



**fallon community health plan**  
**health care eligibility benefit inquiry and response**

**companion guide**  
**to the**

**health care eligibility benefit inquiry and response**  
**ACS X12N 270/271 (004010X093A1)**  
**implementation guide**

## document history

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Revision date	Revision	Commentary
May 2003	1.0	Creation date
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## introduction

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The Health Insurance Portability and Accountability Act – Administration Simplification (HIPAA-AS) requires that **Fallon Community Health Plan (FCHP)** and all other covered entities comply with the electronic data interchange standards for health care as established by the Secretary of Health and Human Services. The ANSI X12N 270 /271 (Version 004010X093A1) Implementation Guide for Health Care Eligibility Benefit Inquiry has been established as the standard for eligibility inquiry and response compliance. The implementation guide for this format is available electronically at [www.wpc-edi.com/HIPAA](http://www.wpc-edi.com/HIPAA).

Although the implementation guide contains requirements for use of specific segments and data elements within the segments, the guide was written for use by all health benefit payors. This document has been prepared as an FCHP-specific companion document to that implementation guide to clarify when conditional data elements and segments are used by FCHP, and to identify those codes and data elements that do not apply to FCHP.

This companion guide document supplements, but does not contradict any requirements in the X12N 270/271 (Version 004010X093A1) implementation guide.

The intended audience for this document is the technical area, which is responsible for receiving an electronic EOB from FCHP.

## confidentiality, privacy and security

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Maintaining the confidentiality of personal health information has been, and continues to be, one of Fallon Community Health Plan's guiding principles. Fallon Community Health Plan has a strict confidentiality policy with regard to safeguarding patient, employee and health plan information. All employees are required to be familiar with, and comply with FCHP's policy on the confidentiality of member personal and clinical information. This helps to ensure that all member information is treated in a confidential and respectful manner. The policy permits use or disclosure of members' medical or personal information only as necessary to conduct required business, care management, approved research, quality assurance or measurement activities, or when authorized to do so by a member or as required by law.

In order to comply with our own internal policies and the provisions of the Health Insurance Portability and Accountability Act, 1996 (HIPAA), Fallon Community Health Plan has outlined specific requirements applicable to the electronic exchange of protected health information (PHI), including provisions for:

- maintaining confidentiality of protected information
- confidentiality safeguards
- security standards
- return or destruction of protected information
- compliance with state and federal regulatory and statutory requirements
- required disclosure
- use of business associates

## establishing connectivity with fallon community health plan

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The purpose of this section is to identify the process for establishing connectivity to transmit electronic transactions to Fallon Community Health Plan.

### contact an edi coordinator at:

866-ASK-FCHP (1-866-275-3247) or e-mail [edi.coordinator@fchp.org](mailto:edi.coordinator@fchp.org).

### set-up for submission to fchp

Submitters wishing to submit enrollment data to FCHP should call or e-mail the contact listed above. The information necessary for implementation will be provided. An enrollment packet can be obtained in PDF format from the FCHP Web site at [www.fchp.org](http://www.fchp.org).

### trading partner set-up

There are many other features of the ISA segment that are used for control measures. For instance, the ISA segment contains data elements such as authorization information, security information, sender identification and receiver identification that can be used for control purposes. These data elements are agreed-upon by the trading partners prior to transmission.

### testing

All trading partners are required to test the exchange of electronic transactions with FCHP prior to the exchange of production files with live data.

FCHP will assign two usernames and passwords: one for testing and another for production. The production username and password will be assigned upon successful completion of simulation testing.

All test files will be processed at time of receipt, and feedback to providers will occur within five business days. This feedback will occur via e-mail. Test files should contain at least 25 enrollment transactions, but not more than 50.

FCHP requires the following naming convention for all test files submitted: XXMMDDVT.270 (eight character maximum). The first 2 letters are used to identify trading partner, then 2 digit month, 2 digit day, version number, and test file indicator. If multiple files are to be sent on the same day, then version numbers would need to be sent as part of the file naming convention.

The test indicator is crucial to the entry of the file into the test environment.

## production

At the completion of successful simulation testing, trading partners will be given a production username and password, as well as a date to begin the exchange of compliant production transaction files.

FCHP requires the following naming convention for all production files submitted: XXMMDDV1.270 (eight character maximum). The first 2 letters are used to identify trading partner, then 2 digit month, 2 digit day, version number, and production file indicator. If multiple files are to be sent on the same day, then version numbers would need to be sent as part of the file naming convention.

The production indicator is crucial to the entry of the file into the test environment.

## technical requirements

- Production files may be sent on a daily or weekly basis.

## specific data requirements - health care eligibility benefit inquiry and response (270/271)

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### general

The purpose of this section is to clarify what data elements and segments must be used for Fallon Community Health Plan. The following information is designed to help you complete the 270/271 transactions. If you follow these guidelines, we will be better able to process your eligibility benefit transaction accurately and efficiently.

FCHP requires the following terminators:

Segment Terminator (ASCII Value 126) ~

Element Terminator (ASCII Value 42) \*

Subelement Terminator (ASCII Value 62) >

### 270 eligibility benefit inquiry

Seg ID	Segment description	Loop ID	Seg Req	Valid values	FCHP-specific requirements
ISA	Interchange Control Header		<b>R</b>		
	ISA01 – Auth Info Qualifier		R	00/03	Send 00
	ISA02 – Auth Information		R	<Blank>	
	ISA03 - Security Info Qual		R	00/01	Send 00
	ISA04 - Security Information		R	<Blank>	
	ISA05 - Interchange ID Qual		R	<b>ZZ</b>	Mutually defined
	ISA06 - Interchange Sender ID		R	<Sender ID>	Trading Partner name
	ISA07 - Interchange ID Qual		R	<b>ZZ</b>	Mutually defined
	ISA08 - Interchange Receiver ID		R	<Receiver ID>	<i>Receiver ID assigned by payer</i>
	ISA09 - Interchange Date		R	<YYMMDD>	
	ISA10 - Interchange Time		R	<HHMM>	
	ISA11 - Interchange Control Std		R	U	
	ISA12 - Interchange Version		R	00401	
	ISA13 - Interchange Control		R	<Unique #>	A control number assigned by the interchange sender, must = IEA02
	ISA14 - Ack requested		R	<b>N</b>	

Seg ID	Segment description	Loop ID	Seg Req	Valid values	FCHP-specific requirements
	ISA15 - Test/Production		R	P/T	
	ISA16 - Component Element Sep		R	*	
<b>GS</b>	<b>Functional Group Header</b>		<b>R</b>		
	GS01 - Functional ID Code		R	BE	
	GS02 - App Sender's Code		R	<Sender ID>	Sender's TIN
	GS03 - App Receiver's Code		R	<Receiver Code>	<i>Receiver code assigned by payer</i>
	GS04 - Date		R	<CCYYMMDD>	
	GS05 - Time		R	<HHMM>	
	GS06 - Group Control Number		R	<Unique #>	
	GS07 - Resp Agency Code		R		
	GS08 - Version		R	004010X092A 1	Standards approved by ACS X12 review board
<b>ST</b>	<b>Transaction Set Header</b>		<b>R</b>		
	ST01 - Transaction Set ID Code		R	270	
	ST02 - Transaction Control #		R	<Unique #>	Must = SE02
BHT	Beginning Hierarchical Transaction	N/A			
	BH01 - Hierarchical Structure Code		R		
	BHT02 - Transaction Set Purpose Code		R		
	BHT03 - Submitter Transaction Identifier		S		
	BHT04 - Transaction Set Creation Date		R		
<b>HL</b>	<b>Hierarchical Level</b>	<b>2000</b>	<b>R</b>		
	<b>HL01 - Hierarchical ID Number</b>		<b>R</b>		
NM1	Information Source Name	2100A	R		
	NM101 - Entity Identifier Code		R		
	NM102 - Entity Type Qualifier		R		
	INM103 - Information Source Last or Organization Name		S		
	NM108 - Identification Code Qualifier		R		
	INM109 - Information Source Primary Identifier		R		
NM1	Information Receiver Name	2100B	R		
	NM101 - Entity Identifier Code		R		
	NM102 - Entity Type Qualifier		R		
	NM108 - Identification Code Qualifier		R		

Seg ID	Segment description	Loop ID	Seg Req	Valid values	FCHP-specific requirements
	NM109 - Information Receiver Identification Number		R		
TRN	Subscriber Level	2000C	S		
NM1	Subscriber Loop	2100C			
	NM103 - Subscriber Last Name		S		
	NM104 - Subscriber First Name		S		
	NM105 - Subscriber Middle Name		S		
	NM107 - Subscriber Name Suffix		S		
	NM108 - Identification Code Qualifier		S		
	NM109 - Information Receiver Identification Number		R		
REF	Subscriber Additional Identification	2100C	S		
N3	Subscriber Address	2100C	S		
DMG	Subscriber Demographic Information	2100C			
	DMG02 - Subscriber Birth Date	2100C	R		
	DMG03 - Subscriber Gender Code		S		
DTP	Subscriber Date	2100C	S		
	DTP01 - Date / Time Qualifier	2100C	R		
	DTP03 - Date / Time Period		R		
EQ	Subscriber Eligibility or Benefit Inquiry Information	2110C	S		
	EQ01 - Service Type Code				
DTP	DTP01 - Date/Time Qualifier	2100C	R		
	DPT03 - Date Time Period		R		
HL	Dependent Level Loop	2000 D	S		

## 271 eligibility benefit response

Seg ID	Segment description	Loop ID	Seg Req	Valid values	FCHP-specific requirements
<b>ISA</b>	<b>Interchange Control Header</b>		<b>R</b>		
	ISA01 - Auth Info Qualifier		R	00/03	Send 00
	ISA02 - Auth Information		R	<Blank>	
	ISA03 - Security Info Qual		R	00/01	Send 00
	ISA04 - Security Information		R	<Blank>	
	ISA05 - Interchange ID Qual		R	<b>ZZ</b>	Mutually defined
	ISA06 - Interchange Sender ID		R	<Sender ID>	Trading Partner name
	ISA07 - Interchange ID Qual		R	<b>ZZ</b>	Mutually defined
	ISA08 - Interchange Receiver ID		R	<Receiver ID>	<i>Receiver ID assigned by payer</i>
	ISA09 - Interchange Date		R	<YYMMDD>	
	ISA10 - Interchange Time		R	<HHMM>	
	ISA11 - Interchange Control Std		R	U	
	ISA12 - Interchange Version		R	00401	
	ISA13 - Interchange Control		R	<Unique #>	A control number assigned by the interchange sender, must = IEA02
	ISA14 - Ack requested		R	<b>N</b>	
	ISA15 - Test/Production		R	P/T	
	ISA16 - Component Element Sep		R	*	
<b>GS</b>	<b>Functional Group Header</b>		<b>R</b>		
	GS01 - Functional ID Code		R	BE	
	GS02 - App Sender's Code		R	<Sender ID>	Sender's TIN
	GS03 - App Receiver's Code		R	<Receiver Code>	<i>Receiver code assigned by payer</i>
	GS04 - Date		R	<CCYYMMDD>	
	GS05 - Time		R	<HHMM>	
	GS06 - Group Control Number		R	<Unique #>	
	GS07 - Resp Agency Code		R		
	GS08 - Version		R	004010X092A 1	Standards approved by ACS X12 review board
<b>ST</b>	<b>Transaction Set Header</b>		<b>R</b>		
	ST01 - Transaction Set ID Code		R	271	
	ST02 - Transaction Control #		R	<Unique #>	Must = SE02
<b>BHT</b>	<b>Beginning Hierarchical Transaction</b>	N/A			
	BH01 - Hierarch Structure Code		R		

Seg ID	Segment description	Loop ID	Seg Req	Valid values	FCHP-specific requirements
	BHT02 - Transaction Set Purpose Code		R		
	BHT03 - Submitter Transaction Identifier		S		
	BHT04 - Transaction Set Creation Date		R		
<b>HL</b>	<b>Hierarch Level</b>	<b>2000</b>	<b>R</b>		
	<b>HL01 – Hierarch ID Number</b>		<b>R</b>		
NM1	Information Source Name	2100A	R		
	NM101 - Entity Identifier Code		R		
	NM102 - Entity Type Qualifier		R		
	INM103 - Information Source Last or Organization Name		S		
	NM108 - Identification Code Qualifier		R		
	INM109 - Information Source Primary Identifier		R		
NM1	Information Receiver Name	2100B	R		
	NM101 - Entity Identifier Code		R		
	NM102 - Entity Type Qualifier		R		
	NM108 - Identification Code Qualifier		R		
	NM109 - Information Receiver Identification Number		R		
TRN	Subscriber Level	2000C	S		
NM1	Subscriber Loop	2100C			
	NM103 - Subscriber Last Name		S		
	NM104 - Subscriber First Name		S		
	NM105 - Subscriber Middle Name		S		
	NM107 - Subscriber Name Suffix		S		
	NM108 - Identification Code Qualifier		S		
	NM109 - Information Receiver Identification Number		R		
REF	Subscriber Additional Identification	2100C	S		
N3	Subscriber Address	2100C	S		
DMG	Subscriber Demographic Information	2100C			
	DMG02 - Subscriber Birth Date	2100C	R		

Seg ID	Segment description	Loop ID	Seg Req	Valid values	FCHP-specific requirements
	DMG03 - Subscriber Gender Code		S		
DTP	Subscriber Date	2100C	S		
	DTP01 - Date / Time Qualifier	2100C	R		
	DTP03 - Date / Time Period		R		
EB	Eligibility or Benefit Information	2110C	O		
DTP	DTP01 - Date/Time Qualifier	2100C	R		
	DPT03 - Date Time Period		R		
HL	Dependent Level Loop	2000 D	S		