

**PBM**  
**Interchange Control Header**

Notes:

Guide Page: B.3

**Standard**

**ISA**  
 Purpose: To start and identify an interchange of zero or more functional groups and interchange-related control segments.

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
ISA01	Required	<b>Authorization Information Qualifier</b> Fill with "00" No Authorization Information present (No meaningful information in ISA02)	2/2	N/A	N/A
ISA02	Required	<b>Authorization Information</b> Fill with spaces	10/10	N/A	N/A
ISA03	Required	<b>Security Information Qualifier</b> Fill with "00" No Authorization Information present (No meaningful information in ISA04)	2/2	N/A	N/A
ISA04	Required	<b>Security Information</b> Fill with spaces	10/10	N/A	N/A
ISA05	Required	<b>Interchange ID Qualifier</b> Fill with: <b>ZZ Mutually Defined (recommended)</b>	2/2	N/A	N/A
ISA06	Required	<b>Interchange sender ID</b> Fill with Trading Partner Specific Value (TPSV): <b>GA SHBP tax id is 581282972</b>	15/15	N/A	N/A
ISA07	Required	<b>Interchange ID Qualifier</b> Fill with: <b>30 U.S. Federal Tax Identification Number</b>	2/2	N/A	N/A
ISA08	Required	<b>Interchange Receiver ID</b> Fill with: <b>431420563</b>	15/15	N/A	N/A
ISA09	Required	<b>Interchange Date</b> Fill with current date (YYMMDD)	6/6	N/A	N/A
ISA10	Required	<b>Interchange Time</b> Fill with current time (HHMM)	4/4	N/A	N/A
ISA11	Required	<b>Interchange Control Standards Identifier</b> Fill with "U" U.S. EDI Community of ASC X12, TDCC, and UCS	1/1	N/A	N/A
ISA12	Required	<b>Interchange Control Version Number</b> Fill with "00401"	5/5	N/A	N/A
ISA13	Required	<b>Interchange Control Number</b> Fill with current date + 0 (YYYYMMDD0)  The interchange control number, ISA13, MUST be identical to the associated interchange Trailer IEA02.	9/9	N/A	N/A
ISA14	Required	<b>Acknowledgment Requested</b> Fill with: <b>1 Interchange Acknowledgement Requested (997's)</b> <b>0 No Acknowledgement Requested (997's)</b>	1/1	N/A	N/A
ISA15	Required	<b>Usage Indicator</b> Code to indicate whether data enclosed by this interchange envelope is test or production information "P", when the file is a Production File. "T", when the file is a Test File.	1/1	89	89
ISA16	Required	<b>Component Element Separator</b> Fill with (TPSV):	1/1	N/A	N/A

>

The component element separator is byte number 105. Type is not applicable, this value must be different than the data element separator and the segment terminator. )

### Functional Group Header

Notes:  
Guide Page: B.8

### Standard

#### GS

Purpose: To indicate the beginning of a functional group and to provide control information

### Element Summary

Ref. Des.	Usage	Name	Length	800	800
				Start	Finish
GS01	Required	<b>Functional Identifier Code</b> Fill with "BE" <i>Benefit Enrollment and Maintenance (834)</i>	2/2	N/A	N/A
GS02	Required	<b>Application sender's Code</b> Fill with (TPSV): <b>GA SHBP UHG</b> Use this code to identify the unit sending the information. <i>FeedSourceDesc</i>	2/15	90	107
GS03	Required	<b>Application Receiver's Code</b> Fill with (TPSV): <b>HEB03</b> Use this code to identify the unit receiving the information. <i>FeedSourceID</i>	2/15	108	112
GS04	Required	<b>Date</b> Fill with the processing date (YYYYMMDD)	8/8	65	72
GS05	Required	<b>Time</b> Fill with current time (HHMM)	4/8	N/A	N/A
GS06	Required	<b>Group Control Number</b> Fill with the file number (0001+ 1 for each file) <b>0001</b>	1/9	81	88
GS07	Required	<b>Responsible Agency Code</b> Fill with "X" <i>Accredited Standards Committee X12</i>	1/2	N/A	N/A
GS08	Required	<b>Version/Release/Industry Identifier Code</b> Fill with "004010X095A1" <i>When using the X12N Benefit Enrollment and Maintenance Implementation Guide, originally published May 2000 as 004010X095 and incorporating the changes identified in the Addenda, the valued used in GS08 must be "004010X095A1"</i>	1/12	N/A	N/A

### Transaction Set Header

Usage:  
Notes:  
Guide Page: 27

### Standard

#### ST

Purpose: To indicate the start of a transaction set and to assign a control number

### Element Summary

Ref. Des.	Usage	Name	Length	800	800
				Start	Finish
ST01	Required	<b>Transaction Set Identifier Code</b> Fill with "834" <i>Benefit Enrollment and Maintenance REQUIRED</i>	3/3	N/A	N/A
ST02	Required	<b>Transaction Set Control Number</b> Fill with a counter value <b>0001</b> <i>The transaction set control numbers in ST02 and SE02 must be identical. This unique number also aids in error resolution research. This number such as (0001) must be unique within a specific group and interchange, but the number can repeat in oth</i>	4/9	N/A	N/A

Usage: **Beginning Statement Required**  
 Notes:  
 Guide Page: 28

**Standard**

Purpose: **BGN**  
 To indicate the beginning of a transaction set

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
<b>BGN01</b>	<b>Required</b>	<b>Transaction Set Purpose Code</b> Fill with: <b>00</b> Original (indicated the first time the transaction is sent)	2/2	N/A	N/A
<b>BGN02</b>	<b>Required</b>	<b>Reference Identification</b> Fill with a counter value <b>0001</b>	1/30	N/A	N/A
<b>BGN03</b>	<b>Required</b>	<b>Date</b> Fill with current date (YYYYMMDD)	8/8	N/A	N/A
<b>BGN04</b>	<b>Required</b>	<b>Time</b> Fill with current time (HHMM)	4/8	N/A	N/A
<b>BGN05</b>	<b>Situational</b>	<b>Time Code</b> Fill with (ET "Eastern", CT "Central", ect) "XX" = Time Zone of file creation per National Guide	2/2	N/A	N/A
<b>BGN06</b>	<b>Situational</b>	<b>Reference Identification</b> If BGN01 equals 15 or 22, then BGN06 should be used to cross reference to the previously sent transaction.	1/30	N/A	N/A
<b>BGN07</b>	<b>Not Used</b>	<b>Transaction Type Code</b>	2/2	N/A	N/A
<b>BGN08</b>	<b>Required</b>	Action Code Code to indicate type of transaction "2" Change (Update, used to identify a transaction of additions, terminations and changes to the current enrollment.) "4" Verify (Used to identify a full enrollment transaction to verify that the sponsor's and payer's systems are synchronized. (This should be used when regular files are being sent are not a change file or when the regular file IS a change file	1/2	130	130
				N/A	N/A

Usage: **Transaction Set Policy Number Optional**  
 Notes: **1. This segment can be used if a unique ID Number for a group allies to the entire transaction set.**  
 2. The definition of the Master Policy Number is determined by the issues of the policy, the Payer/Plan Administrator. The Master Policy Number may be used to meet various business needs such as indicating the line of business under which the policy is  
 3. This segment is REQUIRED when the contract or trading partner agreement identify a Master Policy Number for use with the electronic enrollment.

Guide Page: 32

**Standard**

Purpose: **REF**  
 To specify identifying information.

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
<b>REF01</b>	<b>Required</b>	<b>Transaction Set Identifier Code</b> Fill with "38" Master Policy Number	2/3	N/A	N/A
<b>REF02</b>	<b>Required</b>	<b>Reference Identification</b> Fill with: Client Name (TPSV): <b>STATE HEALTH BENEFIT PLAN</b>	1/30	5	64
<b>REF03</b>	<b>Not Used</b>	<b>Description</b>	1/80	N/A	N/A
<b>REF04</b>	<b>Not Used</b>	<b>Reference Identifier</b>		N/A	N/A

File Effective Date  
 Usage: Optional  
 Notes: 1. To be sent when required by contract terms.

Guide Page: 32

**Standard**

Purpose: **DTP**  
 To specify any or all of a date, a time, or a time period.

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
<b>DTP01</b>	<b>Required</b>	<b>Date/Time Qualifier</b> Fill with: <b>303</b> Maintenance Effective	3/3	N/A	N/A
<b>DTP02</b>	<b>Required</b>	<b>Date Time Period Format Qualifier</b> Fill with: "D8"	2/3	N/A	N/A

DTP03

Required

Date Time Period

*Date used by Term by Absence on Full files*

1/35 114 121

Loop: **Sponsor Name**  
 Usage: **1000A - Sponsor Name**  
 Notes: **Required**  
 Guide Page: Use this loop to identify the sponsor.  
 35

**Standard**

N1  
 Purpose: To identify a party by type of organization, name and code

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
N101	Required	Entity Identifier Code Fill with "P5"	2/3	N/A	N/A
N102	Situational	Name Fill with (TPSV): State Health Benefit Plan	1/60	5	64
N103	Required	Identification Code Qualifier Fill with FI U.S. Federal Tax Identification Number	1/2	N/A	N/A
N104	Required	Identification Code Fill with code identifying a party or other code. GA SHBP EmployerTax ID is 581282972	2/80	N/A	N/A

Loop: **Payer**  
 Usage: **1000B - Payer**  
 Notes: **Required**  
 Guide Page: 37

**Standard**

N1  
 Purpose: To identify a party by type of organization, name and code

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
N101	Required	Entity Identifier Code Fill with "IN"	2/3	N/A	N/A
N102	Situational	Name Fill with: EXPRESS SCRIPTS	1/60	N/A	N/A
N103	Required	Identification Code Qualifier Fill with FI Federal Taxpayer's Identification Number	1/2	N/A	N/A
N104	Required	Identification Code Fill with code that meets the criteria from N103 431420563	2/80	N/A	N/A

Loop: **2000 - Member level detail**  
 Usage: **Required**  
 Notes:  
 Guide Page: 43

**Standard**

**INS Insured Benefit**  
 Purpose: To provide benefit information on insured entities

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
INS01	Required	<b>Yes/No Condition or Response Code</b> If subscriber, fill with "Y", else fill with "N"	1/1	N/A	N/A
INS02	Required	<b>Individual Relationship Code</b> If subscriber, fill with "18", else fill with the appropriate relationship code (see national guide).	2/2	271	271
INS03	Required	<b>Maintenance Type Code</b> Use the following rules send "001" to indicate that this is a change to an existing subscriber/dependent record.  send "021" to indicate that this is an addition of a subscriber or a dependent. send "024" to indicate a cancellation, termination, or deletion of a subscriber or dependent.  send "025" to indicate a reinstatement of a cancelled subscriber/dependent record. send "030" when sending a full file to verify that the sponsor and payer databases are synchronized.	3/3	N/A	N/A
INS04	Situational	<b>Maintenance Reason Code</b> Fill with the appropriate maintenance reason code.	2/3	N/A	N/A
INS05	Required	<b>Benefit Status Code</b> Use the following: send "C" when COBRA is the type of coverage under which benefits are paid. send "S" when Surviving Insured is the type of coverage under which benefits are paid.  send "A" when Active is the type of coverage under which benefits are paid.	1/1	501	502
INS06	Situational	<b>Medicare Plan Code</b> This field should be left blank.	1/1	512	512

INS07	Situational	<b>COBRA Qualifying</b> If the member is not enrolled, or being enrolled for a benefit covered by COBRA, then do not populate. <i>If the member is enrolled, or is being enrolled for a benefit covered by COBRA, then fill with the appropriate code from the National Guide.</i>	1/2	N/A	N/A
INS08	Situational	<b>Employment Status Code</b> Only sent on all subscriber records, using the following rules. send "FT" when the general employment status of an employee is Full-time. send "PT" when the general employment status of an employee is Part-time. send "TE" when the general employment status of an employee is Terminated. send "RT" when the general employment status of an employee is Retired. send "L1" when the general employment status of an employee is on a Leave of Absence.  send "AU" when the general employment status of an employee is Active Military - USA.  send "AO" when the general employment status of an employee is Active Military - Outside US.	2/2	501	502
INS09	Situational	<b>Student Status Code</b> Only sent on non-spouse dependents. send "F" when the student status is Full-time. send "N" when the student status is Not a Student.	1/1	N/A	N/A
INS10	Situational	<b>Yes/No Condition or Response Code</b> Only sent on dependents Handicap indicator send "Y" when the condition is Yes. send "N" when the condition is No.	1/1	N/A	N/A
INS11	Situational	<b>Date Time Period Format Qualifier</b> Fill with "D8"	2/3	N/A	N/A
INS12	Situational	<b>Date Time Period</b> Fill with the member's date of death. <i>Only if death date is present</i>	1/35	N/A	N/A
INS17	Situational	<b>Sequencing Number</b> For multiple birth dependents	1/9	N/A	N/A

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Subscriber Number

Loop: 2000 - Member Level Detail  
 Usage: Required  
 Notes:  
 Guide Page: 51

Standard

REF

Purpose: To specify identifying information

Element Summary

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
REF01	Required	Reference Identification Qualifier Fill with "0F" Subscriber Number	2/3	N/A	N/A
REF02	Required	Reference Identification Fill with subscriber's Identifier (Subscriber's SSN)	1/30	248	265

Member Policy Number  
 2000 - Member Level Detail  
 Usage: Situational  
 Notes:  
 1. This segment should be used if the policy or group number applies to all coverage data (all 230C loops) that apply for this member.  
 2. This segment is required unless the policy number is sent in the REF segment, loop 2300 position 290.

Guide Page: 53

Standard

REF

Purpose: To specify identifying information

Element Summary

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
REF01	Required	Reference Identification Qualifier 1L Group or Policy Number	2/3	272	289
REF02	Required	Reference Identification Equals Plan Variation and Reporting Code (example 00010001)	1/30	N/A	N/A

Member Identification Number  
 2000 - Member Level Detail  
 Usage: Situational (5)  
 Notes:  
 1. This segment is used to pass further identifying information on the member. It should be used if the data is available. See REF01 for data elements that can be passed.

Guide Page: 55

Standard

REF

Purpose: To specify identifying information

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
REF01	Required	Reference Identification Qualifier	2/3		
		Fill with:			
	1			427	488
	2			5	22
	3	'23 Client Number To be used to pass a payers specific identifier for a member. Not to be used after HIPAA standard National Identifier for individuals is implemented.		23	40
	4			543	562
	5			266	270
		Q4 Prior Insurance ID -		661	678
REF02	Required	Reference Identification	1/30		
	1			N/A	N/A
	2	Equals Alt ID and goes with Identifier of '23'		N/A	N/A
	3	Equals value from Special Utility 3 and goes with Identifier of 'Q4'		661	678
	4			N/A	N/A
	5			N/A	N/A

Need two REF segments passed one with '23' and one with 'Q4'

Loop: 2000 - Member Level Dates  
 Usage: Situational  
 Repeat: 20  
 Notes: 1. This segment may have multiple rules applied. These need to be sent in multiple segments.

Guide Page: 59

**Standard**

DTP		Purpose:			
		To specify any or all of a date, a time or a time period			
		send No Dates		N/A	N/A
286		Retirement (Employee only)		N/A	N/A
301		COBRA Qualifying Event		N/A	N/A
303		Maintenance Effective		N/A	N/A
336		Employment Begin (Employee only)		N/A	N/A
338		Medicare Begin ***This value will be found in Member Utility 1		N/A	N/A
339		Medicare End ***This value will be found in Member Utility 2		N/A	N/A
340		COBRA Begin		N/A	N/A
341		COBRA End		N/A	N/A
		Other dates as listed in guide		N/A	N/A
		339 Medicare End - Will UHC Use 338 and 339 to send Medicare D enrollment begin/end for SHBP? ESI recommends using 2300 HD loop 348 and 349 begin / end instead to establish a new timeline when coverage changes - see testing scenarios for situations.			

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
DTP01	Required	Date/Time Qualifier	3/3	N/A	N/A
		send no value.			
DTP02	Required	Date Time Period Format Qualifier	2/3	N/A	N/A
		Fill with "D8"			
DTP03	Required	Date Time Period	1/35	N/A	N/A

Loop: **Member Name**  
 Usage: **2100A - Member Name**  
 Notes: **Required**  
 Guide Page: 61

**Standard**

Purpose: **NM1**  
 To supply the full name of an individual or organizational entity

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
NM101	Required	<b>Entity Identifier Code</b> Fill with "IL"	2/3	N/A	N/A
NM102	Required	<b>Entity Type Qualifier</b> Fill with "1" <i>The individual member covered</i>	1/1	N/A	N/A
NM103	Required	<b>Name Last or Organization Name</b> Fill with the member's last name.	1/35	61	78
NM104	Required	<b>Name First</b> Fill with the member's first name.	1/25	49	60
NM105	Situational	<b>Name Middle</b> Fill with the member's middle initial	1/25	79	79
NM106	Situational	<b>Name Prefix</b> Fill with the member's prefix	1/10	N/A	N/A
NM107	Situational	<b>Name Suffix</b> Fill with the member's suffix	1/10	N/A	N/A
NM108	Situational	<b>Identification Code Qualifier</b> Fill with	1/2	N/A	N/A
NM109	Situational	<b>34 Social Security Number</b> <b>Identification Code</b> Fill with the participant's ID - Individual's SSN <i>Until the HIPAA individual Identifier is available the SSN is to be sent when available and allowed under confidentiality regulations.</i>	2/80	503	511

**Member Residence Street Address**  
 Loop: **2100A - Member Name**  
 Usage: **Situational**  
 Notes: 1. Home address  
 Guide Page: 67  
 Repeat: 1

**Standard**  
**N3**  
 Purpose: To specify the location of the named party  
 FETs: If there is no address, then there will be no N3 segment sent.

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
<b>N301</b>	<b>Required</b>	<b>Address Information</b> Fill with the member's first address line.	1/55	80 140	109 169
<b>N302</b>	<b>Situational</b>	<b>Address Information</b> Fill with the member's second address line.	1/55	110 170	139 199

**Member Residence City, State, Zip Code**  
 Loop: **2100A - Member Name**  
 Usage: **Situational**  
 Notes: 1. Home address  
 Guide Page: 68

**Standard**  
**N4**  
 Purpose: To specify the geographic place of the named party

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
<b>N401</b>	<b>Required</b>	<b>City Name</b> Fill with the member's City Name	2/30	200	227
<b>N402</b>	<b>Required</b>	<b>State or Province Code</b> Fill with the member's State Code	2/2	228	229
<b>N403</b>	<b>Required</b>	<b>Postal Code</b> ZIP Code (for the USA) or Member's Postal Zone (for International Addresses) Zip Code extension may be included	3/15	230	238
<b>N404</b>	<b>Situational</b>	<b>Country Code</b> Provided only if the country is not the U.S. Code Conversion from national guide	2/3	N/A	N/A

**Member Demographics**  
 Loop: **2100A - Member Name**  
 Usage: **Situational**  
 Notes:  
 Guide Page: 70

**Standard**  
**DMG**  
 Purpose: To supply demographic information

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
<b>DMG01</b>	<b>Required</b>	<b>Date Time Period Format Qualifier</b> Fill with "D8"	2/3	N/A	N/A
<b>DMG02</b>	<b>Required</b>	<b>Date Time Period</b> Fill with the member's birth date.	1/35	239	246
<b>DMG03</b>	<b>Required</b>	<b>Gender Code</b> Fill with the member's gender code. "F" when the member's gender is Female. "M" when the member's gender is Male.	1/1	247	247
<b>DMG04</b>	<b>Situational</b>	<b>Marital Status Code</b> Only sent on subscribers only	1/1	N/A	N/A

**Health Coverage**  
**2300 - Health Coverage**  
 Loop: **Situational**  
 Usage: **99**  
 Repeat: **99**  
 Notes:  
 Guide Page: 128

**Standard**  
**HD**  
 Purpose: To provide information on health coverage

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
HD01	Required	<b>Maintenance Type Code</b> Fill with: send "001" to indicate that this is a change to an existing subscriber/dependent record.  send "002" to indicate that this is a deletion of a subscriber or a dependent. send "021" to indicate that this is an addition of a subscriber or a dependent. send "024" to indicate a cancellation or a termination of a subscriber or dependent. send "025" to indicate a reinstatement of a cancelled subscriber/dependent record. send "030" when sending a full file to verify that the sponsor and payer databases are synchronized.	3/3	N/A	N/A
		<b>Hardcode '030'</b>			
HD02	Not Used	<b>Maintenance Reason Code</b>	2/3	N/A	N/A
HD03	Required	<b>Insurance Line Code</b> The following is the supported code set:  <b>PDG Prescription Drug</b>	2/3	N/A	N/A
HD04	Situational	<b>Plan Coverage Description</b> Fill with Group Space	1/50	N/A	N/A
HD05	Situational	<b>Coverage Level Code</b> All codes accepted	3/3	408	408

**Health Coverage Dates**  
**2300 - Health Coverage**  
 Loop: **Required**  
 Usage: **Required**  
 Notes: This segment contains the date that maintenance was performed or effective, and the benefit begin and end dates for the coverage or line of business.  
 Guide Page: 132

**Standard**  
**DTP**  
 Purpose: To specify any or all of a date, a time or a time period

DTP01	DTP03				
303	Maintenance Effective				
348	Benefit Begin (always sent on member)		41	48	
349	Benefit End (only sent when present and until equals date)		350	357	

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
DTP01	Required	<b>Date/Time Qualifier</b>	3/3	N/A	N/A
DTP02	Required	<b>Date Time Period Format Qualifier</b> Fill with "D8"	2/3	N/A	N/A
DTP03	Required	<b>Date Time Period</b> (YYYYMMDD)	1/35	See	above

**Health Coverage Policy Number**  
**2300 - Health Coverage**  
 Loop: **Situational**  
 Usage: **2**  
 Repeat: **2**  
 Notes: This segment should be used to identify a policy or group number for a particular insurance product if it has not already been identified in 2000 REF02. This is necessary when not all coverage types have the same group or policy number.  
 Guide Page: 135

**Standard**  
**REF**  
 Purpose: To specify identifying information  
 Single REF instance 1L\*

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
REF01	Required	<b>Reference Identification Qualifier</b> Fill with: <b>1L = Group or Policy Number</b> ZZ = Mutually Defined (Used this code for the Payment Plan Type Code (Annual or Quarterly) until a standard code is assigned) 17 = Client Reporting Category (This	2/3	N/A	N/A
REF02	Required	<b>Reference Information</b> Fill with the group number. TPSV: Fill with the group number specified, member level group coverage. Use Plan Variation and Reporting Codes (example 00010001)	1/30	272	289
		<b>Coordination of Benefits</b>		x	x

Loop: **2320 - Coordination of Benefits** x  
 Usage: **Situational** x  
 Notes: 1. Use this loop whenever an individual has another insurance plan with benefits similar to those covered by the insurance product specified in the HD segment for the occurrence of Loop ID-2300. Always provide this information when provided to the sponsor. Provide the COB information by individual, not by subscriber. x  
 2. Send this data when such transmission is required under the insurance contract between the sponsor and the payer. - ESI Requires this be sent as secondary for SHBP when participants who are enrolled in Medicare D (primary) have SHBP "Wrap" (secondary) coverage.

Guide Page: 150 x  
 x  
 x

**Standard**  
**COB**  
 Purpose: To supply information on coordination of benefits x  
 x  
**Element Summary** x

Ref. Des.	Usage	Name	x	Length	800 Start	800 Finish
COB01	Required	<b>Payer Responsibility Sequence Number Code</b> P Primary S Secondary T Tertiary U Unknown	x	1/1	426	426
			x			
			x			
			x			
			x			
COB02	Situational	<b>Reference Identification</b> Fill with Policy Number <i>Always supply the policy number when it is available.</i>	x	1/30	N/A	N/A
			x			
			x			
			x			
COB03	Required	<b>Coordination of Benefits Code</b> Fill with: 1 Coordination of Benefits 5 Unknown 6 No Coordination of Benefits (use this to verify that it was determined that there is no COB)	x	1/1	N/A	N/A
			x			
			x			
			x			
			x			

x  
 x  
**Coordination of Benefits Eligibility Dates**  
 Loop: **2320 - Coordination of Benefits** x  
 Usage: **Situational** x  
 Notes: x  
 Guide Page: 156 x  
 x  
 x

**Standard**  
**DTP**  
 Purpose: To specify any or all of a date, a time, or a time period. x  
 x  
**Element Summary** x

Ref. Des.	Usage	Name	x	Length	800 Start	800 Finish
DTP01	Required	<b>Date/Time Qualifier</b> The following is the supported code set: Code Definition 344 Use when sending the effective date. 345 Use when sending the term date.	x	1/1	N/A	N/A
			x			
			x			
			x			
			x			
DTP02	Required	<b>Date Time Period Format Qualifier</b> Fill with the "D8".	x	1/30	N/A	N/A
			x			
			x			
DTP03	Required	<b>Date Time Period</b> send the effective date if the Date/Time Qualifier (DTP01) is equal to 344. send the term date if the Date/Time Qualifier (DTP01) is equal to 345.	x	1/1	N/A	N/A
			x			
			x			

**Transaction Set Trailer**  
 Usage: **Required**  
 Notes: x  
 Guide Page: 158 x  
 x

**Standard**  
**SE**  
 Purpose: To indicate the end of the transaction set and provide the count of the transmitted segments (including the beginning (ST) and ending (SE) segments) x

**Element Summary** x

Ref. Des.	Usage	Name	x	Length	800 Start	800 Finish
SE01	Required	<b>Number of included Segments</b> Total number of segments included in the transaction set including ST and SE segments	x	1/10	5	11
			x			
SE02	Required	<b>Transaction Set Control Number</b> Identifying control number hat must be unique within the transaction set function al group assigned by the originator for a transaction set. <i>The transaction set control numbers in the ST02 and SE02 must be identical. This unique number also aids in the error resolution research. This number must be unique within a specific group and interchange, but the number can repeat in other groups and</i>	x	4/9	N/A	N/A

**Functional Group Trailer**  
 Notes: x  
 Guide Page: B.10 x

**Standard**  
**GE**  
 Purpose: To indicate the end of a functional group and to provide control information x

**Element Summary** x

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
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GE01	Required	<b>Number of Transaction Sets Included</b> Total number of transaction sets included in the functional group or interchange (transmission) group terminated by the trailer containing this data element	1/6	N/A	N/A
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GE02	Required	<b>Group Control Number</b> Assigned number originated and maintained by the sender. The data interchange control number GE02 in this trailer must be identical to the same data element in the associated functional group header, GS06.	1/9	N/A	N/A
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**Interchange Control Trailer**

Notes:  
Guide Page: B.7

**Standard**

**IEA**  
Purpose: To define the end of an interchange of zero or more functional groups and interchange-related control segments

**Element Summary**

Ref. Des.	Usage	Name	Length	800 Start	800 Finish
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IEA01	Required	<b>Number of included Functional Groups</b> Fill with "1"	1/5	N/A	N/A
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IEA02	Required	<b>Interchange Control Number</b> The interchange control numbers in ISA13 and IEA02 must be identical.	9/9	N/A	N/A
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