



Florida Blue Health Plan

HIPAA Transaction Standard Companion Guide

For Availity^{®1} Health Information Network Users

Refers to the Technical Report Type Three (TR3) Based on ASC Version 005010X279A1

270/271- Health Care Eligibility and Benefit Inquiry and Response

Companion Guide Version Number: 6.0

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Disclosure Statement

The Florida Blue *HIPAA Transaction Standard Companion Guide for EDI Transactions Technical Reports, Type 3 (TR3)* provides guidelines for submitting electronic batch transactions. Because the HIPAA ASC X12-TR3s require transmitters and receivers to make certain determinations/elections (e.g., whether, or to what extent, situational data elements apply) this *Companion Guide* documents those determinations, elections, assumptions or data issues that are permitted to be specific to Florida Blue business processes when implementing the HIPAA ASC X12 5010 TR3s.

This *Companion Guide* does **not** replace or cover all segments specified in the HIPAA ASC X12 TR3s. It does not attempt to amend any of the requirements of the TR3s or impose any additional obligations on trading partners of Florida Blue that are not permitted to be imposed by the HIPAA Standards for Electronic Transactions. This *Companion Guide* provides information on Florida Blue specific codes relevant to Florida Blue business processes, rules and situations that are within the parameters of HIPAA. Readers of this *Companion Guide* should be acquainted with the HIPAA ASC X12 TR3s, their structure and content.

This *Companion Guide* provides supplemental information that exists between Florida Blue and its trading partners. Trading partners should refer to their Trading Partner Agreement for guidelines pertaining to Availity, LLC legal conditions surrounding the implementation of the EDI transactions and code sets. However, trading partners should refer to this *Companion Guide* for information on Florida Blue business rules or technical requirements regarding the implementation of HIPAA-compliant EDI transactions and code sets.

Nothing contained in this *Companion Guide* is intended to amend, revoke, contradict or otherwise alter the terms and conditions of your applicable Trading Partner Agreement. If there is an inconsistency between the terms of this *Companion Guide* and the terms of your applicable Trading Partner Agreement, the terms of the Trading Partner Agreement will govern. If there is an inconsistency between the terms of this *Companion Guide* and any terms of the TR3, the relevant TR3 will govern with respect to HIPAA edits and this *Companion Guide* will govern with respect to business edits.

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Version Change Log

Date	Description	Page
06/2013	Cosmetic changes and version log addition	Multiple
11/2015	Loop ID 2100C Subscriber Loop//NM108 and NM109	13
08/28/2017	Directional arrow on Outputs section of the Process Map was changed to reflect from Availity to 271 Provider Office. Current State Date updated to reflect August 2017.	8
08/28/2017	Changed alpha prefix to alpha-numeric prefix	13
04/17/2018	Changed alpha-numeric to prefix	13
12/01/2019	Section 5, 5.1, 5.2, 5.3 and 5.4 to update contact information	9
	Section 6	
	Global Information Table Row G10 column 5	12
	Enveloping Information Table	
	Row E14 column 5	14
	Section 7 Business Requirements Table	
	Row B2 column 5	15
	B4-B8 All columns	16
	Enveloping Information – 271 Response Table	
	Row E14 column 5	19
	Row E19 column 5	20

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1 INTRODUCTION

The Health Insurance Portability and Accountability Act (HIPAA) requires that the health care industry in the United States comply with the electronic data interchange (EDI) standards as established by the Secretary of Health and Human Services. The Technical Reports Type 3 Guides (TR3s) for the ANSI 270/271 Eligibility Benefit Inquiry and Response transaction specifies in detail the required formats. It contains requirements for the use of specific segments and specific data elements within segments and was written for all health care providers and other submitters. It is critical that your software vendor or IT staff review this document carefully and follow its requirements to send HIPAA-compliant files to Florida Blue via your vendor. The ASC X12 005010X279A1 is the established standard for Eligibility Benefit Inquiry and Response (ANSI 270/271).

1.1 Scope

This ANSI 270/271 *Companion Guide* was created for Florida Blue trading partners to supplement the ANSI 270/271 TR3. It describes the data content, Florida Blue business rules and characteristics of the ANSI 270/271 transaction.

1.2 Overview

The Technical Reports Type 3 Guides (TR3s) for the ANSI 270/271 Eligibility and Benefit Inquiry and Response transaction specifies in detail the required formats. It contains requirements for the use of specific segments and specific data elements within segments, and was written for all health care providers and other submitters. It is critical that your software vendor or IT staff review this document carefully and follow its requirements to send HIPAA-compliant files to Florida Blue via your vendor.

1.3 References

- TR3 Guides for ASC X12 005010X279A1 Eligibility Benefit Inquiry and Response (ANSI 270/271) and all other HIPAA standard transactions are available electronically at wpc-edi.com.
- For more information, including an online demonstration, please visit availity.com or call 800-282-4548.
- CAQH CORE Operating Rules Phase II caqh.org/CORE_operat_rules.php.

2 GETTING STARTED

2.1 Working with Florida Blue

Availity optimizes information exchange between multiple health care stakeholders through a single, secure network. The Availity Health Information Network encompasses administrative, financial, and clinical services, supporting both real time and batch EDI via the web and through business to business (B2B) integration. For more information, including an online demonstration, please visit availity.com or call 800-282-4548.

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2.2 Trading Partner Registration

In order to register, you will need:

- Basic information about your practice, including your Federal Tax ID and National Provider Identifier.
- Someone with the legal authority (typically an owner or senior partner) to sign agreements for your organization.
- An office manager or other employee who can oversee the Availity implementation and maintain User IDs and access.

2.3 Certification and Testing Overview

All trading partners and clearing houses should be certified via Availity. It is recommended that the trading partner obtain HIPAA Certification from an approved testing and certification third party vendor prior to testing.

3 TESTING WITH FLORIDA BLUE AND AVAILITY

Florida Blue recommends that trading partners contact Florida Blue to obtain a testing schedule and/or notify Florida Blue of potential testing opportunities prior to implementing any foreseen transaction impacts to the business flow of both Florida Blue and /or the trading partner.

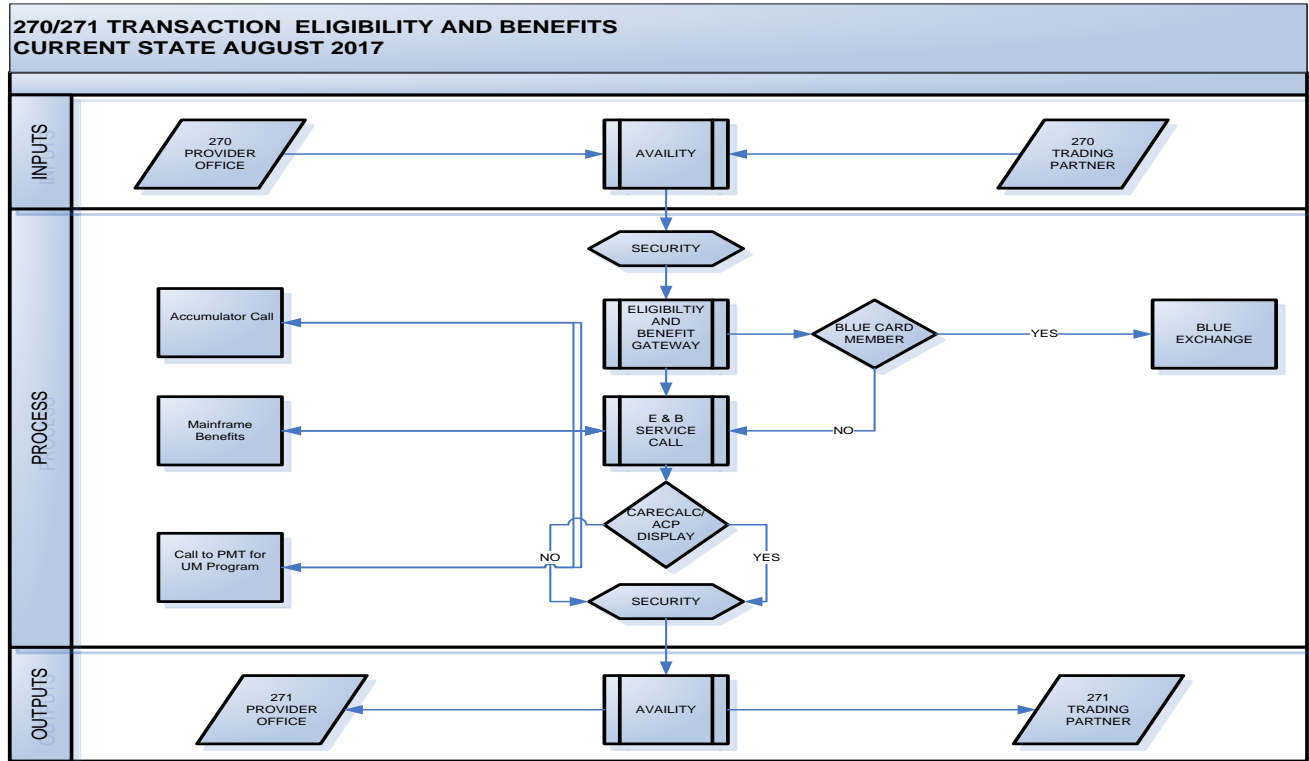
4 CONNECTIVITY/COMMUNICATIONS WITH FLORIDA BLUE AND AVAILITY

4.1 Process Map

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4.2 Transmission Administrative Procedure

Connectivity

Secure File Transfer via Internet

FTP via ISDN, Leased Lines, Frame Relay, VPN

Firewall Mechanics

If you are behind a firewall, make sure that your FTPS client passes the Internet facing IP address of the server rather than the internal IP. Failure to do so usually causes the communication break when the client tries to list the files available in the Server or during upload or download of files.

4.3 Re-Transmission Procedure

Encryption Method

Secure Socket Layer (SSL)

4.4 Communication Protocol Specifications

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Protocols Used

- HTTPS/FTPS
- HTTPS and your common Internet browsers (IE, Firefox, etc.) Port 443 (default)
- FTPS: Any FTP client capable of SSL encryption
- Client examples
- Valicert ftp client
- Cute-FTP
- WS-FTP Pro
- FileZilla
- FTPS Parameters
- Port 21
- Authentication: FTP over SSL (explicit) or FTP over TLS (explicit)
- Active Mode
- File retention is 72 hours
- SSH Parameters
- Use SFTP or SCP
- Port 22
- Authentication: User ID and Password

4.5 Passwords

If a password change is necessary, please contact Availity at 800-282-4548 or availity.com.

5 CONTACT INFORMATION

5.1 EDI Customer Service

For EDI customer service related to Florida Blue , please visit availity.com or call 800-282-4548.

5.2 EDI Technical Assistance

For support of EDI transactions through Availity, please visit availity.com or call 800-282-4548.

5.3 Provider Service Number

For provider services, please contact Florida Blue at 800-727-2227. For faster service, please have your Availity transaction ID available.

5.4 Applicable websites/email

- availity.com
- floridablue.com

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6 CONTROL SEGMENTS/ENVELOPES

ANSI 270/271 - Eligibility & Benefit Inquiry and Response:

The purpose of this section is to delineate specific data requirements where multiple valid values are presented within the ANSI 270/271 5010 A1 TR3.

Common Definitions:

- **Interchange control header (ISA06) Interchange Sender ID (Mailbox ID)** – is individually assigned to each trading partner.
- **Interchange control header (ISA08) Interchange Receiver ID** – is the Florida Blue Tax ID, 592015694.
- **Interchange control header (ISA15) Usage Indicator** – defines whether the transaction is a test (T) or production (P).
- **Functional Group Header (GS02) Application Sender’s code** – is individually assigned to each trading partner.

ANSI 270/271 - Eligibility & Benefit Inquiry and Response:

Global Information

Req #	Loop ID – Segment Description & Element Name	Reference Description	TR3 Page (s)	Plan Requirement
G1	All Transactions			Florida Blue requires a Trading Partner Agreement to be on file with Availity indicating all electronic transactions the Trading Partner intends to send or receive.
G2	All Segments			Only loops, segments, and data elements valid for the 270 HIPAA-AS TR3 Guides ASC X12 005010X279A1 will be used for processing.

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Florida Blue Health Plan Companion Guide ANSI 270/271 Transaction Type

Req #	Loop ID – Segment Description & Element Name	Reference Description	TR3 Page (s)	Plan Requirement
G3	<p>Acknowledgments – Florida Blue acknowledgements are created to communicate the status of transactions. It is imperative that they be retrieved on a daily basis. One file could result in multiple acknowledgements.</p> <p><u>ANSI X12:</u></p> <p>-TA1 – Interchange Acknowledgement</p> <p>-999– Functional Acknowledgement</p>			<p>TA1 is available immediately after depositing file</p> <p>999 is available immediately after depositing file</p>
G4	Negative Values			Submission of any negative values in the 270 transaction will not be processed or forwarded.
G5	Date fields			All dates submitted on an incoming 270 Eligibility and Benefit Inquiry must be a valid calendar date in the appropriate format based on the respective ANSI 270/271 5010 A1 TR3 qualifier. Failure to do so may cause processing delays or rejection.
G6	Batch Transaction Processing			Generally, Availity and Florida Blue Gateway accept transmissions 24 hours a day, 7 days a week.
G7	Multiple Transmissions	All Segments		Any errors detected in a transaction set will result in the entire transaction set being rejected.
G8	All Transactions			Although you may have submitted multiple patients in one 270 Inquiry, Florida Blue will send a separate 271 response for each patient.
G9	2100C Subscriber Name Qualifier	NM108 NM109		When the MI qualifier is submitted in NM108, Florida Blue requires the submission of the ID number (#) exactly as it appears on the Florida Blue ID card

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Florida Blue Health Plan Companion Guide ANSI 270/271 Transaction Type

Req #	Loop ID – Segment Description & Element Name	Reference Description	TR3 Page (s)	Plan Requirement
	Identification Code			without any embedded spaces, including any applicable prefix or suffix. (This includes any out of state Blue Plan ID cards.) The ID must contain a minimum of a three character prefix followed by characters for a maximum of 17 characters. Or an H followed by exactly 8 or 10 numbers. Note: For Federal Employees an R followed by exactly 8 numbers.
G10	All Transactions			E & B requests with multiple dependents will be split into separate transactions and returned one at a time.
G11	All Transactions			Florida Blue requires that you do not submit any special characters in any text fields.
G12	2110C Subscriber Spend Down Amount Monetary Amount	AMT	137	Although the 270 allows submission of data in this segment, this does not apply to Florida Blue products. Therefore any information submitted will not be utilized in processing the 270 request.
G13	All transactions			Requests for information should not include coverage specific inquiries for dates or procedure codes. Response information will not include specific request for procedure coverage date, procedure maximum amounts, patient responsibility amounts or non-covered amounts.

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Enveloping Information – 270 Inquiry

Req #	Loop ID - Segment Description & Element Name	Reference Description	TR3 Page(s)	Plan Requirement
E1	Interchange Control Header	ISA	<i>Appendix B.3 ; C.3</i>	All transactions utilize delimiters from the following list: >, *, ~, ^, , { and :. Submitting delimiters not supported within this list may cause an interchange (transmission) to be rejected
E2	Interchange Control Structure	ISA	<i>Appendix B (B.4)</i>	Must submit E&B inquiry data using the basic character set as defined in Appendix B of the ASC X12 005010X279A1 TR3. In addition to the basic character set, you may choose to submit lower case characters and the special character (@) from the extended character set. Any other characters submitted from the extended character set may cause the interchange (transmission) to be rejected by the Plan.
E3	Interchange Control Header Authorization Information Qualifier	ISA01	<i>Appendix C(C.4)</i>	Florida Blue requires 00 in this field.
E4	Interchange Control Header Authorization Information	ISA02	<i>Appendix C(C.4)</i>	Florida Blue requires 10 spaces in this field.
E5	Interchange Control Header Security Information Qualifier	ISA03	<i>Appendix C(C.4)</i>	Florida Blue requires 00 in this field.
E6	Interchange Control Header Security Information	ISA04	<i>Appendix C(C.4)</i>	Florida Blue requires 10 spaces in this field.
E7	Interchange Control Header Interchange ID Qualifier	ISA05	<i>Appendix C(C.4)</i>	Florida Blue requires 01 in this field.
E8	Interchange Control Header Interchange Sender ID	ISA06	<i>Appendix C(C.4)</i>	Florida Blue requires submission of your individually assigned Florida Blue sender mailbox number in this field.

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Florida Blue Health Plan Companion Guide ANSI 270/271 Transaction Type

Req #	Loop ID - Segment Description & Element Name	Reference Description	TR3 Page(s)	Plan Requirement
E9	Interchange Control Header Interchange ID Qualifier	ISA07	<i>Appendix C(C.5)</i>	Florida Blue requires ZZ in this field.
E10	Interchange Control Header Interchange Receiver ID	ISA08	<i>Appendix C(C.5)</i>	Florida Blue will only accept the submission of Florida Blue tax ID number 592015694 in this field.
E11	Interchange Control Header Repetition Separator	ISA11	<i>Appendix C(C.5)</i>	All transactions utilize { as repetition separator. Submitting delimiters other than this may cause an interchange (transmission) to be rejected.
E12	Interchange Control Header Acknowledgement Requested	ISA14	<i>Appendix C(C.6)</i>	The TA1 will not be provided without a code value of 1 in this field.
E13	Interchange Control Header Interchange Usage Indicator	ISA15	<i>Appendix C(C.6)</i>	Florida Blue requires P in this field to indicate the data enclosed in this transaction is a production file.
E14	Interchange Control Header Component Element Separator	ISA16	<i>Appendix C(C.6)</i>	Florida Blue requires the use of the : (colon) delimiter to separate component data elements within a composite data structure.
E15	Interchange Control Header Functional Group Header/Functional Group Trailer	GS - GE ISA - IEA	<i>Appendix C(C.7)</i>	Florida Blue will only process one transaction type per GS-GE (functional group). However, we will process multiple ST's within one (1) GS segment as long as they are all the same transaction type.

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Req #	Loop ID - Segment Description & Element Name	Reference Description	TR3 Page(s)	Plan Requirement
E16	Functional Group Header Functional Identifier Code	GS01	<i>Appendix C(C.7)</i>	HS – E & B Inquiry Florida Blue requires submission of the above value in this field.
E17	Functional Group Header Application Sender's Code	GS02	<i>Appendix C(C.7)</i>	Florida Blue requires the submission of the Florida Blue assigned Sender Code in this field.
E18	Functional Group Header Application Receiver's Code	GS03	<i>Appendix C(C.7)</i>	592015694 Florida Blue requires submission of the above value in this field for 270 E&B, all others may cause rejection.
E19	Implementation Convention Reference	ST03	62	Must contain 005010X279A1.
E20	999 Functional Acknowledgement	GS08		Florida Blue will return the version of the 270 inbound transactions in the GS08 segment of the 999 functional acknowledgements.

7 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS

Business Requirements

Req #	Loop ID – Segment Description & Element Name	Reference Description	TR3Page(s)	Plan Requirement
B1	2100A – Information Source Name Entity Identifier Code	NM101	69	Florida Blue requires PR in this field.
B2	2100A – Information Source Name Last Name or Organization Name	NM103	70	Florida Blue requires the following in this field. BCBSF

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Florida Blue Health Plan Companion Guide ANSI 270/271 Transaction Type

Req #	Loop ID – Segment Description & Element Name	Reference Description	TR3Page(s)	Plan Requirement
B3	2100A – Information Source Name Identification Code Qualifier	NM108	71	Florida Blue requires PI in this field.
B4	2100A – Information Source Name Information Source Primary Identifier	NM109	71	Florida Blue requires the following in this field. BCBSF
B5	2100B - Information Receiver Name Identification Code Qualifier	NM108	77	Florida Blue requires submission of the XX in NM108.
B6	2100B - Information Receiver Name Information Receiver Identification Number	NM109	78	Florida Blue requires submission of the NPI number in NM109.
Req #	Loop ID – Segment Description & Element Name	Reference Description	TR3Page(s)	Plan Requirement
B7	2100B - Information Receiver Name Reference Identification Qualifier	REF01	79	Florida Blue requests submission of the EO qualifier in REF01
B8	2100B - Information Receiver Name Information Receiver Additional Identifier	REF02	80	Sender ID is required in this field.
B9	2100C – Subscriber Name 2100D – Dependent Name Patient Last Name	NM103	93/152	Florida Blue requires this field and will not allow spaces.

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Florida Blue Health Plan Companion Guide ANSI 270/271 Transaction Type

Req #	Loop ID – Segment Description & Element Name	Reference Description	TR3Page(s)	Plan Requirement
B10	2100C – Subscriber Name 2100D – Dependent Name Patient First Name	NM104	93/152	Required when NM102 = 1 (person) and the person has a first name.
B11	2100C – Subscriber Name Patient ID	NM109	96	Florida Blue requires this field and will not allow spaces.
B12	2100C – Subscriber E & B Inquiry Information As of Date	DTP	123	Default is current date. Date cannot be more than 24 months in the past. Date cannot be more than 12 months in the future. Date must be on or after the date of birth (DOB).
Req #	Loop ID – Segment Description & Element Name	Reference Description	TR3Page(s)	Plan Requirement
B13	2110C – Subscriber E & B Inquiry Information Type of Benefits Requested Benefit / Service Type	EQ	125	Florida Blue requires an EQ loop for either the subscriber or dependent as applicable in order for benefit information to be returned on the 271 response record. Florida Blue will not accept multiple types of benefits. Reference 1.4.7 Implementation- Compliant Use of the 270 / 271 Transaction Set of 5010X279A1 TR3.
B14	2100C – Subscriber Name 2100D – Dependent Name Patient DOB	DMG02	108/165	Florida Blue requires submission of Patient DOB in this field.

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Florida Blue Health Plan Companion Guide ANSI 270/271 Transaction Type

Req #	Loop ID – Segment Description & Element Name	Reference Description	TR3Page(s)	Plan Requirement
B15	2100D – Dependent Name Dependent Relationship	INS	168	Florida Blue accepts the following Code Values: Self 01-Spouse 19-Child 34-Other Adult

Enveloping Information – 271 Response

Req #	Loop ID - Segment Description & Element Name	Reference Description	TR3Page(s)	Plan Requirement
E1	Interchange Control Header	ISA	<i>Appendix B.3 ; C.3</i>	All transactions utilize delimiters from the following list: >, *, ~, ^, , { and : .
E2	Interchange Control Structure	ISA	<i>Appendix B (B.3)</i>	Florida Blue sends Eligibility and Benefit response data using the basic character set as defined in Appendix B of the ASC X12 005010X279A1 TR3. In addition to the basic character set, lower case characters and the special character (@) from the extended character set may be used.
E3	Interchange Control Header Authorization Information Qualifier	ISA01	<i>Appendix C(C.4)</i>	Florida Blue sends “00” in this field.
E4	Interchange Control Header Authorization Information	ISA02	<i>Appendix C(C.4)</i>	Florida Blue sends 10 spaces in this field.
E5	Interchange Control Header Security Information Qualifier	ISA03	<i>Appendix C(C.4)</i>	Florida Blue sends 00 in this field.

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Req #	Loop ID - Segment Description & Element Name	Reference Description	TR3Page(s)	Plan Requirement
E6	Interchange Control Header Security Information	ISA04	<i>Appendix C(C.4)</i>	Florida Blue sends 10 spaces in this field.
E7	Interchange Control Header Interchange ID Qualifier	ISA05	<i>Appendix C(C.4)</i>	Florida Blue sends ZZ in this field.
Req #	Loop ID - Segment Description & Element Name	Reference Description	TR3Page(s)	Plan Requirement
E8	Interchange Control Header Interchange Sender ID	ISA06	<i>Appendix C(C.4)</i>	Florida Blue sends 592015694 in this field.
E9	Interchange Control Header Interchange ID Qualifier	ISA07	<i>Appendix C(C.5)</i>	Florida Blue sends 01 in this field.
E10	Interchange Control Header Interchange Receiver ID	ISA08	<i>Appendix C(C.5)</i>	Florida Blue sends individually assigned Florida Blue sender mailbox number in this field.
E11	Interchange Control Header Repetition Separator	ISA11	<i>Appendix C(C.5)</i>	Florida Blue uses { repetition separator.
E12	Interchange Control Header Acknowledgement Requested	ISA14	<i>Appendix C(C.6)</i>	The TA1 will not be provided by Florida Blue without a code value of 1 in the field
E13	Interchange Control Header Interchange Usage Indicator	ISA15	<i>Appendix C(C.6)</i>	Florida Blue sends P in this field to indicate the data enclosed in this transaction is a production file.
E14	Interchange Control Header Component Element Separator	ISA16	<i>Appendix C(C.6)</i>	Florida Blue uses : (colon) as the delimiter to separate component data elements within a composite data structure.

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Req #	Loop ID - Segment Description & Element Name	Reference Description	TR3Page(s)	Plan Requirement
E15	Interchange Control Header Functional Group Header/Functional Group Trailer	GS - GE ISA - IEA	<i>Appendix C(C.7)</i>	Florida Blue will only process one transaction type per GS-GE (functional group). However, we will process multiple ST's within one (1) GS segment as long as they are all the same transaction type.
Req #	Loop ID - Segment Description & Element Name	Reference Description	TR3Page(s)	Plan Requirement
E16	Functional Group Header Functional Identifier Code	GS01	<i>Appendix C(C.7)</i>	HB – E & B Response Florida Blue sends the above value in this field.
E17	Functional Group Header Application Sender's Code	GS02	<i>Appendix C(C.7)</i>	Florida Blue sends 592015694 in this field.
E18	Functional Group Header Application Receiver's Code	GS03	<i>Appendix C(C.7)</i>	Florida Blue sends Florida Blue assigned Sender Code in this field.
E19	999 Functional Acknowledgement	GS08	<i>Appendix C(C.8)</i>	Florida Blue will return the version of the 271 outbound transactions in the GS08 segment of the 999 functional acknowledgements.
E20	Implementation Convention Reference	ST03	62	Florida Blue sends "005010X279A" in this field.

8 ACKNOWLEDGEMENTS AND/OR REPORTS

The purpose of this section is to outline the Florida Blue processes for handling the initial processing of incoming files and electronic acknowledgment generation.

TA1 Interchange Acknowledgement Transaction

All X12 file submissions are pre-screened upon receipt to determine if the interchange control header (ISA) or interchange control trailer (IEA) segments are readable. If errors are found, a TA1 response transaction will be sent to notify the trading partner that the file could not be processed provided the file contains a code value of 1 in the ISA14. No TA1 response transaction will be sent for error-free files.

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Once Florida Blue determines that the file is readable, validation is performed on the ISA and IEA loop information. If these segments have a non-standard structure, the file will receive a full file reject and the TA1 response transaction will be sent to the trading partner, provided the file contains a code value of 1 in the ISA14.

999 Functional Acknowledgement Transactions

If the file submission passes the ISA/IEA pre-screening above, it is then checked for ASC X12 syntax and HIPAA compliance errors. When the compliance check is complete, a 999 will be sent to the trading partner informing them if the file has been accepted or rejected. If multiple transaction sets (ST-SE) are sent within a functional group (GS-GE), the entire functional group (GS-GE) will be rejected when an ASC X12 or HIPAA compliance error is found.

9 TRADING PARTNER AGREEMENTS

Please contact Availity for your Trading Partner Agreement at 800-282-4548 or availity.com.

10 TRANSACTION SPECIFIC INFORMATION

10.1 ASC X12 Transactions Supported

Florida Blue processes the following ASCX12 HIPAA transactions for Eligibility and Benefit Request

ASC X12 270 ASC X12 005010X279A1	Eligibility and Benefit Inquiry
ASC X12 TA1 v005010X231A1 (HIPAA)	Response to the X12 transactions where errors are encountered in the outer envelopes (ISA/IEA and GS/GE segments)
ASC X12 999 v005010X231A1 (HIPAA)	Functional Acknowledgement

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