

Electronic Enrollment User Guide



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1. PURPOSE

This user guide provides instructions to our customers for submitting dental enrollment electronically to United Concordia. It helps customers understand how data is received and maintained at United Concordia. This guide also includes explanations of system edits, error reports and individual errors, along with instructions for error resolution.

2. KEY TERMS

Customer: group accepting United Concordia's services.

Customer Profile: electronic form that captures customer-specific data (e.g. file frequency, file format, business rules and contact information).

Dependent: Subscriber's spouse or domestic partner and any unmarried child or stepchild of a Subscriber or unmarried member of the Subscriber's household resulting from a court order or placement by an administrative agency, enrolled in the Plan.

File: electronic enrollment sent to United Concordia that includes Subscriber and Dependent data.

Group: synonymous with customer.

Implementation: setup of electronic enrollment file, including the following tasks:

- Initial discussion about the file layout and testing
- Group structure, including group number(s), finalized
- Electronic enrollment file testing
- Customer review and approval of testing results and customer profile
- Production file is sent and loaded to United Concordia systems

Member: applies to both a Subscriber and a Dependent.

Record: member-specific data sent on the electronic enrollment file.

Subscriber: individual who has enrolled him/herself and his/her Dependents for dental coverage and for whom Premium payments are due and payable (i.e. employee, associate, retiree or COBRA participant).

3. ENROLLMENT FILE FORMATS

United Concordia is able to accommodate the receipt of electronic eligibility data via the following file formats:

- United Concordia Electronic Eligibility standard file format (see [page 20](#))
- HIPAA 834 transaction file format (see [Appendix A](#))
- Customer-preferred layout, providing all required data elements are included

4. ENROLLMENT FILE TYPES

Electronic Enrollment file types fall into three categories:

- **Full files** (positive files) contain all current active membership and termination data from the last file transmission.
- **Change files** contain updates to enrollment eligibility that took place from the last file transmission. Updates include but are not limited to, enrollment additions, enrollment terminations and all demographic modifications.
- **Open Enrollment Files** can be full or change files. Open enrollment files and subsequent general files may require additional attention by United Concordia. To ensure proper and timely processing, coordinate all open enrollment files with EISS by sending an email to DLMAIN@ucci.com.

5. ENROLLMENT FILE RECORDS

United Concordia only accepts one member record on each file. Multiple records will cause errors and prevent enrollment data from being loaded. United Concordia requests future effective or cancel dates to be within 30 days of the current date.

6. FILE TRANSMISSION

United Concordia can accept enrollment electronically via our secure eDelivery File Transfer Protocol (FTP) site (<https://ftp.highmark.com>).

7. ENROLLMENT FILE SCHEDULES

Files can be sent on a mutually agreed upon schedule. United Concordia processes electronic enrollment files Monday through Saturday, including holidays.

8. ENROLLMENT FILE PROCESS

The following process is completed for all new United Concordia electronic enrollment customers.

8.1. Timeline

United Concordia typically requires 45–60 days for electronic enrollment file implementation.

8.2. Discussions with Customer

United Concordia holds detailed discussions with the customer about the file layout, testing and overall implementation process. Based on these discussions, United Concordia creates a unique customer profile.

8.3. Implementation Inquiries

The Electronic Installation and Support Services (EISS) department serves as the primary contact during the implementation process. Please send all electronic enrollment file implementation inquiries to DLmain@ucci.com, and they will be answered by dedicated EISS staff.

8.4. Phase One Testing

This testing includes electronic enrollment file format and transmission. Files must pass phase one testing before phase two testing can begin.

8.5. Phase Two Testing

Phase two includes validation and eligibility testing. The process continues until the electronic enrollment file successfully passes testing.

8.6. Customer Sign-Off

United Concordia sends the electronic eligibility profile to customers for review and sign-off. United Concordia also requires each customer to accept the terms of our Ecommerce Agreement via an electronic signature. Before implementing the electronic enrollment file into production, United Concordia must receive both electronic eligibility profile and Ecommerce sign-off.

8.7. Implementation

Once sign-off is received, EISS promotes the electronic enrollment file. All subsequent electronic enrollment files sent are loaded into production.

8.8. Post Implementation

EISS monitors the electronic enrollment files in production. Electronic enrollment files with less than 10% errors are considered successful. If more than 10% of the electronic enrollment file has errors, EISS continues to work with the customer until two successful files are sent in succession.

8.9. Ongoing

Once two successful files are sent, EISS transitions file monitoring and error report processing responsibilities to a dedicated Membership & Billing (M&B) staff member. United Concordia's M&B department provides ongoing support for any file-related questions and error report resolutions. If you are unsure of whom your M&B contact is, call: **1-888-320-3316**.

9. ID CARDS

Customers must elect whether or not to receive ID cards during group setup. After the electronic enrollment file is implemented into production, if elected, ID cards will be issued for the following reasons:

- New Subscriber
- Group Number Change
- Enrollment Reinstatement
- Subscriber Name Change
- Primary Dental Office (PDO) Number Change
- Primary Dental Office (PDO) Forced Sited by United Concordia

10. REPORTS

After United Concordia processes an electronic enrollment file, an Excel document is systematically produced, which is sent to the customer. The document contains reports that are listed on separate worksheets (i.e. tabs). The following are worksheet report names and field descriptions:

10.1. Enrollment File Summary – Provides a summary of statistical data regarding the processed enrollment file. The following fields are included:

- **Processing Date** – Represents the date the file loaded to the United Concordia's enrollment system.
- **Customer ID** – Unique 9–digit number associated with the file assigned by United Concordia.
- **Customer Name** – Name associated with the Customer ID.
- **Subscriber Count on Enrollment File** – Total number of subscriber (i.e. employee) records submitted.
- **Record Count on File** – Total number of all subscriber, dependent and header records submitted
- **Records Processed** – Total number of all records from the enrollment file that loaded to United Concordia's enrollment system.
- **Subscribers Updated** – Total number of all subscriber records from the enrollment file that were added, changed and termed.
- **Error – HARD** – Total number of HARD errors within the error report worksheets (i.e. tabs).
- **Error – SOFT** – Total number of SOFT errors within the error report worksheets (i.e. tabs).
- **Error – DISCARD** – Total number of DISCARD errors within the error report worksheets (i.e. tabs).
- **Error – INFO** – Total number of INFO errors within the error report worksheets (i.e. tabs).
- **Subscribers Not Sent (SNS)** – Total number of SNS errors within the error report worksheets (i.e. tabs).
- **Dependents Not Sent (DNS)** – Total number of DNS errors within the error report worksheets (i.e. tabs).
- **Address Not Updated** – Total number of Address Not Updated errors within the error report worksheets (i.e. tabs).

10.2. Error Report – Discrepancies identified through the electronic enrollment file batch process. The following fields are included:

- **Processing Date** – Represents the date the file loaded to the United Concordia's enrollment system.
- **File Group Number** – Represents the group number provided on the file
- **UCCI Group Number** – Represents the group number in United Concordia's enrollment system.
- **UCCI Group Name** – Represents the group name in United Concordia's enrollment system.
- **Contract ID** – Unique SSN, used to identify a subscriber. The Contract ID links the eligible dependents to the subscriber.
- **REL CD** – Relationship code used to identify the record type. Acceptable relationship codes are:
 - 1 Subscriber
 - 2 Spouse/Domestic Partner
 - 3 Dependent Child
 - 4 Disabled Dependent
 - 5 Sponsored Dependent
- **Last Name** – Subscriber and/or Dependent
- **First Name** – Subscriber and/or Dependent
- **Middle Name** – Subscriber and/or Dependent
- **Birth Date** – Subscriber and/or Dependent
- **Effective Date** – Date of the new dental coverage for the Subscriber or Dependent or the date of the most current dental coverage, whichever date is later.
- **Cancel Date** – Date of termination of dental coverage for the Subscriber or Dependent.
- **Error Severity Code**
 - **HARD** – Required information (i.e. name, social security number, etc.) missing from or conflicting with the subscriber record (i.e. history records, duplicate IDs, etc.). The absence of required data prevents the entire subscriber record from loading to United Concordia's enrollment system.
 - **SOFT** – Required information (i.e. name, social security number, etc.) missing from or conflicting with a dependent record. The absence of required dependent data prevents the applicable dependent record from loading to United Concordia's enrollment system.
 - **DISCARD (DCARD)** – Multiple records (i.e. duplicate spouses, duplicate subscriber records, etc.) received on the electronic enrollment file. Only one unique record was loaded to United Concordia's enrollment system.
 - **INFO** – Inconsistent data between the customer file and the existing data on the United Concordia's enrollment system. INFO errors are not systematically loaded to United Concordia's enrollment system. This error requires follow up with the customer and possible manual intervention by United Concordia's Membership and Billing Department.
- **Error Text** – Identifies the invalid data.

- **Error Code** – Number assigned to the error description.
- **Error Description** – Defines the error.
- **Customer Action Required** – Instructions for error resolution provided by United Concordia. (Resolutions are described in the Error Listing section.)
- **Comment** – Optional information provided by United Concordia staff.
- **PDO Number** – Primary Dental Office Number used for Dental Health Maintenance Organization (DHMO) business.
- **PDO Effective Date** - Date the Primary Dental Office (PDO) was assigned to the member.
- **Client Assigned ID** – Unique identification number selected by the customer, used to identify a subscriber. The Client Assigned ID links the eligible dependents to the subscriber. This field only displays for customers set up to submit Client Assigned IDs.
- **Customer ID** – Unique 9–digit number associated with the file, assigned by United Concordia.
- **Customer Name** – Name associated with the Customer ID.

10.3. Subscribers Not Sent (SNS) – Subscriber records not submitted on the electronic enrollment file but active in the United Concordia's enrollment system.

- **Processing Date** – Represents the date the file loaded to the United Concordia's enrollment system.
- **UCCI Group Number** – Represents the group number in United Concordia's enrollment system.
- **UCCI Group Name** – Represents the group name in United Concordia's enrollment system.
- **Contract ID** – Unique SSN, used to identify a subscriber. The Contract ID links the eligible dependents to the subscriber.
- **Subscriber Last Name**
- **Subscriber First Name**
- **Subscriber Middle Name**
- **Subscriber Birth Date**
- **Enrollment Effective Date** – Date of the new dental coverage or the date of the most current dental coverage, whichever date is later.
- **Auto-Terminated Indicator**
 - **Y (Yes)** – If the record is not sent on the file, United Concordia automatically terms according to the header eligibility date (1st of the month following the file Creation Date) on the file.
 - **N (No)** – If the record is not sent on the file, the customer must provide a termination date to United Concordia.
- **Cancel Date Applied** – The term date United Concordia applied, if the Auto-Terminated Indicator is Y.
- **Customer Action Required** – Instructions for error resolution provided by United Concordia. (Resolutions are described in the **Error Listing** section.)
- **Comment** – Optional information provided by United Concordia staff.
- **Client Assigned ID** – Unique identification number selected by the customer, used to identify a subscriber. The Client Assigned ID links the eligible dependents to the subscriber. This field only displays for customers set up to submit Client Assigned IDs.
- **Customer ID** – Unique 9-digit number associated with the file, assigned by United Concordia.
- **Customer Name** – Name associated with the Customer ID.
- **Error Code** – Number assigned to the error description.
- **Error Description** – Defines the error.

10.4. Dependents Not Sent (DNS) – Dependent records not submitted on the electronic enrollment file but active in the United Concordia's enrollment system.

- **Processing Date** – Represents the date the file loaded to the United Concordia's enrollment system.
- **UCCI Group Number** – Represents the group number in United Concordia's enrollment system.
- **UCCI Group Name** – Represents the group name in United Concordia's enrollment system.
- **Contract ID** – Unique SSN, used to identify a subscriber. The Contract ID links the eligible dependents to the subscriber.
- **Subscriber Last Name**
- **Subscriber First Name**
- **Subscriber Middle Name**
- **Dependent Last Name**
- **Dependent First Name**
- **Dependent Middle Name**
- **Dependent Birth Date**
- **Enrollment Effective Date** – Date of the new dental coverage or the date of the most current dental coverage, whichever date is later.
- **Auto-Terminated Indicator**
 - **Y (Yes)** – If the record is not sent on the file, United Concordia automatically terms according to the header eligibility date (1st of the month following the file Creation Date) on the file.
 - **N (No)** – If the record is not sent on the file, the customer must provide a termination date to United Concordia.
- **Cancel Date Applied** – The term date United Concordia applied, if the Auto-Terminated Indicator is Y.
- **Customer Action Required** – Instructions for error resolution provided by United Concordia. (Resolutions are described in the **Error Listing** section.)
- **Comment** – Optional information provided by United Concordia staff.
- **Client Assigned ID** – Unique identification number selected by the customer, used to identify a subscriber. The Client Assigned ID links the eligible dependents to the subscriber. This field only displays for customers set up to submit Client Assigned IDs.
- **Customer ID** – Unique 9-digit number associated with the file, assigned by United Concordia.
- **Customer Name** – Name associated with the Customer ID.
- **Error Code** – Number assigned to the error description.
- **Error Description** – Defines the error.

10.5. Address Not Updated – Inconsistent address data between the customer file and the existing address data in United Concordia's enrollment system as of the file process date:

- **Processing Date** – Represents the date the file loaded to the United Concordia's enrollment system.
- **UCCI Group Number** – Represents the group number in United Concordia's enrollment system.
- **UCCI Group Name** – Represents the group name in United Concordia's enrollment system.
- **Contract ID** – Unique SSN, used to identify a subscriber. The Contract ID links the eligible dependents to the subscriber.
- **Subscriber Last Name**
- **Subscriber First Name**
- **Subscriber Middle Name**
- **Address Type -**
 - **Customer Address** – Address provided by the customer.
 - **Carrier Address** – Address on file by the Carrier plan.
- **Subscriber Address Line 1**
- **Subscriber Address Line 2**
- **Subscriber Address Line 3**
- **Subscriber State**
- **Subscriber Zip Code**
- **Customer Action Required** – Instructions for error resolution provided by United Concordia. (Resolutions are described in the Error Listing section.).
- **Comment** – Optional information provided by United Concordia staff.
- **Client Assigned ID** – Unique identification number selected by the customer, used to identify a subscriber. The Client Assigned ID links the eligible dependents to the subscriber. This field only displays for customers set up to submit Client Assigned IDs.
- **Customer ID** – Unique 9–digit number associated with the file, assigned by United Concordia.
- **Customer Name** – Name associated with the Customer ID.
- **Error Code -** Number assigned to the error description.
- **Error Description** – Defines the error.

11. REVIEWING AND RESOLVING ERRORS

- Submitting a Full File generates the following reports:
 - **Enrollment File Summary** – Information provided that does not require resolution.
 - **Error**
 - **Subscribers Not Sent (SNS)**
 - **Dependents Not Sent (DNS)**
 - **Address Not Updated**

- Submitting a Change File generates the following reports:
 - **Enrollment File Summary** – Information provided that does not require resolution.
 - **Error**
 - **Address Not Updated**

Upon reviewing the errors listed in each report, follow the directions in the **Customer Action Required** (Resolution) column, and re-submit accordingly. (Resolutions are described in the **Error Listing** section.)

Your help and cooperation in the prompt research and resolution of errors ensures that United Concordia provides the best possible service to your members. Error-free enrollment data is crucial to ensure accurate invoices, claims processing and responses to customer service inquiries.

12. ERROR LISTING

00001 CONTRACT ID IS INVALID

Definition: Contract ID contained spaces or special characters.

Resolution: Submit a valid Contract ID

Severity: HARD

00002 SUBSCRIBER LAST NAME IS INVALID

Definition: Last Name contained spaces, special characters or only 1 letter.

Resolution: Submit a valid Subscriber Last Name.

Severity: HARD

00003 DEPENDENT LAST NAME IS INVALID

Definition: Last Name contained spaces, special characters or only 1 letter.

Resolution: Submit a valid Dependent Last Name.

Severity: SOFT

00004 SUBSCRIBER FIRST NAME IS INVALID

Definition: First Name contained spaces or special characters.

Resolution: Submit a valid Subscriber First Name.

Severity: HARD

00005 DEPENDENT FIRST NAME IS INVALID

Definition: First Name contained spaces or special characters.

Resolution: Submit a valid Dependent First Name.

Severity: SOFT

00006 MIDDLE NAME IS INVALID

Definition: Middle Name contained special characters.

Resolution: Submit a valid Middle Name.

Severity: SOFT

00007 PRECEDING TITLE NAME IS INVALID

Definition: Preceding Title Name (i.e. Mr., Mrs., etc.) contained special characters.

Resolution: Submit a valid Preceding Title Name.

Severity: INFO

00008 SUCCEEDING TITLE NAME IS INVALID

Definition: Succeeding Title Name (Jr., Sr., etc.) contained special characters.

Resolution: Submit a valid Succeeding Title Name.

Severity: INFO

00009 SUBSCRIBER GENDER CODE IS INVALID

Definition: Subscriber Gender Code contained a value other than an **M** or **F**.

Resolution: Submit a valid Subscriber Gender Code.

Severity: HARD

00010 DEPENDENT GENDER CODE IS INVALID

Definition: Gender Code contained a value other than an **M** or **F**.

Resolution: Submit a valid Dependent Gender Code.

Severity: SOFT

00011 SUBSCRIBER DATE OF BIRTH IS INVALID

Definition: Date Of Birth contained alphas, or invalid date (e.g. 20081332).

Resolution: Submit a valid Subscriber Date Of Birth.

Severity: HARD

00012 DEPENDENT DATE OF BIRTH IS INVALID

Definition: Date Of Birth contained alphas, or invalid date (e.g. 20081332).

Resolution: Submit a valid Dependent Date Of Birth.

Severity: SOFT

00013 SUBSCRIBER DATE OF BIRTH IS A FUTURE DATE

Definition: Date Of Birth consisted of a future date.

Resolution: Submit a valid Subscriber Date Of Birth.

Severity: HARD

00014 DEPENDENT DATE OF BIRTH IS A FUTURE DATE

Definition: Date Of Birth consisted of a future date.

Resolution: Submit a valid Dependent Date Of Birth.

Severity: SOFT

00016 ADDRESS IS INVALID

Definition: Address is incomplete.

Resolution: Submit a valid Address.

Severity: HARD

00017 SUBSCRIBER GROUP NUMBER IS INVALID

Definition: Subscriber's Group Number is invalid due to spaces, special characters or is not found on the United Concordia group database.

Resolution: Submit a valid Subscriber Group Number.

Severity: HARD

00018 DEPENDENT GROUP NUMBER IS DIFFERENT THAN SUBSCRIBER GROUP NUMBER

Definition: Dependent's Group Number (#) is invalid due to spaces, special characters or is not found on the United Concordia group database.

Resolution: Dependent Group # was changed to the Subscriber Group #.

Severity: INFO

00019 SUBSCRIBER PRODUCT LINE IS INVALID

Definition: Subscriber's Product Line is not a "D" for dental.

Resolution: Submit "D" in the Product Line field.

Severity: HARD

00020 DEPENDENT PRODUCT LINE IS INVALID

Definition: Dependent's Product Line is not "D" for dental.

Resolution: Submit a "D" in the Product Line field.

Severity: INFO

00021 DEPENDENT PRODUCT LINE IS DIFFERENT THAN THE SUBSCRIBER'S

Definition: Dependent's Product Line is not "D" for dental.

Resolution: Submit a "D" in the Product Line field.

Severity: INFO

00022 SUBSCRIBER EFFECTIVE DATE IS INVALID

Definition: Subscriber's Effective Date of enrollment contained spaces, special characters, alphas, or invalid date (e.g. 20081332).

Resolution: Submit a valid Subscriber Effective Date.

Severity: HARD

00023 DEPENDENT EFFECTIVE DATE IS INVALID

Definition: Dependent's Effective Date of enrollment contained spaces, special characters, alphas, or invalid date (e.g. 20081332).

Resolution: Submit a valid Dependent Effective Date.

Severity: SOFT

00024 SUBSCRIBER EFFECTIVE DATE IS PRIOR TO DATE OF BIRTH

Definition: Subscriber's Effective Date of enrollment is prior than their date of birth.

Resolution: Submit valid date(s) as applicable

Severity: HARD

00025 DEPENDENT EFFECTIVE DATE IS PRIOR TO DATE OF BIRTH

Definition: Dependent's Effective Date of enrollment is prior than their date of birth.

Resolution: Dependent Effective Date was changed to the Date Of Birth.

Severity: INFO

00026 EFFECTIVE DATE IS PRIOR TO GROUP NUMBER EFFECTIVE DATE

Definition: Effective Date of enrollment cannot be prior to the group's effective date.

Resolution: EFFT Date was changed to the Group Number EFFT Date.

Severity: INFO

00028 SUBSCRIBER CANCEL DATE IS INVALID

Definition: Subscriber's Cancel date contained spaces, special characters, alphas, or invalid date (e.g. 20081332).

Resolution: Submit a valid Subscriber Cancel Date.

Severity: HARD

00029 DEPENDENT CANCEL DATE IS INVALID

Definition: Dependent's Cancel Date contained spaces, special characters, alphas, or invalid date (e.g. 20081332).

Resolution: Submit a valid Dependent Cancel Date.

Severity: SOFT

00030 SUBSCRIBER CANCEL DATE IS PRIOR TO THE SUBSCRIBER EFFECTIVE DATE

Definition: Subscriber's Cancel Date is prior to the Subscriber's Effective Date of enrollment.

Resolution: Submit valid date(s) as applicable.

Severity: HARD

00031 DEPENDENT CANCEL DATE IS PRIOR TO THE DEPENDENT EFFECTIVE DATE

Definition: Dependent's Cancel Date is prior to the Dependent's Effective Date of enrollment.

Resolution: Submit valid date(s) as applicable.

Severity: INFO

00032 DEPENDENT CANCEL DATE IS AFTER THE SUBSCRIBER CANCEL DATE

Definition: Dependent's Cancel Date cannot be after than the Subscriber's Cancel Date.

Resolution: Dependent Cancel Date was changed to the Sub's Cancel Date.

Severity: INFO

00033 DEPENDENT IS ACTIVE AND THE SUBSCRIBER IS CANCELLED

Definition: The subscriber enrollment is canceled, but a dependent is being sent as active.

Resolution: Submit a valid Cancel Date for dependent.

Severity: SOFT

00034 PDO NUMBER IS INVALID

Definition: The Primary Dental Office (PDO) Number on the electronic enrollment file is not found on our provider database.

Resolution: M&B has assigned a valid PDO.

Severity: INFO

00035 PDO NUMBER WAS NOT PROVIDED

Definition: The Primary Dental Office (PDO) Number on the electronic enrollment file is 000000 for a PDO required account.

Resolution: M&B has assigned a valid PDO.

Severity: INFO

00037 PDO EFFECTIVE DATE IS INVALID

Definition: The Primary Dental Office (PDO) Effective Date contained spaces, special characters, alphas, or invalid date (e.g. 20081332).

Resolution: M&B has assigned a valid PDO.

Severity: INFO

00038 PDO CANCEL DATE IS INVALID

Definition: The Primary Dental Office (PDO) Cancel Date contained spaces, special characters, alphas, or invalid date (e.g. 20081332).

Resolution: Contact your M&B Rep with the applicable Cancel Date.

Severity: INFO

00039 PDO CANCEL DATE IS PRIOR TO THE PDO EFFECTIVE DATE

Definition: The Primary Dental Office (PDO) Cancel Date cannot be prior to the PDO Effective Date.

Resolution: Contact your M&B Rep with the applicable Cancel Date.

Severity: INFO

00040 PDO CANCEL DATE IS AFTER THE SUBSCRIBER/DEPENDENT CANCEL DATE

Definition: The Primary Dental Office (PDO) Cancel Date cannot be after the Subscriber's/Dependent's Cancel Date.

Resolution: Contact your M&B Rep with the applicable Cancel Date.

Severity: INFO

00041 EMPLOYEE ID IS INVALID

Definition: Employee ID contained spaces, special characters or alphas.

Resolution: Submit a valid Employee ID.

Severity: INFO

00042 SOCIAL SECURITY NUMBER IS INVALID

Definition: Social Security Number contained spaces or was not numeric.

Resolution: Submit a valid Social Security Number.

Severity: INFO

00043 ORIGINAL EFFECTIVE DATE IS INVALID

Definition: Original Enrollment Effective Date contained spaces, special characters, alphas, or invalid date (e.g. 20081332).

Resolution: Submit a valid Original Effective Date.

Severity: INFO

00044 ORIGINAL EFFECTIVE DATE IS AFTER THE SUBSCRIBER EFFECTIVE DATE

Definition: Original Effective Date of enrollment is after the Subscriber's Effective Date of enrollment.

Resolution: Submit valid date(s) as applicable.

Severity: INFO

00045 DEPENDENT CERTIFICATION DATE IS INVALID

Definition: Dependent Certification Date contained spaces, special characters, alphas, or invalid date (e.g. 20081332).

Resolution: Submit a valid Dependent Certification Date.

Severity: INFO

00046 PAYROLL LOCATION IS INVALID

Definition: Subscriber's Payroll Location Code contains special characters.

Resolution: Submit a valid Payroll Location.

Severity: INFO

00047 WORK LOCATION IS INVALID

Definition: Work Location Code contains special characters.

Resolution: Submit a valid Work Location.

Severity: INFO

00048 ORIGINAL EMPLOYMENT DATE IS INVALID

Definition: Original Employment Date contained spaces, special characters, alphas, or invalid date (e.g. 20081332).

Resolution: Submit a valid Original Employment Date.

Severity: INFO

00049 EMPLOYEE (SUBSCRIBER) STATUS IS INVALID

Definition: Subscriber Status does not consist of one of the following values:

W - Wage

R - Salary Represented

S - Salary on-Represented

E - Management Exempt

Resolution: Submit a valid Employee (Subscriber) Status.

Severity: INFO

00050 HIC NUMBER IS INVALID

Definition: Health Insurance Claim (HIC) Number contained special characters.

Resolution: Submit a valid HIC number.

Severity: INFO

00051 TIME WORK CODE IS INVALID

Definition: Time Work Code contained spaces, special characters or alphas.

Resolution: Submit a valid Time Work Code.

Severity: INFO

00052 TYPE CONTRACT IS INVALID

Definition: The Subscriber's Contract Code does not consist of one of the following values:

- 1 – Single Male
- 2 – Single Female
- 3 – Two Party
- 4 – Family
- 7 – Parent and Child
- 9 – Parent and Children

Resolution: Submit a valid Type Contract.

Severity: INFO

00053 SLOT ID IS INVALID

Definition: Slot ID contained spaces, special characters or alphas.

Resolution: Submit a valid Slot ID.

Severity: INFO

00054 DIVISION CODE IS INVALID

Definition: Applicant Division code contained special characters.

Resolution: Submit a valid Division Code.

Severity: INFO

00055 DIVISION SEGMENT CODE IS INVALID

Definition: Applicant Division Segment code contained special characters.

Resolution: Submit a valid Division Segment code.

Severity: INFO

00056 OTHER CONTRACT ID IS INVALID

Definition: Other Contract ID contained special characters.

Resolution: Submit a valid Other Contract ID.

Severity: INFO

00057 OTHER GROUP NUMBER IS INVALID

Definition: Subscriber's Group Number contained special characters.

Resolution: Submit a valid Other Group Number.

Severity: INFO

00058 PREVIOUS CARRIER EFFECTIVE DATE IS INVALID

Definition: Previous Carrier Effective Date contained spaces, special characters, alphas, or invalid date (e.g. 20081332).

Resolution: Submit a valid previous Carrier Effective Date.

Severity: INFO

00059 MULTIPLE RECORDS CAUSED ENTIRE CONTRACT TO ERROR

Definition: Multiple records were received for the same subscriber or dependent.

Resolution: Submit current record. Contact M&B for manual update.

Severity: DCARD

00060 MULTIPLE SPOUSE RECORDS CAUSED ENTIRE CONTRACT TO ERROR

Definition: Multiple type 2 (Relationship Code) records received for one Contract ID.

Resolution: Contact your M&B Rep to update spouse information.

Severity: DCARD

00061 A SUBSCRIBER RECORD WAS NOT PROVIDED

Definition: A subscriber record is not received, but a dependent record is sent.

Resolution: Submit valid subscriber and dependent records.

Severity: DCARD

00062 MULTIPLE SUBSCRIBER RECORDS CAUSED ENTIRE CONTRACT TO ERROR

Definition: Multiple type 1 (Relationship Code) records received for one contract ID.

Resolution: Submit current subscriber record. Contact M&B for manual update.

Severity: HARD

00063 DEPENDENT RECORD DID NOT LOAD DUE TO A SUBSCRIBER RECORD ERROR

Definition: Subscriber record on the electronic enrollment file received a discard or hard error causing the entire contract to error. This prevented the dependent information from processing.

Resolution: Submit valid Subscriber and Dependent Records.

Severity: DCARD

00064 RELATIONSHIP CODE IS INVALID

Definition: The Relationship Code is not one of the following:

- 1 Subscriber
- 2 Spouse/Domestic Partner
- 3 Dependent Child
- 4 Disabled Dependent
- 5 Sponsored Dependent

Resolution: Submit a valid Relationship Code.

Severity: HARD

00068 EFFECTIVE AND CANCEL DATES CANNOT BE UPDATED; INCONSISTENT INFO

Definition: Subscriber or Dependent Effective and Cancel Dates do not match existing dates on UCCI subscriber database.

Resolution: Contact M&B to update Effective and Cancel Date(s).

Severity: INFO

01002 RECORD IS ACTIVE BUT THE GROUP NUMBER IS CANCELLED

Definition: Enrollment received on customer file without a term date when the group on UCCI system was termed.

Resolution: Verify Cancel Date & Group Number & submit valid info.

Severity: INFO

01003 GROUP NUMBER CHANGED BUT THE EFFECTIVE DATE DID NOT

Definition: The Group Number changed, but the Effective Date of enrollment did not change.

Resolution: Submit New Effective Date with Group Number change.

Severity: INFO

01004 GROUP # CHANGE IS PRIOR TO THE EXISTING GROUP # EFFECTIVE DATE

Definition: The Group Number (#) changed, but the Effective Date is prior to the current Group Number (#) Effective Date.

Resolution: Submit New Effective Date with Group Number change.

Severity: INFO

-
- 01007 PDO # DOES NOT MATCH EXISTING PDO # FOR SAME EFFECTIVE DATE**
Definition: Primary Dental Office (PDO) Number (#) changed but the PDO effective date does not change.
Resolution: Submit new Effective Date with PDO Number change.
Severity: INFO
-
- 01008 PDO # CHANGE IS PRIOR TO THE EXISTING PDO # EFFECTIVE DATE**
Definition: The Primary Dental Office (PDO) Number (#) Effective Date is prior to the current PDO Number (#) Effective Date.
Resolution: Submit new Effective Date with PDO Number change.
Severity: INFO
-
- 01009 PDO # DOES NOT MATCH EXISTING PDO # FOR SAME EFFECTIVE DATE**
Definition: Primary Dental Office (PDO) Number (#) changed, but the PDO Effective Date did not.
Resolution: Submit new Effective Date with PDO Number change.
Severity: INFO
-
- 01010 PDO ON HOLD, NOT ACCEPTING NEW PATIENTS**
Definition: Primary Dental Office (PDO) is not accepting any new patients at this time.
Resolution: M&B has assigned another valid PDO.
Severity: INFO
-
- 01011 SUBSCRIBER CANCEL DATE IS PRIOR TO GROUP NUMBER EFFECTIVE DATE**
Definition: The Subscriber's Cancel Date received is prior to the Group's Effective Date.
Resolution: Submit valid date(s) as applicable.
Severity: HARD
-
- 01012 DEPENDENT CANCEL DATE IS PRIOR TO THE GROUP NUMBER EFFECTIVE DATE**
Definition: The Dependent's Cancel Date received is prior to the Group's Effective Date.
Resolution: Submit valid date(s) as applicable.
Severity: SOFT
-
- 01013 MULTIPLE RECORDS WERE RECEIVED**
Definition: Multiple records were received for the same subscriber or dependent.
Resolution: Submit current record. Contact M&B for manual update.
Severity: DCARD
-
- 01014 MULTIPLE SUBSCRIBER RECORDS FOUND**
Definition: Multiple subscriber records received for one contract ID.
Resolution: Submit current subscriber record. Contact M&B for manual update.
Severity: DCARD

01022 ADDRESS CANNOT BE UPDATED; INCONSISTENT INFO WITH EXISTING ADDRESS

Definition: Inconsistent address data between the customer file and the existing address data in United Concordia's enrollment system as of the file process date. (Error Code only applies to customer who also have United Concordia parent and affiliate companies coverage.)

Resolution: Submit current address to all insurance carrier plans.

Severity: INFO

01033 CONTRACT ID IS REQUIRED

Definition: Subscriber Social Security Number (SSN) must be sent along with the Client Assigned ID.

Resolution: Submit subscriber Social Security Number in Contract ID field

Severity: HARD

01035 DEPENDENT CLIENT ASSIGNED ID IS INVALID

Definition: Client Assigned ID must be between 2-17 characters and cannot be zeros.

Resolution: Submit a valid Dependent Client Assigned ID.

Severity: INFO

01036 SUBSCRIBER CLIENT ASSIGNED ID IS INVALID

Definition: Client Assigned ID must be between 2-17 characters and cannot be zeros.

Resolution: Submit a valid Subscriber Client Assigned ID.

Severity: INFO

01037 DEPENDENT CLIENT ASSIGNED ID DOES NOT MATCH ANY SUBSCRIBER'S

Definition: Dependent Client Assigned ID does not match subscriber's Client Assigned ID, and the subscriber's Contract ID is not required.

Resolution: Submit Dep Client Assigned ID that matches Subscriber's.

Severity: SOFT

01038 DEPENDENT CLIENT ASSIGNED ID DOES NOT MATCH ANY SUBSCRIBER'S

Definition: Dependent Client Assigned ID does not match subscriber's Client Assigned ID, and the subscriber's Contract ID is required.

Resolution: Submit Dep Client Assigned ID that matches Subscriber's.

Severity: INFO

01039 SUBSCRIBER ALREADY EXISTS ON UCCI SYSTEM UNDER THIS CONTRACT ID

Definition: The Contract ID provided for the subscriber matches a different subscriber on the UCCI subscriber database.

Resolution: M&B will contact you regarding this error.

Severity: HARD

01040 SUBSCRIBER ALREADY EXISTS ON UCCI SYSTEM UNDER THIS CONTRACT ID

Definition: The Contract ID provided for the subscriber matches a different subscriber on the UCCI subscriber database.

Resolution: M&B will contact you regarding this error.

Severity: INFO

01041 PDO INVALID – PROVIDER NUMBER NOT FOUND

Definition: Primary Dental Office (PDO) was not sent on the file.

Resolution: M&B has assigned another valid PDO.

Severity: INFO

01042 PDO FROZEN – PROVIDER FROZEN, NOT ACCEPTING NEW PATIENTS

Definition: Primary Dental Office (PDO) is not accepting any new patients at this time.

Resolution: M&B has assigned another valid PDO.

Severity: INFO

01044 FUTURE GROUP CANCEL DATE APPLIED TO SUBSCRIBER/DEPENDENT

Definition: Subscriber/dependent was sent without a cancel date, but the group's term date has been applied.

Resolution: Verify cancel date. Group is termed.

Severity: INFO

30000 SUBSCRIBER RECORD WAS NOT SENT BUT IS ACTIVE ON UCCI SYSTEM

Definition: Subscriber is active in UCCI's subscriber database but not sent on file.

Resolution: Provide Cancel Date for subscriber to M&B.

Severity: N/A

40000 DEPENDENT RECORD WAS NOT SENT BUT IS ACTIVE ON UCCI SYSTEM

Definition: Dependent is active in UCCI's subscriber database but not sent on file.

Resolution: Provide Cancel Date for dependent to M&B.

Severity: N/A

13. UNITED CONCORDIA ELECTRONIC ENROLLMENT FILE LAYOUT

Version 091401 (Customer Header Record)

CUSTOMER HEADER RECORD (Required Fields)						
#	Field Name	Field Description	Field Type	Field Length	Start Position	End Position
1	FILLER	Filler set to spaces	CHA	9	001	009
2	RECORD TYPE	Header type must be 0 (zero)	CHA	1	010	010
3	CUSTOMER ID	Customer Identification Number assigned by United Concordia	CHA	9	011	019
4	CREATE DATE	Date the enrollment file was created by customer. CCYYMMDD	NUM	8	020	027
5	CREATE TIME	Time the enrollment file was created by customer. HHMMSS	NUM	6	028	033
6	SUBSCRIBER COUNT	Total number of contracts sent	NUM	8	034	041
7	RECORD COUNT	Total records sent including the header record	NUM	8	042	049
8	FILE TYPE CODE	Type of enrollment file. Valid values are: FULL CHNGE	CHA	5	050	054
9	ELIGIBILITY DATE	1 st of the month following the file Creation Date. CCYYMMDD	NUM	8	055	062
10	FILLER	Filler set to spaces	CHA	938	063	1000

14. UNITED CONCORDIA ELECTRONIC ENROLLMENT FILE LAYOUT

Version 091401 (Subscriber/Dependent Base Record)

SUBSCRIBER/DEPENDENT BASE RECORD (Required Fields)						
#	Field Name	Field Description	Field Type	Field Length	Start Position	End Position
1	CONTRACT ID	Unique SSN, used to identify a subscriber. The Contract ID links the eligible dependents to the subscriber.	CHA	9	001	009
2	RELATIONSHIP CODE	Represents relationship to the subscriber. Valid values are: 1 - Subscriber 2 - Spouse/Domestic Partner 3 - Dependent 4 - Disabled Dependent 5 - Sponsored Dependent	CHA	1	010	010
3	LAST NAME	Minimum 2 characters	CHA	35	011	045
4	FIRST NAME	Minimum 1 character	CHA	25	046	070
5	MIDDLE NAME	Middle Name	CHA	25	071	095
6	PRE TITLE NAME	Preceding Title Name	CHA	10	096	105
7	SUC TITLE NAME	Succeeding Title Name	CHA	10	106	115
8	GENDER CODE	Valid values are: M - Male F - Female U - Unknown	CHA	1	116	116
9	DATE OF BIRTH	CCYYMMDD	NUM	8	117	124
10	ADDRESS LINE 1	Subscriber's Street Address	CHA	55	125	179
11	ADDRESS LINE 2	Subscriber's 2nd Address	CHA	55	180	234
12	CITY	Subscriber's City Address	CHA	30	235	264
13	STATE/TERRITORY CODE	Subscriber's US State Code Space, if foreign	CHA	2	265	266
14	ZIP CODE	Subscriber's Mailing main Zip Address	CHA	5	267	271
15	ZIP CODE SUFFIX	Subscriber's Zip Code Suffix Address	CHA	4	272	275
16	FILLER	Filler set to spaces	CHA	6	276	281
17	ENROLLMENT SOURCE CODE	United Concordia-Assigned Code	CHA	3	282	284
18	BASE GROUP NUMBER	United Concordia-Assigned Code	CHA	6	285	290
19	SUB GROUP NUMBER	United Concordia-Assigned Code	CHA	3	291	293

SUBSCRIBER/DEPENDENT BASE RECORD (Required Fields)						
#	Field Name	Field Description	Field Type	Field Length	Start Position	End Position
20	BENEFIT LEVEL	United Concordia-Assigned Code	CHA	3	294	296
21	PRODUCT LINE	Must be D (Dental)	CHA	1	297	297
22	EFFECTIVE DATE	Date of the new dental coverage or the date of the most current dental coverage, whichever date is later. CCYYMMDD	NUM	8	298	305
23	CANCEL DATE	Date of termination of dental coverage. CCYYMMDD	NUM	8	306	313
24	HIPAA CONDITION RESPONSE INDICATOR (Not required)	Dependent Disabled Status. Valid values are: Y – Yes N – No	CHA	1	314	314
25	HIPAA RELATIONSHIP CODE (Not required)	A code that represents the relationship of a dependent to the subscriber. Valid values are: 01 – spouse 03 – father or mother 04 – grandfather or grandmother 05 – grandson or granddaughter 06 – uncle or aunt 07 – nephew or niece 08 – cousin 09 – adopted child 10 – foster child 11 – son-in-law or daughter-in-law 12 – brother-in-law or sister-in-law 13 – mother-in-law or father-in-law 14 – brother or sister 15 – ward 17 – stepson or stepdaughter 18 – self 19 – child 23 – sponsored dependent – dependents between the ages 19 and 25 not attending school; age qualifications may vary depending on policy. 24 – dependent of a minor dependent 25 – ex-spouse 26 – guardian 31 – court appointed guardian 32 – mother 33 – father 38 – collateral dependent – relative related by blood or marriage who resides in the home and is dependent on the insured for a major portion of their support. 48 – stepfather 49 – stepmother 53 – life partner – this is a partner that acts like a spouse without a legal marriage commitment.	CHA	2	315	316

SUBSCRIBER/DEPENDENT BASE RECORD (Required Fields)						
#	Field Name	Field Description	Field Type	Field Length	Start Position	End Position
26	HIPAA CANCEL CODE (Not required)	A code which represents the reason of termination. Valid values are: 03 – Death 04 – Retirement 08 – Termination of Employment 14 – Voluntary Withdrawal 17 – Fired 22 – Plan Change - This is used when a member changes from one Plan to a different Plan. This is not intended to identify changes to a Plan. 26 – Declined coverage 32 – Marriage 40 – Lay off without benefits AI – No reason given	CHA	2	317	318
27	HIPAA MEDICARE END DATE	Cancel Date for Medicare Part A CCYYMMDD or 00000000 (zero-filled) if not used.	NUM	8	319	326
28	FILLER	Filler set to spaces	CHA	674	327	1000

15. UNITED CONCORDIA ELECTRONIC ENROLLMENT FILE LAYOUT

Version 091401 (Optional Fields)

The following are the Electronic Enrollment Base Record Optional Fields					
Note: All optional fields selected must be either data filled, zero (0) filled (numeric fields) or space filled (character fields).					
	Optional Field Name	Optional Field Description	Type of Field	Length of Field	Comments
1.	SOC SEC NUMBER	Subscriber and dependent Social Security Number (SSN)	NUM	9	
2.	PDO NUMBER	Primary Dental Office (PDO) Number	NUM	9	
3.	PDO EFFECT DATE	Primary Dental Office (PDO) Effect Date CCYYMMDD	NUM	8	
4.	PDO CANCEL DATE	Primary Dental Office (PDO) Cancel Date CCYYMMDD	NUM	8	
5.	PAYROLL LOCATION	Payroll Location Code	CHA	5	
6.	WORK LOCATION	Work Location Code	CHA	5	
7.	HIRE DATE	Subscriber's Hire Date. CCYYMMDD	NUM	8	
8.	PREV CARRIER EFF DATE	Applies to Concordia Select (Choice) products only. CCYYMMDD	NUM	8	
9.	CLIENT ASSIGNED ID	ID assigned by the customer to identify a subscriber and eligible dependents. Length must be between 2-17 and must be approved by United Concordia.	CHA	17	

APPENDIX A - HIPAA 834 LAYOUT

834 EDI Segment	834 Element Name	UCCI REQUIREMENTS	Customer Submission
ISA	Interchange Header	Interchange Header - REQUIRED	ISA - PAGE B.3
ISA01	Authorization Qualifier	"00"	
ISA02	Authorization Information	Space Filled	
ISA03	Security Information Qualifier	"00"	
ISA04	Security Information	Space Filled	
ISA05	Sender ID Qualifier	"ZZ"	
ISA06	Sender ID	Trading Partner Number assigned by UCCI	
ISA07	Receiver Qualifier	"33"	
ISA08	Receiver ID	"89070"	
ISA09	Interchange Date	YYMMDD	
ISA10	Interchange Time	HHMM	
ISA11	Control Standards Standard	"U"	
ISA12	Control Standards Version	"00401"	
ISA13	Interchange Control Number	Assigned by Sender, Must be the same as IEA02	
ISA14	Acknowledgement Request	0	
ISA15	Test Indicator	"P" = Production or "T" Test	
ISA16	Component Element Separator	“ : “	
	Terminator Delimiter	"~" (Hex value: 7E)	
GS	Functional Group Header	Functional Group Header - REQUIRED	GS - PAGE B.8
GS01	Functional ID Code	"BE"	
GS02	Application Sender's Code	Trading Partner - Assigned by UCCI	
GS03	Application Receiver's Code	"89070SUB"	
GS04	Date	Format = CCYYMMDD	
GS05	Time	Format = HHMMSS	
GS06	Group Control Number	Assigned by Sender. Must equal GE02	
GS07	Responsibility Agency Code	"X"	
GS08	Version/Release/Industry Code	"004010X095A1"	
ST	Transaction Set Header	Transaction Set Header - REQUIRED	ST - PAGE 27
ST01	Transaction ID Code	"834"	
ST02	Transaction Control Number	Must = SE02 Value	

APPENDIX A - HIPAA 834 LAYOUT

834 EDI Segment	834 Element Name	UCCI REQUIREMENTS	Customer Submission
BGN	Beginning Segment	Beginning Segment Header - REQUIRED	BGN - PAGE 28
BGN01	Transaction Purpose Code Org	"00" - (zeros)	
BGN02	Transaction Reference #	Assign by Sender	
BGN03	Date	CCYYMMDD	
BGN04	Time	HHMMSS	
BGN05	Time Zone Code	"ES" - Eastern Standard Time change if in different time zone	
BGN06	Reference Identification	N/A	
BGN07	Transaction Type Code	N/A	
BGN08	Action Code	"2" = Change File or "4" Full File	
BGN09	Security Level Code	N/A	
REF	Transaction Set Policy Number	Transaction Set Policy Number Header - SITUATIONAL	REF - PAGE 32
REF01 - REF04	Reference Identification Qualifier	N/A	
DTP	File Effective Date	File Effective Date Header - SITUATIONAL	DTP - PAGE 34
DTP01	Date/Time Qualifier	007 - Effective (creation date)	
DTP02	Date/Time Formate	D8	
DTP03	Date/Time Period	CCYYMMDD	
N1	Sponsor Name	Loop 1000A - REQUIRED	N1 - PAGE 35
N101	Name Qualifier	P5	
N102	Name	Customer Name	
N103	Entity ID Qualifier	ZZ	
N104	Sponsor ID	Tax ID Number	
N105 - N106		N/A	
N1	Payer	Loop 1000B - REQUIRED	N1 - PAGE 37
N101	Name Qualifier	IN	
N102	Name	UCCI	
N103	Entity ID Qualifier	FI - (Letter I)	
N104	Entity Relationship Code	860307623	
N105 - N106		N/A	
N1	TPA/BROKER Name	Loop 1000C - SITUATIONAL	N1 - PAGE 39
N101 - N106		N/A	

APPENDIX A - HIPAA 834 LAYOUT

834 EDI Segment	834 Element Name	UCCI REQUIREMENTS	Customer Submission
ACT	TPA/BROKER ACCOUNT INFORMATION	Loop 1100C - SITUATIONAL	ACT - PAGE 41
ACT01 - ACT09		N/A	
INS	Insured Benefit	Loop 2000 - REQUIRED	INS - PAGE 43
INS01	Response Code	"Y" = Subscriber and "N" = Dependent	
INS02	Relationship Code	"01" = Spouse, "18" = Self, "19" = Child	
INS03	Maintenance Type Code	"001" = Change "021" = ADD "024" = CANCEL "030 = Audit or Compare	
INS04	Maintenance Reason Code	N/A	
INS05	Benefit Status Code	"A" = Active	
INS06	Medicare Plan Code	N/A	
INS07	Consolidated Omnibus Budget Reconciliation	N/A	
INS08	Employment Status Code	FT	
INS09	Student Status Code	N/A	
INS10	Handicap Indicator	Y for dependent Handicap/ N for a subscriber, spouse and child	
INS11 - INS17		N/A	
REF	Subscriber Number	Loop 2000 - REQUIRED	REF - PAGE 51
REF01	Qualifier	0F - Zero "F"	
REF02	Reference Identification	SSN - "123456789"	
REF03 - REF04		N/A	
REF	Member Policy Number	Loop 2000 - SITUATIONAL	REF - PAGE 53
REF01 - REF04	Reference Number Qualifier	N/A	
REF	Member Identification Number	Loop 2000 - SITUATIONAL (Employee ID Number)	REF - PAGE 55
REF01	Reference Identification Qualifier	"23" - Client Number	
REF02	Reference Identification	Employee ID Number	
REF03 - REF04		N/A	
REF	Prior Coverage Months	Loop 2000 - SITUATIONAL	REF - PAGE 57
REF01 - REF04		N/A	
DTP	Member Level Dates	Loop 2000 - SITUATIONAL	DTP - PAGE 59
DTP01	Date/Time Qualifier	"336" Hire Date	
DTP02	Date Time Period Format Qualifier	"D8"	
DTP03	Date Time Period	CCYYMMDD	

APPENDIX A - HIPAA 834 LAYOUT

834 EDI Segment	834 Element Name	UCCI REQUIREMENTS	Customer Submission
NM1	Member Name	Loop 2100A - Required	NM1 - PAGE 61
NM101	Entity Identifier Code	"IL"	
NM102	Entity Type Qualifier	"1" - Number One	
NM103	Name Last	Last Name	
NM104	Name First	First Name	
NM105	Name Middle	Middle Name	
NM106	Name Prefix	Prefix	
NM107	Name Suffix	Suffix	
NM108	Identification Code Qualifier	"34" - SSN	
NM109	Identification Code	"123456789" (No Hyphens)	
NM110 - NM111		N/A	
PER	Member Communications Number	Loop 2100A - SITUATIONAL	PER - PAGE 64
PER01 - PER09		N/A	
N3	Member Residence Street Address	Loop 2100A - REQUIRED	N3 - PAGE 67
N301	Address Information	Address Line One	
N302	Address Information	Address Line Two	
N4	Member Residence City, State, Zip Code	Loop 2100A - REQUIRED	N4 - PAGE 68
N401	City Name	City	
N402	State	State	
N403	Postal Code	Zip Code - No Hyphens	
N404 - N406		N/A	
DMG	Member Demographics	Loop 2100A - REQUIRED	DMG - PAGE 70
DMG01	Date Time Period Format Qualifier	"D8"	
DMG02	Date Time Period	Date of Birth - CCYYMMDD	
DMG03	Gender Code	"F" = Female or "M" = Male	
DMG04 - DMG09		N/A	

APPENDIX A - HIPAA 834 LAYOUT

834 EDI Segment	834 Element Name	UCCI REQUIREMENTS	Customer Submission
ICM	Member Income	Loop 2100A - Not Used by UCCI	ICM - PAGE 73
AMT	Member Policy Amounts	Loop 2100A - Not Used by UCCI	AMT - PAGE 75
HLH	Member Health Information	Loop 2100A - Not Used by UCCI	HLH - PAGE 76
LUI	Member Language	Loop 2100A - Not Used by UCCI	LUI - PAGE 78
NM1	Incorrect Member Name	Loop 2100B - Not Used by UCCI	NM1 - PAGE 80
DMG	Incorrect Member Demographics	Loop 2100B - Not Used by UCCI	DMG - PAGE 83
NM1	Member Mailing Address	Loop 2100C - Not Used by UCCI	NM1 - PAGE 85
N3	Member Mail Street Address	Loop 2100C - Not Used by UCCI	N3 - PAGE 87
N4	Member Mail City, State, Zip	Loop 2100C - Not Used by UCCI	N4 - PAGE 88
NM1	Member Employer	Loop 2100D - Not Used by UCCI	NM1 - PAGE 90
PER	Member Employer Communications Number	Loop 2100D - Not Used by UCCI	PER - PAGE 92
N3	Member Employer Street Address	Loop 2100D - Not Used by UCCI	N3 - PAGE 95
N4	Member Employer City, State, Zip	Loop 2100D - Not Used by UCCI	N4 - PAGE 96
NM1	Member School	Loop 2100E - Not Used by UCCI	NM1 - PAGE 98
PER	Member School Communications Numbers	Loop 2100E - Not Used by UCCI	PER - PAGE 100
N3	Member School Street Address	Loop 2100E - Not Used by UCCI	N3 - PAGE 103
N4	Member School City, State, Zip	Loop 2100E - Not Used by UCCI	N4 - PAGE 104
NM1	Custodial Parent	Loop 2100F - Not Used by UCCI	NM1 - PAGE 106
PER	Custodial Parent Communications Numbers	Loop 2100F - Not Used by UCCI	PER - PAGE 109
N3	Custodial Parent Street Address	Loop 2100F - Not Used by UCCI	N3 - PAGE 112
N4	Custodial Parent City, State, Zip	Loop 2100F - Not Used by UCCI	N4 - PAGE 113
NM1	Responsible Person	Loop 2100G - Not Used by UCCI	NM1 - PAGE 115
PER	Responsible Person Communications Numbers	Loop 2100G - Not Used by UCCI	PER - PAGE 118
N3	Responsible Person Street Address	Loop 2100G - Not Used by UCCI	N3 - PAGE 121
N4	Responsible Person City, State, Zip	Loop 2100G - Not Used by UCCI	N4 - PAGE 122
DSB	Disability Information	Loop 2200 - Not Used by UCCI	DSB - PAGE 124
DTP	Disability Eligibility Dates	Loop 2200 - Not Used by UCCI	DTP - PAGE 126

APPENDIX A - HIPAA 834 LAYOUT

834 EDI Segment	834 Element Name	UCCI REQUIREMENTS	Customer Submission
HD	Health Coverage	Loop 2300 - REQUIRED	HD - PAGE 128
HD01	Maintenance Type Code	"001" = Change, "021" = Addition, "024" = Cancel "030" = Audit or Compare	
HD02	Maintenance Reason Code	N/A	
HD03	Insurance Line Code	"DCP" = DHMO, "DEN" = All other groups	
HD04	Plan Coverage Description (Prior Carrier effective date for Choice	PC CCYYMMDD	
HD05- HD11	N/A	N/A	
DTP	Health Coverage Dates	Loop 2300 - REQUIRED	DTP - PAGE 132
DTP01	Date/Time Qualifier	"348" = Effective Date, "349" = Cancel Date (Must have both "348" and "349" DTP segments for Cancels	
DTP02	Date/Time Format	"D8"	
DPT03	Coverage Period	CCYYMMDD	
AMT	Health Coverage Policy	Loop 2300 - SITUATIONAL	AMT - PAGE 134
AMT01 - AMT03		N/A	
REF	Health Coverage Policy Number	Loop 2300 - REQUIRED	REF - PAGE 135
REF01	Reference Identification Qualifier	"1L" (Number One "L")	
REF02	Reference Identification	UCCI 15 digit Group Number: EX: "005123456000000"	
REF03 - REF04		N/A	
IDC	Identificaton Card	Loop 2300 - SITUATIONAL	IDC - PAGE 137
IDC01 - IDC04		Not Used by UCCI	
LX	Provider Information - (ONLY FOR DHMO)	Loop 2310 - REQUIRED	LX - PAGE 139
LX01	Assigned Number	"1"	
NM1	Provider Name - (ONLY FOR DHMO)	Loop 2310 - REQUIRED	NM1 - PAGE 140
NM101	Entity Type Code	"P3" = Primary Care Provider	
NM102	Entity Type Code	"1" = Person	
NM103 - 107		N/A	
NM108	Identification Code Qualifier	"SV" = Service Provider Number	
NM109	Provider Identifier	Send UCCI Provider Number for Subscriber	
NM110	Entity Relationship Code	"25" = Established Patient or "26" Not Established Patient	
NM111	Entity Identifier Code	N/A	

APPENDIX A - HIPAA 834 LAYOUT

834 EDI Segment	834 Element Name	UCCI REQUIREMENTS	Customer Submission
N4	Provider City, State, Zip Code	Loop 2310 - Not Used by UCCI	N4 - PAGE 143
PER	Provider Communiations Number	Loop 2310 - Not Used by UCCI	PER - PAGE 145
PLA	PCP Change Reason	Loop 2310 - Not Used by UCCI	PLA - PAGE 148
COB	Coordination of Benefits	Loop 2320 - Not Used by UCCI	COB - PAGE 150
REF	Additional Coordination of Benefits Identifiers	Loop 2320 - Not Used by UCCI	REF - PAGE 152
N1	Other Insurance Company Name	Loop 2320 - Not Used by UCCI	N1 - PAGE 154
DTP	Coordination of Benefits Eligibility Dates	Loop 2320 - Not Used by UCCI	DTP - PAGE 156
SE	Transaction Set Trailer	Transaction Set Trailer - REQUIRED	SE - PAGE 158
SE01	Number of Included Segements	Total Number of Segments in Transaction Set, including the Beginning (ST) and ending (SE)	
SE02	Transaction Set Control Number	Must equal ST02	
GE	Functional Group Trailer	Functional Group Trailer - REQUIRED	GE - PAGE B.10
GE01	Number of Transaction Sets Included	Total Number of Transaction Sets	
GE02	Group Control Number	Assign by Sender. Must equal GS06	
IEA	Interchange Control Trailer	Interchange Control Trailer - REQUIRED	IEA - PAGE B.7
IEA01	Number of Included Functional Groups	A Count of Functional Groups Included on File	
IEA02	Interchange Control Number	Assigned by Sender, Must be the same as ISA13.	