



Appendix 3B. Crosswalk from Retired Minimum Data Element List to Appendix 3A MA Companion Guide

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The purpose of this appendix is to indicate which data elements in the retired Minimum Data Element (MDE) list are and are not included in Appendix 3A, MA Companion Guide. This crosswalk may assist submitters who have referred to the MDE list historically.

Appendix 3A, the MA Companion Guide, provides instructions for the submission of EDRs and CRRs that are supplemental to the TR3 guides for populating the X12 837 5010 format. As mentioned in Chapter 3, the Appendix 3A MA Companion Guide is a consolidated and streamlined file that includes a subset of X12 837 5010 elements listed in the three previous Companion Guides (found on the www.csscooperations.com website, and last updated in July 2016).

This appendix is organized as follows:

- Section A3B.1/Table A3B.1 crosswalk the table numbers used in the retired MDE list to the labels and names of control segments and loops;
- Section A3B.2/Table A3B.2 provides a crosswalk of column headings used in the retired MDE list compared to Appendix 3A in this guide;
- Section A3B.3/Table A3B.3 presents the crosswalk between the retired MDE list and Appendix 3A for the 837 5010 control segments – specifically for retired MDE Tables, 2, 3, 20, 21, and 22; and
- Section 3B.4 presents the crosswalk between the retired MDE list and Appendix 3A, specifically for the transaction-specific data elements in retired MDE tables 4 through 19.

To assist users of this crosswalk, we have added segment names (grey rows) to each retired MDE table in Sections A3B.3 and A3B.4. These segment names are included in Appendix 3A.

A3B.1 Loops and Segments Applied to EDR and CRR Submissions

Each row applies to both Institutional and Professional/DME records, except where indicated with a note.

Table A3B.1 List of Loops and Segments by Retired MDE List Table Number

| MDE List Table Number | X12 837 5010 Label | Name |
|-------------------------|--------------------|-------------------------------------|
| Control Segments | | |
| 1 | ISA | INTERCHANGE CONTROL HEADER |
| 22 | IEA | INTERCHANGE CONTROL TRAILER |
| 2 | GS | FUNCTIONAL GROUP HEADER |
| 21 | GE | FUNCTIONAL GROUP TRAILER |
| 3 | ST | TRANSACTION SET HEADER |
| 20 | SE | TRANSACTION TRAILER |
| Data Loops | | |
| 4 | Segment BHT | BEGIN HIERARCHICAL TRANSACTION |
| 5 | Loop 1000A | SUBMITTER NAME |
| 6 | Loop 1000B | RECEIVER NAME |
| 7 | Loop 2000A | BILLING PROVIDER HIERARCHICAL LEVEL |
| 8 | Loop 2010AA | BILLING PROVIDER NAME |
| 9 | Loop 2000B | SUBSCRIBER HIERARCHICAL LEVEL |
| 10 | Loop 2010BA | SUBSCRIBER NAME |
| 11 | Loop 2010BB | PAYER NAME |
| 12 | Loop 2300 | CLAIM INFORMATION |
| 13 | Loop 2310E** | AMBULANCE PICK-UP LOCATION |
| 14 | Loop 2310F** | AMBULANCE DROP-OFF LOCATION |
| 15 | Loop 2320 | OTHER SUBSCRIBER INFORMATION |
| 16 | Loop 2330A | OTHER SUBSCRIBER NAME |
| 17 | Loop 2330B | OTHER PAYER NAME |
| 18 | Loop 2400 | SERVICE LINE |
| 19 | Loop 2430 | LINE ADJUDICATION INFORMATION |

** Professional EDRs only.

MDE = Minimum Data Element.

[A3B.2 Column Heading Crosswalk from Appendix 3A MA Companion Guide to Appendix 3B Retired MDE List](#)

Table A3B.2: Column Heading Crosswalk, Retired MDE List and Appendix 3A, MA Companion Guide

| Appendix 3B: Retired MDE list Column Headings | Appendix 3A: MA Companion Guide Column Headings |
|--|---|
| Reference | TR3 Data Element Reference Code |
| Name | TR3 Data Element Name |
| Field Description | TR3 Element Description |
| EDS Guidance | CMS Supplemental Instructions for EDR & CRR Submissions |

[A3B.3 X12 837 5010 Control Segments: Retired MDE Tables 1, 2, 3, 20, 21, and 22](#)

Each row applies to both Institutional and Professional/DME records.

Table A3B.3 X12 837 5010 Control Segments - Retired MDE Tables 1, 2, 3, 20, 21, and 22

| Reference | Name | Field Description | EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|--|-------------------------------------|---|---|
| ISA: Interchange Control Header | | | |
| ISA01 | Authorization Information Qualifier | 00 = No authorization information present in ISA02 03 = Additional Data Identification | Included in Appendix 3A, MA Companion Guide |
| ISA02 | Authorization Information | If 03 was populated in ISA01, would contain the authorization information | Included in Appendix 3A, MA Companion Guide |
| ISA03 | Security Information Qualifier | 00 = No security information present 01 = Password | Included in Appendix 3A, MA Companion Guide |
| ISA04 | Security Information | If 01 was populated in ISA03, would contain the security information | Included in Appendix 3A, MA Companion Guide |
| ISA05 | Interchange ID Qualifier | TR3 guides list multiple values. | Included in Appendix 3A, MA Companion Guide |
| ISA06 | Interchange Sender ID | Identifies the Submitter sending the file | Included in Appendix 3A, MA Companion Guide |



| Reference | Name | Field Description | EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------|------------------------------------|---|--|
| ISA07 | Interchange ID Qualifier | TR3 guides list multiple values. | Included in Appendix 3A, MA Companion Guide |
| ISA08 | Interchange Receiver ID | Identifies the Receiving system (Institutional, Professional, or DMEPOS) | Included in Appendix 3A, MA Companion Guide |
| ISA09 | Interchange Date | Date the file was sent by the Submitter. | Not included in Appendix 3A because no supplemental instructions, follow TR3 guidance. |
| ISA10 | Interchange Time | Time the file was sent by the Submitter. | Not included because no supplemental instructions, follow TR3 guidance. |
| ISA11 | Repetition Separator | Provides the delimiter used to separate repeated occurrences of simple and composite data elements. | Included in Appendix 3A, MA Companion Guide |
| ISA12 | Interchange Control Version Number | Specifies the version number of the file. | Not included because no supplemental instructions, follow TR3 guidance. |
| ISA13 | Interchange Control Number | Identified by the Submitter. | Included in Appendix 3A, MA Companion Guide |
| ISA14 | Acknowledgement Request | 0 = Acknowledgement not requested 1 = Acknowledgement requested | Included in Appendix 3A, MA Companion Guide |
| ISA15 | Usage Indicator | Indicates whether the file is a test or production file. T = Test P = Production | Not included because no supplemental instructions, follow TR3 guidance. |
| ISA16 | Component Element Separator | Delimiter to separate component data elements – must be different than ISA11. | Not included because no supplemental instructions, follow TR3 guidance. |



| Reference | Name | Field Description | EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|---|--|---|---|
| IEA: Interchange Control Trailer | | | |
| IEA01 | Number of Included Functional Groups | Identifies a count of the number of functional groups within the interchange (file). | Not included because no supplemental instructions, follow TR3 guidance. |
| IEA02 | Interchange Control Number | Control number identified by the Submitter. Must match the value in ISA13 and be unique within a 12 month period. | Included in Appendix 3A, MA Companion Guide |
| GS: Functional Group Header | | | |
| GS01 | Functional Identifier Code | Two character code assigned to each transaction set by X12. | Not included because no supplemental instructions, follow TR3 guidance. |
| GS02 | Application Sender's Code | Identifies the Submitter sending the file. | Included in Appendix 3A, MA Companion Guide |
| GS03 | Application Receiver's Code | Identifies the party receiving transmissions (Institutional, Professional, or DMEPOS). | Included in Appendix 3A, MA Companion Guide |
| GS04 | Group Creation Date | Identifies the date the functional group was created. CCYYMMDD format | Not included because no supplemental instructions, follow TR3 guidance. |
| GS05 | Group Creation Time | Identifies the time the functional group was created. HHMM format | Not included because no supplemental instructions, follow TR3 guidance. |
| GS06 | Group Control Number | Originated and maintained by the sender – must be unique within the file. Must match the value in GE02. | Included in Appendix 3A, MA Companion Guide |
| GS07 | Responsible Agency Code | Code identifying the issuer of the standard X = Accredited Standards Committee X12. | Not included because no supplemental instructions, follow TR3 guidance. |
| GS08 | Version/Release/Industry Identifier Code | Unique version/release/industry identifier code 0050101X222 (Professional and DME) 0050101X223 (Institutional) | Included in Appendix 3A, MA Companion Guide |
| GE: Functional Group Trailer | | | |
| GE01 | Number of Transaction Sets Included | Identifies a count of the number of transaction sets within the functional group. | Not included because no supplemental instructions, follow TR3 guidance. |



| Reference | Name | Field Description | EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|------------------------------------|-------------------------------------|---|---|
| GE02 | Group Control Number | Originated and maintained by the sender – must be unique within the file. Must match the value in GS06. | Included in Appendix 3A, MA Companion Guide |
| ST: Transaction Set Header | | | |
| ST01 | Transaction Set Identifier Code | Identifies the type of transaction 837 = Health Care Claim | Included in Appendix 3A, MA Companion Guide |
| ST02 | Transaction Set Control Number | Originated and maintained by the originator. Must be unique within the file. Must match the value is SE02 | Included in Appendix 3A, MA Companion Guide |
| ST03 | Implementation Convention Reference | Unique version/release/industry identifier code 0050101X222 (Professional and DME) 0050101X223 (Institutional). | Included in Appendix 3A, MA Companion Guide |
| SE: Transaction Set Trailer | | | |
| SE01 | Transaction Segment Count | Identifies a count of the number of segments within the transaction. | Not included because no supplemental instructions, follow TR3 guidance. |
| SE02 | Transaction Set Control Number | Originated and maintained by the sender – must be unique within the file. Must match the value is ST02 | Included in Appendix 3A, MA Companion Guide |

EDS = Encounter Data System; TR3 = Technical Report Type 3; DME = Durable Medical Equipment; DMEPOS = Durable Medical Equipment, Prosthetics, Orthotics, and Supplies; EDFES = Encounter Data Front-End System; EDI = Electronic Data Interchange.

A3B.4 Transaction-specific Data Elements: Retired MDE Tables 4 through 19

Each row applies to both Institutional and Professional/DME records, unless otherwise indicated.

Shaded rows represent Segment IDs and names in the X12 TR3 5010.

Non-shaded rows contain segment labels, segment names, and date element labels and names.

Retired MDE Table 4 BHT Segment

| Reference | Name | Field Description | BHT EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|--|-------------------------------|--|--|
| BHT: Begin Hierarchical Transaction | | | |
| BHT01 | Hierarchical Structure Code | 0019 = Information Source, Subscriber, Dependent | Not included because there are no supplemental instructions; follow TR3 guidance. |
| BHT02 | Transaction Set Purpose Code | Code identifying the purpose of the transaction set. 00 = Original (transmissions have never been sent before) 18 = Reissue (if a transmission was disrupted and Palmetto requests a retransmission) | Not included because there are no supplemental instructions; follow TR3 guidance. |
| BHT03 | Batch Control Number | Originated and maintained by the sender – must be unique across all files. | Included in Appendix 3A, MA Companion Guide |
| BHT04 | Transaction Set Creation Date | Identifies the date the transaction set was created. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| BHT05 | Transaction Set Creation Time | Identifies the time the transaction set was created. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| BHT06 | Transaction Set Type Code | Identifies the encounter. 31 = Subrogation Demand CH = Chargeable RP = Reporting | Included in Appendix 3A, MA Companion Guide |

TR3 = Technical Report Type 3; EDS = Encounter Data System.

Retired MDE Table 5. Loop 1000A – Submitter Name

| Reference | Name | Field Description | Loop 1000A EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|---|-------------------------------|---|---|
| NM1: Submitter Name | | | |
| NM101 | Entity Identifier Code | Qualifier that identifies the information populated in NM103 pertains to the submitter 41 = Submitter. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM102 | Entity Type Qualifier | Identifies the type of submitter. 1 = Person 2 = Non-person entity | Included in Appendix 3A, MA Companion Guide |
| NM103 | Organization Name/Last Name | Identifies the Submitter's Name. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM108 | Identification Code Qualifier | Qualifier that identifies the information populated in NM109 pertains to the Submitter ID 46 = Electronic Transmitter Identifier Number. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM109 | Submitter Identifier | Identifies the Submitter sending the file. | Included in Appendix 3A, MA Companion Guide |
| PER: Submitted EDI Contact Information | | | |
| PER01 | Contact Function Code | Qualifier that identifies the information populated in PER02 pertains to the Submitter contact person. IC = Information Contact | Not included because there are no supplemental instructions; follow TR3 guidance. |
| PER02 | Contract Function Code | Submitter Contact Name. | Not included because there are no supplemental instructions; follow TR3 guidance. |



| Reference | Name | Field Description | Loop 1000A EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------|--------------------------------|--|---|
| PER03 | Communication Number Qualifier | Qualifier that identifies the information populated in PER04 pertains to the communication type. EM = Electronic Mail FX = Fax TE = Telephone | Included in Appendix 3A, MA Companion Guide |
| PER04 | Communication Number | Submitter's contact telephone number, fax number, or email address. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| PER05 | Communication Number Qualifier | Identifies type of communication number entered in PER06. EM = Electronic Mail EX = Telephone Extension FX = Fax TE = Telephone | Included in Appendix 3A, MA Companion Guide [Listed in the previous Companion Guides, not the retired MDE list.] |
| PER07 | Communication Number Qualifier | Identifies type of communication number entered in PER08. EM = Electronic Mail EX Telephone Extension FX = Fax TE = Telephone | Included in Appendix 3A, MA Companion Guide [Listed in the previous Companion Guides, not the retired MDE list.] |

EDI =Electronic Data Interchange; MAO = Medicare Advantage Organization; EDS = Encounter Data System.

Retired MDE Table 6. Loop 1000B – Receiver Name

| Reference | Name | Field Description | Loop 1000B EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|---------------------------|-------------------------------|--|---|
| NM1: Receiver Name | | | |
| NM101 | Entity Identifier Code | Qualifier that identifies the information populated in NM103 pertains to the receiver (Palmetto/CMS). Only available value: 40 = Receiver | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM102 | Entity Type Qualifier | Qualifier that identifies the type of receiver. Only available value: 2 = Non-person entity | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM103 | Organization Name | Identifies the Receiver’s name. | Included in Appendix 3A, MA Companion Guide |
| NM108 | Identification Code Qualifier | Qualifier that identifies the information populated in NM109 will provide the receiver’s ID. Only available value: 46 = Electronic Transmitter Identifier Number | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM109 | Receiver Identifier | Provides the receiver’s ID depending on the encounter type. | Included in Appendix 3A, MA Companion Guide |

TR3 = Technical Report Type 3; EDS = Encounter Data System

Retired MDE Table 7. Loop 2000A – Billing Provider Hierarchical Level

| Reference | Name | Field Description | Loop 2000A EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------|-------------------------|---|---|
| HL01 | Hierarchical ID Number | Unique number assigned by the submitter that identifies the hierarchical structure – must begin with “1” and increase incrementally. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HL03 | Hierarchical Level Code | Identifies the characteristic of the hierarchical level. Only available value: 20 = Information Source (Billing Provider information is to follow) | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HL04 | Hierarchical Child Code | Identifies if there are other (subordinate) after the first hierarchical level. Only available value: 1 = Additional Subordinate HL Data Segment in this Hierarchical Structure | Not included because there are no supplemental instructions; follow TR3 guidance. |

TR3 = Technical Report Type 3; EDS = Encounter Data System



Retired MDE Table 8. Loop 2010AA – Billing Provider Name

| Reference | Name | Field Description | Loop 2010AA EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|---|------------------------------------|---|---|
| NM1: Billing Provider Name | | | |
| NM101 | Entity Identifier Code | Qualifier that identifies the information populated in NM103 pertains to the Billing Provider. 85 = Billing Provider | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM102 | Entity Type Qualifier | Qualifier that identifies the type of Billing Provider. 1 = Person 2 = Non-person entity | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM103 | Organization Name/Last Name | Identifies the Billing Provider’s last name (if NM102 = 1) or organization name (if NM102 = 2) | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM108 | Identification Code Qualifier | Identifies the method/system of code used for NM109. Only available value: XX = CMS NPI | Included in Appendix 3A, MA Companion Guide |
| NM109 | National Provider Identifier (NPI) | Identifies the Billing Provider's NPI | Included in Appendix 3A, MA Companion Guide |
| N301 | Billing Provider Street | Identifies the Billing Provider’s street name. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| N4: Billing Provider City, State, Zip Code | | | |
| N401 | Billing Provider City | Identifies the Billing Provider’s city. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| N402 | Billing Provider State | Identifies the Billing Provider’s state. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| N403 | Billing Provider Zip Code | Identifies the Billing Provider’s zip code. | Included in Appendix 3A, MA Companion Guide |



| Reference | Name | Field Description | Loop 2010AA EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|--|--|---|--|
| REF: Billing Provider Tax Identification Number | | | |
| REF01 | Reference Identification Qualifier | Identifies the type of ID populated in REF02 for the Billing Provider's Employer Identification Number. EI = Employer's Identification Number SY = Social Security Number | Included in Appendix 3A, MA Companion Guide |
| REF02 | Billing Provider Tax Identification Number | Identifies Billing Provider's EIN. | Included in Appendix 3A, MA Companion Guide |

TR3 = Technical Report Type 3; NPI = National Provider Identifier; EIN = Employer Identification Number; EDS = Encounter Data System.

Retired MDE Table 9. Loop 2000B – Subscriber Hierarchical Level

| Reference | Name | Field Description | Loop 2000B EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|------------------------------------|-----------------------------------|---|--|
| HL01 | Hierarchical ID Number | Unique number assigned by the submitter that identifies the hierarchical structure – must begin with “1” and increase incrementally. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HL02 | Hierarchical Parent ID Number | Identifies the ID number of the next higher hierarchical data segment that the subscriber information pertains to. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HL03 | Hierarchical Level Code | Identifies that the information that follows pertains to the Subscriber. Only available value: 22 = Subscriber | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HL04 | Hierarchical Child Code | Identifies if there are other (subordinate) after the current level. 0 = No Subordinate HL Segment in this hierarchical structure (used when the patient is the subscriber and there are no dependent claims) 1 = Additional Subordinate HL segments in this hierarchical structure (used when the subscriber has dependents) | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SBR: Subscriber Information | | | |
| SBR01 | Payer Responsibility Number Code | Identifies the level of the payer responsibility (Primary, Secondary, Tertiary, etc.) TR3 guides list multiple values. | Included in Appendix 3A, MA Companion Guide |
| SBR02 | Individual Relationship Code | Specifies the relationship to the subscriber. Only available value: 18 = Self | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SBR03 | Subscriber Group or Policy Number | Situational - Identifies the subscriber’s policy or group number. | Included in Appendix 3A, MA Companion Guide |
| SBR04 | Subscriber Group Name | Situational - Identifies the subscriber’s plan name. | Included in Appendix 3A, MA Companion Guide |



| Reference | Name | Field Description | Loop 2000B EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------|--------------------------------|--|---|
| SBR09 | Claim Filing Indicator Code | Identifies if the receiver is Institutional or Professional/DME MA = Medicare Part A MB = Medicare Part B | Included in Appendix 3A, MA Companion Guide |

TR3 = Technical Report Type 3; EDS = Encounter Data System.

Retired MDE Table 10. Loop 2010BA – Subscriber Name

| Reference | Name | Field Description | Loop 2010BA EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------------------------|-------------------------------|---|---|
| NM1: Subscriber Name | | | |
| NM101 | Entity Identifier Code | Qualifier that identifies the information in NM103 pertains to the Subscriber. Only available value: IL = Insured or Subscriber | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM102 | Entity Type Qualifier | Qualifier that identifies the type of Subscriber. 1 = Person 2 = Non-person entity | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM103 | Subscriber Last Name | Identifies the Subscriber’s last name. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM104 | Subscriber First Name | Identifies the Subscriber’s first name. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM105 | Subscriber Middle Name | Situational – Identifies the Subscriber’s middle name. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM107 | Subscriber Name Suffix | Situational – Identifies the Subscriber’s Suffix (Jr., Sr., etc.) | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM108 | Subscriber Id Qualifier | Qualifier that identifies the method/system of code used for NM109. II = Standard Unique Identifier for each person in the US MI = Member Identification Number | Included in Appendix 3A, MA Companion Guide |
| NM109 | Subscriber Primary Identifier | Identifies the Subscriber’s primary identification code (HICN). | Included in Appendix 3A, MA Companion Guide |
| N301 | Subscriber Street | Identifies the Subscriber’s street name. | Not included because there are no supplemental instructions; follow TR3 guidance. |



| Reference | Name | Field Description | Loop 2010BA EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------|--------------------------|--|---|
| N401 | Subscriber City | Identifies the Subscriber's city. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| N402 | Subscriber State | Identifies the Subscriber's state. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| N403 | Subscriber ZIP Code | Identifies the Subscriber's zip code. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DMG01 | Date Format Qualifier | Qualifier that identifies the format of the information populated in DMG02. Only available value: D8 = CCYYMMDD. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DMG02 | Subscriber Date of Birth | Identifies the Subscriber's date of birth. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DMG03 | Subscriber Gender | Identifies the Subscriber's gender. F = Female. M = Male U = Unknown | Not included because there are no supplemental instructions; follow TR3 guidance. |

TR3 = Technical Report Type 3; EDS = Encounter Data System.

Retired MDE Table 11. Loop 2010BB – Payer Name

| Reference | Name | Field Description | Loop 2010BB EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|--|-------------------------------------|--|--|
| NM1: Subscriber Name | | | |
| NM101 | Entity Identifier Code | Qualifier that identifies the information populated in NM103 pertains to the Payer (CMS). Only available value: PR = Payer | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM102 | Entity Type Description | Qualifier that identifies the type of Payer. Only available value: 2 = Non-Person Entity | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM103 | Payer Name | Identifies the name of the Payer. | Included in Appendix 3A, MA Companion Guide |
| NM108 | Payer Identification Code Qualifier | Identifies the system/method of code used for NM109. PI = Payer Identification XV = Centers for Medicare and Medicaid Services Plan ID | Included in Appendix 3A, MA Companion Guide |
| NM109 | Payer Identification | Provides the Payer ID depending on the encounter type | Included in Appendix 3A, MA Companion Guide |
| N3: Payer Address | | | |
| N301 | Payer Street | Identifies the Payer’s street name. | Included in Appendix 3A, MA Companion Guide |
| N4: Payer City, State, Zip Code | | | |
| N401 | Payer City Name | Identifies the Payer’s city. | Included in Appendix 3A, MA Companion Guide |
| N402 | Payer State | Identifies Payer’s state. | Included in Appendix 3A, MA Companion Guide |
| N403 | Payer ZIP Code | Identifies Payer’s zip code. | Included in Appendix 3A, MA Companion Guide |



| Reference | Name | Field Description | Loop 2010BB EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|--|--------------------------------|---|--|
| REF: Other Payer Secondary Identifier | | | |
| REF01 | Payer Identification Qualifier | Identifies the type of ID populated in REF02 for the Payer. Qualifier that identifies the information populated in REF02 pertains to the Contract ID 2U = Payer Identification Number EI = Employer's Identification FY = Claim Office Number NF = NAIC Code | Included in Appendix 3A, MA Companion Guide |
| REF02 | Contract ID Number | Payer identification information. Identifies the Contract ID | Included in Appendix 3A, MA Companion Guide |

TR3 = Technical Report Type 3; EDS = Encounter Data System.

Retired MDE Table 12. Loop 2300 – Claim Information

| Reference | Name | Field Description | Loop 2300 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|---|--|---|---|
| CLM: Claim Information | | | |
| CLM01 | Claim Submitter’s Identifier (Patient Control Number) | Identifies the patient’s control number or the claim ID (depending on the MAO’s internal system). | Not included because there are no supplemental instructions; follow TR3 guidance. |
| CLM02 | Monetary Amount | Identifies the total claim charge (billed) amount. | Included in Appendix 3A, MA Companion Guide |
| CLM05-1 | Facility Type Code | Identifies the first two digits of either the Place of Service (Professional) or Type of Bill (Institutional). | Not included because there are no supplemental instructions; follow TR3 guidance. |
| CLM05-2 | Facility Code Qualifier | Qualifier that identifies the information in CLM05-3 pertains either to the Place of Service or Type of Bill. A = TOB B = POS | Not included because there are no supplemental instructions; follow TR3 guidance. |
| CLM05-3 Four values are institutional only | Claim Frequency Type Code | Identifies the frequency for the claim (encounter). 1 = Original claim 2 = Interim – First Claim (Institutional) 3 = Interim – Continuing Claim (Institutional) 4= Interim – Last Claim (Institutional) 7 = Correct/Replace 8 = Void/Delete 9 = Final Claim for HH PPS (Institutional) | Included in Appendix 3A, MA Companion Guide |
| CLM06 | Provider or Supplier Signature Indicator (Professional Only) | Identifies if the provider’s signature is on file. N = No Y = Yes | Not included because there are no supplemental instructions; follow TR3 guidance. |



| Reference | Name | Field Description | Loop 2300 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|--|---|--|---|
| CLM07 | Assignment or Plan Participation Code | Identifies if the provider accepted assignment. A = Assigned B = Assignment accepted on clinical lab services only C = Not assigned (required when neither A nor B apply) | Not included because there are no supplemental instructions; follow TR3 guidance. |
| CLM08 | Benefits Assignment Certification Indicator | Identifies if the subscriber has authorized the MAO to remit payment to the provider. N = No W = Not applicable (used when the patient refuses to assign benefits) Y = Yes | Not included because there are no supplemental instructions; follow TR3 guidance. |
| CLM09 | Release of Information Code | Identifies if the provider has a written statement on file authorizing the release of medical information. I = Informed consent to release medical information for conditions or diagnoses regulated by federal statutes Y = Yes, provider has signature on file | Not included because there are no supplemental instructions; follow TR3 guidance. |
| CLM11-1 | Related Causes Code Indicator | Situational – Qualifier that identifies the information populated in CLM11-2 pertains to the type of accident. AA = Auto Accident EM = Employment OA = Other Accident | Not included because there are no supplemental instructions; follow TR3 guidance. |
| CLM11-2 | Related Causes Code | Situational – only populated when more than one type of accident applies. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP: Date – Admission Date/Hour | | | |



| Reference | Name | Field Description | Loop 2300 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------|---|--|---|
| DTP01 | Date Time Period Qualifier – Accident Date (Professional Only) | Situational – Qualifier that identifies the information populated in DTP03 pertains to the accident date. Only available value: 439 = Accident | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP02 | Date Time Period Format Qualifier – Accident Date (Professional Only) | Situational – Qualifier that identifies the format of the accident date. D8 = CCYYMMDD | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP03 | Accident Date (Professional Only) | Situational – Identifies the date of the accident. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP01 | Date Time Qualifier – Discharge Hour (Institutional Only) | Situational – Qualifier that identifies the information populated in DTP03 pertains to the discharge hour. Only available value: 096 = Discharge | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP02 | Date Time Period Format Qualifier – Discharge Hour (Institutional Only) | Situational – Qualifier that identifies the format of the discharge hour. TM = HHMM | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP03 | Date Time Period – Discharge Hour (Institutional Only) | Situational – Identifies the discharge hour. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP01 | Date Time Qualifier – Statement Date (Institutional Only) | Qualifier that identifies the information populated in DTP03 pertains to the statement date. Only available value: 434 = Statement Date | Not included because there are no supplemental instructions; follow TR3 guidance. |

| Reference | Name | Field Description | Loop 2300 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|--|---|--|---|
| DTP02 | Date Time Period Format Qualifier (Institutional Only) | Qualifier that identifies the format of the statement date. RD8 = CCYYMMDD – CCYYMMDD | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP03 | Date Time Period (Institutional Only) | Identifies the statement date. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP01 | Date Time Period Qualifier – Admission (Institutional Only) | Situational – Qualifier that identifies the information populated in DTP03 pertains to the admission date. Only available value: 435 = Admission | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP02 | Date/Time Period Format Qualifier (Institutional only) | Situational - Identifies the date and time format in DTP03. D8 = date expressed in format CCYYMMDD DT = date and time expressed in format CCYYMMDDHHMM | Included in Appendix 3A, MA Companion Guide |
| DTP03 | Admission Date/Hour (Institutional only) | Situational - Identifies the admission date | Included in Appendix 3A, MA Companion Guide |
| PWK: Claim Supplemental Information | | | |
| PWK01 | Report Type Code | Situational – Repurposes to identify special notifications. The TR3 guides list multiple values. | Included in Appendix 3A, MA Companion Guide |
| PWK02 | Attachment Transmission Code | Situational - Identifies where the supporting information is stored. The TR3 guides list multiple values. | Included in Appendix 3A, MA Companion Guide |



| Reference | Name | Field Description | Loop 2300 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|--|---|--|--|
| CL101 | Admission Type Code – Institutional Claim Code (Institutional Only) | Situational – Identifies the reason the patient was admitted. TR3 guides list multiple values. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| CL102 | Admission Source Code (Institutional Only) | Situational – Identifies the source of the admission The TR3 guide list multiple values. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| CL103 | Patient Status Code (Institutional Only) | Situational – Identifies the status of the patient. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| CN1: Contact Information | | | |
| CN101 | Contract Type Code | Identifies a type of contract. TR3 guides list multiple values, including: 05 = capitated | Included in Appendix 3A, MA Companion Guide [Listed in the previous Companion Guides; not in the retired MDE list.] |
| REF: Payer Claim Control Number | | | |
| REF01 | Original Reference Number. Reference Identification Qualifier | Situational - Qualifier that identifies the information in REF02 of this segment pertains to the ICN of the previously accepted and stored encounter. Only available value: F8 = Original Reference Number | Included in Appendix 3A, MA Companion Guide |
| REF02 | Payer Claim Control Number | Situational - Identifies the ICN of the previously accepted and stored encounter when REF01 = F8. | Included in Appendix 3A, MA Companion Guide |

| Reference | Name | Field Description | Loop 2300 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------------------------------|--|---|--|
| REF: Medical Record Number | | | |
| REF01 | Reference Identification Qualifier | Identifies that the information in REF02 of this segment is a medical record ID number. EA = Medical Record Identification Number | Included in Appendix 3A, MA Companion Guide [Listed in the previous Companion Guides; not in the retired MDE list.] |
| REF02 | Medical Record Number | Medical record number. | Included in Appendix 3A, MA Companion Guide [Listed in the previous Companion Guides; not in the retired MDE list.] |
| NTE: Claim Note | | | |
| NTE01 | Note Reference Code | Code identifying the functional area or purpose to which the note applies. | Included in Appendix 3A, MA Companion Guide [Listed in the previous Companion Guides; not in the retired MDE list.] |
| NTE02 | Claim Note Text | A free-form description to clarify the related data elements and their content. | Included in Appendix 3A, MA Companion Guide [Listed in the previous Companion Guides; not in the retired MDE list.] |
| HI: Value Information | | | |
| HI01-1 | Diagnosis Type Code Qualifier – Principal Diagnosis (Institutional Only) | Qualifier that identifies the information populated in HI01-2 pertains to the principal diagnosis code. Only available value: BK = Principal Diagnosis Code | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-2 | Diagnosis Code – Principal Diagnosis (Institutional Only) | Identifies the principal diagnosis code (ICD-9). | Not included because there are no supplemental instructions; follow TR3 guidance. |



| Reference | Name | Field Description | Loop 2300 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------|--|---|---|
| HI01-1 | Diagnosis Type Code Qualifier – Health Care Diagnosis Code (Professional Only) | Qualifier that identifies the information populated in HI01-1 pertains to the first diagnosis code. Only available value: BK = Diagnosis Code | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-2 | Diagnosis Code (Professional Only) | Identifies the first diagnosis code (ICD-9). | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-1 | Code List Qualifier Code – Occurrence Span Code | Situational – Qualifier that identifies the information populated in HI01-2 pertains to the occurrence span code. Only available value: BI = Occurrence Span Code | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-2 | Industry Code – Occurrence Span Code | Situational – Identifies the occurrence span code. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-3 | Date Time Period Format Qualifier | Situational – Qualifier that identifies the format of the occurrence span code date. Only available value: RD8 = CCYYMMDD – CCYYMMDD | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-4 | Date Time Period – Occurrence Span Code Date | Situational – Identifies the occurrence span code date. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-1 | Code List Qualifier Code – Occurrence Code | Situational – Qualifier that identifies the information populated in HI01-2 pertains to the occurrence code. Only available value: BH = Occurrence Code | Not included because there are no supplemental instructions; follow TR3 guidance. |



| Reference | Name | Field Description | Loop 2300 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------|---|---|---|
| HI01-2 | Industry Code – Occurrence Code | Situational – Identifies the occurrence code. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-1 | Code List Qualifier Code-Value Code | <i>Situational</i> - Qualifier that identifies the information populated in HI01-2 pertains to the Value Code Only available value: BE = Value Code | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-2 | Industry Code – Value Code | <i>Situational</i> - Identifies the value code | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-1 | Code List Qualifier Code – Condition Code | Situational – Qualifier that identifies the information populated in HI01-2 pertains to the condition code. Only available value: BG = Condition Code | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-2 | Industry Code – Condition Code | Situational – Identifies the condition code. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| HI01-2 | Value Code | Identifies the value code. Institutional only | Included in Appendix 3A, MA Companion Guide [Listed in the previous Companion Guides; not in the retired MDE list.] |
| HI01-5 | Value Code Amount | Identifies the value code amount. Institutional only | Included in Appendix 3A, MA Companion Guide. [Listed in the previous Companion Guides; not in the retired MDE list.] |

TR3 = Technical Report Type 3; MAO = Medicare Advantage Organization; MDE = Minimum Data Element; ICN = Internal Control Number; EDS = Encounter Data System.

Retired MDE Table 13. Loop 2310E – Ambulance Pick-up Location

| Reference | Name | Field Description | Loop 2310E EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|---|---|--|---|
| NM1: Ambulance Pick-up Location | | | |
| NM101 | Identity Identifier Code – Ambulance Pick-up Location | Situational – Qualifier that identifies the information populated in NM301, NM401, NM402, and NM403 pertains to the ambulance Pick-up location. Only available value: PW = Pick-up Address | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM102 | Entity Type Qualifier – Non-Person Entity | Situational – Qualifier that identifies the information populated in NM301, NM401, NM402, and NM403 pertain to the ambulance pick-up location. Only available value: 2 = Non-Person Entity | Not included because there are no supplemental instructions; follow TR3 guidance. |
| N3: Ambulance Pick-up Location Address | | | |
| N301 | Ambulance Pick-up Address Line | Situational - Identifies the ambulance Pick-up address. | Included in Appendix 3A, MA Companion Guide |
| N4: Ambulance Pick-up Location City, State, Zip Code | | | |
| N401 | Ambulance Pick-up City | Situational – Identifies the ambulance pick-up location city. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| N402 | Ambulance Pick-up State or Province Code | Situational – identifies the ambulance pick-up location state | Included in Appendix 3A, MA Companion Guide |
| N403 | Postal Ambulance Pick-up Postal Zone or Zip Code | Situational – identifies the ambulance pick-up location ZIP code | Included in Appendix 3A, MA Companion Guide |

TR3 = Technical Report Type 3; EDS = Encounter Data System.

Retired MDE Table 14. Loop 2310F – Ambulance Drop-Off Location

| Reference | Name | Field Description | Loop 2310F EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|--|--|--|--|
| NM1: Ambulance Drop-Off Location | | | |
| NM101 | Identity Identifier Code – Ambulance Drop-Off Location | Situational – Qualifier that identifies the information populated in NM301, NM401, NM402, and NM403 pertains to the ambulance drop-off location. Only available value: 45 = Drop-Off Address | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM102 | Entity Type Qualifier – Non-Person Entity | Situational – Qualifier that identifies the information populated in NM301, NM401, NM402, and NM403 pertains to the ambulance drop-off location. Only available value: 2 = Non-Person Entity | Not included because there are no supplemental instructions; follow TR3 guidance. |
| N3: Ambulance Drop-Off Location Address | | | |
| N301 | Ambulance Drop-Off Address Line | Situational - Identifies the ambulance drop-off address. | Included in Appendix 3A, MA Companion Guide |
| N4: Ambulance Drop-Off Location City, State, Zip Code | | | |
| N401 | Ambulance Drop-Off City Name | Situational - Identifies the city of the ambulance drop-off location. | Included in Appendix 3A, MA Companion Guide |
| N402 | Ambulance Drop-Off State or Province | Situational - Identifies the state of the ambulance drop-off location | Included in Appendix 3A, MA Companion Guide |
| N403 | Ambulance Drop-Off Postal Zone or Zip Code | Situational - Identifies the zip code of the ambulance drop-off location. | Included in Appendix 3A, MA Companion Guide |

TR3 = Technical Report Type 3; EDS = Encounter Data System.



Retired MDE Table 15. Loop 2320 – Other Subscriber Information

| Reference | Name | Field Description | Loop 2320 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|--|---|--|---|
| SBR: Subscriber Information | | | |
| SBR01 | Payer Responsibility Sequence Number Code | Identifies the level of the payer (Primary, Secondary, Tertiary, etc.). TR3 guides list multiple values. | Included in Appendix 3A, MA Companion Guide |
| SBR02 | Individual Relationship Code | Specifies the relationship to the subscriber. TR3 guides list multiple values. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SBR09 | Claim Filing Indicator Code | Identifies the claim receiver. Identifies the type of claim. TR3 guides list multiple values. | Included in Appendix 3A, MA Companion Guide |
| CAS: Claim Adjustment | | | |
| CAS01 | Claim Adjustment Group Code | Situational – Qualifier that identifies the information populated in CAS02 pertains to the reason why the adjustment occurred. TR3 guides list multiple values. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| CAS02 | Adjustment Reason Code | Situational – Identifies the reason for the adjustment/denial (external code set that can be found at www.wpc-edi.com). | Included in Appendix 3A, MA Companion Guide |
| CAS03 | Monetary Amount | Situational – Identifies the monetary amount of the adjustment. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| AMT: Coordination of Benefits (COB) Payer Paid Amount | | | |
| AMT01 | Amount Qualifier Code | Qualifier that identifies the information populated in AMT02 pertains to the MAO or other entity paid amount. Only available value: D = Payer Amount Paid | Not included because there are no supplemental instructions; follow TR3 guidance. |



| Reference | Name | Field Description | Loop 2320 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|---|---|---|--|
| AMT02 | Payer Paid Amount | Identifies the amount the MAO or other paid for the claim | Included in Appendix 3A, MA Companion Guide |
| OI: Other Insurance Coverage Information | | | |
| OI03 | Benefits Assignment Certification Indicator | Identifies the benefits assignment certification indicator. N = No W = Not Applicable Y = Yes | Included in Appendix 3A, MA Companion Guide |
| OI06 | Release of Information Code | Identifies if the provider has a written statement on file authorizing the release of medical information. I = Informed Consent to Release Medical Information for Conditions or Diagnoses Regulated by Federal Statutes Y = Yes, Provider has signed statement permitting release of medical billing data related to a claim | Included in Appendix 3A, MA Companion Guide |

TR3 = Technical Report Type 3; MAO = Medicare Advantage Organization; EDS = Encounter Data System.

Retired MDE Table 16. Loop 2330A – Other Subscriber Name

| Reference | Name | Field Description | Loop 2330A EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------------------------------|---|--|---|
| NM1: Other Subscriber Name | | | |
| NM101 | Entity Identifier Code | Qualifier that identifies the information in NM103 pertains to the Subscriber. Only available value: IL = Insured or Subscriber | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM102 | Entity Type Qualifier | Qualifier that identifies the type of Subscriber. 1 = Person 2 = Non-person entity | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM103 | Subscriber Last Name | Identifies the Subscriber's last name. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM108 | Identification Code Qualifier | Identifies the information in NM109 pertains to the Subscriber. II = Standard Unique Identifier for each person in the U.S. MI = Member Identification Number. | Included in Appendix 3A, MA Companion Guide |
| NM109 | Other Insured Identifier, Subscriber HICN | Identifies the other insured's ID code, the subscribers HICN. | Included in Appendix 3A, MA Companion Guide |
| N301 | Subscriber Street | Identifies the Subscriber's street name | Not included because there are no supplemental instructions; follow TR3 guidance. |
| N401 | Subscriber City | Identifies the Subscriber's city | Not included because there are no supplemental instructions; follow TR3 guidance. |
| N402 | Subscriber State | Identifies the Subscriber's state | Not included because there are no supplemental instructions; follow TR3 guidance. |
| N403 | Subscriber Zip Code | Identifies the Subscriber's zip code | Not included because there are no supplemental instructions; follow TR3 guidance. |

TR3 = Technical Report Type 3; EDS = Encounter Data System

Retired MDE Table 17. Loop 2330B – Other Payer Name

| Reference | Name | Field Description | Loop 2330B EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|--|--------------------------------|--|---|
| NM1: Other Payer Name | | | |
| NM101 | Entity Identifier Code | Qualifier that identifies the information populated in NM103 pertains to the Contract. Only available value: PR = Payer | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM102 | Entity Type Description | Qualifier that identifies the type of Contract. Only available value: 2 = Non-person entity | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM103 | Name Last or Organization | Identifies the name of the Contract. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| NM108 | Identification Code Qualifier | Identifies the method/system of code used for NM109. PI = Payer Identification XV = Centers for Medicare and Medicaid Services Plan ID | Included in Appendix 3A, MA Companion Guide |
| NM109 | Other Payer Primary Identifier | Code identifying the other payer. Identifies the Contract ID. | Included in Appendix 3A, MA Companion Guide |
| N3: Other Payer Address | | | |
| N301 | Other Payer Address Line | Identifies the other payer's address line. | Included in Appendix 3A, MA Companion Guide |
| N4: Other Payer City, State, Zip Code | | | |
| N401 | Payer City | Identifies the Contract's city | Included in Appendix 3A, MA Companion Guide |
| N402 | Payer State | Identifies the Contract's state | Included in Appendix 3A, MA Companion Guide |
| N403 | Payer Zip Code | Identifies the Contract's zip code. | Included in Appendix 3A, MA Companion Guide |

TR3 = Technical Report Type 3; EDS = Encounter Data System

Retired MDE Table 18. Loop 2400 – Service Line

| Reference | Name | Field Description | Loop 2400 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|----------------------------------|---|--|--|
| CN1: Contract Information | | | |
| CN101 | Contract Type Code Professional and DME Only | Identifies a type of contract. TR3 guides list multiple values. including: 05 = capitated | Included in Appendix 3A, MA Companion Guide [Listed in the previous Companion Guides; not in the retired MDE list.] |
| LX01 | Assigned Number | Identifies the service line number – incremental (1 for first service line, 2 for second, etc.) | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV201 | Service Line Revenue Code | Identifies the revenue code that applies to the service | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV202-1 | Product or Service ID Qualifier - Procedure Code (Institutional Only) | Situational – Qualifier that identifies the informational populated in SV202-2 pertains to the procedure code. ER = Jurisdiction Specific Procedure and Supply Code HC = HCPCS Code HP = HIPPS Code | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV202-2 | Procedure Code (Institutional Only) | Situational – Identifies the procedure code that applies to the service. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV202-3 | Procedure Modifier (Institutional Only) | Situational – Identifies the modifier code that applies to the service. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV203 | Monetary Amount (Institutional Only) | Identifies the charge (billed) amount for the service line. | Not included because there are no supplemental instructions; follow TR3 guidance. |



| Reference | Name | Field Description | Loop 2400 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------|---|--|---|
| SV204 | Unit or Basis for Measurement Code (Institutional Only) | Qualifier that identifies the quantity measurement. UN = Units DA = Days | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV205 | Quantity (Institutional Only) | Identifies the count of either the unit or day. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV207 | Non-Covered Charge Amount (Institutional only) | Situational – Identifies the line item denied charge or non-covered charge amount. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV101-1 | Product/Service ID Qualifier (Professional Only) | Qualifier that identifies the informational populated in SV102-2 pertains to the procedure code. TR3 guides list multiple values. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV101-2 | Procedure Code (Professional Only) | Identifies the procedure code that applies to the service. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV101-3 | Procedure Modifier (Professional Only) | Situational – Identifies the modifier code that applies to the service. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV102 | Monetary Amount (Professional Only) | Identifies the charge (billed) amount for the service line. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV103 | Unit or Basis for Measurement Code (Professional Only) | Qualifier that identifies the quantity measurement. UN = Units MJ = Minutes | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SV104 | Quantity (Professional Only) | Identifies the count of either the unit or minutes. | Not included because there are no supplemental instructions; follow TR3 guidance. |



| Reference | Name | Field Description | Loop 2400 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|-----------|--|---|---|
| SV107-1 | Diagnosis Code Pointer (Professional Only) | Identifies the diagnosis code pointer. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP01 | Date Time Qualifier - Service | Qualifier that identifies the information populated in DTP03 pertains to the date of service. Only available value: 472 = Date of Service | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP02 | Date Time Period Format Qualifier | Qualifier that identifies the format of DTP03. Only available value: D8 = CCYYMMDD. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP03 | Service Date | Identifies the date of service. | Not included because there are no supplemental instructions; follow TR3 guidance. |

TR3 = Technical Report Type 3; EDS = Encounter Data System.



Retired MDE Table 19. Loop 2430 – Line Adjudication Information

| Reference | Name | Field Description | Loop 2430 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|---|--|--|---|
| SVD: Line Adjudication Information | | | |
| SVD01 | Other Payer Primary Identifier | Situational - Identifies a payer (the Contract ID) responsible for the reimbursement described in this loop. | Included in Appendix 3A, MA Companion Guide |
| SVD02 | Monetary Amount – Service Line Paid Amount | Situational – Identifies the service line amount paid by the MAO or other entity or True COB. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SVD03-1 | Product/Service ID Qualifier | Situational – Qualifier that identifies the information populated in SVD03-2 pertains to the procedure code. TR3 guides list multiple values. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SVD03-2 | Procedure Code | Situational – Identifies the procedure code paid for by the MAO or other entity or True COB. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SVD03-3 | Procedure Modifiers | Situational – Identifies the procedure code modifier that applies to the procedure code the MAO or other entity or True COB covered. | Not included because there are no supplemental instructions; follow TR3 guidance. |
| SVD05 | Quantity | Situational – Identifies the paid service unit count. | Not included because there are no supplemental instructions; follow TR3 guidance. |



| Reference | Name | Field Description | Loop 2430 EDS Guidance MDE Element included in Appendix 3A MA Companion Guide? |
|---|--|---|---|
| CAS: Line Adjustment | | | |
| CAS02 | Adjustment Reason Code | Identifies the reason the line adjustment was made. TR3 guides list multiple values, including: 24 = Charges are covered under a capitation agreement/managed care plan | Included in Appendix 3A, MA Companion Guide |
| DTP: Line Check or Remittance Date | | | |
| DTP01 | Date Time Qualifier – Adjudication or Payment Date | Situational – Qualifier that identifies the information populated in DTP03 pertains to the date the MAO or other entity or True COB adjudicated the claim. 573 = Date Claim Paid | Not included because no supplemental instructions, follow TR3 guidance. |
| DTP02 | Date Time Period Format Qualifier | Situational – Identifies the format for the date populated in DTP03. D8 = CCYYMMDD | Not included because there are no supplemental instructions; follow TR3 guidance. |
| DTP03 | Adjudication or Payment Date | Situational – Identifies the date the responsible payer (MAO or other entity or True COB) adjudicated the claim. | Included in Appendix 3A, MA Companion Guide |

TR3 = Technical Report Type 3; MAO = Medicare Advantage Organization; COB = Coordination of Benefits; EDS = Encounter Data System.