



## **DEPARTMENT OF HEALTH & MENTAL HYGIENE**

### **MEDICAL CARE PROGRAM**

#### **COMPANION GUIDE FOR 820 PREMIUM PAYMENT VERSION 005010X218**

**July 28, 2011**

**Version 1.1**

**Payment Order/Remittance Advice - 820**

**Introduction:**

This guide is not to be used as a substitution for the 820 Health Care Premium Payment Implementation Guide. The objective of the document is to clarify what information will be sent by Maryland Medicaid where multiple values exist and/or where specific values need to be identified.

All alpha characters will be in upper case. Data will be in ASCII format. Leading zeros for data elements such as Provider Number, Recipient ID, etc. will not be suppressed.

Gross Adjustments will be identified by using Gross as the First Name, Adjustments as the Last Name, and zeros in the Recipient Number.

This Companion Guide can be found on the State of Maryland Department of Health and Mental Hygiene Web site at: <http://www.dhmf.state.md.us/hipaa/transandcodesets.html>

**Maryland Medicaid Companion Guide - 820 Payment Order/Remittance Advice**

<b>LEGEND:</b>
<i>SHADED rows represent "segments" in the X12N implementation guide</i>
<i>NON-SHADED rows represent "data elements" in the X12N implementation guide</i>

Page #	Loop ID	Reference	Name	Codes	Length	Notes/Comments
C.3		ISA	Interchange Control Header			
C.4		ISA01	Authorization Information Qualifier	00		
C.4		ISA03	Security Information Qualifier	00		
C.4		ISA05	Interchange ID Qualifier	ZZ		
C.4		ISA06	Interchange Sender ID			526002033MCPP - Production 526002033MCPT - Test
C.5		ISA07	Interchange ID Qualifier			Agreed upon during trading partner set-up

Page #	Loop ID	Reference	Name	Codes	Length	Notes/Comments
C.5		ISA08	Interchange Receiver ID			Agreed upon during trading partner set-up
<b>C.7</b>		<b>GS</b>	<b>Functional Group Header</b>			
C.7		GS02	Application Sender's Code			MMISCPF
C.7		GS03	Applications Receiver's Code			Agreed upon during trading partner set-up
C.8		GS08	Version/Release/Industry Identifier Code			005010X218
<b>36</b>		<b>BPR</b>	<b>Financial Information</b>			
37		BPR01	Transaction Handling Code	I	1	
38		BPR03	Credit/Debit Flag Code	C	1	
38		BPR04	Payment Method Code	CHK	3	
42		BPR16	Date			Check issue date
<b>43</b>		<b>TRN</b>	<b>Reassociation Trace Number</b>			
43		TRN01	Trace Type Code	3	1	
44		TRN02	Reference Identification			Remittance Advice Number
<b>48</b>		<b>REF</b>	<b>Premium Receiver's Identification Key</b>			
48		REF01	Reference Identification Qualifier	14	2	
49		REF02	Reference Identification		50	Managed Care Org Trading Partner ID  * The Premium Receivers Identification Key should not exceed 15 bytes.
<b>56</b>	<b>1000A</b>	<b>N1</b>	<b>Premium Receiver's Name</b>			
57		N103	Identification Code Qualifier	FI	2	
57		N104	Identification Code			Managed Care Org Tax- ID

Page #	Loop ID	Reference	Name	Codes	Length	Notes/Comments
64	1000B	N1	Premium Payer's Name			
64		N102	Name			MARYLAND MEDICAL CARE PROGRAM
65		N104	Identification Code		9	526002033
83	2000B	ENT	Individual Remittance			
83		ENT03	Identification Code Qualifier	ZZ	2	
84		ENT04	Identification Code			Recipient Identification Number
107	2100B	NM1	Individual Name			
109		NM108	Identification Code Qualifier	N	1	
109		NM109	Identification Code		11	Recipient Identification Number
112	2300B	RMR	Individual Premium Remittance Detail			
112		RMR01	Reference Identification Qualifier	AZ	2	
113		RMR02	Reference Identification		11	Recipient Identification Number
113		RMR05	Monetary Amount (Billed Premium Amount)			Not Used by Maryland Medicaid