

Adeptia EDI Structure : 5010 837 INSTITUTIONAL CLAIM TRANSACTION SPECIFICATIONS

ADEPTIA	ELEMENT	ELEMENT DESCRIPTION	REQUIRED (USG)	RPT	LOOP RPT
Table 1 - Header					
	ST	TRANSACTION SET HEADER	R	1	
	BHT	BEGINNING OF HIERARCHICAL TRANSACTION	R	1	
Adeptia Def	Loop1_NM1 : IF (NM101 = 41)				
	LOOP ID - 1000A SUBMITTER NAME				1
	NM1	SUBMITTER NAME	R	1	
	PER	SUBMITTER EDI CONTACT INFORMATION	R	2	
Adeptia Def	Loop1_NM1 : IF (NM102 = 40)				
	LOOP ID - 1000B RECEIVER NAME				1
	NM1	RECEIVER NAME	R	1	
Table 2 - Billing Provider Detail					
Adeptia Def	Loop2_HL : IF (HL01 = 1)				
	LOOP ID - 2000A BILLING PROVIDER HIERARCHICAL LEVEL				> 1
	HL	BILLING PROVIDER HIERARCHICAL LEVEL	R	1	
	PRV	BILLING PROVIDER SPECIALTY INFORMATION	S	1	
	CUR	FOREIGN CURRENCY INFORMATION	S	1	
Adeptia Def	Loop3_NM1 : IF (NM101 = 85)				
	LOOP ID - 2010AA BILLING PROVIDER NAME				1
	NM1	BILLING PROVIDER NAME	R	1	
	N3	BILLING PROVIDER ADDRESS	R	1	
	N4	BILLING PROVIDER CITY, STATE, ZIP CODE	R	1	
	REF	BILLING PROVIDER SECONDARY IDENTIFICATION	R	1	
	PER	BILLING PROVIDER CONTACT INFORMATION	S	2	
Adeptia Def	Loop3_NM1 : IF (NM101 = 87)				
	LOOP ID - 2010AB PAY-TO ADDRESS NAME				1

	NM1	PAY -TO ADDRESS NAME	S	1	
	N3	PAY-TO ADDRESS	R	1	
	N4	PAY-TO ADDRESS	R	1	
Adeptia Def	Loop3_NM1 : IF (NM101 = PE OR any custom value used by company)				
	LOOP ID - 2010AC PAY-TO PLAN NAME				1
	NM1	PAY-TO PLAN NAME	S	1	
	N3	PAY -TO PLAN ADDRESS	R	1	
	N4	PAY-TO PLAN CITY, STATE, ZIP CODE	R	1	
	REF	PAY-TO PLAN SECONDARY IDENTIFICATION	S	1	
	REF	PAY-TO PLAN TAX IDENTIFICATION	R	1	
Table 2 - Subscriber Detail					
Adeptia Def	Loop2_HL : IF (HL01 = 2)				
	LOOP ID - 2000B SUBSCRIBER HIERARCHICAL LEVEL				> 1
	HL	SUBSCRIBER HIERARCHICAL LEVEL	R	1	
	SBR	SUBSCRIBER INFORMATION	R	1	
Adeptia Def	Loop3_NM1 : IF(NM101 = IL)				
	LOOP ID - 2010BA SUBSCRIBER NAME				1
	NM1	SUBSCRIBER NAME	R	1	
	N3	SUBSCRIBER ADDRESS	S	1	
	N4	SUBSCRIBER CITY, STATE, ZIP CODE	S	1	
	DMG	SUBSCRIBER DEMOGRAPHIC INFORMATION	S	1	
	REF	SUBSCRIBER SECONDARY IDENTIFICATION	S	1	
	REF	PROPERTY AND CASUALTY CLAIM NUMBER	S	1	
Adeptia Def	Loop3_NM1 : IF (NM101 = PR)				
	LOOP ID - 2010BB PAYER NAME				1
	NM1	PAYER NAME	R	1	
	N3	PAYER ADDRESS	S	1	

	N4	PAYER CITY, STATE, ZIP CODE	S	1	
	REF	PAYER SECONDARY IDENTIFICATION	S	3	
	REF	BILLING PROVIDER SECONDARY IDENTIFICATION	S	1	
Adeptia Def	Loop2_HL : IF(HL01 = 3)				
	LOOP ID - 2000C PATIENT HIERARCHICAL LEVEL				> 1
	HL	PATIENT HIERARCHICAL LEVEL 2000B	R	1	
	PAT	PATIENT INFORMATION	R	1	
Adeptia Def	Loop3_NM1 : IF (NM101 = QC)				
	LOOP ID - 2010C PATIENT NAME				1
	NM1	PATIENT NAME	R	1	
	N3	PATIENT ADDRESS	S	1	
	N4	PATIENT CITY, STATE, ZIP CODE	R	1	
	DMG	PATIENT DEMOGRAPHIC INFORMATION	R	1	
	REF	PROPERTY AND CASUALTY CLAIM NUMBER	S	1	
	REF	PROPERTY AND CASUALTY PATIENT NUMBER	S	1	
Adeptia Def	Loop4_CLM				
	LOOP ID - 2300 CLAIM INFORMATION				100
	CLM	CLAIM INFORMATION	R	1	
	DTP	DISCHARGE HOUR	S	1	
	DTP	STATEMENT DATES	R	1	
	DTP	ADMISSION DATES/HOURS	S	1	
	DTP	DATE - REPRICER RECEIVED DATE	S	1	
	CL1	INSTITUTIONAL CLAIM CODE	R	1	
	PWK	CLAIM SUPPLEMENTAL INFORMATION	S	10	
	CN1	CONTACT INFORMATION	S	1	

	AMT	PATIENT ESTIMATED AMOUNT DUE	S	1	
	REF	SERVICE AUTHORIZATION EXCEPTION CODE	S	1	
	REF	REFERRAL NUMBER	S	1	
	REF	PRIOR AUTHORIZATION	S	1	
	REF	PAYER CLAIM CONTROL NUMBER	S	1	
	REF	REPRICED CLAIM NUMBER	S	1	
	REF	ADJUST REPRICED CLAIM NUMBER	S	1	
	REF	INVESTIGATIONAL DEVICE EXEMPTION NUMBER	S	5	
	REF	CLAIM IDENTIFIER FOR TRANSMISSION INTERMEDIARIES	S	1	
	REF	AUTO ACCIDENT STATE	S	1	
	REF	MEDICAL RECORD NUMBER	S	1	
	REF	DEMONSTRATION PROJECT IDENTIFIER	S	1	
	REF	PEER REVIEW ORGANIZATION (PRO) APPROVAL NUMBER	S	1	
	K3	FILE INFORMATION	S	10	
	NTE	CLAIM NOTE	S	10	
	NTE	BILLING NOTE	S	1	
	CRC	EPSDT REFERRAL	S	1	
	HI	PRINCIPLE DIAGNOSIS	R	1	
	HI	ADMITTING DIAGNOSIS	R	1	
	HI	PATIENT REASON FOR VISIT	S	1	
	HI	EXTERNAL CAUSE OF INJURY	S	1	
	HI	DIAGNOSIS RELATED GROUP (DRG) INFORMATION	S	1	

	HI	OTHER DIAGNOSIS INFORMATION	S	2	
	HI	PRINCIPAL PROCEDURE INFORMATION	S	1	
	HI	OTHER PROCEDURE INFORMATION	S	2	
	HI	OCCURANCE SPAN INFORMATION	S	2	
	HI	OCCURANCE INFORMATION	S	2	
	HI	VALUE INFORMATION	S	2	
	HI	CONDITION INFORMATION	S	2	
	HI	TREATMENT CODE INFORMATION	S	2	
	HCP	CLAIM PRICING/REPRICING INFORMATION	S	1	
Adeptia Def	Loop6_NM1 : IF (NM101 = 71)				
	LOOP ID - 2310A ATTENDING PROVIDER NAME				1
	NM1	ATTENDING PROVIDER NAME	S	1	
	PRV	ATTENDING PROVIDER SPECIALITY INFORMATION	S	1	
	REF	ATTENDING PROVIDER SECONDARY IDENTIFICATION	S	4	
Adeptia Def	Loop6_NM1 : IF (NM101 = 72)				
	LOOP ID - 2310B OPERATING PHYSICIAN NAME				1
	NM1	OTHER OPERATING PHYSICIAN NAME	S	1	
	REF	OTHER OPERATING PHYSICIAN SECONDARY IDENTIFICATION	S	4	
Adeptia Def	Loop6_NM1 : IF (NM101 = ZZ)				
	LOOP ID - 2310C OTHER OPERATING PHYSICIAN NAME				1
	NM1	OPERATING PHYSICIAN NAME	S	1	
	REF	OPERATING PHYSICIAN SECONDARY IDENTIFICATION	S	4	
Adeptia Def	Loop6_NM1 : IF (NM101 = 84)				
	LOOP ID - 2310D RENDERING PROVIDER NAME				1
	NM1	RENDERING PROVIDER NAME	S	1	
	REF	RENDERING PROVIDER SECONDARY IDENTIFICATION	S	4	

Adeptia Def	Loop6_NM1 : IF (NM101 = 77)				
	LOOP ID - 2310E SERVICE FACILITY LOCATION NAME				1
	NM1	SERVICE FACILITY LOCATION NAME	S	1	
	N3	SERVICE FACILITY LOCATION ADDRESS	R	1	
	N4	SERVICE FACILITY LOCATION CITY, STATE, ZIP CODE	R	1	
	REF	SERVICE FACILITY LOCATION SECONDARY IDENTIFICATION	S	3	
Adeptia Def	Loop6_NM1 : IF (NM101 = DN)				
	LOOP ID - 2310F REFERRINGPROVIDER NAME				1
	NM1	REFERRINGPROVIDER NAME	S	1	
	REF	REFERRINGPROVIDER SECONDARY IDENTIFICATION	S	4	
Adeptia Def	Loop7_SBR : IF (SBR01 = P,S)				
	LOOP ID - 2320 OTHER SUBSCRIBER INFORMATION				10
	SBR	OTHER SUBSCRIBER INFORMATION	S	1	
	CAS	CLAIM LEVEL ADJUSTMENT	S	5	
	AMT	COORDINATION OF BENEFITS (COB) PAYER PAID	S	1	
	AMT	REMAINING PATIENT LIABILITY	S	1	
	AMT	COORDINATION OF BENEFITS (COB) TOTAL NON-COVERED AMOUNT	S	1	
	OI	OTHER INSURANCE COVERAGE INFORMATION	R	1	
	MIA	INPATIENT ADJUDICATION INFORMATION	S	1	
	MOA	OUTPATIENT ADJUDICATION INFORMATION	S	1	
Adeptia Def	Loop8_NM1 : IF (NM101 = As per data enumerations mentioned in partner's specifications)				
	LOOP ID - 2330A OTHER SUBSCRIBER NAME				1
	NM1	OTHER SUBSCRIBER NAME	R	1	
	N3	OTHER SUBSCRIBER ADDRESS	S	1	
	N4	OTHER SUBSCRIBER CITY, STATE, ZIP CODE	S	1	
	REF	OTHER SUBSCRIBER SECONDARY IDENTIFICATION	S	2	

Adeptia Def	Loop8_NM1 : IF (NM101 = As per data enumerations mentioned in partner's specifications)				
	LOOP ID - 2330B OTHER PAYER NAME				1
	NM1	OTHER PAYER NAME	R	1	
	N3	OTHER PAYER ADDRESS	S	1	
	N4	OTHER PAYER CITY, STATE, ZIP CODE	S	1	
	DTP	CLAIM CHECK OR REMMITANCE DATE	S	1	
	REF	OTHER PAYER SECONDARY IDENTIFIER	S	2	
	REF	OTHER PAYER PRIOR AUTHORIZATION NUMBER	S	1	
	RF	OTHER PAYER REFERREL NUMBER	S	1	
	REF	OTHER PAYER CLAIM ADJUSTMENT INDICATOR	S	1	
	REF	OTHER PAYER CLAIM CONTROL NUMBER	S	1	
Adeptia Def	Loop8_NM1 : IF (NM101 = As per data enumerations mentioned in partner's specifications)				
	LOOP ID - 2330C OTHER PAYER ATTENDING PROVIDER				1
	NM1	OTHER PAYER ATTENDING PROVIDER	S	1	
	REF	OTHER PAYER ATTENDING PROVIDER SECONDARY IDENTIFICATION	R	4	
Adeptia Def	Loop8_NM1 : IF (NM101 = As per data enumerations mentioned in partner's specifications)				
	LOOP ID - 2330D OTHER PAYER OPERATING PHYSICIAN				1
	NM1	OTHER PAYER OPERATING PHYSICIAN	S	1	
	REF	OTHER PAYER OPERATING PHYSICIAN SECONDARY IDENTIFICATION	R	4	
Adeptia Def	Loop8_NM1 : IF (NM101 = As per data enumerations mentioned in partner's specifications)				
	LOOP ID - 2330E OTHER PAYER OTHER OPERATING PHYSICIAN				1
	NM1	OTHER PAYER OTHER OPERATING PHYSICIAN	S	1	
	REF	OTHER PAYER OTHER OPERATING PHYSICIAN SECONDARY IDENTIFICATION	R	4	
Adeptia Def	Loop8_NM1 : IF (NM101 = As per data enumerations mentioned in partner's specifications)				
	LOOP ID - 2330AF OTHER SUBSCRIBER NAME				1
	NM1	OTHER PAYER SERVICE FACILITY LOCATION	S	1	
	REF	OTHER PAYER SERVICE FACILITY LOCATION SECONDARY IDENTIFICATION	R	3	

Adeptia Def	Loop8_NM1 : IF (NM101 = As per data enumerations mentioned in partner's specifications)				
	LOOP ID - 2330G OTHER SUBSCRIBER NAME				1
	NM1	OTHER PAYER RENDETING PROVIDER NAME	S	1	
	REF	OTHER PAYER SERVICE FACILITY LOCATION SECONDARY IDENTIFICATION	R	4	
Adeptia Def	Loop8_NM1 : IF (NM101 = As per data enumerations mentioned in partner's specifications)				
	LOOP ID - 2330H OTHER SUBSCRIBER NAME				1
	NM1	OTHER REFERRING PROVIDER	S	1	
	REF	OTHER REFERRING PROVIDER SECONDARY IDENTIFICATION	R	3	
Adeptia Def	Loop8_NM1 : IF (NM101 = As per data enumerations mentioned in partner's specifications)				
	LOOP ID - 2330I OTHER SUBSCRIBER NAME				1
	NM1	OTHER BILLING PROVIDER	S	1	
	REF	OTHER REFERRING PROVIDER SECONDARY IDENTIFICATION	R	2	
Adeptia Def	Loop9_LX				
	LOOP ID - 2400 SERVICE LINE NUMBER				999
	LX	SERVICE LINE NUMBER	R	1	
	SV2	INSTITUTIONAL SERVICE LINE	R	1	
	PWK	LINE SUPPLEMENTAL INFORMATION	S	10	
	DTP	DATE - SERVICE DATE	S	1	
	REF	LINE ITEM CONTROL NUMBER	S	1	
	REF	REPRICED LINE ITEM REFERENCE NUMBER	S	1	
	REF	ADJUSTED REPRICED LINE ITEM REFERENCE NUMBER	S	1	
	AMT	SERVICE TAX AMOUNT	S	1	
	AMT	FACILITY TAX AMOUNT	S	1	
	NTE	THIRD PARTY ORGANIZATION NOTES	S	1	
	HCP	LINE PRICING/REPRICING INFORMATION	S	1	
Adeptia Def	Loop10_LIN				
	LOOP ID - 2410 DRUG IDENTIFICATION				1

	LIN	DRUG IDENTIFICATION	S	1	
	CTP	DRUG QUANTITY	R	1	
	REF	PRESCRIPTION OR COMPOUND DRUG ASSOCIATION NUMBER	S	1	
Adeptia Def	Loop11_NM1 : IF (NM101 = 72)				
	LOOP ID - 2420A OPERATING PHYSICIAN NAME				1
	NM1	OPERATING PHYSICIAN NAME	S	1	
	REF	OPERATING PHYSICIAN SECONDARY IDENTIFICATION	S	20	
Adeptia Def	Loop11_NM1 : IF (NM101 = ZZ)				
	LOOP ID - 2420B OPERATING PHYSICIAN NAME				1
	NM1	OTHER OPERATING PHYSICIAN NAME	S	1	
	REF	OTHER OPERATING PHYSICIAN SECONDARY IDENTIFICATION	S	20	
Adeptia Def	Loop11_NM1 : IF (NM101 = 82)				
	LOOP ID - 2420C OPERATING PHYSICIAN NAME				1
	NM1	RENDERING PROVIDER NAME	S	1	
	REF	RENDERING PROVIDER SECONDARY IDENTIFICATION	S	20	
Adeptia Def	Loop11_NM1 : IF (NM101 = DN)				
	LOOP ID - 2420D OPERATING PHYSICIAN NAME				1
	NM1	REFERRING PROVIDER NAME	S	1	
	REF	REFERRING PROVIDER SECONDARY IDENTIFICATION	S	20	
Adeptia Def	Loop12_SVD				
	LOOP ID - 2430 OPERATING PHYSICIAN NAME				1
	SVD	LINE ADJUDICATION INFORMATION	S	1	
	CAS	LINE ADJUSTMENT	S	5	
	DTP	LINE CHECK OR REMITTANCE DATE	R	1	
	AMT	REMAINING PATIENT LIABILITY	S	1	
	SE	TRANSACTION SET TRAILER	R	1	