

OR-DHS 834
Enrollment Companion Guide
-Addition-
VERSION 4010A1

**Oregon DHS Companion Guide for 834 Enrollment File
- Addition -**

The objective of this document is to point out preferred selections for data elements where multiple alternatives exist.

This Companion Guide supplements the 834 Implementation Guide Version 004010X095A1.

OR-DHS processes all alpha characters in upper case (except ISA08 and GS03).

Every effort has been made to prevent errors in this document. However, if there is a discrepancy between this document and the Implementation Guide, the Implementation Guide is the final authority.

In the examples given, a lowercase "b" denotes a blank space.

IMPORTANT NOTE: Load the 834 transaction files in the following order: Additions, Closes, Changes, Audit and Compare. As always, the weekly files should be loaded before the monthly files.

**OR-DHS 834
Enrollment Companion Guide
-Addition-
VERSION 4010A1**

ISA - Interchange Control Header - page B3

Usage: Required
Segment Max Use within Loop: 1
Loop Repeat: None
Loop ID: None

Example: ISA*00*bbbbbbbb*00*bbbbbbbb*ZZ*ORDHSOMAPbbbb*ZZ*tp123456bbbb*010801*1452*U*00401*000000001*0*P*:-

| ELEMENT | NAME | USE | ATTRIBUTES | | | Comments |
|---------|-------------------------------------|-----|------------|-----------|--------------|--|
| | | | Min/Max | Data Type | Codes/Values | |
| ISA01 | Authorization Information Qualifier | R | 2/2 | ID | 00 | |
| ISA03 | Security Information Qualifier | R | 2/2 | ID | 00 | |
| ISA05 | Sender Interchange ID Qualifier | R | 2/2 | ID | ZZ | |
| ISA06 | Interchange Sender ID | R | 15/15 | AN | ORDHSOMAP | Spaces are inserted after data to meet 15-byte requirement. |
| ISA07 | Interchange Receiver ID Qualifier | R | 2/2 | ID | ZZ | |
| ISA08 | Interchange Receiver ID | R | 15/15 | AN | | The receiver's mailbox number (tp##### (lowercase "tp")). Spaces are inserted after data to meet 15-byte requirement. |

GS - Functional Group Header - Page B8

Usage: Required
Segment Max Use within Loop: 1
Loop Repeat: None
Loop ID: None

Example: GS*BE*ORDHSOMAP*tp123456*20010801*1452*000000001*X*004010X095A1~

| ELEMENT | NAME | USE | ATTRIBUTES | | | Comments |
|---------|-----------------------------|-----|------------|-----------|--------------|---|
| | | | Min/Max | Data Type | Codes/Values | |
| GS01 | Functional Identifier Code | R | 2/2 | ID | BE | BE = Benefit Enrollment and Maintenance sets |
| GS02 | Application Senders Code | R | 2/15 | AN | ORDHSOMAP | |
| GS03 | Application Receiver's Code | R | 2/15 | AN | | The receiver's mailbox number (tp##### (lowercase "tp")). |

BGN -- Beginning Segment - Page 28

Usage: Required
Segment Max Use within Loop: 1
Loop ID: None

Example: BGN*00*11227*19970920*1200****2~

| ELEMENT | NAME | USE | ATTRIBUTES | | | Comments |
|---------|---------------------------------|-----|------------|-----------|--------------|--|
| | | | Min/Max | Data Type | Codes/Values | |
| BGN01 | Transaction Set Purpose Code | R | 2/2 | ID | 00 | |
| BGN02 | Transaction Set Identifier Code | R | 1/30 | AN | | Assigned by the sender to uniquely identify this occurrence of the transaction for future reference. |
| BGN08 | Action Code | R | 1/2 | ID | 2 | 2 = Change (Update). For weekly reporting on 834. |

OR-DHS 834
 Enrollment Companion Guide
 -Addition-
 VERSION 4010A1

N1 -- Sponsor Name - Page 35

Usage: Required
 Segment Max Use within Loop: 1
 Loop ID: 1000A

Example: N1*P5*OREGON DHS OMAP*FI*930592162~

| | | | ATTRIBUTES | | | |
|---------|-------------------------------|-----|------------|-----------|-----------------|----------------------------------|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| N102 | Plan Sponsor Name | S | 1/60 | AN | OREGON DHS OMAP | |
| N103 | Identification Code Qualifier | R | 1/2 | ID | FI | FI = Federal Tax ID # |
| N104 | Sponsor Identifier | R | 2/80 | AN | 930592162 | Oregon DHS Federal Tax ID Number |

N1 -- Payer - Page 37

Usage: Required
 Segment Max Use within Loop: 1
 Loop ID: 1000B

Example: N1*IN**FI*12356789~

| | | | ATTRIBUTES | | | |
|---------|-------------------------------|-----|------------|-----------|--------------|------------------------------------|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| N103 | Identification Code Qualifier | R | 2/2 | ID | FI | FI = Federal Tax ID # |
| N104 | Insurer Identification Code | R | 2/80 | AN | | Prepaid Heath Plan's Tax ID Number |

INS -- Member Level Detail - Page 43

Usage: Required
 Segment Max Use within Loop: 1
 Loop ID: 2000

Example: INS*Y*18*021**A*E*FT~

| | | | ATTRIBUTES | | | |
|---------|------------------------------|-----|------------|-----------|--------------|--|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| INS01 | Insured Indicator | R | 1/1 | ID | Y | Y= Yes |
| INS02 | Individual Relationship Code | R | 2/2 | ID | 18 | 18 = Self |
| INS03 | Maintenance Type Code | R | 3/3 | ID | 021 | 021 = New |
| INS08 | Employment Status Code | R | 2/2 | ID | | FT = Does not have Medicare. RT = Has Medicare. |

OR-DHS 834
 Enrollment Companion Guide
 -Addition-
 VERSION 4010A1

REF -- Subscriber Number - Page 51

Usage: Required
 Segment Max Use within Loop: 1
 Loop ID: 2000

Example: REF*OF*12345678~

| | | ATTRIBUTES | | | | |
|---------|-----------------------|------------|---------|-----------|--------------|---|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| REF02 | Subscriber Identifier | R | 1/30 | AN | | Recipient's Prime ID as assigned by OR-DHS. |

REF -- Member Policy Number - Page 53

Usage: Situational
 Segment Max Use within Loop: 1
 Loop ID: 2000

Example: REF*1L*123456 ~

| | | ATTRIBUTES | | | | |
|---------|--------------------------------|------------|---------|-----------|--------------|--|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| REF02 | Insured Group or Policy Number | R | 1/30 | AN | | Six-digit Prepaid Health Plan number assigned by OR-DHS. |

REF -- Member Identification Number - Page 55

Usage: Situational
 Segment Max Use within Loop: 5
 Loop ID: 2000

Example: REF*3H*1234567~

| | | ATTRIBUTES | | | | |
|---------|------------------------------------|------------|---------|-----------|--------------|----------------------------------|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| REF01 | Reference Identification Qualifier | R | 2/3 | ID | 3H | 3H = Case Number |
| REF02 | Subscriber Supplemental Identifier | R | 1/30 | AN | | Recipient's current case number. |

REF -- Member Identification Number - Page 55

Usage: Situational
 Segment Max Use within Loop: 5
 Loop ID: 2000

Example: REF*DX*CAF~

| | | ATTRIBUTES | | | | |
|---------|------------------------------------|------------|---------|-----------|--------------|---------------------------------|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| REF01 | Reference Identification Qualifier | R | 2/3 | ID | DX | DX = Department Number |
| REF02 | Subscriber Supplemental Identifier | R | 1/30 | AN | | DHS Department (CAF, SPD, etc.) |

OR-DHS 834
 Enrollment Companion Guide
 -Addition-
 VERSION 4010A1

REF -- Member Identification Number - Page 55

Usage: Situational
 Segment Max Use within Loop: 5
 Loop ID: 2000

Example: REF*23*12345678~

| | | ATTRIBUTES | | | | |
|---------|------------------------------------|------------|---------|-----------|--------------|---|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| REF01 | Reference Identification Qualifier | R | 2/3 | ID | 23 | 23 = Client Number |
| REF02 | Subscriber Supplemental Identifier | R | 1/30 | AN | | Head of Household Prime ID, if available. |

REF -- Member Identification Number - Page 55

Usage: Situational
 Segment Max Use within Loop: 5
 Loop ID: 2000

Example: REF*F6*123456789~

| | | ATTRIBUTES | | | | |
|---------|------------------------------------|------------|---------|-----------|--------------|--|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| REF01 | Reference Identification Qualifier | R | 2/3 | ID | F6 | F6 = Health Insurance Claim (HIC) Number (OMAP referred to as Social Security Claim Number). |
| REF02 | Subscriber Supplemental Identifier | R | 1/30 | AN | | Social Security Claim Number, if available. |

DTP -- Member Level Dates - Page 59

Usage: Situational
 Segment Max Use within Loop: 20
 Loop ID: 2000

Example: DTP*356*D8**19960705~

NOTE: One repeat of the segment for the beginning date of PHP coverage, and one repeat for the ending date of PHP coverage.

| | | ATTRIBUTES | | | | |
|---------|-----------------------------------|------------|---------|-----------|--------------|---|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| DTP01 | Date Time Qualifier | R | 3/3 | ID | | 356 = Begin date. 357 = End date. |
| DTP03 | Status Information Effective Date | R | 1/35 | AN | | PHP Begin Date and PHP End Date of the recipient. The PHP End Date will be the actual termination date or the last day of the current coverage month. |

OR-DHS 834
 Enrollment Companion Guide
 -Addition-
 VERSION 4010A1

NM1 -- Member Name - Page 61

Usage: Required
 Segment Max Use within Loop: 1
 Loop ID: 2100A

Example: NM1*IL*1*SMITH*JOHN*M**SR*34*123456789~

| | | ATTRIBUTES | | | | |
|---------|-------------------------------|------------|---------|-----------|--------------|-----------------------------|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| NM101 | Entity Identifier Code | R | 2/3 | ID | IL | IL = Insured or Subscriber |
| NM108 | Identification Code Qualifier | S | 1/2 | ID | 34 | 34 = Social Security Number |

PER -- Member Communications Numbers - Page 64

Usage: Situational
 Segment Max Use within Loop: 1
 Loop ID: 2100A

Example: PER*IP**TE*5555555555~

| | | ATTRIBUTES | | | | |
|---------|--------------------------------|------------|---------|-----------|--------------|-----------------------|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| PER03 | Communication Number Qualifier | R | 2/2 | ID | TE | TE = Telephone Number |

DMG -- Member Demographics - Page 70

Usage: Situational
 Segment Max Use within Loop: 1
 Loop ID: 2100A

Example: DMG*D8*19450915*F*M*B~

| | | ATTRIBUTES | | | | |
|---------|------------------------|------------|---------|-----------|--------------|--|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| DMG05 | Race or Ethnicity Code | S | 1/1 | ID | | Refer to Race Code Crosswalk, available on the OR-DHS HIPAA website. |

AMT -- Member Policy Amounts - Page 75

Usage: Situational
 Segment Max Use within Loop: 4
 Loop ID: 2100A

Example: AMT*P3*100~

NOTE: Whatever Premium Amount (Capitation Rate) is in effect will be shown in this data element.

| | | ATTRIBUTES | | | | |
|---------|-----------------------|------------|---------|-----------|--------------|---|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| AMT01 | Amount Qualifier Code | R | 1/3 | ID | P3 | P3 = Premium Amount (Capitation Amount) |
| AMT02 | Contract Amount | R | 1/18 | R | | Capitation paid amount. |

OR-DHS 834
 Enrollment Companion Guide
 -Addition-
 VERSION 4010A1

LUI -- Member Language - Page 78

Usage: Situational
 Segment Max Use within Loop: 5
 Loop ID: 2100A

Example: LUI*LE*ENG**7~

| ELEMENT | NAME | USE | ATTRIBUTES | | | Comments |
|---------|-------------------------------|-----|------------|-----------|--------------|--|
| | | | Min/Max | Data Type | Codes/Values | |
| LUI01 | Identification Code Qualifier | S | 1/2 | ID | LE | LE = ISO 639 Language Codes |
| LUI02 | Language Code | S | 2/80 | AN | | Refer to Language Code Crosswalk, available on the OR-DHS HIPAA website. |
| LUI04 | Language Use Indicator | S | 1/2 | ID | 7 | 7 = Language Speaking |

HD -- Health Coverage - Page 128

Usage: Situational
 Segment Max Use within Loop: 1
 Loop ID: 2300

Example: HD*021**HMO*PLAN A BCD*FAM~

| ELEMENT | NAME | USE | ATTRIBUTES | | | Comments |
|---------|---------------------------|-----|------------|-----------|--------------|---|
| | | | Min/Max | Data Type | Codes/Values | |
| HD01 | Maintenance Type Code | R | 2/3 | ID | 021 | 021 = Addition |
| HD03 | Insurance Line Code | R | 2/3 | ID | | AK = Mental Health (Used for both Mental Health and Chemical Dependency) DCP = Dental Capitation HMO = Health Maintenance Organization. |
| HD04 | Plan Coverage Description | S | 1/50 | AN | | Refer to HD04 Element Definition, available on the OR-DHS HIPAA website. |

DTP -- Health Coverage Dates - Page 132

Usage: Required
 Segment Max Use within Loop: 20
 Loop ID: 2300

Example: DTP*348*D8**19960705~

| ELEMENT | NAME | USE | ATTRIBUTES | | | Comments |
|---------|-----------------------------------|-----|------------|-----------|--------------|---------------------|
| | | | Min/Max | Data Type | Codes/Values | |
| DTP01 | Date Time Qualifier | R | 3/3 | ID | 348 | 348 = Benefit Begin |
| DTP03 | Status Information Effective Date | R | 1/35 | AN | | Benefit begin date |

OR-DHS 834
 Enrollment Companion Guide
 -Addition-
 VERSION 4010A1

REF -- Health Coverage Policy Number - Page 135

Usage: Situational
 Segment Max Use within Loop: 5
 Loop ID: 2300

Example: REF*17*A1~

| | | ATTRIBUTES | | | | |
|---------|------------------------------------|------------|---------|-----------|--------------|--|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| REF01 | Reference Identification Qualifier | R | 2/3 | ID | 17 | 17 = Client Reporting Category |
| REF02 | Insured Group or Policy Number | R | 1/30 | AN | | Program Eligibility Reporting Code (PERC). |

COB -- Coordination Of Benefits - Page 150

Usage: Situational
 Segment Max Use within Loop: 5
 Loop ID: 2320

Example: COB*U*H123*5

| | | ATTRIBUTES | | | | |
|---------|---|------------|---------|-----------|--------------|---|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| COB01 | Payer Responsibility Sequence Number Code | R | 1/1 | ID | U | U = Unknown |
| COB02 | Insured Group or Policy Number | S | 1/30 | AN | | The Oregon Health Plan FCHP PHP Contract Service Area Code for medical benefits, if enrolled. |
| COB03 | Coordination of Benefits Code | R | 1/1 | ID | 5 | 5 = Unknown |

COB -- Coordination Of Benefits - Page 150

Usage: Situational
 Segment Max Use within Loop: 5
 Loop ID: 2320

Example: COB*U*D123*5

| | | ATTRIBUTES | | | | |
|---------|---|------------|---------|-----------|--------------|---|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| COB01 | Payer Responsibility Sequence Number Code | R | 1/1 | ID | U | U = Unknown |
| COB02 | Insured Group or Policy Number | S | 1/30 | AN | | The Oregon Health Plan DCO PHP Contract Service Area Code for dental benefits, if enrolled. |
| COB03 | Coordination of Benefits Code | R | 1/1 | ID | 5 | 5 = Unknown |

OR-DHS 834
 Enrollment Companion Guide
 -Addition-
 VERSION 4010A1

COB -- Coordination Of Benefits - Page 150

Usage: Situational
 Segment Max Use within Loop: 5
 Loop ID: 2320

Example: COB*U*M123*5

| | | | ATTRIBUTES | | | |
|---------|---|-----|------------|-----------|--------------|--|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| COB01 | Payer Responsibility Sequence Number Code | R | 1/1 | ID | U | U = Unknown |
| COB02 | Insured Group or Policy Number | S | 1/30 | AN | | The Oregon Health Plan MHO PHP Contract Service Area Code for mental health benefits, if enrolled. |
| COB03 | Coordination of Benefits Code | R | 1/1 | ID | 5 | 5 = Unknown |

COB -- Coordination Of Benefits - Page 150

Usage: Situational
 Segment Max Use within Loop: 5
 Loop ID: 2320

Example: COB*U*B123*5

| | | | ATTRIBUTES | | | |
|---------|---|-----|------------|-----------|--------------|---|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| COB01 | Payer Responsibility Sequence Number Code | R | 1/1 | ID | U | U = Unknown |
| COB02 | Insured Group or Policy Number | S | 1/30 | AN | | The Oregon Health Plan CDO PHP Contract Service Area Code for chemical dependency health benefits, if enrolled. |
| COB03 | Coordination of Benefits Code | R | 1/1 | ID | 5 | 5 = Unknown |

COB -- Coordination Of Benefits - Page 150

Usage: Situational
 Segment Max Use within Loop: 5
 Loop ID: 2320

Example: COB*U*P123*5

| | | | ATTRIBUTES | | | |
|---------|---|-----|------------|-----------|--------------|---|
| ELEMENT | NAME | USE | Min/Max | Data Type | Codes/Values | Comments |
| COB01 | Payer Responsibility Sequence Number Code | R | 1/1 | ID | U | U = Unknown |
| COB02 | Insured Group or Policy Number | S | 1/30 | AN | | The Oregon Health Plan PCO PHP Contract Service Area Code for Physician Care Organization, if enrolled. |
| COB03 | Coordination of Benefits Code | R | 1/1 | ID | 5 | 5 = Unknown |

OR-DHS 834
 Enrollment Companion Guide
 -Addition-
 VERSION 4010A1

COB -- Coordination Of Benefits - Page 150

Usage: Situational

Segment Max Use within Loop: 5

Loop ID: 2320

Example: COB*U*A123*5

| ELEMENT | NAME | USE | ATTRIBUTES | | | Comments |
|---------|---|-----|------------|-----------|--------------|---|
| | | | Min/Max | Data Type | Codes/Values | |
| COB01 | Payer Responsibility Sequence Number Code | R | 1/1 | ID | U | U = Unknown |
| COB02 | Insured Group or Policy Number | S | 1/30 | AN | | The Prepaid Health Plan PHP Contract Service Area Code for this member. |
| COB03 | Coordination of Benefits Code | R | 1/1 | ID | 5 | 5 = Unknown |