

Loop	Segment	Data Element	Legacy MHBP 835 current value	MHBP 835 new value	Comments:
1000A - PAYER IDENTIFICATION					
	BPR07	DFI ID Nbr	Not used	"123456789" Example: BPR*1*54*C*ACH*CCP*01*123456789* DA*1234*1870434318**01*1122334455 *DA*7894*20061115	If the first 3 characters of TRN02 are EFT, this element will have a value reported.
	BPR08	Acct Nbr Qualifier	Not used	"DA"	If the first 3 characters of TRN02 are EFT, this default value will be reported.
	BPR09	Acct Nbr	Not used	numerical ID number assigned by Coventry	If the first 3 characters of TRN02 are EFT, this element will have a value reported.
	BPR10	Originating Company ID	Not used	numerical ID number assigned by Coventry	The value reported is the tax id of the adjudicating Coventry Health Plan it will be reported in the TRN03 or BPR10 data elements.
	BPR11	Originating Company Code	00UV60MLA (Unique ID created per 835 file.)	Not used	
	BPR12	DFI ID Nbr Qualifier	Not used	"01"	
	BPR13	DFI ID Nbr	Not used	numerical ID number assigned by Coventry	
	BPR14	Acct Nbr Qualifier	Not used	"DA"	
	BPR15	Acct Nbr	Not used	numerical ID number assigned by Coventry	
	TRN02	Reference ID	0000291398 (Check Number or EFT Check Number) 0000000000 (Non-Payment Transaction)	214361 (Check Number) EFT3053748 (EFT Check Number) NOPYMNT20061115305006606080 (This will be a unique # starting with "NOPYMNT" if this is a non-payment transaction)	The check number data element is and will continue to be populated, the content will have a different format.
	TRN03	Originating Company ID	1364072377	numerical ID number assigned by Coventry	The value reported is the tax id of the adjudicating Coventry Health Plan it will be reported in the TRN03 or BPR10 data elements.
	TRN04	Reference ID	00UV60MLA (Unique ID created per 835 file.)	Not used	
	DTM01	Date/Time Qualifier	Not used	405	(Production = Use this code for the end date for the adjudication production cycle for claims included in this 835.)
	DTM02	Date	Not used	20061115	
	PER01	Contact Function Code	CX (Payers Claim Office)	Not used	
	PER02	PER02	CUSTOMER SERVICE	Not used	
	PER03	PER03	TE	Not used	
	PER04	PER04	8005463589	Not used	

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	REF01	Reference ID Qualifier	TJ - Federal Tax ID #	TJ - Federal Tax ID # OR PQ - Proprietary provider ID #	Qualifier TJ will be used if the provider has an NPI on file with Coventry. If there is no NPI on file, the PQ qualifier will be used. For groups that have been using the NPI in the 835, the NPI reported back in the 835 was populated from the incoming claim from. Going forward, the 835 NPI will be populated from the Coventry data base. If an NPI is submitted on the claim, but is not on file with Coventry, the 835 will not report an NPI.
	REF02	Reference ID	111223333 (Billing Provider Tax ID)	340714585 (Claim Master Vendor Tax ID) 6179 (Claim Master Vendor IDX Number)	The provider's tax id will be used if the provider has an NPI on file with Coventry. If there is no NPI on file, the Coventry proprietary ID number will be used.
	CLP02	Claim Status Code	1 (PROCESSED AS PRIMARY) 2 (PROCESSED AS SECONDARY) 3 (PROCESSED AS TERTIARY) 4 (DENIED)	1 (PROCESSED AS PRIMARY) 2 (PROCESSED AS SECONDARY) 3 (PROCESSED AS TERTIARY) 4 (DENIED) 19 (PROCESSED AS PRIMARY, FORWARDED TO ADDITIONAL PAYER) 22 (REVERSAL OF PREVIOUS PAYMENT)	
	CLP08	Facility Type Code	Not used	1st two digits of the Type of Bill on a UB Institutional claim	
	CLP09	Claim Frequency Code	Not used	3rd digit of the Type of Bill on a UB Institutional claim	
	CLP11	Diagnoses Related Group (DRG) Code	Not used	DRG code on a UB Institutional claim	
	CLP12	DRG Weight	Not used	(DRG weight on a UB Institutional claim)	
	CAS01	Claim Adjustment Group Code	Not used	"OA" (OTHER ADJUSTMENTS -- Only populated if the claim has an alternate payee payment)	Previously, 835's negated alternate payee claims by using a PLB adjustment with a J1 qualifier and "PAID TO PATIENT" as a reference in the PLB03-2. Going forward the 835's will negate alternate payee claims by using a claim level CAS*OA*100 segment.
	CAS02	Claim Adjustment Reason Code	Not used	"100" (PAYMENT MADE TO PATIENT/INSURED/RESPONSIBLE PARTY -- Only populated if the claim has an alternate payee payment)	
	CAS03	Adjustment Amount	Not used	The dollar amount of the alternate payee payment that was negated	
	NM105	Patient Middle Name	Not used	1st 25 characters of patient middle name	
	NM107	Suffix	Not used	Patient Suffix (JR, SR, III, IV, etc.)	
	NM108	ID Code Qualifier	34 (Social Security Number)	MI (MEMBER ID NUMBER -- This is the Coventry assigned external member number)	Previously the member ID's were Social Security Numbers. Going forward a Coventry assigned member number will be used.
	NM109	ID Code	124543795	85036064101	

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	NM105	Middle Name	Not used	1st 25 characters of subscriber's middle name	this is only populated if the subscriber is not also the patient
	NM107	Suffix	Not used	Subscriber Suffix (JR, SR, III, IV, etc.)	
	NM108	ID Code Qualifier	34	MI (MEMBER ID NUMBER -- This is the Coventry assigned external member number)	Previously the member ID's were Social Security Numbers. Going forward a Coventry assigned member number will be used.
	NM109	ID Code	111223333	85036064101	
	NM101	Entity ID Code	Not used	82	
	NM102	Entity Type Qualifier	Not used	1 (PERSON) 2 (ORGANIZATION)	
	NM103	Last Name/Org Name	Not used	HENSON	
	NM104	First Name	Not used	KEITH	
	NM105	Middle Name	Not used	P	
	NM107	Suffix	Not used	IV	
	NM108	ID Code Qualifier	Not used	FI (Rendering Provider Tax ID) XX (Future NPI)	
	NM109	ID Code	Not used	341518555 (Tax ID) 1234567891 (Future NPI)	
	REF01	Reference ID Qualifier	Not used	1L (Group or Policy Number)	
	REF02	Other Claim Related ID	Not used	305 (Accounts Payable Entity)	
	REF01	Reference ID Qualifier	Not used	CE (Class of Contract -- we use this as Product Type/Name)	
	REF02	Other Claim Related ID	Not used	PPO-PPO (Class of Contract -- we use this as Product Type/Name)	
	REF01	Reference ID Qualifier	Not used	G1 (Prior Authorization Number)	
	REF02	Other Claim Related ID	Not used	1032762 (Prior Authorization Number)	
	REF01	Reference ID Qualifier	Not used	F8 (Original Claim Number)	This is the original claim number in the case of a backout/replacement.
	REF02	Other Claim Related ID	Not used	3106269 (Original Claim Number)	
	REF01	Reference ID Qualifier	Not used	G2 = Provider Commercial Number	If an NPI is on file for the claim vendor, the REF*G2 segment will not be populated, since it does not have an appropriate qualifier for the NPI. However, if the NPI is not file, it will be populated with the Coventry assigned ID number.
	REF02	Rendering Provider Secondary ID	Not used	numerical ID number assigned by Coventry	
	DTM01	Date/Time Qualifier	232 (Claim Statement Period Start) 233 (Claim Statement Period End)	050 (Received)	
	PER01	Contact Function Code	Not used	CX (Payers Claim Office)	EOB Appeals Address/Phone Info
	PER02	Claim Contact Name	Not used	PO Box 7111, LONDON, KY, 40742	
	PER03	Comm. Nbr Qualifier	Not used	TE (Telephone)	

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	PER04	Claim Contact Comm Nbr	Not used	8007555242	
	AMT01	Amount Qualifier Code	Not used	I = Interest	
	AMT02	Monetary Amount	Not used	dollar amount of the interest penalty	
2110 - SERVICE PAYMENT INFORMATION					
	DTM01	Date/Time Qualifier	472 (Service)	150 (Service Period Start) 151 (Service Period End)	Previously, the 835's populated a DTM*472 segment even when the service from/to dates are the same. However, going forward 835's will populate a DTM*150 and DTM*151 even when the service to/from dates are the same.
	CAS01	Claim Adjustment Group Code	CO (Contractual Obligations) PI (Payer Initiated) PR (Patient Responsibility)	CO (Contractual Obligations) CR (Correction and Reversals) OA (Other Adjustment) PR (Patient Responsibility)	Going forward new group codes will be utilized and some will be discontinued.
	REF01	Reference ID Qualifier	Not used	LU (Location Number)	
	REF02	Reference ID	Not used	22 (Location Number)	
	REF01	Reference ID Qualifier	Not used	1S (APG) Number	
	REF02	Reference ID	Not used	261 (APG Number)	
	REF01	Reference ID Qualifier	Not used	1C (Provider Commercial Number) HPI (Health Care Financing Administration National Provider Identifier)	
	REF02	Service Provider ID	Not used	5296 (IDX vendor number) 1234567891 (NPI for IDX vendor)	
	AMT01	Amount Qualifier Code	Not used	B6 (Allowed - Actual)	
	AMT02	Service Supplemental Amount	Not used	157.27	
	LQ01	Code List Qualifier Code	Not used	HE (Claim Payment Remark Codes)	Up to 3 Remark codes may be used.
	LQ02	Remark Code	Not used	N130	
TABLE 3 - SUMMARY					
	PLB01	Reference ID	581091107 (1000B Payer Tax ID Number)	11495 (Master Vendor Coventry assigned Number) 1234567891 (Master Vendor NPI)	

Loop	Segment	Data Element	Legacy MHBP 835 current value	MHBP 835 new value	Comments:
	PLB03-1	Adjustment Reason Code	* CS (Adjustment) * J1 (Non-reimbursable) * IR (Internal Revenue Service Withholding)	72 (Authorized Return) L6 (Interest Owed)	*Previously the CS (adjustment) adjustment reason code was used whenever a claim was adjusted or corrected. Going forward adjustments/corrections will be handled by a backout/replacement process and CAS*CR adjustments. *Previously the J1 (non-reimbursable) adjustment reason code was used to negate an alternate payee payment. Going forward alternate payee payments will be negated using a claim level CAS*OA*100 adjustment. *Previously the IR (IRS withholding) adjustment reason code was used when the IRS requires a mandatory backup withholding from the provider because of unpaid taxes. Going forward IRS withholdings will be shown in a claim level CAS*CO*105 adjustment.
	PLB03-2	Provider Adjustment ID	634313480308 (Original Claim # for adjusted claim) PAID TO PATIENT (Used with J1 qualifier)	3442270 (Authorized Return Claim Number)	The authorized return claim number will be the same claim number used in the CLP07. Coventry can send up to two adjustments per PLB segment. If there are more than two adjustments then a separate PLB adjustment will be created.