

OR-DHS 834
Enrollment Companion Guide
-Audit or Compare-
VERSION 4010A1

**Oregon DHS Companion Guide for 834 Enrollment File
- Audit or Compare -**

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
-Audit or Compare-
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*bbbbbbbbbb*00*bbbbbbbbbb*ZZ*ORDHSOMAPbbbbbb*ZZ*tp123456bbbbbb*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****4~

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	4	4 = Verify

OR-DHS 834
Enrollment Companion Guide
-Audit or Compare-
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~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
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~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
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*030*XN*A*E*FT~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
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	030	030 = Audit or Compare.
INS04	Maintenance Reason Code	S	2/3	ID		This element will either be blank or carry the value XN (notification only, ongoing enrollment)
INS08	Employment Status Code	R	2/2	ID		FT = Does not have Medicare. RT = Has Medicare.

OR-DHS 834
Enrollment Companion Guide
-Audit or Compare-
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
 -Audit or Compare-
 VERSION 4010A1

REF -- Member Identification Number - Page 55

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

Example: REF*23*12345678~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
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~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
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*357*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.

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
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
 -Audit or Compare-
 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~

		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
-Audit or Compare-
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*030**HMO*PLAN A BCD*FAM~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
HD01	Maintenance Type Code	R	2/3	ID	030	030 = Audit or Compare
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*303*D8**19960705~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
DTP01	Date Time Qualifier	R	3/3	ID	303	303 = Maintenance Effective
DTP03	Status Information Effective Date	R	1/35	AN		Benefit begin date

OR-DHS 834
 Enrollment Companion Guide
 -Audit or Compare-
 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
-Audit or Compare-
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
 -Audit or Compare-
 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