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# Program Memorandum

## Carriers

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Department of Health and  
Human Services (DHHS)  
HEALTH CARE FINANCING  
ADMINISTRATION (HCFA)

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Transmittal B-00-68

Date: NOVEMBER 30, 2000

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### CHANGE REQUEST 1417

**SUBJECT: X12N Professional Flat File**

This Program Memorandum (PM) provides carriers, Durable Medicare Equipment Regional Carriers (DMERCs), and their standard systems a final flat file to use to map the inbound X12N 837 version 4010.

This flat file was originally based on the National Standard Format, but has been redesigned as an X12N-based flat file. This flat file was developed by the electronic data interchange (EDI) Federal Workgroup (EDI FWG). The EDI FWG consists of members from HCFA, Part B contractors, and standard system maintainers. An X12N-based flat file will also facilitate implementation of the other X12N transaction standards adopted under HIPAA. It will allow a one to one correlation between the flat file and the data received, eliminating omissions of data needed for a compliant outbound X12N 837 coordination of benefits (COB) transaction.

EDI submitters may send an inbound X12N 837 transaction that contains all data possible, and you must be able to accept it at your front end; however, you do not have to process non-Medicare information. You must retain the original inbound X12N 837 data in order to transmit a fully HIPAA-compliant outbound X12N 837 COB to your COB trading partners. This data must be stored in a repository file built by your standard system prior to entering your standard system's main processing system. The data in the repository file must be retrieved at the back end, along with data required for Medicare, to build a HIPAA-compliant outbound X12N 837 COB transaction. The X12N flat file accommodates COB data. In addition, your direct data entry (DDE) screens must also be modified to collect all data possible. The X12N format and data content requirements pertain to the DDE output if it is held outside your system and transmitted later.

If the DDE output is entered directly into your system, only the data content requirements of the standard must be met.

You are to continue your current practice for obtaining translation software. Your translators are to validate the syntax compliance for the X12N 837 standard. Compliance validation of the translated X12N 837 is to be performed at the EDI second level edits. At the second level edits validation must occur at the implementation level validating compliance such as, required loops and segments, appropriate segments within a loop, valid calendar dates, qualifiers, etc.

The X12N-based flat file is in an Excel spread sheet format. You are to download this from the following website: [www.hcfa.gov/medicare/edi/hipaadoc.htm](http://www.hcfa.gov/medicare/edi/hipaadoc.htm).

The file name is 4010flat.xls. Attached is a description of the columns on the spreadsheet.

You will be notified in a forthcoming PM regarding the requirements for the X12N 835 and outbound X12N 837 COB and the dates your standard systems are to make the necessary programming changes, complete internal testing, and have their release delivered to their Beta test site. You will also be notified when to begin testing and monitoring all of the HIPAA transactions.

**The *effective date* for this PM is November 20, 2000.**

**The *implementation date* for this PM is April 1, 2001.**

**Carriers will be provided funding for retesting their EDI submitters and trading partners through the regular budget process.**

**DMERCs and their shared systems will be provided funding for implementation and testing the X12N 837 standard through the regular budget process.**

**This PM may be discarded after November 20, 2001.**

**Contact person is Joy Glass, 410-786-6125 or e-mail [jglass@hcfa.gov](mailto:jglass@hcfa.gov).**

**Attachment**

**FLAT FILE**: The following information supplements the X12 Flat File Spreadsheet:

<b>Column</b>	<b>Description</b>
<b>837 Version 4010</b>	
Element Identifier	ASC X12 837 Professional X098 Implementation Guide (IG) segment and data element number
Description	Industry name for data element in the IG
ID	Data type indicator from element attributes in the IG (See Appendix A, page 5 in IG for additional information)
Min. Max.	The first line of each segment that is bolded will contain maximum number of repeats for that segment. Otherwise, the column represents the minimum and maximum field lengths for the data element in the IG
Usage Req.	Data element or segment usage requirement in the IG R = required S = situational N/U = not used (See Appendix A – page 8, - section A.1.3.8 for additional information)
Loop	Loops or groups of semantically related segments (See Appendix A – page 11 – section A.1.3.11.4)
Loop Repeat	The maximum number of times the loop is allowed to repeat in the transaction
Values	Valid values per IG to be reported in the data elements
X12 Page No.	IG page reference
<b>X12 Flat file</b>	* = elements combine to make record id
Loop Id*	Loop or group of semantically related segments (See Appendix A – page 11 – section A.1.3.11.4) 6 positions When no loop id exists or the loop is less than 6 positions, then space fill and left justify
Loop Seq.*	The repeat occurrence number for the loop 4 positions Right justify, zero fill
Segment Id*	Segment of semantically related elements 4 positions Left justify, space filled
Segment Seq. *	The repeat occurrence number for the segment within the loop. 4 positions Right justify, zero fill
Start	The starting position within the record
Length	Field length
Record Repeat	The maximum number of times the segment is allowed to repeat within the loop. Defined at segment level only, data elements will be blank
<b>NSF</b>	Reference to corresponding NSF record and fields