
Meritain Health

HIPAA 270/271 Transaction Standard Companion Guide

**Refers to the Implementation Guides
Based on ASC X12 version 005010X279A1**

May 2022

Disclosure Statement

This document is designed to outline the data elements required on all incoming benefit eligibility inquiries to Meritain Health, Inc., as well as those that will appear on Meritain's benefit eligibility responses.

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Preface

This Companion Guide to the v5010 ASC X12N Implementation Guides and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with Meritain Health, Inc. Transmissions based on this companion guide, used in tandem with the v5010 ASC X12N Implementation Guides, are compliant with both ASC X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

EDITOR'S NOTE:

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1 INTRODUCTION

This section describes how ASC X12N Implementation Guides (IGs) adopted under HIPAA will be detailed with the use of a table. The tables contain a row for each segment that Meritain Health has something additional, over and above, the information in the IGs. That information can:

1. Limit the repeat of loops, or segments
2. Limit the length of a simple data element
3. Specify a sub-set of the IGs internal code listings
4. Clarify the use of loops, segments, composite and simple data elements
5. Any other information tied directly to a loop, segment, composite or simple data element pertinent to trading electronically with Meritain Health

In addition to the row for each segment, one or more additional rows are used to describe Meritain Health’s usage for composite and simple data elements and for any other information. Notes and comments should be placed at the deepest level of detail. For example, a note about a code value should be placed on a row specifically for that code value, not in a general note about the segment.

The following table specifies the columns and suggested use of the rows for the detailed description of the transaction set companion guides.

Page #	Loop ID	Reference	Name	Codes	Length	Notes/Comments
193	2100C	NM1	Subscriber Name			This type of row always exists to indicate that a new segment has begun. It is always shaded at 10% and notes or comment about the segment itself goes in this cell.
195	2100C	NM109	Subscriber Primary Identifier		15	This type of row exists to limit the length of the specified data element.
196	2100C	REF	Subscriber Additional Identification			
197	2100C	REF01	Reference Identification Qualifier	18, 49, 6P, HJ, N6		These are the only codes transmitted by Meritain Health
			Plan Network Identification Number	N6		This type of row exists when a note for a particular code value is required. For example, this note may say that value N6 is the default. Not populating the first 3 columns makes it clear that the code value belongs to the row immediately above it.
218	2110C	EB	Subscriber Eligibility or Benefit Information			
231	2110C	EB13-1	Product/Service ID Qualifier	AD		This row illustrates how to indicate a component data element in the Reference column and also how to specify that only one code value is applicable.

SCOPE

This document has been written to be used in conjunction with the ASC X12N 005010X279A1 Health Care Eligibility Inquiry and Response Guide. The use of this document is solely for the purpose of clarification. Please note this guide is intended only as a supplement, and not as a replacement for, the ASC X12N 005010X279A1 implementation guide.

OVERVIEW

This document includes a detailed layout of the 270 and 271 transactions, displaying the complete loops and segments spelled out in the corresponding 005010X279A1 implementation guide, using the table format referred to in the introduction. The table for each transaction includes notes on specific segments and values Meritain Health requires in the inbound transaction, as well as what can be expected in the outbound transaction.

REFERENCES

ASC X12N 005010X279A1 Implementation Guide (available at wpc-edi.com)

ADDITIONAL INFORMATION

Meritain Health invites interested present and future trading partners to exchange these transactions with Meritain as a means of improving efficiency in checking benefit status, eliminating the delays present in checking status using phone or fax, providing a greater level of detail than phone or fax can provide, and adding a level of security through our encrypted transfers.

2 GETTING STARTED

WORKING WITH MERITAIN HEALTH

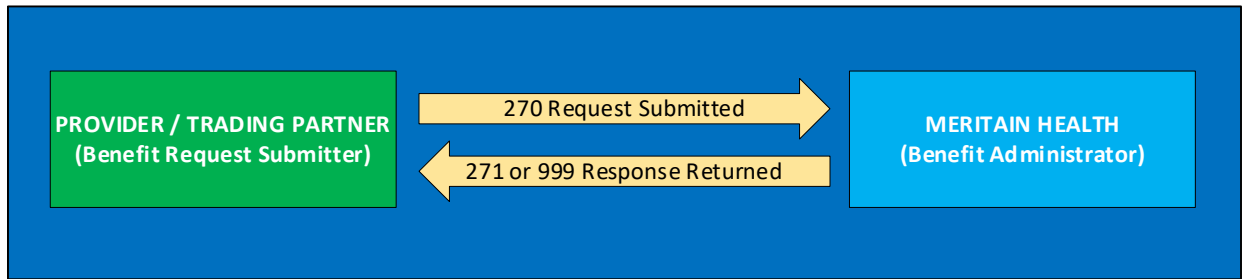
Meritain Health utilizes a SOAP web service for real-time request/response connectivity as prescribed by CAQH CORE Operating Rules. Authorized users of this web service require a username and password that are provided by Meritain Health. The web service is located at <https://svc.meritain.com/CORE/CORETransactions.svc>, with additional details available in the WSDLs at <https://svc.meritain.com/CORE/CORETransactions.svc?wsdl> and <https://svc.meritain.com/CORE/CORETransactions.svc?singleWsdL>.

Requests for additional information on becoming an authorized user, or questions on use of the web service should be directed to EDI@Meritain.com.

3 CONNECTIVITY WITH THE PAYER/COMMUNICATIONS

PROCESS FLOWS

The process flow for the 270/271 transaction exchange will involve a secure, direct connection between two entities: the provider/trading partner sending the benefit request, and Meritain Health providing the benefit response.



As shown by the above diagram, Meritain will either return a 271 response or a 999 acknowledgement upon receiving the 270. A 999 response is an indication that the request has failed structural validation and will need to be corrected and submitted before a 271 can be generated (for further detail on this process see section 8 of this document on acknowledgements & reports).

TRANSMISSION ADMINISTRATIVE PROCEDURES

Meritain Health will return a 271 response or 999 (in case of failed validation) within 20 seconds of receiving the 270 request to provide as close to a real-time response as possible. Automation is currently configured to run 24 hours a day in order to process requests as they come in at any time of day+.

RE-TRANSMISSION PROCEDURE

Meritain Health can only process files on a 1-to-1 basis, meaning we must receive a file to send a response, and that file should have unique control numbers in the ISA/GS/ST headers to distinguish it from past transmissions. Files already submitted to Meritain Health can only be retransmitted if the control numbers are updated to unique values.

PASSWORDS

A username and password will be provided by Meritain Health for use of the SOAP web service following acceptance of the Trading Partner Agreement.

4 CONTACT INFORMATION

EDI TECHNICAL ASSISTANCE

For technical assistance, please contact the Meritain EDI team edi@meritain.com

PROVIDER SERVICE NUMBER

For provider services, please contact 1-877-MERITAIN.

APPLICABLE WEBSITES/E-MAIL

For more about Meritain Health, you can check out our website at www.meritain.com or e-mail us at sales@meritain.com

5 CONTROL SEGMENTS/ENVELOPES

ISA-IEA

Below we have provided what Meritain Health expects as far the interchange control segments. It includes a description of expected sender and receiver codes, authorization information, and delimiters, for both the Interchange Control Header (ISA) and the Interchange Control Trailer (IEA).

ISA RECORD LAYOUT

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
ISA01	R	Authorization Information Qualifier	00 , 03	2	2
ISA02	R	Authorization Information	(leave blank)	10	10
ISA03	R	Security Information Qualifier	00 , 01	2	2
ISA04	R	Security Information	(leave blank)	10	10
ISA05	R	Interchange ID Qualifier	01, 14, 20, 27, 28, 29, 30, 33, ZZ	2	2
ISA06	R	Interchange Sender ID	(defined by sender)	15	15
ISA07	R	Interchange ID Qualifier	01, 14, 20, 27, 28, 29, 30, 33, ZZ	2	2
ISA08	R	Interchange Receiver ID	41124	15	15
ISA09	R	Interchange Date	YYMMDD format	6	6
ISA10	R	Interchange Time	HHMM format	4	4
ISA11	R	Repetition Separator	(defined by sender)	1	1
ISA12	R	Interchange Control Version No.	00501	5	5
ISA13	R	Interchange Control Number	(defined by sender)	9	9
ISA14	R	Acknowledgement Requested	0	1	1
ISA15	R	Usage Indicator	P, T	1	1
ISA16	R	Component Element Separator	:	1	1
		Segment Terminator	~	1	1

IEA RECORD LAYOUT

Reference Designator	Usage	Description	Possible Values	Min	Max
IEA01	R	Number of Included Functional Groups		1	5
IEA02	R	Group Control Number	(must match ISA13)	9	9

GS-GE

Below we have provided what Meritain Health expects as far as the functional group control segments. It includes a description of expected application sender and receiver codes, for both the Group Control Header (GS) and the Group Control Trailer (GE). On

inbound transmissions, we expect the trading partner to define the group control number to be sent. On outbound transmissions Meritain will generate a unique sequenced control number.

GS RECORD LAYOUT

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
GS01	R	Functional Identifier Code	HS (inbound), HB (outbound)	2	2
GS02	R	Application Sender's Code	(defined by sender)	2	15
GS03	R	Application Receiver's Code	41124	2	15
GS04	R	Date	CCYYMMDD fmt	8	8
GS05	R	Time	HHMM format	4	8
GS06	R	Group Control Number	(defined by sender)	1	9
GS07	R	Responsible Agency Code	X	1	2
GS08	R	Version/Release/Industry Identifier	005010X279A1	1	12

GE RECORD LAYOUT

Reference Designator	Usage	Description	Possible Values	Min	Max
GE01	R	Number of Transaction Sets Included		1	6
GE02	R	Group Control Number	(must match GS06)	1	9

ST-SE

Below we have provided what Meritain Health expects as far as the transaction set segments. It includes a description of expected transaction codes, for both the Transaction Set Header (ST) and the Transaction Set Trailer (SE). On inbound transmissions, we expect the trading partner to define the transaction set control number to be sent. On outbound transmissions Meritain will generate a unique sequenced control number.

ST RECORD LAYOUT

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
ST01	R	Transaction Set Identifier Code	270 (inbound requests), 271 (outbound responses)	3	3
ST02	R	Transaction Set Control Number	(incrementing no.)	4	9
ST03	R	Implementation Convention Ref.	005010X279A1	1	35

SE RECORD LAYOUT

Reference Designator	Usage	Description	Possible Values	Min	Max
SE01	R	Number of Included Segments		1	10
SE02	R	Transaction Set Control Number	(must match ST02)	4	9

6 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS

This section describes Meritain Health’s business rules:

1. Meritain can only accept incoming 270 transaction files of a size less than 15MB.
2. Meritain requires the following search elements on all transactions: first name, last name, date of birth, and member ID. The member ID should be the unique identifier assigned by Meritain Health- if not available, a SSN can be substituted but may not yield the most accurate results.
3. In Loop 2110C and 2110D on the 270 transaction, Meritain cannot accept a series of codes in the EQ01 field/segment (service type code). Only one code should be sent across per member inquiry.
4. In the EB03 fields/segments on the 271 transaction, which correspond to the EQ segments on the 270 mentioned above, Meritain will return a code of “30” on the 271 if the service type code sent in EQ01 on the 270 is not recognized or supported by Meritain.
5. On the 270 transaction, a code of “30” is considered a generic request. The 271 response will break down the request of “30” into these service type codes: **1,33,35,47,48,50,86,88,98,AL,MH,UC**. In addition, Meritain will return a code of “30” on the 271 response if the requested service type codes are not supported by Meritain.
6. **Downtime:** Although Meritain Health is dedicated to providing a stable environment which can deliver real-time responses 24 hours a day, there will be times where Meritain systems go down for maintenance, typically on designated weekends, so requests submitted during these times will not return responses until after the close of the maintenance window. Responses may also be delayed for requests submitted weekday mornings prior to business hours and evenings after business hours, due to system updates running during this time.

So to ensure as close to a real-time response as possible, **requests are best submitted between 8:00am and 8:00pm Eastern Standard Time, Monday through Friday**. Meritain Health cannot guarantee the timeliness of responses outside of these hours, but all requests received regardless of when they are submitted will be responded to.

In the event of an emergency, Meritain systems could possibly be brought down during normal business hours, which could impact our ability to deliver response transactions, but our staff are committed to minimizing such downtime should it occur.

The following chart (all times are EST) displays a color coded schedule for the likelihood of responses within 20 seconds of a submission. **Red** represents maintenance days and times when systems could potentially be down and inaccessible. **Yellow** represents days and times when systems should be up, but data exchange could be slowed by system updates during this time. **Green** represents days and times, coinciding with Meritain’s business hours, when no system maintenance should be in effect, and responses should be immediate. Scheduled maintenance will be communicated in advance to established trading partners via email, including impacted hours, estimated duration, and expected service performance during the maintenance period.

TIME	SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
12am	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
1am	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
2am	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
3am	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
4am	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
5am	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
6am	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
7am	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
8am	Red	Green	Green	Green	Green	Green	Yellow
9am	Red	Green	Green	Green	Green	Green	Yellow
10am	Red	Green	Green	Green	Green	Green	Yellow
11am	Red	Green	Green	Green	Green	Green	Yellow
12pm	Red	Green	Green	Green	Green	Green	Yellow
1pm	Red	Green	Green	Green	Green	Green	Yellow
2pm	Red	Green	Green	Green	Green	Green	Yellow
3pm	Red	Green	Green	Green	Green	Green	Yellow
4pm	Red	Green	Green	Green	Green	Green	Yellow
5pm	Red	Green	Green	Green	Green	Green	Yellow
6pm	Red	Green	Green	Green	Green	Green	Yellow
7pm	Red	Green	Green	Green	Green	Green	Yellow
8pm	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Red
9pm	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Red
10pm	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Red

7 ACKNOWLEDGEMENTS AND/OR REPORTS

As the 270 transaction is designed to be exchanged for a 271 response containing the benefit information sought in the 270 request, Meritain Health will not be sending any other sort of acknowledgement that the 270 has been received, unless there is a problem processing the request. Should the 270 fail structural validation upon receipt, a 999 acknowledgement file will be returned detailing the specific errors. No 271 response will be generated unless the 270 is corrected and resubmitted.

REPORT INVENTORY

999 Implementation Acknowledgement (005010X231A1)

8 TRADING PARTNER AGREEMENTS

This section contains general information concerning Trading Partner Agreements (TPA).

TRADING PARTNERS

An EDI Trading Partner is defined as any Meritain customer (provider, billing service, software vendor, employer group, financial institution, etc.) that transmits to, or receives electronic data from Meritain.

Payers have EDI Trading Partner Agreements that accompany the standard implementation guide to ensure the integrity of the electronic transaction process. The Trading Partner Agreement is related to the electronic exchange of information, whether the agreement is an entity or a part of a larger agreement, between each party to the agreement.

For example, a Trading Partner Agreement may specify among other things, the roles and responsibilities of each party to the agreement in conducting standard transactions, including request volumes that could potentially impact performance of the web service.

9 TRANSACTION SPECIFIC INFORMATION

This section describes how the 270 and 271 ASC X12N Implementation Guides (IGs) adopted under HIPAA will be detailed with the use of a table. The tables contain a row for each segment that Meritain Health has something additional, over and above, the information in the IGs. That information can:

1. Limit the repeat of loops, or segments
2. Limit the length of a simple data element
3. Specify a sub-set of the IGs internal code listings
4. Clarify the use of loops, segments, composite and simple data elements
5. Any other information tied directly to a loop, segment, composite or simple data element pertinent to trading electronically with Meritain Health

270 BENEFIT REQUEST TRANSACTION

Segment ID: BHT- Beginning of Hierarchical Transaction (required)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
BHT01	R	Hierarchical Structure Code	0022	4	4
BHT02	R	Transaction Set Purpose Code	01, 13	2	2
BHT03	S	Reference Identification	(defined by sender)	1	50
BHT04	R	Date	CCYYMMDD fmt	8	8
BHT05	R	Time	HHMM format	4	8
BHT06	S	Transaction Type Code	RT	2	2

2000A LOOP

Segment ID: HL- Information Source Level (required)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
HL01	R	Hierarchical ID Number	(incrementing no.)	1	12
HL02	NU	Hierarchical Parent ID Number		1	12
HL03	R	Hierarchical Level Code	20	1	2
HL04	R	Hierarchical Child Code	1	1	1

2100A LOOP

Segment ID: NM1- Information Source Name (required)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
NM101	R	Entity Identifier Code	2B , 36, GP, P5, PR	2	3
NM102	R	Entity Type Qualifier	1, 2	1	1
NM103	R	Name Last or Organization Name	MERITAIN HEALTH	1	60
NM104	S	Name First		1	35
NM105	S	Name Middle		1	25
NM106	NU	Name Prefix		1	10
NM107	S	Name Suffix		1	10
NM108	R	Identification Code Qualifier	24, 46, FI, NI, PI , XV, XX	1	2
NM109	R	Identification Code	64157	2	80
NM110	NU	Entity Relationship Code		2	2
NM111	NU	Entity Identifier Code		2	3
NM112	NU	Name Last or Organization Name		1	60

2000B LOOP**Segment ID: HL- Information Receiver Level (required)**

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
HL01	R	Hierarchical ID Number	(incrementing no.)	1	12
HL02	NU	Hierarchical Parent ID Number		1	12
HL03	R	Hierarchical Level Code	21	1	2
HL04	R	Hierarchical Child Code	1	1	1

2100B LOOP**Segment ID: NM1- Information Receiver Name (required)**

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
NM101	R	Entity Identifier Code	1P, 2B, 36, 80, FA, GP, P5, PR	2	3
NM102	R	Entity Type Qualifier	1, 2	1	1
NM103	R	Name Last or Organization Name	(defined by sender)	1	60
NM104	S	Name First		1	35
NM105	S	Name Middle		1	25
NM106	NU	Name Prefix		1	10
NM107	S	Name Suffix		1	10
NM108	R	Identification Code Qualifier	24, 34, FI, PI, PP, SV, XX	1	2
NM109	R	Identification Code	(defined by sender)	2	80
NM110	NU	Entity Relationship Code		2	2
NM111	NU	Entity Identifier Code		2	3
NM112	NU	Name Last or Organization Name		1	60

Segment ID: REF- Information Receiver Additional Identification (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
REF01	R	Reference Identification Qualifier	0B, 1C, 1D, 1J, 4A, CT, EL, EO, HPI, JD, N5, N7, Q4, SY, TJ	2	3
REF02	R	Reference Identification		1	50
REF03	S	Description		1	80
REF04	NU	Reference Identifier			

Segment ID: N3- Information Receiver Address (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
N301	R	Address Information		1	55
N302	S	Address Information		1	55

Segment ID: N4- Information Receiver City/State/Zip Code (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
N401	R	City Name		2	30
N402	S	State or Province Code		2	2
N403	S	Postal Code		3	15
N404	S	Country Code		2	3
N405	NU	Location Qualifier		1	2
N406	NU	Location Identifier		1	30
N407	S	Country Subdivision Code		1	3

Segment ID: PRV- Information Receiver Provider Information (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
PRV01	R	Provider Code	AD, AT, BI, CO, CV, H, HH, LA, OT, P1, P2, PC, PE, R, RF, SB, SK, SU	1	3
PRV02	S	Reference Identification Qualifier	PXC	2	3
PRV03	S	Reference Identification		1	50
PRV04	NU	State or Province Code		2	2
PRV05	NU	Provider Specialty Information			
PRV06	NU	Provider Organization Code		3	3

2000C LOOP

Segment ID: HL- Subscriber Level (required)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
HL01	R	Hierarchical ID Number	(incrementing no.)	1	12
HL02	R	Hierarchical Parent ID Number	(# in previous HL)	1	12
HL03	R	Hierarchical Level Code	22	1	2
HL04	R	Hierarchical Child Code	0, 1	1	1

Segment ID: TRN- Subscriber Trace Number (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
TRN01	R	Trace Type Code	1	1	2
TRN02	R	Reference Identification		1	50
TRN03	R	Originating Company Identifier		10	10
TRN04	S	Reference Identification		1	50

2100C LOOP

Segment ID: NM1- Subscriber Name (required)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
NM101	R	Entity Identifier Code	IL	2	3
NM102	R	Entity Type Qualifier	1, 2	1	1
NM103	S	Name Last or Organization Name		1	60
NM104	S	Name First		1	35
NM105	S	Name Middle		1	25
NM106	NU	Name Prefix		1	10
NM107	S	Name Suffix		1	10
NM108	S	Identification Code Qualifier	II, MI	1	2
NM109	S	Identification Code		2	80
NM110	NU	Entity Relationship Code		2	2
NM111	NU	Entity Identifier Code		2	3
NM112	NU	Name Last or Organization Name		1	60

Segment ID: REF- Subscriber Additional Identification (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
REF01	R	Reference Identification Qualifier	18, 1L, 1W, 3H, 6P, CT, EA, EJ, F6, GH, HJ, IG, N6, NQ, SY, Y4	2	3
REF02	R	Reference Identification		1	50
REF03	NU	Description		1	80
REF04	NU	Reference Identifier			

Segment ID: N3- Subscriber Address (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
N301	R	Address Information		1	55
N302	S	Address Information		1	55

Segment ID: N4- Subscriber City/State/Zip Code (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
N401	R	City Name		2	30
N402	S	State or Province Code		2	2
N403	S	Postal Code		3	15
N404	S	Country Code		2	3
N405	NU	Location Qualifier		1	2
N406	NU	Location Identifier		1	30
N407	S	Country Subdivision Code		1	3

Segment ID: PRV- Provider Information (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
PRV01	R	Provider Code	AD, AT, BI, CO, CV, H, HH, LA, OT, P1, P2, PC, PE, R, RF, SK, SU	1	3
PRV02	S	Reference Identification Qualifier	9K, D3, EI, HPI, PXC, SY, TJ	2	3
PRV03	S	Reference Identification		1	50
PRV04	NU	State or Province Code		2	2
PRV05	NU	Provider Specialty Information			
PRV06	NU	Provider Organization Code		3	3

Segment ID: DMG- Subscriber Demographic Information (situational, but Meritain requires date of birth)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
DMG01	S	Date Time Period Format Qualifier	D8	2	3
DMG02	S	Date Time Period		1	35
DMG03	S	Gender Code	F, M	1	1
DMG04	NU	Marital Status Code		1	1
DMG05	NU	Race or Ethnicity Code		1	1
DMG06	NU	Citizenship Status Code		1	2
DMG07	NU	Country Code		2	3
DMG08	NU	Basis of Verification Code		1	2
DMG09	NU	Quantity		1	15
DMG10	NU	Code List Qualifier Code		1	3
DMG11	NU	Industry Code		1	30

Segment ID: INS- Subscriber Relationship (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
INS01	R	Yes/No Condition or Response Cd	Y	1	1
INS02	R	Individual Relationship Code	18	2	2
INS03	NU	Maintenance Type Code		3	3
INS04	NU	Maintenance Reason Code		2	3
INS05	NU	Benefit Status Code		1	1
INS06	NU	Medicare Plan Code		1	1
INS07	NU	COBRA Qualifying		1	2
INS08	NU	Employment Status Code		2	2
INS09	NU	Student Status Code		1	1
INS10	NU	Yes/No Condition or Response Cd		1	1
INS11	NU	Date Time Period Format Qualifier		2	3
INS12	NU	Date Time Period		1	35
INS13	NU	Confidentiality Code		1	1
INS14	NU	City Name		2	30
INS15	NU	State or Province Code		2	2
INS16	NU	Country Code		2	3
INS17	R	Number		1	8

Segment ID: HI- Subscriber Health Care Diagnosis Code (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
HI01	R	Health Care Code Information			
HI01-1	R	Code List Qualifier Code	ABK, BK	1	3
HI01-2	R	Industry Code		1	30
HI01-3	NU	Date Time Period Format Qualifier		2	3
HI01-4	NU	Date Time Period		1	35
HI01-5	NU	Monetary Amount		1	18
HI01-6	NU	Quantity		1	15
HI01-7	NU	Version Identifier		1	30
HI01-8	NU	Industry Code		1	30
HI01-9	NU	Yes/No Condition or Response Cd		1	1
HI02	S	Health Care Code Information			
HI02-1	R	Code List Qualifier Code	ABF, BF	1	3
HI02-2	R	Industry Code		1	30
HI02-3	NU	Date Time Period Format Qualifier		2	3
HI02-4	NU	Date Time Period		1	35
HI02-5	NU	Monetary Amount		1	18
HI02-6	NU	Quantity		1	15
HI02-7	NU	Version Identifier		1	30
HI02-8	NU	Industry Code		1	30
HI02-9	NU	Yes/No Condition or Response Cd		1	1
HI03	S	Health Care Code Information			
HI03-1	R	Code List Qualifier Code	ABF, BF	1	3
HI03-2	R	Industry Code		1	30
HI03-3	NU	Date Time Period Format Qualifier		2	3
HI03-4	NU	Date Time Period		1	35

HI03-5	NU	Monetary Amount		1	18
HI03-6	NU	Quantity		1	15
HI03-7	NU	Version Identifier		1	30
HI03-8	NU	Industry Code		1	30
HI03-9	NU	Yes/No Condition or Response Cd		1	1
HI04	S	Health Care Code Information			
HI04-1	R	Code List Qualifier Code	ABF, BF	1	3
HI04-2	R	Industry Code		1	30
HI04-3	NU	Date Time Period Format Qualifier		2	3
HI04-4	NU	Date Time Period		1	35
HI04-5	NU	Monetary Amount		1	18
HI04-6	NU	Quantity		1	15
HI04-7	NU	Version Identifier		1	30
HI04-8	NU	Industry Code		1	30
HI04-9	NU	Yes/No Condition or Response Cd		1	1
HI05	S	Health Care Code Information			
HI05-1	R	Code List Qualifier Code	ABF, BF	1	3
HI05-2	R	Industry Code		1	30
HI05-3	NU	Date Time Period Format Qualifier		2	3
HI05-4	NU	Date Time Period		1	35
HI05-5	NU	Monetary Amount		1	18
HI05-6	NU	Quantity		1	15
HI05-7	NU	Version Identifier		1	30
HI05-8	NU	Industry Code		1	30
HI05-9	NU	Yes/No Condition or Response Cd		1	1
HI06	S	Health Care Code Information			
HI06-1	R	Code List Qualifier Code	ABF, BF	1	3
HI06-2	R	Industry Code		1	30
HI06-3	NU	Date Time Period Format Qualifier		2	3
HI06-4	NU	Date Time Period		1	35
HI06-5	NU	Monetary Amount		1	18
HI06-6	NU	Quantity		1	15
HI06-7	NU	Version Identifier		1	30
HI06-8	NU	Industry Code		1	30
HI06-9	NU	Yes/No Condition or Response Cd		1	1
HI07	S	Health Care Code Information			
HI07-1	R	Code List Qualifier Code	ABF, BF	1	3
HI07-2	R	Industry Code		1	30
HI07-3	NU	Date Time Period Format Qualifier		2	3
HI07-4	NU	Date Time Period		1	35
HI07-5	NU	Monetary Amount		1	18
HI07-6	NU	Quantity		1	15
HI07-7	NU	Version Identifier		1	30
HI07-8	NU	Industry Code		1	30
HI07-9	NU	Yes/No Condition or Response Cd		1	1
HI08	S	Health Care Code Information			
HI08-1	R	Code List Qualifier Code	ABF, BF	1	3
HI08-2	R	Industry Code		1	30
HI08-3	NU	Date Time Period Format Qualifier		2	3
HI08-4	NU	Date Time Period		1	35
HI08-5	NU	Monetary Amount		1	18
HI08-6	NU	Quantity		1	15
HI08-7	NU	Version Identifier		1	30

HI08-8	NU	Industry Code		1	30
HI08-9	NU	Yes/No Condition or Response Cd		1	1
HI09	NU	Health Care Code Information			
HI10	NU	Health Care Code Information			
HI11	NU	Health Care Code Information			
HI12	NU	Health Care Code Information			

Segment ID: DTP- Subscriber Date (situational)

PLEASE NOTE- Meritain can only accept a date in the D8 format (YYYYMMDD) for the subscriber date. Date ranges cannot be accepted.

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
DTP01	R	Date Time Qualifier	102, 291	3	3
DTP02	R	Date Time Period Format Qualifier	D8	2	3
DTP03	R	Date Time Period		1	35

2110C LOOP

Segment ID: EQ- Subscriber Eligibility or Benefit Inquiry Information (situational)

PLEASE NOTE- Meritain will only accept one service type code as delivered in the EQ segment- we cannot accept a series of codes separated by the repetition separator in EQ01).

The following are the active Meritain Service Type Codes:

1,2,3,4,5,6,7,8,9,12,13,18,20,33,35,40,41,42,45,47,48,50,51,52,53,54,60,62,65,68,73,76,78,80,81,82,83,84,86,88,93,98,99,A0,A3,A4,,A6,A7,A8,AD,AE,AF,AG,AI,AL,BG,BH,MH,ON,UC

Any Service Type Codes listed in the table below that do not appear in the list above are not active.

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
EQ01	S	Service Type Code	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 30, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, A0,	1	2

			A1, A2, A3, A4, A5. A6. A7. A8. A9, AA, AB, AC, AD, AE, AF, AG, AH, AI, AJ, AK, AL, AM, AN, AO, AQ, AR, B1, B2, B3, BA, BB, BC, BD, BE, BF, BG, BH, BI, BJ, BK, BL, BM, BN, BP, BQ, BR, BS, BT, BU, BV, BW, BX, BY, BZ, C1, CA, CB, CC, CD, CE, CF, CG, CH, CI, CJ, CK, CL, CM, CN, CO, CP, CQ, DG, DM, DS, GF, GN, GY, IC, MH, NI, ON, PT, PU, RN, RT, TC, TN, UC		
EQ02	S	Composite Medical Procedure Identifier			
EQ02-1	R	Product/Service ID Qualifier	AD, CJ, HC, ID, IV, ND, ZZ	2	2
EQ02-2	R	Product/Service ID		1	48
EQ02-3	S	Procedure Modifier		2	2
EQ02-4	S	Procedure Modifier		2	2
EQ02-5	S	Procedure Modifier		2	2
EQ02-6	S	Procedure Modifier		2	2
EQ02-7	NU	Description		1	80
EQ02-8	NU	Product/Service ID		1	48
EQ03	S	Coverage Level Code	FAM	3	3
EQ04	NU	Insurance Type Code		1	3
EQ05	S	Composite Diagnosis Code Pointer			
EQ05-1	R	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2
EQ05-2	S	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2
EQ05-3	S	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2
EQ05-4	S	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2

Segment ID: DTP- Subscriber Eligibility/Benefit Date (situational)

PLEASE NOTE- Meritain can only accept a date in the D8 format (YYYYMMDD) for the subscriber eligibility/benefit date. Date ranges cannot be accepted.

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
DTP01	R	Date Time Qualifier	291	3	3
DTP02	R	Date Time Period Format Qualifier	D8	2	3
DTP03	R	Date Time Period		1	35

2000D LOOP

Segment ID: HL- Dependent Level (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
HL01	R	Hierarchical ID Number		1	12
HL02	R	Hierarchical Parent ID Number		1	12
HL03	R	Hierarchical Level Code	23	1	2
HL04	R	Hierarchical Child Code	0	1	1

Segment ID: TRN- Dependent Trace Number (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
TRN01	R	Trace Type Code	1	1	2
TRN02	R	Reference Identification		1	50
TRN03	R	Originating Company Identifier		10	10
TRN04	S	Reference Identification		1	50

2100D LOOP

Segment ID: NM1- Dependent Name (required)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
NM101	R	Entity Identifier Code	3	2	3
NM102	R	Entity Type Qualifier	1	1	1
NM103	S	Name Last or Organization Name		1	60
NM104	S	Name First		1	35
NM105	S	Name Middle		1	25
NM106	NU	Name Prefix		1	10
NM107	S	Name Suffix		1	10
NM108	NU	Identification Code Qualifier		1	2
NM109	NU	Identification Code		2	80
NM110	NU	Entity Relationship Code		2	2
NM111	NU	Entity Identifier Code		2	3
NM112	NU	Name Last or Organization Name		1	60

Segment ID: REF- Dependent Additional Identification (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
REF01	R	Reference Identification Qualifier	18, 1L, 1W, 6P, CT, EA, EJ, F6, GH, HJ, IF, IG, MRC, N6, SY, Y4	2	3
REF02	R	Reference Identification		1	50

REF03	NU	Description		1	80
REF04	NU	Reference Identifier			

Segment ID: N3- Dependent Address (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
N301	R	Address Information		1	55
N302	S	Address Information		1	55

Segment ID: N4- Dependent City/State/Zip Code (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
N401	R	City Name		2	30
N402	S	State or Province Code		2	2
N403	S	Postal Code		3	15
N404	S	Country Code		2	3
N405	NU	Location Qualifier		1	2
N406	NU	Location Identifier		1	30
N407	S	Country Subdivision Code		1	3

Segment ID: PRV- Provider Information (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
PRV01	R	Provider Code	AD, AT, BI, CO, CV, H, HH, LA, OT, P1, P2, PC, PE, R, RF, SK, SU	1	3
PRV02	S	Reference Identification Qualifier	9K, D3, EI, HPI, PXC, SY, TJ	2	3
PRV03	S	Reference Identification		1	50
PRV04	NU	State or Province Code		2	2
PRV05	NU	Provider Specialty Information			
PRV06	NU	Provider Organization Code		3	3

Segment ID: DMG- Dependent Demographic Information (situational, but Meritain requires date of birth)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
DMG01	S	Date Time Period Format Qualifier	D8	2	3
DMG02	S	Date Time Period		1	35
DMG03	S	Gender Code	F, M	1	1

DMG04	NU	Marital Status Code		1	1
DMG05	NU	Race or Ethnicity Code		1	1
DMG06	NU	Citizenship Status Code		1	2
DMG07	NU	Country Code		2	3
DMG08	NU	Basis of Verification Code		1	2
DMG09	NU	Quantity		1	15
DMG10	NU	Code List Qualifier Code		1	3
DMG11	NU	Industry Code		1	30

Segment ID: INS- Dependent Relationship (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
INS01	R	Yes/No Condition or Response Cd	N	1	1
INS02	R	Individual Relationship Code	01, 19, 34	2	2
INS03	NU	Maintenance Type Code		3	3
INS04	NU	Maintenance Reason Code		2	3
INS05	NU	Benefit Status Code		1	1
INS06	NU	Medicare Plan Code		1	1
INS07	NU	COBRA Qualifying		1	2
INS08	NU	Employment Status Code		2	2
INS09	NU	Student Status Code		1	1
INS10	NU	Yes/No Condition or Response Cd		1	1
INS11	NU	Date Time Period Format Qualifier		2	3
INS12	NU	Date Time Period		1	35
INS13	NU	Confidentiality Code		1	1
INS14	NU	City Name		2	30
INS15	NU	State or Province Code		2	2
INS16	NU	Country Code		2	3
INS17	S	Number		1	9

Segment ID: HI- Dependent Health Care Diagnosis Code (situational)

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
HI01	R	Health Care Code Information			
HI01-1	R	Code List Qualifier Code	ABK, BK	1	3
HI01-2	R	Industry Code		1	30
HI01-3	NU	Date Time Period Format Qualifier		2	3
HI01-4	NU	Date Time Period		1	35
HI01-5	NU	Monetary Amount		1	18
HI01-6	NU	Quantity		1	15
HI01-7	NU	Version Identifier		1	30
HI01-8	NU	Industry Code		1	30
HI01-9	NU	Yes/No Condition or Response Cd		1	1
HI02	S	Health Care Code Information			
HI02-1	R	Code List Qualifier Code	ABF, BF	1	3
HI02-2	R	Industry Code		1	30
HI02-3	NU	Date Time Period Format Qualifier		2	3

HI02-4	NU	Date Time Period		1	35
HI02-5	NU	Monetary Amount		1	18
HI02-6	NU	Quantity		1	15
HI02-7	NU	Version Identifier		1	30
HI02-8	NU	Industry Code		1	30
HI02-9	NU	Yes/No Condition or Response Cd		1	1
HI03	S	Health Care Code Information			
HI03-1	R	Code List Qualifier Code	ABF, BF	1	3
HI03-2	R	Industry Code		1	30
HI03-3	NU	Date Time Period Format Qualifier		2	3
HI03-4	NU	Date Time Period		1	35
HI03-5	NU	Monetary Amount		1	18
HI03-6	NU	Quantity		1	15
HI03-7	NU	Version Identifier		1	30
HI03-8	NU	Industry Code		1	30
HI03-9	NU	Yes/No Condition or Response Cd		1	1
HI04	S	Health Care Code Information			
HI04-1	R	Code List Qualifier Code	ABF, BF	1	3
HI04-2	R	Industry Code		1	30
HI04-3	NU	Date Time Period Format Qualifier		2	3
HI04-4	NU	Date Time Period		1	35
HI04-5	NU	Monetary Amount		1	18
HI04-6	NU	Quantity		1	15
HI04-7	NU	Version Identifier		1	30
HI04-8	NU	Industry Code		1	30
HI04-9	NU	Yes/No Condition or Response Cd		1	1
HI05	S	Health Care Code Information			
HI05-1	R	Code List Qualifier Code	ABF, BF	1	3
HI05-2	R	Industry Code		1	30
HI05-3	NU	Date Time Period Format Qualifier		2	3
HI05-4	NU	Date Time Period		1	35
HI05-5	NU	Monetary Amount		1	18
HI05-6	NU	Quantity		1	15
HI05-7	NU	Version Identifier		1	30
HI05-8	NU	Industry Code		1	30
HI05-9	NU	Yes/No Condition or Response Cd		1	1
HI06	S	Health Care Code Information			
HI06-1	R	Code List Qualifier Code	ABF, BF	1	3
HI06-2	R	Industry Code		1	30
HI06-3	NU	Date Time Period Format Qualifier		2	3
HI06-4	NU	Date Time Period		1	35
HI06-5	NU	Monetary Amount		1	18
HI06-6	NU	Quantity		1	15
HI06-7	NU	Version Identifier		1	30
HI06-8	NU	Industry Code		1	30
HI06-9	NU	Yes/No Condition or Response Cd		1	1
HI07	S	Health Care Code Information			
HI07-1	R	Code List Qualifier Code	ABF, BF	1	3
HI07-2	R	Industry Code		1	30
HI07-3	NU	Date Time Period Format Qualifier		2	3
HI07-4	NU	Date Time Period		1	35
HI07-5	NU	Monetary Amount		1	18
HI07-6	NU	Quantity		1	15

HI07-7	NU	Version Identifier		1	30
HI07-8	NU	Industry Code		1	30
HI07-9	NU	Yes/No Condition or Response Cd		1	1
HI08	S	Health Care Code Information			
HI08-1	R	Code List Qualifier Code	ABF, BF	1	3
HI08-2	R	Industry Code		1	30
HI08-3	NU	Date Time Period Format Qualifier		2	3
HI08-4	NU	Date Time Period		1	35
HI08-5	NU	Monetary Amount		1	18
HI08-6	NU	Quantity		1	15
HI08-7	NU	Version Identifier		1	30
HI08-8	NU	Industry Code		1	30
HI08-9	NU	Yes/No Condition or Response Cd		1	1
HI09	NU	Health Care Code Information			
HI10	NU	Health Care Code Information			
HI11	NU	Health Care Code Information			
HI12	NU	Health Care Code Information			

Segment ID: DTP- Dependent Date (situational)

PLEASE NOTE- Meritain can only accept a date in the D8 format (YYYYMMDD) for the dependent date. Date ranges cannot be accepted.

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
DTP01	R	Date Time Qualifier	102, 291	3	3
DTP02	R	Date Time Period Format Qualifier	D8	2	3
DTP03	R	Date Time Period		1	35

Segment ID: EQ- Dependent Eligibility or Benefit Inquiry Information (required)

PLEASE NOTE- Meritain will only accept one service type code as delivered in the EQ segment- we cannot accept a series of codes separated by the repetition separator in EQ01).

The following are the active Meritain Service Type Codes:

1,2,3,4,5,6,7,8,9,12,13,18,20,33,35,40,41,42,45,47,48,50,51,52,53,54,60,62,65,68,73,76,78,80,81,82,83,84,86,88,93,98,99,A0,A3,A4,,A6,A7,A8,AD,AE,AF,AG,AI,AL,BG,BH,MH,ON,UC

Any Service Type Codes listed in the table below that do not appear in the list above are not active.

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
EQ01	S	Service Type Code	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 30, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41,	1	2

			42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, A0, A1, A2, A3, A4, A5, A6, A7, A8, A9, AA, AB, AC, AD, AE, AF, AG, AH, AI, AJ, AK, AL, AM, AN, AO, AQ, AR, B1, B2, B3, BA, BB, BC, BD, BE, BF, BG, BH, BI, BJ, BK, BL, BM, BN, BP, BQ, BR, BS, BT, BU, BV, BW, BX, BY, BZ, C1, CA, CB, CD, CE, CF, CG, CH, CI, CJ, CK, CL, CM, CN, CO, CP, CQ, DG, DM, DS, GF, GN, GY, IC, MH, NI, ON, PT, PU, RN, RT, TC, TN, UC		
EQ02	S	Composite Medical Procedure Identifier			
EQ02-1	R	Product/Service ID Qualifier	AD, CJ, HC, ID, IV, ND, ZZ	2	2
EQ02-2	R	Product/Service ID		1	48
EQ02-3	S	Procedure Modifier		2	2
EQ02-4	S	Procedure Modifier		2	2
EQ02-5	S	Procedure Modifier		2	2
EQ02-6	S	Procedure Modifier		2	2
EQ02-7	NU	Description		1	80
EQ02-8	NU	Product/Service ID		1	48
EQ03	NU	Coverage Level Code		3	3
EQ04	NU	Insurance Type Code		1	3
EQ05	S	Composite Diagnosis Code Pointer			
EQ05-1	R	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2
EQ05-2	S	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2
EQ05-3	S	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2
EQ05-4	S	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2

2110D LOOP

Segment ID: DTP- Dependent Eligibility/Benefit Date (situational)

PLEASE NOTE- Meritain can only accept a date in the D8 format (YYYYMMDD) for the dependent eligibility/benefit date. Date ranges cannot be accepted.

Reference Designator	Usage	Description	Possible Values (preferred in bold)	Min	Max
DTP01	R	Date Time Qualifier	291	3	3
DTP02	R	Date Time Period Format Qualifier	D8	2	3
DTP03	R	Date Time Period		1	35

271 BENEFIT RESPONSE TRANSACTION

Segment ID: BHT- Beginning of Hierarchical Transaction (required)

PLEASE NOTE: The BizTalk process that maps the XML to the X12 format will create this segment at processing time and mostly likely based upon other data in the XML

Reference Designator	Usage	Description	Possible Values	Min	Max
BHT01	R	Hierarchical Structure Code	0022	4	4
BHT02	R	Transaction Set Purpose Code	06, 11	2	2
BHT03	S	Reference Identification	(defined by sender)	1	50
BHT04	R	Date	CCYYMMDD fmt	8	8
BHT05	R	Time	HHMM format	4	8
BHT06	NU	Transaction Type Code		2	2

2000A LOOP

Segment ID: HL- Information Source Level (required)

PLEASE NOTE: BizTalk will generate based upon how it is coded. Normal situation when generating X12 responses.

Reference Designator	Usage	Description	Possible Values	Min	Max
HL01	R	Hierarchical ID Number	(incrementing no.)	1	12
HL02	NU	Hierarchical Parent ID Number		1	12
HL03	R	Hierarchical Level Code	20	1	2
HL04	R	Hierarchical Child Code	0, 1	1	1

2100A LOOP

Segment ID: NM1- Information Source Name (required)

Reference Designator	Usage	Description	Possible Values	Min	Max
NM101	R	Entity Identifier Code	PR	2	3
NM102	R	Entity Type Qualifier	2	1	1
NM103	R	Name Last or Organization Name	MERITAIN HEALTH	1	60
NM104	S	Name First		1	35
NM105	S	Name Middle		1	25
NM106	NU	Name Prefix		1	10
NM107	S	Name Suffix		1	10
NM108	R	Identification Code Qualifier	FI	1	2
NM109	R	Identification Code	161264154	2	80
NM110	NU	Entity Relationship Code		2	2
NM111	NU	Entity Identifier Code		2	3
NM112	NU	Name Last or Organization Name		1	60

Segment ID: PER- Information Source Contact Information (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
PER01	R	Contact Function Code	IC	2	2
PER02	S	Information Contact	EDI Team	1	60
PER03	S	Communication Number Qualifier	TE	2	2
PER04	S	Communication Number	7163195101	1	256
PER05	S	Communication Number Qualifier	EM	2	2
PER06	S	Communication Number	edi@meritain.com	1	256
PER07	S	Communication Number Qualifier		2	2
PER08	S	Communication Number		1	256
PER09	NU	Contact Inquiry Reference		1	20

2000B LOOP

Segment ID: HL- Information Receiver Level (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
HL01	R	Hierarchical ID Number		1	12
HL02	R	Hierarchical Parent ID Number		1	12
HL03	R	Hierarchical Level Code	21	1	2
HL04	R	Hierarchical Child Code	0, 1	1	1

2100B LOOP

Segment ID: NM1- Information Receiver Name (required)

Reference Designator	Usage	Description	Possible Values	Min	Max
NM101	R	Entity Identifier Code	1P, 2B, 36, 80, FA, GP, P5, PR	2	3
NM102	R	Entity Type Qualifier	1, 2	1	1
NM103	S	Name Last or Organization Name		1	60
NM104	S	Name First		1	35
NM105	S	Name Middle		1	25
NM106	NU	Name Prefix		1	10
NM107	S	Name Suffix		1	10
NM108	R	Identification Code Qualifier	24, 34, FI, PI, PP, SV, XV, XX	1	2
NM109	R	Identification Code		2	80
NM110	NU	Entity Relationship Code		2	2
NM111	NU	Entity Identifier Code		2	3
NM112	NU	Name Last or Organization Name		1	60

Segment ID: REF- Information Receiver Additional Identification (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
REF01	R	Reference Identification Qualifier	0B, 1C, 1D, 1J, 4A, CT, EL, EO, HPI, JD, N5, N7, Q4, SY, TJ	2	3
REF02	R	Reference Identification		1	50
REF03	S	Description		1	80
REF04	NU	Reference Identifier			

Segment ID: N3- Information Receiver Address (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
N301	R	Address Information		1	55
N302	S	Address Information		1	55

Segment ID: N4- Information Receiver City/State/Zip (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
N401	R	City Name		2	30
N402	S	State or Province Code		2	2
N403	S	Postal Code		3	15
N404	S	Country Code		2	3

N405	NU	Location Qualifier		1	2
N406	NU	Location Identifier		1	30
N407	S	Country Sub Code		1	3

Segment ID: PRV- Information Receiver Provider Information (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
PRV01	R	Provider Code	AD, AT, BI, CO, CV, H, HH, LA, OT, P1, P2, PC, PE, R, RF, SB, SK, SU	1	3
PRV02	S	Reference Identification Qualifier	PXC	2	3
PRV03	S	Reference Identification		1	50
PRV04	NU	State or Province Code		2	2
PRV05	NU	Provider Specialty Information			
PRV06	NU	Provider Organization Code		3	3

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Segment ID: HL- Subscriber Level (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
HL01	R	Hierarchical ID Number		1	12
HL02	R	Hierarchical Parent ID Number		1	12
HL03	R	Hierarchical Level Code	22	1	2
HL04	R	Hierarchical Child Code	0, 1	1	1

Segment ID: TRN- Subscriber Trace Number (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
TRN01	R	Trace Type Code	2	1	2
TRN02	R	Reference Identification		1	50
TRN03	R	Originating Company Identifier		10	10
TRN04	S	Reference Identification		1	50

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Segment ID: NM1- Subscriber Name (required)

Reference Designator	Usage	Description	Possible Values	Min	Max
NM101	R	Entity Identifier Code	IL	2	3
NM102	R	Entity Type Qualifier	1, 2	1	1
NM103	S	Name Last or Organization Name		1	60
NM104	S	Name First		1	35
NM105	S	Name Middle		1	25
NM106	NU	Name Prefix		1	10
NM107	S	Name Suffix		1	10
NM108	S	Identification Code Qualifier	MI	1	2
NM109	S	Identification Code		2	80
NM110	NU	Entity Relationship Code		2	2
NM111	NU	Entity Identifier Code		2	3
NM112	NU	Name Last or Organization Name		1	60

Segment ID: REF- Subscriber Additional Identification (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
REF01	R	Reference Identification Qualifier	18, 1L, 1W, 3H, 49, 6P, CE, CT, EA, EJ, F6, GH, HJ, IF, IG, N6, NQ, Q4, SY, Y4	2	3
REF02	R	Reference Identification		1	50
REF03	S	Description		1	80
REF04	NU	Reference Identifier			

Segment ID: N3- Subscriber Address (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
N301	R	Address Information		1	55
N302	S	Address Information		1	55

Segment ID: N4- Subscriber City/State/Zip (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
N401	R	City Name		2	30
N402	S	State or Province Code		2	2
N403	S	Postal Code		3	15
N404	S	Country Code		2	3
N405	NU	Location Qualifier		1	2

N406	NU	Location Identifier		1	30
N407	S	Country Subdivision Code		1	3

Segment ID: AAA- Subscriber Request Validation (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
AAA01	R	Yes/No Condition or Response Cd	N	1	1
AAA02	NU	Agency Qualifier Code		2	2
AAA03	R	Reject Reason Code	15, 35, 42, 43, 45, 47, 48, 49, 51, 52, 56, 57, 58, 60, 61, 62, 63, 71, 72, 73, 74, 75, 76, 78	2	2
AAA04	R	Follow-Up Action Code	C	1	1

Segment ID: PRV- Provider Information (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
PRV01	R	Provider Code	AD, AT, BI, CO, CV, H, HH, LA, OT, P1, P2, PC, PE, R, RF, SK, SU	1	3
PRV02	S	Reference Identification Qualifier	PXC	2	3
PRV03	S	Reference Identification		1	50
PRV04	NU	State or Province Code		2	2
PRV05	NU	Provider Specialty Information			
PRV06	NU	Provider Organization Code		3	3

Segment ID: DMG- Subscriber Demographic Information (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
DMG01	S	Date Time Period Format Qualifier	D8	2	3
DMG02	S	Date Time Period		1	35
DMG03	S	General Code	F, M, U	1	1
DMG04	NU	Marital Status Code		1	1
DMG05	NU	Race or Ethnicity Code		1	1
DMG06	NU	Citizenship Status Code		1	2
DMG07	NU	Country Code		2	3
DMG08	NU	Basis of Verification Code		1	2
DMG09	NU	Quantity		1	15
DMG10	NU	Code List Qualifier Code		1	3
DMG11	NU	Industry Code		1	30

Segment ID: INS- Subscriber Relationship (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
INS01	R	Yes/No Condition or Response Cd	Y	1	1
INS02	R	Individual Relationship Code	18	2	2
INS03	S	Maintenance Type Code	1	3	3
INS04	S	Maintenance Reason Code	25	2	3
INS05	NU	Benefit Status Code		1	1
INS06	NU	Medicare Plan Code		1	1
INS07	NU	COBRA Qualifying		1	2
INS08	NU	Employment Status Code		2	2
INS09	NU	Student Status Code		1	1
INS10	NU	Yes/No Condition or Response Cd		1	1
INS11	NU	Date Time Period Format Qualifier		2	3
INS12	NU	Date Time Period		1	35
INS13	NU	Confidentiality Code		1	1
INS14	NU	City Name		2	30
INS15	NU	State or Province Code		2	2
INS16	NU	Country Code		2	3
INS17	S	Number		1	9

Segment ID: HI- Subscriber Health Care Diagnosis Code (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
HI01	R	Health Care Code Information			
HI01-1	R	Code List Qualifier Code	ABK, BK	1	3
HI01-2	R	Industry Code		1	30
HI01-3	NU	Date Time Period Format Qualifier		2	3
HI01-4	NU	Date Time Period		1	35
HI01-5	NU	Monetary Amount		1	18
HI01-6	NU	Quantity		1	15
HI01-7	NU	Version Identifier		1	30
HI01-8	NU	Industry Code		1	30
HI01-9	NU	Yes/No Condition or Response Cd		1	1
HI02	S	Health Care Code Information			
HI02-1	R	Code List Qualifier Code	ABF, BF	1	3
HI02-2	R	Industry Code		1	30
HI02-3	NU	Date Time Period Format Qualifier		2	3
HI02-4	NU	Date Time Period		1	35
HI02-5	NU	Monetary Amount		1	18
HI02-6	NU	Quantity		1	15
HI02-7	NU	Version Identifier		1	30
HI02-8	NU	Industry Code		1	30
HI02-9	NU	Yes/No Condition or Response Cd		1	1

HI03	S	Health Care Code Information			
HI03-1	R	Code List Qualifier Code	ABF, BF	1	3
HI03-2	R	Industry Code		1	30
HI03-3	NU	Date Time Period Format Qualifier		2	3
HI03-4	NU	Date Time Period		1	35
HI03-5	NU	Monetary Amount		1	18
HI03-6	NU	Quantity		1	15
HI03-7	NU	Version Identifier		1	30
HI03-8	NU	Industry Code		1	30
HI03-9	NU	Yes/No Condition or Response Cd		1	1
HI04	S	Health Care Code Information			
HI04-1	R	Code List Qualifier Code	ABF, BF	1	3
HI04-2	R	Industry Code		1	30
HI04-3	NU	Date Time Period Format Qualifier		2	3
HI04-4	NU	Date Time Period		1	35
HI04-5	NU	Monetary Amount		1	18
HI04-6	NU	Quantity		1	15
HI04-7	NU	Version Identifier		1	30
HI04-8	NU	Industry Code		1	30
HI04-9	NU	Yes/No Condition or Response Cd		1	1
HI05	S	Health Care Code Information			
HI05-1	R	Code List Qualifier Code	ABF, BF	1	3
HI05-2	R	Industry Code		1	30
HI05-3	NU	Date Time Period Format Qualifier		2	3
HI05-4	NU	Date Time Period		1	35
HI05-5	NU	Monetary Amount		1	18
HI05-6	NU	Quantity		1	15
HI05-7	NU	Version Identifier		1	30
HI05-8	NU	Industry Code		1	30
HI05-9	NU	Yes/No Condition or Response Cd		1	1
HI06	S	Health Care Code Information			
HI06-1	R	Code List Qualifier Code	ABF, BF	1	3
HI06-2	R	Industry Code		1	30
HI06-3	NU	Date Time Period Format Qualifier		2	3
HI06-4	NU	Date Time Period		1	35
HI06-5	NU	Monetary Amount		1	18
HI06-6	NU	Quantity		1	15
HI06-7	NU	Version Identifier		1	30
HI06-8	NU	Industry Code		1	30
HI06-9	NU	Yes/No Condition or Response Cd		1	1
HI07	S	Health Care Code Information			
HI07-1	R	Code List Qualifier Code	ABF, BF	1	3
HI07-2	R	Industry Code		1	30
HI07-3	NU	Date Time Period Format Qualifier		2	3
HI07-4	NU	Date Time Period		1	35
HI07-5	NU	Monetary Amount		1	18
HI07-6	NU	Quantity		1	15
HI07-7	NU	Version Identifier		1	30
HI07-8	NU	Industry Code		1	30
HI07-9	NU	Yes/No Condition or Response Cd		1	1
HI08	S	Health Care Code Information			
HI08-1	R	Code List Qualifier Code	ABF, BF	1	3
HI08-2	R	Industry Code		1	30

HI08-3	NU	Date Time Period Format Qualifier		2	3
HI08-4	NU	Date Time Period		1	35
HI08-5	NU	Monetary Amount		1	18
HI08-6	NU	Quantity		1	15
HI08-7	NU	Version Identifier		1	30
HI08-8	NU	Industry Code		1	30
HI08-9	NU	Yes/No Condition or Response Cd		1	1
HI09	NU	Health Care Code Information			
HI10	NU	Health Care Code Information			
HI11	NU	Health Care Code Information			
HI12	NU	Health Care Code Information			

Segment ID: DTP- Subscriber Date (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
DTP01	R	Date/Time Qualifier	096, 102, 152, 291, 307, 318, 340, 341, 342, 343, 346, 347, 356, 357, 382, 435, 442, 458, 472, 539, 540, 636, 771	3	3
DTP02	R	Date Time Period Format Qualifier	D8	2	3
DTP03	R	Date Time Period		1	35

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Segment ID: EB- Subscriber Eligibility or Benefit Information (situational)

PLEASE NOTE: Reference Designators highlighted in red are not used by Meritain.

The following are the active Meritain Service Type Codes:

1,2,3,4,5,6,7,8,9,12,13,18,20,33,35,40,41,42,45,47,48,50,51,52,53,54,60,62,65,68,73,76,78,80,81,82,83,84,86,88,93,98,99,A0,A3,A4,,A6,A7,A8,AD,AE,AF,AG,AL,BG,BH,MH,ON,UC

Any Service Type Codes listed in the table below that do not appear in the list above are not active.

Reference Designator	Usage	Description	Possible Values	Min	Max
EB01	R	Eligibility or Benefit Information	1, 2, 3, 4, 5, 6, 7, 8, A, B, C, CB, D, E, F, G, H, I, J, K, L, M, MC, N, O, P, Q, R, S, T, U, V, W, X, Y	1	2
EB02	S	Coverage Level Code	CHD, DEP, ECH, EMP, ESP, FAM, IND, SPC, SPO	3	3

EB03	S	Service Type Code (will return 30 if service type code sent on 270 is not recognized/supported)	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15, 16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 30, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, A0, A1, A2, A3, A4, A5, A6, A7, A8, A9, AA, AB, AC, AD, AE, AF, AG, AH, AI, AJ, AK, AL, AM, AN, AO, AQ, AR, B1, B2, B3, BA, BB, BC, BD, BE, BF, BG, BH, BI, BJ, BK, BL, BM, BN, BP, BQ, BR, BS, BT, BU, BV, BW, BX, BY, BZ, C1, CA, CB, CC, CD, CE, CF, CG, CH, CI, CJ, CK, CL, CM, CN, CO, CP, CQ, DG, DM, DS, GF, GN, GY, IC, MH, NI, ON, PT, PU, RN, RT, TC, TN, UC	1	2
EB04	S	Insurance Type Code	12, 13, 14, 15, 16, 41, 42, 43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN, HS, IN, IP, LC, LD, LI, LT, MA, MB, MC, MH, MI, MP, OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC, WU	1	3
EB05	S	Plan Coverage Description		1	50
EB06	S	Time Period Qualifier	6, 7, 13, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36	1	2
EB07	S	Monetary Amount		1	18
EB08	S	Percent		1	10
EB09	S	Quantity Qualifier	8H, 99, CA, CE, D3, DB, DY, HS, LA,	2	2

			LE, M2, MN, P6, QA, S7, S8, VS, YY		
EB10	S	Quantity		1	15
EB11	S	Yes/No Condition or Response Cd	N, U, Y	1	1
EB12	S	Yes/No Condition or Response Cd	N, U, W, Y	1	1
EB13	S	Composite Medical Procedure Identifier			
EB13-1	R	Product/Service ID Qualifier	AD, CJ, HC, ID, IV, N4, ZZ	2	2
EB13-2	R	Product/Service ID		1	48
EB13-3	S	Procedure Modifier		2	2
EB13-4	S	Procedure Modifier		2	2
EB13-5	S	Procedure Modifier		2	2
EB13-6	S	Procedure Modifier		2	2
EB13-7	NU	Description		1	80
EB13-8	S	Product/Service ID		1	48
EB14	S	Composite Diagnosis Code Pointer			
EB14-1	R	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2
EB14-2	S	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2
EB14-3	S	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2
EB14-4	S	Diagnosis Code Pointer	1, 2, 3, 4, 5, 6, 7, 8	1	2

Segment ID: REF- Subscriber Additional Identification (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
REF01	R	Reference Identification Qualifier	18, 1L, 1W, 49, 6P, 9F, ALS, A6, CLI, F6, FO, G1, IG, M7, N6, NQ	2	3
REF02	R	Reference Identification		1	50
REF03	S	Description		1	80
REF04	NU	Reference Identifier			

Segment ID: DTP- Subscriber Eligibility/Benefit Date (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
DTP01	R	Date/Time Qualifier	096, 193, 194, 198, 290, 291, 292, 295, 304, 307, 318, 346, 348, 349, 356, 357, 435, 472, 636	3	3
DTP02	R	Date Time Period Format Qualifier	D8	2	3
DTP03	R	Date Time Period		1	35

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Segment ID: III- Subscriber Eligibility or Benefit Additional Information (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
III01	S	Code List Qualifier Code	GR, NI, ZZ	1	3
III02	S	Industry Code		1	30
III03	S	Code Category	44	2	2
III04	S	Free-Form Message Text		1	264
III05	NU	Quantity		1	15
III06	NU	Composite Unit of Measure			
III07	NU	Surface/Layer/Position Code		2	2
III08	NU	Surface/Layer/Position Code		2	2
III09	NU	Surface/Layer/Position Code		2	2

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Segment ID: HL- Dependent Level (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
HL01	R	Hierarchical ID Number		1	12
HL02	R	Hierarchical Parent ID Number		1	12
HL03	R	Hierarchical Level Code	23	1	2
HL04	R	Hierarchical Child Code	0	1	1

Segment ID: TRN- Dependent Trace Number (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
TRN01	R	Trace Type Code	1, 2	1	2
TRN02	R	Reference Number		1	50
TRN03	R	Originating Company Identifier		10	10
TRN04	S	Reference Identification		1	50

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Segment ID: NM1- Dependent Name (required)

Reference Designator	Usage	Description	Possible Values	Min	Max
NM101	R	Entity Identifier Code	3	2	3

NM102	R	Entity Type Qualifier	1	1	1
NM103	S	Name Last or Organization Name		1	60
NM104	S	Name First		1	35
NM105	S	Name Middle		1	25
NM106	NU	Name Prefix		1	10
NM107	S	Name Suffix		1	10
NM108	NU	Identification Code Qualifier		1	2
NM109	NU	Identification Code		2	80
NM110	NU	Entity Relationship Code		2	2
NM111	NU	Entity Identifier Code		2	3
NM112	NU	Name Last or Organization Name		1	60

Segment ID: REF- Dependent Additional Identification (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
REF01	R	Reference Identification Qualifier	18, 1L, 1W, 49, 6P, CE, CT, EA, EJ, F6, GH, HJ, IF, IG, MRC, N6, NQ, Q4, SY, Y4	2	3
REF02	R	Reference Identification		1	50
REF03	S	Description		1	80
REF04	NU	Reference Identifier			

Segment ID: N3- Dependent Address (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
N301	R	Address Information		1	55
N302	S	Address Information		1	55

Segment ID: N4- Dependent City/State/Zip (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
N401	R	City Name		2	30
N402	S	State or Province Code		2	2
N403	S	Postal Code		3	15
N404	S	Country Code		2	3
N405	NU	Location Qualifier		1	2
N406	NU	Location Identifier		1	30
N407	S	Country Subdivision Code		1	3

Segment ID: AAA- Dependent Request Validation (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
AAA01	R	Yes/No Condition or Response Cd	N, Y	1	1
AAA02	NU	Agency Qualifier Code		2	2
AAA03	R	Reject Reason Code	15, 35, 42, 43, 45, 47, 48, 49, 51, 52, 56, 57, 58, 60, 61, 62, 63, 64, 65, 66, 67, 68, 71, 77	2	2
AAA04	R	Follow-Up Action Code	C, N, R, S, W, X, Y	1	1

Segment ID: PRV- Provider Information (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
PRV01	R	Provider Code	AD, AT, BI, CO, CV, H, HH, LA, OT, P1, P2, PC, PE, R, RF, SK, SU	1	3
PRV02	S	Reference Identification Qualifier	PXC	2	3
PRV03	S	Reference Identification		1	50
PRV04	NU	State or Province Code		2	2
PRV05	NU	Provider Specialty Information			
PRV06	NU	Provider Organization Code		3	3

Segment ID: DMG- Dependent Demographic Information (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
DMG01	S	Date Time Period Format Qualifier	D8	2	3
DMG02	S	Date Time Period		1	35
DMG03	S	General Code	F, M, U	1	1
DMG04	NU	Marital Status Code		1	1
DMG05	NU	Composite Race or Ethnicity Info			
DMG06	NU	Citizenship Status Code		1	2
DMG07	NU	Country Code		2	3
DMG08	NU	Basis of Verification Code		1	2
DMG09	NU	Quantity		1	15
DMG10	NU	Code List Qualifier Code		1	3
DMG11	NU	Industry Code		1	30

Segment ID: INS- Dependent Relationship (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
INS01	R	Yes/No Condition or Response Cd	N	1	1
INS02	R	Individual Relationship Code	01, 19, 20, 21, 39, 40, 53, G8	2	2
INS03	S	Maintenance Type Code	1	3	3
INS04	S	Maintenance Reason Code	25	2	3
INS05	NU	Benefit Status Code		1	1
INS06	NU	Medicare Status Code			
INS07	NU	COBRA Qualifying		1	2
INS08	NU	Employment Status Code		2	2
INS09	NU	Student Status Code		1	1
INS10	NU	Yes/No Condition or Response Cd		1	1
INS11	NU	Date Time Period Format Qualifier		2	3
INS12	NU	Date Time Period		1	35
INS13	NU	Confidentiality Code		1	1
INS14	NU	City Name		2	30
INS15	NU	State or Province Code		2	2
INS16	NU	Country Code		2	3
INS17	S	Number		1	8

Segment ID: HI- Dependent Health Care Diagnosis Code (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
HI01	R	Health Care Code Information			
HI01-1	R	Code List Qualifier Code	ABK, BK	1	3
HI01-2	R	Industry Code		1	30
HI01-3	NU	Date Time Period Format Qualifier		2	3
HI01-4	NU	Date Time Period		1	35
HI01-5	NU	Monetary Amount		1	18
HI01-6	NU	Quantity		1	15
HI01-7	NU	Version Identifier		1	30
HI01-8	NU	Industry Code		1	30
HI01-9	NU	Yes/No Condition or Response Cd		1	1
HI02	S	Health Care Code Information			
HI02-1	R	Code List Qualifier Code	ABF, BF	1	3
HI02-2	R	Industry Code		1	30
HI02-3	NU	Date Time Period Format Qualifier		2	3
HI02-4	NU	Date Time Period		1	35
HI02-5	NU	Monetary Amount		1	18
HI02-6	NU	Quantity		1	15
HI02-7	NU	Version Identifier		1	30
HI02-8	NU	Industry Code		1	30
HI02-9	NU	Yes/No Condition or Response Cd		1	1
HI03	S	Health Care Code Information			
HI03-1	R	Code List Qualifier Code	ABF, BF	1	3

HI03-2	R	Industry Code		1	30
HI03-3	NU	Date Time Period Format Qualifier		2	3
HI03-4	NU	Date Time Period		1	35
HI03-5	NU	Monetary Amount		1	18
HI03-6	NU	Quantity		1	15
HI03-7	NU	Version Identifier		1	30
HI03-8	NU	Industry Code		1	30
HI03-9	NU	Yes/No Condition or Response Cd		1	1
HI04	S	Health Care Code Information			
HI04-1	R	Code List Qualifier Code	ABF, BF	1	3
HI04-2	R	Industry Code		1	30
HI04-3	NU	Date Time Period Format Qualifier		2	3
HI04-4	NU	Date Time Period		1	35
HI04-5	NU	Monetary Amount		1	18
HI04-6	NU	Quantity		1	15
HI04-7	NU	Version Identifier		1	30
HI04-8	NU	Industry Code		1	30
HI04-9	NU	Yes/No Condition or Response Cd		1	1
HI05	S	Health Care Code Information			
HI05-1	R	Code List Qualifier Code	ABF, BF	1	3
HI05-2	R	Industry Code		1	30
HI05-3	NU	Date Time Period Format Qualifier		2	3
HI05-4	NU	Date Time Period		1	35
HI05-5	NU	Monetary Amount		1	18
HI05-6	NU	Quantity		1	15
HI05-7	NU	Version Identifier		1	30
HI05-8	NU	Industry Code		1	30
HI05-9	NU	Yes/No Condition or Response Cd		1	1
HI06	S	Health Care Code Information			
HI06-1	R	Code List Qualifier Code	ABF, BF	1	3
HI06-2	R	Industry Code		1	30
HI06-3	NU	Date Time Period Format Qualifier		2	3
HI06-4	NU	Date Time Period		1	35
HI06-5	NU	Monetary Amount		1	18
HI06-6	NU	Quantity		1	15
HI06-7	NU	Version Identifier		1	30
HI06-8	NU	Industry Code		1	30
HI06-9	NU	Yes/No Condition or Response Cd		1	1
HI07	S	Health Care Code Information			
HI07-1	R	Code List Qualifier Code	ABF, BF	1	3
HI07-2	R	Industry Code		1	30
HI07-3	NU	Date Time Period Format Qualifier		2	3
HI07-4	NU	Date Time Period		1	35
HI07-5	NU	Monetary Amount		1	18
HI07-6	NU	Quantity		1	15
HI07-7	NU	Version Identifier		1	30
HI07-8	NU	Industry Code		1	30
HI07-9	NU	Yes/No Condition or Response Cd		1	1
HI08	S	Health Care Code Information			
HI08-1	R	Code List Qualifier Code	ABF, BF	1	3
HI08-2	R	Industry Code		1	30
HI08-3	NU	Date Time Period Format Qualifier		2	3
HI08-4	NU	Date Time Period		1	35

HI08-5	NU	Monetary Amount		1	18
HI08-6	NU	Quantity		1	15
HI08-7	NU	Version Identifier		1	30
HI08-8	NU	Industry Code		1	30
HI08-9	NU	Yes/No Condition or Response Cd		1	1
HI09	NU	Health Care Code Information			
HI10	NU	Health Care Code Information			
HI11	NU	Health Care Code Information			
HI12	NU	Health Care Code Information			

Segment ID: DTP- Dependent Date (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
DTP01	R	Date/Time Qualifier	096, 102, 152, 291, 307, 318, 340, 341, 342, 343, 346, 347, 356, 357, 382, 435, 442, 458, 472, 539, 540, 636, 771	3	3
DTP02	R	Date Time Period Format Qualifier	D8	2	3
DTP03	R	Date Time Period		1	35

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Segment ID: EB- Dependent Eligibility or Benefit Information (situational)

PLEASE NOTE: Reference Designators highlighted in red are not used by Meritain.

The following are the active Meritain Service Type Codes:

1,2,3,4,5,6,7,8,9,12,13,18,20,33,35,40,41,42,45,47,48,50,51,52,53,54,60,62,65,68,73,76,78,80,81,82,83,84,86,88,93,98,99,A0,A3,A4,,A6,A7,A8,AD,AE,AF,AG,AL,BG,BH,MH,ON,UC

Any Service Type Codes listed in the table below that do not appear in the list above are not active.

Reference Designator	Usage	Description	Possible Values	Min	Max
EB01	R	Eligibility or Benefit Information	1, 2, 3, 4, 5, 6, 7, 8, A, B, C, CB, D, E, F, G, H, I, J, K, L, M, MC, N, O, P, Q, R, S, T, U, V, W, X, Y	1	2
EB02	S	Coverage Level Code	CHD, DEP, ECH, ESP, FAM, IND, SPC, SPO	3	3
EB03	S	Service Type Code	1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13, 14, 15,	1	2

		(will return 30 if service type code sent on 270 is not recognized/supported)	16, 17, 18, 19, 20, 21, 22, 23, 24, 25, 26, 27, 28, 30, 32, 33, 34, 35, 36, 37, 38, 39, 40, 41, 42, 43, 44, 45, 46, 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, 66, 67, 68, 69, 70, 71, 72, 73, 74, 75, 76, 77, 78, 79, 80, 81, 82, 83, 84, 85, 86, 87, 88, 89, 90, 91, 92, 93, 94, 95, 96, 97, 98, 99, A0, A1, A2, A3, A4, A5, A6, A7, A8, A9, AA, AB, AC, AD, AE, AF, AG, AH, AI, AJ, AK, AL, AM, AN, AO, AQ, AR, B1, B2, B3, BA, BB, BC, BD, BE, BF, BG, BH, BI, BJ, BK, BL, BM, BN, BP, BQ, BR, BS, BT, BU, BV, BW, BX, BY, BZ, C1, CA, CB, CC, CD, CE, CF, CG, CH, CI, CJ, CK, CL, CM, CN, CO, CP, CQ, DG, DM, DS, GF, GN, GY, IC, MH, NI, ON, PT, PU, RN, RT, TC, TN, UC		
EB04	S	Insurance Type Code	12, 13, 14, 15, 16, 41, 42, 43, 47, AP, C1, CO, CP, D, DB, EP, FF, GP, HM, HN, HS, IN, IP, LC, LD, LI, LT, MA, MB, MC, MH, MI, MP, OT, PE, PL, PP, PR, PS, QM, RP, SP, TF, WC, WU	1	3
EB05	S	Plan Coverage Description		1	50
EB06	S	Time Period Qualifier	6, 7, 13, 21, 22, 23, 24, 25, 26, 27, 28, 29, 30, 31, 32, 33, 34, 35, 36	1	2
EB07	S	Monetary Amount		1	18
EB08	S	Percent		1	10
EB09	S	Quantity Qualifier	8H, 99, CA, CE, D3, DB, DY, HS, LA, LE, M2, MN, P6, QA, S7, S8, VS, YY	2	2
EB10	S	Quantity		1	15

EB11	S	Yes/No Condition or Response Cd	N, U, Y	1	1
EB12	S	Yes/No Condition or Response Cd	N, U, W, Y	1	1
EB13	S	Composite Medical Procedure Identifier			
EB13-1	R	Product/Service ID Qualifier	AD, CJ, HC, ID, IV, N4, ZZ	2	2
EB13-2	R	Product/Service ID		1	48
EB13-3	S	Procedure Modifier		2	2
EB13-4	S	Procedure Modifier		2	2
EB13-5	S	Procedure Modifier		2	2
EB13-6	S	Procedure Modifier		2	2
EB13-7	NU	Description		1	80
EB13-8	S	Product/Service ID		1	48
EB14	S	Composite Diagnosis Code Pointer			
EB14-1	R	Diagnosis Code Pointer		1	2
EB14-2	S	Diagnosis Code Pointer		1	2
EB14-3	S	Diagnosis Code Pointer		1	2
EB14-4	S	Diagnosis Code Pointer		1	2

Segment ID: REF- Dependent Additional Identification (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
REF01	R	Reference Identification Qualifier	18, 1L, 1W, 49, 6P, 9F, ALS, CLI, F6, FO, G1, IG, N6, NQ	2	3
REF02	R	Reference Identification		1	50
REF03	S	Description		1	80
REF04	NU	Reference Identifier			

Segment ID: DTP- Dependent Eligibility Benefit Date (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
DTP01	R	Date/Time Qualifier	096, 193, 194, 198, 290, 291, 292, 295, 304, 307, 318, 346, 348, 349, 356, 357, 435, 472, 636, 771	3	3
DTP02	R	Date Time Period Format Qualifier	D8	2	3
DTP03	R	Date Time Period		1	35

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Segment ID: III- Dependent Eligibility or Benefit Additional Information (situational)

Reference Designator	Usage	Description	Possible Values	Min	Max
III01	S	Code List Qualifier Code	GR, NI, ZZ	1	3
III02	S	Industry Code		1	30
III03	S	Code Category	44	2	2
III04	NU	Free-Form Message Text		1	264
III05	NU	Quantity		1	15
III06	NU	Composite Unit of Measure			
III07	NU	Surface/Layer/Position Code		2	2
III08	NU	Surface/Layer/Position Code		2	2
III09	NU	Surface/Layer/Position Code		2	2

APPENDIX 1: IMPLEMENTATION CHECKLIST

- Request Benefit Status setup

If you are a Meritain client, contact your Client Relationship Manager at Meritain Health

If you are a provider, contact your practice management software vendor

If you are a vendor or other trading partner, contact EDI@Meritain.com

APPENDIX 2: BUSINESS SCENARIOS

The submission of a 270 benefit request transaction to Meritain Health can result in one of two scenarios, which can be briefly summarized as the transaction being accepted or rejected.

Business Scenario 1: 270 Transaction Accepted

The 270 transaction must match the HIPAA 005010X279A1 layout as spelled out in the HIPAA implementation guide and contain any necessary Meritain-specific codes and formatting as established within this companion guide. Upon receipt of the 270 transaction, Meritain’s X12 translator will perform a validation routine to ensure the file received is in the proper layout and acceptable. If it passes validation, a 271 response will be generated and returned to the trading partner, confirming the content of the request and containing any relevant names, addresses, dates, and codes determined as deliverable to the trading partner based on the layout and restrictions set forth by HIPAA for the 271 transaction. For examples of an accepted 270 transaction and the corresponding 271 response, please see Appendix 3.

Business Scenario 2: 270 Transaction Rejected

Should the 270 transaction fail validation by our X12 translator, a 271 response will not be generated, but a 999 functional acknowledgement will be sent, acknowledging the transmission of the 270 and identifying the errors within the rejected transaction. The 999 transaction will be in the HIPAA 005010X231A1 format, and can be deciphered with the aid of

the HIPAA implementation guide for that transaction. It is then the responsibility of the trading partner to correct the errors within the 270 transaction and resubmit that file to Meritain Health to obtain the needed benefit response. For examples of a rejected 270 transaction and the corresponding 999 response, please see Appendix 3.

APPENDIX 3: TRANSMISSION EXAMPLES

Accepted 270 Transaction

```
ISA*00*                *00*                *ZZ*PARTNER                *ZZ*41124
*121011*1134**^^*00501*111000217*0*T*:~
GS*HS*PARTNER*41124*20121011*113449*225*X*005010X279A1~
ST*270*0212*005010X279A1~
BHT*0022*13*759163975*20121011*0619~
HL*1**20*1~
NM1*PR*2*MERITAIN HEALTH*****PI*64157~
HL*2*1*21*1~
NM1*1P*1*SMITH*JOHN*****XX*1999999999~
HL*3*2*22*0~
TRN*1*759163975*9PARTNER99~
NM1*IL*1*JONES*FRED*****MI*9999999999~
DMG*D8*19710517*M~
DTP*291*D8*20120101~
EQ*50~
SE*13*0212~
GE*1*225~
IEA*1*111000217~
```

271 Transaction (in response to accepted 270 transaction)

```
ISA*00*                *00*                *ZZ*41124                *ZZ*PARTNER
*130214*0421**^^*00501*000005496*0*T*:~
GS*HB*41124*PARTNER*20130214*042138*5456*X*005010X279A1~
ST*271*5456*005010X279A1~
BHT*0022*11*759163975*20121011*0619~
HL*1**20*1~
NM1*PR*2*MERITAIN HEALTH*****PI*64157~
HL*2*1*21*1~
NM1*1P*1*SMITH*JOHN*****XX*1999999999~
HL*3*2*22*0~
NM1*IL*1*JONES*FRED*****MI*9999999999~
N3*123 MAIN ST~
N4*NEW PLAINS*KS*67068~
DMG*D8*19710517~
DTP*346*D8*20030601~
EB*1*FAM*30*GP*Client Medical Plan~
NM1*2B*2*Meritain Health~
N3*P.O. Box 27725~
N4*Minneapolis*MN~
PER*IC**WP*8668394301~
EB*C*IND*50****0*****Y~
NM1*2B*2*Meritain Health~
```

MERITAIN HEALTH 270/271 COMPANION GUIDE

N3*P.O. Box 27725~
N4*Minneapolis*MN~
PER*IC**WP*8668394301~
EB*C*FAM*50****0*****Y~
NM1*2B*2*Meritain Health~
N3*P.O. Box 27725~
N4*Minneapolis*MN~
PER*IC**WP*8668394301~
EB*C*IND*50****500*****N~
NM1*2B*2*Meritain Health~
N3*P.O. Box 27725~
N4*Minneapolis*MN~
PER*IC**WP*8668394301~
EB*C*IND*50***29*500*****N~
NM1*2B*2*Meritain Health~
N3*P.O. Box 27725~
N4*Minneapolis*MN~
PER*IC**WP*8668394301~
EB*C*FAM*50****1500*****N~
NM1*2B*2*Meritain Health~
N3*P.O. Box 27725~
N4*Minneapolis*MN~
PER*IC**WP*8668394301~
EB*C*FAM*50***29*1500*****N~
NM1*2B*2*Meritain Health~
N3*P.O. Box 27725~
N4*Minneapolis*MN~
PER*IC**WP*8668394301~
EB*G*IND*50****1000*****N~
NM1*2B*2*Meritain Health~
N3*P.O. Box 27725~
N4*Minneapolis*MN~
PER*IC**WP*8668394301~
EB*G*IND*50***29*1000*****N~
NM1*2B*2*Meritain Health~
N3*P.O. Box 27725~
N4*Minneapolis*MN~
PER*IC**WP*8668394301~
EB*G*FAM*50****3000*****N~
NM1*2B*2*Meritain Health~
N3*P.O. Box 27725~
N4*Minneapolis*MN~
PER*IC**WP*8668394301~
EB*G*FAM*50***29*3000*****N~
NM1*2B*2*Meritain Health~
N3*P.O. Box 27725~
N4*Minneapolis*MN~
PER*IC**WP*8668394301~
SE*68*5456~
GE*1*5456~
IEA*1*000005496~

Rejected 270 Transaction (missing Dependent Last Name)

ISA*00* *00* *ZZ*PARTNER *ZZ*41124
 *121011*1134*^^*00501*111000217*0*T*:~
 GS*HS*PARTNER*41124*20121011*113449*225*X*005010X279A1~
 ST*270*0212*005010X279A1~
 BHT*0022*13*759163975*20121011*0619~
 HL*1**20*1~
 NM1*PR*2*MERITAIN HEALTH*****PI*64157~
 HL*2*1*21*1~
 NM1*1P*1*SMITH*JOHN*****XX*1999999999~
 HL*3*2*22*0~
 NM1*IL*1*****MI*999999998~
 HL*4*3*23*0~
 TRN*1*759163975*9PARTNER99~
 NM1*03*1**JANE~
 DMG*D8*19850201*F~
 DTP*291*D8*20120201~
 EQ*2~
 SE*15*0212~
 GE*1*225~
 IEA*1*111000217~

999 Transaction (in response to rejected 270 transaction)

ISA*00* *00* *ZZ*41124 *ZZ*PARTNER
 *121012*0700*^^*00501*000019259*0*T*:~
 GS*FA*41124*PARTNER*20121012*0700*19259*X*005010~
 ST*999*17709*005010X231A1~
 AK1*HS*225*005010X279A1~
 IK4*8**1~
 AK9*R*1*1*0~
 SE*4*17709~
 GE*1*19259~
 IEA*1*000019259~