

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

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

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.

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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****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.

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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*001*22*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	001	001 = Change
INS04	Maintenance Reason Code	S	2/3	ID	22	22 = Plan Change
INS08	Employment Status Code	R	2/2	ID		FT = Does not have Medicare. RT = Has Medicare. If enrollee is terminated, value = TE.

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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.)	

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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*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.

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.

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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.

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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 = Addition 024 = Cancellation or Termination
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 = Benefit Begin (if retroactive enrollment (R)) 349 = Benefit Termination (if retroactive termination (T))
DTP03	Status Information Effective Date	R	1/35	AN		Benefit begin date

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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		One of the following: The Oregon Health Plan FCHP PHP Contract Service Area Code for medical benefits, if enrolled. or 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

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

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COB -- Coordination Of Benefits - Page 150

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

Example: COB*U*M123*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 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

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 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: Required
 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 receiver's Contract Service Area Code.
COB03	Coordination of Benefits Code	R	1/1	ID	5	5 = Unknown