

BLUECROSS BLUESHIELD OF TENNESSEE, INC. (BCBST)
ANSI 837 PROFESSIONAL EDITS

- 610001 **DUPLICATE TO RECEIPT DATE MM/DD**
The purpose of this edit is to identify duplicate claims that have been submitted and prevent those claims from being routed to the claims area for processing. The duplicate check edit will compare data using the Application Senders Code from the GS segment. The following fields within Loop ID-2000A of the transaction set will also be used: Billing Provider Tax ID, Patient Control Number and Statement Date from the last claim. The total calculated number of claims and the total calculated charges within the transaction set will also be used. Should a duplication of this data be submitted within a 45-day period, claims within the provider Loop ID-2000A will be rejected.
- 620001 **CLAIM FILING INDICATOR INVALID**
Claim Filing Indicator must equal BL, CI, MB, MC, OF or 16.
Claim filing indicator is located in Loop ID-2000B in the SBR segment. If the 1st element in that segment is equal to 'P', then the 9th element in that segment is the claim filing indicator. It should be equal to 'BL', 'CI', 'MB', 'MC', 'OF' or '16'.
- 620002 **SUB ID NOT ON ELIGIBILITY FILE**
BlueCross BlueShield of Tennessee Subscriber Eligibility file does not list this Subscriber Identification (ID).
Subscriber ID is located in Loop ID-2010BA in the NMI segment. If the 1st element in that segment is equal to 'IL' and the 2nd element is equal to '1', then the 9th element in that segment is the subscriber ID. The subscriber ID is not found in the BlueCross BlueShield of Tennessee eligibility database.
- 620003 **SUB ID, PAT NAME, DOB, DO NOT AGREE**
Subscriber Identification (ID), Patient Name, and Date of Birth must match for routing verification.
Subscriber ID is located in Loop ID-2010BA in the NMI segment. If the 1st element in that segment is equal to 'IL' and the 2nd element is equal to '1', then the 9th element in that segment is the subscriber ID.
Patient last name and first name are located in Loop ID-2010CA in the NMI segment. If the 1st element in that segment is equal to 'QC', and the 2nd element is equal to '1', then the 3rd element is the last name, and the 4th element is the first name.
Patient birth date is located in Loop ID-2010CA in the DMG segment. It is the 2nd element in that segment. The subscriber ID, patient last name, patient first name, and patient date of birth submitted on claim must match the BlueCross BlueShield of Tennessee eligibility database.

- 620004 DOS<01/01/02,MAIL TO SIGNATURE HLTH
 Vanderbilt PPO claims with dates of service prior to 01/01/02 should be mailed to Signature Health.
Service date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is service date. The first 8 bytes in the 3rd element are the service from date. Bytes 10 thru 17 in the 3rd element are the service to date. If the insurance group is Vanderbilt PPO, and if the service date is less than 01/01/2002, then the claim should be mailed to Signature Health.
- 620005 FEP SUB ID MUST = R + 8 NUMERIC
 FEP Subscriber ID must equal R plus eight numeric digits.
Subscriber Identification (ID) is located in Loop ID-2010BA in the NMI segment. If the 1st element in that segment is equal to 'IL', and the 2nd element is equal to '1', then the 9th element in that segment is the subscriber ID. For Federal Employees Program (FEP) claims, the subscriber ID should start with the letter R followed by 8 numeric digits.
- 620007 CFI = OF, SUB ID NOT R + 8 NUMERIC
 If Claim Filing Indicator is equal to OF (FEP), the Subscriber ID must be R plus eight numeric digits.
Claim filing indicator is located in Loop ID-2000B in the SBR segment. If the 1st element in that segment is equal to 'P', then the 9th element in that segment is the claim filing indicator. Subscriber ID is located in Loop ID-2010BA in the NMI segment. If the 1st element in that segment is equal to 'IL', and the 2nd element is equal to '1', then the 9th element in that segment is the subscriber ID. If claim filing indicator is equal to 'OF', then the subscriber ID should start with the letter R followed by 8 numeric digits.
- 620009 PATIENT NAME MISSING
 The Patient Name is missing on the claim.
Patient last name and first name are located in Loop ID-2010CA in the NMI segment. If the 1st element in that segment is equal to 'QC', and the 2nd element is equal to '1', then the 3rd element is the last name, and the 4th element is the first name. The patient name is required.
- 620012 CLAIM FILING INDICATOR MISSING
 Claim Filing Indicator is required.
Claim filing indicator is located in Loop ID-2000B in the SBR segment. If the 1st element in that segment is equal to 'P', then the 9th element in that segment is the claim filing indicator. Claim filing indicator is required.
- 620015 HIPAA NONCOMPLIANT CLM NOT ACCEPTED
 Version Code must be HIPAA Compliant '005010X222A1'.

Version / Release / Industry Identifier Code is located in the GS segment. It is the 8th element in that segment. The version code must be '005010X222A1'. This edit is applicable for BlueCare/TennCareSelect and BlueCarePlus claims only.

- 620016 HIPAA NONCOMPLIANT CLM NOT ACCEPTED
Version Code must be HIPAA Compliant '005010X222A1'.
Version / Release / Industry Identifier Code is located in the GS segment. It is the 8th element in that segment. The version code must be '005010X222A1'.
- 620018 CLAIM MUST BE FILED WITH ASC
Claim must be filed with Alternative Service Concepts (ASC).
All charges related to Metro In Line Of Duty expenses must be submitted directly to ASC.
- 620019 GROUP RUN OUT ENDED RETURN TO PROV
Group Run Out has Ended. Subscriber not Found on Eligibility File.
Return claim to the Provider.
*Subscriber Group or Policy Number is located in Loop ID-2000B in the SBR segment. It is the 3rd element in that segment.
Subscriber Primary Identifier (ID) is located in Loop ID-2010BA in the NMI segment. If the 1st element in that segment is equal to 'IL' and the 2nd element is equal to '1', then the 9th element in that segment is the subscriber primary identifier. The subscriber ID is not found on the eligibility file and the group run out has ended.*
- 620021 INVALID SUBSCRIBER PREFIX
Subscriber Primary Identifier (ID) must be a valid Subscriber ID, including Prefix.
Subscriber Primary ID is located in Loop ID-2010BA in the NMI segment. If the 1st element in that segment is equal to 'IL' and the 2nd element is equal to '1', then the 9th element in that segment is the subscriber ID. Subscriber primary ID must be a valid subscriber ID including the three digit prefix. This edit is not applicable to Federal Employees Program claims.
- 630001 SUBMITTER ID NOT ON PPF1 FILE
Submitter Tax Identification (ID) is not a valid Submitter ID found in the Electronic Commerce database.
Submitter Tax ID is located in Loop ID-1000A in the NMI segment. If the 1st element in that segment is equal to '41', then the 9th element in that segment is the Submitter tax ID. The submitter tax ID must be a valid ID found in the Electronic Commerce database.
- 630002 PROVIDER NOT VALID PAPERLESS PROV

BlueCross BlueShield of Tennessee Provider number must be a Valid Provider number in the Electronic Commerce database.

BlueShield provider number is located in Loop ID-2010AA in the REF segment. If the 1st element in that segment is equal to '1B', then the 2nd element in that segment is the BlueShield provider number.

National Provider Identifier (NPI) is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. This provider number or NPI must be valid in the Electronic Commerce database.

630005

MED-B CLMS NOT ACCEPTED X12 FILE

Medicare-B claims are not accepted in X12 file at this time.

Claim filing indicator is located in Loop ID-2000B in the SBR segment. If the 1st element in that segment is equal to 'P', then the 9th element in that segment is the claim filing indicator. Medicare-B claims (CFI=MB), cannot be accepted in an X12 file at this time.

630010

PROV CANNOT SUBMIT BLUESHIELD CLMS

Provider Number not cleared to submit BlueShield claims.

BlueShield provider number is located in Loop ID-2010AA in the REF segment. If the 1st element in that segment is equal to '1B', then the 2nd element in that segment is the BlueShield provider number.

National Provider Identifier is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI.

Claim filing indicator is located in Loop ID-2000B in the SBR segment. If the 1st element in that segment is equal to 'P', then the 9th element in that segment is the claim filing indicator. If the claim filing indicator is equal to 'BL', 'OF', or '16', then the provider number or NPI is validated against the Electronic Commerce database to verify that the provider has been approved for submitting BlueShield claims.

630011

PROV CANNOT SUBMIT TENNCARE CLAIMS

Provider Number is not cleared to submit TennCareSM claims.

BlueShield provider number is located in Loop ID-2010AA in the REF segment. If the 1st element in that segment is equal to '1B', then the 2nd element in that segment is the BlueShield provider number.

National Provider Identifier is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI.

Claim filing indicator is located in Loop ID-2000B in the SBR segment. If the 1st element in that segment is equal to 'P', then the 9th element in that segment is the claim filing indicator. If the claim filing indicator is equal to 'MC', then the provider number or NPI is validated against the Electronic Commerce database to verify that the provider has been approved for submitting TennCareSM claims.

- 630012 CLM LOB NOT ACCEPTED IN X12 FILE.
Claim Line of Business not accepted in X12 file.
Claim filing indicator is located in Loop ID-2000B in the SBR segment. If the 1st element in that segment is equal to 'P', then the 9th element in that segment is the claim filing indicator. Third Party Commercial Claims (CFI=CI), cannot be accepted at this time.
- 630018 PROVIDER CANNOT SUBMIT CLAIMS
Provider number is not cleared to submit claims electronically.
Provider number is located in Loop ID-2010AA in the REF segment. National Provider Identifier is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. This provider number or NPI is validated against the Electronic Commerce database to verify that the provider has been approved for submitting claims electronically.
- 630022 BILLING PROV NPI CHECK DIGIT INVALID
Billing Provider National Provider Identifier (NPI) Invalid.
Billing Provider National Provider Identifier is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Billing provider NPI must be valid.
- 630023 BILLING PROVIDER NPI NOT IN CPS
Billing Provider National Provider Identifier (NPI) is not set up in the CPS Provider number database.
Billing Provider National Provider Identifier is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Employer's Identification Number and Social Security Number for the Billing Provider Secondary Identification are located in Loop ID-2010AA in the REF Segment. If the 1st element in that segment is equal to 'EI', then the 2nd element of that segment is the Employer's Identification Number. If the 1st element in that segment is equal to 'SY', then the 2nd element of that segment is the Social Security Number. Billing provider NPI / Tax ID combination must be valid and in the CPS database.
- 630024 BILL PROV ID/NPI NOT ACTIVE IN CPS
Billing Provider National Provider Identifier (NPI) is inactive in the CPS provider number database.
Billing Provider National Provider Identifier is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Billing provider NPI must be a valid, active NPI in the CPS database.

- 630025 NO PAYABLE NPI WAS SUBMITTED
No Payable National Provider Identifier (NPI) was found in the Billing Provider Loop (2010AA), Claim Level Rendering Provider Loop (2310B), or the Line Level Rendering Provider Loop (2420A).
Billing Provider National Provider Identifier is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI.
Claim Level National Provider Identifier is located in Loop ID-2310B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI.
Line Level National Provider Identifier is located in Loop ID-2420A in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. No Payable NPI was found in the Billing Provider Loop, Claim Level Rendering Provider Loop (2310B), or the Line Level Rendering Provider Loop (2420A).
- 630026 NPI REQUIRED FOR BILLING PROVIDER
National Provider Identifier (NPI) is required for Billing Provider.
Billing Provider National Provider Identifier is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Billing Provider.
- 630027 MULTIPLE RENDERING NPI'S PRESENT
Multiple Rendering National Provider Identifiers (NPI) on claim.
Claim Level Rendering National Provider Identifier is located in Loop ID-2310B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI.
Line Level Rendering National Provider Identifier is located in Loop ID-2420A in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Multiple, different NPIs cannot be present on claim.
- 630029 PROV TYPE/CLM TYPE DO NOT MATCH
Provider Type and Claim Type do not Match.
Billing Provider National Provider Identifier (NPI) is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI.
Claim Level Rendering National Provider Identifier is located in Loop ID-2310B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI.
Line Level Rendering National provider Identifier is located in Loop ID-2420A in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is Institutional provider type and does not match the Professional 837 claim type submitted.

- 630032 INDIVIDUAL NPI/GROUP TAX ID INVALID
Billing Provider National Provider Identifier (NPI) is Individual Number and cannot be submitted with Tax Identification Number of Group.
Billing Provider National Provider Identifier is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI.
Billing Provider Tax ID is located in Loop ID-2010AA in the REF segment. It is the 2nd element in that segment. The Billing provider NPI for an individual cannot be submitted with a billing provider group tax ID.
- 630033 RENDERING PROV NPI REQ FOR BHO SVC
Rendering Provider National Provider Identifier (NPI) is required for Behavioral Health Organization (BHO) Services.
Claim Level National Provider Identifier is located in Loop ID-2310B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI.
Line Level National Provider Identifier is located in Loop ID-2420A in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Rendering Provider NPI is required for BHO services. This edit is applicable to BlueCare/TennCareSelect, BlueCarePlus, and CoverKids claims only.
- 630034 MULTIPLE DOS INVALID CHIRO CLAIM
Multiple Dates of Service cannot be submitted on Chiropractic Claims.
Service Date is located in Loop ID-2400 in the DTP segment. It is the 3rd element in that segment. Multiple service dates cannot be submitted on a claim for Chiropractic services effective with dates of service 10/01/2016 or later. This edit is applicable to BlueCross BlueShield of Tennessee, BlueCard, and Federal Employee Program (FEP) claims.
- 630122 CLM RENDERING NPI CHECK DIGIT INV
Claim Level Rendering National Provider Identifier (NPI) Invalid.
Claim Level Rendering National Provider Identifier is located in Loop ID-2310B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Rendering Provider NPI must be valid.
- 630124 CLM RENDERING NPI NOT ACTIVE IN CPS
Claim Level Rendering National Provider Identifier (NPI) is not set up in the CPS Provider number database.
Claim Level Rendering National Provider Identifier is located in Loop ID-2310B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Rendering Provider NPI must be a valid, active NPI in the CPS database.

- 630126 NPI REQUIRED FOR CLM RENDERING PROV
National Provider Identifier (NPI) is required for Claim Level Rendering Provider.
Claim Level Rendering National Provider Identifier is located in Loop ID-2310B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Claim level Rendering Provider.
- 630127 MRCL PROVIDER TAX ID MISMATCH
Billing Provider Tax Identification (ID) Number does not match the Tax ID of the Medicaid Reclamation Billing Provider Number in the CPS Provider Number database.
*Billing Provider Tax ID is located in Loop ID-2010AA in the REF segment. It is the 2nd element in that segment.
Billing Provider Secondary Identification is located in Loop ID-2010BB in the REF Segment. If the 1st element in that segment is equal to 'G2', then the 2nd element of that segment is the Billing Provider Secondary Identifier. Billing provider Secondary Identifier and Tax ID must be a valid combination in the CPS database.*
- 630222 LINE RENDERING NPI CHECK DIGIT INV
Line Level Rendering National Provider Identifier (NPI) Invalid.
Line Level Rendering National Provider Identifier is located in Loop ID-2420A in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Rendering Provider NPI must be valid.
- 630224 LINE RENDERING NPI NOT ACTIVE CPS
Line Level Rendering National Provider Identifier (NPI) is not set up in the CPS Provider number database.
Line Level Rendering National Provider Identifier is located in Loop ID-2420A in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Rendering Provider NPI must be a valid, active NPI in the CPS database.
- 630226 NPI REQUIRED LINE RENDERING PROV
National Provider Identifier (NPI) is required for Line Level Rendering Provider.
Line Level Rendering National Provider Identifier is located in Loop ID-2420A in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Line level Rendering Provider.
- 630322 CLM REFERRING NPI CHECK DIGIT INV
Claim Level Referring Provider National Provider Identifier (NPI) Invalid.
Claim Level Referring Provider National Provider Identifier is located in

Loop ID-2310A in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Referring Provider NPI must be valid.

- 630324 CLM REFERRING NPI NOT ACTIVE IN CPS
Claim Level Referring Provider National Provider Identifier (NPI) is not set up in the CPS Provider number database.
Claim Level Referring Provider National Provider Identifier is located in Loop ID-2310A in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Referring Provider NPI must be a valid, active NPI in the CPS database.
- 630326 NPI REQUIRED FOR CLM REFERRING PROV
National Provider Identifier (NPI) is required for Claim Level Referring Provider.
Claim Level Referring Provider National Provider Identifier is located in Loop ID-2310A in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Claim level Referring Provider.
- 630422 LN REFERRING NPI CHECK DIGIT INV
Line Level Referring Provider National Provider Identifier (NPI) Invalid.
Line Level Referring Provider National Provider Identifier is located in Loop ID-2420F in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Referring Provider NPI must be valid.
- 630424 LN REFERRING NPI NOT ACTIVE IN CPS
Line Level Referring Provider National Provider Identifier (NPI) is not set up in the CPS Provider number database.
Line Level Referring Provider National Provider Identifier is located in Loop ID-2420F in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Referring Provider NPI must be a valid, active NPI in the CPS database.
- 630426 NPI REQUIRED FOR LN REFERRING PROV
National Provider Identifier (NPI) is required for Line Level Referring Provider.
Line Level Referring Provider National Provider Identifier is located in Loop ID-2420F in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Line level Referring Provider.
- 630526 NPI REQUIRED FOR CLM SERV FACILITY

National Provider Identifier (NPI) is required for Claim Level Servicing Facility Location.

Claim Level Servicing Facility Location National Provider Identifier is located in Loop ID-2310C in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Claim level Servicing Facility Location. This edit is applicable to BlueCare/TennCareSelect, BlueCarePlus, and CoverKids claims only.

- 630622 LN SERV FAC NPI CHECK DIGIT INV
Line Level Service Facility Location National Provider Identifier (NPI) Invalid.
Line Level Service Facility Location National Provider Identifier is located in Loop ID-2420C in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Service Facility Location NPI must be valid.
- 630626 NPI REQUIRED FOR LN SERV FACILITY
National Provider Identifier (NPI) is required for Line Level Service Facility Location.
Line Level Service Facility Location National Provider Identifier is located in Loop ID-2420C in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Line level Service Facility Location.
- 630722 CLM PURCH SERV NPI CHECK DIGIT INV
Claim Level Purchased Service Provider National Provider Identifier (NPI) Invalid.
Claim Level Purchased Service Provider National Provider Identifier is located in Loop ID-2310C in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Purchased Service Provider NPI must be valid.
- 630726 NPI REQUIRED FOR CLM PURCH SERV PROV
National Provider Identifier (NPI) is required for Claim Level Purchased Service Provider.
Claim Level Purchased Service Provider National Provider Identifier is located in Loop ID-2310C in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Claim level Purchased Service Provider.
- 630822 CLM SUPVSNNG NPI CHECK DIGIT INV
Claim Level Supervising Provider National Provider Identifier (NPI) Invalid.
Claim Level Supervising Provider National Provider Identifier is

located in Loop ID-2310D in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Supervising Provider NPI must be valid.

630826 NPI REQUIRED FOR CLM SUPVSNG PROV
National Provider Identifier (NPI) is required for Claim Level Supervising Provider.
Claim Level Supervising Provider National Provider Identifier is located in Loop ID-2310E in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Claim level Supervising Provider.

630922 LN PURCH SERV NPI CHECK DIGIT INV
Line Level Purchased Service Provider National Provider Identifier (NPI) Invalid.
Line Level Purchased Service Provider National Provider Identifier is located in Loop ID-2420B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Purchased Service Provider NPI must be valid.

630926 NPI REQUIRED LINE PURCH SERV PROV
National Provider Identifier (NPI) is required for Line Level Purchased Service Provider .
Line Level Purchased Service Provider National Provider Identifier is located in Loop ID-2420B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Line level Purchased Service Provider.

631922 LN SUPVSNG NPI CHECK DIGIT INVALID
Line Level Supervising Provider National Provider Identifier (NPI) Invalid.
Line Level Supervising Provider National Provider Identifier is located in Loop ID-2420D in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Supervising Provider NPI must be valid.

631924 LN SUPVSNG NPI NOT ACTIVE IN CPS
Line Level Supervising Provider National Provider Identifier (NPI) is not set up in the CPS Provider number database.
Line Level Supervising Provider National Provider Identifier is located in Loop ID-2420D in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Supervising Provider NPI must be a valid, active NPI in the CPS database.

631926 NPI REQUIRED FOR LN SUPVSNG PROV

National Provider Identifier (NPI) is required for Line Level Supervising Provider.

Line Level Supervising Provider National Provider Identifier is located in Loop ID-2420D in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Line level Supervising Provider.

632922

LN ORDERING NPI CHECK DIGIT INV

Line Level Ordering Provider National Provider Identifier (NPI) Invalid.
Line Level Ordering Provider National Provider Identifier is located in Loop ID-2420E in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Ordering Provider NPI must be valid.

632924

LN ORDERING NPI NOT ACTIVE IN CPS

Line Level Ordering Provider National Provider Identifier (NPI) is not set up in the CPS Provider number database.
Line Level Ordering Provider National Provider Identifier is located in Loop ID-2420E in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Ordering Provider NPI must be a valid, active NPI in the CPS database.

632926

NPI REQUIRED FOR LN ORDERING PROV

National Provider Identifier (NPI) is required for Line Level Ordering Provider.
Line Level Ordering Provider National Provider Identifier is located in Loop ID-2420E in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. NPI is required for Line level Ordering Provider.

633924

CLM SUPVSNG NPI NOT ACTIVE IN CPS

Claim Level Supervising Provider National Provider Identifier (NPI) is not set up in the CPS Provider number database.
Claim Level Supervising Provider National Provider Identifier is located in Loop ID-2310D in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Supervising Provider NPI must be a valid, active NPI in the CPS database. This edit is applicable for BlueCare/TennCareSelect, and BlueCarePlus claims only.

635000

ORDERING PHYS NPI REQ / DME CLAIM

Line Level Ordering Physician National Provider Identifier (NPI) is required for BlueCare/TennCareSelect and CoverKids Durable Medical Equipment (DME) claims.
Line Level Ordering Physician NPI is located in Loop ID-2420E in the NM1 segment. It is the 9th element in that segment. Line level Ordering

Physician NPI is required for BlueCare/TennCareSelect and CoverKids DME claims. This edit is applicable to BlueCare/TennCareSelect and CoverKids claims only.

- 635100 CLM REFER PROV NPI NOT ON FILE
Claim Level Referring Provider National Provider Identifier (NPI) is Not On File in the BlueCross BlueShield of Tennessee (BCBST) Provider number database.
Claim Level Referring Provider National Provider Identifier is located in Loop ID-2310A in the NM1 segment. It is the 9th element in that segment. Claim level Referring Provider NPI must be a valid, active NPI in the BCBST database. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.
- 635102 CLM REFER PROV NOT REG W/ TNCARE
Claim Level Referring Provider National Provider Identifier (NPI) must be Registered with TennCare.
Claim Level Referring Provider National Provider Identifier is located in Loop ID-2310A in the NM1 segment. It is the 9th element in that segment. Claim level Referring Provider NPI must be registered with TennCare. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.
- 635103 REFER PROV NOT REG W/ TNCR FOR DOS
Claim Level Referring Provider National Provider Identifier (NPI) must be Registered with TennCare for all Dates of Service on Claim.
*Claim Level Referring Provider National Provider Identifier is located in Loop ID-2310A in the NM1 segment. It is the 9th element in that segment.
Service Date is located in Loop ID-2400 in the DTP segment. It is the 3rd element in that segment. Claim level Referring Provider NPI must be registered with TennCare for all dates of service submitted on the claim. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.*
- 635104 LINE REFER PROV NPI NOT ON FILE
Line Level Referring Provider National Provider Identifier (NPI) is Not On File in the BlueCross BlueShield of Tennessee (BCBST) Provider number database.
Line Level Referring Provider National Provider Identifier is located in Loop ID-2420F in the NM1 segment. It is the 9th element in that segment. Line level Referring Provider NPI must be a valid, active NPI in the BCBST database. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.
- 635106 LN REFER PROV NOT REG W/ TNCARE

Line Level Referring Provider National Provider Identifier (NPI) must be Registered with TennCare.

Line Level Referring Provider National Provider Identifier is located in Loop ID-2420F in the NM1 segment. It is the 9th element in that segment. Line level Referring Provider NPI must be registered with TennCare. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635107

LN REF PROV NOT REG W/ TNCR FOR DOS

Line Level Referring Provider National Provider Identifier (NPI) must be Registered with TennCare for all Dates of Service on Claim.

Line Level Referring Provider National Provider Identifier is located in Loop ID-2420F in the NM1 segment. It is the 9th element in that segment.

Service Date is located in Loop ID-2400 in the DTP segment. It is the 3rd element in that segment. Line level Referring Provider NPI must be registered with TennCare for all dates of service submitted on the claim. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635300

LN PURCH SERV PROV NPI NOT ON FILE

Line Level Purchase Service Provider National Provider Identifier (NPI) is Not On File in the BlueCross BlueShield of Tennessee (BCBST) Provider number database.

Line Level Purchase Service Provider National Provider Identifier is located in Loop ID-2420B in the NM1 segment. It is the 9th element in that segment.

Line level Purchase Service Provider NPI must be a valid, active NPI in The BCBST database. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635302

LN PURCH SERV PROV NOT REG W/TNCARE

Line Level Purchase Service Provider National Provider Identifier (NPI) must be Registered with TennCare.

Line Level Purchase Service Provider National Provider Identifier is located in Loop ID-2420B in the NM1 segment. It is the 9th element in that segment.

Line level Purchase Service Provider NPI must be registered with TennCare. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635303

PUR SV PROV NOT REG W/TNCR FOR DOS

Line Level Purchase Service Provider National Provider Identifier (NPI) must be Registered with TennCare for all Dates of Service on Claim.

Line Level Purchase Service Provider National Provider Identifier is located in Loop ID-2420B in the NMI segment. It is the 9th element in that segment.

Service Date is located in Loop ID-2400 in the DTP segment. It is the 3rd element in that segment. Line level Purchase Service Provider NPI must be registered with TennCare for all dates of service submitted on the claim. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635400

CLM SERV LOCATION NPI NOT ON FILE

Claim Level Service Location National Provider Identifier (NPI) is Not On File in the BlueCross BlueShield of Tennessee (BCBST) Provider number database.

Claim Level Service Location National Provider Identifier is located in Loop ID-2310C in the NMI segment. It is the 9th element in that segment.

Claim level Service Location NPI must be a valid, active NPI in the BCBST database. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635402

CLM SERV LOCATION NOT REG W/TNCARE

Claim Level Service Location National Provider Identifier (NPI) must be Registered with TennCare.

Claim Level Service Location National Provider Identifier is located in Loop ID-2310C in the NMI segment. It is the 9th element in that segment.

Claim level Service Location NPI must be registered with TennCare. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635403

CLM SERV LOC NOT REG W/TNCR FOR DOS

Claim Level Service Location National Provider Identifier (NPI) must be Registered with TennCare for all Dates of Service on Claim.

Claim Service Location National Provider Identifier is located in Loop ID-2310C in the NMI segment. It is the 9th element in that segment.

Service Date is located in Loop ID-2400 in the DTP segment. It is the 3rd element in that segment. Claim level Service Location NPI must be registered with TennCare for all dates of service submitted on the claim. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635404

LINE SERV LOCATION NPI NOT ON FILE

Line Level Service Location National Provider Identifier (NPI) is Not On File in the BlueCross BlueShield of Tennessee (BCBST) Provider number database.

Line Level Service Location National Provider Identifier is located

in Loop ID-2420C in the NMI segment. It is the 9th element in that segment.

Line level Service Location NPI must be a valid, active NPI in the BCBST database. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635406

LN SERV LOCATION NOT REG W/TNCARE

Line Level Service Location National Provider Identifier (NPI) must be Registered with TennCare.

Line Level Service Location National Provider Identifier is located in Loop ID-2420C in the NMI segment. It is the 9th element in that segment.

Line level Service Location NPI must be registered with TennCare. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635407

LN SERV LOC NOT REG W/TNCR FOR DOS

Line Level Service Location National Provider Identifier (NPI) must be Registered with TennCare for all Dates of Service on Claim.

Line Level Service Location National Provider Identifier is located in Loop ID-2420C in the NMI segment. It is the 9th element in that segment. Service Date is located in Loop ID-2400 in the DTP segment. It is the 3rd element in that segment. Line level Service Location NPI must be registered with TennCare for all dates of service submitted on the claim. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635500

ORDERING PHYS NPI NOT ON FILE

Line Level Ordering Physician National Provider Identifier (NPI) is not On File in the BlueCross BlueShield of Tennessee (BCBST) Provider number database.

Line Level Ordering Physician NPI is located in Loop ID-2420E in the NMI segment. It is the 9th element in that segment. Line level Ordering Physician NPI must be a valid, active NPI in the BCBST database. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

635502

ORDER PHYS NOT REG W/ TNCARE

Line Level Ordering Physician National Provider Identifier (NPI) must be Registered with TennCare.

Line Level Ordering Physician National Provider Identifier is located in Loop ID-2420E in the NMI segment. It is the 9th element in that segment. Line level Ordering Physician NPI must be registered with TennCare. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.

- 635503 ORDER PHYS NOT REG W/ TNCR FOR DOS
Line Level Ordering Physician National Provider Identifier (NPI) must be Registered with TennCare for all Dates of Service on Claim.
Line Level Ordering Physician National Provider Identifier is located in Loop ID-2420E in the NMI segment. It is the 9th element in that segment.
Service Date is located in Loop ID-2400 in the DTP segment. It is the 3rd element in that segment. Line level Ordering Physician NPI must be registered with TennCare for all dates of service submitted on the claim. This edit is applicable for BlueCare/TennCareSelect and CoverKids claims only.
- 640002 SUBMITTER ID IS ALL ZEROS OR NINES
Submitter Tax ID must be a valid Submitter Tax ID.
Submitter tax ID is located in Loop ID-1000A in the NMI segment. If the 1st element in that segment is equal to '41', then the 9th element in that segment is the submitter tax ID. The submitter tax ID should not be equal to all zeros or 9's.
- 640003 CREATION DATE > CURRENT DATE
Creation Date must not be a future date.
Creation Date is located in the BHT segment. It is the 4th element in that segment. The creation date cannot be greater than the current date.
- 640004 PROV EIN SSN NPI INVAL/NOT NUMERIC
Provider's Employer Identification Number, Social Security Number and/or National Provider Identifier must be numeric and valid.
Employer's Identification Number, Social Security Number and National Provider Identifier for the Billing Provider are located in Loop ID-2010AA in the NMI Segment. If the 1st element in that segment is equal to '85', then the 9th element in that segment is the Billing Provider Identification code.
If the 8th element in that segment is equal to '24', then the 9th element is the Employer's Identification Number and must be 9 numeric digits.
If the 8th element in that segment is equal to '34', then the 9th element is the Social Security Number and must be 9 numeric digits.
If the 8th element in that segment is equal to 'XX', then the 9th element is the National Provider Identifier and must be 10 numeric digits.
Employer's Identification Number and Social Security Number for the Billing Provider Secondary Identification are located in Loop ID-2010AA in the REF Segment.
If the 1st element in that segment is equal to 'EI', then the 2nd element of that segment is the Employer's Identification Number and must be 9 numeric digits.
If the 1st element in that segment is equal to 'SY', then the 2nd element of that segment is the Social Security Number and must be 9 numeric digits.

Employer's Identification Number, Social Security Number and National Provider Identifier for the Billing Provider Identification Code and the Billing Provider Secondary Reference Identification must be numeric and valid.

- 640005 PROV EIN/SSN IS ALL ZEROS OR NINES
Provider's Employer Identification Number and/or Social Security Number must be a valid Provider EIN or SSN.
*Employer's Identification Number and Social Security Number for the Billing Provider are located in Loop ID-2010AA in the NMI Segment. If the 1st element in that segment is equal to '85', then the 9th element in that segment is the Billing Provider Identification code.
If the 8th element in that segment is equal to '24', then the 9th element is the Employer's Identification Number.
If the 8th element in that segment is equal to '34', then the 9th element is the Social Security Number.
Employer's Identification Number and Social Security Number for the Billing Provider Secondary Identification are located in Loop ID-2010AA in the REF Segment.
If the 1st element in that segment is equal to 'EI', then the 2nd element of that segment is the Employer's Identification Number.
If the 1st element in that segment is equal to 'SY', then the 2nd element of that segment is the Social Security Number.
Employer's Identification Number and/or Social Security Number for the Billing Provider Identification Code and the Billing Provider Secondary Reference Identification must be valid and not equal to all zeros or nines.*
- 640006 PATIENT DOB > CURRENT DATE
Patient Birth Date must not be a future date.
Patient birth date is located in Loop ID-2010CA in the DMG segment. It is the 2nd element in that segment. The patient birth date cannot be greater than current date.
- 640007 PAT DATE OF DEATH > CURRENT DATE
Patient Date of Death must not be a future date.
Patient date of death is located in Loop ID-2000C in the PAT segment. It is the 6th element in that segment. The patient date of death cannot be greater than current date.
- 640010 SUBSCRIBER DOB > CURRENT DATE
Subscriber Birth Date must not be a future date.
Subscriber birth date is located in Loop ID-2010BA in the DMG segment. It is the 2nd element in that segment. The subscriber birth date cannot be greater than the current date.
- 640011 ACCIDENT DATE > CURRENT DATE

Accident Date must not be a future date.

Accident date is located in Loop ID-2300 in the DTP segment. If the 1st element in that segment is equal to '439', then the 3rd element in that segment is the accident date. The accident date cannot be greater than the current date.

640012

ACCIDENT DATE > DATE OF SERVICE

Accident Date must be less than or equal to earliest date of service on the claim.

Accident date is located in Loop ID-2300 in the DTP segment. If the 1st element in that segment is equal to '439', then the 3rd element in that segment is the accident date.

Service Date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The first 8 bytes of the 3rd element are the service from date and bytes 10 thru 17 are the service to date. The accident date should be less than or equal to the earliest service date on the claim.

640013

ACCIDENT STATE INVALID

If Accident State is present, it must be a valid state abbreviation.

Accident state is located in Loop ID-2300 in the CLM segment. It is the 4th sub-element of 11th element. The accident state is validated against a table that contains valid state values.

640014

SIMILAR SYMPTOM DATE > CURRENT DATE

Similar Symptom Date must not be a future date.

Similar symptom date is located in Loop ID-2300 in the DTP segment. If the 1st element in that segment is equal to '438', then the 3rd element in that segment is similar illness or symptom date. The similar illness or symptom date cannot be greater than the current date.

640015

DISABILITY FROM DATE > CURRENT DATE

Disability From Date must not be a future date.

Disability from date is located in Loop ID-2300 in the DTP segment. If the 1st element in that segment is equal to '360', then the 3rd element in that segment is the disability from date. The disability from date cannot be greater than the current date.

640017

ADMISSION DATE > CURRENT DATE

Admission Date must not be a future date.

Admission date is located in Loop ID-2300 in the DTP segment. If the 1st element in that segment is equal to '435', then the 3rd element in that segment is the hospitalization admission date. The hospitalization admission date cannot be greater than the current date.

640018

DISCHARGE DATE > CURRENT DATE

Discharge Date must not be future date.

Discharge date is located in Loop ID-2300 in the DTP segment. If the 1st element in that segment is equal to '096', then the 3rd element in that segment is the hospitalization discharge date. The hospitalization discharge date cannot be greater than the current date.

640019

DIAGNOSIS CODE MUST BE VALID ICD-9

Diagnosis Code must be a valid ICD-9 diagnosis code.

Diagnosis code is located in LoopID-2300 in the HI segment. If the 1st sub-element of the 1st element is equal to 'BK', then the 2nd sub-element of the 1st element is the principal diagnosis code. The principal diagnosis code is validated against the ICD-9 diagnosis code table. If the 1st sub-element of 2nd element is equal to 'BF', then the 2nd sub-element is the diagnosis code. The BF sub-elements may be repeated up through the 8th element. This may be required if needed to report additional diagnosis codes and if the preceding HI data elements have been used to report other diagnosis codes. All diagnosis codes are validated against the ICD-9 diagnosis code table.

640020

LAST SEEN DATE > CURRENT DATE

Last Seen Date must not be a future date.

Last seen date is located in Loop ID-2300 in the DTP segment. If the 1st element in that segment is equal to '304', then the 3rd element in that segment is the last seen date. The last seen date cannot be greater than the current date.

640022

FUTURE SVC FROM DATE INV FOR HCPCS

Service From Date cannot be a future date with this HCPCS.

Service date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The first 8 bytes in the 3rd element are the service from date. The service from date for hcpcs code submitted on claim, cannot be future date.

640025

HCPCS PROCEDURE CODE MISSING

HCPCS must be present and a valid code.

HCPCS procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. The procedure code must be present.

640026

PROCEDURE CODE INVALID

Procedure Code must be a Valid HCPCS or CPT Code.

Procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. The procedure code is validated against the HCPCS or CPT code table.

- 640027 MODIFIER INVALID
If Modifier present, it must be a valid modifier code.
Modifier is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 3rd sub-element is the procedure modifier. The procedure modifier is validated against the modifier table. If used, the 4th, 5th, and 6th sub-elements are additional procedure modifiers. The additional procedure modifiers are validated against the modifier table.
- 640028 HGB/HCT DATE > CURRENT DATE
HGB/HCT Date must not be a future date.
HGB/HCT date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '738', then the 3rd element in that segment is the test performed date. The test performed date cannot be greater than the current date.
- 640029 SERUM CREATINE DATE > CURRENT DATE
Serum Creatine Date must not be a future date.
Serum Creatine date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '739', then the 3rd element in that segment is the test performed date. The test performed date cannot be greater than the current date.
- 640031 INITIAL TREAT DATE > CURRENT DATE
Initial Treatment Date must not be a future date.
Initial treatment date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '454', then the 3rd element in that segment is the initial treatment date. The initial treatment date cannot be greater than the current date.
- 640032 DATE OF LAST XRAY > CURRENT DATE
Date of Last X-ray must not be a future date.
Last x-ray date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '455', then the 3rd element in that segment is the last x-ray date. The last x-ray date cannot be greater than the current date.
- 640033 MANIFESTATION DATE > CURRENT DATE
Manifestation Date must not be a future date.
Manifestation date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '453', then the 3rd element in that segment is the acute manifestation date. The acute manifestation date cannot be greater than the current date.
- 640034 DIAG CD NOT IN EFFECT FOR SVC DT

Diagnosis Code must be in effect for Service Date.

Diagnosis code is located in LoopID-2300 in the HI segment. If the 1st sub-element of the 1st element is equal to 'BK', then the 2nd sub-element of the 1st element is the principal diagnosis code. The principal diagnosis code is validated against the ICD-9 diagnosis code table. If the 1st sub-element of 2nd element is equal to 'BF', then the 2nd sub-element is the diagnosis code. The BF sub-elements may be repeated up through the 8th element. This may be required if needed to report additional diagnosis codes and if the preceding HI data elements have been used to report other diagnosis codes.

Service Date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The first 8 bytes of the 3rd element are the service from date and bytes 10 thru 17 are the service to date. The diagnosis code must be in effect for service date.

640035

PROC CD NOT IN EFFECT FOR SVC DT

Procedure Code must be in effect for Service Date.

Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code.

Service Date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The first 8 bytes of the 3rd element are the service from date and bytes 10 thru 17 are the service to date. The procedure code must be in effect for service date.

640036

MODIFIER NOT IN EFFECT FOR SVC DT

Modifier must be in effect for Service Date.

Modifier is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 3rd sub-element is the procedure modifier 1.

Service Date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The first 8 bytes of the 3rd element are the service from date and bytes 10 thru 17 are the service to date. The modifier must be in effect for service date.

640037

SERVICE FROM DATE IS INVALID

Service From Date must be a valid date.

Service date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The first 8 bytes in the 3rd element are the service from date. The service from date must be a valid date in CCYYMMDD format.

- 640039 **MORE SPECIFIC DIAGNOSIS CD REQUIRED**
Diagnosis Code must be more specific diagnosis code.
Diagnosis code is located in LoopID-2300 in the HI segment. If the 1st sub-element of the 1st element is equal to 'BK', then the 2nd sub-element of the 1st element is the principal diagnosis code. If the 1st sub-element of 2nd element is equal to 'BF', then the 2nd sub-element is the diagnosis code. The BF sub-elements may be repeated up through the 8th element. The diagnosis code must be a more specific diagnosis code.
- 640040 **DIAGNOSIS POINTER MISSING/INVALID**
Diagnosis Pointer must be present and a valid code.
Diagnosis Code pointer is located in Loop ID-2400 in the SVI segment. Sub-elements 1 thru 4 of the 7th element contain the diagnosis code pointer. Diagnosis code pointer must be present and a numeric value from '1' – '8'.
- 640041 **DIAG POINTER PRES, CODE MISSING**
Diagnosis Pointer Present, Diagnosis Code is missing.
*Diagnosis code pointer is located in Loop ID-2400 in the SVI segment. Sub-elements 1 thru 4 of the 7th element contain the diagnosis code pointer.
Diagnosis code is located in Loop ID-2300 in the HI segment. If the 1st sub-element of the 1st element is equal to 'BK' or 'ABK', then the 2nd sub-element is the principal diagnosis code. If the 1st sub-element of the 2nd element is equal to 'BF' or 'ABF', then the 2nd sub-element is the diagnosis code. A corresponding diagnosis code must be present for every diagnosis code pointer present.*
- 640042 **PLACE OF SERVICE INVALID**
Place of Service must be a valid Place of Service code.
Place of service code is located in Loop ID-2300 in the CLM segment. It is the 1st sub-element of the 5th element. The place of service code is validated against the place of service code table.
- 640043 **POS NOT IN EFFECT FOR SERVICE DATE**
Place of Service must be in effect for Service Date.
*Place of service code is located in Loop ID-2300 in the CLM segment. It is the 1st sub-element of the 5th element.
Service date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The place of service code must be in effect for service date.*
- 640044 **FIRST LX NOT EQUAL TO '1'**
First Service Line LX Segment number must be equal to '1'.
Service line number is located in Loop ID-2400 in the LX segment. It

is the 1st element in that segment. The first service line LX segment must be equal to '1'.

- 640045 **LX IS OUT OF SEQUENCE**
Service Line LX Segment Number must be 1 greater than the previously encountered LX Segment Number.
Service line number is located in Loop ID-2400 in the LX segment. It is the 1st element in that segment. The first service line LX segment begins with '1' and is increased by one for each additional service line of the claim.
- 640046 **HIPAA NONCOMPLIANT CLM NOT ACCEPTED**
Version Code must be HIPAA Compliant '004010X098A1'.
Version code is located in the GS segment. It is the 8th element in that Segment. The version code must be '004010X098A1'.
- 640047 **TOTAL CHGS CAN'T BE LESS THAN ZERO**
Total Claim Charge Amount cannot be less than Zero.
Total claim charge amount is located in Loop ID-2300 in the CLM segment. It is the 2nd element in that segment. The total charge amount for the claim cannot be less than zero.
- 640048 **SERVICE FROM YEAR INVALID**
Service From Year must be reasonable year.
Service date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The first 8 bytes in the 3rd element are the service from date. The service from year must be a valid year after 1945.
- 640049 **CLAIM RENDERING NPI NOT = 10 DIGITS**
Claim Level Rendering National Provider Identifier (NPI) exceeds 10 Digits in length.
Claim Level Rendering National Provider Identifier is located in Loop ID-2310B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Rendering Provider NPI must equal 10 digits in length.
- 640050 **LINE RENDERING NPI NOT = 10 DIGITS**
Line Level Rendering National Provider Identifier (NPI) exceeds 10 Digits in length.
Line Level Rendering National Provider Identifier is located in Loop ID-2420A in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Rendering Provider NPI must equal 10 digits in length.
- 640051 **NO ENCOUNTER AGREEMENT IN PLACE**

Encounter Agreement is not in place at this time.

Claim or Encounter Identifier is located in the BHT segment. It is the 6th element in that segment. If the identifier is equal to 'RP', then the transaction is an encounter. Encounter agreement is not in place at this time.

640054

DIAGNOSIS CODE MUST BE VALID ICD-10

Diagnosis Code must be a Valid ICD-10 Diagnosis Code.

Diagnosis code is located in Loop ID-2300 in the HI segment. If the 1st sub-element of the 1st element is equal to 'ABK', then the 2nd sub-element is the principal diagnosis code. The principal diagnosis code is validated against the ICD-10 diagnosis code table. If the 1st sub-element of 2nd element is equal to 'ABF', then the 2nd sub-element is the diagnosis code. The ABF sub-elements may be repeated up through the 12th element. All diagnosis codes are validated against the ICD-10 diagnosis code table.

640055

DIAG CD NOT IN EFFECT FOR SVC DT

Diagnosis Code must be in Effect for Latest Service Date.

Diagnosis code is located in Loop ID-2300 in the HI segment. If the 1st sub-element of the 1st element is equal to 'ABK', then the 2nd sub-element is the principal diagnosis code. The principal diagnosis code is validated against the ICD-10 diagnosis code table. If the 1st sub-element of 2nd element is equal to 'ABF', then the 2nd sub-element is the diagnosis code. The ABF sub-elements may be repeated up through the 12th element. Service Date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The diagnosis code must be in effect for latest service date.

640056

MORE SPECIFIC DIAGNOSIS CD REQUIRED

Diagnosis Code must be more specific diagnosis code.

Diagnosis code is located in Loop ID-2300 in the HI segment. If the 1st sub-element of the 1st element is equal to 'ABK', then the 2nd sub-element is the principal diagnosis code. If the 1st sub-element of 2nd element is equal to 'ABF', then the 2nd sub-element is the diagnosis code. The ABF sub-elements may be repeated up through the 12th element. The diagnosis code must be a more specific diagnosis code.

640059

MCARE XOVER IND < 30 DAYS

Medicare Crossover claim cannot be submitted within 30 days of the Primary Adjudication or Payment date.

Payer Responsibility Sequence Number Code is located in Loop ID-2000B in the SBR segment. It is the 1st element in that segment.

Claim Filing Indicator Code is located in Loop ID-2320 in the SBR segment. It is the 9th element in that segment.

Outpatient Claim Payment Remark Code is located in Loop ID-2320 in the MOA Segment. It is the 3rd through 7th element in that segment.

Adjudication or Payment Date is located in Loop ID-2330B in the DTP segment. It is the 3rd element in that segment. If the Payer Responsibility Sequence Number Code is equal to 'S' or 'T', and the Claim Filing Indicator is equal to 'MA' or 'MB' and the Claim Payment Remark Code is equal to 'MA18' or 'N89', then the Medicare Crossover claim cannot be submitted within 30 days of the Primary Adjudication or Payment date.

640060

TAX ID AND NPI DO NOT MATCH

The Billing Provider Tax Identification (ID) Number does not match the Rendering Provider National Provider Identifier (NPI) set up in the CPS Provider Number database.

Billing Provider Tax ID is located in Loop ID-2010AA in the REF segment. It is the 2nd element in that segment.

Rendering Provider NPI is located in Loop ID-2310B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element is the NPI. The billing provider tax ID and claim level rendering provider NPI combination must be a valid combination in the CPS provider number database.

640061

TAX ID AND NPI DO NOT MATCH

The Billing Provider Tax Identification (ID) Number does not match the Rendering Provider National Provider Identifier (NPI) set up in the CPS Provider Number database.

Billing Provider Tax ID is located in Loop ID-2010AA in the REF segment. It is the 2nd element in that segment.

Rendering Provider NPI is located in Loop ID-2420A in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element is the NPI. The billing provider tax ID and service line level rendering provider NPI combination must be a valid combination in the CPS provider number database.

640062

PICK-UP ZIP CD MISSING AMB CLAIM

Ambulance Pick-Up Location Zip Code is required for Ambulance Claims.

Ambulance Pick-Up Location Zip Code is located in Loop ID-2310E in the N4 segment. It is the 3rd element of that segment. Ambulance pick-up location zip code is required for ambulance claims effective with dates of service beginning 04/19/2015. This edit is not applicable to claims received through the COBA crossover process.

640063

AIR AMBULANCE/FILE TO CORRECT PLAN

Air Ambulance claims must be submitted to the Correct Plan.

Air Ambulance claims must be submitted to the correct plan effective with dates of service beginning 04/19/2015. This edit is not applicable to claims received through the COBA crossover process.

640064

MULTI PICK-UP LOCATIONS AMB CLAIM

Multiple Pick-Up Locations cannot be submitted on Ambulance claim. *Claim Level Ambulance Pick-Up Location Zip Code is located in Loop ID-2310E in the N4 segment. It is the 3rd element of that segment. Line Level Ambulance Pick-Up Location Zip Code is located in Loop ID-2420G in the N4 segment. It is the 3rd element of that segment. Ambulance claim cannot be submitted with multiple pick-up locations. This edit is effective with dates of service beginning 4/19/2015. This edit is not applicable to claims received through the COBA crossover process.*

- 640065 BILL PRV TAXONOMY MISSING AMB CLAIM
Billing Provider Taxonomy Code is required for Ambulance claims. *Billing Provider Taxonomy Code is located in Loop ID-2000A in the PRV segment. It is the 3rd element in that segment. Billing Provider Taxonomy code is required for Ambulance claims.*
- 640067 CLM REND TAXONOMY MISSING AMB CLAIM
Claim Level Rendering Provider Taxonomy Code is required for Ambulance claims. *Claim Level Rendering Provider Taxonomy Code is located in Loop ID-2310B in the PRV segment. It is the 3rd element in that segment. Claim Rendering Provider Taxonomy code is required for Ambulance claims.*
- 640069 LN REND TAXONOMY MISSING AMB CLAIM
Line Level Rendering Provider Taxonomy Code is required for Ambulance claims. *Line Level Rendering Provider Taxonomy Code is located in Loop ID-2420A in the PRV segment. It is the 3rd element in that segment. Line Rendering Provider Taxonomy code is required for Ambulance claims.*
- 640181 ICD9 DIAG NOT ALLOWD AFTER COMPL DT
International Classification of Diseases, Clinical Modification (ICD-9-CM) Diagnosis Codes are not allowed After the Compliance Date. *Diagnosis code is located in Loop ID-2300 in the HI segment. If the 1st sub-element of the 1st element is equal to 'BK', then the 2nd sub-element of the 1st element is the principal diagnosis code. If the 1st sub-element of the 2nd through 12th element is equal to 'BF', then the 2nd sub –element is the diagnosis code. ICD-9 diagnosis codes are not allowed after the compliance date.*
- 650001 TENNCARE ELIGIBILITY NOT FOUND
TennCareSM eligibility could not be found. *Subscriber ID is located in Loop ID-2010BA in the NMI segment. If the 1st element in that segment is equal to 'IL' and the 2nd element is equal to '1', then the 9th element in that segment is the subscriber ID. The subscriber ID is not found in the TennCareSM eligibility database.*

- 650002 SUB FOUND, DOB & NAME DO NOT MATCH
Subscriber Identification number found, Date of Birth and Name do not match TennCareSM eligibility file.
Subscriber ID is located in Loop ID-2010BA in the NMI segment. If the 1st element in that segment is equal to 'IL' and the 2nd element is equal to '1', then the 9th element in that segment is the subscriber ID.
Subscriber Name is located in Loop ID-2010BA in the NMI segment. If the 1st element in that segment is equal to 'IL' and the 2nd element is equal to '1', then the 3rd element is the subscriber last name and the 4th element is the subscriber first name.
Subscriber date of birth is located in Loop ID-2010BA in the DMG segment. It is the 2nd element in that segment.
Subscriber ID found, date of birth and name do not match TennCareSM eligibility file.
- 650004 ANESTH MOD, PROC, UNITS DISAGREE
If Modifier equals Anesthesia Modifier, Procedure Code must equal 00100 – 01995 or 01999 – 02020 and the Unit or Basis for Measurement Code must be minutes (SV103 = MJ).
Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code.
Modifier is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 3rd sub-element is the procedure modifier 1.
Unit or Basis for Measurement code is located in Loop ID-2400 in the SVI segment. It is the 3rd element in that segment. The procedure modifier 1 is validated against the table that contains valid values for anesthesia modifiers. If the procedure modifier 1 is a valid anesthesia modifier, then the procedure code must be a valid anesthesia procedure and equal to '00100' – '01995' or '01999' – '02020' and the Unit or Basis for Measurement Code must be minutes (SV103 = MJ).
- 650006 PROC NOT VALID WITH EMERG TRANS
Procedure Code not valid with emergency transportation codes.
Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. This procedure code is validated against the table that contains valid emergency transportation procedure codes. If the procedure code is located on the table, the claim is an emergency transportation claim and cannot contain any procedure codes that are not emergency transportation codes.
- 650007 MOD 1 MUST BE PRESENT IF ANESTHESIA
If Procedure Code is equal to 00100 - 01995 or 01999 - 02020, Anesthesia Modifier 1 is required.

Modifier is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 3rd sub-element is the procedure modifier 1.

Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. If the procedure code is equal to '00100' - '01995' or '01999' - '02020', then an anesthesia modifier is required.

650008

MOD MUST BE VALID ANESTHESIA MOD

If Procedure Code is equal 00100 - 01995 or 01999 - 02020, modifier 1 must be a valid anesthesia modifier and equal to AA, AD, QK, QX, QY, or QZ.

Modifier is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 3rd sub-element is the procedure modifier 1. The procedure modifier 1 is validated against the table that contains valid anesthesia modifiers.

Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. If procedure code is equal to '00100' - '01995' or '01999' - '02020', then the procedure modifier 1 must be a valid anesthesia modifier and equal to 'AA', 'AD', 'QK', 'QX', 'QY' or 'QZ'.

650009

MODIFIER USED MORE THAN ONCE

If procedure code is equal to 00100-01951, 01954-01966, 01970-01995, or 01999-02020, modifier may not be the same as modifier on any other line item with the same date of service.

Modifier is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 3rd sub-element is the procedure modifier 1.

Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. If the procedure code is equal to '00100-01951', '01954-01966', '01970-01995', or '01999-02020', then the procedure modifier 1 cannot be the same as the procedure modifier 1 on any other anesthesia line item with the same date of service.

650011

ANESTHESIA MINUTES MUST = 0001-9999

If Procedure Code is equal 00100-01995 or 01999-02020, anesthesia minutes must be equal to or greater than 0001 and less than or equal to 9999.

Anesthesia minutes is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC' and the 3rd element is equal to 'MJ', then the 4th element is the anesthesia minutes.

Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the

procedure code. If the procedure code is equal to '00100' - '01995', or '01999' - '02020', then the anesthesia minutes must equal '0001' - '9999'.

- 650012 **MEDICARE EOB REQUIRED – EMER TRANS**
Medicare EOB is required for emergency transportation claim.
Procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. The procedure code is validated against the table that contains valid emergency transportation procedure codes. If the procedure code is found on the table, the claim is an emergency transportation claim. When the subscriber has any effective Medicare A or B coverage, a Medicare EOB is required.
- 650013 **MDCARE EOB REQ –PROC/MOD CVD BY MCB**
Medicare EOB required, procedure / modifier covered by Medicare B.
Procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. This procedure code is validated against the table that contains valid non-emergency transportation procedure codes. If procedure code is found on the table, then the claim is a non-emergency transportation claim.
Modifier is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of 1st element is equal to 'HC', then the 3rd sub-element is the procedure modifier 1. The procedure modifier 1 is validated against the table that contains valid values for non-emergency modifiers. If the procedure modifier 1 is found on the table and the claim is a non-emergency transportation claim, a Medicare EOB is required.
- 650019 **EMER TRANS CLM CANT BE FILED BY CSA**
Emergency Transportation Claim cannot be filed by Community Service Agency (CSA).
Submitter tax ID is located in Loop ID-1000A in the NM1 segment. If the 1st element in that segment is equal to '41', then the 9th element in that segment is the submitter tax ID. The first 9 bytes of the submitter tax ID are validated against the table that contains valid values for the CSA tax IDs.
Procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. The procedure code is validated against the table that contains valid emergency transportation procedure codes. If the procedure code is found on the table, then the claim is an emergency transportation claim, and cannot be filed by the CSA.
- 650021 **PRIOR AUTH # REQ – NON-EMER TRANS**
Prior Authorization Number is required for non-emergency claim.

Prior Authorization number is located in Loop ID-2300 in the REF segment. If the 1st element in that segment is 'G1', then the 2nd element is the prior authorization number.

Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. The procedure code is validated against the table that contains valid non-emergency transportation procedure codes. If the procedure code is found on the table, then the claim is a non-emergency transportation claim and a prior authorization number is required.

650022 SERVICE UNIT COUNT MUST BE > ZERO

Service Unit Count must be greater than zero.

Service unit count is located in Loop ID-2400 in the SVI segment. It is the 4th element in that segment. This service unit count must be greater than zero.

650023 ANESTH PROC CD PRES/MEAS CD NOT MJ

If the Procedure Code is Anesthesia Procedure Code, 00100 - 01995 or 01999 - 02020, then the Basis for Measurement Code must be equal to MJ.

Procedure code is located in LoopID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code.

Basis for measurement code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 3rd element is the basis for measurement code. If the procedure code is equal to '00100' - '01995' or '01999' - '02020', then the basis for measurement code must be equal to 'MJ'.

650026 SEC CLAIM – NO PRIMARY PAYER INFO

Primary Payer Information must be present if claim is Secondary claim.

Payer responsibility sequence number code is located in Loop ID-2000B in the SBR segment. If the 1st element in the segment is equal to 'S' or 'T', then Loop ID-2320 must also be present and the 1st element in the SBR segment must be equal to 'P' or 'S'. Primary payer information must be present on secondary claim.

650028 CLM LEVEL CLM ADJ REASON CODE INV

Claim Level Claim Adjustment Reason Code Invalid.

Claim level claim adjustment reason code is located in Loop ID-2320 in the CAS segment. The 2nd, 5th, 8th, 11th, 14th, and 17th elements contain the claim adjustment reasons. These reason codes are validated against the adjustment reason code table.

650031 CLM ADJUDICATION DATE>CURRENT DATE

Claim Level Adjudication Date must not be a future date.

Claim level other payer claim adjudication date is located in Loop ID-2330B in the DTP segment. If the 1st element in the segment is equal to '573', then the third element is the claim adjudication date. The claim adjudication date must not be greater than current date.

- 650032 **LINE LEVEL CLM ADJ REASON CODE INV**
Line Level Claim Adjustment Reason Code Invalid.
Line level claim adjustment reason code is located in Loop ID-2430 in the CAS segment. The 2nd, 5th, 8th, 11th, 14th, and 17th elements contain the claim adjustment reasons. These reason codes are validated against the adjustment reason code table.
- 650033 **CLM ADJUDICATION DATE>CURRENT DATE**
Line Level Adjudication Date must not be a future date.
Line level other payer claim adjudication date is located in Loop ID-2430 in the DTP segment. If the 1st element in the segment is equal to '573', then the third element is the claim adjudication date. The claim adjudication date must not be greater than current date.
- 650034 **OTHER INS POLICY NUMBER MISSING**
Other Insured's Policy Number is Missing.
Identification code is located in Loop ID-2330A in the NMI segment. It is the 9th element in that segment. Identification code must be present.
- 650036 **SERVICE FROM DATE > CURRENT DATE**
Service From Date must not be a future date.
Service date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The first 8 bytes in the 3rd element are the service from date. The service from date cannot be greater than the current date.
- 650037 **SERVICE TO DATE > CURRENT DATE**
Service To Date must not be a future date.
Service date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. Bytes 10 thru 17 in the 3rd element are the service to date. The service to date cannot be greater than the current date.
- 650052 **PAYER PD AMT MISSING/SECONDARY CLM**
Payer Paid Amount is required if claim is Secondary COB claim.
Payer amount paid is located in Loop ID-2320 in the AMT segment. It is the 2nd element in that segment. Payer paid amount must be present if claim is a secondary COB claim.

- 650055 CLM LEVEL OTHER PAYER PAID MISSING
Claim Level Other Payer Paid Amount is required.
Claim level payer paid amount is located in Loop ID-2320 in the AMT segment. If the first element in that segment is equal to 'D', then the second element in that segment is the payer paid amount. If claim is a secondary claim and another secondary payer has adjudicated the claim, and the 2330B loop contains a DTP segment with the first element equal to '573', then the claim level payer paid amount is required.
- 650056 SERV UNIT COUNT CONTAINS A DECIMAL
Service Unit Count cannot contain a decimal point.
Service Unit Count is located in Loop ID-2400 in the SVI segment. It is the 4th element in that segment. Service unit count cannot contain a decimal point.
- 650057 PROC CD TOO LONG, CHECK DELIMITERS
Procedure Code cannot be longer than five characters.
Procedure Code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. HCPCS procedure code cannot exceed five characters.
- 650058 PLACE OF SERVICE INV TENNCARE CLAIM
Place of Service Code is not accepted on TennCareSM claims.
Place of service code is located in Loop ID-2400 in the SVI segment. It is the 5th element in that segment. The place of service code is not accepted on TennCareSM claims.
- 650059 DIAGNOSIS CD CAN'T BE > 5 POSITIONS
Diagnosis Code cannot exceed 5 positions.
Diagnosis code is located in Loop ID-2300 in the HI segment. If the 1st sub-element of the 1st element is equal to 'BK', then the 2nd sub-element of the 1st element is the principal diagnosis code. If the 1st sub-element of the 2nd element is equal to 'BF', then the 2nd sub-element is the diagnosis code. The BF sub-elements may be repeated up through the 8th element. This may be required if needed to report additional diagnosis codes and if the preceding HI data elements have been used to report other diagnosis codes. The diagnosis code should not be greater than 5 positions.
- 650060 DATE OF SERV < PAT DATE OF BIRTH
Date of Service cannot be less than the Patient Date of Birth.
*Date of service is located in Loop ID-2400 in the DTP segment. If the first element in that segment is equal to '472', then the 3rd element in that segment is the date of service.
Patient date of birth is located in Loop ID-2010CA in the DMG segment. It is the 2nd element in that segment.*

Subscriber date of birth is located in Loop ID-2010BA in the DMG segment. It is the 2nd element in that segment. If the 3rd element of the HL segment in Loop ID-2000B is equal to '22' and the 4th element in that segment is equal to '0', then the subscriber date of birth is the patient date of birth. The date of service cannot be less than the patient date of birth.

650062

MODIFIER 1 MISSING, MOD 2,3,4 PRES

Modifier 1 is required if Modifier 2, 3, or 4 is present.

Modifier is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 3rd, 4th, 5th, and 6th sub-elements are the procedure code modifiers. Modifier 1 is required if modifier 2, 3, or 4 is present.

650063

DUPLICATE MOD PRES SAME LINE ITEM

Modifiers cannot be duplicated on the same Line Item.

Modifier is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 3rd, 4th, 5th, and 6th sub-elements are the procedure code modifiers. Modifiers cannot be duplicated on the same line item.

650064

PROC CODE UNITS > 1 NOT ALLOWED

Procedure Code Units may not be greater than one for specific Procedure Codes.

HCPCS procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code.

Unit count is located in Loop ID-2400 in the SVI segment. If the 3rd element in that segment is equal to 'UN', then the 4th element in that segment is the unit count. The unit count cannot be greater than one for specific procedure codes.

650065

BENEFITS ASSIGNMENT INFO CONFLICT

Benefits Assignment Indicator conflicts with Patient Signature Source Code.

Assignment of benefits indicator is located in Loop ID-2300 in the CLM segment. It is the 8th element in that segment.

Patient signature source code is located in Loop ID-2300 in the CLM segment. It is the 10th element in that segment. Assignment of Benefits indicator 'N' conflicts with Patient Signature Source of 'B' or 'M'.

650066

RELEASE OF INFORMATION CONFLICT

Release of Information Code conflicts with Patient Signature Source Code.

Release of information code is located in Loop ID-2300 in the CLM segment. It is the 9th element in that segment.

Patient signature source code is located in Loop ID-2300 in the CLM segment. It is the 10th element in that segment. Release of information code 'N' conflicts with patient Signature Source 'B' or 'S'.

- 650067 **NDC CODE REQUIRED FOR HIT PROCEDURE**
National Drug Code (NDC) required for Home Infusion Therapy (HIT) drug procedure code.
NDC is located in Loop ID-2410 in the LIN segment. If the 2nd element in that segment is equal to 'N4', then the 3rd element in that segment is the NDC.
HCPCS procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. NDC is required for HIT drug procedure code if the date of service is equal to or greater than 07/01/2005.
- 650068 **NDC MUST BE 11 ALPHA/NUMERIC**
National Drug Code (NDC) must be Eleven Alpha/Numeric.
NDC is located in Loop ID-2410 in the LIN segment. If the 2nd element in that segment is equal to 'N4', then the 3rd element in that segment is the NDC. NDC must be eleven alpha/numeric characters.
- 650069 **CFI 'MC' VALID MEDICAID CLAIMS ONLY**
Claim Filing Indicator MC is valid for Medicaid claims only.
Claim filing indicator is located in Loop ID-2000B in the SBR segment. If the 1st element in that segment is equal to 'P', then the 9th element in that segment is the claim filing indicator. Claim filing indicator 'MC' is valid for Medicaid claims only.
- 650070 **NDC REQ FOR PROV ADM DRUGS**
National Drug Code (NDC) required for Provider administered drugs.
NDC is located in Loop ID-2410 in the LIN segment. If the 2nd element in that segment is equal to 'N4', then the 3rd element in that segment is the NDC.
HCPCS procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code.
Date of service is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the date of service. NDC is required for provider administered drugs if the first character of the procedure code is equal to 'J' and the date of service is equal to or greater than 06/01/2007.
- 650071 **NDC QUAN REQ FOR PROV ADM DRUGS**
National Drug Code (NDC) Quantity required for Provider administered drugs.
NDC Quantity is located in Loop ID-2410 in the CTP segment. It is the 4th element in that segment.

HCPCS procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code.

Date of service is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the date of service. NDC quantity is required for provider administered drugs if the first character of the procedure code is equal to 'J' and the date of service is equal to or greater than 06/01/2007.

650072 NDC QUAN REQ FOR HIT PROCEDURE
National Drug Code (NDC) Quantity required for Home Infusion Therapy (HIT) drug procedure code.
NDC Quantity is located in Loop ID-2410 in the CTP segment. It is the 4th element in that segment.
HCPCS procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. NDC quantity is required for HIT drug procedure code if the date of service is equal to or greater than 07/01/2005.

650073 BILLING PROV ZIP MUST BE 9 DIGITS
Billing Provider Zip Code must be 9 digits for Medicare Advantage to determine the correct payment locality for services paid under Medicare Physician Fee Schedule (MPFS) and anesthesia services.
Billing provider zip code is located in Loop ID-2010AA in the N4 segment. It is the 3rd element in that segment. The billing provider zip code must be 9 digits.

650074 FACILITY ZIP CODE MUST BE 9 DIGITS
Facility Zip Code must be 9 digits for Medicare Advantage to determine the correct payment locality for services paid under Medicare Physician Fee Schedule (MPFS) and anesthesia services.
Facility zip code is located in Loop ID-2310D in the N4 segment. It is the 3rd element in that segment. The facility zip code must be 9 digits.

650075 CLM REFERRING NPI NOT = 10 DIGITS
Claim Level Referring Provider National Provider Identifier (NPI) not equal to 10 Digits in length.
Claim Level Referring Provider National Provider Identifier is located in Loop ID-2310A in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Referring Provider NPI must equal ten digits in length.

650076 CLM PURCH SERV NPI NOT = 10 DIGITS
Claim Purchased Service Provider National Provider Identifier (NPI) must equal 10 Digits in length.

Claim Level Purchased Service Provider National Provider Identifier is located in Loop ID-2310C in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Purchased Service Provider NPI must equal ten digits in length.

650077

CLM SERV FAC NPI NOT = 10 DIGITS

Claim Level Servicing Facility Location National Provider Identifier (NPI) must equal 10 Digits in length.

Claim Level Servicing Facility Location National Provider Identifier is located in Loop ID-2310D in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Servicing Facility Location NPI must equal ten digits in length.

650078

CLM SUPVSNG NPI NOT = 10 DIGITS

Claim Level Supervising Provider National Provider Identifier (NPI) must equal 10 Digits in length.

Claim Level Supervising Provider National Provider Identifier is located in Loop ID-2310E in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Supervising Provider NPI must equal ten digits in length.

650079

LN PURCH SERV NPI NOT = 10 DIGITS

Line Level Purchased Service Provider National Provider Identifier (NPI) must equal 10 digits in length.

Line Level Purchased Service Provider National Provider Identifier is located in Loop ID-2420B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Purchased Service Provider NPI must equal 10 digits in length.

650080

LN SERV FAC NPI NOT = 10 DIGITS

Line Level Service Facility Location National Provider Identifier (NPI) must equal 10 Digits in length.

Line Level Service Facility Location National Provider Identifier is located in Loop ID-2420C in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Service Facility Location NPI must equal ten digits in length.

650081

LN SUPVSNG NPI NOT = 10 DIGITS

Line Level Supervising Provider National Provider Identifier (NPI) must equal 10 Digits in length.

Line Level Supervising Provider National Provider Identifier is located in Loop ID-2420D in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Supervising Provider must equal ten digits in length.

- 650082 LN ORDERING NPI NOT = 10 DIGITS
 Line Level Ordering Provider National Provider Identifier (NPI) must equal 10 Digits in length.
Line Level Ordering Provider National Provider Identifier is located in Loop ID-2420E in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Ordering Provider NPI must equal ten digits in length.
- 650083 LN REFERRING NPI NOT = 10 DIGITS
 Line Level Referring Provider National Provider Identifier (NPI) must equal 10 Digits in length.
Line Level Referring Provider National Provider Identifier is located in Loop ID-2420F in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Referring Provider NPI must equal ten digits in length.
- 650084 UNITS NOT EQUAL DAYS IN DATE SPAN
 Units count must equal the number of days in the Dates of Service Span for procedure codes 99201 - 99499.
Unit Count is located in Loop ID-2400 in the SV1 segment. If the 3rd element in that segment is equal to 'UN', then the 4th element is the unit count.
Service Date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date.
Procedure Code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code.
Procedure Modifier is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of 1st element is equal to 'HC', then the 3rd sub-element is the procedure modifier. Units count must equal the number of days in the dates of service span for procedure codes 99201 – 99499. This edit applies to BlueCare/TennCareSelect and BlueCarePlus claims only and is not applicable if the procedure modifier '25' is present on the line item.
- 650085 NON-EMER TRANS CANT BE FILED BY CSA
 Non-Emergency Transportation Claim cannot be filed by Community Service Agency (CSA) after 09/06/2008.
Submitter tax ID is located in Loop ID-1000A in the NM1 segment. If the 1st element in that segment is equal to '41', then the 9th element in that segment is the submitter tax ID. The first 9 bytes of the submitter tax ID are validated against the table that contains valid values for the CSA tax IDs.

Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. The procedure code is validated against the table that contains valid non-emergency transportation procedure codes. If the procedure code is found on the table, then the claim is a non-emergency transportation claim.

Service date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The first 8 bytes in the 3rd element are the service from date. If the service from date is on or after 09/06/2008, the claim cannot be filed by the CSA.

650086

SEC CLM – CFI & INS TYPE MUST MATCH

The Claim Filing Indicator Code and the Primary Payer Insurance Type Code must match for Medicare Part B, Medicare Conditionally Primary, or Medicare Primary if claim is secondary claim.

Claim filing indicator code is located in Loop ID-2320 in the SBR segment. It is the 9th element in that segment.

Insurance type code is located in Loop ID-2320 in the SBR segment. It is the 5th element in that segment. If the claim filing indicator is equal to 'MB', then the insurance type code must be equal to 'MB', 'MP', or 'CP'.

650089

OTHER PAYER PAID AMOUNT CAN'T BE <0

Other Payer Paid Amount cannot be less than zero.

Payer paid amount is located in Loop-ID 2320 in the AMT segment. If the 1st element in that segment is equal to 'D', then the 2nd element in that segment is the payer paid amount and it cannot be less than zero.

650090

CLM MUST BE FILED WITH EYEMED

Claim must be filed with EyeMed Vision Care.

Member is enrolled in VisionBlue. Routine vision care claims processing is handled by EyeMed Vision Care. Please resubmit claim to EyeMed.

650091

CLAIM LEVEL NTE SEG MISSING/INVALID

Claim Level NTE Segment must be present and valid for BlueCare/TennCareSelect and BlueCarePlus Durable Medical Equipment (DME) claims and BlueCross BlueShield of Tennessee BlueAdvantage claims for DME, Orthotics, Prosthetics, or Supplies.

Claim NTE segment is located in Loop ID-2300.

Note reference code is located in Loop ID-2300 in the NTE segment. It is the 1st element in that segment.

Description is located in Loop ID-2300 in the NTE segment. It is the 2nd element in that segment.

If the claim is a BlueCare/TennCareSelect or BlueCarePlus DME claim or BlueCross BlueShield of Tennessee BlueAdvantage claim for DME,

Orthotics, Prosthetics, or Supplies, then the claim NTE segment must be present with a note reference code of 'PMT'.

Description must contain CC in the first two positions followed by a space and CCYYMMDD claim received date followed by a space and CCYYMMDD claim paid date. If a reject code is applicable, the claim paid date should be followed by a space and a 3 position reject reason code.

650092

CLAIM LEVEL RENDERING NPI REQUIRED

Claim Level Rendering Provider National Provider Identifier (NPI) is required for BlueCare/TennCareSelect and BlueCarePlus Durable Medical Equipment (DME) claims and BlueCross BlueShield of Tennessee BlueAdvantage claims for DME, Orthotics, Prosthetics, or Supplies.

Claim level rendering provider NPI is located in Loop ID-2310B in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level rendering NPI is required for BlueCare/TennCareSelect and BlueCarePlus DME claims and BlueCross BlueShield of Tennessee BlueAdvantage claims for DME, Orthotics, Prosthetics, or Supplies.

650093

LINE LEVEL NTE SEGMENT INVALID

Line Level NTE Segment must be valid for BlueCare/TennCareSelect and BlueCarePlus Durable Medical Equipment (DME) claims and BlueCross BlueShield of Tennessee BlueAdvantage claims for DME, Orthotics, Prosthetics, or Supplies.

Line NTE segment is located in Loop ID-2400.

Note reference code is located in Loop ID-2400 in the NTE segment. It is the 1st element in that segment.

Description is located in Loop ID-2400 in the NTE segment. It is the 2nd element in that segment. If the claim is a BlueCare/TennCareSelect or BlueCarePlus DME claim or BlueCross BlueShield of Tennessee BlueAdvantage claim for DME, Orthotics, Prosthetics, or Supplies, and the line level NTE segment is present, then the note reference code of 'PMT' must be present. Description must contain CC in the first two positions followed by a space and a 3 position reject code, or CC in the first two positions followed by a space, followed by 'PAY', followed by a space and amount due.

650094

TAX ID AND NPI DO NOT MATCH

The Billing Provider Tax Identification (ID) Number does not match the Billing Provider National Provider Identifier (NPI) set up in the CPS Provider Number database.

Billing Provider Tax ID is located in Loop ID-2010AA in the REF segment. It is the 2nd element in that segment.

Billing Provider NPI is located in Loop ID-2010AA in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element is

the NPI. The billing provider tax ID/NPI combination must be a valid combination in the CPS provider number database.

- 650095 MED ADV CLM CANNOT BE SUB BY HMS
Medicare Advantage Claim Cannot be Submitted by Health Management Systems (HMS).
Member is enrolled in Medicare Advantage. Medicare Advantage claims cannot be submitted by HMS.
- 650096 MED-B SUPL CLMS CANT BE SUB BY PCMH
Medicare-B Members are Not Eligible for Patient-Centered Medical Homes (PCMH) at this time.
- 650097 BLUECARD MEMBERS NOT ELIG FOR PCMH
BlueCard Members are Not Eligible for Patient-Centered Medical Homes (PCMH) at this time.
- 650098 ANCILLARY CLM MISSING REQUIRED DATA
Claim Level Referring, Line Level Referring, or Line Level Ordering Provider National Provider Identifier (NPI) is required for Ancillary Claims filing for Independent Clinical Laboratory or Specialty Pharmacy. *Claim level Referring Provider National Provider Identifier is located in Loop ID-2310A in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Line level Referring Provider National Provider Identifier is located in Loop ID-2420F in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in the segment is the NPI. Line level Ordering Provider National Provider Identifier is located in Loop ID-2420E in the NMI segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Claim level Referring, Line level Referring, or Line level Ordering Provider NPI is required for Ancillary claims filing for Independent Clinical Laboratory or Specialty Pharmacy. The effective date for this edit is 10/14/2012. This edit is not applicable to Federal Employee Program (FEP) claims or Medicare Secondary crossover claims submitted through the Coordination of Benefits Contractor (COBC).*
- 650099 ANCILLARY CLM FILE TO CORRECT PLAN
Ancillary Claims filing for Independent Clinical Laboratory or Specialty Pharmacy must be submitted to the correct Plan. *Ancillary Claims filing for Independent Clinical Laboratory or Specialty Pharmacy must be submitted to the correct Plan. The effective date for this edit is 10/14/2012. This edit is not applicable to Federal Employee Program (FEP) claims or Medicare Secondary crossover claims submitted through the Coordination of Benefits Contractor (COBC).*

- 650100 **DIAGNOSIS CD CAN'T BE > 7 POSITIONS**
Diagnosis Code cannot exceed 7 Positions.
Diagnosis code is located in Loop ID-2300 in the HI segment. If the 1st sub-element of the 1st element is equal to 'ABK', then the 2nd sub-element is the principal diagnosis code. If the 1st sub-element of the 2nd element is equal to 'ABF', then the 2nd sub-element is the diagnosis code. The ABF sub-elements may be repeated up through the 12th element. The diagnosis code should not be greater than 7 positions.
- 650101 **FEP CLAIM FILE TO CORRECT PLAN**
Federal Employees Program (FEP) claims must be submitted to the Correct Plan.
FEP claims must be submitted to the correct Plan. This edit is not applicable to Medicare Secondary crossover claims submitted through the Coordination of Benefits Contractor (COBC).
- 650102 **NATIONAL DRUG CODE IS REQUIRED**
National Drug Code (NDC) is required for Drug Procedure Code.
NDC is located in Loop ID-2410 in the LIN segment. If the 2nd element in that segment is equal to 'N4', then the 3rd element in that segment is the NDC.
HCPCS procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code.
Service date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. NDC is required for specific drug procedure codes if the service date is equal to or greater than 01/01/2014. This edit is not applicable to BlueCare/TennCareSelect or BlueCarePlus claims.
- 650103 **NDC MUST BE 11 ALPHA/NUMERIC**
National Drug Code (NDC) must be Eleven Alpha/Numeric.
NDC is located in Loop ID-2410 in the LIN segment. If the 2nd element in that segment is equal to 'N4', then the 3rd element in that segment is the NDC. NDC must be eleven alpha/numeric characters.
- 650104 **NATIONAL DRUG CODE QUANTITY IS REQ**
National Drug Code (NDC) Quantity required for Drug Procedure Code.
NDC Quantity is located in Loop ID-2410 in the CTP segment. It is the 4th element in that segment.
HCPCS procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code.
Service date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that

segment is the service date. NDC quantity is required for specific drug procedure codes if the service date is equal to or greater than 01/01/2014. This edit is not applicable to BlueCare/TennCareSelect or BlueCarePlus claims.

- 650105 **DUPLICATE PROCEDURE CODE NOT ALLOWED**
Duplicate Procedure codes are Not Allowed.
HCPCS code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the HCPCS procedure code.
Procedure Modifier is located in Loop ID-2400 in the SVI segment. It is the 3rd, 4th, 5th, and 6th sub-element of the 1st element. Duplicate procedures codes with the same date of service and charge amount are not allowed. This edit applies to BlueCarePlus claims only.
- 650106 **MODIFIER INVALID FOR HCPCS PROC CD**
Modifier Invalid for Health Care Financing Administration Common Procedural Coding System (HCPCS) Code.
Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. The 3rd, 4th, 5th and 6th sub-elements are the procedure modifiers. The procedure modifier and HCPCS procedure code must be a valid combination. This edit is not applicable for BlueCare/TennCareSelect or CoverKids claims.
- 650107 **MODIFIER INVALID FOR CPT PROC CD**
Modifier Invalid for American Medical Association Current Procedural Terminology (CPT) Code.
Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. The 3rd, 4th, 5th and 6th sub-elements are the procedure modifiers. The procedure modifier and CPT procedure code must be a valid combination. This edit is not applicable for BlueCare/TennCareSelect or CoverKids claims.
- 650108 **HCPCS/MOD NOT IN EFFECT FOR SVC DT**
Health Care Financing Administration Common Procedural Coding System (HCPCS) Code and Modifier Combination must be in effect for service date.
Procedure code is located in Loop ID-2400 in the SVI segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. The 3rd, 4th, 5th and 6th sub-elements are the procedure modifiers.
Service Date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The procedure modifier and HCPCS procedure code combination must be in effect for service date. This edit is not applicable for BlueCare/TennCareSelect or CoverKids claims.

- 650109 CPT/MOD NOT IN EFFECT FOR SVC DT
American Medical Association Current Procedural Terminology (CPT) Code and Modifier Combination must be in Effect for Service Date.
Procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. The 3rd, 4th, 5th and 6th sub-elements are the procedure modifiers.
Service Date is located in Loop ID-2400 in the DTP segment. If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The procedure modifier and CPT procedure code combination must be in effect for service date. This edit is not applicable for BlueCare/TennCareSelect or CoverKids claims.
- 650110 INVALID NDC / PROC CODE COMBINATION
National Drug Code (NDC) and Health Care Financing Administration Common Procedural Coding System (HCPCS) Code must be a Valid Combination and in Effect for Service Date.
NDC is located in Loop ID-2410 in the LIN segment. If the 2nd element in that segment is equal to 'N4', then the 3rd element in that segment is the NDC.
HCPCS procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of the 2nd element is equal to 'HC', then the 2nd sub-element is the procedure code.
Service date is located in Loop ID-2400 in the DTP segment.
If the 1st element in that segment is equal to '472', then the 3rd element in that segment is the service date. The NDC and HCPCS procedure code combination must be valid and in effect for service date. This edit is not applicable to Federal Employees Program claims.
- 650111 DRUG QTY INVALID FOR PROC CODE
Quantity must be valid for Drug Procedure Code.
Quantity / Service Unit count is located in Loop ID-2400 in the SV1 segment. If the 3rd element in that segment is equal to 'UN', then the 4th element in that segment is the service unit count.
HCPCS procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. Quantity / service unit count must be valid for drug procedure code. This edit is not applicable to Federal Employees Program claims.
- 650112 ANCILLARY DME FILE TO CORRECT PLAN
Ancillary Claims filing for Durable Medical Equipment (DME) must be submitted to the correct Plan.
Subscriber City, State, and Zip Code are located in Loop ID-2010BA in the N4 segment.
Patient City, State, and Zip Code are located in Loop ID-2010CA in the

N4 segment.

Claim Service Facility Location City, State and Zip Code are located in Loop ID-2310C in the N4 segment.

Line Service Facility Location City, State and Zip Code are located in Loop ID-2420C in the N4 segment.

Billing Provider City, State, and Zip Code are located in Loop ID-2010AA in the N4 segment.

Place of Service Code is located in Loop ID-2300 in the CLM segment. It is the 1st sub-element of the 5th element.

If place of service is equal to '04', '09', '12', '13', '14', '34', or '55',

Ancillary Claims filing for (DME) must be submitted to the correct Plan.

The effective date for this edit is 10/14/2012. This edit is not applicable to Medicare Secondary crossover claims submitted through the Coordination of Benefits Contractor (COBC).

650113

REFERRING/ORDER NPI REQ - PT/OT/ST

National Provider Identifier (NPI) is required for Referring or Ordering Provider for Physical, Occupational, and Speech Therapy Services.

Claim Level Referring Provider National Provider Identifier is located in Loop ID-2310A in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI.

Line Level Referring Provider National Provider Identifier is located in Loop ID-2420F in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI.

Line Level Ordering Provider National Provider Identifier is located in Loop ID-2420E in the NM1 segment. If the 8th element in that segment is equal to 'XX', then the 9th element in that segment is the NPI. Referring or Ordering provider NPI is required for Physical, Occupational, and Speech Therapy services. If a claim level referring does not exist, then either a referring or ordering will be required on each line item. This edit is applicable to BlueCare/TennCareSelect and CoverKids claims only.

650115

HEARING AID MFR INVOICE REQ EDI CLM

Manufacturer Invoice is Required for Specific Hearing Aid Procedure Codes.

Claim Identification Code is located in Loop ID-2300 in the PWK segment. It is the 6th element in that segment.

Line Identification Code is located in Loop ID-2400 in the PWK segment. It is the 6th element in that segment.

Procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of the 1st element is equal to 'HC', then the 2nd sub-element is the procedure code. Identification code must be present and populated with the Attachment Control Number when specific Hearing Aid procedure codes are submitted on the claim. This edit is applicable to BlueCross BlueShield of Tennessee and BlueCard Professional EDI claims only.

- 650116 **AMB SURG CTR MUST FILE INST CLAIM**
Ambulatory Surgical Center Claim must be filed as an Institutional Claim.
Ambulatory Surgical Center claim may only be submitted as a Professional claim when BlueCross BlueShield of Tennessee is secondary to Medicare. This edit is not applicable to BlueCross BlueShield of Tennessee BlueAdvantage, BlueCard Medicare Advantage, or BlueCarePlus claims.
- 650117 **HEARING AID MFR INVOICE REQ OCR CLM**
Manufacturer Invoice is a Required Attachment for Specific Hearing Aid Procedure Codes.
Paper claims must be submitted with Manufacturer's invoice attached. This edit is applicable to BlueCross BlueShield of Tennessee and BlueCard Professional OCR claims only.
- 650123 **CLAIM MUST BE FILED TO CORRECT PLAN**
Medicaid Reclamation claims must be filed to the correct Plan.
- 650124 **PROC CODE UNITS > 1 NOT ALLOWED**
Procedure Code Units may not be greater than One for Binaural Hearing Aid Procedure Codes.
*HCPCS procedure code is located in Loop ID-2400 in the SV1 segment. If the 1st sub-element of 1st element is equal to 'HC', then the 2nd sub-element is the procedure code.
Quantity / Unit count is located in Loop ID-2400 in the SV1 segment. If the 3rd element in that segment is equal to 'UN', then the 4th element in that segment is the unit count. The unit count cannot be greater than one for Binaural Hearing Aid procedure codes. This edit is applicable to BlueCross BlueShield of TN, BlueCard, and BlueCard Medicare Advantage claims only.*