



Segment: ISA Interchange Control Header

Level: Detail

Usage: Required

Notes: Version 5010/5010A

Data Element Summary

Ref Des	Element Name	Element Note
ISA01	Authorization Information Qualifier	Expect code value: 00
ISA02	Authorization Information	Leave blank
ISA03	Security Information Qualifier	Expect code value: 00
ISA04	Security Information	Leave blank
ISA05	Interchange ID Qualifier	Expect code value: 33
ISA06	Interchange Sender ID	Expect code value: 54704 (IBC NAIC Code)
ISA07	Interchange ID Qualifier	Expect code value: ZZ
ISA08	Interchange Receiver ID	Expect code value: Trading Partner ID *For 835 transaction, expect Chain ID
ISA09	Interchange Date	YYMMDD format
ISA10	Interchange Time	HHMMSS format
ISA11	Interchange Control Standards Identifier	“U” – U.S. EDI ASC12, TDCC, UCS
ISA12	Interchange Control Version Number	“00501” – Draft standards
ISA13	Interchange Control Number	Sequential ISA control number

Enveloping Specifications – Outgoing Transactions (277, U277, 278, 835)



Ref Des	Element Name	Element Note
ISA14	Acknowledgement Requested	Expect code value: 1
ISA15	Usage Indicator	Must be "P" production
ISA16	Component Element Separator	Expect value: ":" (colon)



Segment: GS Functional Group Header

Level: Detail

Usage: Required

Notes: Version 5010/5010A

Data Element Summary

Ref Des	Element Name	Element Note
GS01	Functional Identifier Code	Expect code value: HN (277 - Health Care Claim Status Response) HN (U277 – Unsolicited Health Care Claim Status Response) HI (278 - Health Care Services Review Information) HP (835- Health Care Claim: Professional / Institutional)
GS02	Application Sender’s Code	NAIC Code Expect code: 54704-IBC CMM IBC Traditional IBC Medical Supplemental IBC PPO IBC POS IBC PC 65 95056-Keystone POS Keystone HMO Medicare Keystone Mercy Family Planning SA704-Select Advantage
GS03	Application Receiver’s Code	Expect code: Trading Partner ID *For 835, Provider ID
GS04	Functional Group Create Date	Must be in CCYYMMDD format
GS05	Functional Group Create Time	Must be in HHMM format For 835 transaction, expect HHMMSS

Enveloping Specifications – Outgoing Transactions (277, U277, 278, 835)

IBC

Ref Des	Element Name	Element Note
		format
GS06	Group Control Number	Sequential number assigned by sender
GS07	Responsible Agency Code	"X" – Accredited Standards Committee X12
GS08	Version/Release/ID Code	Enter code values: "005010X212" (277 - Health Care Claim Status Request Response) "005010X217" (278 - Health Care Claim: Response to Request for Review) "005010X221A1" (835- Health Care Claim Payment) "005010XIBC" (U277 – Unsolicited Health Care Claim Status Request Response)