.030 | H110-5 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H110-5 must be <= 99,999,999.99. |  |
| X223.284.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-6 must not be present. |  |
| X223.284.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-7 must not be present. |  |
| х223.284.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-8 must not be present. |  |
| X223.284.2300.H110-9.010 | H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-9 must not be present. |  |
| X223.284.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI10 is present then 2300 .HI11 may be |  |
| X223.284.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BE". |  |
| X223.284.2300.H111-2.010 | H111-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If 2300.HI11-1 is "BE" then 2300. H111-2 must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H111-3.010 | H111-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H111-3 must not be present. |  |
| X223.284.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-4 must not be present. |  |
| X223.284.2300.H111-5.010 | H111-5 | Value Code Associated Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.H111-5 must be numeric. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.284.2300.H11-5.020 | H111-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 463: "NUBC Value Code(s) and/or Amount(s)" | $2300 . \mathrm{H} 111-5$ value must be >= 0 . |  |
| x223.284.2300.H111-5.030 | H111-5 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H111-5 must be <= 99,999,999.99. |  |
| X223.284.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H111-6 must not be present. |  |
| X223.284.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H111-7 must not be present. |  |
| X223.284.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H111-8 must not be present. |  |
| X223.284.2300.H111-9.010 | H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-9 must not be present. |  |
| X223.284.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 10: "Exclusion Condition } \\ & \text { Violated" } \\ & \hline \end{aligned}$ | If 2300 .HI11 is present then 2300 . HI12 may be present. |  |
| X223.284.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BE | 999 | R | 1K403 = 7: "IIvalid Code Value" | 2300.H112-1 must be "BE". |  |
| X223.284.2300.H112-2.010 | H112-2 | Value Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 463: "NUBC Value Code(s) and/or Amount(s)" | If $2300 . \mathrm{H} 112-1$ is "BE" then 2300. $\mathrm{H} 112-2$ must be a valid Value code. | Valid Value Code reference must be available for this edit. |
| X223.284.2300.H112-3.010 | H112-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | 2300.H112-3 must not be present. |  |
| X223.284.2300.H112-4.010 | H112-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-4 must not be present. |  |
| X223.284.2300.H12-5.010 | H12-5 | $\begin{gathered} \text { Value Code Associated } \\ \text { Amount } \end{gathered}$ | R | 1-18 | R |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data <br> Element" | 2300.H112-5 must be numeric. |  |
| X223.284.2300.H112-5.020 | H112-5 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 463: "NUBC Value Code(s) and/or Amount(s)" | $2300 . \mathrm{H} 112-5$ value must be $>=0$. |  |
| x223.284.2300.H112-5.030 | H112-5 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300.H112-5 must be <= 99,999,999.99. |  |
| X223.284.2300.H12-6.010 | H12-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H112-6 must not be present. |  |
| X223.284.2300.H112-7.010 | H12-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-7 must not be present. |  |
| X223.284.2300.H112-8.010 | H12-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-8 must not be present. |  |
| X223.284.2300.H112-9.010 | H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-9 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.294.2300.H1.010 | HI | CONDITION INFORMATION |  | 2 | s | 2300 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of $2300 . \mathrm{HI}$ with H101-1 = "BG" are allowed. |  |
| X223.294.2300.H01.010 | H01 | HEALTH CARE CODE INFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| x223.294.2300.H101-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HI01-1 must be "BG". |  |
| X223.294.2300.H01-2.010 | H01-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If 2300 .HIO1-1 is " BG " then 2300 . H IO1-2 2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H101-3.010 | H101-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H101-3 must not be present. |  |
| X223.294.2300.HI01-4.010 | H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-4 must not be present. |  |
| X223.294.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-5 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ 277 C A \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.294.2300.H101-6.010 | H101-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H101-6 must not be present. |  |
| X223.304.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not | 2300.H101-7 must not be present. |  |
| X223.294.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-8 must not be present. |  |
| X223.294.2300.H101-9.010 | H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-9 must not be present. |  |
| X223.294.2300.H102.010 | H02 | HEALTH CARE CODE |  |  | S |  |  |  | 999 | R | \| K 403 = 10: "Exclusion Condition Violated" | If 2300 .HI01 is present then 2300 . H 102 may be present. |  |
| х223.294.2300.H102-1.010 | H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must be "BG". |  |
| X223.294.2300.H102-2.010 | H02-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If 2300.HIO2-1 is "BG" then 2300. HIO2-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| Х223.294.2300.H102-3.010 | H102-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Oualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H O2-3 3 must not be present. |  |
| X223.294.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-4 must not be present. |  |
| X223.294.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. $\mathrm{H} 102-5$ must not be present. |  |
| X223.294.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-6 must not be present. |  |
| X223.294.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H102-7 must not be present. |  |
| X223.294.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-8 must not be present. |  |
| X223.294.2300.H102-9.010 | H102-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H102-9 must not be present. |  |
| X223.294.2300.H03.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HIO2 is present then 2300 . HIO3 may be present. |  |
| х223.294.2300.H103-1.010 | H03-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H003-1 must be "BG". |  |
| X223.294.2300.H103-2.010 | H03-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If 2300.HIO3-1 is "BG" then 2300.HIO3-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| х223.294.2300.H103-3.010 | H103-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | \|K403 = I10: "Implementation "Not <br> Used" Element Present" | 2300. H IO3-3 must not be present. |  |
| X223.294.2300.H103-4.010 | H03-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-4 must not be present. |  |
| X223.294.2300.H103-5.010 | H103-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| X223.294.2300.H103-6.010 | H103-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H103-6 must not be present. |  |
| X223.294.2300.H103-7.010 | H103-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H103-7 must not be present. |  |
| X223.294.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H103-8 must not be present. |  |
| X223.294.2300.H103-9.010 | H03-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | ${ }^{2300 . H 103-9 ~ m u s t ~ n o t ~ b e ~ p r e s e n t . ~}$ |  |
| X223.294.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HIO3 is present then 2300 . HI04 may be present. |  |
| х223.294.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | \|14403 = 7: "Invalid Code Value" | 2300.H104-1 must be "BG". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.294.2300.H104-2.010 | H104-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If 2300 .H104-1 is "BG" then 2300. HIO4-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H104-3.010 | H104-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 104-3$ must not be present. |  |
| X223.294.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H104-4 must not be present. |  |
| X223.294.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H104-5 must not be present. |  |
| X223.294.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 104-6$ must not be present. |  |
| X223.294.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 104-7$ must not be present. |  |
| X223.294.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-8 must not be present. |  |
| X223.294.2300.H104-9.010 | H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | 1K403 = I10: "Implementation "Not <br> Used" Element Present" | 2300.H104-9 must not be present. |  |
| X223.294.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HI} 04$ is present then 2300 .HI05 may be present. |  |
| $\times 223.294 .2300 . \mathrm{H105-1.010}$ | H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.HIO5-1 must be "BG". |  |
| X223.294.2300.H105-2.010 | H105-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If 2300 . $\mathrm{H} 105-1$ is " BG " then $2300 . \mathrm{HIO5}-2$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H105-3.010 | H105-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H105-3 must not be present. |  |
| X223.294.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H105-4 must not be present. |  |
| X223.294.2300.H105-5.010 | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H105-5 must not be present. |  |
| X223.294.2300.H105-6.010 | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I IO: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 105-6$ must not be present. |  |
| X223.294.2300.H105-7.010 | H105-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 105-7$ must not be present. |  |
| X223.294.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H105-8 must not be present. |  |
| X223.294.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H105-9 must not be present. |  |
| X223.294.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .HI05 is present then 2300. HI06 may be present. |  |
| X223.294.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H106-1 must be "BG". |  |
| X223.294.2300.H106-2.010 | H06-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If 2300 . $\mathrm{HIO} 06-1$ is " BG " then $2300 . \mathrm{HIO6-2}$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H106-3.010 | H106-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H 106-3 must not be present. |  |
| X223.294.2300. H 106 -4.010 | H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-4 must not be present. |  |
| X223.294.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-5 must not be present. |  |
| X223.294.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H106-6 must not be present. |  |
| X223.294.2300. H 106 -7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H106-7 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA111 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | $\left\lvert\, \begin{gathered} \text { Acceptl } \\ \text { Reject } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.294.2300.H106-8.010 | H106-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H106-8 must not be present. |  |
| X223.294.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 106-9$ must not be present. |  |
| X223.294.2300.H107.010 | H07 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | 1K403 = 10: "Exclusion Condition Violated" | If 2300 .HI06 is present then 2300 .HI07 may be present. |  |
| X223.294.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H07-1 must be "BG". |  |
| X223.294.2300.H107-2.010 | H07-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If 2300.HIOT-1 is "BG" then 2300. HIOT-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H107-3.010 | H07-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-3 must not be present. |  |
| х223.294.2300.H107-4.010 | H107-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-4 must not be present. |  |
| х223.294.2300.H107-5.010 | H107-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H107-5 must not be present. |  |
| х223.294.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H107-6 must not be present. |  |
| х223.294.2300.H107-7.010 | H007-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-7 must not be present. |  |
| х223.294.2300.H107-8.010 | H07-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H107-8 must not be present. |  |
| х223.294.2300.H107-9.010 | H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. $\mathrm{H} 107-9$ must not be present. |  |
| X223.294.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HIO is present then 2300. HI08 may be |  |
| х223.294.2300.H108-1.010 | H108-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H108-1 must be "BG". |  |
| X223.294.2300.H108-2.010 | H108-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If 2300 . $\mathrm{HIO} 0-1$ is "BG" then 2300 . $\mathrm{HIO} 0-2$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H108-3.010 | H108-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H IO8-3 3 must not be present. |  |
| X223.294.2300.H108-4.010 | H008-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H 108-4 must not be present. |  |
| X223.294.2300.H108-5.010 | H108-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 108-5$ must not be present. |  |
| х223.294.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-6 must not be present. |  |
| х223.294.2300.H108-7.010 | H108-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-7 must not be present. |  |
| X223.294.2300.H108-8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = = 110: "Implementation "Not | 2300. $\mathrm{H} 108-8$ must not be present. |  |
| х223.294.2300.H108-9.010 | H108-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. $\mathrm{H} 108-9$ must not be present. |  |
| X223.294.2300.H109.010 | H09 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI08 is present then 2300 .HI09 may be |  |
| X223.294.2300.H109-1.010 | H09-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H109-1 must be "BG". |  |
| X223.294.2300.H109-2.010 | H109-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If 2300.HIO9-1 is "BG" then 2300.HIO9-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H109-3.010 | H109-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H IO9-3 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.294.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H109-4 must not be present. |  |
| X223.294.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H109-5 must not be present. |  |
| X223.294.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H109-6 must not be present. |  |
| X223.294.2300.H109-7.010 | H099-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H109-7 must not be present. |  |
| X223.294.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H109-8 must not be present. |  |
| X223.294.2300.H109-9.010 | H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-9 must not be present. |  |
| X223.294.2300.H110.010 | H110 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .H109 is present then 2300 . HI10 may be present. |  |
| X223.294.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H110-1 must be "BG". |  |
| X223.294.2300.H110-2.010 | H110-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HI} 10-1$ is " BG " then $2300 . \mathrm{HI} 10-2$ must be a | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H110-3.010 | H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-3 must not be present. |  |
| X223.294.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-4 must not be present. |  |
| X223.294.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-5 must not be present. |  |
| X223.294.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H110-6 must not be present. |  |
| X223.294.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H110-7 must not be present. |  |
| X223.294.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-8 must not be present. |  |
| X223.294.2300.H110-9.010 | H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-9 must not be present. |  |
| X223.294.2300.H111.010 | H111 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" Violated" | If $2300 . \mathrm{H} 110$ is present then $2300 . \mathrm{HI} 11$ may be present. |  |
| X223.294.2300.H111-1.010 | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H111-1 must be "BG". |  |
| X223.294.2300.H111-2.010 | H111-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{HI} 11-1$ is "BG" then 2300 .H111-2 must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H111-3.010 | H111-3 | Date Time Period Format Oualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-3 must not be present. |  |
| X223.294.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-4 must not be present. |  |
| X223.294.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-5 must not be present. |  |
| X223.294.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-6 must not be present. |  |
| X223.294.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-7 must not be present. |  |
| X223.294.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H111-8 must not be present. |  |
| X223.294.2300.H111-9.010 | H111-9 | Yes/No Condition or | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H111-9 must not be present. |  |
| X223.294.2300.H112.010 | H12 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition | If 2300. HI11 is present then 2300 .HI12 may be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array} \right\rvert\,$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.294.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | BG | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H112-1 must be "BG". |  |
| X223.294.2300.H112-2.010 | H112-2 | Condition Code | AN | 1-30 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 460: "NUBC Condition Code(s)" | If $2300 . \mathrm{H} 112-1$ is "BG" then 2300. $\mathrm{H} 112-2$ must be a valid Condition code. | Valid Condition Code reference must be available for this edit. |
| X223.294.2300.H112-3.010 | H112-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-3 must not be present. |  |
| X223.294.2300.H112-4.010 | H12-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-4 must not be present. |  |
| X223.294.2300.H112-5.010 | H112-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H112-5 must not be present. |  |
| X223.294.2300.H112-6.010 | H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-6 must not be present. |  |
| X223.294.2300.H112-7.010 | H112-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H112-7 must not be present. |  |
| х223.294.2300.H112-8.010 | H112-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-8 must not be present. |  |
| х223.294.2300.H112-9.010 | H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H112-9 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.304.2300.H1.010 | HI | TREATMENT CODE INFORMATION |  | 2 | s | 2300 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | 2300.H1 with H101-1 = "TC" must be included when Home Health Agencies need to report Plan of Treatment information under various payer contract. | Must not be present unles HH type of bill |
| X223.304.2300.H1.02O | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2300.HI with HIO1-1 = "TC" must not be included unless Home Health Agencies need to report Plan <br> of Treatment <br> information under various payer contract. | Must not be present unles HH type of bill |
| X223.304.2300.H1.030 | HI |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2300 .HI with HI01-1 = "TC" are allowed. | pass through, syntax only. |
| X223.304.2300.H101.010 | H01 | HEALTH CARE CODE NFORMATION |  |  | R |  |  |  |  |  |  |  |  |
| X223.304.2300.H01-1.010 | H01-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | 11403 = 7: "Invalid Code Value" | 2300.H01-1 must be "TC". |  |
| х223.304.2300.H101-2.010 | H01-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HI01-2 must contain at least one non-space character. |  |
| X223.304.2300.H101-2.020 | H01-2 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H01-2 must be 1-30 characters. |  |
| х223.304.2300.H101-3.010 | H01-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | \|K403 = I10: "Implementation "Not <br> Used" Element Present" | 2300. H101-3 must not be present. |  |
| X223.304.2300.H101-4.010 | H101-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H101-4 must not be present. |  |
| X223.304.2300.H101-5.010 | H101-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-5 must not be present. |  |
| X223.304.2300.H101-6.010 | H01-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-6 must not be present. |  |
| X223.304.2300.H101-7.010 | H01-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H101-7 must not be present. |  |
| X223.304.2300.H101-8.010 | H01-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H101-8 must not be present. |  |
| X223.304.2300.H101-9.010 | H01-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H101-9 must not be present. |  |
| X223.304.2300.H102.010 | H02 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{HIO1}$ is present then $2300 . \mathrm{HIO2}$ may be present. |  |
| х223.304.2300.H102-1.010 | H102-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H102-1 must be "TC". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Lopp } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.304.2300.H102-2.010 | H102-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HIO2-2 must contain at least one non-space |  |
| X223.304.2300.H102-2.020 | H102-2 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H02-2 must be 1-30 characters. |  |
| X223.304.2300.H102-3.010 | H102-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H102-3 must not be present. |  |
| X223.304.2300.H102-4.010 | H102-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-4 must not be present. |  |
| X223.304.2300.H102-5.010 | H102-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H102-5 must not be present. |  |
| X223.304.2300.H102-6.010 | H102-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H102-6 must not be present. |  |
| х223.304.2300.H102-7.010 | H102-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H102-7 must not be present. |  |
| X223.304.2300.H102-8.010 | H102-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H102-8 must not be present. |  |
| X223.304.2300.H102-9.010 | H02-9 | $\begin{gathered} \text { Yes/No Condition or } \\ \text { response Code } \\ \hline \end{gathered}$ | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 102-9$ must not be present. |  |
| X223.304.2300.H103.010 | H103 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If $2300 . \mathrm{H}$ H02 is present then $2300 . \mathrm{HIO}$ may be present. |  |
| $\times 223.304 .2300 . \mathrm{HIO3-1.010}$ | H103-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H103-1 must be "TC". |  |
| X223.304.2300.H103-2.010 | H103-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HIO3-2 must contain at least one non-space character. |  |
| $\times 223.304 .2300 . \mathrm{H103-2.020}$ | H103-2 |  |  |  |  |  |  |  | 999 | R | \|K403 = 5: "Data Element Too Long" | 2300.H103-2 must be 1-30 characters. |  |
| X223.304.2300.H103-3.010 | H03-3 | $\begin{array}{\|c\|} \hline \text { Date Time Period Format } \\ \text { Qualifier } \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H 103-3 must not be present. |  |
| х223.304.2300.H103-4.010 | H103-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{HIO} 03-4$ must not be present. |  |
| х223.304.2300.H103-5.010 | H03-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-5 must not be present. |  |
| X223.304.2300.H103-6.010 | H03-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-6 must not be present. |  |
| X223.304.2300.H103-7.010 | H03-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H103-7 must not be present. |  |
| X223.304.2300.H103-8.010 | H103-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H103-8 must not be present. |  |
| X223.304.2300.H103-9.010 | H103-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 103-9$ must not be present. |  |
| X223.304.2300.H104.010 | H104 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300. H03 is present then $2300 . \mathrm{HOO}$ may be present. |  |
| X223.304.2300.H104-1.010 | H104-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H104-1 must be "TC". |  |
| X223.304.2300.H104-2.010 | H104-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2300.HIO4-2 must contain at least one non-space character. |  |
| X223.304.2300.H104-2.020 | H104-2 |  |  |  |  |  |  |  | 999 | R | \|K403 = 5: "Data Element Too Long" | 2300.H104-2 must be 1-30 characters. |  |
| X223.304.2300.H104-3.010 | H104-3 | $\qquad$ | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 104-3$ must not be present. |  |
| X223.304.2300.H104-4.010 | H104-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H104-4 must not be present. |  |
| X223.304.2300.H104-5.010 | H104-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-5 must not be present. |  |
| X223.304.2300.H104-6.010 | H104-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-6 must not be present. |  |
| X223.304.2300.H104-7.010 | H104-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H104-7 must not be present. |  |
| X223.304.2300.H104-8.010 | H104-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 104-8$ must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ 277 C A \end{gathered} \right\rvert\,$ | $\begin{gathered} \text { Accept// } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.304.2300.H104-9.010 | H104-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. $\mathrm{H} 104-9$ must not be present. |  |
| X223.304.2300.H105.010 | H105 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300.H104 is present then 2300 .HI05 may be |  |
| X223.304.2300.H105-1.010 | H105-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H105-1 must be "TC". |  |
| X223.304.2300.H105-2.010 | H105-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HIO5-2 must contain at least one non-space character. |  |
| X223.304.2300.H105-2.020 | H105-2 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H105-2 must be 1-30 characters. |  |
| X223.304.2300.H105-3.010 | H105-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. $\mathrm{H} 105-3$ must not be present. |  |
| X223.304.2300.H105-4.010 | H105-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H105-4 must not be present. |  |
| X223.304.2300. $\mathrm{H} 105-5.010$ | H105-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H105-5 must not be present. |  |
| X223.304.2300. $\mathrm{H} 105-6.010$ | H105-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H105-6 must not be present. |  |
| X223.304.2300.H105-7.010 | H05-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H105-7 must not be present. |  |
| X223.304.2300.H105-8.010 | H105-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H105-8 must not be present. |  |
| X223.304.2300.H105-9.010 | H105-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 105-9$ must not be present. |  |
| X223.304.2300.H106.010 | H106 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300. HIO5 is present then 2300 .HI06 may be |  |
| Х223.304.2300.H106-1.010 | H106-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300.H106-1 must be "TC". |  |
| X223.304.2300.H106-2.010 | H06-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. H106-2 must contain at least one non-space character. |  |
| X223.304.2300.H106-2.020 | H106-2 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300.H106-2 must be 1-30 characters. |  |
| X223.304.2300.H106-3.010 | H106-3 | $\qquad$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H106-3 must not be present. |  |
| X223.304.2300.H106-4.010 | H106-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 106-4$ must not be present. |  |
| X223.304.2300.H106-5.010 | H106-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-5 must not be present. |  |
| X223.304.2300.H106-6.010 | H106-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H106-6 must not be present. |  |
| X223.304.2300.H106-7.010 | H106-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300.H106-7 must not be present. |  |
| X223.304.2300.H106-8.010 | H06-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-8 must not be present. |  |
| X223.304.2300.H106-9.010 | H106-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H106-9 must not be present. |  |
| X223.304.2300.H107.010 | H07 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10 : "Exclusion Condition Violated" | If 2300 .H106 is present then $2300 . \mathrm{HIO}$ may be present. |  |
| Х223.304.2300.H107-1.010 | H107-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.H107-1 must be "TC". |  |
| X223.304.2300.H107-2.010 | H107-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. H107-2 must contain at least one non-space character. |  |
| X223.304.2300.H107-2.020 | H107-2 |  |  |  |  |  |  |  | 999 | R | \|K403 = 5: "Data Element Too Long" | 2300.H107-2 must be 1-30 characters. |  |
| X223.304.2300.H107-3.010 | H107-3 | $\qquad$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H107-3 must not be present. |  |
| X223.304.2300.H107-4.010 | H07-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2300. H107-4 must not be present. |  |
| X223.304.2300.H107-5.010 | H07-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-5 must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}$ | $\begin{array}{\|c\|} \hline \text { Accept// } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.304.2300.H107-6.010 | H107-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H107-6 must not be present. |  |
| X223.304.2300.H107-7.010 | H107-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H107-7 must not be present. |  |
| X223.304.2300.H107-8.010 | H107-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H107-8 must not be present. |  |
| X223.304.2300.H107-9.010 | H107-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H107-9 must not be present. |  |
| X223.304.2300.H108.010 | H108 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300. H107 is present then 2300 .HI08 may be present. |  |
| х223.304.2300.H108-1.010 | H108-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H108-1 must be "TC". |  |
| X223.304.2300.H108-2.010 | H108-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2300.HI08-2 must contain at least one non-space character. |  |
| х223.304.2300.H108-2.020 | H108-2 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2300.H108-2 must be 1-30 characters. |  |
| X223.304.2300.H108-3.010 | H008-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. $\mathrm{H} 108-3$ must not be present. |  |
| X223.304.2300.H108-4.010 | H108-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H108-4 must not be present. |  |
| X223.304.2300.H108-5.010 | H08-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-5 must not be present. |  |
| X223.304.2300.H108-6.010 | H108-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H108-6 must not be present. |  |
| X223.304.2300.H108-7.010 | H008-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H108-7 must not be present. |  |
| х223.304.2300.H108-8.010 | H108-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H H08-8 must not be present. |  |
| х223.304.2300.H108-9.010 | H108-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H108-9 must not be present. |  |
| X223.304.2300.H109.010 | H09 | HEALTH CARE CODE INFORMATION |  |  | S |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI08 is present then 2300 .HI09 may be present. |  |
| Х223.304.2300.H109-1.010 | H109-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H109-1 must be "TC". |  |
| х223.304.2300.H109-2.010 | H109-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. HIo9-2 must contain at least one non-space character. |  |
| $\times 223.304 .2300 . \mathrm{H109-2.020}$ | H109-2 |  |  |  |  |  |  |  | 999 | R | \|K403 = 5: "Data Element Too Long" | 2300.H109-2 must be 1-30 characters. |  |
| X223.304.2300.H109-3.010 | H109-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. H 109-3 must not be present. |  |
| X223.304.2300.H109-4.010 | H109-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H109-4 must not be present. |  |
| X223.304.2300.H109-5.010 | H109-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H109-5 must not be present. |  |
| X223.304.2300.H109-6.010 | H109-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300. H109-6 must not be present. |  |
| X223.304.2300.H109-7.010 | H109-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300. H109-7 must not be present. |  |
| X223.304.2300.H109-8.010 | H109-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-8 must not be present. |  |
| х223.304.2300.H109-9.010 | H109-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H109-9 must not be present. |  |
| X223.304.2300.H110.010 | H10 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2300 .HI09 is present then 2300 .HI10 may be present. |  |
| X223.304.2300.H110-1.010 | H110-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H110-1 must be "TC". |  |
| X223.304.2300.H110-2.010 | H110-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300. HI10-2 must contain at least one non-space character. |  |
| X223.304.2300.H110-2.020 | H110-2 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 5: "Data Element Too Long" | 2300.H110-2 must be 1-30 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. Max. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered} \right\rvert\,$ | $\begin{gathered} \text { Accept/ } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.304.2300.H110-3.010 | H110-3 | Date Time Period Format Qualifier | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-3 must not be present. |  |
| X223.304.2300.H110-4.010 | H110-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not <br> Used" Element Present" | 2300.H110-4 must not be present. |  |
| X223.304.2300.H110-5.010 | H110-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-5 must not be present. |  |
| X223.304.2300.H110-6.010 | H110-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-6 must not be present. |  |
| X223.304.2300.H110-7.010 | H110-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H110-7 must not be present. |  |
| X223.304.2300.H110-8.010 | H110-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-8 must not be present. |  |
| X223.304.2300.H110-9.010 | H110-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H110-9 must not be present. |  |
| X223.304.2300.H111.010 | H111 | health Care code INFORMATION |  |  | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300 .HI10 is present then 2300. H111 may be present. |  |
| $\times 223.304 .2300 . \mathrm{H} 111-1.010$ | H111-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | IK403 = 7: "Invalid Code Value" | 2300.H111-1 must be "TC". |  |
| X223.304.2300.H111-2.010 | H111-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.H111-2 must contain at least one non-space character. |  |
| $\times 223.304 .2300 . \mathrm{H111-2.020}$ | H111-2 |  |  |  |  |  |  |  | 999 | R | \|K403 = 5: "Data Element Too Long" | 2300.H111-2 must be 1-30 characters. |  |
| X223.304.2300.H111-3.010 | H111-3 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Date Time Period Format } \\ \text { Qualifier } \end{array} \\ \hline \end{array}$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-3 must not be present. |  |
| X223.304.2300.H111-4.010 | H111-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-4 must not be present. |  |
| X223.304.2300.H111-5.010 | H111-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-5 must not be present. |  |
| X223.304.2300.H111-6.010 | H111-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2300.H111-6 must not be present. |  |
| X223.304.2300.H111-7.010 | H111-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-7 must not be present. |  |
| X223.304.2300.H111-8.010 | H111-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H111-8 must not be present. |  |
| X223.304.2300.H111-9.010 | H111-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H111-9 must not be present. |  |
| X223.304.2300.H112.010 | H112 | HEALTH CARE CODE INFORMATION |  |  | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2300.H111 is present then $2300 . \mathrm{H} 12$ may be present. |  |
| X223.304.2300.H112-1.010 | H112-1 | Code List Qualifier Code | ID | 1-3 | R |  |  | TC | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.H112-1 must be "TC". |  |
| X223.304.2300.H112-2.010 | H112-2 | Treatment Code | AN | 1-30 | R |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2300.HI12-2 must contain at least one non-space character. |  |
| X223.304.2300.H112-2.020 | H112-2 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2300.H112-2 must be 1-30 characters. |  |
| X223.304.2300.H112-3.010 | H112-3 | $\qquad$ | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-3 must not be present. |  |
| X223.304.2300.H112-4.010 | H12-4 | Date Time Period | AN | 1-35 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-4 must not be present. |  |
| X223.304.2300.H112-5.010 | H12-5 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-5 must not be present. |  |
| X223.304.2300.H112-6.010 | H112-6 | Quantity | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-6 must not be present. |  |
| X223.304.2300.H112-7.010 | H12-7 | Version Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-7 must not be present. |  |
| X223.304.2300.H112-8.010 | H12-8 | Industry code | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2300.H112-8 must not be present. |  |
| X223.304.2300.H112-9.010 | H112-9 | Yes/No Condition or response Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300.H112-9 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| 8371 Edit Reference | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA11/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.313.2300.HCP. 010 | HCP | CLAIM PRICING/REPRICING INFORMATION |  | 1 | s | 2300 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2300 . \mathrm{HCP}$ is allowed. | pass through, syntax only. |
| X223.313.2300.HCP01.010 | HCP01 | Pricing Methodology | ID | 2-2 | R |  |  | $\begin{array}{\|c\|} \hline 00,01,02,03,04,05,06,07 \\ 08,09,10,11,12,13,14 \\ \hline \end{array}$ | 999 | R | 1K403 = 1: "Required Data Element Missinq" | 2300. HCP01 must be present. |  |
| X223.313.2300.HCP01.020 | HCP01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | $2300 . \mathrm{HCP01}$ must be valid values. |  |
| X223.313.2300. HCP 02.010 | HCP02 | Repriced Allowed Amount | R | 1-18 | R |  |  |  | 999 | R | K 403 = 1: "Required Data Element Missinq" | 2300. HCP02 must be present. |  |
| X223.313.2300.HCP02.020 | HCP02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300. $\mathrm{HCPO2}$ must be <= 99,999,999.99. |  |
| X223.313.2300.HCP02.030 | HCP02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD15:"Reariced Allowed Amount" |  |  |
| X223.313.2300.HCP03.010 | HCP03 | Repriced Saving Amount | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.HCP03 must be <= 99,999,999.99. |  |
| X223.313.2300.HCP03.020 | HCP03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 637: "Repriced Saving Amount" |  |  |
| X223.313.2300.HCP04.010 | HCP04 | Repricing Organization Identifier | AN | 1-50 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP04 must contain at least one non-space character. |  |
| X223.313.2300.HCP04.020 | HCP04 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300.HCP04 must be 1-50 characters. |  |
| X223.313.2300.HCP04.030 | HCP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 153: "Entity's ID Number" EIC: TU Third Party Repricing Oranization (TPO) |  |  |
| X223.313.2300.HCP04.040 | HCP04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300. HCP04 must be populated with accepted AN characters. |  |
| X223.313.2300.HCP04.050 | HCP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 153: "Entity's ID Number" EIC: TU Third Party Repricing Orannization(TPO) |  |  |
| X223.313.2300.HCP05.010 | HCP05 | Repricing Per Diem or Flat Rate Amount | R | 1-9 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2300.HCP05 must be 1-9 characters. |  |
| X223.313.2300.HCP05.020 | HCP05 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 638: "Repricing Per Diem or Flat Rate Amount" |  |  |
| X223.313.2300.HCP06.010 | HCP06 | $\qquad$ | AN | 1-50 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP06 must contain at least one non-space character. | 2400.HCP06 must contain at least one non-space character. |
| X223.313.2300.HCP06.020 | HCP06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.HCP06 must be 1-50 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop |  | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.313.2300.HCP06.030 | HCP06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 635 "Repriced Approved Ambulatory Patient Groun" |  |  |
| X223.313.2300.HCP06.040 | HCP06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP06 must be populated with accepted AN characters. |  |
| X223.313.2300.HCP06.050 | HCP06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 511: "Invalid character" CSC 635 "Repriced Approved |  |  |
| X223.313.2300.HCP07.010 | HCP07 | Approved DRG Amount | R | 1-18 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.HCP07 must be <= 99,999,999.99. |  |
| X223.313.2300.HCP07.020 | HCP07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TDB17. "Annroved DRG Amount" |  |  |
| X223.313.2300.HCP08.010 | HCP08 | Produc/Service ID | AN | 1-48 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.HCP08 must be 1-48 characters. |  |
| X223.313.2300.HCP08.020 | HCP08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD19: "Repriced Approved Revenue conde" |  |  |
| X223.313.2300.HCP08.030 | HCP08 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2300.HCP08 must be populated with accepted AN characters. |  |
| X223.313.2300.HCP08.040 | HCP08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" TBD19: "Repriced Approved Revenue code" |  |  |
| X223.313.2300.HCP09.010 | HCP09 | Product/Service ID Oualifier | ID | 2-2 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. HCP09 must not be present. |  |
| X223.313.2300.HCP10.010 | HCP10 | Product/Service ID | AN | 1-48 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2300. HCP10 must not be present. |  |
| X223.313.2300.HCP11.010 | HCP11 | Unit or Basis for Measurement Code | ID | 2-2 | S |  |  | DA, UN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2300. HCP11 must be valid values. |  |
| X223.313.2300.HCP11.020 | HCP11 |  |  |  |  |  |  |  | 999 | R | IK403 - 2: "Conditional Required Data | $2300 . \mathrm{HCPO} 012$ is present, 2300 .HCP011 must be present. |  |
| X223.313.2300.HCP12.010 | HCP12 | Repriced Approved Service Unit Count | R | 1-15 | s |  |  |  | 999 | R | IK403-2: "Conditional Required Data Element Missing" | $2300 . \mathrm{HCP} 011$ is present, $2300 . \mathrm{HCP012}$ must be present. |  |
| X223.313.2300.HCP12.020 | HCP12 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2300.HCP12 Must be <= 999,999.99. |  |
| X223.313.2300.HCP12.030 | HCP12 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | When a decimal is used in 2300.HCP12, the maximum digits to the right of the decimal is 3 |  |
| X223.313.2300.HCP12.050 | HCP12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD21: "Repriced Approved Service لnit_Cont" |  |  |
| X223.313.2300.HCP13.010 | HCP13 | Reject Reason Code | ID | 2-2 | s |  |  | T1, T2, T3, T4, T5, T6 | 999 | R | \|K403 = 7: "Invalid Code Value" | 2300.HCP13 must be valid values. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | $\begin{array}{\|l\|l} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.313.2300.HCP14.010 | HCP14 | Policy Compliance Code | ID | 1-2 | S |  |  | 1, 2, 3, 4, 5 | 999 | R | 11403 = 7: "Invalid Code Value" | $2300 . \mathrm{HCP14}$ must be valid values. |  |
| Х223.313.2300.HCP15.010 | HCP15 | Exception Code | ID | 1-2 | s |  |  | 1, 2, 3, 4, 5, 6 | 999 | R | 11403 = 7: "Invalid Code Value" | $2300 . \mathrm{HCP15}$ must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.319.2310A.NM1.010 | NM1 | ATTENDING PROVIDER |  | 1 | s | 2310A | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over | Only one iteration of 2310A.NM1 is allowed. |  |
| X223.319.2310A.NM 101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 71 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A.NM101 must be present. |  |
| X223.319.2310A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2310A.NM101 must be "71". |  |
| X223.319.2310A.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A.NM102 must be present. |  |
| X223.319.2310A.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2310A.NM102 must be "1". |  |
| X223.319.2310A.NM103.010 | NM103 | Name Last | AN | 1-60 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2310A.NM103 must be present. |  |
| X223.319.2310A.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \begin{array}{l} \text { IK403 = 6: "Invalid Character in Data } \\ \text { Element" } \end{array} \\ & \hline \end{aligned}$ | 2310A.NM103 must contain at least one non-space |  |
| X223.319.2310A.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310A.NM103 must be 1-60 characters. |  |
| X223.319.2310A.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T |  |  |  |
| x223.319.2310A.Nm103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310A.NM103 must be populated with accepted AN characters. |  |
| X223.319.2310A.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" EIC: 71 Attending Physician |  |  |
| X223.319.2310A.NM104.010 | NM104 | Name First | AN | 1-35 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310A.NM104 must be 1-35 characters. |  |
| X223.319.2310A.NM104.020 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> IRejected for Invalid Information..." <br> CSC 122 "Lenth invalid for receiver's <br> application system" <br> CSC 555: "Entity's First Name" <br> FIC 71 Athandina Phvsician |  |  |
| X223.319.2310A.NM104.030 | NM104 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310A.NM104 must be populated with accepted AN characters. |  |
| X223.319.2310A.NM104.040 | NM104 |  |  |  |  |  |  |  | 277 | T | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { Rejected for Invalid Information..." } \\ \text { CSC 511: "Invalid character" } \\ \text { CSC 505: "Entity's First Name" } \\ \text { FIC: 71 Attendina Phvsician } \\ \hline \end{array}$ |  |  |
| X223.319.2310A.NM105.010 | NM105 | Name Middle | AN | 1-25 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310A.NM105 must contain at least one non-space character |  |
| $\begin{aligned} & \hline \text { X223.319.2310A.NM105.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.319.2310A.NM105.030 | NM105 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310A.NM105 must be 1-25 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.319.2310A.NM105.040 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. 71-Attendinn Physician |  |  |
| X223.319.2310A.NM105.050 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM105 must be populated with accepted AN characters. |  |
| X223.319.2310A.NM105.060 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC: 71 Attendina Phvsician |  |  |
| X223.319.2310A.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2310A.NM106 must not be present. |  |
| X223.319.2310A.NM107.005 | NM107 | Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM107 must contain at least one non-space character. |  |
| X223.319.2310A.NM107.010 | NM107 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310A.NM107 must be 1-10 characters. |  |
| X223.319.2310A.NM107.015 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC. 71 Attendino Phusician |  |  |
| X223.319.2310A.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310A.NM107 must be populated with accepted AN characters |  |
| X223.319.2310A.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 511: "Invalid character" } \\ & \text { CSC 125: "Entity's Name" } \\ & \text { FIC: 71 Attendina Phvsician } \end{aligned}$ |  |  |
| X223.319.2310A.NM108.010 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC: 71 Attending Physician | 2310A.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. |  |
| X223.319.2310A.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CsCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." EIC: 71 Attending Physician | 2310A.NM108 must be present. |  |
| X223.319.2310A.NM108.030 | NM108 | Identification Code | ID | 1-2 | s |  |  | xx | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310A.NM108 must be "XX". |  |
| X223.319.2310A.NM109.010 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" FIC. 71 Attendino Phvsician | 2310A.NM109 must be valid according to the NPI algorithm. |  |
| X223.319.2310A.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 71 Attendina Phvsician | The first position of 2310A.NM109 must be a "1". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 9991 } \\ 277 \mathrm{CA} \\ \hline \end{gathered}$ | $\begin{array}{\|l\|l\|} \hline \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.319.2310A.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2310A.NM110 must not be present. |  |
| X223.319.2310A.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2310A.NM111 must not be present. |  |
| X223.319.2310A.NM112.010 | NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2310A.NM112 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.322.2310A.PRV. 010 | PRV | ATTENDING PROVIDER SPECIALTY INFORMATION |  | 1 | s | 2310A |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2310A.NM1 is present, 2310A.PRV may be present. |  |
| X223.322.2310A.PRV. 020 | PRV |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310A.PRV is allowed. |  |
| X223.322.2310A.PRV01.010 | PRV01 | Provider Code | ID | 1-3 | R |  |  | AT | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A . PRV01 must be present. |  |
| X223.322.2310A.PRV01.020 | PRV01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310A . PRV01 must be "AT". |  |
| X223.322.2310A.PRV02.010 | PRV02 | $\begin{gathered} \hline \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | PXC | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2310A . PRV02 must be present. |  |
| X223.322.2310A.PRV02.020 | PRV02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310A . PRV02 must be "PXC". |  |
| X223.322.2310A.PRV03.010 | PRV03 | Provider Taxonomy Code | AN | 1-50 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2310A . PRV03 must be present. |  |
| X223.322.2310A.PRV03.020 | PRV03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 145: "Entity's specialty/taxonomy <br> code" <br> FIC: 71 Attendina Phvsician | 2310A .PRV03 must be a valid Provider Taxonomy Code. | Valid Provider Taxonomy Code reference must be available for this edit. |
| X223.322.2310A.PRV04.010 | PRV04 | State or Province Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | 2310A.PRV04 must not be present. |  |
| X223.322.2310A.PRV05.010 | PRV05 | $\begin{array}{\|c\|} \hline \text { PROVIDER SPECIALTY } \\ \text { INFORMATION } \\ \hline \end{array}$ |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2310A.PRV05 must not be present. |  |
| X223.322.2310A.PRV06.010 | PRV06 | $\begin{aligned} & \text { Provider Organization } \\ & \text { Code } \\ & \hline \end{aligned}$ | ID | 3-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | 2310A.PRV06 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.324.2310A.REF. 010 | REF | ATTENDING PROVIDER SECONDARY IDENTIFICATION |  | 4 | s | 2310A |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2310A.REF with REF01 = " 1 G " may be present when 2310A.NM1 is present and 2310A.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.324.2310A.REF. 020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" EIC: 71 Attending Physician | Only 1 iteration of 2310A.REF with REF01 $=$ " $1 \mathrm{G} "$ is allowed. | Trailblazer Only <br> 01/20: Companion Guide Note needed. |
| X223.324.2310A.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310A.REF must be present if 2300 .REF01 $=$ P4 and 2300.REF02 $=31$. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.324.2310A.REF. 040 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310A.REF must not be present. | Everyone butTrailblazer. <br> 01/20: Companion Guide Note needed. |
| X223.324.2310A.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | K 403 = 1: "Required Data Element Missing" | 2310A . REF01 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.324.2310A.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... TBD03: "This Line of Business does not subport this qualifier." | 2310A.REF01 must be "1G". |  |
| X223.324.2310A.REF02.010 | REF02 | Attending Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310A . REF02 must be present. |  |
| X223.324.2310A.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 133: "Entity's UPIN" | 2310A.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| X223.324.2310A.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | 2310A.REF03 must not be present. |  |
| X223.324.2310A.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | 2310A.REF04 must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.326.2310B.NM1.010 | NM1 | $\underset{\text { NAME }}{\substack{\text { OPERATING PHYSICIAN } \\ \text { NA }}}$ |  | 1 | s | 2310B | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310B.NM1 is allowed. |  |
| х223.326.2310B.NM 101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 72 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.NM101 must be present. |  |
| X223.326.2310B.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310B.NM101 must be "72". |  |
| X223.326.2310B.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.NM102 must be present. |  |
| X223.326.2310B.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310B.NM102 must be "1". |  |
| X223.326.2310B.NM103.010 | NM103 | Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2310B.NM103 must be present. |  |
| х223.326.2310B.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2310B.NM103 must contain at least one non-space character. |  |
| X223.326.2310B.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310B.NM103 must be 1-60 characters. |  |
| X223.326.2310B.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. 72 Oneratino Phvsician |  |  |
| X223.326.2310B.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM103 must be populated with accepted AN characters. |  |
| X223.326.2310B.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC. 72 Oneratina Physician |  |  |
| X223.326.2310B.NM104.010 | NM104 | Name First |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \\ & \hline \end{aligned}$ | 2310B.NM104 must contain at least one non-space character. |  |
| X223.326.2310B.NM104.020 | NM104 |  | AN | 1-35 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310B.NM104 must be 1-35 characters. |  |
| X223.326.2310B.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC. 72 Oneratino Physician |  |  |
| X223.326.2310B.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403=6: \text { "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310B.NM104 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat <br> Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.326.2310B.NM104.050 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" EIC: 72 Onerating Physician |  |  |
| X223.326.2310B.NM105.010 | NM105 | Middle Name |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM105 must contain at least one non-space character. |  |
| X223.326.2310B.NM105.020 | NM105 |  | AN | 1-25 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310B.NM105 must be 1-25 characters. |  |
| X223.326.2310B.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. 72 Oneratino Phvsician |  |  |
| X223.326.2310B.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM105 must be populated with accepted AN characters. |  |
| X223.326.2310B.NM105.050 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC: 72 Oneratina Phvsician |  |  |
| X223.326.2310B.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.326.2310B.NM107.010 | NM107 | Name Suffix |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310B.NM107 must contain at least one non-space character. |  |
| X223.326.2310B.NM107.020 | NM107 |  | AN | 1-10 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310B.NM107 must be 1-10 characters. |  |
| X223.326.2310B.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC. 72 Oneratino Phusician |  |  |
| X223.326.2310B.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2310B.NM107 must be populated with accepted AN characters. |  |
| X223.326.2310B.NM107.050 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 125: "Entity's Name" FIC: 72 Oneratina Phvsician |  |  |
| X223.326.2310B.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC: 72 Operating Physician | 2310B..NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only <br> 01/20: Companion Guide Note needed. |
| X223.326.2310B.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." EIC: 72 Operating Physician | 2310B.NM108 must be present. | Everyone butTrailblazer. <br> 01/20: Companion Guide Note needed. |
| X223.326.2310B.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310B.NM108 must be "XX". |  |
| X223.326.2310B.NM109.010 | NM109 | Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2310B.NM109 must be present if 2310B.NM108 is present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\substack{\text { Loop }}}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | $\begin{array}{\|l\|l} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| х223.326.2310B.Nм109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { IRejected for Invalid Information..." } \\ & \text { CSC 562: "Entity's National Provider } \\ & \text { Identifier (NPI)" } \\ & \text { FIC. } 72 \text { Oneratina Phvsician } \\ & \hline \end{aligned}$ | 2310B.NM109 must be valid according to the NPI algorithm. |  |
| х223.326.2310B.Nм109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { Rejected for Invalid Information..." } \\ & \text { CSC 562: "Entity's National Provider } \\ & \text { Identifier (NPI)"" } \\ & \text { FIC. } 72 \text { Oneratino Physician } \end{aligned}$ | The first position of 23108.NM109 must be a "1". |  |
| X223.326.2310B.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.326.2310B.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.326.2310B.NM112.010 | NM112 | $\underset{\text { Name }}{\text { Name Last or Organization }}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.329.2310B.REF.010 | REF | OPERATING PHYSICIAN SECONDARY IDENTIFICATION |  | 4 | s | 2310B |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2310B.REF with REF01 = " 1 G " may be present when 2310B.NM1 is present and 2310B.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.329.2310B.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" CSC 560: Entity's Additional/Secondary Identifier EIC: 72 Operating Physician | Only 1 iteration of 2310B.REF with REF01 $=$ " $1 \mathrm{G} "$ is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.329.2310B.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310B.REF must not be present. | Everyone butTrailblazer. 001/20: Companion Guide Note needed. |
| X223.329.2310B.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 0B, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310B.REF01 must be present. |  |
| X223.329.2310B.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 21: Missing or invalid information CSC 560: Entity's Additional/Secondary Identifier EIC: 72 Operating Physician | 2310B.REF01 must be "1G". |  |
| X223.329.2310B.REF02.010 | REF02 | Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2310B.REF02 must be present. |  |
| X223.329.2310B.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement <br> IRejected for Invalid Information..." <br> CSC 133: "Entity's UPIN" <br> EIC: 72 Operating Physician | 2310B.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| X223.329.2310B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.329.2310B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| 8371 Edit Reference | Segment or | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.331.2310C.NM1.010 | NM1 | OTHER OPERATING PHYSICIAN NAME |  | 1 | s | 2310C | 1 |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2310C.NM1 may be present when 2310B.NM1 is present. |  |
| X223.331.2310C.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 2310C.NM1 is allowed. |  |
| X223.331.2310C.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | zz | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.NM101 must be present. |  |
| X223.331.2310C.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310C.NM101 must be "ZZ". |  |
| X223.331.2310C.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2310C.NM102 must be present. |  |
| X223.331.2310C.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310C.NM102 must be "1". |  |
| X223.331.2310C.NM103.010 | NM103 | $\begin{array}{\|c\|} \hline \text { Other Operating Physician } \\ \text { Last Name } \end{array}$ | AN | 1-60 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2310C.NM103 must be present. |  |
| X223.331.2310C.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \begin{array}{l} \text { IK } 403=6: ~ " I n v a l i d ~ C h a r a c t e r ~ i n ~ D a t a ~ \\ \text { Element" } \end{array} \\ & \hline \end{aligned}$ | 2310C.NM103 must contain at least one non-space character. |  |
| X223.331.2310C.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310C.NM103 must be 1-60 characters. |  |
| X223.331.2310C.Nm103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. 72 Oneratino Phvsician |  |  |
| X223.331.2310C.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2310C.NM103 must be populated with accepted AN |  |
| X223.331.2310C.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC: 72 Oneratina Phvsician |  |  |
| X223.331.2310C.NM104.010 | NM104 | $\begin{array}{\|c\|} \hline \text { Other Operating Physician } \\ \text { First Name } \end{array}$ |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310C.NM104 must contain at least one non-space character. |  |
| X223.331.2310C.NM104.020 | NM104 |  | AN | 1-35 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310C.NM104 must be 1-35 characters. |  |
| X223.331.2310C.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC. 72 Oneratino Phvsician |  |  |
| X223.331.2310C.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data <br> Element" | 2310C.NM104 must be populated with accepted AN characters. |  |
| X223.331.2310C.NM104.050 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 505: "Entity's First Name" EIC: 72 Oneratina Physician |  |  |
| X223.331.2310C.NM105.010 | NM105 | Other Operating Physician Middle Name or Initial |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM105 must contain at least one non-space character. |  |
| X223.331.2310C.NM105.020 | NM105 |  | AN | 1-25 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310C.NM105 must be $1-25$ characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.331.2310C.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. 72 Oneratino Phvsician |  |  |
| X223.331.2310C.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM105 must be populated with accepted AN characters. |  |
| X223.331.2310C.NM105.050 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC: 72 Oneratina Physician |  |  |
| X223.331.2310C.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.331.2310C.NM107.010 | NM107 | Other Operating Physician Name Suffix |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM107 must contain at least one non-space character. |  |
| х223.331.2310C.NM107.020 | NM107 |  | AN | 1-10 | s |  |  |  | 999 | E | IK403 =5: "Data Element Too Long" | 2310C.NM107 must be 1-10 characters. |  |
| X223.331.2310C.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC. 72 Oneratino Physician |  |  |
| X223.331.2310C.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310C.NM107 must be populated with accepted AN characters. |  |
| X223.331.2310C.NM107.050 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" EIC: 72 Oneratino Phvsician |  |  |
| X223.331.2310C.NM108.010 | NM108 | Identification Code Qualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC: 72 Operating Physician | 2010AA.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.331.2310C.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CsCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." EIC: 72 Operating Physician | 2310C.NM108 must be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| X223.331.2310C.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310C.NM108 must be "XX". |  |
| X223.331.2310C.NM109.010 | NM109 | Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2310C.NM109 must be present if 2310C.NM108 is present. |  |
| X223.331.2310C.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC: 72 Oneratina Physician | 2310C.NM109 must be valid according to the NPI algorithm. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\underset{\text { Min. }}{\text { Max. }}$ | Usage | Loop | $\underset{\text { Repeat }}{\substack{\text { Loop }}}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | $\begin{array}{\|l\|l} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.331.2310C.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { IRejected for Invalid Information..." } \\ & \text { CSC 562: "Entity's National Provider } \\ & \text { Identifier (NPI)" } \\ & \text { IIC. } 72 \text { Oneratina Phvsician } \\ & \hline \end{aligned}$ | The first position of 2310 C .NM109 must be a "1". |  |
| X223.331.2310C.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.331.2310C.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.331.2310C.NM112.010 | NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.334.2310C.REF. 010 | REF | other operating PHYSICIAN SECONDARY identification |  | 4 | s | 2310 C |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2310C. REF with REF01 = "1G" may be present when 2310C.NM1 is present and 2310C.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.334.2310C.REF. 020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" EIC: 72 Operating Physician | Only 1 iteration of 2310C.REF with REF01 $=$ " $1 \mathrm{G} "$ is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.334.2310C.REF. 030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310C.REF must not be present. | Everyone butTrailblazer. 001/20: Companion Guide Note needed. |
| X223.334.2310C.REF01.010 | REF01 | $\begin{gathered} \text { Reference Identification } \\ \text { oualifier } \end{gathered}$ | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | \|K403 = 1: "Required Data Element Missinq" | 2310C.REF01 must be present. |  |
| X223.334.2310C.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 21: Missing or invalid information CSC 560: Entity's Additional/Secondary Identifier EIC: 72 Operating Physician | 2310C.REF01 must be "1G". |  |
| X223.334.2310C.REF02.010 | REF02 | Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310C.REF02 must be present. |  |
| X223.334.2310C.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 133 "Entity's UPIN" EIC : 2 2 Operatina Phvsician | 2310C.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| X223.334.2310C.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.334.2310C.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| x223.336.2310D.NM1.010 | NM1 | RENDERING PROVIDER NAME |  | 1 | s | 2310D | 1 |  | 999 | R | 1K304 = 4: "Loop Occurs Over Maximum Times" Maximum Times" | Only one iteration of 2310D.NM1 is allowed. |  |
| X223.336.2310D.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 82 | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2310D.NM101 must be present. |  |
| X223.336.2310D.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2310D.NM101 must be "82". |  |
| X223.336.2310D.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.Nm102 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Csage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.336.2310D.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2310D.NM102 must be "1". |  |
| X223.336.2310D.NM103.010 | NM103 | Rendering Provider Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.NM103 must be present. |  |
| X223.336.2310D.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM103 must contain at least one non-space character. |  |
| X223.336.2310D.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM103 must be 1-60 characters. |  |
| X223.336.2310D.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. 82 Renderino Provider |  |  |
| X223.336.2310D.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM103 must be populated with accepted AN characters. |  |
| X223.336.2310D.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC. 82 Renderina Provider |  |  |
| X223.336.2310D.NM104.010 | NM104 | Rendering Provider First Name |  |  |  |  |  |  | 999 | R | 1K403 = 6: "Invalid Character in Data Element" | 2310D.NM104 must contain at least one non-space character. |  |
| X223.336.2310D.NM104.020 | NM104 |  | AN | 1-35 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM104 must be 1-35 characters. |  |
| X223.336.2310D.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC. 82 Renderina Provider |  |  |
| X223.336.2310D.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM104 must be populated with accepted AN characters. |  |
| X223.336.2310D.NM104.050 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC. 82 Renderino Provider |  |  |
| X223.336.2310D.NM105.010 | NM105 | $\begin{array}{\|c\|} \hline \text { Rendering Provider Middle } \\ \text { Name or Initial } \\ \hline \end{array}$ |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM105 must contain at least one non-space character. |  |
| X223.336.2310D.NM105.020 | NM105 |  | AN | 1-25 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM105 must be 1-25 characters. |  |
| X223.336.2310D.Nm105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. 82 Renderino Provider |  |  |
| X223.336.2310D.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM105 must be populated with accepted AN characters. |  |
| X223.336.2310D.NM105.050 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC. 82 Renderina Provider |  |  |
| X223.336.2310D.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.336.2310D.NM107.010 | NM107 | $\underset{\text { Rendering Provider Name }}{\text { Suffix }}$ |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310D.NM107 must contain at least one non-space character. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { min. } \\ \text { Max. } \end{gathered}$ | $\begin{array}{\|c} \text { Csage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.336.2310D.NM107.020 | NM107 |  | AN | 1-10 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310D.NM107 must be 1-10 characters. |  |
| X223.336.2310D.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> Rejected for Invalid Information..." <br> CSC 512: "Length hinalid for receiver's <br> application system" <br> CSC 125: "Entity"'s Name" <br> FIC. 82 Renderino Provider |  |  |
| X223.336.2310D.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2310D.NM107 must be populated with accepted AN characters. |  |
| X223.336.2310D.NM107.050 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 125: "Entity's Name" FIC. 82 Renderina Provider |  |  |
| X223.336.2310D.NM108.010 | NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC: 82 Rendering Provider | 2310D.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.336.2310D.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | cscc A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." EIC: 82 Rendering Provider | 2310D.NM108 must be present. | Everyone butTrailblazer. <br> 01/20: Companion Guide Note needed. |
| X223.336.2310D.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2310D.NM108 must be "XX". |  |
| X223.336.2310D.NM109.010 | NM109 | Rendering Provider Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data | 2310D.NM109 must be present if 2310D.NM108 is |  |
| X223.336.2310D.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" FIC: 82 Renderina Provider | 2310D.NM109 must be valid according to the NPI algorithm. |  |
| X223.336.2310D.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC. 82 Renderina Provider | The first position of 2310D.NM109 must be a "1". |  |
| X223.336.2310D.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110: \text { "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.336.2310D.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.336.2310D.NM112.010 | NM112 | Name Last or Organization Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.339.2310D.REF. 010 | REF | RENDERING PROVIDER SECONDARY IDENTIFICATION |  | 4 | s | 2310D |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2310D.REF with REF01 = " 1 G " may be present when 2310D.NM1 is present and 2310D.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. Max. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { Accept/l } \\ \text { Reject } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.339.2310D.REF. 020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" EIC: 82 Rendering Provider | Only 1 iteration of 2310D.REF with REF01 $=$ " $1 \mathrm{G} "$ is allowed. | Trailblazer Only <br> 01/20: Companion Guide Note needed |
| X223.339.2310D.REF. 030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2310D.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| X223.339.2310D.REF01.010 | REF01 | Reference Identification Oualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2310D.REF01 must be present. |  |
| X223.339.2310D.REF01.020 | REF01 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restriction on the number of repetitions" FIC: 82 Renderina Provider | 2310D.REF01 must be "1G". |  |
| X223.339.2310D.REF02.010 | REF02 | Rendering Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310D.REF02 must be present. |  |
| X223.339.2310D.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement IRejeted for Invalild Information..." CsC 133: "Entity's UPIN" EIC: 82Renderina Provider | 2310D.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| X223.339.2310D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.339.2310D.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.341.2310E.NM1.010 | NM1 | SERVICE FACILITY |  | 1 | s | 2310E | 1 |  | 999 | R | $\begin{aligned} & \text { 1K304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 2310E.NM1 is allowed. |  |
| X223.341.2310E.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 77 | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2310E.NM101 must be present. |  |
| X223.341.2310E.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2310E.NM101 must be "77". |  |
| X223.341.2310E.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.NM102 must be present. |  |
| X223.341.2310E.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | IK 403 = 7: "Invalid Code Value" | 2310E.NM102 must be "2". |  |
| X223.341.2310E.NM103.010 | NM103 | $\begin{gathered} \hline \text { Laboratory or Facility } \\ \text { Name } \\ \hline \end{gathered}$ | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.NM103 must be present. |  |
| X223.341.2310E.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2310E.NM103 must contain at least one non-space character. |  |
| X223.341.2310E.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310E.NM103 must be 1-60 characters. |  |
| X223.341.2310E.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125 "Entity's name." FIC. 77 Service Iocation |  |  |
| X223.341.2310E.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310E.NM103 must be populated with accepted AN characters. |  |
| X223.341.2310E.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC: 77 Service Location |  |  |


| 8371 Edit Reference | Segment or | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.341.2310E.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.341.2310E.NM105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.341.2310E.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.341.2310E.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.341.2310E.NM108.010 | NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310E.NM108 must be "XX". |  |
| X223.341.2310E.NM109.010 | NM109 | Laboratory or Facility Primary Identifier | AN | 2-80 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | 2310E.NM109 must be present if 2310E.NM108 is present. |  |
| X223.341.2310E.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> EIC: 77 Service _ ocation | 2310E.NM109 must be valid according to the NPI algorithm. |  |
| X223.341.2310E.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC: 77 Service L ocation | The first position of 2310E.NM109 must be a "1". |  |
| X223.341.2310E.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.341.2310E.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.341.2310E.NM112.010 | NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.344.2310E.N3.010 | N3 | SERVICE FACILITY LOCATION ADDRESS |  | 1 | R | 2310E |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2310E.NM1 is present, 2310.N3 must be present. |  |
| X223.344.2310E.N3.020 | N3 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2310E.N3 is allowed. |  |
| X223.344.2310E.N301.010 | N301 | $\begin{gathered} \hline \text { Laboratory or Facility } \\ \text { Address Line } \\ \hline \end{gathered}$ | AN | 1-55 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2310E.N301 must be present. |  |
| X223.344.2310E.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N301 must contain at least one non-space character. |  |
| Х223.344.2310E.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310E.N301 must be 1-55 characters. |  |
| X223.344.2310E.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" FIC. 77 Sorvice 1 مcation |  |  |
| X223.344.2310E.N301.050 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310E.N301 must be populated with accepted AN characters. |  |
| X223.344.2310E.N301.060 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information... CSC 511: "Invalid character" CSC 503: "Entity's Street address" EIC: 77 Service + ocation |  |  |
| X223.344.2310E.N302.010 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.344.2310E.N302.020 | N302 | $\begin{gathered} \hline \text { Laboratory or Facility } \\ \text { Address Line } \\ \hline \end{gathered}$ | AN | 1-55 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | If present, 2310E.N302 must contain at least one non- space character. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.344.2310E.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310E.N302 must be 1-55 characters. |  |
| X223.344.2310E.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" FIC. 77 Service I ocation |  |  |
| X223.344.2310E.N302.050 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2310E.N302 must be populated with accepted AN characters. |  |
| X223.344.2310E.N302.060 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 511: "Invalid character" CSC 503: "Entity's Street address" EIC: 77 Service_Location |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.345.2310E.N4.010 | N4 | SERVICE FACILITY LOCATION CITY, STATE, ZIP CODE |  | 1 | R | 2310E |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2310E.N3 is present, 2301E.N4 must be present. |  |
| X223.345.2310E.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2310E.N4 is allowed. |  |
| X223.345.2310E.N401.010 | N401 | $\begin{array}{\|c\|} \hline \text { Laboratory or Facility City } \\ \text { Name } \\ \hline \end{array}$ | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310E.N401 must be present. |  |
| X223.345.2310E.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310E.N401 must contain at least two non-space characters. |  |
| X223.345.2310E.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2310E.N401 must be $2-30$ characters. |  |
| X223.345.2310E.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> RRejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 502: "Entity's City" <br> EIC . 77. Servicy |  |  |
| X223.345.2310E.N401.050 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310E.N401 must be populated with accepted AN characters. |  |
| X223.345.2310E.N401.060 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 502: "Entity's City" EIC: 77 Service L ocation |  |  |
| X223.345.2310E.N402.010 | N402 | Laboratory or Facility State or Province Code | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If $2310 \mathrm{E} . \mathrm{N} 404$ is not present, 2310E.N402 must be present. |  |
| $\begin{aligned} & \text { X223.345.2310E.N402.020 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.345.2310E.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 501: "Entity's State/Province" EIC: 77 Service Location | 2310E.N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.345.2310E.N403.010 | N403 | Laboratory or Facility Postal Zone or ZIP Code | ID | 3-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2310E.N404 is not present, 2310E.N403 must be present. |  |
| X223.345.2310E.N403.020 |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | $\begin{gathered} \text { Segment or } \\ \text { Element } \end{gathered}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | $\begin{array}{\|c\|} \hline \text { Accept } / / \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.345.2310E.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" EIC: 77 Service Location | 2310E.N403 must be a valid 9 digit zip code. | Valid Zip Code reference must be available for this edit. |
| X223.345.2310E.N404.010 | N404 | Country Code | ID | 2-3 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.345.2310E.N405.010 | N405 | LocationQualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.345.2310E.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.345.2310E.N407.010 | N407 | Country Subdivision Code | ID | 1-3 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.347.2310E.REF. 010 | REF | SERVICE FACILITY LOCATION SECONDARY IDENTIFICATION |  | 5 | s | 2310E |  |  | 277 | c | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" EIC: 77 Service Location | 2310E.REF must not be present. | Segment not valid for Part A. 02/04: Companion Guide Note needed. |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.349.2310E.NM1.010 | NM1 | REFERRING PROVIDER NAME Loop |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | One iteration of this loop is allowed. |  |
| X223A1.12.2310F.NM1.020 | NM1 | REFERRING PROVIDER NAME |  | 1 | s | 2310F | 1 |  | 999 | R | 1K304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2310F.NM1 with NM101 = "DN" is allowed. | Pass through only. |
| X223.349.2310F.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | DN | 999 | R | IK403 = 1: "Required Data Element Missing" | 2310F.NM101 must be present. |  |
| X223.349.2310F.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310F.NM101 must be "DN". |  |
| X223.349.2310F.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | K 403 = 1: "Required Data Element Missing" | 2310F.NM102 must be present. |  |
| X223.349.2310F.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 2310F.NM102 must be "1". |  |
| X223.349.2310F.NM103.010 | NM103 | Refering Provider Last Name | AN | 1-60 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2310F.NM103 must be present. |  |
| X223.349.2310F.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2310F.NM103 must contain at least one non-space character. |  |
| X223.349.2310F.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310F.NM103 must be 1-60 characters. |  |
| X223.349.2310F.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. DN Referrino Provider |  |  |
| X223.349.2310F.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM103 must be populated with accepted AN characters. |  |
| X223.349.2310F.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC. DN Referrina Provider |  |  |
| X223.349.2310F.NM104.010 | NM104 | $\underset{\text { Name }}{\underset{\text { Referring Provider First }}{ }}$ |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310F.NM104 must contain at least one non-space character. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.349.2310F.NM104.020 | NM104 |  | AN | 1-35 | S |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310F.NM104 must be 1-35 characters. |  |
| X223.349.2310F.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> IRejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 555: "Entity's First Name" <br> FIC . DN Referrino Provider |  |  |
| X223.349.2310F.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 =6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2310F.NM104 must be populated with accepted AN characters. |  |
| X223.349.2310F.NM104.050 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CsC 511: "Invalid character" CSC 505: "Entity's First Name" EIC: DN Referrino Provider |  |  |
| X223.349.2310F.NM105.010 | NM105 | Referring Provider Middle <br> Name |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM105 must contain at least one non-space |  |
| X223.349.2310F.NM105.020 | NM105 |  | AN | 1-25 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2310F.NM105 must be 1-25 characters. |  |
| X223.349.2310F.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. DN Referrino Provider |  |  |
| X223.349.2310F.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2310F.NM105 must be populated with accepted AN characters. |  |
| X223.349.2310F.NM105.050 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC: DN Referrina Provider |  |  |
| X223.349.2310F.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I 10 : "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.349.2310F.NM107.010 | NM107 | Referring Provider Name Suffix |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2310F.NM107 must contain at least one non-space character. |  |
| X223.349.2310F.NM107.020 | NM107 |  | AN | 1-10 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2310F.NM107 must be 1-10 characters. |  |
| X223.349.2310F.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T |  |  |  |
| X223.349.2310F.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2310F.NM107 must be populated with accepted AN characters. |  |
| X223.349.2310F.NM107.050 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 511: "Invalid character" CSC 125: "Entity's Name" FIC: DN Referrina Provider |  |  |
| X223.349.2310F.NM108.010 | NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC: DN Referring Provider | 2310F.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Only Trailblazer. 01/20: Companion Guide Note needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.349.2310F.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for <br> Missing Information..." <br> TBD01: "Situational segment/element required for adjudication." <br> EIC: DN Referring Provider | 2310F.NM108 must be present. | Everyone but Trailblazer 01/20: Companion Guide Note needed. |
| X223.349.2310F.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2310F.NM108 must be "XX". |  |
| X223.349.2310F.NM109.010 | NM109 | $\begin{gathered} \hline \text { Referring Provider } \\ \text { Identifier } \\ \hline \end{gathered}$ | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2310F.NM109 must be present if 2310F.NM108 is |  |
| X223.349.2310F.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC: DN Referrina Provider | 2310F.NM109 must be valid according to the NPI algorithm. |  |
| X223.349.2310F.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC. DN Referrina Provider | The first position of 2310F.NM109 must be a "1". |  |
| X223.349.2310F.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.349.2310F.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.349.2310F.NM112.010 | NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.352.2310F.REF. 010 | REF | REFERRING PROVIDER SECONDARY IDENTIFICATION |  | 3 | s | 2310F |  |  | 277 | c | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 560: Entity's Additional/Secondary Identifier EIC: DN Referring Provider | 2310F.REF must not be present. | Segment not valid for Part A. |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.354.2320.010 |  | other subscriber LOOP |  |  |  | 2320 | 10 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only ten iterations of the 2320 loop are allowed. |  |
| X223.354.2320.SBR. 010 | SBR | other subscriber INFORMATION |  | 1 | s | 2320 | 1 |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.SBR is allowed. |  |
| X223.354.2320.SBR01.010 | SBR01 | Payer Responsibility Sequence Number Code | ID | 1-1 | R |  |  | $\underset{\mathrm{U}}{\mathrm{~A}, \mathrm{~B}, \mathrm{C}, \mathrm{D}, \mathrm{E}, \mathrm{~F}, \mathrm{G}, \mathrm{H}, \mathrm{P}, \mathrm{~S}, \mathrm{~T},}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.SBR01 must be present. |  |
| X223.354.2320.SBR01.020 | SBR01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2320.SBR01 must be valid values. |  |
| X223.354.2320.SBR01.030 | SBR01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | Each iteration of 2320. SBR01 must contain a different code value (each code value may appear in one and only one SBR01 element). |  |
| X223.354.2320.SBR01.040 | SBR01 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> CSC 286: "Other payer's <br> Explanation of Benefits/payment information" | If 2000B.SBR01 = "S", 2320.SBR01 ="P" must be present. |  |


| 8371 Edit Reference | Segment or | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.354.2320.SBR02.010 | SBR02 | $\begin{aligned} & \text { Individual Relationship } \\ & \text { Code } \end{aligned}$ | ID | 2-2 | R |  |  | $\begin{array}{\|c\|} \hline 01,18,19,20,21,39,40,53, \\ G 8 \end{array}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.SBR02 must be present. |  |
| X223.354.2320.SBR02.020 | SBR02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2320.SBR02 must be valid values. |  |
| X223.354.2320.SBR03.010 | SBR03 | Insured Group or Policy Number |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2320.SBR03 must contain at least one non-space character. |  |
| X223.354.2320.SBR03.020 | SBR03 |  | AN | 1-50 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.SBR03 must be 1-50 characters. |  |
| X223.354.2320.SBR03.030 | SBR03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 163: "Entity's policy number" FIC. GB Other Insured |  |  |
| X223.354.2320.SBR03.040 | SBR03 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR03 must be populated with accepted AN characters. |  |
| X223.354.2320.SBR03.050 | SBR03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 163: "Entity's policy number" EIC: GB Other Insured |  |  |
| X223.354.2320.SBR04.010 | SBR04 | Other Insured Group Name | AN | 1-60 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | 2320.SBR04 may not be present when 2320.SBR03 |  |
| X223.354.2320.SBR04.020 | SBR04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2320.SBR04 must contain at least one non-space character |  |
| X223.354.2320.SBR04.030 | SBR04 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.SBR04 must be 1-60 characters. |  |
| X223.354.2320.SBR04.040 | SBR04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 663: "Entity's Group Name" FIC. GR Other Insured |  |  |
| X223.354.2320.SBR04.050 | SBR04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2320.SBR04 must be populated with accepted AN |  |
| X223.354.2320.SBR04.060 | SBR04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 511: "Invalid character" CSC 663: "Entity's Group Name" FIC: GB Other Insured |  |  |
| X223.354.2320.SBR05.010 | SBR05 | Insurance Type Code | ID | 1-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.354.2320.SBR06.010 | SBR06 | Coordination of Benefits Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.354.2320.SBR07.010 | SBR07 | Yes/No Condition or Response Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.354.2320.SBRR08.010 | SBR08 | Employment Status Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.354.2320.SBR09.010 | SBR09 | Claim Filing Indicator Code | ID | 1-2 | s |  |  | 11, 12, 13, 14, 15, 16, 17, AM, <br> BL, CH, CI, DS, FI, HM, LM, <br> MA, MB, MC, OF, TV, VA, WC, | 999 | R | 1K403 = 7: "Invalid Code Value" | 2320.SBR09 must be valid values. |  |
| X223.354.2320.SBR09.020 | SBR09 |  |  |  |  |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 480: Other Carrier Claim filing } \\ & \text { indicatorismissina orinvalid } \end{aligned}$ | $2320 . S B R 09$ must not be = "MA" or "MB". |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Lepeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ 9991 \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.358.2320.CAS. 010 | CAS | CLAIM LEVEL ADJUSTMENTS |  | 5 | s | 2320 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.CAS may be present. |  |
| X223.358.2320.CAS. 020 | CAS |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 5 iterations of 2320.CAS are allowed. |  |
| X223.358.2320.CAS01.010 | CAS01 | Claim Adjustment Group Code | ID | 1-2 | R |  |  | CO, CR, OA, PI, PR | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.CAS01 must be present. |  |
| X223.358.2320.CAS01.020 | CAS01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2320.CAS01 must be valid values. |  |
| X223.358.2320.CAS01.030 | CAS01 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 696: "Claim Adjustment Group Code" <br> FIC- GB Other Insured | If 2320. CASO1 $=$ "CR" then 2330B. DTP with DTP01 $=$ " 573 " must be prior to $01 / 01 / 2012$. |  |
| X223.358.2320.CAS02.010 | CAS02 | Adjustment Reason Code | ID | 1-5 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.CAS02 must be present. |  |
| X223.358.2320.CAS02.020 | CAS02 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date FIC. GB Other Insured | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS02 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. <br> 01/08: Add clause to check for the 2330B.DTP. |
| X223.358.2320.CAS02.030 | CAS02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> FIC. GB Other Insured | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CAS02 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = "573" | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CAS02 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 $=$ "573" |
| X223.358.2320.CAS03.010 | CAS03 | Adjustment Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2320.CAS03 must be present. |  |
| X223.358.2320.CAS03.020 | CAS03 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS03 must be numeric. |  |
| X223.358.2320.CAS03.030 | CAS03 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2320.CAS03 must be >=-99,999,999.99. and <= 99,999,999.99. |  |
| X223.358.2320.CAS03.040 | CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" EIC: GB Other Insured |  |  |
| X223.358.2320.CAS03.050 | CAS03 |  |  |  |  |  |  |  | 277 | T | $\qquad$ /Rejected for Invalid Information... CSC 694: "Amount must not be equa to zero" <br> mount" FIC. GB Other Insured | $2320 . C A S 03$ must not $=0$. |  |
| X223.358.2320.CAS03.060 | CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2320.CAS03 is limited to 0,1 or 2 decimal positions. |  |
| X223.358.2320.CAS04.010 | CAS04 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS04 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.358.2320.CAS04.020 | CAS04 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { 1Rejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero" " "Adjustment Quantity" } \\ & \text { CSC 520: "Adjstmen } \\ & \text { FIC. GB Otherlncured } \end{aligned}$ | 2320.CAS04 must not $=0$. |  |
| X223.358.2320.CAS05.010 | CAS05 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS02 is present, 2320.CAS05 may be present. |  |
| X223.358.2320.CAS05.020 | CAS05 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> FIC. GB Other Insured | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. 01/08: Add clause to check for the 2330B.DTP. |
| X223.358.2320.CAS05.030 | CAS05 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date FIC. GB Other Insured | If 2330B.DTP03 with DTP01 = " 573 " is not present, <br> 2320.CAS05 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 $=$ " 573 ". |  |
| X223.358.2320.CAS06.010 | CAS06 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data | If 2320. CAS05 is present, 2320. CAS06 must be present. |  |
| X223.358.2320.CAS06.020 | CAS06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS06 must be numeric. |  |
| X223.358.2320.CAS06.030 | CAS06 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2320.CAS06 must be >=-99,999,999.99. and } \\ & <=99,999,999.99 \text {. } \end{aligned}$ |  |
| X223.358.2320.CAS06.040 | CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GR Other Insured |  |  |
| X223.358.2320.CAS06.050 | CAS06 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { IRejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero" } \\ & \text { CSC 519: "Adjustment Amount" } \\ & \text { FIC. GB © ther Insured } \\ & \hline \end{aligned}$ | $2320 . C A S 06$ must not $=0$. |  |
| X223.358.2320.CAS06.060 | CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 697: "Too many decimal positions" CSC 519: "Adjustment Amount" FIC. | 2320.CAS06 is limited to 0, 1 or 2 decimal positions. |  |
| X223.358.2320.CAS07.010 | CAS07 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | If 2320.CAS05 is present, 2320.CAS07 may be |  |
| X223.358.2320.CAS07.020 | CAS07 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS07 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.358.2320.CAS07.030 | CAS07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FIC. GB Other Insured | 2320.CAS07 must not $=0$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{array}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.358.2320.CAS08.010 | CAS08 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS05 is present, 23200.CAS08 may be present. |  |
| X223.358.2320.CAS08.020 | CAS08 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date FIC. GB Other Insured | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS08 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS08.030 | CAS08 |  |  |  |  |  |  |  | 277 | C | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date FIC. GB Other Insured | If 2330B.DTP03 with DTP01 = " 573 " is not present, <br> 2320.CAS08 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = " 573 ". |  |
| X223.358.2320.CAS09.010 | CAS09 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK } 403=2: \text { "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | If 2320CAS08 is present, 2320.CAS09 must be present. |  |
| X223.358.2320.CAS09.020 | CAS09 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2320.CAS09 must be numeric. |  |
| X223.358.2320.CAS09.030 | CAS09 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2320.CAS09 must be >=-99,999,999.99. and <= 99,999,999.99. |  |
| X223.358.2320.CAS09.040 | CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GR Other Insured |  |  |
| X223.358.2320.CAS09.050 | CAS09 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { IRejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero" } \\ & \text { CSC 519: "Adjustment Amount" } \\ & \text { FIC. GR Other Insured. } \end{aligned}$ | 2320.CAS09 must not $=0$. |  |
| X223.358.2320.CAS09.060 | CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2320.CAS09 is limited to 0, 1 or 2 decimal positions. |  |
| X223.358.2320.CAS10.010 | CAS10 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS08 is present, 2320.CAS10 may be present. |  |
| X223.358.2320.CAS10.020 | CAS10 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS10 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.358.2320.CAS10.030 | CAS10 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FIC. GB Other Insured | 2320.CAS10 must not $=0$. |  |
| X223.358.2320.CAS11.010 | CAS11 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS08 is present, 23200.CAS11 may be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Lopp } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA111 } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.358.2320.CAS11.020 | CAS11 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement/ Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date FIC. GR Other Insured | If 2330B.DTP03 with DTP01 = " 573 " is present, 2320.CAS11 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS11.030 | CAS11 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date FIC. GR مther Insured | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CAS11 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = " 573 " |  |
| X223.358.2320.CAS12.010 | CAS12 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2320.CAS11 is present, 2320.CAS12 must be present. |  |
| X223.358.2320.CAS12.020 | CAS12 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS12 must be numeric. |  |
| X223.358.2320.CAS12.030 | CAS12 |  |  |  |  |  |  |  | 999 | E | K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2320.CAS12 must be }>=-99,999,999.99 \text {. and } \\ & <=99,999,999.99 \text {. } \end{aligned}$ |  |
| X223.358.2320.CAS12.040 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |  |
| X223.358.2320.CAS12.050 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | $2320 . C A S 12$ must not $=0$. |  |
| X223.358.2320.CAS12.060 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2320.CAS12 is limited to 0,1 or 2 decimal positions. |  |
| X223.358.2320.CAS13.010 | CAS13 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | K 103 = 10: "Exclusion Condition Violated" | If 2320.CAS11 is present, 2320.CAS13 may be present. |  |
| X223.358.2320.CAS13.020 | CAS13 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.CAS13 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.358.2320.CAS13.030 | CAS13 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero" } \\ & \text { CSC 520: "Adjustment Quantity" } \\ & \text { FIC. GB Other Incured } \end{aligned}$ | 2320.CAS13 must not $=0$. |  |
| X223.358.2320.CAS14.010 | CAS14 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS11 is present, 23200.CAS14 may be |  |
| X223.358.2320.CAS14.020 | CAS14 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement/ Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> FIC. GB Other Insured | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS14 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|c\|} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{array}\right\|$ | $\left\|\begin{array}{c} \text { Accept/ } \\ \text { Reject } \end{array}\right\|$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x223.358.2320.CAS14.030 | CAS14 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> FIC OB Other Insumed | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present, 2320.CAS14 must be a valid Claim Adjustment Reason Code for the high/low date range of the 2430.DTP03s when DTP01 = "573". |  |
| x223.358.2320.CAS15.010 | CAS15 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2320. CAS14 is present, 2320.CAS15 must be present. |  |
| X223.358.2320.CAS15.020 | CAS15 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.CAS15 must be numeric. |  |
| X223.358.2320.CAS15.030 | CAS15 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2320.CAS15 must be >=-99,999,999.99. and } \\ & <=99,999,999.99 \text {. } \end{aligned}$ |  |
| X223.358.2320.CAS15.040 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |  |
| X223.358.2320.CAS15.050 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FlC. GB Other Insured | 2320.CAS15 must not $=0$. |  |
| X223.358.2320.CAS15.060 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB مther Insured | 2320.CAS15 is limited to 0, 1 or 2 decimal positions. |  |
| X223.358.2320.CAS16.010 | CAS16 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS14 is present, $2320 . \mathrm{CAS16}$ may be present. |  |
| x223.358.2320.CAS16.020 | CAS16 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.CAS16 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.358.2320.CAS16.030 | CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FIC. GR Other Insured | $2320 . C A S 16$ must not $=0$. |  |
| X223.358.2320.CAS17.010 | CAS17 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2320.CAS14 is present, 23200.CAS17 may be present. |  |
| X223.358.2320.CAS17.020 | CAS17 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date FlC. GB Other Insured | If 2330B.DTP03 with DTP01 $=$ " 573 " is present, 2320.CAS17 must be a valid Claim Adjustment Reason Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.358.2320.CAS18.010 | CAS18 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If $2320 . \mathrm{CAS} 17$ is present, 2320.CAS18 must be present. |  |
| X223.358.2320.CAS18.020 | CAS18 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | $2320 . \mathrm{CAS} 18$ must be numeric. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\underset{\text { Max. }}{\text { Min. }}$ | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| x223.358.2320.CAS18.030 | CAS18 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2320.CAS18 must be $>=-99,999,999.99$. and <= 99,999,999.99. |  |
| X223.358.2320.CAS18.040 | CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |  |
| X223.358.2320.CAS18.050 | CAS18 |  |  |  |  |  |  |  | 277 | T | ```CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" CSC 519: "Adjustment Amount" FIC. GBOther Insured``` | 2320.CAS18 must not $=0$. |  |
| X223.358.2320.CAS18.060 | CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2320.CAS18 is limited to 0, 1 or 2 decimal positions. |  |
| X223.358.2320.CAS19.010 | CAS19 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | 2 If 2320.CAS17 is present, 2320.CAS19 may be present. |  |
| X223.358.2320.CAS19.020 | CAS19 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.CAS19 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.358.2320.CAS19.030 | CAS19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement 1Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" CSC 520: "Adjustment Quantity" FIC. GR Other nsured | $2320 . C A S 19$ must not $=0$. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.364.2320.AMT. 010 | AMT | COB PAYER PAID AMOUNT |  | 1 | s | 2320 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If $2320 . \mathrm{SBR}$ is present, 2320 .AMT with AMT01 $=$ "D" may be present. |  |
| X223.364.2320.AMT. 020 | AMT |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.AMT with AMT01 = "D" is all is allowed. |  |
| X223.364.2320.AMT. 030 | AMT |  |  |  |  |  |  |  | 277 | c | cscc A6: <br> "Acknowledgement/Rejected for Missing Information..." <br> CSC 286: "Other payer's <br> Explanation of Benefits/payment information" | If 2000B.SBR01 = "S" then one 2320 loop with an AMT segment with AMT01 = "D" must be present. |  |
| X223.364.2320.AMT01.010 | AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | D | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2320.AMT01 must be present. |  |
| X223.364.2320.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2320.AMT01 must be "D". |  |
| X223.364.2320.AMT02.005 | AmT02 | Payer Paid Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.AMT02 must be present. |  |
| X223.364.2320.AMT02.010 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.AmT02 must be numeric. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | $\begin{aligned} & \text { Usage } \\ & \text { Req. } \end{aligned}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{gathered} \text { TA11 } \\ 9991 \\ 277 C A \end{gathered} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.364.2320.AMT02.015 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 183: "Amount entity has paid" CSC 286: "Other payer's Explanation of Benefits/payment information" | 2320.AMT02 must be >= 0 . |  |
| X223.364.2320.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.AMT02 must be <= 99,999,999.99. |  |
| х223.364.2320.AMT02.030 | AmT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 183: "Amount entity has paid" CSC 286: "Other payer's Explanation of Benefits/payment information" |  |  |
| X223.364.2320.AMTO2.040 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| х223.364.2320.AMT02.050 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 183: "Amount entity has paid" CSC 286: "Other payer's Explanation of Benefits/payment information" | 2320.AMTO2 is limited to 0,1 or 2 decimal positions. |  |
| X223.364.2320.AMT02.060 | AMT02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 672: "Other Payer's payment information is out of balance" CSC 286: "Other payer's Explanation of Benefits/payment information" | 2320 AMT02 must = the sum of all 2430 .SVD02 payer paid amounts (when the value in 2430 .SVD01 is the same as the value in 2330B.NM109) minus the sum o all claim level adjustments (2320 CAS adjustment amounts) for the same payer. |  |
| X223.364.2320.AMT03.010 | AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.365.2320.AMT. 010 | AMT | remaining patient LIABILITY |  | 1 | s | 2320 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.AMT with AMT01 = "EAF" may be present. | pass-thru, syntax only. |
| X223.365.2320.AMT. 020 | AMT |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.AMT with AMT01 = "EAF" is allowed. |  |
| X223.365.2320.AMT01.010 | AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | EAF | 999 | R | 1K03 = 1: "Required Data Element Missing" | 2320.AMT01 must be present. |  |
| X223.365.2320.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2320.AMT01 must be "EAF". |  |
| X223.365.2320.AMT02.005 | AMT02 | $\underset{\text { Amount }}{\substack{\text { Remaining Patient Liability } \\ \text { Amoun }}}$ | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.AMT02 must be present. |  |
| X223.365.2320.AMT02.010 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 . AMT02 must be numeric. |  |
| X223.365.2320.AMT02.015 | AMT02 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 6: "Balance due from the subscriber" <br> EIC. GR Other Incured | 2320.AMT02 must be >= 0 . |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | $\begin{array}{\|l\|l} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.365.2320.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.AMTO2 must be <= 99,999,999.99. |  |
| X223.365.2320.AMT02.030 | AMT02 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 512: "Length invalid for receiver's } \\ & \text { application system" } \\ & \text { CSC 6: "Balance due from the } \\ & \text { subscriber" } \\ & \text { FIC. GB Other Insured } \end{aligned}$ |  |  |
| X223.365.2320.AMT02.040 | AMT02 |  |  |  |  |  |  |  | 277 | T |  | 2320.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| X223.365.2320.AMT03.010 | AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = 110 : "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.366.2320.AMT. 010 | AMT | COB TOTAL NONcovered amount |  | 1 | s | 2320 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.AMT with AMT01 $=$ "A8" may be present. "A8" may be present. |  |
| X223.366.2320.AMT. 020 | AMT |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds | Only one iteration of 2320.AMT with AMT01 = "A8" is allowed. |  |
| X223.366.2320.AMT01.010 | AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | A8 | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2320.AMT01 must be present. |  |
| X223.366.2320.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2320.AMT01 must be "A8". |  |
| X223.366.2320.AMT02.005 | AMT02 | Non-Covered Amount | R | 1-18 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2320.AMT02 must be present. |  |
| X223.366.2320.AMT02.010 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data <br> Element" | 2320.AMT02 must be numeric. |  |
| X223.366.2320.AMT02.015 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 596: "Non-covered Charge Amount" EIC. GROHer nonured | 2320.AMT02 must be $>=0$. |  |
| X223.366.2320.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.AMTO2 must be <= 99,999,999.99. |  |
| X223.366.2320.AMT02.030 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> IRejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 596: "Non-covered Charge <br> Amount" <br> EIC. GR OHher Insured |  |  |
| $\begin{aligned} & \text { X223.366.2320.AMT02.040 } \\ & \text { edit deactivated } \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.366.2320.AMT02.050 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information.. CSC 697: "Too many decimal positions" CSC 596: "Non-covered Charge Amount" Ar. CR $^{2}$ ther | 2320.AMT02 is limited to 0,1 or 2 decimal positions. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.366.2320.AMT02.060 | AMT02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 596: "Non-covered Charge Amount" <br> FIC: GB Other Insured | The sum of all 2320.AMT02 (with AMT01 = "A8") elements must = 2300.CLM02. |  |
| X223.366.2320.AMT03.010 | AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.367.2320.01.010 | 이 | OTHER INSURANCE COVERAGE INFORMATION |  | 1 | R | 2320 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2320.SBR is present, 2320.01 must be present. |  |
| X223.367.2320.01.020 | 이 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.01 is allowed. |  |
| x223.367.2320.0101.010 | 0101 | Claim Filing Indicator Code | ID | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.367.2320.0102.010 | 0102 | $\begin{array}{\|c\|} \hline \text { Claim Submission Reason } \\ \text { Code } \end{array}$ | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.367.2320.0103.010 | 0103 | Benefits Assignment Certlication Indicator | ID | 1-1 | R |  |  | N, W, Y | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2320.0103 must be present. |  |
| X223.367.2320.0103.010 | 0103 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2320.0103 must be valid values. |  |
| X223.367.2320.0104.010 | 0104 | Patient Signature Source Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| x223.367.2320.0105.010 | 0105 | Provider Agreement Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.367.2320.0106.010 | 0106 | $\begin{array}{\|l} \hline \text { Release of Information } \\ \text { Code } \end{array}$ | ID | 1-1 | R |  |  | I, Y | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.0106 must be present. |  |
| X223.367.2320.0106.010 | 0106 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2320.0106 must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.369.2320.MIA. 010 | MIA | INPATIENT ADJUDICATION INFORMATION |  | 1 | s | 2320 |  |  | 999 | R | IK304 = I9: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.MIA may be present. |  |
| X223.369.2320.MIA. 020 | MIA |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2320.MIA is allowed on inpatient claims. | use the NUBC manual's inpatient/outpatient bill type designations/exceptions |
| X223.369.2320.MIA01.010 | MIA01 | $\begin{gathered} \text { Covered Days or Visits } \\ \text { Count } \end{gathered}$ | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2320.MIA01 must be present. |  |
| X223.369.2320.MIA01.020 | MIA01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.MIA01 must be numeric. |  |
| X223.369.2320.MIA01.030 | MIA01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 456: "Covered Dav(s)" | 2320.MIA01 must be >= 0 . |  |
| X223.369.2320.M1A02.010 | M1A02 | Monetary Amount | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| X223.369.2320.MIA03.010 | MIA03 | Llfetime Psychiatric Days | R | 1-15 | s |  |  |  | 999 | R | \|K403 = 5: "Data Element Too Long" | 2320.MIA03 must be 1-15 characters. |  |
| X223.369.2320.M1A03.020 | MIA03 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.MIA03 must be numeric. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA111 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.MIA03.030 | MIA03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 582: "Lifetime Psychiatric Days cent" | 2320.MIA03 must be >= 0 . |  |
| X223.369.2320.M1A04.010 | MIA04 | Claim DRG Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2320.MIA04 must be <= 99,999,999.99. |  |
| X223.369.2320.MIA04.020 | MIA04 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .MIA04 must be numeric. |  |
| X223.369.2320.MIA04.030 | MIA04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 532: "ClaimDRG Amount" | 2320.MIA04 must be >= 0 . |  |
| X223.369.2320.MIA04.040 | MIA04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" <br> CSC 532• "Claim DRGAmount" | 2320.MIA04 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA05.010 | MIA05 | Claim Payment Remark Code | AN | 1-50 | s |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A8 "Acknowedgement } \\ & \text { Rejected for relational field in error." } \\ & \text { CSC 634: "Remark Code" } \\ & \text { CSC 18: "Date(s) of service." } \end{aligned}$ | 2320.MIA05 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA06.010 | MIA06 | Claim Disproportionate Share Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2320.MIA06 must be <= 99,999,999.99. |  |
| X223.369.2320.M1A06.020 | MIA06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.MIA06 must be numeric. |  |
| X223.369.2320.MIA06.030 | MIA06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 531: "Claim Disproportinate Share_Amount" | 2320.MIA06 must be >= 0 . |  |
| X223.369.2320.MIA06.040 | MIA06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 697: "Too many decimal positions" <br> CSC 531: "Claim Disproportinate Share_Amount" | 2320.MIA06 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA07.010 | MIA07 | Claim MSP Pass-through Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2320.MIA07 must be <= 99,999,999.99. |  |
| X223.369.2320.M1A07.020 | MIA07 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .MIA07 must be numeric. |  |
| X223.369.2320.MIA07.030 | MIA07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 537: "Claim MSP Pass-through Amount" | 2320.MIA07 must be >= 0 . |  |
| X223.369.2320.MIA07.040 | MIA07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 697: "Too many decimal positions" <br> CSC 537: "Claim MSP Pass-through Amمunt" | 2320.MIA07 is limited to 0,1 or 2 decimal positions. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 9991 } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.MIA08.010 | MIA08 | Claim PPS Capital Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2320.MIA08 must be <= 99,999,999.99. |  |
| X223.369.2320.MIA08.020 | MIA08 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .MIA08 must be numeric. |  |
| X223.369.2320.MIA08.030 | MIA08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 539: "Claim PPS Capital Amount" | 2320.MAl08 must be >= 0 . |  |
| X223.369.2320.MIA08.040 | MIA08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 697: "Too many decimal positions" <br> CSC 539: "Claim PPS Capital Amount" | 2320.MIA08 is limited to 0, 1 or 2 decimal positions. |  |
| X223.369.2320.MIA09.010 | MIA09 | PPS-Capital FSP DRG Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2320.MIA09 must be <= 99,999,999.99. |  |
| х223.369.2320.M1A09.020 | MIA09 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 . MIA09 must be numeric. |  |
| X223.369.2320.MIA09.030 | MIA09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 620: "PPS-Capital FSP DRG Amount" | 2320.MIA09 must be >= 0 . |  |
| X223.369.2320.MIA09.040 | MIA09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" CSC 620: "PPS-Capital FSP DRG Amount" | 2320.MIA09 is limited to 0, 1 or 2 decimal positions. |  |
| X223.369.2320.MIA10.010 | MIA10 | PPS-Capital HSP DRG Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2320.MIA10 must be <= 99,999,999.99. |  |
| X223.369.2320.MIA10.020 | MIA10 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 . MIA10 must be numeric. |  |
| X223.369.2320.MIA10.030 | MIA10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 693: "Amount must be greater than or equal to zero" CSC 621: "PPS-Capital HSP DRG Amount" | 2320.MIA10 must be >= 0 . |  |
| X223.369.2320.MIA10.040 | MIA10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 621: "PPS-Capital HSP DRG Amمunt" | 2320.MIA10 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA11.010 | MIA11 | PPS-Capital DSH DRG Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2320.MIA11 must be <= 99,999,999.99. |  |
| X223.369.2320.MIA11.020 | MIA11 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2320 .MIA11 must be numeric. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.MIA11.030 | MIA11 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 618: "PPS-Capital DSH DRG Amount" | 2320.MIA11 must be >= 0 . |  |
| X223.369.2320.M1A11.040 | MIA11 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" CSC 618: "PPS-Capital DSH DRG Amant" | 2320.MIA11 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.M1A12.010 | MIA12 | Old Capital Amount | R | 1-18 | s |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2320.MIA12 must be <= 99,999,999.99. |  |
| X223.369.2320.M1A12.020 | MIA12 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320.MIA12 must be numeric. |  |
| X223.369.2320.MIA12.030 | MIA12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 603. "Old Canital Amount" | 2320.MIA12 must be >= 0 . |  |
| X223.369.2320.MIA12.040 | MIA12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" CSC 603: "Old Canital Amount" | 2320.MIA12 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA13.010 | MIA13 | PPS-Capital IME Amount | R | 1-18 | s |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2320.MIA13 must be <= 99,999,999.99. |  |
| X223.369.2320.M1A13.020 | MIA13 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2320.MIA13 must be numeric. |  |
| X223.369.2320.MIA13.030 | MIA13 |  |  |  |  |  |  |  | 277 | T | cSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 622: "PPS-Capital IME Amount" | 2320.MIA13 must be >= 0 . |  |
| X223.369.2320.MIA13.040 | MIA13 |  |  |  |  |  |  |  | 277 | T | csCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" CSC 622: "PPS-Capital IME Amount" | 2320.MIA13 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA14.010 | MIA14 | PPS-Operating Hospital Speclfic DRG Amount | R | 1-18 | s |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2320.MIA14 must be <= 99,999,999.99. |  |
| X223.369.2320.MIA14.020 | MIA14 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .MIA14 must be numeric. |  |
| X223.369.2320.MIA14.030 | MIA14 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 693: "Amount must be greater than or equal to zero" CSC 624: "PPS-Operating Hospital Snecific_RRG_Amount" | 2320.MIA14 must be >= 0 . |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|l\|l\|} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.MIA14.040 | MIA14 |  |  |  |  |  |  |  | 277 | $\begin{aligned} & \text { x223.36 } \\ & 9.2320 . \mathrm{M} \\ & \text { 9A07.030 } \end{aligned}$ | CSCC A7: "Acknowledgement Rejected for Invalid Information.. CSC 697: "Too many decimal positions" CSC 624: "PPS-Operating Hospital Snecific DRG_Amount" | 2320.MIA14 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA15.010 | MIA15 | Cost Report Day Count | R | 1-15 | s |  |  |  | 999 | $\begin{aligned} & \hline \times 223.36 \\ & 9.2320 . \mathrm{M} \\ & \text { IA08.030 } \end{aligned}$ | 1K403 = 5: "Data Element Too Long" | 2320.MIA15 must be 1-15 characters. |  |
| X223.369.2320.M1A15.020 | MIA15 |  |  |  |  |  |  |  | 999 | $\begin{aligned} & \text { X223.36 } \\ & 9.2320 . \mathrm{M} \\ & \text { IA09.030 } \end{aligned}$ | IK403 = 6: "Invalid Character in Data Element" | 2320 . MIA15 must be numeric. |  |
| X223.369.2320.MIA15.030 | MIA15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 552: "Cost Renort Day Count" | 2320.MIA15 must be >= 0 . |  |
| X223.369.2320.MIA16.010 | MIA16 | PPS-Operating Federal Speclfic DRG Amount | R | 1-18 | s |  |  |  | 999 | $\left\lvert\, \begin{aligned} & \times 223.36 \\ & 9.2320 . M \end{aligned}\right.$ \|A11.030 | \|K403 = 5: "Data Element Too Long" | 2320.MIA16 must be <= 99,999,999.99. |  |
| X223.369.2320.MIA16.020 | MIA16 |  |  |  |  |  |  |  | 999 | $\times 223.36$ <br> 9.2320.M IA12.030 | IK403 = 6: "Invalid Character in Data Element" | 2320 . MIA16 must be numeric. |  |
| X223.369.2320.MIA16.030 | MIA16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. CSC 693: "Amount must be greater than or equal to zero" CSC 623: "PPS-Operating Federal Snecific DRG_Amount" | 2320.MIA16 must be >= 0 . |  |
| X223.369.2320.MIA16.040 | MIA16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" CSC 623: "PPS-Operating Federal Snecific_DRG_Amount" | 2320.MIA16 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA17.010 | MIA17 | Claim PPS Capital Outlier Amount | R | 1-18 | s |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2320.MIA17 must be <= 99,999,999.99. |  |
| х223.369.2320.MIA17.020 | MIA17 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2320 .MIA17 must be numeric. |  |
| X223.369.2320.M1A17.030 | MIA17 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 540: "Claim PPS Capital Outlier Amount" | 2320.MIA17 must be >= 0 . |  |
| X223.369.2320.MIA17.040 | MIA17 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" CSC 540: "Claim PPS Capital Outlier Amمunt" | 2320.MIA17 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA18.010 | MIA18 | Claim Indirect Teaching <br> Amount | R | 1-18 | s |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2320.MIA18 must be <= 99,999,999.99. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | $\begin{array}{\|c} \text { Accept// } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.MIA18.020 | MIA18 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .MIA18 must be numeric. |  |
| X223.369.2320.MIA18.030 | MIA18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 536: "Claim Indirect Teaching Amمunt" | 2320.MIA18 must be >= 0 . |  |
| X223.369.2320.MIA18.040 | MIA18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 697: "Too many decimal positions" <br> CSC 536: "Claim Indirect Teaching Amount" | 2320.MIA18 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA19.010 | MIA19 | Non-Payable Professional Component Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2320.MIA19 must be $<=99,999,999.99$. |  |
| X223.369.2320.MIA19.020 | MIA19 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .MIA19 must be numeric. |  |
| X223.369.2320.MIA19.030 | MIA19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 597: "Non-payable Professional Component Amount" | 2320.MIA19 must be >= 0 . |  |
| X223.369.2320.MIA19.040 | MIA19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 597: "Non-payable Professional Comnonent Amount" | 2320.MIA19 is limited to 0,1 or 2 decimal positions. |  |
| X223.369.2320.MIA20.010 | MIA20 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | 2320.MIA20 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA20.020 | MIA20 |  |  |  |  |  |  |  | 277 | c | CSCC A8 "Acknowledgement $/$ <br> Rejected for relational field in error." <br> CSC $634:$ "Remark Code" <br> CSC 187: "Date(s) of service." | $\begin{aligned} & \text { If 2330B.DTP03 with DTP01 = "573" is not present, } \\ & \text { 2320.MIA23 must be a valid Remittance Advice } \\ & \text { Remark Code for the high/low date range of the } \\ & \text { 2300.DTP03s when DTP01 = " } 4344 . \end{aligned}$ |  |
| X223.369.2320.MIA21.010 | MIA21 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8 "Acknowledgement/ <br> Rejected for relational field in error." <br> CSC $634:$ <br> CSC "Remark Code" <br> CSC 187 : "Daterels of of service." | 2320.MIA21 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA21.020 | MIA21 |  |  |  |  |  |  |  | 277 | c | CSCC A8 "Acknowledgement $/$ <br> Rejected for relational field in error." <br> CSC $634:$ "Remark Code" <br> CSC 187: Deaters) of service." | $\begin{aligned} & \text { If 2330B.DTP03 with DTP01 }=\text { " } 573 \text { " is not present, } \\ & \text { 2320.MIA23 must be a valid Remittance Advice } \\ & \text { Remark Code for the high/low date range of the } \\ & \text { 2300.DTP03s when DTP01 = " } 4344 \text { ". } \end{aligned}$ |  |
| X223.369.2320.MIA22.010 | MIA22 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | 2320.MIA22 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA22.020 | MIA22 |  |  |  |  |  |  |  | 277 | C | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | $\begin{aligned} & \text { If 2330B.DTP03 with DTP01 = "573" is not present, } \\ & \text { 2320.MIA23 must be a valid Remittance Advice } \\ & \text { Remark Code for the high/low date range of the } \\ & \text { 2300.DTP03s when DTP01 = " } 4344 \text { ". } \end{aligned}$ |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.369.2320.MIA23.010 | MIA23 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8 "Acknowledgement / Rejected for relational field in error. CSC 634: "Remark Code CSC 187: "Date(s) of service." | 2320.MIA23 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.369.2320.MIA23.020 | MIA23 |  |  |  |  |  |  |  | 277 | c | CSCC A8 "Acknowledgement <br> Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = " 573 " is not present 2320.MIA23 must be a valid Remittance Advice Remark Code for the high/low date range of the 2300. DTP03s when DTP01 = " 434 ". |  |
| X223.369.2320.MIA24.010 | MIA24 | $\begin{gathered} \text { PPS-Capital Exception } \\ \text { Amount } \end{gathered}$ | R | 1-18 | s |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2320.MIA24 must be <= 99,999,999.99. |  |
| X223.369.2320.MIA24.020 | MIA24 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .MIA24 must be numeric. |  |
| X223.369.2320.MIA24.030 | MIA24 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 619: "PPS-Capital Exception Amمunt" | 2320.MIA24 must be >= 0 . |  |
| X223.369.2320.MIA24.040 | MIA24 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" CSC 619: "PPS-Capital Exception Amount" | 2320.MIA24 is limited to 0, 1 or 2 decimal positions. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.374.2320.MOA. 010 | MOA | OUTPATIENT ADJUDICATION INFORMATION |  | 1 | s | 2320 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2320.SBR is present, 2320.MOA may be present. |  |
| X223.374.2320.MOA. 020 | MOA |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK304= 5: "Segment Exceeds } \\ & \text { Maximum Use" } \end{aligned}$ | Only one iteration of 2320.MOA is allowed on outpatient claims. |  |
| X223.374.2320.MOA01.010 | MOA01 | Reimbursement Rate | R | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2320 . MOA01 must be numeric. |  |
| X223.374.2320.MOA01.020 | MOA01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2320 .MOA01 must be >= 0.0 and $<=1.0$. | 2320.MOA01 must be a percentage expressed as a decimal. |
| X223.374.2320.MOA01.030 | MOA01 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information CSC 697: "Too many decimal positions" | 2320.MOA01 is limited to 0, 1 or 2 decimal positions. |  |
| X223.374.2320.MOA02.010 | MOA02 | $\begin{gathered} \text { Claim HCPCS Payable } \\ \text { Amount } \end{gathered}$ | R | 1-18 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data <br> Element" | 2320.MOA02 must be numeric. |  |
| X223.374.2320.MOA02.020 | MOA02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.MOA02 must be <= 99,999,999.99. |  |
| X223.374.2320.MOA02.030 | MOA02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 574: "HCPCS Payable Amount HomeHealth" |  |  |
| X223.374.2320.MOA02.040 | MOA02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 574: "HCPCS Payable Amount HomeHealth" | 2320.MOA02 must be $>=0$. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.374.2320.MOA02.050 | MOA02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 574: "HCPCS Payable Amount Home Health" | 2320.MOA02 is limited to 0, 1 or 2 decimal positions. |  |
| X223.374.2320.MOA03.010 | MOA03 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8 "Acknowledgement / <br> Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." <br> CSCC | 2320.MOA03 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA03.020 | MOA03 |  |  |  |  |  |  |  | 277 | c | CSCC A8 "Acknowledgement / <br> Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Date(s) of service." | If 2330B. DTP03 with DTP01 = " 573 " is not present, 2320.MOA03 must be a valid Remittance Advice Remark Code for the high/low date range of the 2300. DTP03s when DTP01 $=$ " 434 ". |  |
| X223.374.2320.MOA04.010 | MOA04 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | 2320.MOA04 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. 01/08: Add clause to check for the 2330B.DTP. |
| X223.374.2320.MOA04.020 | MOA04 |  |  |  |  |  |  |  | 277 | c | CSCC A8 "Acknowledgement/ Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = "573" is not present, 2320.MOA04 must be a valid Remittance Advice Remark Code for the high/low date range of the 2300. DTP03s when DTP01 = " 434 ". |  |
| X223.374.2320.MOA05.010 | MOA05 | Remark Code | AN | 1-50 | s |  |  |  | 277 | C | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | 2320.MOA05 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA05.020 | MOA05 |  |  |  |  |  |  |  | 277 | c | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 $=$ " 573 " is not present. 2320.MOA05 must be a valid Remittance Advice Remark Code for the high/low date range of the 2300.DTP03s when DTP01 = "434". |  |
| X223.374.2320.MOA06.010 | MOA06 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | 2320.MOA06 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA06.020 | MOA06 |  |  |  |  |  |  |  | 277 | c | CSCC A8 "Acknowledgement $/$ <br> Rejected for relational field in error." <br> CSC 634: "Remark Code" <br> CSC 187: "Patels $)$ of service." | If 2330B.DTP03 with DTP01 = " 573 " is not present, 2320.MOA06 must be a valid Remittance Advice Remark Code for the high/low date range of the 2300. DTP03s when DTP01 = " 434 ". |  |
| X223.374.2320.MOA07.010 | MOA07 | Remark Code | AN | 1-50 | s |  |  |  | 277 | c | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | 2320.MOA07 must be a valid Remittance Advice Remark Code on the date in 2330B.DTP03 when DTP01 = "573". | Valid Remittance Advice Remark Code reference must be available for this edit. |
| X223.374.2320.MOA07.020 | MOA07 |  |  |  |  |  |  |  | 277 | c | CSCC A8 "Acknowledgement / Rejected for relational field in error." CSC 634: "Remark Code" CSC 187: "Date(s) of service." | If 2330B.DTP03 with DTP01 = "573" is not present, 2320.MOA07 must be a valid Remittance Advice Remark Code for the high/low date range of the 2300. DTP03s when DTP01 $=$ " 434 ". |  |
| X223.374.2320.MOA08.010 | MOA08 | $\begin{gathered} \hline \text { Claim ESRD Payment } \\ \text { Amount } \end{gathered}$ | R | 1-18 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 . MOA08 must be numeric. |  |
| X223.374.2320.MOA08.020 | MOA08 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.MOA08 must be <= 99,999,999.99. |  |
| X223.374.2320.MOA08.030 | MOA08 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 534: "Claim ESRD Payment Amount" |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop |  | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|c} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.374.2320.MOA08.040 | MOA08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 534: "Claim ESRD Payment Amount" | 2320.MOA08 must be >= 0 . |  |
| X223.374.2320.MOA08.050 | MOA08 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement 1Rejected for Invalid Information..." CSC 697: "Too many decimal positions" CSC 534: "Claim ESRD Payment Amount" | 2320.MOA08 is limited to 0,1 or 2 decimal positions. |  |
| X223.374.2320.MOA09.010 | MOA09 | Non-Payable Professional Component Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2320 .MOA09 must be numeric. |  |
| X223.374.2320.MOA09.020 | MOA09 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2320.MOA09 must be <= 99,999,999.99. |  |
| х223.374.2320.MOA09.030 | mOA09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 598: "Non-payable Professional Component Billed Amount" |  |  |
| X223.374.2320.MOA09.040 | MOA09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 598: "Non-payable Professional Component Billed Amount" | 2320.MOA09 must be >= 0 . |  |
| X223.374.2320.MOA09.050 | MOA09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 598: "Non-payable Professional Component Billed Amount" | 2320.MOA09 is limited to 0,1 or 2 decimal positions. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.377.2330A.NM1.010 | NM1 | OTHER SUBSCRIBER NAME |  | 1 | R | 2330A | 1 |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2320.SBR is present, 2330A.NM1 must be present. |  |
| X223.377.2330A.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \\ & \hline \end{aligned}$ | Only one iteration of 2330A.NM1 is allowed. |  |
| X223.377.2330A.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.NM101 must be present. |  |
| X223.377.2330A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2330A.NM101 must be "IL". |  |
| X223.377.2330A.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1,2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.NM102 must be present. |  |
| X223.377.2330A.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330A.NM102 must be valid values. |  |
| X223.377.2330A.NM103.010 | NM103 | Other Insured Last Name | AN | 1-60 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2330A.NM103 must be present. |  |
| х223.377.2330A.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.NM103 must be 1-60 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop |  | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|c} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.377.2330A.NM103.030 | NM103 |  |  |  |  |  |  |  | 277 | T |  |  |  |
| X223.377.2330A.NM103.040 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM103 must be populated with accepted AN |  |
| X223.377.2330A.NM103.050 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC. GB Other Insured |  |  |
| X223.377.2330A.NM103.060 | NM103 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2330A.NM103 must contain at least one non-space character. |  |
| X223.377.2330A.NM104.010 | NM104 | Other Insured First Name | AN | 1-35 | s |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 2330A.NM102 is "2", 2330A.NM104 must not be present. |  |
| X223.377.2330A.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data <br> Element" | 2330A.NM104 must contain at least one non-space character. |  |
| х223.377.2330A.NM104.030 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.NM104 must be 1 - 35 characters. |  |
| X223.377.2330A.NM104.040 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement RRejected for Invalid Information..." CSC 12: "Length invalid for receiver's application system" CSC 504. "Entity's First Name" EIC. GB Othery insured |  |  |
| X223.377.2330A.NM104.050 | NM104 |  |  |  |  |  |  |  | 999 | E | $\underset{\substack{\text { IK } \\ \text { Element" } \\ \text { El }}}{ }$ | 2330A.NM104 must be populated with accepted AN |  |
| X223.377.2330A.NM104.060 | NM104 |  |  |  |  |  |  |  | 277 | T | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { Rejected for Invalid Information..." } \\ \text { CSC 511: "Invalid character" } \\ \text { CSC 505: "Entity's First Name" } \\ \text { FIC. GB Other Insured } \\ \hline \end{array}$ |  |  |
| X223.377.2330A.NM105.010 | NM105 | Other Insured Middle Name | AN | 1-25 | s |  |  |  | 999 | R | IK403 = I13: "Implementation Dependent 'not used' Data Element Present" | If 2330A.NM102 is " 2 ", 2330A.NM105 must not be present. |  |
| X223.377.2330A.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.NM105 must contain at least one non-space |  |
| X223.377.2330A.NM105.030 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.NM105 must be 1 - 25 characters. |  |
| X223.377.2330A.NM105.040 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> Rejected for Invalid Information..." <br> CSC 12: "Length inavaid for receiver's <br> application system" <br> CSC 144. "Entity's Middle Name" <br> EIC. GR Otherysured |  |  |
| X223.377.2330A.NM105.050 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2330A.NM105 must be populated with accepted AN characters. |  |
| X223.377.2330A.NM105.060 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC. GB Other Insured |  |  |
| X223.377.2330A.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |



| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.380.2330A.N301.010 | N301 | $\begin{aligned} & \hline \text { Other Insured Address } \\ & \text { Line } \\ & \hline \end{aligned}$ | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2330A. 301 must be present. |  |
| X223.380.2330A.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330AN301 must contain at least one non-space character. |  |
| х223.380.2330A.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.N301 must be 1-55 characters. |  |
| X223.380.2330A.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" FIC. GB Other Insured |  |  |
| X223.380.2330A.N301.050 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330A.N301 must be populated with accepted AN characters. |  |
| X223.380.2330A.N301.060 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" EIC. GB Other Insured |  |  |
| X223.380.2330A.N302.010 edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.380.2330A.N302.020 | N302 | Other Insured Address Line | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If present, 2330A.N302 must contain at least one non- space character. |  |
| X223.380.2330A.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330A.N302 must be 1-55 characters. |  |
| X223.380.2330A.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" FIC. GB Other Insured |  |  |
| X223.380.2330A.N302.050 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330A.N302 must be populated with accepted AN characters. |  |
| X223.380.2330A.N302.060 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 503: "Entity's Street address" EIC. GB Other Insured |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×223.381.2330A.N4.010 | N4 | OTHER SUBSCRIBER CITYISTATEIZIP CODE |  | 1 | R | 2330A |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330A.NM1 is present, 2330A.N4 must be present. |  |
| X223.381.2330A.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330A.N4 is allowed. |  |
| X223.381.2330A.N401.010 | N401 | Other Insured City Name | AN | 2-30 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2330A.N401 must be present. |  |
| X223.381.2330A.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330A.N401 must contain at least two non-space characters. |  |
| X223.381.2330A.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2330A.N401 must be 2-30 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { min. } \\ \text { Max. } \end{gathered}$ | Usage Req. | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { T99/ } \\ 277 C A \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.381.2330A.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \hline \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 512: "Length invalid for receiver's } \\ & \text { application system" } \\ & \text { CSC 502: "Entity's City" } \\ & \text { EIC. GB Other Unsured } \\ & \hline \end{aligned}$ |  |  |
| X223.381.2330A.N401.050 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330A.N401 must be populated with accepted AN |  |
| X223.381.2330A.N401.060 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 502: "Entity's City" FIC: GB Other Insured |  |  |
| X223.381.2330A.N402.010 | N402 | Other Insured State Code | ID | 2-2 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2330A.N404 is not present, 2330A.N402 must be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.381.2330A.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { IRejected for Invalid Information..." } \\ & \text { CSC 501: "Entity's State/Province" } \\ & \text { EIC: GB Other Insured } \end{aligned}$ | 2330A.N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.381.2330A.N403.010 | N403 | $\begin{gathered} \hline \text { Other Insured Postal Zone } \\ \text { or ZIP Code } \\ \hline \end{gathered}$ | ID | 3-15 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 2: "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | If 2330A.N404 is not present, 2330A.N403 must be |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.381.2330A.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 500: "Entity's Postal/Zip Code" EIC: GB Other Insured | 2330A.N403 must be a valid zip code. | Valid Zip Code reference must be available for this edit. |
| X223.381.2330A.N404.010 | N404 | Country Code | ID | 2-3 | s |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { IRejected for Invalid Information..." } \\ & \text { CSC } 680 \text { "Entity's Country" } \\ & \text { EIC. .iL Subscriber } \end{aligned}$ | 2330A.N404 must be a valid 2 character Country Code. | Valid alpha-2 Country Code reference must be available for this edit. (from Part 1 of ISO 3166) |
| X223.381.2330A.N405.010 | N405 | LocationQualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.381.2330A.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| x223.381.2330A.N407.010 | N407 | Location Identifier | AN | 1-30 | s |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..." } \\ \text { CSC 695: "Entity's Country Subdivision } \\ \text { Code" } \\ \text { EIC: IL Subscriber } \\ \hline \end{array}$ | 2330A.N407 must be a valid Country Subdivision Code. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.383.2330A.REF. 010 | REF | OTHER SUBSCRIBER SECONDARY IDENTIFICATION |  | 2 | s | 2330A |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2330A.NM1 is present, 2330A.REF may be present. |  |
| X223.383.2330A.REF.020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330A.REF is allowed. | Guide says two iterations, but subscribers can't have two SSNs, so we used one here. |
| X223.383.2330A.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | SY | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330A.REF01 must be present. |  |
| X223.383.2330A.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330A.REF01 must be "SY". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA111 } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | $\begin{array}{\|c\|} \hline \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.383.2330A.REF02.010 | REF02 | Other Insured Additional Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2330A.REF02 must be present. |  |
| X223.383.2330A.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 148: "Entity's Social Security Number" <br> EIC: GB Other Insured | 2330A.REF02 must be 9 digits, with no punctuation. <br> The first 3 digits cannot be higher than 772 , and digits $1-3,4-5$, and $6-9$ cannot be zeros. |  |
| X223.383.2330A.REF03.010 | REF03 | Description |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.383.2330A.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.384.2330B.NM1.010 | NM1 | OTHER PAYER NAME |  | 1 | R | 2330B | 1 |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2320.SBR is present, 2330B.NM1 must be present. |  |
| X223.384.2330B.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2330.NM1 is allowed. |  |
| х223.384.2330B.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | PR | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM101 must be present. |  |
| X223.384.2330B.NM 101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.NM101 must be "PR". |  |
| X223.384.2330B.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM102 must be present. |  |
| X223.384.2330B.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 2330B.NM102 must be "2". |  |
| X223.384.2330B.NM103.010 | NM103 | Other Payer Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM103 must be present. |  |
| X223.384.2330B.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.NM103 must contain at least one non-space character. |  |
| х223.384.2330B.NM 103.030 | Nм103 |  |  |  |  |  |  |  | 999 | E | IK403 $=5$ : "Data Element Too Long" | 2300B. NM103 must be 1-60 characters. |  |
| X223.384.2330B.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" CSC 286: Other payer's Explanation of Renefits/navmentinformation |  |  |
| X223.384.2330B.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | Element" | 2330B.NM103 must be populated with accepted AN characters. |  |
| X223.384.2330B.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" CSC 286: Other payer's Explanation of Benefits/navmentinformation |  |  |
| X223.384.2330B.NM104.010 | NM104 | Name First | AN | 1-35 | N/U |  |  |  | 999 | E |  | Must not be present. |  |
| X223.384.2330B.NM 105.010 | NM105 | Name Middle | AN | 1-25 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.384.2330B.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.384.2330B.NM107.010 | NM107 | Name Suffix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.384.2330B.NM108.010 | NM108 | Identlfication CodeQualifier | ID | 1-2 | R |  |  | PI, XV | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM108 must be present. |  |
| х223.384.2330B.NM108.020 | NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.NM108 must be valid values. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Csage } \\ \text { Req. } \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.384.2330B.NM109.010 | NM109 | Other Payer Primary Identifier | AN | 2-80 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.NM109 must be present. |  |
| х223.384.2330B. 010 |  |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2330B.NM109 must $=2430 . \mathrm{SVD01}$. |  |
| X223.384.2330B.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.384.2330B.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.384.2330B.NM112.010 | NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.386.2330B.N3.010 | N3 | OTHER PAYER ADDRESS |  | 1 | s | 2330B |  |  | 999 | R | 1K304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2330B.NM1 is present, 2330B.N3 may be present. |  |
| X223.386.2330B.N3.020 | N3 |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.N3 is allowed. |  |
| X223.386.2330B.N301.010 | N301 | Other Payer Address Line | AN | 1-55 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B. 301 must be present. |  |
| X223.386.2330B.N301.020 | N301 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.N301 must contain at least one non-space character. |  |
| X223.386.2330B.N301.030 | N301 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2330B.N301 must be 1-55 characters. |  |
| X223.386.2330B.N301.040 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" CSC 286: Other payer's Explanation of Benofits/ Inavment information |  |  |
| X223.386.2330B.N301.050 | N301 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330B.N301 must be populated with accepted AN characters. |  |
| X223.386.2330B.N301.060 | N301 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 286: Other payer's Explanation of Benefits/navment information |  |  |
| X223.386.2330B.N302.010 <br> edit deactivated |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.386.2330B.N302.020 | N302 | Other Payer Address Line | AN | 1-55 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If present, 2330B.N302 must contain at least one non- space character. |  |
| $\times$ Х223.386.2330B.N302.030 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2330B.N302 must be 1-55 characters. |  |
| X223.386.2330B.N302.040 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 503: "Entity's Street address" CSC 286: Other payer's Explanation of Benefits/navment information |  |  |
| X223.386.2330B.N302.050 | N302 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data <br> Element" | 2330B.N302 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { Acceptl/ } \\ \text { Reject } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.386.2330B.N302.060 | N302 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 503: "Entity's Street address" CSC 286: Other payer's Explanation of Benefits/navment information |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.387.2330B.N4.010 | N4 | OTHER PAYER CITYISTATEIZIP CODE |  | 1 | R | 2330B |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.N4 must be present. |  |
| х223.387.2330B.N4.020 | N4 |  |  |  |  |  |  |  | 999 | R | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.N4 is allowed. |  |
| X223.387.2330B.N401.010 | N401 | Other Payer City Name | AN | 2-30 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B. N401 must be present. |  |
| X223.387.2330B.N401.020 | N401 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2330B.N401 must contain at least two non-space characters. |  |
| X223.387.2330B.N401.030 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2330B.N401 must be 2-30 characters. |  |
| X223.387.2330B.N401.040 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 502: "Entity's City" CSC 286: Other payer's Explanation of Benofits/navment information |  |  |
| X223.387.2330B.N401.050 | N401 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330B.N401 must be populated with accepted AN characters. |  |
| X223.387.2330B.N401.060 | N401 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 511: "Invalid character" CSC 502: "Entity's City" CSC 286: Other payer's Explanation of Benefits/navment information |  |  |
| X223.387.2330B.N402.010 | N402 | Other Payer State Code | ID | 2-2 | s |  |  |  | 999 | R | K 403 = 2: "Conditional Required Data Element Missing" | If 2330B.N404 is not present, 2330B.N402 must be |  |
| $\begin{array}{\|l\|} \hline \begin{array}{l} \text { X223.387.2330B.N402.020 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.387.2330B.N402.030 | N402 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 501: "Entity's State/Province" CSC 286: Other payer's Explanation of Benefits/navment information | 2330B. N402 must be a valid state code. | Valid State Code reference must be available for this edit. |
| X223.387.2330B.N403.010 | N403 | $\begin{gathered} \hline \text { Other Payer Postal Zone } \\ \text { or ZIP Code } \\ \hline \end{gathered}$ | ID | 3-15 | s |  |  |  | 999 | R |  | If 2330B.N404 is not present, 2330B.N403 must be present. |  |
| $\begin{aligned} & \begin{array}{l} \text { X223.387.2330B.N403.020 } \\ \text { edit deactivated } \end{array} \\ & \hline \end{aligned}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.387.2330B.N403.030 | N403 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 500: "Entity's Postal/Zip Code" CSC 286: Other payer's Explanation of Benefits/payment information | 2330B.N403 must be a valid zip code. | Valid Zip Code reference must be available for this edit. |
| X223.387.2330B.N404.010 | N404 | Country Code | ID | 2-3 | s |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|c\|} \hline \text { TA11 } \\ 999 / \\ 277 C A \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.387.2330B.N405.010 | N405 | LocationQualifier | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.387.2330B.N406.010 | N406 | Location Identifier | AN | 1-30 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { \|K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| X223.387.2330B.N407.010 | N407 | Location Identifier | AN | 1-30 | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.389.2330B.DTP.010 | DTP | CLAIM CHECK OR REMITTANCE DATE |  | 1 | s | 2330B |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2330B.NM1 is present, 2330B.DTP may be present. |  |
| X223.389.2330B.DTP.020 | DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.DTP is allowed. |  |
| X223.389.2330B.DTP.030 | DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 2: "Unexpected Segment" | If 2330B.NM1 is present and 2430.DTP with DTP01 = "573" is not present, 2330B.DTP may be present. |  |
| X223.389.2330B.DTP01.010 | DTP01 | Date TimeQualifier | ID | 3-3 | R |  |  | 573 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.DTP01 must be present. |  |
| X223.389.2330B.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.DTP01 must be "573" |  |
| X223.389.2330B.DTP02.010 | DTP02 | Date Time Period | ID | 2-3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2330B.DTP02 must be present. |  |
| X223.389.2330B.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.DTP02 must be "D8". |  |
| X223.389.2330B.DTP03.010 | DTP03 | Adjudication or Payment <br> Date | AN | 1-35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 8: "Invalid Date" | $2330 B . D T P 03$ must a valid date in CCYYMMDD format. |  |
| X223.389.2330B.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 510: "Future date" CSC 516 "Adjudication or Payment Date" | 2330B.DTP03 must not be a future date. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.390.2330B.REF. 010 | REF | OTHER PAYER SECONDARY IDENTIFIER |  | 2 | s | 2330B |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = <br> "2U", "El", "FY" or "NF" may be present. |  |
| X223.390.2330B.REF.020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only two iterations of 2330B.REF with REF01 = "2U", "El", "FY" or "NF" are allowed. |  |
| X223.390.2330B.REF01.010 | REF01 | $\begin{gathered} \hline \begin{array}{c} \text { Reference Identification } \\ \text { Qualifier } \end{array} \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | 2U, EI, FY, NF | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| X223.390.2330B.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2330B.REF01 must be valid values. |  |
| X223.390.2330B.REF02.010 | REF02 | $\begin{gathered} \hline \begin{array}{c} \text { Other Payer Secondary } \\ \text { Identifier } \end{array} \\ \hline \end{gathered}$ | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
| X223.390.2330B.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 128: "Entity's tax id" EIC: TBD for "Other Paver" | If 2330 B .REF01 = "EI", 2330B.REF02 must be 9 digits with no punctuation. digits with no punctuation. |  |
| X223.390.2330B.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must be must be 1-50 characters. |  |
| X223.390.2330B.REF02.040 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must be populated with accepted AN characters. |  |
| X223.390.2330B.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | If 2330B.REF01 = "2U", "FY" or "NF", 2330B.REF02 must contain at least one non-space character. |  |
| X223.390.2330B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | $\begin{array}{\|c\|} \hline \text { Acceptl/ } \\ \text { Reject } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.390.2330B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.392.2330B.REF. 010 | REF | OTHER PAYER PRIOR aUthorization NUMBER |  | 1 | s | 23308 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "G1" may be present. |  |
| X223.392.2330B.REF.020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "G1" is allowed. |  |
| X223.392.2330B.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | G1 | 999 | R | 1K403 = 1: "Required Data Element Missinq" | 2330B.REF01 must be present. |  |
| X223.392.2330B.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330B.REF01 must be "G1". |  |
| X223.392.2330B.REF02.010 | REF02 | $\qquad$ | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
| X223.392.2330B.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2330B.REF02 must be 1-50 characters. |  |
| X223.392.2330B.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must be populated with accepted AN characters. |  |
| X223.392.2330B.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 48: "Referral/authorization" FIC. TBD for "Other Paver" |  |  |
| X223.392.2330B.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must contain at least one non-space character. |  |
| X223.392.2330B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.392.2330B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.393.2330B.REF. 010 | REF | OTHER PAYER REFERRAL NUMBER |  | 1 | s | 2330B |  |  | 999 | R | IK304 = I6: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "9F" may be present. |  |
| X223.393.2330B.REF.020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = " 9 F " is allowed. |  |
| X223.393.2330B.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9 F | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| X223.393.2330B.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330B.REF01 must be "9F". |  |
| X223.393.2330B.REF02.010 | REF02 | Other Payer Referral Number | AN | 1-50 | R |  |  |  | 999 | R | K 403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
| X223.393.2330B.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2330B.REF02 must be 1-50 characters. |  |
| X223.393.2330B.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330.REFO2 must be populated with accepted AN characters. |  |
| X223.393.2330B.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 48: "Referral/authorization" FIC. TBD for "Other Paver" |  |  |
| X223.393.2330B.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK $403=6$ : "Invalid Character in Data Element" | 2300.REF02 must contain at least one non-space character. |  |
| X223.393.2330B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not | Must not be present. |  |
| X223.393.2330B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \\ & \hline \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}$ | $\begin{gathered} \text { Accept/ } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.394.2330B.REF. 010 | REF | OTHER PAYER CLAIM ADJUSTMENT indicator |  | 1 | s | 2330B |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "T4" may be present. |  |
| X223.394.2330B.REF.020 | REF |  |  |  |  |  |  |  | 999 | R | 1K304 = 5: "Segment Exceeds | Only one iteration of 2330B.REF with REF01 = "T4" is allowed. |  |
| X223.394.2330B.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | T4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| X223.394.2330B.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 2330B.REF01 must be "T4". |  |
| X223.394.2330B.REF02.010 | REF02 | Other Payer Claim Adjustment Indicator | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF02 must be present. |  |
| X223.394.2330B.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | \|1403 = 7: "Invalid Code Value" | 2330B.REF02 must be = "Y". |  |
| X223.394.2330B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.394.2330B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.395.2330B.REF. 010 | REF | OTHER PAYER CLAIM CONTROL NUMBER |  | 1 | s | 2330B |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2330B.NM1 is present, 2330B.REF with REF01 = "F8" may be present. |  |
| X223.395.2330B.REF.020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2330B.REF with REF01 = "F8" is allowed. |  |
| X223.395.2330B.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | F8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2330B.REF01 must be present. |  |
| X223.395.2330B.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2330B.REF01 must be "F8". |  |
| X223.395.2330B.REF02.010 | REF02 | $\substack{\text { Other Payer Claim Control } \\ \text { Number }}$ | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2330B.REF02 must be present. |  |
| X223.395.2330B.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2330B.REF02 must be 1-50 characters. |  |
| X223.395.2330B.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must be populated with accepted AN characters. |  |
| X223.395.2330B.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 464: "Payer Assigned Claim Control Number" FIC. TRD for "Other Paver" |  |  |
| X223.395.2330B.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2330B.REF02 must contain at least one non-space character. |  |
| X223.395.2330B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.395.2330B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.396.2330C.. 010 | NM1 | Other Payer Attending Provider Loop |  |  |  | 2330 C | 1 |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330C Loop must not be present. | 02/04: Companion Guide Note needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|c\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.396.2330C.NM1.010 | NM1 | OTHER PAYER ATTENDING PROVIDER |  | 1 | s | 2330 C |  |  | 277 | T | CsCC A7: "Acknowledgement Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330C.NM1 must not be present. |  |
| X223.398.2330C.REF. 010 | REF | OTHER PAYER ATTENDING PROVIDER SECONDARY IDENTIFICATION |  | 4 | R | 2330 C |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330C.REF must not be present. |  |
| X223.400.2330D. 010 |  | Other Payer Operating Physician Loop |  |  |  | 2330D | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330D Loop must not be present. | 02/04: Companion Guide Note needed. |
| X223.400.2330D.NM1.010 | NM1 | OTHER PAYER OPERATING PHYSICIAN |  | 1 | s | 2330D | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330D.NM1 must not be present. |  |
| X223.402.2330D.REF. 010 | REF | OTHER PAYER OPERATING PHYSICIAN SECONDARY IDENTIFICATION |  | 4 | R | 2330D |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330D.REF must not be present. |  |
| X223.404.2330E..010 |  | Other Payer Other Operating Physician Loop |  |  |  | 2330E | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330E Loop must not be present. | 02/04: Companion Guide Note needed. |
| X223.404.2330E.NM1.010 | NM1 | OTHER PAYER OTHER OPERATING PHYSICIAN |  | 1 | s | 2330E | 1 |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330E.NM1 must not be present. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ 9991 \\ 277 C A \end{array}\right\|$ | Accept Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.406.2330E.REF. 010 | REF | $\begin{gathered} \text { OTHER PAYER OTHER } \\ \text { OPERATING } \\ \text { PHYSIIIAN ECCONDARY } \\ \text { IENTIFICATION } \end{gathered}$ |  | 4 | R | 2330E |  |  | 277 | T | CSCC A7: "Acknowledgement RRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions' | 2330E.REF must not be present. |  |
| X223.408.2330F..010 |  | Other Payer Service Facility Location Loop |  |  |  | 2330 F | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330F Loop must not be present. | 02/04: Companion Guide Note needed. |
| X223.408.2330F.NM1.010 | NM1 | OTHER PAYER SERVICE FACILITY LOCATION |  | 1 | s | 2330F | 1 |  | 277 | T | CsCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330F.NM1 must not be present. |  |
| X223.410.2330F.REF. 010 | REF | OTHER PAYER SERVICE FACILITY LOCATION SECONDARY IDENTIFICATION |  | 3 | R | 2330F |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions' | 2330F.REF must not be present. |  |
| X223.412.2330G.010 |  | Other Payer Rendering Provider Loop |  |  |  | 2330G | 1 |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330 G Loop must not be present. | 02/04: Companion Guide Note |
| X223.412.2330G.NM1.010 | NM1 | OTHER PAYER RENDERING PROVIDER NAME |  | 1 | s | 2330G | 1 |  | 277 | T | cscc A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330G.NM1 must not be present. |  |
| X223.414.2330G.REF. 010 | REF | OTHER PAYER RENDERING PROVIDER SECONDARY IDENTIFIER |  | 4 | R | 2330G |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330G.REF must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{\|c\|} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array} \right\rvert\,$ | $\begin{array}{\|l\|l} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.416.2330H..010 |  | Other Payer Referring Provider Loop |  |  |  | 2330H | 1 |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 2330H Loop must not be present. | 02/04: Companion Guide Note needed. |
| X223.416.2330H.NM1.010 | NM1 | OTHER PAYER REFERRING PROVIDER |  | 1 | s | 2330H | 1 |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "ACknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { TBDO2: "Payer specific restrictions } \\ & \text { on the number of repetitions" } \end{aligned}$ | 2330H.NM1 must not be present. |  |
| X223.418.2330H.REF. 010 | REF | OTHER PAYER REFERRING PROVIDER SECONDARY IDENTIFIER |  | 3 | R | 2330H |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { RRejected for Invalid Information..." } \\ & \text { TBDO2: "Payer specific restrictions } \\ & \text { on the number of repetitions" } \end{aligned}$ | 2330H.REF must not be present. |  |
| X223.420.23301. 010 |  | Other Payer Billing Provider Loop |  |  |  | 23301 | 1 |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 23301 Loop must not be present. | 02/04: Companion Guide Note needed. |
| X223.420.23301.NM1.010 | NM1 | OTHER PAYER BILLING PROVIDER |  | 1 | s | 23301 | 1 |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 23301.NM1 must not be present. |  |
| X223.422.23301.REF. 010 | REF | OTHER PAYER BILLING PROVIDER SECONDARY IDENTIFICATION |  | 2 | R | 23301 |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | 23301.REF must not be present. |  |
| X223.423.2400.010 |  | Service Line Loop |  |  |  | 2400 |  |  | 277 | T | CSCC A3: "Acknowledgement IReturned as unprocessable claim" CSC 121: "Service line number greater than maximum allowable for payer" | Only 449 iterations of the $\mathbf{2 4 0 0}$ loop are allowed. | CMS policy limit is 449 |
| X223.423.2400.LX. 010 | LX | SERVICE LINE NUMBER |  | 1 | R | 2400 | 999 |  | 999 | R | 1K304 = 3: "Required Segment Missing" | 2400.LX must be present. |  |
| X223.423.2400.LX.020 | LX |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2400 . \mathrm{LX}$ is allowed. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Reg. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { T999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.423.2400.LX01.010 | LX01 | Assigned Number | N0 | 1-6 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2400.LX01 must be present. |  |
| X223.423.2400.LX01.020 | LX01 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.LX01 must be numeric. |  |
| X223.423.2400.LX01.030 | LX01 |  |  |  |  |  |  |  | 277 | c | CSCC A3: "Acknowledgement /Returned as unprocessable claim" CSC 121: "Service line number greater than maximum allowable for paver" | 2400.LX01 must be > 0 and $<=449$. |  |
| X223.423.2400.L×01.040 | LX01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | The first 2400.LX01 must be "1". |  |
| X223.423.2400.Lx01.050 | Lx01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | Subsequent $2400 . L \times 01$ values must increment by 1 . |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.424.2400.SV2.010 | Sv2 | INSTITUTIONAL SERVICE LINE |  | 1 | R | 2400 |  |  | 999 | R | IK304 = 3: "Required Segment Missing" | 2400.SV2 must be present. |  |
| X223.424.2400.SV2.020 | SV2 |  |  |  |  |  |  |  | 999 | R | IK 304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2400 . \mathrm{SV2}$ is allowed. |  |
| X223.424.2400.SV201.010 | SV201 | Revenue Code | AN | 1-48 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2400. SV201 must be present. |  |
| X223.424.2400.SV201.020 | SV201 |  |  |  |  |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 455: "Revenue code for services } \\ & \text { rendered" } \\ & \hline \end{aligned}$ | 2400.SV201 must be a valid revenue code. | Valid Revenue Code reference must be available for this edit. |
| X223.424.2400.SV202.010 | SV202 | COMPOSITE |  |  | S |  |  |  |  |  |  |  |  |
| X223.424.2400.SV202-1.010 | SV202-1 | Product or Service IDQualifier | ID | 2-2 | R |  |  | ER, HC, HP, IV, WK | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV202-1 must be present. |  |
| X223.424.2400.SV202-1.020 | SV202-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2400.SV202-1 must be "HP" or "HC". |  |
| X223.424.2400.SV202-2.010 | SV202-2 | Procedure Code | AN | 1-48 | R |  |  |  | 999 | R | K 403 = 1: "Required Data Element Missing" | 2400.SV202-2 must be present. |  |
| X223.424.2400.SV202-2.020 | SV202-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 507: "HCPCS" | When 2400.SV202-1 = "HC", 2400.SV202-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = "472". | Valid HCPCS reference must be available for this edit. |
| X223.424.2400.SV202-2.030 | SV202-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 513: "HIPPS Rate Code for services Rendered" | When 2400.SV202-1 = "HP", 2400.SV202-2 must be a valid HIPPS Skilled Nursing Facility Rate Code. | Valid HIPPS Code reference must be available for this edit. |
| X223.424.2400.SV202-3.010 | SV202-3 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV202-3 must be valid procedure modifier. | Valid Procedure Code Modifier reference must be available for this edit. |
| X223.424.2400.SV202-4.010 | SV202-4 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV202-4 must be valid procedure modifier. | Valid Procedure Code ModIfier reference must be available for this edit. |
| X223.424.2400.SV202-5.010 | SV202-5 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV202-5 must be valid procedure modifier. | Valid Procedure Code Modifier reference must be available for this edit. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \\ \hline \end{array}$ | $\begin{gathered} \text { Accept/ } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.424.2400.SV202-6.010 | SV202-6 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" | 2400.SV202-6 must be valid procedure modifier. | Valid Procedure Code Modifier reference must be available for this edit. |
| X223.424.2400.SV202-7.010 | SV202-7 | Description | AN | 1-80 | s |  |  |  | 999 | R | IK403 = 19: "Implementation Dependent Data Element Missing" | 2400.SV202-7 must be present. when 2400.SV202-2 contains a non-speclfic procedure code. | Valid Non-Sprecific Procedure Code reference must be available for this edit. |
| X223.424.2400.SV202-7.020 | SV202-7 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.SV202-7 must contain at least one non-space character. |  |
| X223.424.2400.SV202-7.030 | SV202-7 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.SV202-7 must be 1-80 characters. |  |
| X223.424.2400.SV202-7.040 | SV202-7 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 306: "Detailed description of service" |  |  |
| X223.424.2400.SV202-7.050 | SV202-7 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.SV202-7 must be populated with accepted AN characters. |  |
| X223.424.2400.SV202-7.060 | SV202-7 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 306: "Detailed description of service" |  |  |
| X223.424.2400.SV202-8.010 | SV202-8 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.424.2400.SV203.010 | SV203 | Line Item Charge Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV203 must be present. |  |
| X223.424.2400.SV203.020 | SV203 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2400.SV203 must be numeric. |  |
| X223.424.2400.SV203.030 | SV203 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2400.SV203 must be $<=99,999,999.99$. |  |
| X223.424.2400.SV203.040 | SV203 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 583: "Line Item Charge Amount" | 2400.SV203 must be >= 0 . |  |
| X223.424.2400.SV203.050 | SV203 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 583: "Line Item Charge Amount" | 2400.SV203 is limited to 0,1 or 2 decimal positions. |  |
| X223.424.2400.SV203.060 | SV203 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 400: "Claim is out of balance: CSC 583:"Line Item Charge Amount" CSC 643: "Service Line Paid Amount" | SV203 must = the sum of all payer amounts paid found in 2430 SVD02 and the sum of all line adjustments found in 2430 CAS Adjustment Amounts. | Companion guide note needed. |
| X223.424.2400.SV204.010 | SV204 | Unit or Basis for Measurement Code | ID | 2-2 | R |  |  | DA, UN | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400. SV204 must be present. |  |
| X223.424.2400.SV204.020 | SV204 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | $2400 . S \mathrm{~S} 204$ must be valid values. |  |
| X223.424.2400.SV205.010 | SV205 | Service Unit Count | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.SV205 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { TA99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.424.2400.SV205.020 | SV205 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2400.SV205 must be numeric. |  |
| X223.424.2400.SV205.030 | SV205 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 402: "Amount must be greater than zero" CSC 476: "Missing or invalid units of service" | 2400.SV205 must be > 0 . |  |
| X223.424.2400.SV205.040 | SV205 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.SV205 must be 1-7 digits, excluding the decimal. | 3/26: Companion Guide Note needed. 1-7 size only. |
| X223.424.2400.SV205.050 | SV205 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" CSC 476: "Missing or invalid units of service" | 2400.SV205 must be an integer (whole number). | Limited to integers, no decimals. 3/26: Companion Guide Note needed. |
| X223.424.2400.SV206.010 | SV206 | Unit Rate | ID | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.424.2400.SV207.010 |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.424.2400.SV207.020 | SV207 | Monetary Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2400.SV207 must be numeric. |  |
| X223.424.2400.SV207.030 | SV207 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.SV207 must be <= 99,999,999.99. |  |
| X223.424.2400.SV207.040 | SV207 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 596: "Non-covered Charge Amount" | 2400.SV207 must be >= 0 |  |
| X223.424.2400.SV207.050 | SV207 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" CSC 596: "Non-covered Charge Amount" | 2400.SV207 is limited to 0,1 or 2 decimal positions. |  |
| X223.429.2400.PWK. 010 | PWK | LINE SUPPLEMENTAL information |  | 10 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only ten iterations of $2400 . \mathrm{PWK}$ are allowed. | pass thru, syntax only |
| X223.429.2400.PWK01.010 | PWK01 | Attachment Report Type Code | ID | 2-2 | R |  |  | 03, 04, 05, 06, 07, 08, 09, 10, 11, 13, 15, 21, A3, A4, AM, AS B2, B3, B4, BR, BS, BT, CB, CK, CT, D2, DA, DB, DG, DJ, DS, EB, HC, HR, I5, IR, LA, M1, MT, NN, OB, OC, OD, OE, OX, OZ, P4, P5, PE, PN, PO, PQ, PY, PZ, RB, RR, RT, RX, | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.PWK01 must be present. |  |
| X223.429.2400.PWK01.020 | PWK01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2400.PWK01 must be valid values. |  |
| X223.429.2400.PWK02.010 | PWK02 | Attachment Transmission Code | ID | 1-2 | R |  |  | AA, BM, EL, EM, FT, FX | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.PWK02 must be present. |  |
| X223.429.2400.PWK02.020 | PWK02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2400.PWK02 must be valid values. |  |
| X223.429.2400.PWK03.010 | PWK03 | Report Copies Needed | No | 1-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| 8371 Edit Reference | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.429.2400.PWK04.010 | PWK04 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.429.2400.PWK05.010 | PWK05 | Identfication CodeQualifier | ID | 1-2 | s |  |  | AC | 999 | R | 1K403 = 2 "Conditional Required Data | When 2400.PWK05 is present, 2400.PWK02 must be "BM", "EL", "EM", "FX" or "FT" |  |
| X223.429.2400.PWK05.020 | PWK05 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2400.PWK05 must be "AC". |  |
| X223.429.2400.PWK06.010 | PWK06 | Identlification Code | AN | 2-80 | s |  |  |  | 999 | R | 1K403 = 2 "Conditional Required Data Element Missing" | When 2400.PWK06 is present, 2400.PWK02 must be "BM", "EL", "EM", "FX" or "FT" |  |
| X223.429.2400.PWK06.020 | PWK06 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = } 6: \text { "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2400.PWK06 must contain at least two non-space characters. |  |
| X223.429.2400.PWK06.030 | PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | 2400.PWK06 must be 2-50 characters. |  |
| X223.429.2400.PWK06.040 | PWK06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 489: "Attachment Control Number" |  |  |
| X223.429.2400.PWK06.050 | PWK06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.PWK06 must be populated with accepted AN characters. |  |
| X223.429.2400.PWK06.060 | PWK06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 489: "Attachment Control Number" |  |  |
| X223.429.2400.PWK07.010 | PWK07 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = } 110 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.429.2400.PWK08.010 | PWK08 | ACTIONS Indicated |  |  | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.429.2400.PWK09.010 | PWK09 | Request Category Code | ID | 1-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.433.2400.DTP. 010 | DTP | SERVICE LINE DATE |  | 1 | s | 2400 |  |  | 999 | R | 1K304 = 3: "Required Segment Missing" | 2400.DTP with DTP01 $=$ "472" must be present. |  |
| X223.433.2400.DTP. 020 | DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400. DTP with DTP01 $=$ "472" is allowed. |  |
| X223.433.2400.DTP01.010 | DTP01 | Date TimeQualifier | ID | 3-3 | R |  |  | 472 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.DTP01 must be "472". |  |
| X223.433.2400.DTP02.010 | DTP02 | Date Time Period FormatQualifier | ID | 2-3 | R |  |  | D8, RD8 | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2400.DTP02 must be present. |  |
| X223.433.2400.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2400. DTP02 must be valid values. |  |
| X223.433.2400.DTP03.010 | DTP03 | Service Date | AN | 1-35 | R |  |  | CYYMMDD, CCYYMMDD-CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element | 2400.DTP03 must be present. |  |
| X223.433.2400.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | \|K403 = 8: "Invalid Date" | If 2400.DTP02 = "D8" then 2400.DTP03 must be a valid date in CCYYMMDD format. |  |
| X223.433.2400.DTP03.030 | DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | If 2400.DTP02 = "RD8*" then 2400.DTP03 must be a valid date in CCYYMMDD-CCYYMMDD format. |  |
| X223.433.2400.DTP03.040 | DTP03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement <br> IRejected for Invalid Information..." <br> CSC 510: "Future date" <br> CSC 187: "Date(s) of service" | 2400. DPT 03 may not be a future date. | CMS business edit. <br> 02/04: Companion Guide Note needed |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.435.2400.REF. 010 | REF | LINE ITEM CONTROL number |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400 .REF with REF01 $=$ " 6 R" is allowed. |  |
| X223.435.2400.REF01.010 | REF01 | $\begin{gathered} \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | 6R | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |  |
| X223.435.2400.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2400.REF01 must be "6R". |  |
| X223.435.2400.REF02.010 | REFO2 | Line Item Control Number | AN | 1-30 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2400. REFO2 must be present. |  |
| X223.435.2400.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \begin{array}{l} \text { IK403 }=6: ~ " I n v a l i d ~ C h a r a c t e r ~ i n ~ D a t a ~ \\ \text { Element" } \end{array} \\ & \hline \end{aligned}$ | 2400.REF02 must contain at least one non-space character. |  |
| X223.435.2400.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-30 characters. |  |
| X223.435.2400.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 584: "Line Item Control Number" |  |  |
| X223.435.2400.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |  |
| X223.435.2400.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 584: "Line Item Control Number" |  |  |
| X223.435.2400.REF02.070 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 584: "Line Item Control Number" | 2400.REF02 must be unique within a single iteration of 2300.CLM01. |  |
| X223.435.2400.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.435.2400.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.437.2400.REF. 010 | REF | REPRICED LINE ITEM REFERENCE NUMBER |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400 .REF with REF01 = "9B" is allowed. | pass through, syntax only |
| X223.437.2400.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | 9 B | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.REF01 must be present. |  |
| X223.437.2400.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2400.REF01 must be "9B". |  |
| X223.437.2400.REF02.010 | REF02 | Repriced Line Item Reference Number | AN | 1-50 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |  |
| X223.437.2400.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one non-space character. |  |
| X223.437.2400.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-50 characters. |  |
| X223.437.2400.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { Rejected for Invalid Information..." } \\ & \text { Csc 512: "Length invalid for receiver's } \\ & \text { application system" } \\ & \text { CSc c 366 "Repriced Line Item } \\ & \text { Reference Number" } \end{aligned}$ |  |  |
| X223.437.2400.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { Kererance: "Invalid Character in Data } \\ & \text { IK403 } 6 \text { : } \\ & \text { Element" } \end{aligned}$ | 2400.REF02 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 9991 } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.437.2400.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 636: "Repriced Line Item Reference Number" |  |  |
| X223.437.2400.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.437.2400.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.438.2400.REF. 010 | REF | ADJUSTED REPRICED LINE ITEM REFERENCE NUMBER |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400 .REF with REF01 $=$ "9D" is allowed. | pass through, syntax only |
| X223.438.2400.REF01.010 | REF01 | $\begin{gathered} \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | 9 D | 999 | R | \|K403 = 1: "Required Data Element Missinq" | 2400.REF01 must be present. |  |
| X223.438.2400.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|K403 = 7: "Invalid Code Value" | 2400.REF01 must be "9D". |  |
| X223.438.2400.REF02.010 | REF02 | Adjusted Repriced Line Item Reference Number | AN | 1-50 | R |  |  |  | 999 | R | K 403 = 1: "Required Data Element Missing" | 2400.REF02 must be present. |  |
| X223.438.2400.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data Element" | 2400.REF02 must contain at least one non-space character. |  |
| X223.438.2400.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2400.REF02 must be 1-50 characters. |  |
| X223.438.2400.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 518: "Adjusted Repriced Line item Reforence Number" |  |  |
| X223.438.2400.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 =6: "Invalid Character in Data Element" | 2400.REF02 must be populated with accepted AN characters. |  |
| X223.438.2400.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 518: "Adjusted Repriced Line item Reference_Number" |  |  |
| X223.438.2400.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.438.2400.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.439.2400.AMT. 010 | AMT | SERVICE TAX AMOUNT |  | 1 | s | 2400 |  |  | 999 | R | 1K304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.AMT with AMT01 = "GT" is allowed. | pass through, syntax only |
| X223.439.2400.AMT01.010 | AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | GT | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.AMT01 must be present. |  |
| X223.439.2400.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "IIvalid Code Value" | 2400.AMT01 must be "GT". |  |
| X223.439.2400.AMT02.010 | AMT02 | Service Tax Amount | R | 1-18 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2400.AMT02 must be present. |  |
| X223.439.2400.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.AMT02 must be numeric. |  |


| 8371 Edit Reference | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA111 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.439.2400.AMT02.025 | AmT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 645: "Service Tax Amount" | 2400.AMT02 must be >= 0 . |  |
| X223.439.2400.AMT02.030 | AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.AMT02 Must be <= 99,999,999.99. |  |
| X223.439.2400.AMT02.040 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 645. "Service Tax Amount" |  |  |
| X223.439.2400.AMT02.050 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" <br> CSC 645: "Service Tax Amount" | 2400.AMT02 is limited to 0,1 or 2 decimal positions. | 2400.AMT02 is limited to 0,1 or 2 decimal positions. |
| X223.439.2400.AMT03.010 | Амтоз | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.440.2400.AMT. 010 | AMT | FACILITY TAX AMOUNT |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.AMT with AMT01 = "N8" is allowed. | pass through, syntax only |
| X223.440.2400.AMT01.010 | AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | N8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.AMT01 must be present. |  |
| X223.440.2400.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = $\mathrm{:}^{\text {: }}$ "Invalid Code Value" | 2400.AMT01 must be "N8". |  |
| X223.440.2400.AMT02.010 | AMT02 | Facility Tax Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.AMT02 must be present. |  |
| X223.440.2400.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.AMT02 must be numeric. |  |
| X223.440.2400.AMT02.025 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 563: "Entity's Tax Amount" EIC: FA Facility | 2400.AMT02 must be >= 0 . |  |
| X223.440.2400.AMT02.030 | AMT02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.AMT02 must be <= 99,999,999.99. |  |
| X223.440.2400.AMT02.040 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 563: "Entity's Tax Amount" FIC. EA Facility |  |  |
| X223.440.2400.AMT02.045 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 563: "Entity's Tax Amount" FIC. EA Eacility | 2400.AMTO2 is limited to 0,1 or 2 decimal positions. |  |
| X223.440.2400.AMT03.010 | AMT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { Accept/l } \\ \text { Reject } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.441.2400.NTE. 010 | NTE | THIRD PARTY ORGANIZATION NOTES |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2400.NTE is allowed. | pass through, syntax only |
| X223.441.2400.NTE01.010 | NTE01 | Note Reference Code | ID | 3-3 | R |  |  | TPO | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2400.NTE01 must be present. |  |
| X223.441.2400.NTE01.020 | NTE01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2400.NTE01 must be "TPO". |  |
| $\times 223.441 .2400$. NTE02.010 | NTE02 | Line Note Text | AN | 1-80 | R |  |  |  | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2400.NTE02 must be present. |  |
| X223.441.2400.NTE02.020 | NTE02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.NTE02 must contain at least one non-space character. |  |
| X223.441.2400.NTE02.030 | NTE02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.NTE02 must be 1-80 characters. |  |
| X223.441.2400.NTE02.040 | NTE02 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 512: "Length invalid for receiver's } \\ & \text { application system" } \\ & \text { CSC 586: "Line Note Text" } \end{aligned}$ |  |  |
| X223.441.2400.NTE02.050 | NTE02 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2400.NTE02 must be populated with accepted AN characters. |  |
| X223.441.2400.NTE02.060 | NTE02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 586: "Line Note Text" |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.442.2400.HCP. 010 | HCP | $\qquad$ INFORMATION |  | 1 | s | 2400 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of $2400 . \mathrm{HCP}$ is allowed. | pass through, syntax only |
| X223.442.2400.HCP01.010 | HCP01 | Pricing Methodology | ID | 2-2 | R |  |  | $\begin{gathered} \hline 00,01,02,03,04,05,06,07, \\ 08,09,10,11,12,13,14 \\ \hline \end{gathered}$ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.HCP01 must be present. |  |
| X223.442.2400.HCP01.020 | HCP01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2400.HCP01 must be valid values. |  |
| X223.442.2400.HCP02.010 | HCP02 | Repriced Allowed Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2400.HCP02 must be present. |  |
| X223.442.2400.HCP02.020 | HCP02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2400. HCP02 must be numeric. |  |
| Х223.442.2400.HCP02.030 | HCP02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2400.HCPO2 Must be <= 99,999,999.99. |  |
| X223.442.2400.HCP02.030 | HCP02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD15: "Reariced Allowed Amount" |  |  |
| X223.442.2400.HCP03.010 | HCP03 | Repriced Saving Amount | R | 1-18 | s |  |  |  | 999 | R | \|K403 = 6: "Invalid Character in Data <br> Element" | 2400.HCP03 must be numeric. |  |
| X223.442.2400.HCP03.020 | HCP03 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.HCP03 Must be <= 99,999,999.99. |  |
| X223.442.2400.HCP03.030 | HCP03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 637: "Repriced Saving Amount" |  |  |
| X223.442.2400.HCP04.010 | HCP04 | Repricing Organization Identifier | AN | 1-50 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | $2400 . \mathrm{HCP04}$ must contain at least one non-space |  |
| Х223.442.2400.HCP04.020 | HCP04 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2400.HCP04 must be 1-50 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.442.2400.HCP04.030 | HCP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD16: "Repricing Organization Identifier" EIC: TU Third Party Repricing |  |  |
| X223.442.2400.HCP04.040 | HCP04 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2400.HCP04 must be populated with accepted AN characters. |  |
| X223.442.2400.HCP04.050 | HCP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" TBD16: "Repricing Organization Identifier" <br> EIC: TU Third Party Repricing مraanization (TPO) |  |  |
| X223.442.2400.HCP05.010 | HCP05 | Repricing Per Diem or Flat Rate Amount | R | 1-9 | s |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2400.HCP05 must be 1-9 characters. |  |
| X223.442.2400.HCP05.020 | HCP05 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> CSC 638: "Repricing Per Diem or Flat Rate_Amount" |  |  |
| X223.442.2400.HCP06.010 | HCP06 | $\qquad$ Ambulatory Patient Group Code | AN | 1-50 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.HCP06 must contain at least one non-space character. |  |
| X223.442.2400.HCP06.020 | HCP06 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | $2400 . \mathrm{HCP} 06$ must be 1-50 characters. |  |
| X223.442.2400.HCP06.030 | HCP06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 635: "Repriced Approved Ambulatorv Pationt Groun" |  |  |
| X223.442.2400.HCP06.040 | HCP06 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2400.HCP06 must be populated with accepted AN characters. |  |
| X223.442.2400.HCP06.050 | HCP06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 635: "Repriced Approved Ambulatorv Patient Group" |  |  |
| X223.442.2400.HCP07.010 | HCP07 | Approved DRG Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.HCP07 must be numeric. |  |
| X223.442.2400.HCP07.020 | HCP07 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2400.HCP07 Must be $<=99,999,999.99$. |  |
| X223.442.2400.HCP07.030 | HCP07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" <br> TDB17. "Anproved DRG Amount" |  |  |
| X223.442.2400.HCP08.010 | HCP08 | Produc/Service ID | AN | 1-48 | s |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." TBD19: "Repriced Approved Revenue Code" | 2400.HCP08 must be a valid revenue code. | Valid Revenue Code reference must be available for this edit. |
| X223.442.2400.HCP09.010 | HCP09 | Product or Service IDQualifier | ID | 2-2 | s |  |  | ER,HC, HP,IV, WK | 999 | R | 1K403 = 7: "Invalid Code Value" | 2400.HPC09 must be "HP" or "HC". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { T999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.442.2400.HCP09.020 | HCP09 |  |  |  |  |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2400. HPC10 is present, 2400. HPC09 must be present. |  |
| X223.442.2400.HCP10.010 | HCP10 | Procedure Code | AN | 1-48 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If $2400 . \mathrm{HPC} 09$ is present, $2400 . \mathrm{HPC} 10$ must be present. |  |
| X223.442.2400.HCP10.020 | HCP10 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 507: "HCPCS" | When 2400.HCP09 = "HC", 2400.HCP10 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = "472" | Valid HCPCS reference must be available for this edit. |
| X223.442.2400.HCP10.030 | HCP10 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 513: "HIPPS Rate Code for services Rendered" | When 2400.HCP10 = "HP", 2400.HCP10 must be a valid HIPPS Skilled Nursing Facility Rate Code. | Valid HIPPS Code reference must be available for this edit. |
| X223.442.2400.HCP11.010 | HCP11 | Unit or Basis for Measurement Code | ID | 2-2 | s |  |  | DA, UN | 999 | R | 1K403 = 7: "Invalid Code Value" | 2400.HCP11 must be valid values. |  |
| X223.442.2400.HCP11.020 | HCP11 |  |  |  |  |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2400. HPC12 is present, 2400 .HPC11 must be present. |  |
| X223.442.2400.HCP12.010 | HCP12 | Repriced Approved Service Unit Count | R | 1-15 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2400. HPC11 is present, 2400 .HPC12 must be present. |  |
| X223.442.2400.HCP12.020 | HCP12 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2400.HCP12 must be numeric. |  |
| X223.442.2400.HCP12.030 | HCP12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" TBD21: "Repriced Approved Service Unit Count" |  |  |
| X223.442.2400.HCP12.040 | HCP12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" CSC 519: "Adjustment Amount" TBD21: "Repriced Approved Service Unitenutl" | 2400.HCP12 is limited to $0,1,2$, or3 decimal positions. positions. |  |
| X223.442.2400.HCP13.010 | HCP13 | Reject Reason Code | ID | 2-2 | s |  |  | T1, T2, T3, T4, T5, T6 | 999 | R | 11403 = 7: "Invalid Code Value" | 2400.HCP13 must be valid values. |  |
| X223.442.2400.HCP14.010 | HCP14 | Policy Compliance Code | ID | 1-2 | s |  |  | 1, 2, 3, 4, 5 | 999 | R | 1K403 = 7: "Invalid Code Value" | $2400 . \mathrm{HCP} 14$ must be valid values. |  |
| X223.442.2400.HCP15.010 | HCP15 | Exception Code | ID | 1-2 | s |  |  | 1, 2, 3, 4, 5, 6 | 999 | R | 1K403 = 7: "Invalid Code Value" | $2400 . \mathrm{HCP15}$ must be valid values. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.449.2410.LIN. 010 | LIN | DRUG IDENTIFICATION |  | 1 | s | 2410 | 1 |  | 999 | R | 1K304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2410.LIN is allowed. |  |
| X223.449.2410.LIN01.010 | LIN01 | Assigned Identlfication | AN | 1-20 | N/U |  |  |  | 999 | E | IK403 = I 10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN02.010 | LIN02 | Product or Service IDQualifier | ID | 2-2 | R |  |  | N4 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.LIN02 must be present. |  |
| X223.449.2410.LINO2.020 | LIN02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2410.LIN02 must be "N4". |  |
| X223.449.2410.LIN03.010 | LIN03 | National Drug Code | AN | 1-48 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2410.LIN03 must be present. |  |
| X223.449.2410.LINO3.020 | LIN03 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 218: "NDC Number" | 2410.LIN03 must be a valid NDC code. | Valid NDC code reference must be available for this edit. |
| X223.449.2410.LIN04.010 | LIN04 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \mid \text { K403 = I10: "Implementation "Not } \\ & \text { IIIsed" "lement Prosent" } \end{aligned}$ <br> Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN05.010 | LIN05 | Produc//Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN06.010 | LIN06 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{gathered} \text { Min. } \\ \text { Max. } \end{gathered}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | $\begin{aligned} & \text { Accept// } \\ & \text { Reject } \end{aligned}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.449.2410.LIN07.010 | LIN07 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN08.010 | LIN08 | Produc/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN09.010 | LIN09 | Produc//Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN10.010 | LIN10 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN11.010 | LIN11 | Produc//Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN12.010 | LIN12 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN13.010 | LIN13 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN14.010 | LIN14 | Produc/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN15.010 | LIN15 | Produc//Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN16.010 | LIN16 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN17.010 | LIN17 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN18.010 | LIN18 | Produc/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN19.010 | LIN19 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN20.010 | LIN20 | Produc/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN21.010 | LIN21 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.449.2410.LIN22.010 | LIN22 | Produc/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN23.010 | LIN23 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403 \text { = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN24.010 | LIN24 | Produc/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN25.010 | LIN25 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN26.010 | LIN26 | Product/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN27.010 | LIN27 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN28.010 | LIN28 | Produc/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN29.010 | LIN29 | Produc/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.449.2410.LIN30.010 | LIN30 | Produc/Service IDQualifier | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.449.2410.LIN31.010 | LIN31 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.452.2410.CTP. 010 | CTP | DRUG QUANTITY |  | 1 | R | 2410 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2410.LIN is present, 2410.CTP must be present. |  |
| X223.452.2410.CTP. 020 | CTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2410.CTP is allowed. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left.\begin{array}{c\|} \text { TA11 } \\ \text { 9991 } \\ 277 C A \end{array} \right\rvert\,$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.452.2410.CTP01.010 | CTP01 | Class of Trade Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP02.010 | CTP02 | Price Identifier Code | ID | 3-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP03.010 | CTP03 | Unit Price | R | 1-17 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.452.2410.CTP04.010 | CTP04 | National Drug Unit Count | R | 1-15 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2410.CTP04 must be present. |  |
| X223.452.2410.CTP04.030 | CTP04 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2410.CTP04 must be $>0$ and $<=9,999,999.999$. | 03/27: format is 9(7)V999 (per CR 6330). <br> Companion Guide Note needed. |
| X223.452.2410.CTP04.040 | CTP04 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 216: "Drua information" | 2410.CTP04 is limited to 3 decimal positions. | Companion Guide Note needed. |
| X223.452.2410.CTP05.010 | CTP05 | COMPOSITE UNIT OF MEASURE |  |  | R |  |  |  |  |  |  |  |  |
| X223.452.2410.CTP05-1.010 | CTP05-1 | Unit or Basis For Measurement Code | ID | 2-2 | R |  |  | F2, GR, ME, ML, UN | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.CTP05-1 must be present. |  |
| X223.452.2410.CTP05-1.020 | CTP05-1 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2410.CTP05-1 must be valid values. |  |
| X223.452.2410.CTP05-2.010 | CTP05-2 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-3.010 | CTP05-3 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP05-4.010 | CTP05-4 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-5.010 | CTP05-5 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-6.010 | CTP05-6 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-7.010 | CTP05-7 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP05-8.010 | CTP05-8 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-9.010 | CTP05-9 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.452.2410.CTP05-10.010 | CTP05-10 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP05-11.010 | CTP05-11 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP05-12.010 | CTP05-12 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP05-13.010 | CTP05-13 | Unit or Basis For Measurement Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP05-14.010 | CTP05-14 | Exponent | R | 1-15 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.452.2410.CTP05-15.010 | CTP05-15 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP06.010 | CTP06 | Price MultiplierQualifier | ID | 3-3 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.452.2410.CTP07.010 | CTP07 | Multiplier | R | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP08.010 | CTP08 | Monetary Amount | R | 1-18 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
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| X223.452.2410.CTP09.010 | CTP09 | Basis of Unit Price Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP10.010 | CTP10 | Condition Value | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.452.2410.CTP11.010 | CTP11 | Multiple Price Quantity | NO | 1-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.454.2410.REF. 010 | REF | PRESCRIPTION OR COMPOUND DRUG ASSOCIATION NUMBER |  | 1 | s | 2410 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2410.LIN is present, 2410.REF may be present. | 06/04: Pass-through, syntax only. |
| X223.454.2410.REF. 020 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2410.REF is allowed. |  |
| X223.454.2410.REF01.010 | REF01 | $\begin{gathered} \text { Reference Identification } \\ \text { Qualifier } \\ \hline \end{gathered}$ | ID | 2-3 | R |  |  | VY, XZ | 999 | R | IK403 = 1: "Required Data Element Missing" | 2410.REF01 must be present. |  |
| X223.454.2410.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | \|1403 = 7: "Invalid Code Value" | 2410.REF01 must be valid values. |  |
| X223.454.2410.REF02.010 | REF02 | Prescription Number | AN | 1-50 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2410.REF02 must be present. |  |
| X223.454.2410.REF02.020 | REF02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2410.REF02 must contain at least one non-space character. |  |
| X223.454.2410.REF02.030 | REF02 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2410.REF02 must be 1-50 characters. |  |
| X223.454.2410.REF02.040 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 219: "Prescriotion number" |  |  |
| X223.454.2410.REF02.050 | REF02 |  |  |  |  |  |  |  | 999 | E | KK403 = 6: "Invalid Character in Data Element" | 2410.REF02 must be populated with accepted AN characters. |  |
| X223.454.2410.REF02.060 | REF02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> IRejected for Invalid Information..." <br> CSC 511: "Invalid haracter" <br> CSC 219: "Prescriotion number" |  |  |
| X223.454.2410.REF03.010 | REF03 | Desciption | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.454.2410.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.456.2420A.NM1.010 | NM1 | OPERATING PHYSICIAN NAME |  | 1 | s | 2420A | 1 |  | 999 | R | $\begin{aligned} & \text { IK304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 2420A.NM1 is allowed. | pass through, syntax only |
| X223.456.2420A.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 72 | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2420A.NM101 must be present. |  |
| X223.456.2420A.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | IK 403 = 7: "Invalid Code Value" | 2420A.NM101 must be "72". |  |
| X223.456.2420A.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.NM102 must be present. |  |
| X223.456.2420A.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420A.NM102 must be "1". |  |
| X223.456.2420A.NM103.010 | NM103 | Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420A.NM103 must be present. |  |
| X223.456.2420A.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420A.NM103 must be 1-60 characters. |  |
| X223.456.2420A.NM103.030 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. 72 Oneratino Physician |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c\|c\|} \hline \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \\ \hline \end{array}$ | $\begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.456.2420A.NM103.040 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2420A.NM103 must be populated with accepted AN |  |
| X223.456.2420A.NM103.050 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC: 72 Oneratina Phvsician |  |  |
| X223.456.2420A.NM103.060 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM103 must contain at least one non-space |  |
| X223.456.2420A.NM104.010 | NM104 | First Name | AN | 1-35 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM104 must contain at least one non-space |  |
| X223.456.2420A.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420A.NM104 must be 1-35 characters. |  |
| X223.456.2420A.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" Flc. 72 Oneratino Phvsician |  |  |
| X223.456.2420A.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM104 must be populated with accepted AN characters. |  |
| X223.456.2420A.NM104.050 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 505: "Entity's First Name" ElC: 72 Onerating Phvsician |  |  |
| X223.456.2420A.NM105.010 | NM105 | Middle Name | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420A.NM105 must contain at least one non-space character. |  |
| X223.456.2420A.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2420A.NM105 must be 1-25 characters. |  |
| X223.456.2420A.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement <br> /Rejected for Invalid Information..." <br> CSC 512: "Length invalid for receiver's <br> application system" <br> CSC 514: "Entity's Middlle Name" <br> FIC . 72 Onoratino Phusician |  |  |
| X223.456.2420A.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2420A.NM105 must be populated with accepted AN characters. |  |
| X223.456.2420A.NM105.050 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC. 72 Oneratino Physician |  |  |
| X223.456.2420A.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.456.2420A.NM107.010 | NM107 | Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2420A.NM107 must contain at least one non-space character. |  |
| X223.456.2420A.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420A.NM107 must be 1-10 characters. |  |
| X223.456.2420A.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC. 72 Oneratino Physician |  |  |
| X223.456.2420A.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2420A.NM107 must be populated with accepted AN characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TA11 } \\ \text { 999/ } \\ 277 C A \end{array}\right\|$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.456.2420A.NM107.050 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" EIC: 72 Onerating Phvsician |  |  |
| X223.456.2420A.NM108.010 | NM108 | Identlication CodeQualifier | ID | 1-2 | s |  |  | xX | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC: 72 Operating Physician | 2420A.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.456.2420A.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." <br> EIC: 72 Operating Physician | 2420A.NM108 must be present. | Everyone butTrailblazer. <br> 01/20: Companion Guide Note needed. |
| X223.456.2420A.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420A.NM108 must be "XX". |  |
| X223.456.2420A.NM109.010 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" FIC: 72 Oneratina Phvsician | 2420A.NM109 must be valid according to the NPI algorithm. |  |
| X223.456.2420A.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" EIC: 72 Onerating Phvsician | The first position of 2420A.NM109 must be a "1". |  |
| X223.456.2420A.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = I10: "Implementation "Not } \\ & \text { Used" Flement Present" } \end{aligned}$ | Must not be present. |  |
| X223.456.2420A.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.456.2420A.NM112.010 | NM112 | $\underset{\text { Name }}{\substack{\text { Name Last or Organization } \\ \text { Name }}}$ | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.459.2420A.REF. 010 | REF | OPERATING PHYSICIAN SECONDARY IDENTIFICATION |  | 20 | s | 2420A |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2420A.REF with REF01 = " 1 G " may be present when 2420A.NM1 is present and 2420A.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.459.2420A.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of 2420A.REF with REF01 = "1G" is allowed. | Trailblazer Only <br> 01/20: Companion Guide Note needed. |
| X223.459.2420A.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420A.REF must not be present. | Everyone butTrailblazer. <br> 01/20: Companion Guide Note needed. |
| X223.459.2420A.REF01.010 | REF01 | Reference Identification | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2420A.REF01 must be present. |  |
| X223.459.2420A.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "IIvalid Code Value" | 2420A.REF01 must be "1G". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.459.2420A.REF02.010 | REF02 | Reference Identifier | AN | 1-50 | R |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 133: "Entity's UPIN" | 2420A.REF02 must be in format ANNNNN or AAANNN (where A is an alpha character and N is a numeric digit). |  |
| X223.459.2420A.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.459.2420A.REF04.010 | REF04 | $\underset{\substack{\text { COMPOSITE UNIT OF } \\ \text { MEASURE }}}{\substack{\text { Cin }}}$ |  |  | s |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.461.2420B.NM1.010 | NM1 | other operating PHYSICIAN NAME |  | 1 | s | 2420B | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420B.NM1 is allowed. |  |
| X223.461.2420B.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | zz | 999 | R | IK403 = 1: "Required Data Element Missina" | 2420B.NM101 must be present. |  |
| X223.461.2420B.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2420B.NM101 must be "ZZ". |  |
| X223.461.2420B.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missina" | 2420B.NM102 must be present. |  |
| X223.461.2420B.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2420B.NM102 must be "1". |  |
| x223.461.2420B.NM103.010 | NM103 | Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420B.NM103 must be present. |  |
| X223.461.2420B.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM103 must contain at least one non-space character. |  |
| X223.461.2420B.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420B.NM103 must be 1-60 characters. |  |
| x223.461.2420B.Nm103.040 | NM103 |  |  |  |  |  |  |  | 277 | T |  |  |  |
| X223.461.2420B.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2420B.NM103 must be populated with accepted AN characters. |  |
| X223.461.2420B.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information...' } \\ & \text { CSC 511: "Invalid character" } \\ & \text { CSC 504: "Entity's Last Name" } \\ & \text { FIC. } 72 \text { Onerating Phvsician } \end{aligned}$ |  |  |
| x223.461.2420B.NM104.010 | NM104 | First Name | AN | 1-35 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2420B.NM104 must contain at least one non-space character. |  |
| X223.461.2420B.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420B.NM104 must be 1-35 characters. |  |
| X223.461.2420B.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 512:" Length invalid for receiver's application system CSC 505:"Entity's First Name" EIC. 7 " |  |  |
| X223.461.2420B.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK } 403=6: \text { "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2420B.NM104 must be populated with accepted AN characters. |  |
| X223.461.2420B.NM104.050 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC. 72 Oneratino Phvsician |  |  |
| X223.461.2420B.NM105.010 | NM105 | Middle Name | AN | 1-25 | s |  |  |  | 999 | R | IK $403=6$ : "Invalid Character in Data Element" | 2420B.NM105 must contain at least one non-space character. |  |
| X223.461.2420B.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2420B.NM105 must be 1-25 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T999/ } \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.461.2420B.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. 72 Oneratino Physician |  |  |
| X223.461.2420B.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | E | \|K 403 = 6: "Invalid Character in Data Element" | 2420B.NM105 must be populated with accepted AN characters. |  |
| X223.461.2420B.NM105.050 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC: 72 Oneratina Physician |  |  |
| X223.461.2420B.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.461.2420B.NM107.010 | NM107 | Name Suffix | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM107 must contain at least one non-space |  |
| X223.461.2420B.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420B.NM107 must be 1-10 characters. |  |
| X223.461.2420B.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC. 72 Oneratino Physician |  |  |
| X223.461.2420B.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420B.NM107 must be populated with accepted AN characters. |  |
| X223.461.2420B.NM107.050 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" FIC: 72 Oneratino Physician |  |  |
| X223.461.2420B.NM108.010 | NM108 | Identrification CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC: 72 Operating Physician | 2420B.NM108 must be present unless 2300 .REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.461.2420B.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." EIC: 72 Operating Physician | 2420B.NM108 must be present. | Everyone butTrailblazer. <br> 01/20: Companion Guide Note needed. |
| X223.461.2420B.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420B.NM108 must be "XX". |  |
| X223.461.2420B.NM109.010 | NM109 | Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2420B.NM109 must be present when 2420B.NM108 is present. |  |
| X223.461.2420B.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 562: "Entity's National Provider Identifier (NPI)" | 2420B.NM109 must be valid according to the NPI algorithm. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { Acceptl/ } \\ \text { Reject } \\ \hline \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.461.2420B.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC: 72 Oneratina Physician | The first position of 2420B.NM109 must be a "1". |  |
| X223.461.2420B.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.461.2420B.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
| X223.461.2420B.NM112.010 | NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.464.2420B.REF. 010 | REF | other operating PHYSICIAN SECONDARY IDENTIFICATION |  | 20 | s | 2420B |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2420B.REF with REF01 = " 1 G " may be present when 2420B.NM1 is present and 2420B.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.464.2420B.REF.020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information.. TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of 2420 B .REF with REF01 $=$ " $1 \mathrm{G} "$ is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.464.2420B.REF.030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420B.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| X223.464.2420B.REF01.010 | REF01 | Reference Identification Oualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2420B.REF01 must be present. |  |
| X223.464.2420B.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420B.REF01 must be "1G". | Trailblazer Only |
| X223.464.2420B.REF02.010 | REF02 | Reference Identifier | AN | 1-50 | R |  |  |  | 999 | R | K 403 = 1: "Required Data Element Missing" | 2420B.REF02 must be present. |  |
| X223.464.2420B.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { IRejected for Invalid Information..." } \\ & \text { CSC 133: "Entity's UPIN" } \\ & \text { FEC i } 2 \text { Operatina PIvsician } \end{aligned}$ | 2420B.REF02 must be in format ANNNNN or AAANNN (where $A$ is an alpha character and $N$ is a numeric digit). |  |
| X223.464.2420B.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.464.2420B.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | s |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.466.2420C.NM1.010 | NM1 | RENDERING PROVIDER NAME |  | 1 | s | 2420 C | 1 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only one iteration of 2420C.NM1 is allowed. | 03/27: CR 6289 is analysis only (no changes) - no revisit needed until implementation CR |
| X223.466.2420C.NM101.010 | NM101 | Entity Identifier Code | ID | 2-3 | R |  |  | 82 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420C.NM101 must be present. |  |
| X223.466.2420C.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420C.NM101 must be "82". |  |
| X223.466.2420C.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420C.NM102 must be present. |  |
| X223.466.2420C.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420C.NM102 must be "1". |  |
| X223.466.2420C.NM103.010 | NM103 | Rendering Provider Last or Organization Name | AN | 1-60 | R |  |  |  | 999 | R | K 403 = 1: "Required Data Element Missing" | 2420C.NM103 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Csage } \\ \text { Req. } \end{array}$ | Loop | Loop Repeat <br> Repeat | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c\|} \hline \text { TA1/ } \\ \text { 999/ } \\ 277 C A \\ \hline \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.466.2420C.NM 103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM103 must contain at least one non-space character. |  |
| X223.466.2420C.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420C.NM103 must be 1-60 characters. |  |
| X223.466.2420C.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. 82 Renderino Provider |  |  |
| X223.466.2420C.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | \|K 403 = 6: "Invalid Character in Data Element" | 2420C.NM103 must be populated with accepted AN characters. |  |
| X223.466.2420C.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 504: "Entity's Last Name" FIC: 82 Renderino Provider |  |  |
| X223.466.2420C.NM104.010 | NM104 | Rendering Provider First Name | AN | 1-35 | s |  |  |  | 999 | R | IK403 =6: "Invalid Character in Data Element" | 2420C.NM104 must contain at least one non-space character. |  |
| X223.466.2420C.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420C.NM104 must be 1-35 characters. |  |
| X223.466.2420C.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FIC. 82 Renderino Provider |  |  |
| X223.466.2420C.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM104 must be populated with accepted AN characters. |  |
| X223.466.2420C.NM104.050 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC: 82 Renderina Provider |  |  |
| X223.466.2420C.NM105.010 | NM105 | $\underset{\text { Name }}{\text { Rendering Provider Middle }}$ | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM105 must contain at least one non-space character. |  |
| X223.466.2420C.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420C.NM105 must be 1-25 characters. |  |
| X223.466.2420C.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC. 82 Renderino Provider |  |  |
| X223.466.2420C.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM105 must be populated with accepted AN characters. |  |
| X223.466.2420C.NM105.050 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC: 82 Renderina Provider |  |  |
| X223.466.2420C.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.466.2420C.NM107.005 | NM107 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Rendering Provider Name } \\ \text { Suffix } \end{array} \\ \hline \end{array}$ | AN | 1-10 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" Element" | 2420C.NM107 must contain at least one non-space character. |  |
| X223.466.2420C.NM107.010 |  |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420C.NM107 must be 1-10 characters. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text {. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{array}$ | $\begin{array}{\|l\|l} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.466.2420C.NM107.020 | NM107 |  |  |  |  |  |  |  | 277 | T | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { /Rejected for Invalid Information..." } \\ \text { CSC 512: "Length invalid for receiver's } \\ \text { application system" } \\ \text { CSC 125: "Entity's Name" } \\ \text { FIC. 82 Renderino Provider } \\ \hline \end{array}$ |  |  |
| X223.466.2420C.NM107.030 | NM107 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420C.NM107 must be populated with accepted AN |  |
| X223.466.2420C.NM107.040 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" EIC. 82 Renderina Provider |  |  |
| X223.466.2420C.NM108.010 | NM108 | Identlication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC: 82 Rendering Provider | 2420C.NM108 must be present unless 2300.REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.466.2420C.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." EIC: 82 Rendering Provider | 2420C.NM108 must be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| X223.466.2420C.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7: "Invalid Code Value" | 2420C.NM108 must be "XX". |  |
| X223.466.2420C.NM109.010 | NM109 | Rendering Provider | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data | 2420C.NM109 must be present when 2420C.NM108 is present. |  |
| X223.466.2420C.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" FIC. 82 Renderina Provider | 2420C.NM109 must be valid according to the NPI algorithm. |  |
| X223.466.2420C.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC. 82 Renderina Provider | The first position of 2420C.NM109 must be a "1". |  |
| X223.466.2420C.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.466.2420C.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.466.2420C.NM112.010 | NM112 | $\underset{\text { Name }}{\substack{\text { Name Last or Organization } \\ \text { Nam }}}$ | AN | 1-60 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.469.2420C.REF. 010 | REF | RENDERING PROVIDER SECONDARY IDENTIFICATION |  | 20 | s | 2420C |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2420C.REF with REF01 = " 1 G " may be present when 2420C.NM1 is present and 2420C.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \\ & \hline \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 C A \end{array}$ | $\begin{array}{\|c\|} \hline \text { Accept// } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.469.2420C.REF. 020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions" | Only 1 iteration of 2420C.REF with REF01 $=$ " $1 \mathrm{G} "$ is allowed. | Trailblazer Only <br> 01/20: Companion Guide Note needed. |
| X223.469.2420C.REF. 030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420C.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| X223.469.2420C.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2, LU | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2420C.REF01 must be present. |  |
| X223.469.2420C.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 1 K 403 = 7 : "Invalid Code Value" | 2420C.REF01 must be "1G". |  |
| X223.469.2420C.REF02.010 | REF02 | Rendering Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420 C . REF02 must be present. |  |
| X223.469.2420C.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 133: "Entity's UPIN" CSC 560: "Entity's Additional/Secondary Identifier" FIC. 82 Renderino Provider | 2420C.REF02 must be in format ANNNNN or AAANNN (where $A$ is an alpha character and $N$ is a numeric digit). |  |
| X223.469.2420C.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.469.2420C.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | s |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.471.2420D.NM1.010 | NM1 | $\underset{\text { NAME }}{\substack{\text { REFERRING PROVIDER } \\ \text { NAM }}}$ |  | 1 | s | 2420D | 1 |  | 999 | R | $\begin{aligned} & \text { 1K304 = 4: "Loop Occurs Over } \\ & \text { Maximum Times" } \end{aligned}$ | Only one iteration of 2420D.NM1 is allowed. |  |
| X223.471.2420D.NM1.020 | NM1 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { lK304=5: "Segment Exceeds } \\ & \text { Maximum Use" } \\ & \hline \end{aligned}$ | Only one iteration of 2420D.NM1 is allowed. |  |
| X223.471.2420D.NM101.010 | NM101 | Entity Identifier Code | 10 | 2-3 | R |  |  | DN | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.NM101 must be present. |  |
| X223.471.2420D.NM101.020 | NM101 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420D.NM101 must be "DN". |  |
| X223.471.2420D.NM102.010 | NM102 | Entity Type Qualifier | ID | 1-1 | R |  |  | 1 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.NM102 must be present. |  |
| X223.471.2420D.NM102.020 | NM102 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2420D.NM102 must be "1". |  |
| X223.471.2420D.NM103.010 | NM103 | Referring Provider Last Name | AN | 1-60 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.NM103 must be present. |  |
| X223.471.2420D.NM103.020 | NM103 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM103 must contain at least one non-space |  |
| X223.471.2420D.NM103.030 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420D.NM103 must be 1-60 characters. |  |
| X223.471.2420D.NM103.040 | NM103 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 504: "Entity's Last Name" FIC. DN Reforrina Provider |  |  |
| X223.471.2420D.NM103.050 | NM103 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM103 must be populated with accepted AN characters. |  |
| X223.471.2420D.NM103.060 | NM103 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 511: "Invalid character" CSC 504: "Entity's Last Name" EIC: DN Referrina Provider |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T991 } \\ 277 \mathrm{CA} \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.471.2420D.NM104.010 | NM104 | Referring Provider First Name | AN | 1-35 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM104 must contain at least one non-space character. |  |
| X223.471.2420D.NM104.020 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420D.NM104 must be 1-35 characters. |  |
| X223.471.2420D.NM104.030 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 505: "Entity's First Name" FlC. DN Referrino Provider |  |  |
| X223.471.2420D.NM104.040 | NM104 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM104 must be populated with accepted AN characters. |  |
| X223.471.2420D.NM104.050 | NM104 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 505: "Entity's First Name" FIC: DN Referrina Provider |  |  |
| X223.471.2420D.NM105.010 | NM105 | Referring Provider Middle Name or Initial | AN | 1-25 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM105 must contain at least one non-space |  |
| X223.471.2420D.NM105.020 | NM105 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2420D.NM105 must be 1-25 characters. |  |
| X223.471.2420D.NM105.030 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 514: "Entity's Middle Name" FIC- DN Referrino Provider |  |  |
| X223.471.2420D.NM105.040 | NM105 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2420D.NM105 must be populated with accepted AN characters. |  |
| X223.471.2420D.NM105.050 | NM105 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information. CSC 511: "Invalid character" CSC 514: "Entity's Middle Name" FIC. DN Referrino Provider |  |  |
| X223.471.2420D.NM106.010 | NM106 | Name Prefix | AN | 1-10 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.471.2420D.NM107.010 | NM107 | $\begin{array}{\|c\|} \hline \begin{array}{c} \text { Referring Provider Name } \\ \text { Suffix } \end{array} \\ \hline \end{array}$ | AN | 1-10 | S |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2420D.NM107 must contain at least one non-space character. |  |
| X223.471.2420D.NM107.020 | NM107 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2420D.NM107 must be 1-10 characters. |  |
| X223.471.2420D.NM107.030 | NM107 |  |  |  |  |  |  |  | 277 | ${ }^{\top}$ | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 125: "Entity's Name" FIC. DN Referring Provider |  |  |
| X223.471.2420D.NM107.040 | NM107 |  |  |  |  |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2420D.NM107 must be populated with accepted AN characters. |  |
| X223.471.2420D.NM107.050 | NM107 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 125: "Entity's Name" FIC- DN Referrina Provider |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.471.2420D.NM108.010 | NM108 | Identfication CodeQualifier | ID | 1-2 | s |  |  | xx | 277 | c | CSCC A8: "Acknowledgement / Rejected for relational field in error" TBD01: "Situational segment/element required for adjudication." EIC: DN Referring Provider | 2420D.NM108 must be present unless 2300 .REF with REF01 = "P4" and REF02 is a valid VA identifier. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.471.2420D.NM108.020 | NM108 |  |  |  |  |  |  |  | 277 | c | CSCC A6: <br> "Acknowledgement/Rejected for Missing Information..." TBD01: "Situational segment/element required for adjudication." EIC: DN Referring Provider | 2420D.NM108 must be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| X223.471.2420D.NM108.030 | NM108 |  |  |  |  |  |  |  | 999 | R | IK403 = 7: "Invalid Code Value" | 2420D.NM108 must be "XX". |  |
| X223.471.2420D.NM109.010 | NM109 | Referring Provider Identifier | AN | 2-80 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | 2420D.NM109 must be present when 2420D.NM108 is present. |  |
| X223.471.2420D.NM109.020 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" FIC: DN Referrina Provider | 2420D.NM109 must be valid according to the NPI algorithm. |  |
| X223.471.2420D.NM109.030 | NM109 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 562: "Entity's National Provider Identifier (NPI)" <br> FIC. DN Referring Provider | The first position of 24200.NM109 must be a "1". |  |
| X223.471.2420D.NM109.050 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2420D.NM109 must not $=$ 2310A.NM109. |  |
| X223.471.2420D.NM109.060 | NM109 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern Match Failure" | 2420D. $\mathrm{NM109}$ must not $=2310 \mathrm{~F}$. NM 109. |  |
| X223.471.2420D.NM110.010 | NM110 | Entity Relationship Code | ID | 2-2 | N/U |  |  |  | 999 | E | IK403 = I10: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.471.2420D.NM111.010 | NM111 | Entity Identifier Code | ID | 2-3 | N/U |  |  |  | 999 | E | IK403 = 110: "Implementation "Not Used" Element Present" | Must not be present. |  |
| X223.471.2420D.NM112.010 | NM112 | Name Last or Organization <br> Name | AN | 1-60 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.474.2420D.REF. 010 | REF | REFERRING PROVIDER SECONDARY IDENTIFICATION |  | 20 | s | 2420D |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | 2420D.REF with REF01 = "1G" may be present when 2420D.NM1 is present and 2420D.NM109 is not present. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.474.2420D.REF. 020 | REF |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement IRejected for Invalid Information..." TBD02: "Payer specific restrictions on the number of repetitions | Only 1 iteration of 2420D.REF with REF01 $=$ " $1 \mathrm{G} "$ is allowed. | Trailblazer Only 01/20: Companion Guide Note needed. |
| X223.474.2420D.REF. 030 | REF |  |  |  |  |  |  |  | 999 | R | IK304 = 19: "Implementation Dependent "Not Used" Segment Present" | 2420D.REF must not be present. | Everyone butTrailblazer. 01/20: Companion Guide Note needed. |
| X223.474.2420D.REF01.010 | REF01 | Reference Identification Qualifier | ID | 2-3 | R |  |  | OB, 1G, G2 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.REF01 must be present. |  |
| X223.474.2420D.REF01.020 | REF01 |  |  |  |  |  |  |  | 999 | R | 11403 = 7: "Invalid Code Value" | 2420D.REF01 must be "1G". |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \hline \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.474.2420D.REF02.010 | REF02 | Referring Provider Secondary Identifier | AN | 1-50 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2420D.REF02 must be present. |  |
| X223.474.2420D.REF02.020 | REF02 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 133: "Entity's UPIN" CSC 560: "Entity's Additional/Secondary Identifier" FIC. DN Referrina Provider | 2420D.REF02 must be in format ANNNNN or AAANNN (where $A$ is an alpha character and $N$ is a numeric digit). |  |
| X223.474.2420D.REF03.010 | REF03 | Description | AN | 1-80 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \text { Used" Element Present" } \\ & \hline \end{aligned}$ | Must not be present. |  |
| X223.474.2420D.REF04.010 | REF04 | REFERENCE IDENTIFIER |  |  | s |  |  |  | 999 | E | IK403 = I10: "Implementation "Not | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| ×223.476.2430.010 |  | LINE ADJUDICATION LOOP |  |  |  | 2430 | 15 |  | 999 | R | IK304 = 4: "Loop Occurs Over Maximum Times" | Only 15 iterations of the 2430 loop are allowed. |  |
| X223.476.2430.SVD. 010 | svd | LINE ADJUDICATION information |  | 1 | s | 2430 |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2430.SVD is allowed. |  |
| X223.476.2430.SVD01.010 | SVD01 | Payer Identifier | AN | 2-80 | R |  |  |  | 999 | R | \|K403 = 1: "Required Data Element Missing" | 2430. SVD01 must be present. |  |
| X223.476.2430.SVD01.020 | SVD01 |  |  |  |  |  |  |  | 999 | R | IK403 = I12: "Implementation Pattern | $\begin{aligned} & \text { 2430.SVD01 must = 2330B.NM109 (for the same } \\ & \text { payer). } \end{aligned}$ |  |
| X223.476.2430.SVD02.010 | SVD02 | Service Line Paid Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430. SVD02 must be present. |  |
| X223.476.2430.SVD02.020 | SVD02 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2430.SVD02 must be numeric. |  |
| X223.476.2430.SVD02.030 | SVD02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2430.SVD02 must be <= 99,999,999.99. |  |
| X223.476.2430.SVD02.040 | SVD02 |  |  |  |  |  |  |  | 277 | T | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { IRejected for Invalid Information..." } \\ \text { Csc 512: "Length invalid for receiver's } \\ \text { apolication svstem" } \end{array}$ | 2430.SVD02 must be <= 99,999,999.99. | 2430.SVD02 must be <= 99,999,999.99. |
| X223.476.2430.SVD02.050 | SVD02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 643: "Service Line Paid Amount" | 2430.SVD02 must be >= 0 . |  |
| X223.476.2430.SVD02.060 | SVD02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement Rejected for Invalid Information..." CSC 643: "Service Line Paid Amount" CSC 697: "Too many decimal positions" | 2430.SVD02 is limited to 0,1 or 2 decimal positions. |  |
| X223.476.2430.SVD03.010 | SVD03 | COMPOSITE MEDICAL PROCEDURE IDENTIFIER |  |  | R |  |  |  |  |  |  |  |  |
| X223.476.2430.SVD03-1.010 | SVD03-1 | Product or Service IDQualifier | ID | 2-2 | R |  |  | ER, HC, HP, IV, WK | 999 | R | 1K403 = 1: "Required Data Element Missing" | 2430.SVD03-1 must be present. |  |
| X223.476.2430.SVD03-1.020 | SVD03-1 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2400.SVD03-1 must be "HP" or "HC". |  |
| X223.476.2430.SVD03-2.010 | SVD03-2 | Procedure Code | AN | 1-48 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2430.SVD03-2 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | $\begin{array}{\|c} \text { Accept/ } \\ \text { Reject } \end{array}$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.476.2430.SVD03-2.020 | SVD03-2 |  |  |  |  |  |  |  | 277 | c | $\begin{array}{\|l\|} \hline \text { CSCC A7: "Acknowledgement } \\ \text { IRejected for Invalid Information..." } \\ \text { CSC 507: "HCCCS" } \\ \text { TTD22: "Line Adjudication Information" } \end{array}$ | When 2430.SVD03-1 = "HC", 2430.SVD03-2 must be a valid HCPCS Code on the date in 2400.DTP03 when DTP01 = "472". | Valid HCPCS reference must be available for this edit. 11/21: Revised edit |
| X223.476.2430.SVD03-2.030 | SVD03-2 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 513: "HIPPS Rate Code for services Rendered" TBD22: "Line Adjudication Information" | When 2430.SVD03-1 = "HP", 2430.SVD03-2 must be a valid HIPPS Skilled Nursing Facility Rate Code on the date in 2400.DTP03 when DTP01 = "472". | Valid HIPPS Code reference must be available for this edit. |
| X223.476.2430.SVD03-3.010 | SVD03-3 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" TBD22: "Line Adjudication Information" | 2430.SVD03-3 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| X223.476.2430.SVD03-4.010 | SVD03-4 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data | 2430.SVD03-4 is present, 2430.SVD03-3 must be present. |  |
| X223.476.2430.SVD03-4.020 | SVD03-4 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" TBD22: "Line Adjudication Information" | 2430.SVD03-4 must be valid procedure modifier. | Valid Procedure Code Modffier reference must be available for this edit. |
| X223.476.2430.SVD03-5.010 | SVD03-5 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = } 2 \text { "Conditional Required Data } \\ & \text { Element Missing" } \\ & \hline \end{aligned}$ | 2430.SVD03-5 is present, 2430.SVD03-4 must be present. |  |
| X223.476.2430.SVD03-5.020 | SVD03-5 |  |  |  |  |  |  |  | 277 | c | CsCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" TBD22: "Line Adjudication Information" | 2430.SVD03-5 must be valid procedure modifier. | Valid Procedure Code Modlfier reference must be available for this edit. |
| X223.476.2430.SVD03-6.010 | SVD03-6 | Procedure Modlfier | AN | 2-2 | s |  |  |  | 999 | R | IK403 = 2 "Conditional Required Data Element Missing" | 2430.SVD03-6 is present, 2430.SVD03-5 must be present. |  |
| X223.476.2430.SVD03-6.020 | SVD03-6 |  |  |  |  |  |  |  | 277 | c | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 453: "Procedure Code Modifier(s) for Service(s) Rendered" TBD22: "Line Adjudication Information" | 2430.SVD03-6 must be valid procedure modifier. | Valid Procedure Code Modifier reference must be available for this edit. |
| X223.476.2430.SVD03-7.010 | SVD03-7 | Procedure Code Description | AN | 1-80 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD03-7 must contain at least one non-space |  |
| X223.476.2430.SVD03-7.020 | SVD03-7 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2430.SVD03-7 must be 1-80 characters. |  |
| x223.476.2430.SVD03-7.030 | SVD03-7 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 306: "Detailed description of service" TBD22: "Line Adjudication Information" |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \\ \hline \end{array}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \\ \hline \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { T99/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.476.2430.SVD03-7.040 | SVD03-7 |  |  |  |  |  |  |  | 999 | E | IK403 = 6: "Invalid Character in Data | 2430.SVD03-7 must be populated with accepted AN |  |
| X223.476.2430.SVD03-7.050 | SVD03-7 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 511: "Invalid character" CSC 306: "Detailed description of service" TBD22: "Line Adjudication Information" |  |  |
| X223.476.2430.SVD03-8.010 | SVD03-8 | Product/Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { 1K403 = 110: "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.476.2430.SVD04.010 | SVD04 | Product or Service ID | AN | 1-48 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I } 10 \text { : "Implementation "Not } \\ & \text { Used" Element Present" } \end{aligned}$ | Must not be present. |  |
| X223.476.2430.SVD05.010 | SVD05 | Paid Service Unit Count | R | 1-15 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430. SVD05 must be present. |  |
| X223.476.2430.SVD05.020 | SVD05 |  |  |  |  |  |  |  | 999 | R | $\begin{aligned} & \text { IK403 = 6: "Invalid Character in Data } \\ & \text { Element" } \end{aligned}$ | 2430.SVD05 must be numeric. |  |
| X223.476.2430.SVD05.030 | SVD05 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 608: "Paid Service Unit Count" TBD22: "Line Adjudication Information" | 2430.SVD05 must be $>=0$. |  |
| X223.476.2430.SVD05.040 | SVD05 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2430.SVD05 must be $1-8$ digits, excluding the |  |
| X223.476.2430.SVD05.050 | SVD05 |  |  |  |  |  |  |  | 999 | R | 1K403 = 5: "Data Element Too Long" | 2430.SVD05 must be an integer (whole number). | Companion Guide Note needed. |
| X223.476.2430.SVD06.010 | SVD06 | Bundled or Unbundled Line <br> Number | No | 1-6 | s |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.SVD06 must be numeric. |  |
| X223.476.2430.SVD06.020 | SVD06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2430.SVD06 must be a integer (no decimals). | Companion Guide Note needed. |
| $\begin{array}{\|l} \hline \begin{array}{l} \text { X223.476.2430.SVD06.030 } \\ \text { edit deactivated } \end{array} \\ \hline \end{array}$ |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.476.2430.SVD06.040 | SVD06 |  |  |  |  |  |  |  | 999 | R | IK403 = 5: "Data Element Too Long" | 2430.SVD06 must 1-6 digits. |  |
| X223.476.2430.SVD06.050 | SVD06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." Csc 12 "Length invalid for receiver's application system" |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.480.2430.CAS. 010 | CAS | LINE ADJUSTMENT |  | 5 | s | 2430 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If $2430 . S V D$ is present, 2430.CAS may be present. |  |
| X223.480.2430.CAS. 020 | CAS |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only 5 iterations of 2320.CAS are allowed. |  |
| X223.480.2430.CAS01.010 | CAS01 | Claim Adjustment Group Code | ID | 1-2 | R |  |  | CO, CR, OA, PI, PR | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.CAS01 must be present. |  |
| X223.480.2430.CAS01.020 | CAS01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2430.CAS01 must be valid values. |  |
| X223.480.2430.CAS01.030 | CASO1 |  |  |  |  |  |  |  | 277 | C | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 696: "Claim Adjustment Group Code" FIC: GB Other Insured | If 2430.CAS01 = "CR" then 2430B.DTP with DTP01 $=$ "573" must be prior to 01/01/2012. |  |
| X223.480.2430.CAS02.010 | CAS02 | Adjustment Reason Code | ID | 1-5 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element | 2430.CAS02 must be present. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. Max. | $\begin{array}{\|c} \text { Usage } \\ \text { Req. } \end{array}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA1/ } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.480.2430.CAS02.020 | CAS02 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date | 2430.CAS02 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = " 573 ". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS03.010 | CAS03 | Adjustment Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.CAS03 must be present. |  |
| X223.480.2430.CAS03.020 | CAS03 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS03 must be numeric. |  |
| X223.480.2430.CAS03.030 | CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FIC. GBOther Insured | 2430. CASO3 must not $=0$. |  |
| X223.480.2430.CAS03.040 | CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." <br> CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GR Other Insured | 2430.CAS03 is limited to 0,1 or 2 decimal positions. |  |
| X223.480.2430.CAS03.050 | CAS03 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" <br> IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS03 must be }>=-99,999,999.99 \text { and } \\ & <=99,999,999.99 \text {. } \end{aligned}$ |  |
| X223.480.2430.CAS03.060 | CAS03 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" FIC. GB Other Insured |  |  |
| X223.480.2430.CAS04.010 | CAS04 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.CAS04 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed |
| X223.480.2430.CAS04.020 | CAS04 |  |  |  |  |  |  |  | 277 | T | ```CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" CSC 520: "Adjustment Quantity" FIC. GR Other Insured``` | 2430.CAS04 must not $=0$. |  |
| X223.480.2430.CAS05.010 | CAS05 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS02 is present, 2430.CAS05 may be |  |
| X223.480.2430.CAS05.020 | CAS05 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> FIC. GB Other Insured | 2430.CAS05 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS06.010 | CAS06 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS05 is present, 2430.CAS06 must be present. |  |
| X223.480.2430.CAS06.020 | CAS06 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS06 must be numeric. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.480.2430.CAS06.030 | CAS06 |  |  |  |  |  |  |  | 277 | T |  | 2430.CAS06 must not $=0$. |  |
| X223.480.2430.CAS06.040 | CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GR مther Insured | 2320.CAS06 is limited to 0, 1 or 2 decimal positions. |  |
| X223.480.2430.CAS06.050 | CAS06 |  |  |  |  |  |  |  | 999 | E | 1K403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2430.CAS06 must be >=-99,999,999.99. and <= 99,999,999.99. |  |
| X223.480.2430.CAS06.060 | CAS06 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |  |
| X223.480.2430.CAS07.010 | CAS07 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS05 is present, 2430.CAS07 may be present. |  |
| X223.480.2430.CAS07.020 | CAS07 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2320.CAS07 must be 1-15 digits. |  |
| X223.480.2430.CAS07.030 | CAS07 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FIC. GR مther Insured | 2430.CAS07 must not $=0$. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.480.2430.CAS08.010 | CAS08 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430. CAS05 is present, 2430. CAS08 may be present. |  |
| X223.480.2430.CAS08.020 | CAS08 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date FIC. GB Other Insured | 2430.CAS08 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS09.010 | CAS09 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS08 is present, 2430.CAS09 must be present. |  |
| $\times 223.480 .2430 . \mathrm{CAS09.020}$ | CAS09 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2430.CAS09 must be numeric. |  |
| X223.480.2430.CAS09.030 | CAS09 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { 1Rejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero" } \\ & \text { CSC 519: "Adjustment Amount" } \\ & \text { FIC. GB Gther Insured } \end{aligned}$ | 2430.CAS09 must not $=0$. |  |
| X223.480.2430.CAS09.040 | CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2430.CAS09 is limited to 0, 1 or 2 decimal positions. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\underset{\text { Repeat }}{\text { Loop }}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.480.2430.CAS09.050 | CAS09 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS09 must be }>=-99,999,999.99 \text {. and } \\ & <=99,999,999.99 \text {. } \end{aligned}$ |  |
| X223.480.2430.CAS09.060 | CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |  |
| X223.480.2430.CAS09.070 | CAS09 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2430.CAS09 is limited to 0,1 or 2 decimal positions. |  |
| X223.480.2430.CAS10.010 | CAS10 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS08 is present, 2430.CAS10 may be present. |  |
| X223.480.2430.CAS10.020 | CAS10 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.CAS10 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.480.2430.CAS10.030 | CAS10 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FIC. GB مther Insured | 2430. CAS10 must not $=0$. |  |
| X223.480.2430.CAS011.010 | CAS011 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS08 is present, 2430. CAS11 may be present. |  |
| X223.480.2430.CAS11.010 | CAS11 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date FIC. GR Other Insured | 2430.CAS11 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS12.010 | CAS12 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | $\begin{aligned} & \text { If 2430.CAS1 is present, 2430.CAS12 must be } \\ & \text { present. } \end{aligned}$ |  |
| X223.480.2430.CAS12.020 | CAS12 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2430.CAS12 must be numeric. |  |
| X223.480.2430.CAS12.030 | CAS12 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { IRejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero" } \\ & \text { CSC 519: "Adjustment Amount" } \\ & \text { FIC. GB Qther Insured } \end{aligned}$ | $2430 . C A S 12$ must not $=0$. |  |
| X223.480.2430.CAS12.040 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information... CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2430.CAS12 is limited to 0,1 or 2 decimal positions. |  |
| X223.480.2430.CAS12.050 | CAS12 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | 2430.CAS12 must be >= $-99,999,999.99$. and <= 99,999,999.99. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | Usage | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \\ \hline \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.480.2430.CAS12.060 | CAS12 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "ength invalid for receiver's application system" CSC 519: "diustment Amount" FIC. ©R Ather Insured |  |  |
| X223.480.2430.CAS13.010 | CAS13 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS11 is present, 2430.CAS13 may be present. |  |
| X223.480.2430.CAS13.020 | CAS13 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.CAS13 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.480.2430.CAS13.030 | CAS13 |  |  |  |  |  |  |  | 277 | T | $\begin{aligned} & \text { CSCC A7: "Acknowledgement } \\ & \text { /Rejected for Invalid Information..." } \\ & \text { CSC 694: "Amount must not be equal } \\ & \text { to zero": "Adjustment Quantity" } \\ & \text { CSC 520: "Adjus. } \\ & \text { FEC. GB OHer Insured } \\ & \hline \end{aligned}$ | 2430.CAS13 must not $=0$. |  |
| X223.480.2430.CAS14.010 | CAS14 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | IK403 = 10: "Exclusion Condition Violated" | If 2430.CAS11 is present, 2430.CAS14 may be present. |  |
| X223.480.2430.CAS14.020 | CAS14 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date FIC. GB Other Insured | 2430.CAS14 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS15.010 | CAS15 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | $\begin{aligned} & \text { IK } 403=2 \text { : "Conditional Required Data } \\ & \text { Element Missing" } \end{aligned}$ | If 2430.CAS14 is present, 2430.CAS15 must be present. |  |
| X223.480.2430.CAS15.020 | CAS15 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data | 2430.CAS15 must be numeric. |  |
| X223.480.2430.CAS15.030 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement IRejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" CSC 59: "Adjustment Amount" FIC. GBOther Insured | $2430 . C A S 15$ must not $=0$. |  |
| X223.480.2430.CAS15.040 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC AT: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" "Adjustment Amount" CSC 519: FIC. GROHher Insured | 2430.CAS15 is limited to 0, 1 or 2 decimal positions. |  |
| X223.480.2430.CAS15.050 | CAS15 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS15 must be }>=-99,999,999.99 \text {. and } \\ & <=99,999,999.99 . \end{aligned}$ |  |
| X223.480.2430.CAS15.060 | CAS15 |  |  |  |  |  |  |  | 277 | T | CSCC AT: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "ength invalid for receiver's application system" CSC 519: "diustment Amount" FIC. GB Ather Insured |  |  |
| X223.480.2430.CAS16.010 | CAS16 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | IK403=10: "Exclusion Condition | If 2430.CAS14 is present, 2430.CAS16 may be present. |  |
| X223.480.2430.CAS16.020 | CAS16 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.CAS16 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |


| 8371 Edit Reference | Segment or | Description | ID | Min. | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \\ & \hline \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ 999 / \\ 277 C A \end{gathered}$ | $\left\lvert\, \begin{gathered} \text { Accept/ } \\ \text { Reject } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.480.2430.CAS16.030 | CAS16 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" FIC. GR Other Insured | 2430.CAS16 must not $=0$. |  |
| X223.480.2430.CAS17.010 | CAS17 | Adjustment Reason Code | ID | 1-5 | s |  |  |  | 999 | R | \|K403 = 10: "Exclusion Condition Violated" | $\begin{aligned} & \text { If 2430.CAS14 is present, } 2430 . \text { CAS17 may be } \\ & \text { present. } \end{aligned}$ |  |
| X223.480.2430.CAS17.020 | CAS17 |  |  |  |  |  |  |  | 277 | c | CSCC A8 Acknowledgement / Rejected for relational field in error. CSC 521: Adjustment Reason Code CSC 516: Adjudication or Payment Date <br> FIC. GB Other Insured | 2430.CAS17 must be a valid Claim Adjustment Reason Code on the date in 2430.DTP03 when DTP01 = "573". | Valid Claim Adjustment Reason Code reference must be available for this edit. |
| X223.480.2430.CAS18.010 | CAS18 | Adjustment Amount | R | 1-18 | s |  |  |  | 999 | R | IK403 = 2: "Conditional Required Data Element Missing" | If 2430.CAS17 is present, 2430.CAS18 must be present. |  |
| $\times 223.480 .2430 . \mathrm{CAS18.020}$ | CAS18 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430.CAS18 must be numeric. |  |
| X223.480.2430.CAS18.030 | CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 519: "Adjustment Amount" FlC. GB Other Insured | 2430.CAS18 must not $=0$. |  |
| X223.480.2430.CAS18.040 | CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 697: "Too many decimal positions" <br> CSC 519: "Adjustment Amount" FIC. GB Other Insured | 2430.CAS18 is limited to 0,1 or 2 decimal positions. |  |
| X223.480.2430.CAS18.050 | CAS18 |  |  |  |  |  |  |  | 999 | E | IK403 = 4: "Data Element Too Short" IK403 = 5: "Data Element Too Long" | $\begin{aligned} & \text { 2430.CAS15 must be }>=-99,999,999.99 \text {. and } \\ & <=99,999,999.99 . \end{aligned}$ |  |
| X223.480.2430.CAS18.060 | CAS18 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 519: "Adjustment Amount" FIC. GB Other Insured |  |  |
| X223.480.2430.CAS19.010 | CAS19 | Adjustment Quantity | R | 1-15 | s |  |  |  | 999 | R | $\qquad$ | If 2430.CAS17 is present, 2430.CAS19 may be present. |  |
| X223.480.2430.CAS19.020 | CAS19 |  |  |  |  |  |  |  | 999 | E | IK403 = 5: "Data Element Too Long" | 2430.CAS19 must be 1-15 digits. | 01/08: Not brought into Core System, so no Medicare size limit is needed. |
| X223.480.2430.CAS19.030 | CAS19 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 694: "Amount must not be equal to zero" <br> CSC 520: "Adjustment Quantity" Fle. GB Other Insured | 2430.CAS19 must not $=0$. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.486.2430.DTP. 010 | DTP | LINE CHECK OR REMITTANCE DATE |  | 1 | R | 2430 |  |  | 999 | R | IK304 = 16: "Implementation Dependent Segment Missing" | If 2430.SVD is present, 2430.DTP must be present. |  |
| X223.486.2430.DTP. 020 | DTP |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2430.DTP is allowed. |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \\ \hline \end{gathered}$ | $\underset{\text { Elegment or }}{\text { Element }}$ | Description | ID | $\begin{aligned} & \text { Min. } \\ & \text { Max. } \end{aligned}$ | $\begin{gathered} \text { Usage } \\ \text { Req. } \end{gathered}$ | Loop | $\begin{gathered} \text { Loop } \\ \text { Repeat } \end{gathered}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{array}{\|c} \text { TA1/ } \\ \text { 999/ } \\ 277 \mathrm{CA} \end{array}$ | Accept/ Reject | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| ×223.486.2430.DTP01.010 | DTP01 | Date /TimeQualifier | ID | 3/3 | R |  |  | 573 | 999 | R | IK403 = 1: "Required Data Element Missinq" | 2430.DTP01 must be present. |  |
| X223.486.2430.DTP01.020 | DTP01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2430.DTP01 must be "573". |  |
| X223.486.2430.DTP02.010 | DTP02 | Date /Time FormatQualifier | ID | 2/3 | R |  |  | D8 | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.DTP02 must be present. |  |
| X223.486.2430.DTP02.020 | DTP02 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2430.DTP02 must be "D8". |  |
| X223.486.2430.DTP03.010 | DTP03 | Adjudication or Payment Date | AN | 1/35 | R |  |  | CCYYMMDD | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.DTP03 must be present. |  |
| х223.486.2430.DTP03.020 | DTP03 |  |  |  |  |  |  |  | 999 | R | IK403 = 8: "Invalid Date" | lit format. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.487.2430.AMT. 010 | AMT | REMAINING PATIENT LIABILITY |  | 1 | s | 2430 |  |  | 999 | R | IK304 = 19: "Implementation Dependent 'not used' Segment Present" | If 2430.SVD is present, 2430.AMT may be present. | pass-through, syntax only |
| X223.487.2430.AMT. 020 | AMT |  |  |  |  |  |  |  | 999 | R | IK304 = 5: "Segment Exceeds Maximum Use" | Only one iteration of 2430.AMT is allowed |  |
| х223.487.2430.AMT01.010 | AMT01 | AmountQualifier Code | ID | 1-3 | R |  |  | EAF | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.AMT01 must be present. |  |
| X223.487.2430.AMT01.020 | AMT01 |  |  |  |  |  |  |  | 999 | R | 1K403 = 7: "Invalid Code Value" | 2430.AMT01 must be "EAF". |  |
| X223.487.2430.AMT02.005 | AMT02 | Non-Covered Amount | R | 1-18 | R |  |  |  | 999 | R | IK403 = 1: "Required Data Element Missing" | 2430.AMT02 must be present. |  |
| X223.487.2430.AMT02.010 | AMT02 |  |  |  |  |  |  |  | 999 | R | IK403 = 6: "Invalid Character in Data Element" | 2430 . AMT02 must be numeric. |  |
| X223.487.2430.AMT02.015 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 693: "Amount must be greater than or equal to zero" CSC 596: "Non-covered Charge Amount" | 2430.AMT02 must be $>=0$. |  |
| х223.487.2430.AMT02.020 | AMT02 |  |  |  |  |  |  |  | 999 | E | 1K403 = 5: "Data Element Too Long" | 2430.AMTO2 must be <= 99,999,999.99. |  |
| X223.487.2430.AMT02.025 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 596: "Non-covered Charge Amount" |  |  |
| X223.487.2430.AMT02.030 | AMT02 |  |  |  |  |  |  |  | 277 | T | CSCC A7: "Acknowledgement /Rejected for Invalid Information..." CSC 512: "Length invalid for receiver's application system" CSC 596: "Non-covered Charge Amount" | 2430.AMT02 is limited to 0,1 or 2 decimal positions. |  |
| х223.487.2430.АМт03.010 | AмT03 | Credit/Debit Flag Code | ID | 1-1 | N/U |  |  |  | 999 | E | $\begin{aligned} & \text { IK403 = I10: "Implementation "Not } \\ & \hline \end{aligned}$ | Must not be present. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.488..SE.010 | SE | TRANSACTION SET |  | 1 | R |  |  |  | 999 | R | IK502: 2 "Transaction Set Trailer Missing". | SE must be present. |  |
| X223.488.SE. 020 deactivated | SE |  |  |  |  |  |  |  |  |  |  |  |  |


| $\begin{gathered} 8371 \\ \text { Edit Reference } \end{gathered}$ | Segment or Element | Description | ID | Min. | Usage | Loop | $\begin{aligned} & \text { Loop } \\ & \text { Repeat } \end{aligned}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\begin{gathered} \text { TA11 } \\ \text { 999/ } \\ \text { 277CA } \end{gathered}$ | Accept/ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| X223.488..SE01.010 | SE01 | Ttansaction Segment Count | N0 | 1/10 | R |  |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be present. |  |
| X223.488.SE01.020 | SE01 |  |  |  |  |  |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be numeric. |  |
| X223.488..SE01.030 | SE01 |  |  |  |  |  |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must equal the transaction segment count. |  |
| X223.488.SE01.040 | SE01 |  |  |  |  |  |  |  | 999 | R | IK502: 4 "Number of Included Segments Does Not Match Actual Count". | SE01 must be > 0 . |  |
| X223.488..SE02.010 | SE02 | Transaction Set Control Number | AN | 4/9 | R |  |  |  | 999 | R | IK502: 3 "Transaction Set Control Number in Header and Trailer Do Not Match". | SE02 must be present. |  |
| X223.488.SE02.020 | SE02 |  |  |  |  |  |  |  | 999 | R | IK502: 3 "Transaction Set Control Number in Header and Trailer Do Not Match". | SE02 must = ST02. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.C9..GE. 010 | GE | Functional Group Trailer |  | 1 | R | - |  |  | 999 | R | AK905: 3 "Functional Group Trailer Missing" | GE must be present. |  |
| $\begin{array}{\|l} \hline \begin{array}{l} \text { X223.C9..GE. } 020 \\ \text { deactivated } \end{array} \end{array}$ | GE |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.C9..GE01.010 | GE01 | Number of Transaction Sets Included | N0 | 1-6 | R |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be present. |  |
| X223.C9..GE01.020 | GE01 |  |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be numeric. |  |
| X223.C9..GE01.030 | GE01 |  |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must equal the number of transaction sets included in the functional group. |  |
| X223.C9..GE01.040 | GE01 |  |  |  |  |  |  |  | 999 | R | AK905: 5 "Number of Included Transaction Sets Does Not Match Actual Count". | GE01 must be > 0 . |  |
| X223.C9..GE02.010 | GE02 | Group Control Number | AN | 4-9 | R |  |  |  | 999 | R | AK905: 4 "Group Control Number in the Functional Group Header and Trailer Do Not Agree" | GE02 must be present. |  |
| X223.C9..GE02.020 | GE02 |  |  |  |  |  |  |  | 999 | R | AK905: 4 "Group Control Number in the Functional Group Header and Trailer Do Not Aaree" | GE02 must = GS06. |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| X223.C10.IIEA. 010 | IEA | Interchange Control Header |  | 1 | R |  |  |  | TA1 | R | TA105: "023 Improper (Premature) End-of-File (Transmission)" | IEA must be present. |  |
| X223.C10.IEA. 020 | IEA |  |  |  |  |  |  |  | TA1 | R | TA105: 024 "Invalid Interchange Content". | Only one iteration of IEA is allowed. | This error means there can't be more than one IEA segment in this set, not that there cant be more than 1in a ohvsical file. |
| X223.C10..IEA01.010 | IEA01 | Number of Included Functional Groups | N0 | 1-6 | R |  |  |  | TA1 | R | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must be present. |  |
| X223.C10..IEA01.020 | IEA01 |  |  |  |  |  |  |  | TA1 | R | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must be numeric. |  |
| X223.C10..IEA01.030 | IEA01 |  |  |  |  |  |  |  | TA1 | R | TA105: 021 "Invalid Number of Included Groups Value". | IEA01 must equal the number of functional groups included in the interchange. |  |

## 837 - Institutional Edits

| 8371 Edit Reference | Segment or Element | Description | ID | $\begin{aligned} & \operatorname{min.} . \\ & \text { Max. } \end{aligned}$ | $\begin{array}{c}\text { Usage } \\ \text { Req. }\end{array}$ | Loop | $\xrightarrow{\substack{\text { Loop } \\ \text { Repeat }}}$ | $\begin{gathered} 5010 \\ \text { Values } \end{gathered}$ | $\left\|\begin{array}{c} \text { TAA1 } \\ \text { angl } \\ 277 C A \end{array}\right\|$ | $\left\lvert\, \begin{gathered} \text { Accept } \\ \text { Reject } \end{gathered}\right.$ | Disposition / Error Code | Proposed 5010 Edits | Misc. Notes |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| $\times 223 . C 10.1$ IEA001.040 | IEA01 |  |  |  |  |  |  |  | $\mathrm{TA}^{\text {a }}$ | R | TA105: 021 "Invalid Number of Included Groups Value' | IEA01 must be $>0$. |  |
| x223.C10..IEA02.010 | IEA02 | Interchange Control Number | AN | 4.9 | R |  |  |  | TA1 | R | TA105: 001 "The Interchange Control Number in the Header and Trailer Do Not Match". | IEA02 must be present. |  |
| x223.C10. IEA02.020 | IEA02 |  |  |  |  |  |  |  | TA1 | R | TA105: 001 "The Interchange Control Number in the Header and Trailer Do Not Match". | IEA02 must = ISA13 |  |


| Location | Change | Date |
| :---: | :---: | :---: |
| All N/U Elements | Added a new row for a 277 instruction for each N/U element in the spreadsheet (946 rows). | 07/19/09 |
| ISA05 | Added explicit values. | 06/09/09 |
| ISA07 | Added explicit values. | 06/09/09 |
| GS | Changed the error code to an AK905 error code. | 05/03/09 |
| GS | Removed the miscellaneous note. | 06/09/09 |
| GS01 | Changed the error codes to AK905 error codes. | 05/03/09 |
| GS01 | Added explicit value and added 5010 value in column I. | 06/09/09 |
| GS02 | Changed the error codes to AK905 error codes. | 05/03/09 |
| GS02 | Added a new row for a 277 instruction. | 07/19/09 |
| GS02 | Removed 277 edit since this is before loop 2000 | 08/11/09 |
| GS03 | Changed the error codes to AK905 error codes. | 05/03/09 |
| GS03 | Added a new row for a 277 instruction. | 07/19/09 |
| GS03 | Removed 277 edit since this is before loop 2000 | 08/11/09 |
| GS04 | Corrected typo. | 04/21/09 |
| GS04 | Removed the IK403 error code, no replacement defined. | 05/03/09 |
| GS04 | Added a new row for a 277 instruction. | 07/19/09 |
| GS04 | Removed 277 edit since this is before loop 2000 | 08/11/09 |
| GS05 | Removed the IK403 error code, no replacement defined. | 05/03/09 |
| GS06 | Added triad separators. | 04/22/09 |
| GS06 | Changed the error codes to AK905 error codes. | 05/03/09 |
| GS07 | Removed the IK403 error code, no replacement defined. | 05/03/09 |
| GS08 | Changed the error codes to AK905 error codes. | 05/03/09 |
| ST | Corrected the typo. | 04/21/09 |
| ST | Changed the error codes to AK502 error codes. | 05/03/09 |
| ST | Removed the miscellaneous note. | 06/09/09 |
| ST01 | Changed the error codes to AK502 error codes. | 05/03/09 |
| ST02 | Changed the error codes to AK502 error codes. | 05/03/09 |
| ST02 | Added a new row for a 277 instruction. | 07/19/09 |
| ST02 | Removed 277 edit since this is before loop 2000 | 08/11/09 |
| ST03 | Corrected the typo. | 04/21/09 |
| ST03 | Changed the error codes to AK502 error codes. | 05/03/09 |
| BHT | Added "999" in column J. | 04/21/09 |
| BHT01 | Added explicit value. | 04/23/09 |
| BHT03 | Added new rows for 277 instructions. | 07/19/09 |
| BHT03 | Removed 277 edits since this is before loop 2000 | 08/11/09 |
| BHT04 | Added CSCC. | 07/21/09 |
| BHT04 | Removed 277 edit since this is before loop 2000 | 08/11/09 |
| BHT06 | Added CSCC. | 07/21/09 |
| BHT06 | Changed from 277 edit to 999 for invalid code value | 08/11/09 |
| 1000A.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 1000A.NM104 | Deleted 'If 1000A.NM102 is "1", 1000A.NM104 must be present' edit. | 07/16/09 |
| 1000A.NM104 | Added new rows for 277 instructions. | 07/19/09 |
| 1000A.NM105 | Added new rows for 277 instructions. | 07/19/09 |

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| 1000A.NM108 | Added explicit value. | 04/23/09 |
| :---: | :---: | :---: |
| 1000A.NM109 | Added new row for a 277 instructions, added CSCC to existing 277. | 07/19/09 |
| 1000A.PER01 | Added explicit value. | 04/23/09 |
| 1000A.PER02 | Changed IK403 edit from 7 to I12 | 07/16/09 |
| 1000A.PER02 | Added new rows for 277 instructions. | 07/19/09 |
| 1000A.PER04 | Added a new row for 277 instructions. | 07/19/09 |
| 1000A.PER06 | Added a new row for 277 instructions. | 07/19/09 |
| 1000B.NM1 | Added "999" in column J. | 04/21/09 |
| 1000B.NM103 | Removed 277 edits since 277 does not contain an STC for the information source | 08/11/09 |
| 1000B.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 1000B.NM104 | Removed 277 edits since 277 does not contain an STC for the information source | 08/11/09 |
| 1000B.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 1000B.NM105 | Removed 277 edits since 277 does not contain an STC for the information source | 08/11/09 |
| 1000B.NM106 | Removed 277 edits since 277 does not contain an STC for the information source | 08/11/09 |
| 1000B.NM107 | Removed 277 edits since 277 does not contain an STC for the information source | 08/11/09 |
| 1000B.NM108 | Added explicit value. | 04/21/09 |
| 1000B.NM109 | Added CSCC to existing 277. | 04/21/09 |
| 1000B.NM109 | Removed 277 edits since 277 does not contain an STC for the information source | 08/11/09 |
| 1000B.NM110 | Removed 277 edits since 277 does not contain an STC for the information source | 08/11/09 |
| 1000B.NM111 | Removed 277 edits since 277 does not contain an STC for the information source | 08/11/09 |
| 1000B.NM112 | Removed 277 edits since 277 does not contain an STC for the information source | 08/11/09 |
| 2000A.HL | Removed the miscellaneous note. | 06/09/09 |
| 2000A.HLO3 | Added explicit value. | 04/23/09 |
| 2000A.HL04 | Added explicit value. | 04/23/09 |
| 2000A.PRV01 | Added explicit value. | 04/23/09 |
| 2000A.PRV02 | Added explicit value. | 04/23/09 |
| 2000A.PRV03 | Added CSCC. | 07/21/09 |
| 2000A.CUR | Changed to the standard wording "must not be present." | 04/26/09 |
| 2000A.CUR | Added CSCC. | 07/21/09 |
| 2010AA.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2010AA.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2010AA.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2010AA.NM108 | Changed all to 277/situational data required. | 04/27/09 |
| 2010AA.NM108 | Changed " $=31$ " to "is a valid VA identifier". | 05/04/09 |
| 2010AA.NM109 | Corrected location typo. | 04/27/09 |
| 2010AA.NM109 | Added CSCCs. | 07/21/09 |
| 2010AA.N301 | Corrected the location reference loop name. | 06/09/09 |
| 2010AA.N302 | Corrected the location reference loop and element names in edits and notes. | 06/09/09 |
| 2010AA.N302 | Deleted 'If 2010AA.N302 is present, 2010AA.N301 must be present' edit. | 07/16/09 |
| 2010AA.N401 | Added new row for a 277 instruction. | 07/19/09 |
| 2010AA.N407 | Added the element info in column B, C, D and E. | 06/09/09 |
| 2010AA.N407 | Added 2nd edit row. | 06/09/09 |
| 2010AA.N301 | Added a new row for 277 instructions. | 07/19/09 |
| 2010AA.N301 | Added CSCC. | 07/21/09 |
| 2010AA.N302 | Added a new row for 277 instructions. | 07/19/09 |
| 2010AA.N302 | Added CSCC. | 07/21/09 |
| 2010AA.N402 | Added CSCC. | 07/21/09 |
| 2010AA.N403 | Added CSCC. | 07/21/09 |
| 2010AA.N404 | Added CSCC. | 07/21/09 |

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| 2010AA.N407 | Added CSCC. | 07/21/09 |
| :---: | :---: | :---: |
| 2010AA.REF (EI) | Added explicit value. | 04/23/09 |
| 2010AA.REF (EI) | Copied new edit from the Professional. | 04/23/09 |
| 2010AA.REF02 (EI) | Added CSCCs. | 07/21/09 |
| 2010AA.PER | Changed error code to 19. | 05/03/09 |
| 2010AA.PER01 | Added explicit value. | 04/23/09 |
| 2010AA.PER02 | Added a new row for 277 instructions. | 07/19/09 |
| 2010AA.PER04 | Added a new row for 277 instructions. | 07/19/09 |
| 2010AA.PER06 | Added a new row for 277 instructions. | 07/19/09 |
| 2010AA.PER08 | Added a new row for 277 instructions. | 07/19/09 |
| 2010AB.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2010AB.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2010AB.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2010AB.N301 | Added a new row for 277 instructions. | 07/19/09 |
| 2010AB.N302 | Added a new row for 277 instructions. | 07/19/09 |
| 2010AB.N302 | Deleted 'If 2010AB.N302 is present, 2010AB.N301 must be present' edit. | 07/16/09 |
| 2010AB.N401 | Added new row for a 277 instruction. | 07/19/09 |
| 2010AB.N402 | Added CSCCs. | 07/21/09 |
| 2010AB.N403 | Added CSCCs. | 07/21/09 |
| 2010AB.N404 | Added CSCCs. | 07/21/09 |
| 2010AC Loop | Added CSCCs. | 07/21/09 |
| 2000B. HL01 | Changed the edit. | 04/21/09 |
| 2000B SBR01 | Changed the edit, corrected location information and copied a new edit from the Professional. | 04/21/09 |
| 2000B SBR01 | Added CSCCs. | 07/21/09 |
| 2000B SBR03 | Added new row for a 277 instruction. | 07/19/09 |
| 2000B SBR04 | Added new row for a 277 instruction. | 07/19/09 |
| 2000B SBR09 | Added CSCC. | 07/21/09 |
| 2010BA.NM102 | Added CSCC. | 07/21/09 |
| 2010BA.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2010BA.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2010BA.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2010BA.NM104 | Added CSCC. | 07/21/09 |
| 2010BA.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2010BA.NM108 | Changed to match the Professional edit. | 04/21/09 |
| 2010BA.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 2010BA.NM108 | Added CSCC. | 07/21/09 |
| 2010BA.NM109 | Changed to 277/situational data required. | 04/27/09 |
| 2010BA.N301 | Added a new row for 277 instructions. | 07/19/09 |
| 2010BA.N302 | Added a new row for 277 instructions. | 07/19/09 |
| 2010BA.N401 | Added new row for a 277 instruction. | 07/19/09 |
| 2010BA.N402 | Added CSCCs. | 07/21/09 |
| 2010BA.N403 | Added CSCCs. | 07/21/09 |
| 2010BA.N404 | Added CSCCs. | 07/21/09 |
| 2010BA.DMG01 | Added explicit value. | 04/23/09 |
| 2010BA.DMG02 | Added CSCC. | 07/21/09 |
| 2010BA.REF (SY) | Changed to match the Professional edit. | 04/21/09 |
| 2010BA.REF (SY) | Added CSCCs. | 07/21/09 |
| 2010BA.REF01 (SY) | Added explicit value. | 04/23/09 |
| 2010BA.REF02 (Y4) | Added a new row for 277 instructions. | 07/19/09 |

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| 2010BB.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| :---: | :---: | :---: |
| 2010BB.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2010BB.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2010BB.NM109 | Added new row for a 277 instruction. | 07/19/09 |
| 2010BB.N301 | Added a new row for 277 instructions. | 07/19/09 |
| 2010BB.N302 | Added a new row for 277 instructions. | 07/19/09 |
| 2010BB.N401 | Added new row for a 277 instruction. | 07/19/09 |
| 2010BB.N402 | Added CSCCs. | 07/21/09 |
| 2010BB.N403 | Added CSCCs. | 07/21/09 |
| 2010BB.N404 | Added CSCCs. | 07/21/09 |
| 2010BB.REF (2U/EI/FY/NF) | Changed to match the Professional edit. | 04/26/09 |
| 2010BB.REF (2U/EI/FY/NF) | Added CSCCs. | 07/21/09 |
| 2010BB.REF (G2) | Consolidated the rows. | 04/27/09 |
| 2010BB.REF02 (G2) | Added a new row for 277 instructions. | 07/19/09 |
| 2000C Loop | Added CSCCs. | 07/21/09 |
| 2000C. HL | Changed to match the Professional edit. | 04/26/09 |
| 2000C.PAT | Changed to match the Professional edit. | 04/26/09 |
| 2010CA.NM1 | Changed to match the Professional edit. | 04/26/09 |
| 2010CA.N3 | Changed to match the Professional edit. | 04/26/09 |
| 2010CA.N4 | Changed to match the Professional edit. | 04/26/09 |
| 2010CA.DMG | Changed to match the Professional edit. | 04/26/09 |
| 2010CA.REF | Changed to match the Professional edit. | 04/26/09 |
| 2300.CLM01 | Added a new row for 277 instructions. | 07/19/09 |
| 2300.CLM02 | Added triad separators. | 04/22/09 |
| 2300.CLM02 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2300.CLM02 | Added CSCCs. | 07/21/09 |
| 2300.CLM05-1 | Added CSCCs. | 07/21/09 |
| 2300.CLM05-2 | Added explicit value. | 04/23/09 |
| 2300.CLM05-3 | Added CSCCs. | 07/21/09 |
| 2300.DTP02 (096) | Added explicit values. | 04/23/09 |
| 2300.DTP01 (434) | Added explicit values. | 04/23/09 |
| 2300.DTP01 (435) | Added explicit values. | 04/23/09 |
| 2300.DTP03 (435) | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2300.DTP03 (435) | Added CSCCs. | 07/21/09 |
| 2300.DTP01 (050) | Added explicit values. | 04/23/09 |
| 2300.CL101 | Added CSCCs. | 07/21/09 |
| 2300.CL102 | Added CSCCs. | 07/21/09 |
| 2300.CL103 | Added CSCCs. | 07/21/09 |
| 2300.PWK05 | Switched the edit to "If 05 is present, 02 must be $=$....." and copied the error code from the Professional. | 04/21/09 |
| 2300.PWK05 | Added a new row with an explicit valid value. | 04/23/09 |
| 2300.PWK06 | Switched the edit to "If 06 is present, 02 must be $=\ldots . .$. ", copied the error code from the Professional, and corrected the location. | 04/21/09 |
| 2300.PWK06 | Added new row for a 277 instruction. | 07/19/09 |
| 2300.CN1 | Removed the CN1 detail edits and copied the segment level info from the Professional. | 04/21/09 |
| 2300.AMT01 (F3) | Added explicit value. | 04/23/09 |
| 2300.AMT02 (F3) | Added explicit value. | 04/22/09 |
| 2300.AMT02 (F3) | Added CSCCs. | 07/21/09 |
| 2300.AMT03 (F3) | Copied the error code from the Professional, added triad separators. | 04/22/09 |


| 2300.AMT03 (F3) | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| :---: | :---: | :---: |
| 2300.REF01 (4N) | Added explicit value. | 04/23/09 |
| 2300.REF01 (9F) | Added explicit value. | 04/23/09 |
| 2300.REF02 (9F) | Added new row for a 277 instruction. | 07/19/09 |
| 2300.REF01 (G1) | Added explicit value. | 04/23/09 |
| 2300.REF02 (G1) | Added new row for a 277 instruction. | 07/19/09 |
| 2300.REF01 (9A) | Added explicit value. | 04/23/09 |
| 2300.REF02 (9A) | Added new row for a 277 instruction. | 07/19/09 |
| 2300.REF01 (9C) | Added explicit value. | 04/23/09 |
| 2300.REF02 (9C) | Added new row for a 277 instruction. | 07/19/09 |
| 2300.REF01 (LX) | Added explicit value. | 04/23/09 |
| 2300.REF02 (LX) | Added new row for a 277 instruction. | 07/19/09 |
| 2300.REF02 (LX) | Added CSCCs. | 07/21/09 |
| 2300.REF01 (D9) | Added explicit value. | 04/23/09 |
| 2300.REF02 (D9) | Added new row for a 277 instruction. | 07/19/09 |
| 2300.REF02 (D9) | Added CSCCs. | 07/21/09 |
| 2300.REF01 (LU) | Added explicit value. | 04/23/09 |
| 2300.REF02 (LU) | Added CSCCs. | 07/21/09 |
| 2300.REF01 (EA) | Added explicit value. | 04/23/09 |
| 2300.REF02 (EA) | Added new row for a 277 instruction. | 07/19/09 |
| 2300.REF01 (P4) | Removed one edit row. | 04/22/09 |
| 2300.REF01 (G4) | Added explicit value. | 04/23/09 |
| 2300.REF02 (G4) | Added new row for a 277 instruction. | 07/19/09 |
| 2300.K301 | Added new row for a 277 instruction. | 07/19/09 |
| 2300.NTE | Added new rows for 277 instructions. | 07/19/09 |
| 2300.NTE01 (ADD) | Added explicit value. | 04/23/09 |
| 2300.CRC01 (ZZ) | Added explicit value. | 04/23/09 |
| 2300. HI | Added new rows for 277 instructions to all the HI segments. | 07/19/09 |
| 2300.HI (BK) | Added CSCCs. | 07/21/09 |
| 2300. HI (BJ) | Added CSCCs. | 07/21/09 |
| 2300.HI (PR) | Added CSCCs. | 07/21/09 |
| 2300.HI (BN) | Added CSCCs. | 07/21/09 |
| 2300.HI (DR) | Added CSCCs. | 07/21/09 |
| 2300.HI (BF) | Added CSCCs. | 07/21/09 |
| 2300.HI (BR) | Added CSCCs. | 07/21/09 |
| 2300.HIO1-3 (BR) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO1-3}$ (BR) | Added explicit value. | 04/23/09 |
| 2300.HI (BQ) | Added CSCCs. | 07/21/09 |
| 2300. $\mathrm{HIO1-3}$ (BQ) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO2-3}$ (BQ) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO3-3}$ (BQ) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO4-3}$ (BQ) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO5-3}$ (BQ) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO6}$-3 (BQ) | Added explicit value. | 04/23/09 |
| 2300.HI07-3 (BQ) | Added explicit value. | 04/23/09 |
| 2300. H I08-3 (BQ) | Added explicit value. | 04/23/09 |
| 2300.HI09-3 (BQ) | Added explicit value. | 04/23/09 |
| 2300.HI10-3 (BQ) | Added explicit value. | 04/23/09 |
| 2300.HI11-3 (BQ) | Added explicit value. | 04/23/09 |

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| 2300.HI12-3 (BQ) | Added explicit value. | 04/23/09 |
| :---: | :---: | :---: |
| 2300. HI (BI) | Added CSCCs. | 07/21/09 |
| 2300.HI01-1 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI01-3 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI02-1 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI02-3 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI03-1 (BI) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HI} 03-3$ (BI) | Added explicit value. | 04/23/09 |
| 2300.HI04-1 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI04-3 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI05-1 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI05-3 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI06-1 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI06-3 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI07-1 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI07-3 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI08-1 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI08-3 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI09-1 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI09-3 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI10-1 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI10-3 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI11-1 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI11-3 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI12-1 (BI) | Added explicit value. | 04/23/09 |
| 2300.HI12-3 (BI) | Added explicit value. | 04/23/09 |
| $2300 . \mathrm{HI}$ (BH) | Added CSCCs. | 07/21/09 |
| 2300.HIO1-1 (BH) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO1-3}$ (BH) | Added explicit value. | 04/23/09 |
| 2300. HIO2-1 (BH) | Added explicit value. | 04/23/09 |
| 2300.HIO2-3 (BH) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO} 03-1$ (BH) | Added explicit value. | 04/23/09 |
| 2300.HIO3-3 (BH) | Added explicit value. | 04/23/09 |
| 2300.HIO4-1 (BH) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO} 04-3$ (BH) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO} 05-1$ (BH) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO5} 03$ ( BH ) | Added explicit value. | 04/23/09 |
| 2300.HIO6-1 (BH) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO6}$-3 (BH) | Added explicit value. | 04/23/09 |
| 2300.HIO7-1 (BH) | Added explicit value. | 04/23/09 |
| 2300.HI07-3 (BH) | Added explicit value. | 04/23/09 |
| 2300. $\mathrm{HIO} 08-1$ (BH) | Added explicit value. | 04/23/09 |
| 2300.HI08-3 (BH) | Added explicit value. | 04/23/09 |
| 2300.HI09-1 (BH) | Added explicit value. | 04/23/09 |
| 2300.HIO9-3 (BH) | Added explicit value. | 04/23/09 |
| 2300.HI10-1 (BH) | Added explicit value. | 04/23/09 |
| 2300.HI10-3 (BH) | Added explicit value. | 04/23/09 |
| 2300.HI11-1 (BH) | Added explicit value. | 04/23/09 |
| 2300.HI11-3 (BH) | Added explicit value. | 04/23/09 |

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| 2300.HI12-1 (BH) | Added explicit value. | 04/23/09 |
| :---: | :---: | :---: |
| 2300.H112-3 (BH) | Added explicit value. | 04/23/09 |
| 2300. HI (BE) | Added CSCCs. | 07/21/09 |
| 2300.HIO1-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HIO1-5 (BE) | Added triad separators. | 04/22/09 |
| 2300.HIO2-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HIO2-5 (BE) | Added triad separators. | 04/22/09 |
| 2300.HIO3-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HIO3-5 (BE) | Added triad separators. | 04/22/09 |
| 2300.HI04-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HI04-5 (BE) | Added triad separators. | 04/22/09 |
| 2300.HI05-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HI05-5 (BE) | Added triad separators. | 04/22/09 |
| 2300.HI06-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HI06-5 (BE) | Added triad separators. | 04/22/09 |
| 2300.HI07-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HI07-5 (BE) | Added triad separators. | 04/22/09 |
| 2300.HI08-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HI08-5 (BE) | Added triad separators. | 04/22/09 |
| 2300.HI09-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HI09-5 (BE) | Added triad separators. | 04/22/09 |
| 2300.HI10-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HI10-5 (BE) | Added triad separators. | 04/22/09 |
| 2300.HI11-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HI11-5 (BE) | Added triad separators. | 04/22/09 |
| 2300.HI12-1 (BE) | Added explicit value. | 04/23/09 |
| 2300.HI12-5 (BE) | Added triad separators. | 04/22/09 |
| 2300. HI (BG) | Added CSCCs. | 07/21/09 |
| 2300.HIO1-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HIO2-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HIO3-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HI04-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HI05-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HI06-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HI07-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HI08-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HI09-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HI10-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HI11-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HI12-1 (BG) | Added explicit value. | 04/23/09 |
| 2300.HI (TC) | Changed the usage from R to S | 06/07/09 |
| 2300.HI (TC) | Added CSCCs. | 07/21/09 |
| 2300.HI01-1 (TC) | Added explicit value. | 04/23/09 |
| 2300.HIO2-1 (TC) | Added explicit value. | 04/23/09 |
| 2300.HIO3-1 (TC) | Added explicit value. | 04/23/09 |
| 2300.HI04-1 (TC) | Added explicit value. | 04/23/09 |
| 2300.HI05-1 (TC) | Added explicit value. | 04/23/09 |
| 2300.HI06-1 (TC) | Added explicit value. | 04/23/09 |
| 2300.HI07-1 (TC) | Added explicit value. | 04/23/09 |

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| 2300.HI08-1 (TC) | Added explicit value. | 04/23/09 |
| :---: | :---: | :---: |
| 2300.HI09-1 (TC) | Added explicit value. | 04/23/09 |
| 2300.HI10-1 (TC) | Added explicit value. | 04/23/09 |
| 2300.HI11-1 (TC) | Added explicit value. | 04/23/09 |
| 2300.HI12-1 (TC) | Added explicit value. | 04/23/09 |
| 2300.HCP02 | Added triad separators. | 04/22/09 |
| 2300.HCP03 | Added triad separators. | 04/22/09 |
| 2300.HCP04 | Changed to match the Professional edit. | 04/26/09 |
| 2300.HCP06 | Changed to match the Professional edit. | 04/26/09 |
| 2300. HCP 07 | Added triad separators. | 04/22/09 |
| 2300.HCP08 | Added standard "non-space" edit. | 04/26/09 |
| 2300.HCP08 | Corrected maximum length. | 06/09/09 |
| 2310A.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2310A.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2310A.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2310A.NM107 | Added new row for a 277 instruction. | 07/19/09 |
| 2310A.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 2310A.NM108 | Added CSCC. | 07/21/09 |
| 2310A.NM109 | Added CSCCs. | 07/21/09 |
| 2310A.PRV | Corrected segment name. | 06/09/09 |
| 2310A.PRV01 | Added explicit value. | 04/23/09 |
| 2310A.PRV02 | Added explicit value. | 04/23/09 |
| 2310A.PRV03 | Added CSCC. | 07/21/09 |
| 2310A.REF (1G) | Corrected segment name. Corrected location references in the edit. | 06/09/09 |
| 2310A.REF (1G) | Added CSCC. | 07/21/09 |
| 2310A.REF01 (1G) | Added CSCC. | 07/21/09 |
| 2310B.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2310B.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2310B.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2310B.NM107 | Added new row for a 277 instruction. | 07/19/09 |
| 2310B.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 2310B.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |
| 2310B.NM108 | Added CSCC. | 07/21/09 |
| 2310B.NM109 | Added CSCCs. | 07/21/09 |
| 2310B.REF (1G) | Added CSCC. | 07/21/09 |
| 2310B.REF01 (1G) | Added CSCC. | 07/21/09 |
| 2310B.REF02 (1G) | Added CSCC. | 07/21/09 |
| 2310C.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2310C.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2310C.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2310C.NM107 | Added new row for a 277 instruction. | 07/19/09 |
| 2310C.NM108 | Added explicit value. | 04/23/09 |
| 2310C.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 2310C.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |
| 2310C.NM108 | Added CSCC. | 07/21/09 |
| 2310C.NM109 | Added CSCCs. | 07/21/09 |
| 2310C.REF (1G) | Added CSCC. | 07/21/09 |
| 2310C.REF01 (1G) | Added CSCC. | 07/21/09 |
| 2310C.REF02 (1G) | Added CSCC. | 07/21/09 |

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| 2310D.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| :---: | :---: | :---: |
| 2310D.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2310D.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2310D.NM107 | Added new row for a 277 instruction. | 07/19/09 |
| 2310D.NM108 | Added explicit value. | 04/23/09 |
| 2310D.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 2310D.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |
| 2310D.NM108 | Added CSCCs, corrected the location reference. | 07/21/09 |
| 2310D.NM109 | Added CSCCs. | 07/21/09 |
| 2310D.REF (1G) | Added CSCC. | 07/21/09 |
| 2310D.REF01 (1G) | Added CSCC. | 07/21/09 |
| 2310D.REF02 (1G) | Added CSCC. | 07/21/09 |
| 2310E.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2310E.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2310E.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2310E.NM108 | Added explicit value. | 04/23/09 |
| 2310E.NM109 | Deleted edit "2310E.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109". | 04/26/09 |
| 2310E.NM109 | Added CSCCs. | 07/21/09 |
| 2310E.N301 | Added a new row for 277 instructions. | 07/19/09 |
| 2310E.N302 | Added a new row for 277 instructions. | 07/19/09 |
| 2310E.N401 | Added new row for a 277 instruction. | 07/19/09 |
| 2310E.N402 | Added CSCCs. | 07/21/09 |
| 2310E.N403 | Added CSCCs. | 07/21/09 |
| 2310E.N404 | Added CSCCs. | 07/21/09 |
| 2310E.REF (1G) | Added CSCC. | 07/21/09 |
| 2310E.REF01 (1G) | Added CSCC. | 07/21/09 |
| 2310E.REF02 (1G) | Added CSCC. | 07/21/09 |
| 2310F.NM1 | Changed iteration number to match 837 errata. | 04/22/09 |
| 2310F.NM103 | Changed to match the Professional edits. | 04/22/09 |
| 2310F.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2310F.NM104 | Changed to match the Professional edits. | 04/22/09 |
| 2310F.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2310F.NM105 | Changed to match the Professional edits. | 04/22/09 |
| 2310F.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2310F.NM107 | Changed to match the Professional edits. | 04/22/09 |
| 2310F.NM107 | Added new row for a 277 instruction. | 07/19/09 |
| 2310F.NM108 | Changed to match the Professional edits. | 04/22/09 |
| 2310F.NM108 | Added explicit value. | 04/23/09 |
| 2310F.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 2310F.NM108 | Changed "=31" to "is a valid VA identifier". | 05/04/09 |
| 2310F.NM108 | Added CSCCs, corrected the location reference. | 07/21/09 |
| 2310F.NM109 | Changed to match the Professional edits. | 04/22/09 |
| 2310F.NM109 | Added CSCCs. | 07/21/09 |
| 2310F.REF (1G) | Added CSCC. | 07/21/09 |
| 2310F.REF01 (1G) | Added CSCC. | 07/21/09 |
| 2310F.REF02 (1G) | Added CSCC. | 07/21/09 |
| $2320 . S B R 01$ | Deleted the T-H edits | 04/22/09 |
| 2320.SBR01 | Added CSCC. | 07/21/09 |
| $2320 . S B R 03$ | Corrected the maximum length. | 06/09/09 |

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| 2320 SBR03 | Added new row for a 277 instruction. | 07/19/09 |
| :---: | :---: | :---: |
| 2320 SBR04 | Added new row for a 277 instruction. | 07/19/09 |
| 2320.SBR09 | Changed to match the Professional edits. | 04/22/09 |
| 2320.SBR09 | Added CSCC. | 07/21/09 |
| 2320.CAS01 | Added CSCC. | 07/21/09 |
| 2320.CAS02 | Added CSCC. | 07/21/09 |
| 2320.CAS03 | Added 2nd CSC code (519). | 04/26/09 |
| 2320.CAS03 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.CAS03 | Added CSCC. | 07/21/09 |
| 2320.CAS04 | Added CSCC. | 07/21/09 |
| 2320.CAS05 | Added CSCCs. | 07/21/09 |
| 2320.CAS06 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.CAS06 | Added CSCC. | 07/21/09 |
| 2320.CAS07 | Added CSCCs. | 07/21/09 |
| 2320.CAS08 | Added CSCCs. | 07/21/09 |
| 2320.CAS09 | Added 2nd CSC code (519). | 04/26/09 |
| 2320.CAS09 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.CAS09 | Added CSCCs. | 07/21/09 |
| 2320.CAS10 | Added CSCCs. | 07/21/09 |
| 2320.CAS11 | Added CSCCs. | 07/21/09 |
| 2320.CAS12 | Added 2nd CSC code (519). | 04/26/09 |
| 2320.CAS12 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.CAS12 | Added CSCCs. | 07/21/09 |
| 2320.CAS13 | Added CSCCs. | 07/21/09 |
| 2320.CAS14 | Added CSCCs. | 07/21/09 |
| 2320.CAS15 | Added 2nd CSC code (519). | 04/26/09 |
| 2320.CAS15 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.CAS15 | Added CSCCs. | 07/21/09 |
| 2320.CAS16 | Added CSCCs. | 07/21/09 |
| 2320.CAS17 | Added CSCCs. | 07/21/09 |
| 2320.CAS18 | Added 2nd CSC code (519). | 04/26/09 |
| 2320.CAS18 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.CAS18 | Added CSCCs. | 07/21/09 |
| 2320.CAS19 | Added CSCCs. | 07/21/09 |
| 2320.AMT (D) | Deleted the T-H edits | 05/03/09 |
| 2320.AMT (D) | Added CSCCs. | 07/21/09 |
| 2320.AMT01 (D) | Added explicit value. | 04/23/09 |
| 2320.AMT02 (D) | Changed to match the Professional error code. | 04/23/09 |
| 2320.AMT02 (D) | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.AMT02 (D) | Added CSCCs. | 07/21/09 |
| 2320.AMT (EAF) | Added explicit value. | 04/23/09 |
| 2320.AMT01 (A8) | Added explicit value. | 04/23/09 |
| 2320.AMT01 (A8) | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| $2320 . \mathrm{AMT02} \mathrm{(A8)}$ | Added CSCCs. | 07/21/09 |
| 2320.MIA01 | Added CSCCs. | 07/21/09 |
| 2320.MIA03 | Added CSCCs. | 07/21/09 |
| 2320.MIA04 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA04 | Added CSCCs. | 07/21/09 |
| 2320.MIA05 | Corrected the maximum length. | 06/09/09 |


| 2320.MIA05 | Added CSCCs. | 07/21/09 |
| :---: | :---: | :---: |
| 2320.MIA06 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA06 | Added CSCCs. | 07/21/09 |
| 2320.MIA07 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA07 | Added CSCCs. | 07/21/09 |
| 2320.MIA08 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA08 | Added CSCCs. | 07/21/09 |
| 2320.MIA09 | Added CSCCs. | 07/21/09 |
| 2320.MIA10 | Corrected the maximum length. | 06/09/09 |
| 2320.MIA10 | Added CSCCs. | 07/21/09 |
| 2320.MIA11 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA11 | Added CSCCs. | 07/21/09 |
| 2320.MIA12 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA12 | Added CSCCs. | 07/21/09 |
| 2320.MIA13 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA13 | Added CSCCs. | 07/21/09 |
| 2320.MIA14 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA14 | Added CSCCs. | 07/21/09 |
| 2320.MIA15 | Added CSCCs. | 07/21/09 |
| 2320.MIA16 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA16 | Added CSCCs. | 07/21/09 |
| 2320.MIA17 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA17 | Added CSCCs. | 07/21/09 |
| 2320.MIA18 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA18 | Added CSCCs. | 07/21/09 |
| 2320.MIA19 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA19 | Added CSCCs. | 07/21/09 |
| 2320.MIA20 | Added CSCCs. | 07/21/09 |
| 2320.MIA22 | Added CSCCs. | 07/21/09 |
| 2320.MIA23 | Added CSCCs. | 07/21/09 |
| 2320.MIA21 | Added CSCCs. | 07/21/09 |
| 2320.MIA24 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MIA24 | Added CSCCs. | 07/21/09 |
| 2320.MOA | Corrected segment name. | 06/09/09 |
| 2320.MOA01 | Changed to match the Professional edits. | 04/22/09 |
| 2320.MOA01 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MOA01 | Added CSCCs. | 07/21/09 |
| 2320.MOA02 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MOA02 | Added CSCCs. | 07/21/09 |
| 2320.MOA03 | Added CSCCs. | 07/21/09 |
| 2320.MOA04 | Added CSCCs. | 07/21/09 |
| 2320.MOA05 | Added CSCCs. | 07/21/09 |
| 2320.MOA06 | Added CSCCs. | 07/21/09 |
| 2320.MOA07 | Added CSCCs. | 07/21/09 |
| 2320.MOA08 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MOA08 | Added CSCCs. | 07/21/09 |
| 2320.MOA09 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2320.MOA09 | Added CSCCs. | 07/21/09 |
| 2330A.NM103 | Added new row for a 277 instruction. | 07/19/09 |

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| 2330A.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| :---: | :---: | :---: |
| 2330A.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2330A.NM106 | Changed to match the Professional edits. | 04/22/09 |
| 2330A.NM107 | Added new row for a 277 instruction. | 07/19/09 |
| 2330A.NM109 | Added new row for a 277 instruction. | 07/19/09 |
| 2330A.N301 | Added a new row for 277 instructions. | 07/19/09 |
| 2330A.N302 | Added a new row for 277 instructions. | 07/19/09 |
| 2330A.N401 | Added new row for a 277 instruction. | 07/19/09 |
| 2330A.N402 | Added CSCCs. | 07/21/09 |
| 2330A.N403 | Added CSCCs. | 07/21/09 |
| 2330A.N404 | Added CSCCs. | 07/21/09 |
| 2330A.REF02 | Added CSCCs. | 07/21/09 |
| 2330B.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2330B.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2330B.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2330B.N301 | Added a new row for 277 instructions. | 07/19/09 |
| 2330B.N302 | Added a new row for 277 instructions. | 07/19/09 |
| 2330B.N401 | Added new row for a 277 instruction. | 07/19/09 |
| 2330B.N402 | Added CSCCs. | 07/21/09 |
| 2330B.N403 | Added CSCCs. | 07/21/09 |
| 2330B.N404 | Added CSCCs. | 07/21/09 |
| 2330B.DTP (573) | Changed to match the Professional edits. | 04/22/09 |
| 2330B.DTP01 (573) | Added explicit value. | 04/23/09 |
| 2330B.DTP02 (573) | Added explicit value. | 04/23/09 |
| 2330B.DTP03 (573) | Changed to match the Professional edits. | 04/23/09 |
| 2330B.DTP03 (573) | Added CSCCs. | 07/21/09 |
| 2330B.REF01 (2U, EI, FY, NF) | Added CSCCs. | 07/21/09 |
| 2330B.REF01 (G1) | Added explicit value. | 04/23/09 |
| 2330B.REF01 (9F) | Added explicit value. | 04/23/09 |
| 2330B.REF01 (T4) | Added explicit value. | 04/23/09 |
| 2330B.REF01 (F8) | Added explicit value. | 04/23/09 |
| 2330C Loop | Added CSCCs. | 07/21/09 |
| 2330D Loop | Added CSCCs. | 07/21/09 |
| 2330E Loop | Added CSCCs. | 07/21/09 |
| 2330F Loop | Added CSCCs. | 07/21/09 |
| 2330G Loop | Added CSCCs. | 07/21/09 |
| 2330H Loop | Added CSCCs. | 07/21/09 |
| 2330 Loop | Added CSCCs. | 07/21/09 |
| 2400 Loop | Added CSCCs. | 07/21/09 |
| 2400.LX01 | Added CSCCs. | 07/21/09 |
| 2400.SV203 | Added triad separators. | 04/22/09 |
| 2400.SV203 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2400.SV205 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2400.SV207 | Added triad separators. | 04/22/09 |
| 2400.SV207 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2400.PWK | Corrected segment repetitions. | 06/09/09 |
| 2400.PWK05 | Copied the error code from P to I | 04/21/09 |
| 2400.PWK05 | Added explicit value. | 04/23/09 |


| 2400.PWK06 | Copied the error code from P to I | 04/21/09 |
| :---: | :---: | :---: |
| 2400.PWK06 | Added new row for a 277 instruction. | 07/19/09 |
| 2400.DTP (472) | Changed to match the Professional edits. | 05/04/09 |
| 2400.DTP01 (472) | Added explicit value. | 04/23/09 |
| 2400.DTP03 (573) | Added CSCCs. | 07/21/09 |
| 2400.REF01 (6R) | Added explicit value. | 04/23/09 |
| 2400.REF01 (9B) | Added explicit value. | 04/23/09 |
| 2400.REF01 (9D) | Added explicit value. | 04/23/09 |
| 2400.AMT01 (GT) | Added explicit value. | 04/23/09 |
| 2400.AMT02 (GT) | Added triad separators. | 04/22/09 |
| 2400.AMT01 (N8) | Added explicit value. | 04/23/09 |
| 2400.AMT02 (N8) | Added triad separators. | 04/22/09 |
| 2400.NTE01 (TPO) | Added explicit value. | 04/23/09 |
| 2400.HCP | Changed to match the Professional edits. | 04/26/09 |
| 2400.HCP02 | Added triad separators. | 04/22/09 |
| 2400.HCP03 | Added triad separators. | 04/22/09 |
| 2400.HCP04 | Changed to match the Professional edits. | 04/26/09 |
| 2400.HCP05 | Added triad separators. | 04/22/09 |
| 2400.HCP05 | Changed to match the Professional edits. | 04/26/09 |
| 2400.HCP06 | Changed to match the Professional edits. | 04/26/09 |
| 2400.HCP07 | Added triad separators. | 04/22/09 |
| 2400.HCP12 | Added triad separators. | 04/22/09 |
| 2410.LINO2 | Added explicit value. | 04/23/09 |
| 2410.CTP04 | Changed to match the Professional edits. Added triad separators. | 04/27/09 |
| 2410.CTP04 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2410.CTP04 | Added CSCCs. | 07/21/09 |
| 2410.REF (VY/XZ) | Added "pass-thru" note. | 06/04/09 |
| 2420A.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2420A.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2420A.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2420A.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 2420A.NM108 | Changed " $=31$ " to "is a valid VA identifier". | 05/04/09 |
| 2420A.NM108 | Added CSCCs, corrected the location reference. | 07/21/09 |
| 2420A.NM109 | Added CSCCs. | 07/21/09 |
| 2420A.REF (1G) | Added CSCC. | 07/21/09 |
| 2420A.REF02 (1G) | Added CSCC. | 07/21/09 |
| 2420B.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2420B.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2420B.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2420B.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 2420B.NM108 | Changed " $=31$ " to "is a valid VA identifier". | 05/04/09 |
| 2420B.NM108 | Added CSCCs, corrected the location reference. | 07/21/09 |
| 2420B.NM109 | Added CSCCs. | 07/21/09 |
| 2420B.REF (1G) | Added CSCC. | 07/21/09 |
| 2420B.REF02 (1G) | Added CSCC. | 07/21/09 |
| 2420C.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2420C.NM104 | Changed to match the Professional edits. | 04/26/09 |
| 2420C.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2420C.NM105 | Changed to match the Professional edits. | 04/26/09 |

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| 2420C.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| :---: | :---: | :---: |
| 2420C.NM108 | Added explicit value. | 04/23/09 |
| 2420C.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 2420C.NM108 | Changed "= 31" to "is a valid VA identifier". | 05/04/09 |
| 2420C.NM108 | Added CSCCs, corrected the location reference. | 07/21/09 |
| 2420C.NM109 | Added CSCCs. | 07/21/09 |
| 2420C.REF (1G) | Changed error code. | 05/03/09 |
| 2420C.REF (1G) | Added CSCC. | 07/21/09 |
| 2420C.REF02 (1G) | Added CSCC. | 07/21/09 |
| 2420D.NM1 | Changed to match the Professional edits. | 04/26/09 |
| 2420D.NM103 | Added new row for a 277 instruction. | 07/19/09 |
| 2420D.NM104 | Added new row for a 277 instruction. | 07/19/09 |
| 2420D.NM105 | Added new row for a 277 instruction. | 07/19/09 |
| 2420D.NM108 | Added explicit value. | 04/23/09 |
| 2420D.NM108 | Changed to 277/situational data required. | 04/27/09 |
| 2420D.NM108 | Added CSCCs, corrected the location reference. | 07/21/09 |
| 2420D.NM109 | Added CSCCs. | 07/21/09 |
| 2420D.REF (1G) | Added CSCC. | 07/21/09 |
| 2420D.REF02 (1G) | Added CSCC. | 07/21/09 |
| 2430.SVD01 | Changed to match the Professional edits. | 04/26/09 |
| 2430.SVD02 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2430.SVD03-2 | Corrected spelling of "modifier". | 06/04/09 |
| 2430.SVD03-3 | Corrected spelling of "modifier". | 06/04/09 |
| 2430.SVD03-4 | Changed to match the Professional edits. | 04/26/09 |
| 2430.SVD03-4 | Corrected spelling of "modifier". | 06/04/09 |
| 2430.SVD03-5 | Changed to match the Professional edits. | 04/26/09 |
| 2430.SVD03-5 | Corrected spelling of "modifier". | 06/04/09 |
| 2430.SVD03-6 | Changed to match the Professional edits. | 04/26/09 |
| 2430.SVD03-6 | Corrected spelling of "modifier". | 06/04/09 |
| 2430.CAS | Changed to match the Professional edits. | 04/26/09 |
| 2430.CAS02 | Changed to match the Professional error code. | 04/26/09 |
| 2430.CAS02 | Added CSCC. | 07/21/09 |
| 2430.CAS03 | Added 2nd CSC code (519). | 04/26/09 |
| 2430.CAS03 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2430.CAS05 | Changed to match the Professional error code. | 04/26/09 |
| 2430.CAS05 | Added CSCC. | 07/21/09 |
| 2430.CAS06 | Added 2nd CSC code (519). | 04/26/09 |
| 2430.CAS06 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2430.CAS08 | Changed to match the Professional error code. | 04/26/09 |
| 2430.CAS08 | Added CSCC. | 07/21/09 |
| 2430.CAS09 | Added 2nd CSC code (519). | 04/26/09 |
| 2430.CAS09 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2430.CAS11 | Changed to match the Professional error code. | 04/26/09 |
| 2430.CAS11 | Added CSCC. | 07/21/09 |
| 2430.CAS12 | Added 2nd CSC code (519). | 04/26/09 |
| 2430.CAS12 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2430.CAS14 | Changed to match the Professional error code. | 04/26/09 |
| 2430.CAS14 | Added CSCC. | 07/21/09 |
| 2430.CAS15 | Added 2nd CSC code (519). | 04/26/09 |


| 2430.CAS15 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| :---: | :---: | :---: |
| 2430.CAS17 | Changed to match the Professional error code. | 04/26/09 |
| 2430.CAS17 | Added CSCC. | 07/21/09 |
| 2430.CAS18 | Added 2nd CSC code (519). | 04/26/09 |
| 2430.CAS18 | Changed the CSC code to the code approved by the committee (697) | 06/07/09 |
| 2430.DTP01 (573) | Added explicit value. | 04/23/09 |
| 2430.DTP02 (573) | Added explicit value. | 04/23/09 |
| 2430.DTP02 (573) | Changed to match the Professional error code. | 04/26/09 |
| 2430.AMT (EAF) | Changed to match the Professional edits. | 04/26/09 |
| 2430.AMT01 (EAF) | Added explicit value. | 04/23/09 |
| 2430.AMT01 (EAF) | Deleted edit. | 04/23/09 |
| SE | Corrected location typo. | 04/26/09 |
| SE | Changed the error code to an AK502 error. | 05/03/09 |
| SE01 | Changed the error code to an AK502 error. | 05/03/09 |
| SE02 | Changed the error code to an AK502 error. | 05/03/09 |
| GE | Changed the error code to an AK905 error. | 05/03/09 |
| GE01 | Changed the error code to an AK905 error. | 05/03/09 |
| GE02 | Changed the error code to an AK905 error. | 05/03/09 |
| IEA | Changed to match the Professional error code. | 04/26/09 |
| IEA | Changed error code from 024 to 023 | 07/16/09 |
| IEA01 | Changed to match the Professional error code. | 04/26/09 |
| IEA02 | Changed to match the Professional error code. | 04/26/09 |
| Amout Elements | Updated all monetary amounts to reflect flat file pictures of S9(8)V99 | 09/01/09 |
| X223.364.2320.AMT02.060 | Added the inclusion of the CAS amounts for balancing | 10/06/09 |
| X223.349.2310F.NM109.040 | Removed edit for "2310A.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109." | 10/06/09 |
| X223.319.2310A.NM109.030 | Removed edit for "2310A.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109." | 10/06/09 |
| X223.326.2310B.NM109.040 | Removed edit for "2310B.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109." | 10/06/09 |
| X223.331.2310C.NM109.040 | Removed edit for "2310C.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109." | 10/06/09 |
| X223.336.2310D.NM109.040 | Removed edit for "2310D.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109." | 10/06/09 |
| X223.349.2310F.NM109.040 | Removed edit for "2310F.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109." | 10/06/09 |
| X223.456.2420A.NM109.040 | Removed edit for "2420A.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109." | 10/06/09 |
| X223.461.2420B.NM109.040 | Removed edit for "2420B.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109." | 10/06/09 |
| X223.466.2420C.NM109.040 | Removed edit for "2420C.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109." | 10/06/09 |
| X223.471.2420D.NM109.040 | Removed edit for "2420D.NM109 must be a valid NPI on the Crosswalk when evaluated with 1000B.NM109." | 10/06/09 |
| X223.383.2330A.REF02.020 | Added MCS logic for editing SSNs | 10/06/09 |
| X223.080.2000A.PRV02.010 | corrected incorrect reference to 2000B | 10/06/09 |
| X223.080.2000A.PRV02.020 | corrected incorrect reference to 2000B | 10/06/09 |
| X223.080.2000A.PRV03.010 | corrected incorrect reference to 2000B | 10/06/09 |
| X223.080.2000A.PRV03.020 | corrected incorrect reference to 2000B | 10/06/09 |
| X223.084.2010AA.NM109.040 | Removed \$ from edit description | 10/06/09 |
| X223.383.2330A.REF01.020 | Corrected reference to 2330A rather than 2310A | 10/06/09 |
| X223.387.2330B.N402.010 | Corrected reference to 2330B | 10/06/09 |
| X223.392.2330B.REF02 | Corrected typos. | 10/06/09 |
| X223.435.2400.REF02 | Corrected typos. | 10/06/09 |
| X223.341.2310E.NM103.060 | Changed CSC 504 to 125 | 10/06/09 |
| X223.090.2010AA.REF02.050 | Remvoe Misc. Note for NPI | 10/06/09 |
| X223.071.1000A.NM109.030 | Added entity identifier code | 10/06/09 |
| X223.084.2010AA.NM108.010 | Changed usage from R to S | 10/06/09 |
| X223.087.2010AA.N301.070 | Added "P O BOX" to valid values list | 10/06/09 |

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| X223.087.2010AA.N302.010 | Added data type, min/max, and usage | 10/06/09 |
| :---: | :---: | :---: |
| X223.087.2010AA.N302.060 | Added "P O BOX" to valid values list | 10/06/09 |
| X223.143.2300.CLM02.070 | Changed CSC from 178 to 400 "Claim is out of balance" | 10/06/09 |
| X223.149.2300.DTP. 010 | Final impatient claims are ones with a TOB Freq eual to '1' or '4'. | 10/06/09 |
| X223.151.2300.DTP03.040 | Change CSC from 394 to 189 | 10/06/09 |
| X223.153.2300.CL102.030 | Added "Source" | 10/06/09 |
| X223.175.2300.REF02 | Added the min/max edits and must contain one char for consistancy with other REF edits. | 10/06/09 |
| X223.369.2320.MIA05 | Changed from 2330B.DTP03 whent DTP01="573" to 2300.DTP03 when DTP01="434" | 10/06/09 |
| X223.387.2330B.N403.010 | Changed the references from 2330A to 2330B | 10/06/09 |
| X223.393.2330B.REF01.020 | Change edit reference from SF to 9F | 10/06/09 |
| X223.433.2400.DTP01.010 | Added data type, min/max, and usage | 10/06/09 |
| X223.471.2420D.NM1.020 | Removed " on a combined (facility and professional compenents) claim. " | 10/06/09 |
| X223.476.2430.SVD03-2.030 | Added "on the date in 2400.DTP03 when DTP01 = "472"." for date checking for HIPPS codes. | 10/06/09 |
| X223.088.2010AA.N402.030 | Added edit for valid state code | 10/06/09 |
| X223.088.2010AA.N403.030 | Added edit for valid zip code | 10/06/09 |
| X223.097.2010AB.N402.030 | Added edit for valid state code | 10/06/09 |
| X223.176.2300.K301.050 | Corrected reference to K301 instead of REF02 | 10/06/09 |
| X223A1.12.2310F.NM1.020 | Changed reference X223.349.2310E.NM1.010 to X223A1.12.2310F.NM1.020 due to change in repeat for referring providers in the type 1 errata. | 10/20/09 |
| X223A1.23..GS08.010 | Changed 5010 value from 005010X223 to 005010X223A1 | 10/20/09 |
| X223A1.11..ST03.010 | Changed 5010 value from 005010X223 to 005010X223A1 | 10/20/09 |
| X223.068..BHT06.020 | Added edit requiring value of " HC " | 10/20/09 |
| X223.424.2400.SV207.010 | Removed edit requiring SV207 which cannot be determined if the provider had non-covered charges. | 10/20/09 |
| X223.313.2300.HCP12.030 | Change reference in 5010 edit from 2400 to 2300 | 10/20/09 |
| X223.313.2300.HCP12.040 | Change reference in 5010 edit from 2400 to 2300 | 10/20/09 |
| X223.313.2300.HCP12.050 | Change reference in 5010 edit from 2400 to 2300 | 10/20/09 |
| Topic Parking Lot | Removed. Issue tracked provide no guidance or benefit for the implementation of the CR | 10/20/09 |
| X223.C7..GS. 020 | Changed added disposition of "TA105: 024 Invalid GS Segment" | 10/20/09 |
| X223.C7..GS04 and GS05 | Changed to TA1 rather than 999. | 10/20/09 |
| X223.358.2320.CAS06.050 | Changed Accept/Reject to E | 10/20/09 |
| X223.358.2320.CAS09.050 | Changed Accept/Reject to E | 10/20/09 |
| X223.358.2320.CAS15.050 | Changed Accept/Reject to E | 10/20/09 |
| X223.364.2320.AMT02.020 | Removed 5010 edit language | 10/20/09 |
| X223.365.2320.AMT02.020 | Removed 5010 edit language | 10/20/09 |
| X223.365.2320.AMT02.040 | Removed 5010 edit language | 10/20/09 |
| X223.366.2320.AMT02.030 | Removed 5010 edit language | 10/20/09 |
| X223.366.2320.AMT02.040 | Removed 5010 edit language | 10/20/09 |
| X223.366.2320.AMT02 | Moved edit for invalid charater (277CA) after 999E for must be numeric (renumbered edits for AMT02) | 10/20/09 |
| X223.364.2320.AMT02.030 | Changed from 999R to 999E and added new 277CA edit for invalid character. Also renumbered remaining edits due to insert of new X223.364.2320.AMT02.040 edit. | 10/20/09 |
| X223.459.2420A.REF02.010 | changed X12 min/max from 1-30 to 1-50 | 10/20/09 |
| X223.081.2000A.CUR. 010 | Added new 999E edit for CUR segment as a not used for implementation error. This caused the current X223.081.2000A.CUR. 010 edit to be pushed down to the second edit (.020) for the CUR segment. | 10/20/09 |
| X223.122.2010BB.NM107.020 | Removed edit as 2010BB.NM107 is not used. | 10/20/09 |
| X223.476.2430.SVD06.030 | Edit deactivated (replaced all data with spaces except for column A) | 10/20/09 |
| X223.109.2000B.SBR01.020 | Changed R to E and swapped 030 and 040 edit to get corresponding 277 under 999E | 10/20/09 |
| All 277 rows | Added T \& C to indicate errors which identified in the translator ( $T$ ) and which errors are identified in the CEM ( C ) | 10/20/09 |


| X223.088.2010AA.N403.030 | Added check if N404 is not present then validate zip code | 10/20/09 |
| :---: | :---: | :---: |
| X223.097.2010AB.N403.030 |  |  |
| X223.464.2420B.REF01.020 | Added note "Trailblazer Only" | 10/20/09 |
| X223.239.2300.HI.010 | Added (not outpatient) per 6676 comment and Matts agreement | 10/20/09 |
| X223.242.2300.HI.010 | Added (not outpatient) per 6676 comment and Matts agreement | 10/20/09 |
| X223.067..ST.020 | changed edit to IK502: 1 "Transaction Set Not Supported". | 10/27/09 |
| X223.078.2000A.HL. 020 | changed edit to IK304 = 5: "Segment Exceeds Maximum Use" | 10/27/09 |
| X223.097.2010AB.N402.010 | changed to 999R | 10/27/09 |
| all appropriate 2310A NM1 elements | changed Attendee to Attending | 10/27/09 |
| n/a | EIC - Entitity Identifier Code added to \#113 in the style sheet | 10/28/09 |
| global | replaced all Entity Identifier Code occurences to EIC | 10/28/09 |
| all appropriate 2300 HI elements | updated treatment code edits | 10/28/09 |
| X223.364.2320.AMT02.030 | changed to 999R and deleted corresponding 277 (X223.364.2320.AMT02.040) | 10/28/09 |
| X223.365.2320.AMT02.030 | changed to 999R and deleted corresponding 277 (X223.365.2320.AMT02.040) | 10/28/09 |
| X223.366.2320.AMT02.010 | changed to 999R and deleted corresponding 277 (X223.366.2320.AMT02.040) | 10/28/09 |
| X223.367.2320.0103.010 | corrected Col F to OIO3 | 10/28/09 |
| X223.367.2320.0103.010 | corrected to X223.367.2320.OI03.010 | 10/28/09 |
| X223.383.2330A.REF02.020 | changed to CSC 148: "Entity's Social Security Number" | 10/28/09 |
| X223.433.2400.DTP01.020 | deleted | 10/28/09 |
| X223.452.2410.CTP04.020 | deleted | 10/28/09 |
| X223.471.2420D.NM1.020 | changed to IK304 = 5: "Segment Exceeds Maximum Use" | 10/28/09 |
| X223.476.2430.SVD05.050 | changed to 999R and deleted corresponding 277 (X223.476.2430.SVD05.060) | 10/28/09 |
| X223.476.2430.SVD06.060 | deleted | 10/28/09 |
| X223.C10..IEA. 010 | added "R" to column P | 10/28/09 |
| X223.C10..IEA. 020 | added "R" to column P | 10/28/09 |
| X223.C10..IEA01.010 | added "R" to column P | 10/28/09 |
| X223.C10..IEA01.020 | added "R" to column P | 10/28/09 |
| X223.C10..IEA01.030 | added "R" to column P | 10/28/09 |
| X223.C10..IEA01.040 | added "R" to column P | 10/28/09 |
| X223.C10..IEA02.010 | added "R" to column P | 10/28/09 |
| X223.C10..IEA02.020 | added "R" to column P | 10/28/09 |
| X223.169.2300.REF. 010 | changed to 999R IK304 = 5: "Segment Exceeds Maximum Use" | 10/29/09 |
| X223.354.2320.SBR. 010 | added loop repeat of 10 | 10/29/09 |
| X223.358.2320.CAS02.030 | added CSC 516: Adjudication or Payment Date | 10/29/09 |
| X223.358.2320.CAS03.060 | added CSC 519: "Adjustment Amount" | 10/29/09 |
| X223.374.2320.MOA02.020 | changed to 999E | 10/29/09 |
| X223.358.2320.CAS03.030 | moved the 999E edit to follow the 999R editing | 10/30/09 |
| X223.358.2320.CAS06.030 | moved the 999E edit to follow the 999R editing | 10/30/09 |
| X223.358.2320.CAS09.030 | moved the 999E edit to follow the 999R editing | 10/30/09 |
| X223.358.2320.CAS12.030 | moved the 999E edit to follow the 999R editing | 10/30/09 |
| X223.358.2320.CAS15.030 | moved the 999E edit to follow the 999R editing | 10/30/09 |
| X223.358.2320.CAS18.030 | moved the 999E edit to follow the 999R editing | 10/30/09 |
| X223.364.2320.AMT02.010 | moved the 999R edit to be before the 999E editing | 10/30/09 |
| X223.365.2320.AMT02.010 | moved the 999R edit to be before the 999E editing | 10/30/09 |
| X223.366.2320.AMT02. | Corrected the edit numbering | 10/30/09 |
| X223.380.2330A.N301.020 | moved the 999R edit to be before the 999E editing | 10/30/09 |
| X223.442.2400.HCP02.020 | Added 999R edit for Must be numeric | 10/30/09 |

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| X223.442.2400.HCP03.010 | Added 999R edit for Must be numeric | 10/30/09 |
| :---: | :---: | :---: |
| X223.442.2400.HCP07.010 | Added 999R edit for Must be numeric | 10/30/09 |
| X223.442.2400.HCP12.030 | Added 999R edit for Must be numeric | 10/30/09 |
| X223.442.2400.HCP12 | Added 277CA T edit for greater then 0 and number of decimal positions | 10/30/09 |
| X223.476.2430.SVD02.050 | Moved the 277CA edit to follow the 999E edit | 10/30/09 |
| X223.109.2000B.SBR04 | fixed all edits | 11/02/09 |
| 2330C-23301 | changed to CSCC A7: "Acknowledgement /Rejected for Invalid Information..." | 11/02/09 |
| X223.441.2400.NTE02.040 | removed EIC | 11/02/09 |
| X223.441.2400.NTE02.060 | removed EIC | 11/02/09 |
| X223.476.2430.SVD05.040 | changed to 999R | 11/03/09 |
| X223.442.2400.HCP10.030 | changed to When 2400.HCP10 = "HP", 2400.HCP10 must be a valid HIPPS Skilled Nursing Facility Rate Code. | 11/03/09 |
| global | Changed all TBD10 to CSC 127: "Entity's Phone Number" | 11/03/09 |
| global | Changed all TBD011 to CSC 53: "Entity ID Number" EIC: "PR" | 11/03/09 |
| global | Changed all TBD013 to CSC 702: "Repriced Claim Reference Number" | 11/03/09 |
| global | Changed all TBD016 to CSC 153: "Entity's ID Number" | 11/03/09 |
| global | Changed all TBD020 to CSC 153: "Entity's ID Number" | 11/03/09 |
| X223.476.2430.SVD05.030 | Changed TBD023 to CSC 608: "Paid Service Unit Count" | 11/03/09 |
| X223.078.2000A.. 010 | added IK304 = 17: "Implementation Loop Occurs Under Minimum Times" | 11/03/09 |
| X223.078.2000A.. 020 | IK304 = 4: "Loop Occurs Over Maximum Times" | 11/03/09 |
| X223.078.2000B.. 010 | added IK304 = I7: "Implementation Loop Occurs Under Minimum Times" | 11/03/09 |
| X223.084.2010AA.NM108.010 | changed to 277C | 11/03/09 |
| X223.084.2010AA.NM108.020 | changed to 277C | 11/04/09 |
| X223.326.2310B.NM108.010 | changed to TBD01 | 11/04/09 |
| X223.326.2310B.NM108.020 | Changed to 277C | 11/04/09 |
| X223.331.2310C.NM108.010 | changed to TBD01 | 11/04/09 |
| X223.331.2310C.NM108.020 | Changed to 277C | 11/04/09 |
| X223.336.2310D.NM108.010 | changed to TBD01 | 11/04/09 |
| X223.336.2310D.NM108.020 | Changed to 277C | 11/04/09 |
| X223.349.2310F.NM108.010 | changed to TBD01 | 11/04/09 |
| X223.349.2310F.NM108.020 | Changed to 277C | 11/04/09 |
| X223.456.2420A.NM108.010 | Changed to CSCC A8 | 11/04/09 |
| X223.461.2420B.NM108.010 | Changed to CSCC A8 | 11/04/09 |
| X223.466.2420C.NM108.010 | Changed to CSCC A8 | 11/04/09 |
| X223.471.2420D.NM108.010 | Changed to CSCC A8 | 11/04/09 |
| X223.480.2430.CAS. 020 | Changed to IK304 = 5: "Segment Exceeds Maximum Use" | 11/05/09 |
| X223.480.2430.CAS18.060 | added CSC 519: "Adjustment Amount" | 11/05/09 |
| X223.480.2430.CAS01.030 | added EIC: GB Other Insured | 11/05/09 |
| global | sync'd up claim and line level CAS segments | 11/05/09 |
| X223.097.2010AB.N403.020 | Changed to 277C | 11/16/09 |
| X223.364.2320.AMT02.030 | changed "EIC: TBD Need COB payer Entity" to CSC 286: "Other payer's Explanation of Benefits/payment information" | 12/22/09 |
| X223.364.2320.AMT02.040 | changed "EIC: TBD Need COB payer Entity" to CSC 286: "Other payer's Explanation of Benefits/payment information" | 12/22/09 |
| X223.364.2320.AMT02.050 | changed "EIC: TBD Need COB payer Entity" to CSC 286: "Other payer's Explanation of Benefits/payment information" | 12/22/09 |
| X223.364.2320.AMT02.060 | changed "EIC: TBD Need COB payer Entity" to CSC 286: "Other payer's Explanation of Benefits/payment information" | 12/22/09 |
| X223.143.2300.CLM01.040 | deleted "Suggest use CSCC A6" | 12/22/09 |
| X223.071.1000A.NM109.050 | changed to 999R | 12/22/09 |
| X223.071.1000A.NM109.060 | Edit deactivated (replaced all data with spaces except for column A) | 12/22/09 |
| X223.071.1000A.NM109.070 | changed to 999R | 12/22/09 |
| X223.242.2300.HI.010 | changed to IK403 = I12: "Implementation Pattern Match Failure" | 12/22/09 |

Changes to the version included for POC Review

| X223.071.1000A.NM109.030 | changed to 999R | $12 / 22 / 09$ |
| :--- | :--- | :--- |
| X223.071.1000A.NM109.040 | Edit deactivated (replaced all data with spaces except for column A) | $12 / 22 / 09$ |
| X223.071.1000A.NM103.040 | Edit deactivated (replaced all data with spaces except for column A) | $12 / 22 / 09$ |
| X223.071.1000A.NM103.030 | changed to $999 R$ | $12 / 22 / 09$ |
| X223.071.1000A.NM103.050 | changed to 999R | $12 / 22 / 09$ |
| X223.071.1000A.NM103.060 | Edit deactivated (replaced all data with spaces except for column A) | $12 / 22 / 09$ |
| X223.071.1000A.NM104.010 | changed to 999R | $12 / 22 / 09$ |
| X223.071.1000A.NM104.030 | changed to 999R | $12 / 22 / 09$ |
| X223.071.1000A.NM104.020 | Edit deactivated (replaced all data with spaces except for column A) | $12 / 22 / 09$ |
| X223.071.1000A.NM104.040 | Edit deactivated (replaced all data with spaces except for column A) | $12 / 22 / 09$ |
| X223.071.1000A.NM104.050 | changed to 999R | $12 / 22 / 09$ |
| X223.071.1000A.NM104.060 | changed to 999R | $12 / 22 / 09$ |
| X223.071.1000A.NM104.070 | Edit deactivated (replaced all data with spaces except for column A) | $12 / 22 / 09$ |
| X223.071.1000A.NM105.030 | Edit deactivated (replaced all data with spaces except for column A) | $12 / 22 / 09$ |
| X223.071.1000A.NM105.050 | Edit deactivated (replaced all data with spaces except for column A) | $12 / 22 / 09$ |
| X223.071.100A.NM105.070 | Edit deactivated (replaced all data with spaces except for column A) | $12 / 22 / 09$ |
| X223.073.1000A.PER02.030 | Edit deactivated (replaced all data with spaces except for column A) | $12 / 22 / 09$ |

## Spreadsheet Details

- An Edit Identifier is used to uniquely identify each row in an Edit Spreadsheet. It consists of the following
* TR3 Identifier.
* TR3 Page reference for the segment identified.
* TR3 Loop ID (if there is no loop ID there will be two periods together).
* Segment ID and Element Position.
* Edit Number (within the Segment ID / Element Position).
- The "Accept/Reject" Column will be populated with one of the following values as indicated below:
* R - The transaction set (ST-SE) is rejected back to the submitter.
* E - The transaction set (ST-SE) is passed to the CEM where additional validation occurs. Rejections for both
* T - The error is identified in the translator and an STC record is added to the 837 flat file following the
* C - The error is identified in the CEM, a 277CA flat file, including the business error information, will be
- Acronyms:
* CSC - Claim Status Code.
* CSCC - Claim Status Category Code.
* EIC - Entity Identifier Code.
- Edit inclusion methodology:
* If a segment/element/composite is required, based on either guide usage or by situational rule interpretation,
* If a segment/element/composite is not used, based on either guide usage or by situational rule interpretation,
* If a segment/element/composite does not have either of those explicit notations, the edits listed will apply
- Assumptions:
* The edits included in the spreadsheet are intended to clarify the X12N Implementation Guide instructions or add Medicare specific requirements. Unless otherwise explicitly specified in the EDITS worksheet, all X12 IG * Segments noted as "Pass through, syntax only" will not include CMS specific edits based on system constraints or business rules. This notation indicates that the information is stored on the repository but not used in any * Front End processing will determine billing criteria (inpatient, outpatient, POA, etc.) based on the NUBC * Conditional statements regarding inclusion or exclusion of segment/element/composites will be included when they can be consistently enforced by a transaction receiver. In the absence of consistently enforceable Example: 2320 COB Payer Amt Paid - there is no way for the receiver to determine whether the claim has been adjudicated by the payer in Loop 2330B, so no edit will be included for that criteria.
* Format definitions, rules, restrictions, guidance, or instructions published by the code set owner of an external code set must be met for a code from an external code set to be noted as "valid".
* If a segment is repeated at the same location with different qualifiers, the segment edit will include a qualifier clause (Only one iteration of $2300 . \mathrm{HI}$ with HIO1-1 = "DR" is allowed), otherwise the segment edit will just include
- Valid dates - dates must be valid according to the calendar for the specific year.
* Only 01-12 are valid for the month positions of the date field.
* If month is " 01 ", the day positions may be populated with 01-31.
* If month is " 02 ", the day positions may be populated with $01-28$, except during leap years ( 2008 was a leap year, leap years occur every 4 years) when the day positions may be populated with 01-29.
* If month is "03", the day positions may be populated with 01-31.
* If month is "04", the day positions may be populated with 01-30.
* If month is "05", the day positions may be populated with 01-31.
* If month is "06", the day positions may be populated with 01-30.
* If month is "07", the day positions may be populated with 01-31.
* If month is "08", the day positions may be populated with 01-31.
* If month is "09", the day positions may be populated with 01-30.
* If month is "10", the day positions may be populated with 01-31.
* If month is "11", the day positions may be populated with 01-30.
* If month is "12", the day positions may be populated with 01-31.
- Future Date edits:
* Edits restricting a date field from being a "future date" should be evaluated against the date the file was
- ICD Codes:
* Edits that are specific to the period when ICD-9 is allowed are highlighted in pink.
* Edits that are specific to the period when ICD-10 is allowed are highlighted in turquoise.
- Numeric edits:
* Positive/Negative/Zero:
- Any numeric value with an edit that indicates it must be >=0 means that negative numbers are not allowed.
- Any numeric value with an edit that indicates it must be $>0$ means that neither zero nor negative numbers
- If neither of these explicit edit are present, negative, zero, and positive numbers are allowed.
* If an edit references a numeric value (must be $>=,<=$ or $=$ with a numeric limitation) implies a numeric content
* The words "digit" or "digits" in an edit implies numeric content.
- Alphanumeric edits:
* The words "character" or "characters" in an edit implies alphanumeric content.
* If the data of an AN element or composite is from an external code list, the standard AN edits will not be


## Terms and Definitions

- The flow of the transactions is:
* Front end processing - commercial translator edits, specific to each contractor.
- EDI syntax integrity validation
- Valid Segments (e.g. valid segment identifier, number of elements, delimiters)
- $\quad$ Segment order (as defined by the X12 / NCPDP standard)
- Element Attributes (e.g. X12 usage, repetitions, data type, and min/max size)
- Numeric element validation (e.g. leading minus signs, decimal points for R data types)
- X12 / NCPDP syntactical rules
- HIPAA syntax integrity validation based upon adopted specifications (X12 / NCPDP)
- Repeat maximums for segments, loops, elements (when repeating element are used)
- Used and un-used qualifiers, (internal) codes, elements, and segments
- Intra-segment situational data elements (e.g. DTP for auto accident becomes required when CLM011-1 or
* Common edit module - identical processing across contractors
- External code source validation
- All CMS business rule validation that is evaluated post-translation
- Balancing edits
- Situation based edits
- Code Set edits
- Product Type/Type of Service edits
* Shared system - CMS claims processing system.
- 277 - Denotes that a 277 acknowledgement will be returned to the submitter.
* 277T - This designation is used when an error is identified in front end processing (before the common edit module is invoked). When this type of error is identified an STC record is added to the 837 flat file following the * 277C - This designation is used when an error is identified in the common edit module. When this type of error is identified an STC record is added to the 277 flat file following the segment with the identified error.
- 999 - Denotes that a 999 acknowledgement will be returned to the submitter.
* 999R - This designation is used when an identified error causes the transaction set (ST-SE) to be rejected back to the submitter. If multiple transaction sets are included in one functional group, only the transaction set with * 999E - This designation is used when processing continues after an error is identified; the transaction set (STSE) will continue to be evaluated against the translator errors before being passed to the CEM for additional
- Exception: If the 999E is based on usage of a "Not Used" element only a 999E will be generated and sent back to the submitter. No corresponding 277 will be created in the flat file for this type of error.


## Assumptions

- 277 acknowledgements and 999 acknowledgements are not mutually exclusive.


## General Edit Rules:

## These are the priority rules. They supersede the secondary rules whenever there is a conflict between the

- 999R edits stand alone. They are not associated with a corresponding 277 error.
- 999E edits are always followed by a 277T edit.
* Exception: a 999E based on usage of a "Not Used" element stands alone.
- 277C edits stand alone. They are not associated with a corresponding 999 error.
- 277T edits are usually preceded by a 999E edit but can stand alone.
* Special Case: When an element has more than one error that can be identified in the translator, there can be
- All Table 1 edits result in a 999R or TA1 rejection.
* Exception: "Not Used" elements will be associated with stand-alone 999E edits.
- All Table 2 edits related to CMS business constraints will be associated with a 277 edit.
* EDI Syntax Integrity Validation (WEDI Level 1) or HIPAA Syntax Integrity Validation (WEDI Level 2) edits will be
* Common Edit Module validation (WEDI Levels 3 through 6) edits will be associated with a 277C edit.
- All Table 2 edits related to CMS technical constraints will be associated with a 999E followed by a 277T edit.
* Examples: amounts or quantities for which CMS's internal system size is smaller than the IG allowed


## Specific Edit Rules:

## These are the secondary rules. They apply only when they do not violate the priority rules.

- Loops that are not accepted based on Medicare business rules will be associated with a stand-alone 277T
- Segments that are not accepted based on Medicare business rules will be associated with a stand-alone
- All "... must be populated with accepted AN characters" edits will be associated with a 999E (IK403=6)/277T
- All "...must be \# - \#\# characters" edits will be associated with a 999E (IK403=4 or IK403=5)/277T edit
- All "...must be $\{<,>,=,<=,>=\}$ " edits that establish element length will be associated with a 999E (IK403=4 or
- All "...must contain at least \#\# non-space characters" edits will be associated with a 999R edit (IK403=6).
- All "...must be present" edits at the segment level will be associated with a 999R edit (IK304=3).

Exception: if the edit reflects Medicare business rules instead of X12 syntax rules, the edit will be associated with

- All "...must be present" edits at the element level will be associated with a 999R edit (IK403=1).

Exception: if the edit reflects Medicare business rules instead of X12 syntax rules, the edit will be associated with

- All "If ... is not present, ... must be present" edits at the segment level will be associated with a 999R edit
- All "If ... is present, ... must be present" edits referring to a relationship between two elements within the
- All "If ... is present, ... must be present" edits referring to a relationship between two different segments will
- All "If ...is present, ....may be present" edits referring to a relationship between two elements within the
- All "If ... is present, ... may be present" edits referring to a relationship between two different segments will
- All "...must be valid values" edits will be associated with a 999R edit (IK304=7).
- All "...must be \{explicit value\}" edits will be associated with a 999R edit (IK403=7).
- All "...must be numeric" edits will be associated with a 999R edit (IK403=6).
- All external code source edits will be associated with a 277C edit.
- All "must be an integer" edits will be associated with a 999R edit (IK403=6).
- All "must be a valid date" edits will be associated with a 999R edit (IK403=8).
- All "must be a valid time" edits will be associated with a 999R edit (IK403=8).
- All "must not be present" edits at the segment level will be associated with a 277T edit.
- All "must not be present" edits at the element level will be associated with a 999E edit (IK403=I10).
- All "If ...NM102 is " 2 ", ... must not be present" edits will be associated with a 999R edit (IK403=I13).
- All dollar amounts or numeric elements that use $<,>,=,<=$, or $>=$ to establish value limits will be associated
- All edits limiting the number of iterations of a segment will be associated with a 999R (IK304=5).
* Exception: All edits limiting the number of iterations of the first segment of a loop will be associated with a


## Segment or Element Specific Edit Rules:

These are the tertiary rules. They apply only when they do not violate the priority or secondary rules.

- In Loops 1000A and 2010AA, NM109 edits referring to "approved electronic submitter" (trading partner management edits) will be associated with a 999R edit (trading partner management edits).

