

**THE OREGON DHS MMIS 270
Health Care Eligibility Benefit Inquiry
VERSION 4010A1**

The Oregon DHS MMIS Companion Guide for 270 Health Care Eligibility Benefit Inquiry

The objective of this document is:

- *To clarify what information is needed by Dept. of Human Services (OR-DHS) where the guide indicates that the choice is dependent on the Payer.
- *To point out preferred selections for data elements where multiple alternatives exist.

This Companion Guide supplements the 270 Eligibility Benefit Inquiry Implementation Guide Version 004010X092A1. In order to create an OR-DHS HIPAA compliant transaction, you must first meet the requirements of the Implementation Guide and then incorporate the payer (OR-DHS) specific requirements.

OR-DHS processes all alpha characters in upper case.

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 in this Companion Guide, a lowercase "b" denotes a blank space.

DHS will use the following search criteria when attempting to make a match within the system:

- 1) Prime I.D.
- 2) Social Security Number and Date of Birth
- 3) Social Security Number and Last/First Name
- 4) First/Last Name and Date of Birth

Additional identifying information may be sent, but it is not used in the current search functionality.

If your search criteria did not produce a successful 271 Response Transaction from DHS, please carefully check the data elements you used in the 270 Inquiry Transaction.

In order to create an OR-DHS HIPAA compliant transaction, you must first meet the requirements of the Implementation Guide and then incorporate the payer (OR-DHS) specific requirements.

Transaction submission size: At this time OR-DHS recommends the batch 270 transactions be no larger than 3 megabytes.

IMPORTANT NOTE: When determining the delimiters to use/send, please take data content, communication protocols, and industry standards into account. If transmission or transaction errors can be traced to the choice of a delimiter, trading partners will be notified, and the use of that delimiter will be prohibited. For example: When the EBCDIC character for <new line> is used as a delimiter, and it is converted to ASCII, it becomes two characters - <carriage return> and <line feed>. Systems using ASCII characters encounter extra, non-conforming characters and reject the transmission.

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ISA -- Interchange Control Header - Page B3

Usage: Required

Example: ISA*00*bbbbbbbb*00*bbbbbbbb*ZZ*TP123456bbbbbb*ZZ*ORDHSbbbb*010801*1452*U*00401*000000001*0*P*:-

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Type	Codes/Values	
ISA01	Authorization Information Qualifier	R	2/2	ID	00	
ISA03	Security Information Qualifier	R	2/2	ID	00	
ISA05	Interchange ID Qualifier	R	2/2	ID	ZZ	
						The sender's mailbox number (TP##### (uppercase "TP")).
ISA06	Interchange Sender ID	R	15/15	AN		Insert spaces <u>after</u> data to meet 15-byte requirement.
ISA07	Interchange ID Qualifier	R	2/2	ID	ZZ	
ISA08	Interchange Receiver ID	R	15/15	AN	ORDHS	Insert spaces <u>after</u> data to meet 15-byte requirement.

GS -- Functional Group Header - Page B8

Usage: Required

Example: GS*HS*TP123456*ORDHS*20050325*1452*1215*X*004010X092A1~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Type	Codes/Values	
GS02	Application Sender's Code	R	2/15			The sender's mailbox number (TP##### (uppercase "TP")).
GS03	Application Receiver's Code	R	2/15		ORDHS	

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BHT -- Beginning of Hierarchical Transaction- Page 38

Usage: Required
 Segment Max Use within Transaction: 1
 Loop ID: None
 Example: BHT*0022*13**20050325*0932*-

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Type	Codes/Values	
BHT02	Transaction Set Purpose Code	R	2/2	ID	13	

NM1 -- Information Source Name - Page 44

Usage: Required
 Segment Max Use within Loop: 1
 Loop ID: 2100A
 Example: NM1*P5*2*OREGON DHS****FI*930592162-

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Type	Codes/Values	
NM101	Entity Identifier Code	R	2/3	ID		P5 - Plan Sponsor (270 requests from Prepaid Health Plans) PR - Payer (270 requests from FFS providers)
NM102	Entity Type Qualifier	R	1/1	ID	2	2
NM103	Information Source Last or Organization Name	R	1/35	AN	OREGON DHS	OREGON DHS
NM108	Identification Code Qualifier	R	1/2	ID	FI	FI - Tax Identification Number
NM109	Information Source Primary Identifier	R	2/80	AN	930592162	

NM1 -- Information Receiver Name - Page 50

Usage: Required
 Segment Max Use within Loop: 1
 Loop ID: 2100B
 Example: NM1*1P*1*PROVIDER Name*****XX*0123456789-

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Type	Codes/Values	
NM101	Entity Identifier Code	R	2/3	ID		1P - Provider 2B - Third-Party Administrator 80 - Hospital FA - Facility GP - Gateway Provider
NM108	Identification Code Qualifier	R	1/2	ID	XX SV	XX - Health Care Financing Administration National Provider Identifier (NPI) for Healthcare Providers SV - Service Provider Number
NM109	Information Receiver Primary Identifier	R	2/80	AN		Enter the Appropriate 10 Digit National Provider ID (NPI) or noncovered entity Legacy Identifier

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N4 -- Information Receiver City/State/ZIP Code - Page 59

Usage: Situational
 Segment Max Use within Loop: 1
 Loop ID: 2100B
 Example: N4*SALEM*OR*973011234~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
N403	Postal Code	R	3/15	ID		Information Receiver Zip Code + 4 may be required to uniquely identify receiver ID

PRV -- Information Receiver Provider Information - Page 64

Usage: Situational
 Segment Max Use within Loop: 1
 Loop ID: 2100B
 Example: PRV*PE*ZZ*20G00000X~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Data Type	Codes/Values	
PRV01	Provider Code	R	1/3	ID		Provider Code
PRV02	Reference Identification Qualifier	R	2/3	ID	ZZ	ZZ – Health Care Provider Taxonomy
PRV03	Reference Identification	R	1/30	AN		Provider Taxonomy Code on file with OR DHS may be required to uniquely identify receiver ID

NM1 -- Subscriber Name - Page 71

Usage: Required
 Segment Max Use within Loop: 1
 Loop ID: 2100C
 Example: NM1*IL*1*DOE*JOHN*T**JR*MI*12345678~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Type	Codes/Values	
NM103	Subscriber Last Name	S	1/35	AN		Patient's last name as it appears on the DHS medical care identification. Do not use special characters. Cannot be blank.
NM104	Subscriber First Name	S	1/25	AN		Patient's first name as it appears on the DHS medical care identification. Do not use special characters. Cannot be blank.
NM108	Identification Code Qualifier	S	1/2	ID	MI	
NM109	Subscriber Primary Identifier	S	2/80	AN		Recipient's 8 character prime I.D. as it appears on the DMAP medical care identification.

REF -- Subscriber Additional Identification - Page 74

Usage: Situational
 Segment Max Use within Loop: 9
 Loop ID: 2100C
 Example: REF*SY*123456789~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Type	Codes/Values	
REF01	Identification Code Qualifier	R	2/3	ID	SY	
REF02	Subscriber Supplemental Identifier	R	1/30	AN		At this time, the only additional value OR-DHS may use to identify the member is the social security number.

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DTP -- Member Level Dates - Page 87

Usage: Situational
Segment Max Use within Loop: 9
Loop ID: 2100C

NOTE: If the request date is in the future, the system will change the date to current processing date.

Example: DTP*472*RD8*20040324-20050324~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Type	Codes/Values	
DTP03	Date Time Period	R	1/35	AN		DHS recommends the requested date range be 90 days or less provided the date range does not exceed 13 months from current processing date.

EQ -- Subscriber Eligibility or Benefit Inquiry Information - Page 89

Usage: Situational
Segment Max Use within Loop: 1
Loop ID: 2110C

Example: EQ*30**IND*MC~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Type	Codes/Values	
EQ01	Service Type Code	R	1/2	ID	30	

DTP -- Subscriber Eligibility/Benefit Date - Page 106

Usage: Situational
Segment Max Use within Loop: 9
Loop ID: 2110C

NOTE: If the request date is in the future, the system will change the date to current processing date.

Example: DTP*472*RD8*20040324-20050324~

ELEMENT	NAME	USE	ATTRIBUTES			Comments
			Min/Max	Type	Codes/Values	
DTP03	Date Time Period	R	1/35	AN		DHS recommends the requested date range be 90 days or less provided the date range does not exceed 13 months from current processing date.