Idaho Department of Health and Welfare

Vendor Specifications
837 Dental Claim
ASC X12N Version 4010A1

Revised

June 11, 2008

Overview

The Idaho Medicaid program is responding to the Health Insurance Portability and Accountability Act (HIPAA). The Idaho Medicaid Program requires EDI submitters to pass certain levels of testing on all EDI transactions prior to moving into production. This testing is required for each software package developed and clearinghouses that submit directly to the Idaho Medicaid system.

Beginning October 20, 2003 the Idaho Medicaid Management Information System will ***only*** accept ASC X12N version 4010A1 using the HIPAA implementation guides for 837 Professional, 837 Institutional and 837 Dental.

This vendor specification document has been prepared by the EDS EDI Department to be used as an aid to programmers developing and testing software; and for use in resolving problems for 837 transactions generated in the 4010A1 format. This document refers to information and situations that are specific to Idaho Medicaid and should be used as supplements to the 4010A1 Implementation Guide.

For any questions or to begin testing, please contact the EDS EDI Helpdesk at 1-800-685-3757 and ask for Technical Support.

Required Information
Data elements, Segments and Loops not included in this guide are not used for processing claims by Idaho Medicaid, but must still be sent if the information is required for compliance with the ASC X12N version 4010A1 format.

Test vs. Production
Idaho Medicaid does not accept non-production data into any environment. The REF02 data element, located in the header segment, must contain the value designating the claim as a production transaction.

Encounters
Idaho Medicaid does not accept encounter *(BHT06=RP)* transactions at this time. All encounters sent to Idaho Medicaid will be rejected and an appropriate error message will be returned.

Attachments
Idaho Medicaid does not process paper attachments in combination with electronic transactions at this time.

Submitter ID
EDS Submitter ID numbers are issued to each submitter. EDS will issue a Submitter ID during testing and a separate Submitter ID for production.

Receiver ID
EDS has different Receiver ID numbers for each environment. These numbers can be obtained by calling the EDS EDI Help Desk at 1-800-685-3757 and ask for Technical Support..

Delimiters
Idaho Medicaid does not require the use of specific values for the delimiters used in electronic transactions. The suggested values are included in the specifications below.

Additional Information
Please refer to the 4010A1 Implementation Guide for information not supplied in this document, such as code lists, definitions, and edits.

Adjustments
Idaho Medicaid does accept adjusted claims electronically. Please refer to Loop 2300 CLM05-3/REF in the specifications below.

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
HEADER	ISA	Interchange Control Header		3		R	ISA
		Element Separator	AN	1			*
	ISA01	Authorization Information Qualifier	ID	2	I01	R	ØØ
		Element Separator	AN	1			*
	ISA02	Authorization Information	AN	10	I02	R	[Space fill]
		Element Separator	AN	1			*
	ISA03	Security Information Qualifier	ID	2	I03	R	ØØ
		Element Separator	AN	1			*
	ISA04	Security Information	AN	10	I04	R	[Space fill]
		Element Separator	AN	1			*
	ISA05	Interchange ID Qualifier	ID	2	I05	R	ZZ
		Element Separator	AN	1			*
	ISA06	Interchange Sender ID	AN	15	I06	R	*EDS assigned Submitter ID* *Left justify and space fill* [See Overview for additional notes]
		Element Separator	AN	1			*
	ISA07	Interchange ID Qualifier	ID	2	I05	R	ZZ
		Element Separator	AN	1			*
	ISA08	Interchange Receiver ID	AN	15	I07	R	[Receiver ID] *Left justify and space fill* [See Overview for additional notes]
		Element Separator	AN	1			*
	ISA09	Interchange Date	DT	6	I08	R	(YYMMDD)
		Element Separator	AN	1			*
	ISA10	Interchange Time	TM	4	I09	R	(HHMM)
		Element Separator	AN	1			*
	ISA11	Interchange Control ID	ID	1	I10	R	U
		Element Separator	AN	1			*
	ISA12	Interchange Version Number	ID	5	I11	R	ØØ4Ø1
		Element Separator	AN	1			*
	ISA13	Interchange Control Number	N0	9	I12	R	(Assigned by Sender)

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Element Separator	AN	1			*
	ISA14	Ack. Requested	ID	1	I13	R	Ø
		Element Separator	AN	1			*
	ISA15	Usage Indicator	ID	1	I14	R	P or T (Must contain a 'P' indicator in production)
		Element Separator	AN	1			*
	ISA16	Component Element Separator		1	I15	R	:
		Segment End	B	1			~
	GS	Functional Group Header		2		R	GS
		Element Separator	AN	1			*
	GS01	Functional Identifier Code	ID	2	479	R	HC
		Element Separator	AN	1			*
	GS02	Application Sender's Code	AN	2/15	142	R	(EDS assigned Submitter ID) [See Overview for additional notes]
		Element Separator	AN	1			*
	GS03	Application Receiver's Code	AN	2/15	124	R	(Receiver ID) [See Overview for additional notes]
		Element Separator	AN	1			*
	GS04	Date	DT	8	373	R	(CCYYMMDD)
		Element Separator	AN	1			*
	GS05	Time	TM	4/8	337	R	(HHMM)
		Element Separator	AN	1			*
	GS06	Group Control Number	N0	1/9	28	R	(Assigned by Sender)
		Element Separator	AN	1			*
	GS07	Responsible Agency Code	ID	1/2	455	R	X
		Element Separator	AN	1			*
	GS08	Version / Release Code	AN	1/12	480	R	ØØ4Ø1ØXØ97A1
		Segment End	B	1			~
	ST	Transaction Set Header		2		R	ST
		Element Separator	AN	1			*
	ST01	Transaction Set Identifier Code	ID	3	143	R	837

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Element Separator	AN	1			*
	ST02	Transaction Set Control Number	AN	4/9	329	R	(Sequential number assigned by sender ST and SE must be equivalent)
		Segment End	B	1			~
	BHT	Beginning Hierarchical Transaction Segment	ID	3		R	BHT
		Element Separator	AN	1			*
	BHT01	Hierarchical Structure Code	ID	4	1005	R	ØØ19
		Element Separator	AN	1			*
	BHT02	Transaction Set Purpose Code	ID	2	353	R	
		Element Separator	AN	1			*
	BHT03	Reference identification	AN	1/30	127	S	(Submitter Transaction Identifier).
		Element Separator	AN	1			*
	BHT04	Date	DT	8	373	R	CCYYMMDD
		Element Separator	AN	1			*
	BHT05	Time	TM	4/8	337	R	HHMM
		Element Separator	AN	1			*
	BHT06	Transaction Type Code	ID	2	640	R	CH
		Segment End	B	1			~
	REF	Transmission Type Identification	ID	3		R	REF
		Element Separator	AN	1			*
	REF01	Reference Identification Qualifier	ID	2/3	128	R	87
		Element Separator	AN	1			*
	REF02	Reference Identification	AN	1/30	127	R	ØØ4Ø1ØXØ97A1
		Segment End	B	1			~
1000A	NM1	Submitter Name	ID	3		R	
		Element Separator	AN	1			*
	NM101	Entity Identifier Code	ID	2/3	98	R	41
		Element Separator	AN	1			*
	NM102	Entity Type Qualifier	ID	1	1065	R	
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	NM103	Name Last or Organization Name	AN	1/35	1035	R	
		Element Separator	AN	1			*
	NM104	Name First	AN	1/25	1036	S	
		Element Separator	AN	1			*
	NM105	Name Middle	AN	1	1037	N	
		Element Separator	AN	1			*
	NM106	Name Prefix	AN	1/10	1038	N	
		Element Separator	AN	1			*
	NM107	Name Suffix	AN		1039	N	
		Element Separator	AN	1			*
	NM108	Identification Code Qualifier	ID	1/2	66	R	46
		Element Separator	AN	1			*
	NM109	Identification Code	AN	2/80	67	R	
		Segment End	B	1			~
1000A	PER	Submitter EDI Contact Information	ID	3		R	PER
		Element Separator	AN	1			*
	PER01	Contact Function Code	ID	2/2	366	R	IC
		Element Separator	AN	1			*
	PER02	Name	AN	1/60	93	R	
		Element Separator	AN	1			*
	PER03	Communication Number Qualifier	ID	2/2	365	R	
		Element Separator	AN	1			*
	PER04	Communication Number	AN	1/80	364	R	
		Segment End	B	1			~
1000B	NM1	Receiver Name	ID	3		R	
		Element Separator	AN	1			*
	NM101	Entity Identifier Code	ID	2/3	98	R	4Ø
		Element Separator	AN	1			*
	NM102	Entity Type Qualifier	ID	1	1065	R	2

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Element Separator	AN	1			*
	NM103	Name Last or Organization Name	AN	1/35	1035	R	
		Element Separator	AN	1			*
	NM104	Name First	AN	1/25	1036	N	
		Element Separator	AN	1			*
	NM105	Name Middle	AN	1	1037	N	
		Element Separator	AN	1			*
	NM106	Name Prefix	AN	1/10	1038	N	
		Element Separator	AN	1			*
	NM107	Name Suffix	AN		1039	N	
		Element Separator	AN	1			*
	NM108	Identification Code Qualifier	ID	1/2	66	R	46
		Element Separator	AN	1			*
	NM109	Identification Code	AN	2/80	67	R	
		Segment End	B	1			~
2000A	HL	Billing/Pay-to Provider Hierarchical Level	ID	2		R	HL
		Element Separator	AN	1			*
	HL01	Hierarchical ID Number	AN	1/12	628	R	1
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	HL03	Hierarchical Level Code	ID	1/2	735	R	2Ø
		Element Separator	AN	1			*
	HL04	Hierarchical Child Code	ID	1/1	736	R	1
		Segment End	B	1			~

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
2000A	PRV	Billing/Pay-to Provider Specialty Information	ID	3		S	PRV Idaho Medicaid recommends the taxonomy code be sent in 2000A loop when billing and rendering providers are the same, or when billing provider is a group provider and taxonomy is needed to associate the billing NPI to the Medicaid ID. If not supplied, billing taxonomy will be populated from 2310B PRV03.
		Element Separator	AN	1			*
	PRV01	Provider Code	ID	1/3	1221	R	
		Element Separator	AN	1			*
	PRV02	Reference Identification Qualifier	ID	2/3	128	R	ZZ
		Element Separator	AN	1			*
	PRV03	Reference Identification	AN	1/30	127	R	
		Segment End	B	1			~
2010AA	NM1	Billing Provider Name	ID	3		R	NM1
		Element Separator	AN	1			*
	NM101	Entity Identifier Code	ID	2/3	98	R	85
		Element Separator	AN	1			*
	NM102	Entity Type Qualifier	ID	1	1065	R	
		Element Separator	AN	1			*
	NM103	Name Last or Organization Name	AN	1/35	1035	R	
		Element Separator	AN	1			*
	NM104	Name First	AN	1/25	1036	S	
		Element Separator	AN	1			*
	NM105	Name Middle	AN	1/25	1037	S	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	NM107	Name Suffix	AN	1/10	1039	S	
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	NM108	Identification Code Qualifier	ID	1/2	66	R	24 = Employer's Identification Number 34 = Social Security Number XX = NPI
		Element Separator	AN	1			*
	NM109	Identification Code	AN	2/80	67	R	NPI. If "atypical" submit as Tax ID or SSN, whichever correlates with the value submitted as NM108.
		Segment End	B	1			~
2010AA	N3	Billing Provider Address	AN	2		R	N3
		Element Separator	AN	1			*
	N301	Address Information	AN	1/55	166	R	
		Element Separator	AN	1			*
	N302	Address Information	AN	1/55	166	S	Required if a second address line exists.
		Segment End	B	1			~
2010AA	N4	Billing Provider City/State/Zip Code	AN	2	19	R	N4
		Element Separator	AN	1			*
	N401	City Name	AN	2/30	19	R	
		Element Separator	AN	1			*
	N402	State or Province Code	ID	2/2	156	R	
		Element Separator	AN	1			*
	N403	Postal Code	ID	3/15	116	R	Full 9 digit zip code to ensure a correct match to the NPI registration.
		Segment End	B	1			~
2010AA	REF	Billing Provider Secondary Identification Number	ID	3		S	REF If NPI (qualifier "XX") is used in the NM108/09 of this loop, then either the Employer's Identification Number or the Social Security Number of the provider must be carried in this REF.
		Element Separator	AN	1			*
	REF01	Reference Identification Qualifier	ID	2/3	128	R	"Atypical" providers will continue to use the "1D" qualifier with the Medicaid Provider Number.

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Element Separator	AN	1			*
	REF02	Reference Identification	ID	1/30	127	R	“Atypical” providers will continue to use the Medicaid Provider Number.
		Segment End	B	1			~
2010AB	NM1	Pay-To Provider Name	ID	3		S	NM1 If both 2010AA and 2010AB Loops are used, Loop 2010AB will take priority over the 2010AA Loop.
		Element Separator	AN	1			*
	NM101	Entity Identifier Code	ID	2/3	98	R	87
		Element Separator	AN	1			*
	NM102	Entity Type Qualifier	ID	1/1	1065	R	
		Element Separator	AN	1			*
	NM103	Name Last or Organization Name	AN	1/35	1035	R	
		Element Separator	AN	1			*
	NM104	Name First	AN	1/25	1036	S	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	NM107	Name Suffix	AN	1/10	1039	S	
		Element Separator	AN	1			*
	NM108	Identification Code Qualifier	ID	1/2	66	R	24 = Employer’s Identification Number 34 = Social Security Number XX = NPI
		Element Separator	AN	1			*
	NM109	Identification Code	AN	2/80	67	R	NPI. If "atypical" submit as Tax ID or SSN, whichever correlates with the value submitted as NM108.
		Segment End	B	1			~
2010AB	N3	Pay-To Provider Address	AN	2		R	N3
		Element Separator	AN	1			*
	N301	Address Information	AN	1/55	166	R	

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Element Separator	AN	1			*
	N302	Address Information	AN	1/55	166	S	Required in a second address line exists.
		Segment End	B	1			~
2010AB	N4	Pay-To Provider City/State/Zip Code	AN	2	19	R	N4
		Element Separator	AN	1			*
	N401	City Name	AN	2/30	19	R	
		Element Separator	AN	1			*
	N402	State or Province Code	ID	2/2	156	R	
		Element Separator	AN	1			*
	N403	Postal Code	ID	3/15	116	R	Full 9 digit zip code to ensure a correct match to the NPI registration.
		Segment End	B	1			~
2010AB	REF	Billing Provider Secondary Identification	ID	3		S	REF If NPI (qualifier "XX") is used in the NM108/09 of this loop, then either the Employer's Identification Number or the Social Security Number of the provider must be carried in this REF.
		Element Separator	AN	1			*
	REF01	Reference Identification Qualifier	ID	2/3	128	R	"Atypical" providers will continue to use the "1D" qualifier with the Medicaid Provider Number.
	REF02	Reference Identification	AN	1/30	127	R	"Atypical" providers will continue to use the Medicaid Provider Number.
2000B	HL	Subscriber Hierarchical Level	ID	2		R	HL
		Element Separator	AN	1			*
	HL01	Hierarchical ID Number	AN	1/12	628	R	
		Element Separator	AN	1			*
	HL02	Hierarchical Parent ID Number	AN	1/12	734	R	
		Element Separator	AN	1			*
	HL03	Hierarchical Level Code	ID	1/2	735	R	22
		Element Separator	AN	1			*
	HL04	Hierarchical Child Code	ID	1	736	R	Ø

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Segment End	B	1			~
2000B	SBR	Subscriber Information	ID	3		R	SBR
		Element Separator	AN	1			*
	SBR01	Payer Responsibility Sequence Number Code	ID	1	1138	R	
		Element Separator	AN	1			*
	SBR02	Individual Relationship Code	ID	2	1069	S	
		Element Separator	AN	1			*
	SBR03	Reference Identification	AN	1/30	127	S	
		Element Separator	AN	1			*
	SBR04	Name	AN	1/60	93	S	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	SBR06	Coordination of Benefits Code	ID	1	1143	R	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	SBR09	Claim Filing Indicator Code	ID	1/2	1032	S	
		Segment End	B	1			~
2010BA	NM1	Subscriber Name	ID	3		R	NM1
		Element Separator	AN	1			*
	NM101	Entity Identifier Code	ID	2/3	98	R	IL
		Element Separator	AN	1			*
	NM102	Entity Type Qualifier	ID	1	1065	R	
		Element Separator	AN	1			*
	NM103	Name Last or Organization Name	AN	1/35	1035	R	
		Element Separator	AN	1			*
	NM104	Name First	AN	1/25	1036	S	
		Element Separator	AN	1			*
	NM105	Name Middle	AN	1/25	1037	S	
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Element Separator	AN	1			*
	NM107	Name Suffix	AN	1/10	1039	S	
		Element Separator	AN	1			*
	NM108	Identification Code Qualifier	ID	1/2	66	S	Required if NM1Ø2 = 1
		Element Separator	AN	1			*
	NM109	Identification Code	AN	2/80	67	S	[Subscriber Primary Identifier]
		Segment End	B	1			~
2300	CLM	Claim Information	ID	3		R	CLM
		Element Separator	AN	1			*
	CLM01	Claim Submitter's Identifier	AN	1/38 *(1/20)*	1028	R	[Patient Account Number]
		Element Separator	AN	1			*
	CLM02	Monetary Amount	R	1/18	782	R	[Total Claim Charges]
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	CLM05-1	Facility Code Value	AN	1/2	1331	R	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	CLM05-3	Claim Frequency Type Code	ID	1	1325	R	[Claim Frequency Code] 1 - ORIGINAL 7 - REPLACEMENT 8 - VOID
		Element Separator	AN	1			*
	CLM06	Yes/No Condition or Response Code	ID	1	1073	R	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	CLM08	Yes/No Condition or Response Code	ID	1	1073	R	
		Element Separator	AN	1			*
	CLM09	Release of Information Code	ID	1	1363	R	
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Element Separator	AN	1			*
	CLM11-1	Related Causes Code	ID	2/3	1362	R	
		Component Element Separator		1			:
	CLM11-2	Related Causes Code	ID	2/3	1362	S	
		Component Element Separator		1			:
	CLM11-3	Related Causes Code	ID	2/3	1362	S	
		Component Element Separator		1			:
	CLM11-4	State or Province Code	ID	2	156	S	Required if CLM11-1, CLM11-2, or CLM11-3 = AA to identify the state in which the automobile accident occurred. Use state postal code.
		Component Element Separator		1			:
	CLM11-5	Country Code	ID	2/3	26	S	Required if the auto accident outside the U.S. to identify the country in which the accident occurred.
		Element Separator	AN	1			*
	CLM12	Special Program Code	ID	2/3	1366	S	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	CLM16	Provider Agreement Code	ID	1	1360	S	P
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	CLM20	Delay Reason Code	ID	1/2	1514	S	
		Segment End	B	1			~
2300	DTP	Date – Accident	ID	3		S	DTP
		Element Separator	AN	1			*
	DTP01	Date/Time Qualifier	ID	3	374	R	439
		Element Separator	AN	1			*
	DTP02	Date Time Period Format Qualifier	ID	2/3	1250	R	D8
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	DTP03	Date Time Period	AN	1/35	1251	R	
		Segment End	B	1			~
2300	DTP	Date - Service	ID	3		S	DTP
		Element Separator	AN	1			*
	DTP01	Date/Time Qualifier	ID	3	374	R	472
		Element Separator	AN	1			*
	DTP02	Date Time Period Format Qualifier	ID	2/3	1250	R	
		Element Separator	AN	1			*
	DTP03	Date Time Period	AN	1/35	1251	R	
		Segment End	B	1			~
2300	PWK	Claim Supplemental Information	ID	3		S	PWK
		Element Separator	AN	1			*
	PWK01	Report Type Code	ID	2	755	R	
		Element Separator	AN	1			*
	PWK02	Report Transmission Code	ID	1/2	756	R	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	PWK05	Identification Code Qualifier	ID	1/2	66	S	
		Element Separator	AN	1			*
	PWK06	Identification Code	AN	2/80	67	S	
		Segment End	B	1			~
2300	AMT	Patient Amount Paid	ID	3		S	AMT
		Element Separator	AN	1			*
	AMT01	Amount Qualifier Code	ID	1/3	522	R	F5
		Element Separator	AN	1			*
	AMT02	Monetary Amount	R	1/18	782	R	
		Segment End	B	1			~
2300	REF	Original Reference Number	ID	3		S	REF
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	REF01	Reference Identification Qualifier	ID	2/3	128	R	F8
		Element Separator	AN	1			*
	REF02	Reference Identification	AN	1/30	127	R	Enter the 15 digit original ICN
		Segment End	B	1			~
2300	REF	Prior Authorization or Referral Number	ID	3		S	REF
		Element Separator	AN	1			*
	REF01	Reference Identification Qualifier	ID	2/3	128	R	G1
		Element Separator	AN	1			*
	REF02	Reference Identification	AN	1/30	127	R	
		Segment End	B	1			~
2300	REF	Referral Identification	ID	3		S	REF
		Element Separator	AN	1			*
	REF01	Reference Identification Qualifier	ID	2/3	128	R	9F
		Element Separator	AN	1			*
	REF02	Reference Identification	AN	1/30	127	R	Healthy Connections number of the referring doctor.
		Segment End	B	1			~
2300	NTE	Claim Note	ID	3		S	NTE
		Element Separator	AN	1			*
	NTE01	Note Reference Code	ID	3	363	R	ADD
		Element Separator	AN	1			*
	NTE02	Description	AN	1/80	352	R	
		Segment End	B	1			~
2310A	NM	X	X	X	X	X	This loop and segment are required if a REF segment in loop 2300 where REF01 = '9F'.
2310A	NM1	Referring Provider Name	ID	3		S	NM1 [Referring Provider]
		Element Separator	AN	1			*
	NM101	Entity Identifier Code	ID	2/3	98	R	
		Element Separator	AN	1			*
	NM102	Entity Type Qualifier	ID	1	1065	R	

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Element Separator	AN	1			*
	NM103	Name Last or Organization Name	AN	1/35	1035	R	
		Element Separator	AN	1			*
	NM104	Name First	AN	1/25	1036	S	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	NM108	Identification Code Qualifier	ID	1/2	66	S	24 = Employer's Identification Number 34=Social Security Number XX=NPI
		Element Separator	AN	1			*
	NM109	Identification Code	AN	2/80	67	S	NPI. Refer to 2300 REF01 and REF02 for information about sending an Idaho Medicaid or Healthy Connection number for the referring doctor.
		Segment End	B	1			~
2310A	PRV	Referring Provider Specialty Information	ID	3		S	
		Element Separator	AN	1			*
	PRV01	Provider Code	ID	1/3	1221	R	RF
		Element Separator	AN	1			*
	PRV02	Reference Identification Qualifier	ID	2/3	128	R	ZZ
		Element Separator	AN	1			*
	PRV03	Reference Identification	AN	1/30	127	R	
		Segment End	B	1			~
2310A	REF	Referring Provider Secondary Identification	ID	3		S	
		Element Separator	AN	1			*
	REF01	Reference Identification Qualifier	ID	2/3	128	R	
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	REF02	Reference Identification	AN	1/30	127	R	
		Segment End	B	1			~
2310B	NM1	Rendering Provider Name	ID	3		S	NM1
		Element Separator	AN	1			*
	NM101	Entity Identifier Code	ID	2/3	98	R	82
		Element Separator	AN	1			*
	NM102	Entity Type Qualifier	ID	1	1065	R	
		Element Separator	AN	1			*
	NM103	Name Last or Organization Name	AN	1/35	1035	R	
		Element Separator	AN	1			*
	NM104	Name First	AN	1/25	1036	S	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	NM108	Identification Code Qualifier	ID	1/2	66	R	24 = Employer’s Identification Number 34 = Social Security Number XX = NPI
		Element Separator	AN	1			*
	NM109	Identification Code	AN	2/80	67	R	NPI. If "atypical" submit as Tax ID or SSN, whichever correlates with the value submitted as NM108.
		Segment End	B	1			~

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
2310B	PRV	Rendering Provider Specialty Information	ID	3		S	PRV Idaho Medicaid recommends the taxonomy code be sent in the 2310B loop when billing and rendering providers are different, where taxonomy is needed to associate the rendering NPI to the Medicaid ID, and where a claim-level rendering provider is used to populate service-level rendering provider information on the claim. If 2420A PRV03 is not supplied at the service-level, taxonomy will be populated from 2310B PRV03 as the default taxonomy for the entire claim or, if 2310B is not supplied, then 2000A PRV03 is used as the default taxonomy for the entire claim.
		Element Separator	AN	1			*
	PRV01	Provider Code	ID	1/3	1221	R	PE
		Element Separator	AN	1			*
	PRV02	Reference Identification Qualifier	ID	2/3	128	R	ZZ
		Element Separator	AN	1			*
	PRV03	Reference Identification	AN	1/30	127	R	
		Segment End	B	1			~
2310B	REF	Rendering Provider Secondary Identification	ID	3		S	REF
		Element Separator	AN	1			*
	REF01	Reference Identification Qualifier	ID	2/3	128	R	“Atypical” providers will continue to use the “1D” qualifier with the Medicaid Provider Number.
		Element Separator	AN	1			*
	REF02	Reference Identification	AN	1/30	127	R	“Atypical” providers will continue to use the Medicaid Provider Number.
		Segment End	B	1			~
2320	SBR	Other Subscriber Information	ID	3		S	SBR
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	SBR01	Payer Responsibility Sequence Number Code	ID	1	1138	R	
		Element Separator	AN	1			*
	SBR02	Individual Relationship Code	ID	2	1069	R	
		Element Separator	AN	1			*
	SBR03	Reference Identification	AN	1/30	127	S	[Insured Group or Policy Number]
		Element Separator	AN	1			*
	SBR04	Name	AN	1/60	93	S	[Policy Name]
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	SBR09	Claim Filing Indicator Code	ID	1/2	1032	S	
		Segment End	B	1			~
2320	CAS	Claim Level Adjustments	ID	3		S	
		Element Separator	AN	1			*
	CAS01	Claim Adjustment Group Code	ID	1/2	1033	R	
		Element Separator	AN	1			*
	CAS02	Claim Adjustment Reason Code	ID	1/5	1034	R	
		Element Separator	AN	1			*
	CAS03	Monetary Amount	R	1/18	782	R	
		Element Separator	AN	1			*
	CAS04	Quantity	R	1/15	380	S	
		Element Separator	AN	1			*
	CAS05	Claim Adjustment Reason Code	ID	1/5	1034	S	
		Element Separator	AN	1			*
	CAS06	Monetary Amount	R	1/18	782	S	
		Element Separator	AN	1			*
	CAS07	Quantity	R	1/15	380	S	
		Element Separator	AN	1			*
	CAS08	Claim Adjustment Reason Code	ID	1/5	1034	S	

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Element Separator	AN	1			*
	CAS09	Monetary Amount	R	1/18	782	S	
		Element Separator	AN	1			*
	CAS10	Quantity	R	1/15	380	S	
		Element Separator	AN	1			*
	CAS11	Claim Adjustment Reason Code	ID	1/5	1034	S	
		Element Separator	AN	1			*
	CAS12	Monetary Amount	R	1/18	782	S	
		Element Separator	AN	1			*
	CAS13	Quantity	R	1/15	380	S	
		Element Separator	AN	1			*
	CAS14	Claim Adjustment Reason Code	ID	1/5	1034	S	
		Element Separator	AN	1			*
	CAS15	Monetary Amount	R	1/18	782	S	
		Element Separator	AN	1			*
	CAS16	Quantity	R	1/15	380	S	
		Element Separator	AN	1			*
	CAS17	Claim Adjustment Reason Code	ID	1/5	1034	S	
		Element Separator	AN	1			*
	CAS18	Monetary Amount	R	1/18	782	S	
		Element Separator	AN	1			*
	CAS19	Quantity	R	1/15	380	S	
		Segment End	B	1			~
2320	AMT	Coordination of Benefits (COB) Payer Paid Amount	ID	3		S	
		Element Separator	AN	1			*
	AMT01	Amount Qualifier Code	ID	1/3	522	R	D
		Element Separator	AN	1			*
	AMT02	Monetary Amount	R	1/18	782	R	
		Segment End	B	1			~
2330A	NM1	Other Subscriber Name	ID	3		S	NM1
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	NM101	Entity Identifier Code	ID	2/3	98	R	IL
		Element Separator	AN	1			*
	NM102	Entity Type Qualifier	ID	1	1065	R	
		Element Separator	AN	1			*
	NM103	Name Last or Organization Name	AN	1/35	1035	R	
		Element Separator	AN	1			*
	NM104	Name First	AN	1/25	1036	S	
		Element Separator	AN	1			*
	NM105	Name Middle	AN	1/25	1037	S	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	NM108	Identification Code Qualifier	ID	1/2	66	R	
		Element Separator	AN	1			*
	NM109	Identification Code	AN	2/80	67	R	
		Segment End	B	1			~
2330B	NM1	Other Payer Name	ID	3		S	NM1
		Element Separator	AN	1			*
	NM101	Entity Identifier Code	ID	2/3	98	R	PR
		Element Separator	AN	1			*
	NM102	Entity Type Qualifier	ID	1	1065	R	2
		Element Separator	AN	1			*
	NM103	Name Last or Organization Name	AN	1/35	1035	R	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	NM108	Identification Code Qualifier	ID	1/2	66	R	PI
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	NM109	Identification Code	AN	2/80	67	R	
		Segment End	B	1			~
2400	LX	Service Line	ID	2		R	
		Element Separator	AN	1			*
	LX01	Assigned Number	N0	1/6	554	R	
		Segment End	B	1			~
2400	SV3	Dental Service	ID	3		R	SV3
		Element Separator	AN	1			*
	SV301-1	Product/Service ID Qualifier	ID	2	235	R	AD
		Component Element Separator		1			:
	SV301-2	Product/Service ID	AN	1/48	234	R	
		Component Element Separator		1			:
	SV301-3	Procedure Modifier	AN	2	1339	S	
		Component Element Separator		1			:
	SV301-4	Procedure Modifier	AN	2	1339	S	
		Component Element Separator		1			:
	SV301-5	Procedure Modifier	AN	2	1339	S	
		Component Element Separator		1			:
	SV301-6	Procedure Modifier	AN	2	1339	S	
		Element Separator	AN	1			*
	SV302	Monetary Amount	R	1/18	782	R	
		Element Separator	AN	1			*
	SV303	Facility Code Value	AN	1/2	1331	S	
		Element Separator	AN	1			*
	SV304-1	Oral Cavity Designation Code	ID	1/3	1361	R	
		Component Element Separator		1			:
	SV304-2	Oral Cavity Designation Code	ID	1/3	1361	S	
		Component Element Separator		1			:
	SV304-3	Oral Cavity Designation Code	ID	1/3	1361	S	
		Component Element Separator		1			:
	SV304-4	Oral Cavity Designation Code	ID	1/3	1361	S	
		Component Element Separator		1			:

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	SV304-5	Oral Cavity Designation Code	ID	1/3	1361	S	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	SV306	Quantity	R	1/15	380	R	
		Segment End	B	1			~
2400	TOO	Tooth Information	ID	3		S	TOO
		Element Separator	AN	1			*
	TOO01	Code List Qualifier Code	ID	1/3	1270	R	JP
		Element Separator	AN	1			*
	TOO02	Industry Code	AN	1/30	1271	S	
		Element Separator	AN	1			*
	TOO03-1	Tooth Surface Code	ID	1/2	1369	R	
		Component Element Separator		1			:
	TOO03-2	Tooth Surface Code	ID	1/2	1369	S	
		Component Element Separator		1			:
	TOO03-3	Tooth Surface Code	ID	1/2	1369	S	
		Component Element Separator		1			:
	TOO03-4	Tooth Surface Code	ID	1/2	1369	S	
		Component Element Separator		1			:
	TOO03-5	Tooth Surface Code	ID	1/2	1369	S	
		Segment End	B	1			~
2400	DTP	Date – Service	ID	3		S	
		Element Separator	AN	1			*
	DTP01	Date/Time Qualifier	ID	3	374	R	472
		Element Separator	AN	1			*
	DTP02	Date Time Period Format Qualifier	ID	2/3	1250	R	
		Element Separator	AN	1			*
	DTP03	Date Time Period	ID	1/35	1251	R	
		Segment End	B	1			~
2400	QTY	Anesthesia Quantity	ID	3		S	QTY
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	QTY01	Quantity Qualifier	ID	2	673	R	
		Element Separator	AN	1			*
	QTY02	Quantity	R	1/15	380	R	
		Segment End	B	1			~
2400	REF	Prior Authorization or Referral Number	ID	3		S	REF
		Element Separator	AN	1			*
	REF01	Reference Identification Qualifier	ID	2/3	128	R	G1
		Element Separator	AN	1			*
	REF02	Reference Identification	AN	1/30	127	R	
		Segment End	B	1			~
2400	REF	Line Item Control Number	ID	3		S	REF
		Element Separator	AN	1			*
	REF01	Reference Identification Qualifier	ID	2/3	128	R	6R
		Element Separator	AN	1			*
	REF02	Reference Identification	AN	1/30	127	R	
		Segment End	B	1			~
2400	NTE	Line Note	ID	3		S	NTE
		Element Separator	AN	1			*
	NTE01	Note Reference Code	ID	3	363	R	ADD
		Element Separator	AN	1			*
	NTE02	Description	AN	1/80	352	R	
		Segment End	B	1			~
2420A	NM1	Rendering Provider Name	ID	3		S	NM1
		Element Separator	AN	1			*
	NM101	Entity Identifier Code	ID	2/3	98	R	82
		Element Separator	AN	1			*
	NM102	Entity Type Qualifier	ID	1	1065	R	
		Element Separator	AN	1			*
	NM103	Name Last or Organization Name	AN	1/35	1035	R	

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Element Separator	AN	1			*
	NM104	Name First	AN	1/25	1036	S	
		Element Separator	AN	1			*
	NM105	Name Middle	AN	1/25	1037	S	
		Element Separator	AN	1			*
		Element Separator	AN	1			*
	NM107	Name Suffix	AN	1/10	1039	S	
		Element Separator	AN	1			*
	NM108	Identification Code Qualifier	ID	1/2	66	R	24 = Employer's Identification Number 34 = Social Security Number XX = NPI
		Element Separator	AN	1			*
	NM109	Identification Code	AN	2/80	67	R	NPI. If "atypical" submit as Tax ID or SSN, whichever correlates with the value submitted as NM108.
		Segment End	B	1			~
2420A	PRV	Rendering Provider Specialty Information	ID	3		R	PRV Idaho Medicaid recommends the taxonomy code be sent in 2420A loop when multiple service-level rendering providers are being submitted, and the taxonomy is needed to associate the service-level rendering NPI to the Medicaid ID. If 2420A is not supplied at the detail-level, the detail rendering taxonomy will be populated from the claim-level rendering taxonomy received in 2310B PRV03. If 2310B PRV03 is not supplied, it will be populated from 2000A PRV03 as the default taxonomy for the entire claim.
		Element Separator	AN	1			*
	PRV01	Provider Code	ID	1/3	1221	R	PE
		Element Separator	AN	1			*
	PRV02	Reference Identification Qualifier	ID	2/3	128	R	ZZ

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
		Element Separator	AN	1			*
	PRV03	Reference Identification	AN	1/30	127	R	[Provider Taxonomy Code]
		Segment End	B	1			~
2420A	REF	Rendering Provider Secondary Identification	ID	3		S	REF
		Element Separator	AN	1			*
	REF01	Reference Identification Qualifier	ID	2/3	128	R	“Atypical” providers will continue to use the “1D” qualifier with the Medicaid Provider Number.
		Element Separator	AN	1			*
	REF02	Reference Identification	AN	1/30	127	R	“Atypical” providers will continue to use the Medicaid Provider Number.
		Segment End	B	1			~
2430	SVD	Line Adjudication Information	ID	3		S	SVD
		Element Separator	AN	1			*
	SVD01	Identification Code	AN	2/80	67	R	
		Element Separator	AN	1			*
	SVD02	Monetary Amount	R	1/18	782	R	
		Element Separator	AN	1			*
	SVD03-1	Product/Service ID Qualifier	ID	2	235	R	
		Component Element Separator		1			:
	SVD03-2	Product/Service ID	AN	1/48	234	R	
		Component Element Separator		1			:
	SVD03-3	Procedure Modifier	AN	2	1339	S	
		Component Element Separator		1			:
	SVD03-4	Procedure Modifier	AN	2	1339	S	
		Component Element Separator		1			:
	SVD03-5	Procedure Modifier	AN	2	1339	S	
		Component Element Separator		1			:
	SVD03-6	Procedure Modifier	AN	2	1339	S	
		Component Element Separator		1			:
	SVD03-7	Description	AN	1/80	352	S	
		Element Separator	AN	1			*
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	SVD05	Quantity	R	1/15	380	R	
		Element Separator	AN	1			*
	SVD06	Assigned Number	N0	1/6	554	S	
		Segment End	B	1			~
2430	CAS	Line Adjustment	ID	3		S	CAS
		Element Separator	AN	1			*
	CAS01	Claim Adjustment Group Code	ID	1/2	1033	R	
		Element Separator	AN	1			*
	CAS02	Claim Adjustment Reason Code	ID	1/5	1034	R	
		Element Separator	AN	1			*
	CAS03	Monetary Amount	R	1/18	782	R	
		Element Separator	AN	1			*
	CAS04	Quantity	R	1/15	380	S	
		Element Separator	AN	1			*
	CAS05	Claim Adjustment Reason Code	ID	1/5	1034	S	
		Element Separator	AN	1			*
	CAS06	Monetary Amount	R	1/18	782	S	
		Element Separator	AN	1			*
	CAS07	Quantity	R	1/15	380	S	
		Element Separator	AN	1			*
	CAS08	Claim Adjustment Reason Code	ID	1/5	1034	S	
		Element Separator	AN	1			*
	CAS09	Monetary Amount	R	1/18	782	S	
		Element Separator	AN	1			*
	CAS10	Quantity	R	1/15	380	S	
		Element Separator	AN	1			*
	CAS11	Claim Adjustment Reason Code	ID	1/5	1034	S	
		Element Separator	AN	1			*
	CAS12	Monetary Amount	R	1/18	782	S	
		Element Separator	AN	1			*
	CAS13	Quantity	R	1/15	380	S	
		Element Separator	AN	1			*

Loop	Segment ID	Segment Name/ Data Element Name	Format	Length	DE Ref #	Req Des.	Value
	CAS14	Claim Adjustment Reason Code	ID	1/5	1034	S	
		Element Separator	AN	1			*
	CAS15	Monetary Amount	R	1/18	782	S	
		Element Separator	AN	1			*
	CAS16	Quantity	R	1/15	380	S	
		Element Separator	AN	1			*
	CAS17	Claim Adjustment Reason Code	ID	1/5	1034	S	
		Element Separator	AN	1			*
	CAS18	Monetary Amount	R	1/18	782	S	
		Element Separator	AN	1			*
	CAS19	Quantity	R	1/15	380	S	
		Segment End	B	1			~
TRAILER	SE	Transaction Set Trailer	ID	2		R	SE
		Element Separator	AN	1			*
	SE01	Number of Included Segments	N0	1/10	96	R	
		Element Separator	AN	1			*
	SE02	Transaction Set Control Number	AN	4/9	329	R	
		Segment End	B	1			~
	GE	Functional Group Trailer	ID	2		R	
		Element Separator	AN	1			*
	GE01	Number of Transaction Sets Included	N0	1/6	97	R	
		Element Separator	AN	1			*
	GE02	Group Control Number	N0	1/9	28	R	
		Segment End	B	1			~
	IEA	Interchange Control Number	ID	3		R	IEA
		Element Separator	AN	1			*
	IEA01	Number of Included Functional Groups	N0	1/5	I16	R	
		Element Separator	AN	1			*
	IEA02	Interchange Control Number	N0	9	I12	R	
		Segment End	B	1			~

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Field/Data Element	Record/Segment Field Occurs	Modification Description	Modification Date	Initials
2000A, 2310B, 2420A	PRV	Updated Value column with more descriptive information related to the taxonomy segment.	03/17/2008	PAA
2010AA	NM109	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2010AA	N302	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2010AA	N403	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2010AA	REF01	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2010AA	REF02	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2010AB	NM109	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2010AB	N403	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2010AB	REF01	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2010AB	REF02	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2300	REF02	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2310A	NM	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2310A	NM1	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2310A	NM108	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2310A	NM109	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2310A	REF01	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2310A	REF02	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2310B	NM109	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2310B	REF01	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2310B	REF02	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2420A	NM109	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2420A	REF01	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK
2420A	REF02	Updated to the current NPI standard, removed pre NPI references.	6/11/08	MEK