

# 834 Companion Guide Addendum

## **I. Introduction**

This document (“Companion Guide—Addendum”) is attached to and made a part of the 834 Companion Guide and contains the information necessary to establish and support a full audit maintenance file relationship with Independence Blue Cross / Keystone Health Plan East (hereinafter referred to collectively as “IBC / KHPE”). All other terms and conditions of the 834 Companion Guide not specifically modified herein shall apply to this Companion Guide-Addendum, including but not limited to the Disclaimer on page 2 of the 834 Companion Guide.

## **II. ANSI x12 Transactions Supported**

IBC / KHPE processes the following full audit maintenance ANSI X12 HIPAA transactions for enrollment:

- |   |   |
|---|---|
| <b>ANSI X12 <u>834</u></b> v4010 x095A1 (HIPAA) | Benefit Enrollment and Maintenance  |
| <b>ANSI X12 <u>TA1</u></b> v4010 x095A (HIPAA)  | Response to the X12 transactions when errors are encountered in outer envelopes (ISA/IEA & GS/GE) |
| <b>ANSI X12 <u>997</u></b> v4010 x095A (HIPAA)  | Functional Acknowledgement  |

### **III. EDI Acknowledgements and Error Report**

The purpose of this section is to outline IBC / KHPE's process for electronic acknowledgement and error reporting.

Similar to IBC / KHPE ANSI Transactional process, the full audit maintenance process will produce the following electronic acknowledgement:

#### **TA1 Interchange Acknowledgement Transaction**

#### **997 Functional Acknowledgement**

IBC / KHPE will also send a **Composite Error Report**. The Composite Error Report will list all members by the Electronic Identification Number (EIN). It will report the members that failed the IBC / KHPE business rules or edits. The errors must be corrected and returned by the Trading Partner in order for IBC/KHPE to load the eligibility to the IBC / KHPE membership system.

Your eBusiness Deployment Analyst will provide additional information on the resolution of the Composite Error Report.

## **IV. Payer-Specific Requirements**

The purpose of this section is to delineate specific data requirements for the submission of the full audit maintenance ANSI file.

Segment: **BGN** Beginning Segment

Level: Header  
Usage: Required  
Business  
Rules: This information must be transmitted for ST-SE contained in the file.

**Data Element Summary**

<b>Ref</b>	<b>Des</b>	<b>Element Name</b>	<b>Element Note</b>
BGN08	Action Code		Enter code value: ( <i>choose one</i> )  <b>2</b> (Change) – <b>Explicit Employee/Contract Terminations Only</b>  <b>4</b> (Verify) - Used to identify a full enrollment transaction to verify that the sponsor's and payer's systems are synchronized.

Segment: **INS** Member Level Detail

Loop: 2000  
Level: Detail  
Usage: Required  
Business  
Rules: This information is required for each member submitted.

Data Element Summary

Ref	Des	Element Name	Element Note
INS03		Maintenance Type Code	Enter code value: <b>024</b> (Cancellation) – <b>Explicit Employee/Contract Terminations Only</b> <b>030</b> (Audit or Compare)

834 Benefit Enrollment and Maintenance Transaction

Segment: **HD** Health Coverage

Loop: **2300**  
Level: **Detail**  
Usage: **Situational**  
Business  
Rules: **IBC /KHPE has determined that this information is required for each member submitted.**

**Data Element Summary**

<b>Ref</b>	<b>Des</b>	<b>Element Name</b>	<b>Element Note</b>
HD01		Maintenance Type Code	Enter code value: ( <i>choose one</i> ) <b>024</b> (Cancellation) – <b>Explicit Employee/Contract Terminations Only</b> <b>030</b> (Audit or Compare)

**Segment: DTP Health Coverage Dates**

Level: **2300 Detail**

Usage: **Required - By Implementation Guide**

**Data Element Summary**

<b>Ref</b>	<b>Des</b>	<b>Element Name</b>	<b>Element Note</b>
DTP01		Date/Time Qualifier	Enter code value: ( <i>choose one</i> ) <b>303</b> (Maintenance Effective) <b>348</b> (Benefit Date) <b>349</b> (Benefit End) – <b>Explicit Employee/Contract Terminations Only</b>
DTP02		Date/Time Period Format Qualifier	Enter code value: <b>D8</b> (Date Expressed in Format CCYYMMDD)
DTP03		Date/Time Period	Enter value: <b>Date associated with health coverage referenced above</b>

## V. Full Audit Maintenance File Business Processing Guidelines

### Full Audit Maintenance File

A full audit maintenance file lists all current members, whether involved in a change or not. IBC / KHPE requires that the full audit maintenance file not contain history transactions of all previous membership.

This type of transaction is identified by a BGN08 code value of '4', Verify.

1. IBC / KHPE requires that the Trading Partner not send both DTP01 348 (Benefit Begin) and DTP01 349 (Benefit End) at the 2300 HD Loop. This includes future terminations.
2. Subscriber and dependent change of coverage must be sent in the BGN08 '4' transaction set (ST-SE).
3. Dependent Terminations: If a dependent is to be removed from a contract (e.g. overage dependent removal, removal of former spouse, etc.), send the entire active contract (subscriber and active dependents). Omit the terminated dependent(s). IBC / KHPE will terminate the missing dependent(s).
4. When submitting a Non-HMO Coverage Description and the customer offers the Protection Starts Benefit, the Coverage Begin Date can equal any day of the month (1-31).
5. When submitting a Non-HMO coverage description and the customer does not offer the Protection Starts Benefit, the Coverage Begin Date must equal the 1<sup>st</sup> or 15<sup>th</sup> of the month. The 1<sup>st</sup> or 15<sup>th</sup> is based on the clients billing cycle with IBC.
6. When submitting a HMO coverage description, the Coverage Begin Date can equal any day of the month (1-31).
7. Retroactivity: IBC / KHPE will accept retroactive electronic updates that fall within the current processing month less 60 days (90-day retroactivity rule).
  - a. If the Coverage Begin Date exceeds the 90-day retroactivity rule, IBC / KHPE will manually apply the maximum date allowable.

## **Explicit Employee/Contract Terminations**

Explicit terminations are employee and/or contract cancellations that result in a termination of coverage. The Trading Partner must physically send the termination for the subscriber and/or contract on the Full Audit Maintenance File. Implied employee and/or contract terminations are not acceptable.

This type of transaction is identified by a BGN08 code value of '2', Change (Update).

The Trading Partner must adhere to the following guidelines when submitting explicit terminations on the full audit maintenance file.

1. When submitting explicit terminations, a new ST/SE is required.
2. IBC / KHPE will terminate the employee and/or contract as of the Benefit End Date submitted in the Health Coverage DTP01 '349' 2300 HD Loop.
3. The subscriber and/or contract being terminated must have a Health Coverage Data Qualifier in HD01 equal to '024' (Cancellation).
4. When submitting a Traditional or Comprehensive Major Medical Coverage Description and the customer offers the Protection End Date Benefit, the Coverage End Date can equal any day of the month (1-31).
5. When submitting a Traditional or Comprehensive Major Medical Coverage Description and the customer does not offer the Protection End Date Benefit, the Coverage End Date must equal the 1<sup>st</sup> or 15<sup>th</sup> of the month. The 1<sup>st</sup> or 15<sup>th</sup> is based on the clients billing cycle with IBC.
6. When submitting a HMO or a Personal Choice coverage description, the Coverage End Date can equal any day of the month (1-31).

## 834 Benefit Enrollment and Maintenance Transaction

### Interchange Control Structure \*

- 1) Communications Envelope  
Communications Transport Protocol
- 2) Interchange Envelope

**ISA - Interchange Control Header**

Functional Group

**GS - Functional Group Header**

**ST - Transaction Set Header**

ST – Transaction Set Header

BGN – Beginning Segment

DTP – File Effective Date

**Loop 1000A – Sponsor Name**

N1 – Sponsor Name

**Loop 1000B – Payer**

N1 – Payer

**Loop 2000 – Member Level Detail**

INS – Member Level Detail

REF – Subscriber Number

REF – Member Policy Number (may be submitted in Loop 2000 or Loop 2300)

DTP – Member Level Dates

**Loop 2100A – Member Name**

NM1 – Member Name

PER – Member Communication Numbers

N3 – Member Residence Street Address

N4 – Member Residence City, State, ZIP code

DMG – Member Demographics

**Loop 2100B – Incorrect Member Name**

NM1 – Incorrect Member Name

DMG – Incorrect Member Demographics

**Loop 2300 – Health Coverage**

HD – Health Coverage

DTP – Health Coverage Dates

REF – Health Coverage Policy Number (may be submitted in Loop 2300 or Loop 2000)

**Loop 2310 – Provider Information**

LX – Provider Information

NM1 – Provider Name

**SE - Transaction Set Trailer**

**GE - Functional Group Trailer**

- 3) Interchange Envelope  
**IEA - Interchange Control Trailer**
- 4) Communications Envelope  
Communications Transport Trailer

**834 Benefit Enrollment and Maintenance Transaction**

ISA\*00\* \*00\* \*ZZ\*PREMCOR \*33\*95044  
\*040226\*1319\*U\*00401\*000000057\*0\*T\*~  
GS\*BE\*PREMCOR\*95044\*20040226\*1319\*52\*X\*004010X095A1~  
ST\*834\*0001~  
BGN\*00\*200402201558-0\*20040226\*13174034\*\*\*\*2~  
DTP\*303\*D8\*20040220~  
N1\*P5\*PREMCOR REFINING GROUP\*FI\*200099999~  
N1\*IN\*INDEPENDENCE BLUE CROSS\*FI\*23-0370270~  
INS\*Y\*18\*021\*\*A\*\*\*FT~  
REF\*0F\*9999999999~  
REF\*1L\*427738~  
DTP\*303\*D8\*20040105~  
NM1\*IL\*1\*DOE\*JOHN\*\*\*\*34\*999999999~  
PER\*IP\*\*HP\*2157400933~  
N3\*15 LOUELLA CT. FRONT~  
N4\*WAYNE\*PA\*19087~  
DMG\*D8\*19650207\*M~  
HD\*021\*\*HMO\*D005\*EMP~  
DTP\*348\*D8\*20040105~  
INS\*Y\*18\*001\*\*A\*\*\*FT~  
REF\*0F\*9999999999~  
REF\*1L\*427738~  
DTP\*303\*D8\*20040102~  
NM1\*IL\*1\*COOL\*JOE\*B\*\*\*34\*999999999~  
DMG\*D8\*19590216\*F~  
HD\*001\*\*HMO\*D005\*FAM~  
DTP\*348\*D8\*20040101~  
INS\*N\*01\*001\*\*A~  
REF\*0F\*9999999999~  
REF\*1L\*427738~  
NM1\*IL\*1\*WAYNE\*JOHN\*\*\*\*34\*999999999~  
DMG\*D8\*19591022\*M~  
HD\*001\*\*HMO\*D005~  
DTP\*348\*D8\*20040101~  
INS\*N\*19\*001\*\*A~  
REF\*0F\*9999999999~  
REF\*1L\*427738~  
NM1\*IL\*1\*WAYNE\*JOHN\*JR\*\*\*34\*999999999~  
DMG\*D8\*19860629\*M~  
HD\*001\*\*HMO\*D005~  
DTP\*348\*D8\*20040101~  
INS\*Y\*18\*024\*\*A\*\*\*FT~  
REF\*0F\*9999999999~  
REF\*1L\*427738~  
DTP\*303\*D8\*20040106~  
NM1\*IL\*1\*PEROT\*ROSS\*\*\*\*34\*888888888~  
PER\*IP\*\*HP\*7578270416~  
N3\*232 MARTHA LEE DRIVE~  
N4\*HAMPTON\*VA\*23666~  
DMG\*D8\*19521112\*F~  
HD\*024\*\*HMO\*D005\*EMP~  
DTP\*349\*D8\*20040531~  
SE\*169\*0001~  
GE\*1\*52~  
IEA\*1\*000000057~