

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
1	F		ISA ISA06, ISA08, ISA09, ISA10, ISA13	Interchange Control Number	Combination of ISA06 Interchange Sender ID + ISA08 Interchange Receiver ID +ISA09 Interchange Date +ISA10 Interchange Time +ISA13 Interchange Control Number should not be reused.	999	If combination of ISA06 Interchange Sender ID + ISA08 Interchange Receiver ID +ISA09 Interchange Date +ISA10 Interchange Time +ISA13 Interchange Control Number exists in WCIS database then TA1 error	025	Duplicate Interchange Control Number	R	1
2	F	0532	BHT03	Originator Transaction Identification Number	Required element in Required segment	999	If DN0532 Originator Transaction Identification Number is null then error	1	Required Data Element Missing	R	2
					A combination of DN0532 Originator Transaction Identification Number, DN0100 Date Transmission Sent, DN0101 Time Transmission Sent, DN098 Sender ID, ISA015 Test Indicator should be unique. If this combination is not unique i.e. exists in the WCIS database the transaction will be rejected. A TR will be sent in the OTI segment of the 824.	824	If DN0532 Originator Transaction Identification Number + DN0100 Date Transmission Sent + DN0101 Time Transmission Sent + DN098 Sender ID + ISA015 Test Indicator exists in WCIS database then error.	057	Duplicate Batch	TR	3
3	F	0100	BHT04	Date Transmission Sent	Required element in Required segment	999	If DN0100 Date Transmission Sent is null then error	1	Required Data Element Missing	R	4
	F	0101	BHT05	Time Transmission Sent	Required element in Required segment	999	If DN0101 Time Transmission Sent is null then error	1	Required Data Element Missing	R	5
4	F	0098	NM1*41 NM109	Sender Id	Required element in Required segment	999	If DN0098 Sender Id is null then error	1	Required Data Element Missing	R	6
					Sender ID in ISA06 must match Sender id in NM109	824	If Sender ID in ISA06 (WCIS headers table) <> DN098 SENDER_ID then error	111	Must be a valid content	TR	7
5	F	0099	NM1*40 NM109	Receiver Id	Required element in Required segment	999	If DN0099 Receiver Id is null then error	1	Required Data Element Missing	R	8
					Receiver ID in ISA08 must match Receiver ID in NM109	824	If Sender ID in ISA08 (WCIS headers table) <> DN099 RECEIVER_ID then error	111	Must be a valid content	TR	9
6	M	0615	DTP*582 DTP03	Reporting Period	Required element in Required segment	999	If DN0615 Reporting Period is null then error.	1	Required Data Element Missing	R	10
					If DN0508 is not null and not a valid date or valid date range then error	999	8	Invalid Date	R	11	
					If DN0615 Reporting Period (FROM) is shorter than 8 digits, then error	999	4	Data element too short	R	12	
					If DN0615 Reporting Period (FROM) is longer than 8 digits, then error	999	5	Data element too long	R	13	
					If DN0615 Reporting Period (TO) is shorter than 8 digits, then error	999	4	Data element too short	R	14	
If DN0615 Reporting Period (TO) is longer than 8 digits, then error	999	5	Data element too long	R	15						
8	M	0007	NM1*CA NM103	INSURER NAME	Required element in Required segment	999	If DN0007 INSURER NAME is null then error	1	Required Data Element Missing	R	18
9	M	0006	NM1*CA NM109	INSURER FEIN	Required element in Required segment	999	If DN0006 INSURER FEIN is null then error	1	Required Data Element Missing	R	19
					If DN0006 INSURER FEIN is not all digits then error	999	6	Invalid character in data element	R	20	
					If DN0006 INSURER FEIN is < 9 then error	999	4	Data element too short	R	21	
					If DN0006 INSURER FEIN is > 9 then error	999	5	Data element too long	R	22	
					If combination of DN0006 INSURER FEIN + DN0015 CLAIM ADMINISTRATOR CLAIM NUMBER + DN0005 JURISDICTION CLAIM NUMBER does not exist in FROI database then error.	824	RED01 will contain message: DN15+DN5+DN6 = <Value in DN0015>+<Value in DN0005>+<Value in DN0006> RED06 will contain 0006	039	No match on database	IR	23
If all digits in DN0006 INSURER FEIN are same then error	824	040	All digits cannot be the same	IR	24						
					Required element in Required segment	999	If DN0616 INSURER POSTAL CODE is null then error	1	Required Data Element Missing	R	25

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
10	M	0616	N4*CA N403	INSURER POSTAL CODE		824	If DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and DN0616 INSURER POSTAL CODE is not null and not exist in WCIS Postal code lookup table then error.	058	Code ID invalid.	IR	26
11	MC	0188	NM1*CX NM103	CLAIM ADMINISTRATOR NAME	Required element in Situational segment Required when NM101 equals "CX".	999	If segment is used and NM101 98 = 'CX' and DN0188 CLAIM ADMINISTRATOR NAME is null then error	1	Required Data Element Missing	R	27
						824	If DN0188 CLAIM ADMINISTRATOR NAME is null then error	001	Mandatory data element missing	IR	28
12	M	0187	NM1*CX NM109	CLAIM ADMINISTRATOR FEIN	Required element in Situational segment Required when DN0188 Claim Administrator Name is reported. Required when the Claim Administrator is a different entity than the insurer or self-insured reported in Loop 2010AA/NM103/DN0007.	999	If segment is used and NM101 98 = 'CX' and DN0187 CLAIM ADMINISTRATOR FEIN is null then error	1	Required Data Element Missing	R	29
						999	If DN0187 CLAIM ADMINISTRATOR FEIN is not all digits then error	6	Invalid Character In Data Element	R	30
						999	If DN0187 CLAIM ADMINISTRATOR FEIN is < 9 then error	4	Data element too short	R	31
						999	If DN0187 CLAIM ADMINISTRATOR FEIN is > 9 then error	5	Data element too long	R	32
						824	If DN0187 CLAIM ADMINISTRATOR FEIN is null then error	001	Mandatory data element missing	IR	33
						824	If all digits in DN0187 CLAIM ADMINISTRATOR FEIN are same then error	040	All digits cannot be the same	IR	34
13	MC	0014	N403	CLAIM ADMINISTRATOR MAILING POSTAL CODE	Required element in Situational segment Required when DN0188 Claim Administrator Name is reported. Required when Claim Administrator information is reported in Loop 2010AA .	999	If segment is used and DN0014 CLAIM ADMINISTRATOR MAILING POSTAL CODE is null then error	1	Required Data Element Missing	R	35
						824	If DN0188 CLAIM ADMINISTRATOR NAME is not null and DN0014 CLAIM ADMINISTRATOR MAILING POSTAL CODE is null then error	001	Mandatory data element missing	IR	36
						824	If DN0014 CLAIM ADMINISTRATOR MAILING POSTAL CODE does not exist in code table then error	058	Code ID invalid.	IR	37
14	M	0016	NM1*36 NM109	EMPLOYER FEIN	Required element in Required segment	999	If DN0016 EMPLOYER FEIN is null then error	1	Required Data Element Missing	R	38
						999	If DN0016 EMPLOYER FEIN is not all digits then error	6	Invalid Character In Data Element	R	39
						999	If DN0016 EMPLOYER FEIN is > 9 then error	5	Data element too long	R	40
						999	If DN0016 EMPLOYER FEIN is < 9 then error	4	Data element too short	R	41
						824	If all digits in DN0016 EMPLOYER FEIN are same then error	040	All digits cannot be the same	IR	42
15	M	0018	NM1*36 NM103	EMPLOYER NAME	Required element in Required segment	999	If DN0018 EMPLOYER NAME is null then error	1	Required Data Element Missing	R	43
16	F	0031	DTP*558 DTP03	DATE OF INJURY	Required element in Required segment	999	If DN0031 DATE OF INJURY is null then error	1	Required Data Element Missing	R	44
						999	If DN0031 DATE OF INJURY format not CCYYMMDD then error	8	Invalid Date	R	45
						824	If DN0031 DATE OF INJURY > sysdate date then error	041	Must be <= current date	IR	46
17	M	0042	NM1*CC NM109	EMPLOYEE SSN	Required element in Required segment Use Default value of '000000006' if not available	999	If DN0042 EMPLOYEE SSN is null then error Use Default value of '000000006' if not available	1	Required Data Element Missing	R	47
						999	If DN0042 EMPLOYEE SSN is < 9 then error	4	Data element too short	R	48
						999	If DN0042 EMPLOYEE SSN is > 9 then error	5	Data element too long	R	49
						999	If DN0042 EMPLOYEE SSN is not all digits then error	6	Invalid Character In Data Element	R	50
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and all digits of DN0042 EMPLOYEE SSN are same then error	040	All digits cannot be the same	IR	51

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
18	M	0043	NM1*CC NM103	EMPLOYEE LAST NAME	Required element in Required segment	999	IF DN0043 EMPLOYEE LAST NAME is null then error	1	Required Data Element Missing	R	52
19	M	0044	NM1*CC NM104	EMPLOYEE FIRST NAME	Required element in Required segment	999	IF DN0043 EMPLOYEE LAST NAME is not null and DN0044 EMPLOYEE FIRST NAME is null then error	1	Required Data Element Missing	R	53
20	AA	0045	NM105	EMPLOYEE MIDDLE NAME/INITIAL	Situational element in Required segment	999	No validation				54
21	M	0048	N401	EMPLOYEE MAILING CITY	Required element in Situational segment Reporting DN0048 EMPLOYEE MAILING CITY is voluntary	999	If segment is used and DN0048 EMPLOYEE MAILING CITY is null then error	1	Required Data Element Missing	R	55
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0048 EMPLOYEE MAILING CITY is null then error	001	Mandatory field not present	IR	56
22	M	0050	N403	EMPLOYEE MAILING POSTAL CODE	Required element in Situational segment  MUST BE VALID POSTAL CODE Reporting DN0050 EMPLOYEE MAILING POSTAL CODE is voluntary	999	If segment is used and DN0048 EMPLOYEE MAILING POSTAL CODE is null then error	1	Required Data Element Missing	R	57
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0050 EMPLOYEE MAILING POSTAL CODE is null then error	001	Mandatory field not present	IR	58
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0050 EMPLOYEE MAILING POSTAL CODE does not exist in WCIS code lookup table then error	058	Code ID invalid.	IR	59
23	M	0015	REF*Y1 REF*9E REF02	CLAIM ADMINISTRATOR CLAIM NUMBER	Required element in Required segment  IF REF01 128 = '9E' (replacement claim number) is reported, then REF01 128 = 'Y1' (Original claim number) should exist in database. If Bill submission reason code = 00 then replacement claim number should not be reported.  Data element cannot be null	999	IF DN0015 CLAIM ADMINISTRATOR CLAIM NUMBER is null then error	1	Required Data Element Missing	R	60
						824	IF DN0508 BILL SUBMISSION REASON CODE = 00 and DN0015 Replacement Claim Number is not null then error	063	Invalid Event Sequence	IR	61
						824	If combination of DN0006 INSURER FEIN + DN0015 CLAIM ADMINISTRATOR CLAIM NUMBER + DN0005 JURISDICTION CLAIM NUMBER does not exist in FROI database then error.  RED01 will contain message: DN15+DN5+DN6 = <Value in DN0015>+<Value in DN0005>+<Value in DN0006> RED06 will contain 0015	039	No match on database	IR	62
						824	IF DN0508 BILL SUBMISSION REASON CODE in (02, 05) and CLAIM ADMINISTRATOR CLAIM NUMBER (in REF*9E) is not null and DN0015 CLAIM ADMINISTRATOR CLAIM NUMBER (in REF*9E) = CLAIM ADMINISTRATOR CLAIM NUMBER (in REF*Y1) then error	063	Invalid event sequence	IR	63
24	M	0005	REF*Y4 REF02	JURISDICTION CLAIM NUMBER	Required element in Required segment Data element cannot be null	999	IF DN0005 JURISDICTION CLAIM NUMBER is null then error	1	Required Data Element Missing	R	64
						824	If combination of DN0006 INSURER FEIN + DN0015 CLAIM ADMINISTRATOR CLAIM NUMBER + DN0005 JURISDICTION CLAIM NUMBER does not exist in FROI database then error.  RED01 will contain message: DN15+DN5+DN6 = <Value in DN0015>+<Value in DN0005>+<Value in DN0006> RED06 will contain 0005	039	No match on database	IR	65
25	F	0523	CLM01	BILLING PROVIDER UNIQUE BILL IDENTIFICATION NUMBER	Required element in Required segment Data element cannot be null	999	IF DN0523 BILLING PROVIDER UNIQUE BILL IDENTIFICATION NUMBER is null then error	1	Required Data Element Missing	R	66
						999	IF DN0523 BILLING PROVIDER UNIQUE BILL IDENTIFICATION NUMBER contains any character besides A-Z, 0-9 or spaces then error	6	Invalid Character In Data Element	R	67

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
26	M	0501	CLM02	TOTAL CHARGE PER BILL	<p>Required element in Required segment</p> <p>Medical Bill Charge Amounts Total Charge per Bill cannot be negative The amount reported for DN0501 (Total Charge Per Bill) must balance to the sum of all charge amounts reported at the line level, including:</p> <ul style="list-style-type: none"> <li>• DN0552 (Total Charge Per Line); and</li> <li>• DN0572 (Drugs/Supplies Billed Amount)</li> </ul> <p>On BSRC 05, DN0501 Total Charge per bill should be equal to the total charge per bill of the "00" or "02" of the existing bill.</p> <p>See 1.3.1 Bill Level Balancing in the IAIABC Medical 2.0 Imp Guide for additional information and examples.</p> <p>For lien bills, use the amount in dispute.</p>	999	IF DN0501 TOTAL CHARGE PER BILL is null then error	1	Required Data Element Missing	R	68
						999	IF DN0501 TOTAL CHARGE PER BILL is negative then error	6	Invalid Character In Data Element	R	69
						999	If DN0501 TOTAL CHARGE PER BILL is not all digits then error	6	Invalid Character In Data Element	R	70
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER <= 'R' and Bill has lines and DN0501 TOTAL CHARGE PER BILL <= sum(DN0552 TOTAL CHARGE PER LINE) then error	064	Invalid data relationship	IR	71
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = R and Bill has lines and DN0501 TOTAL CHARGE PER BILL <= sum(DN0572 DRUGS/SUPPLIES BILLED AMOUNT) then error	064	Invalid data relationship	IR	72
						824	IF DN0508 BILL SUBMISSION REASON CODE = 05 and DN0501 TOTAL CHARGE PER BILL does not match existing database value then error	059	Non-match data value not consistent with value previously reported	IR	73
27	MC	0502	CLM04	BILLING TYPE CODE	<p>Situational element in Required segment</p> <p>From Valid value table Valid values are O = Other CH = Chiropractic DD = Dentist or Dental HS = Hospital MD = Physician or Medical PD = Podiatry</p>	999	IF DN0502 BILLING TYPE CODE is not null and not in (O,CH,DD,HS,MD,PD) then error	7	Invalid Code Value	R	74
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02, 05) and ((DN0293 LUMP SUM PAYMENT/SETTLEMENT CODE is not null ) and DN0502 BILLING TYPE CODE is null) then error	001	Mandatory field not present	IR	75
28	MC	0504	CLM05-1	FACILITY CODE	<p>Required component in Situational element in Required segment Required for Institutional bills.</p> <p>Either DN0504 Facility Code or DN0555 Place of Service Bill Code must be populated</p>	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = I and DN0504 FACILITY CODE is null then error	001	Mandatory field not present	IR	76
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0504 FACILITY CODE is not null and does not exist in WCIS facility code lookup table then error	058	Code/ID invalid	IR	77
29	MC	0555	CLM05-1	PLACE OF SERVICE BILL CODE	<p>Required component in Situational element in Required segment</p> <p>Either DN0504 Facility Code or DN0555 Place of Service Bill Code must be populated</p>	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (P, D, R) and DN0555 PLACE OF SERVICE CODE is null then error	001	Mandatory field not present	IR	78
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0555 PLACE OF SERVICE CODE is not null and does not exist in WCIS place of service lookup table then error	058	Code/ID invalid	IR	79
30	M	0503	CLM05-2	BILLING FORMAT CODE	<p>Required component in Situational element in Required segment</p> <p>Valid Values: A=Institutional B=Non-Institutional</p>	999	IF DN0503 BILL FORMAT CODE is not null and not in (A,B) then error	7	Invalid Code Value	R	80
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and BILL IDENTIFIER <= L and DN0503 BILL FORMAT CODE is null then error	001	Mandatory field not present	IR	81
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and Bill Identifier = I and DN0503 Billing Format Code <= A then error	058	Code/ID invalid	IR	82
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and Bill Identifier in (P,D,R) and DN0503 Billing Format Code <= B then error	058	Code/ID invalid	IR	83
					<p>Situational component in Situational element in Required segment</p> <p>Required when CLM05-2 = 'A' (Uniform Billing Claim Form Bill Type). Valid values</p>	999	IF DN0503 BILLING FORMAT CODE = A and DN0505 BILL FREQUENCY TYPE CODE is null then error	1	Required Data Element Missing	R	84

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
31	MC	0505	CLM05-3	BILL FREQUENCY TYPE CODE	A,B,C,D,E,F,G,H,I,J,K,L,M,N,O,1,2,3,4,5,6,7,8,9  Do not send for cancellation	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and Bill Identifier = I and DN0505 Bill Frequency Type Code is null then error	001	Mandatory field not present	IR	85
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'I' and DN0505 BILL FREQUENCY TYPE CODE is not null and not in (A,B,C,D,E,F,G,H,I,J,K,L,M,N,O,1,2,3,4,5,6,7,8,9) then error	058	Invalid Code Value	IR	86
32				BILL IDENTIFIER (Data created internally)	New column created to identify a Bill. Populated based on the existence of a segment. SV1=Professional SV2=Institutional SV3=Dental SV4=Prescription REF*SMC=Lien This is not a DN.	INT	a. If SV1 segment exists then BILL IDENTIFIER = 'P' (Professional) b. If SV2 segment exists then BILL IDENTIFIER = 'I' (Institutional) c. If SV3 segment exists then BILL IDENTIFIER = 'D' (Dental) d. If SV4 segment exists then BILL IDENTIFIER = 'R' (Prescription) else if REF*SMC segment exists then BILL IDENTIFIER = 'L' (Lien)				87
33	M	0507	CLM16	PROVIDER AGREEMENT CODE	Required element in Required segment  Valid values are: H = Health Maintenance Organization (HMO) Agreement N = No Agreement P = Participation Agreement Y = Preferred Provider Organization (PPO) Agreement	999	IF DN0507 PROVIDER AGREEMENT CODE is null then error	1	Required Data Element Missing	R	88
						999	IF DN0507 PROVIDER AGREEMENT CODE is not null and not in (H, N, P, Y) then error	7	Invalid Code Value	R	89
34	F	0508	CLM19	BILL SUBMISSION REASON CODE	Required element in Required segment  If Bill Submission reason code is mandatory for all transactions and can be one of (00, 01, 02, 05) (from Medical Match data) For DN0508 Bill Submission Reason Codes 01-Cancellation, 02-Corrected and Verified Original Claim, or 05-Replace, the data values of DN0006 (Insurer FEIN) and DN0500 (Unique Bill ID Number) must be identical to the data that was sent in the previously accepted medical EDI record.	999	IF DN0508 BILL SUBMISSION REASON CODE is null then error	1	Required Data Element Missing	R	90
						999	IF DN0508 BILL SUBMISSION REASON CODE not in (00, 01, 02, 05) then error	7	Invalid Code Value	R	91
						824	IF DN0508 BILL SUBMISSION REASON CODE = 00 and DN0544 BILL ADJUSTMENT REASON CODE is NOT 18, B13 (duplicate bill) and combination of DN0006 INSURER FEIN + DN0500 UNIQUE BILL ID NUMBER EXISTS WCIS database with accepted status then error  A Bill is in accepted status if it has been submitted to WCIS and received an "IA" or "IE"	057	Duplicate Batch/Transaction	IR	92
						824	IF DN0508 BILL SUBMISSION REASON CODE in (01, 02, 05) and DN0006 INSURER FEIN + DN0500 UNIQUE BILL ID NUMBER does not exist in WCIS database with accepted status then error. Note: RED01 will contain message: DN500=<value of DN500>;DN6=<value of DN0006>;DN508=<value of BSRC> **IB**GJ*0500-  A Bill is in accepted status if it has been submitted to WCIS and received an "IA" or "IE"	117	Match data value not consistent with value previously reported	IR	93
					Required element in Required segment  DN0511 Date Insurer received bill on a "05" should be greater than the	999	IF DN0511 DATE INSURER RECEIVED BILL is null then error	1	Required Data Element Missing	R	94

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
35	M	0511	DTP*050 DTP03	DATE INSURER RECEIVED BILL	DN0511 for a 00 or 02 of the same bill	999	If DN0511 DATE INSURER RECEIVED BILL format is not CCYYMDD then error	8	Invalid date	R	95
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <>G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <> G5 (for any of the lines)) ) and DN0511 DATE INSURER RECEIVED BILL is not null and < DN0031 DATE OF INJURY then error	034	Must be > date of injury	IR	96
						824	IF DN0508 BILL SUBMISSION REASON CODE = 05 and DN0511 DATE INSURER RECEIVED BILL < the existing value in the database for the same Bill then error	063	Invalid event sequence	IR	97
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0511 DATE INSURER RECEIVED BILL is not null and DN0511 DATE INSURER RECEIVED BILL > SYSDATE then error	041	Must be <= current date	IR	98
36	MC	0513	DTP*435 DTP03	ADMISSION DATE	Required element in Situational segment  Required when BILL IDENTIFIER = 'I' and DN0504 Facility Code equals an inpatient code according to the NUBC UB-04 manual and DTP01 = 435 (Admission). Format: For DN0513 and DN0622: format used per DPT02 DATE TIME PERIOD FORMAT QUALIFIER, DT = Date and time format CCYYMMDDHHMM.	999	If segment is used and DN0508 BILL SUBMISSION REASON CODE <> 01 and DN0513 ADMISSION DATE is null then error	1	Required Data Element Missing	R	99
						999	If DT02 <> DT then error	7	Invalid Code Value	R	100
						999	If DN0513 ADMISSION DATE is not in CCYYMMDD format then error	8	Invalid date	R	101
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER=I and DN0504 FACILITY CODE in (11, 12,18, 21, 22, 28, 32, 34, 41, 65, 66, 81,82,86) and ADMISSION_DATE is null then error	001	Mandatory field not present	IR	102
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER=I and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <>G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <> G5 (for any of the lines)) ) and DN0513 ADMISSION DATE is not null and < DN0031 DATE OF INJURY then error	034	Must be >= Date of Injury	IR	103
						824	If DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and BILL_IDENTIFIER = I and ADMISSION_DATE is not null and ADMISSION_DATE > SYSDATE then error	041	Must be <= current date	IR	104
37	MC	0622	DTP*435 DTP03	ADMISSION HOUR	Required element in Situational segment  Required when BILL IDENTIFIER = 'I' (Institutional) and DN0504 Facility Code equals an inpatient code according to the NUBC UB-04 manual and DTP01 = 435 (Admission). Format: For DN0513 and DN0622: format used per DPT02 DATE TIME PERIOD FORMAT QUALIFIER, DT = Date and time format CCYYMMDDHHMM.	999	If segment is used and PERIOD FORMART QUALIFIFER = 'DT' and DN0622 ADMISSION HOUR is null then error	1	Required Data Element Missing	R	105
						999	IF DN0622 ADMISSION HOUR is not null and not a valid hour then error	9	Invalid time	R	106
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER='I' and DN0504 FACILITY CODE in (11, 18, 28, 41, 65, 66, 86) and DN0622 ADMISSION HOUR is null then error	001	Mandatory field not present	IR	107
					Required element in Situational segment  Required when BILL IDENTIFIER = 'I' (Institutional) and DN0504 Facility Code equals an inpatient code according to the NUBC UB-04 manual and DTP01 = 096 (Discharge). Format: For DN0514 and DN0623: format used per DPT02 DT = Date and time format CCYYMMDDHHMM.	999	If segment is used and DN0514 DISCHARGE DATE is null then error	1	Required Data Element Missing	R	108
						999	If DT02 <> DT then error	7	Invalid Code Value	R	109
						999	If DN0514 DISCHARGE DATE is not null and not in CCYYMMDD format then error	8	Invalid date	R	110

S.no#	Requirment Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
38	MC	0514	DTP*096 DTP03	DISCHARGE DATE		824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = I and DN0514 DISCHARGE DATE is not null and DN0514 DISCHARGE DATE < DN0509 BILL SERVICE_DATE_FROM then error	074	Must be >= From Service Date	IR	111
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER=I and DN0623 DISCHARGE DATE is not null and DN0623 DISCHARGE DATE < DN0513 ADMISSION DATE then error	064	Invalida data relationship	IR	112
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER = I and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <=>G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <=> G5 (for any of the lines)) ) and DN0514 DISCHARGE DATE is not null and < DN0031 DATE OF INJURY then error	034	Must be > date of injury	IR	113
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER = I and DN0514 DISCHARGE DATE is not null and DN0514 DISCHARGE DATE > SYSDATE then error	041	Must be <= current date	IR	114
39	MC	0623	DTP*096 DTP03	DISCHARGE HOUR	Required element in Situational segment  Required when BILL IDENTIFIER = 'I' (Institutional) and DN0504 Facility Code equals an inpatient code according to the NUBC UB-04 manual and DTP01 = 096 (Discharge). Format: For DN0514 and DN0623: format used per DPT02 DT = Date and time format CCYYMMDDHHMM.	999	If segement is used and PERIOD FORMAT QUALIFIFER = 'DT' and DN0622 DISCHARGE HOUR is null then error	1	Required Data Element Missing	R	115
						999	If DN0623 DISCHARGE HOUR is not null and not valid hour then error	9	Invalid time	R	116
40	M	0509	DTP*472 DTP03	SERVICE BILL DATE(S) RANGE	Required element in Situational segment  Required when reporting an institutional medical bill and the line level service date(s) are included; an aggregate or summary record which combines different services for jurisdictional reporting purposes (such as a "lien" bill record); or when required by the jurisdictional regulatory framework or implementation guides.  For lien bills use the date of lien filing.	999	If segment is used and DN0509 SERVICE BILL DATE FROM is null then error	1	Required Data Element Missing	R	117
						999	If DTP02=RD8 and length of DN0509 SERVICE BILL DATE RANGE < 17 characers then error	4	Date element too short	R	118
						999	If DTP02=RD8 and length of DN0509 SERVICE BILL DATE RANGE > 17 characers then error	5	Date element too long	R	119
						999	If DTP02=D8 and length of DN0509 SERVICE BILL DATE RANGE < 8 characers then error	4	Date element too short	R	120
						999	If DTP02=D8 and length of DN0509 SERVICE BILL DATE RANGE > 8 characers then error	5	Date element too long	R	121
						999	If DN0509 SERVICE BILL DATE TO format is not CCYYMMDD then error	8	Invalid date	R	122
						999	If DN0509 SERVICE BILL DATE FROM format is not CCYYMDD then error	8	Invalid date	R	123
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = I,L and DN0509 SERVICE BILL DATE FROM is null then error	001	Mandatory field not present	IR	124
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER in (I,L) and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <=>G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <=> G5 (for any of the lines)) ) and DN0509 SERVICE BILL DATE FROM < DN0031 DATE OF INJURY then error	034	Must be >= Date of Injury	IR	126

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER in (I,L) and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <->G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <-> G5 (for any of the lines)) ) and DN0509 SERVICE BILL DATE TO < DN0031 DATE OF INJURY then error	034	Must be >= Date of Injury	IR	127
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER in (I,L) and DN0509 SERVICE BILL DATE RANGE is not null and DN0509 SERVICE BILL DATE (TO) < SERVICE BILL DATE FROM then error	064	Invalid data relationship	IR	128
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER='I' and DN0509 SERVICE BILL DATE FROM is not null and ( DN0509 SERVICE BILL DATE FROM > MAX(DN605 SERVICE LINE DATE TO) OR DN0509 SERVICE BILL DATE FROM < MIN(DN0605 SERVICE LINE DATE FROM)) then error	111	Must be a valid content	IR	129
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER='I' and DN0509 SERVICE BILL DATE TO is not null and (DN0509 SERVICE BILL DATE TO > MAX(DN0605SERVICE LINE DATE TO) OR DN0509 SERVICE BILL DATE TO < MIN(DN0605 SERVICE LINE DATE FROM)) then error	111	Must be a valid content	IR	130
					Required element in Situational segment	999	If segment is used and BILL_IDENTIFIER <-> 'R' then IK3 error	2	Unexpected segment	R	132
					Required when the SV4 Drug Service segment is reported. If not required by this implementation guide, do not send. Required for prescription bills only.	999	If segment is used and DN0527 PRESCRIPTION DATE is null then error	1	Required Data Element Missing	R	133
						999	If DN0527 PRESCRIPTION DATE is not null and format is not CCYYMMDD or CCYYMDD-CCYYMMDD then error	8	Invalid Date	R	134
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER='R' and DN0527 PRESCRIPTION DATE (FROM) is null then error	001	Mandatory field not present	IR	135
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER = 'R' and DN0527 PRESCRIPTION DATE TO is not null and DN0527 PRESCRIPTION DATE TO < PRESCRIPTION DATE FROM then error	064	Invalid data relationship	IR	136
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER = R and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <->G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <-> G5 (for any of the lines)) ) and DN0527 PRESCRIPTION BILL DATE TO is not null and < DN0031 DATE OF INJURY then error	034	Must be >= Date of Injury	IR	138
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER = R and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <->G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <-> G5 (for any of the lines)) ) and DN0527 PRESCRIPTION BILL DATE FROM is not null and < DN0031 DATE OF INJURY then error	034	Must be >= Date of Injury	IR	139
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and Bill Identifier = R and PRESCRIPTION DATE FROM is not null and PRESCRIPTION DATE FROM < MIN(DN0604 PRESCRIPTION LINE DATE) then error	111	Must be a valid content	IR	140
41	M	0527	DTP*471 DTP03	PRESCRIPTION DATE RANGE							

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and Bill Identifier = R and PRESCRIPTION DATE TO is not null and PRESCRIPTION DATE TO > MAX(DN0604 PRESCRIPTION LINE DATE) then error	111	Must be a valid content	IR	141
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = R and DN0527 PRESCRIPTION DATE is not null and DN0527 PRESCRIPTION DATE TO > SYSDATE then error	041	Must be <= current date	IR	142
42	M	0510	DTP*434 DTP03	DATE OF BILL	Required element in Required segment	999	If DN0510 DATE OF BILL is null then error	1	Required Data Element Missing	R	143
					Populated with the date the health care provider submitted the request for reconsideration or the date of the appeal decision resulting in the additional payment.	999	If DN0510 DATE OF BILL format is not CCYYMMDD then error	8	Invalid date	R	144
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <=>G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <=> G5 (for any of the lines)) ) and DN0510 DATE OF BILL < DN0031 DATE OF INJURY then error	034	Must be >= Date of Injury	IR	145
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = L and DN0544 BILL ADJUSTMENT REASON CODE <>110 and DN0510 DATE OF BILL is not null and < DN0509 SERVICE DATE TO then error	071	Must be >= Service Date	IR	146
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (P,R,D) and (DN0544 BILL ADJUSTMENT REASON CODE <>110 OR DN0732 SERVICE ADJUSTMENT REASON CODE (for any line) <> 110 ) and DN0510 DATE OF BILL is not null and < DN0605 SERVICE LINE DATE TO then error	071	Must be >= Service Date	IR	147
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = I and (DN0544 BILL ADJUSTMENT REASON CODE <>110 OR DN0732 SERVICE ADJUSTMENT REASON CODE (for any line) <> 110 ) and DN0510 DATE OF BILL is not null and < DN0509 SERVICE DATE TO then error	071	Must be >= Service Date	IR	148
											999
43	M	0512	DTP*666 DTP03	DATE INSURER PAID BILL	The date the insurance carrier or the claim administrator paid or denied the medical bill related to the payment event that triggered the reporting requirement. In situations involving refunds by health care provider, this is the date that the insurance carrier or claim administrator received the refund.	999	If DN0512 DATE INSURER PAID BILL format is not CCYYMDD then error	8	Invalid date	R	150
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0512 DATE INSURER PAID BILL > sysdate then error	041	Must be <= current date	IR	151
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0512 DATE INSURER PAID BILL < DN0511 DATE INSURER RECEIVED BILL then error	073	Must be >= Date Payer Received Bill	IR	152
											999
					Valid values: 1 – Emergency, 2 – Urgent, 3-Elective, 4-Newborn, 5-Trauma, 6-8 reserved for assignment by NUBC, 9-Information not available.	999	If DN0577 ADMISSION TYPE CODE is not null and not in (1,2,3,4,5,9) then error	7	Code/ID invalid	R	154

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
44	MC	0577	CL101	ADMISSION TYPE CODE		824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER ='I' and DN0504 FACILITY CODE in (11, 18, 21, 28, 41, 65, 66, 86,12, 22) and DN0577 ADMISSION TYPE CODE is null then error	001	Mandatory data element missing	IR	155
45	MC	0515	CN101	CONTRACT TYPE CODE	Required element in Situational segment  Required when the medical services provided were paid under a contract term. Valid values are: 01 = Diagnosis Related Group (DRG) 02 = Per Diem 03 = Variable Per Diem 04 = Flat 05 = Capitated 06 = Percent 09=Other	999	If segment is used and DN0515 CONTRACT TYPE CODE is null then error	1	Required Data Element Missing	R	156
						999	If BILL IDENTIFIER <> 'L' and DN0515 CONTRACT TYPE CODE is not null and not in (01, 02, 03, 04, 05, 06,09) then error	7	Code/ID invalid	R	157
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0507 PROVIDER AGREEMENT CODE in (H,P,Y) and DN0515 CONTRACT TYPE CODE is null then error	064	Invalid data relationship	IR	158
46	M	0516	AMT*TP AMT02	TOTAL AMOUNT PAID PER BILL	Required element in Required segment  The amount reported for DN0516 (Total Amount Paid Per Bill) must balance to the sum of all payment amounts reported at the line level for DN0574 (Total Amount Paid Per Line). See 1.3.1 Bill Level Balancing in the IAIABC Medical 2.0 Imp Guide for additional information and examples.  The amount reported for DN0501 (Total Charge Per Bill) minus the sum of all adjustment amounts [amounts reported in DN0545 (Bill Adjustment Amount) and DN0733 (Service Adjustment Amount)] must equal the amount reported in DN0516 (Total Amount Paid Per Bill). When performing this balancing approach: • Adjustments DECREASE the payment when the adjustment amount is POSITIVE. • Adjustments INCREASE the payment when the adjustment amount is NEGATIVE(-).  Do not send for cancellation	999	if DN0516 TOTAL AMOUNT PAID PER BILL is null then error	1	Required Data Element Missing	R	159
						999	if DN0516 TOTAL AMOUNT PAID PER BILL is not all digits then error	6	Invalid character in data element	R	160
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER <> 'L' and DN0516 TOTAL PAID PER BILL <> sum(DN0574 TOTAL PAID PER LINE) then error	064	Invalid data relationship	IR	161
47	F	0500	REF*DD REF02	UNIQUE BILL ID NUMBER	Required element in Required segment  It is recommended that the value in DN0500 Unique Bill Identification Number contained in a cancelled medical EDI record not be reused.  Data element cannot be null	999	IF DN0500 UNIQUE BILL ID NUMBER is null then error	1	Required Data Element Missing	R	162
						999	If DN0500 UNIQUE BILL ID NUMBER contains any character besides A-Z, 0-9 or spaces then error	6	Invalid Character In Data Element	R	163
48	M	0266	REF*2I REF02	TRANSACTION TRACKING NUMBER	Required element in Required segment  When issuing a DN0266 Transaction Tracking Number, the sender should never reuse a number for any subsequent medical bill records.  Data element cannot be null	999	IF DN0266 TRANSACTION TRACKING NUMBER is null then error	1	Required Data Element Missing	R	164
						999	IF DN0266 TRANSACTION TRACKING NUMBER contains any character besides A-Z, 0-9 or spaces then error	6	Invalid Character In Data Element	R	165
						824	If combination of DN0098 SENDER ID + DN0266 TRANSACTION TRACKING NUMBER exists in database then error	057	Duplicate Batch/Transaction	IR	166
49	MC	0293	REF*SMC REF02	LUMP SUM PAYMENT/SETTLEMENT CODE	Required element in Situational segment  DN0293 is not null and DN544 = 131.Required when a settlement is paid covering more than one bill. Valid values are: SP = Settlement Partial SF = Settlement Full AW = Award	999	If segment is used and DN0293 LUMP SUM PAYMENT/ SETTLEMENT CODE is null then error	1	Required Data Element Missing	R	167
						999	if DN0293 LUMP SUM PAYMENT/ SETTLEMENT CODE is not null and not in (SP, SF, AW) then error	7	Invalid Code Value	R	168
					Required element in Situational segment  Institutional Principal Diagnosis Codes.. Either PRINCIPAL DIAGNOSIS	999	If segment is used and DN0521 PRINCIPAL DIAGNOSIS CODE ICD9/ICD10 is null then error	1	Required Data Element Missing	R	169

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
50	MC	0521	HI*BK/ABK HI01-2	PRINCIPAL DIAGNOSIS CODE ICD9/ICD10	CODE ICD9 or PRINCIPAL DIAGNOSIS CODE ICD10 should be populated. For hospital bills both cannot be null.	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER='I' and DN0521 PRINCIPAL DIAGNOSIS CODE ICD10 is null and PRINCIPAL DIAGNOSIS CODE ICD9 is null then error	001	Mandatory field not present	IR	170
					Institutional Principal Diagnosis Code. Required for hospital bills only. Must exist in ICD9/ICD10 code table.	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER='I' and PRINCIPAL DIAGNOSIS CODE ICD9 is not null and( DN0535 Admitting Diagnosis ICD10 is not null or DN0520 Outpatient Reason for Visit ICD10 is not null or DN0525 Principal Procedure Code ICD10 is not null or DN0736 Procedure Code ICD10 is not null) then error	064	Invalid data relationship	IR	171
					(From population restriction spreadsheet) When diagnosis codes are reported, the appropriate qualifier must be used: ABK = International Classification of Diseases Clinical Modification (ICD-10-CM) Principal Diagnosis BK = International Classification of Diseases Clinical Modification (ICD-9-CM) Principal Diagnosis If Principal diagnosis code is a ICD9 code then all other diagnosis and procedure codes should be ICD9.	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER='I' and PRINCIPAL DIAGNOSIS CODE ICD10 is not null and( DN0535 Admitting Diagnosis ICD9 is not null or DN0520 Outpatient Reason for Visit ICD9 is not null DN0525 Principal Procedure Code ICD9 is not null or DN0736 Procedure Code ICD9 is not null) then error	064	Invalid data relationship	IR	172
					If Principal diagnosis code is a ICD10 code then all other diagnosis and procedure codes should be ICD10.	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER='I' and DN0732 SERVICE ADJUSTMENT REASON CODE <= 146 or DN0544 BILL ADJUSTMENT REASON CODE <= 146 and DN0521 PRINCIPAL DIAGNOSIS CODE ICD9/ICD10 is not null and DN0521 PRINCIPAL DIAGNOSIS CODE ICD9/ICD10 not exists in WCIS ICD9/ICD10 lookup table then error.	058	Code/ID invalid	IR	173
51	MC	0533	HI*BK/ABK HI01-9 and HI*BF/ABF HI01-9 to HI12-9	PRESENT ON ADMISSION INDICATOR	Situational component in Required element in Situational segment  When reported on inpatient hospital bills. Valid values N = No U = Unknown W = Not Applicable Y = Yes	999	If DN0533 PRESENT ON ADMISSION INDICATOR is not null and not in (N,U,W,Y) then error	7	Invalid Code Value	R	174
52	MC	0535	HI*BJ/ABJ HI01-2	ADMITTING DIAGNOSIS CODE ICD9/ICD10	Required component in Required element in Situational segment	999	If segment is used and DN0535 ADMITTING DIAGNOSIS CODE ICD9/10 is null then error	1	Required Data Element Missing	R	175
					Required when BILL IDENTIFIER = 'I' (Institutional) and DN0504 Facility Code is an inpatient code according to the NUBC UB-04 manual.	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER='I' and DN0504 FACILITY CODE in (11, 12, 18, 21, 22, 41) and DN0535 ADMITTING DIAGNOSIS CODE ICD10 is null and DN0535 ADMITTING DIAGNOSIS CODE ICD9 is null then error	001	Mandatory field not present	IR	176
					Required when an inpatient admission is involved.  For inpatient hospital bills either of ADMITTING DIAGNOSIS CODE ICD9 or ADMITTING DIAGNOSIS CODE ICD10 should be reported. Both cannot be blank. A valid ICD9 or ICD10 code must be reported.	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER='I' and DN0732 SERVICE ADJUSTMENT REASON CODE <= 146 or DN0544 BILL ADJUSTMENT REASON CODE <= 146 and DN0535 ADMITTING DIAGNOSIS CODE ICD9/ICD10 is not null and does not exist in ICD9/ICD10 lookup table then error	058	Code/ID invalid	IR	177
53	MC	0522	HI*BK/ABK	DIAGNOSIS CODE	Required component in Required element in Situational segment	999	If segment is used and DN0522 DIAGNOSIS CODE ICD9/ICD10 is null then error	1	Required Data Element Missing	R	178
					Non-Institutional Principal Diagnosis Codes. Must have diagnosis pointer = 1 .Required for professional, dental services.	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = P and DN0522 DIAGNOSIS CODE ICD10 is null and DN0522 DIAGNOSIS CODE ICD9 is null then error	001	Mandatory field not present	IR	179

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
		0522	HI01-2	ICD9/ICD10		824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (P,D) and (DN0732 SERVICE ADJUSTMENT REASON CODE <= 146 or DN0544 BILL ADJUSTMENT REASON CODE <= 146 ) and DN0522 DIAGNOSIS CODE ICD9/ICD10 is not null and not exists in WCIS ICD9/ICD10 lookup table then error	058	Code/ID invalid	IR	180
54	MC	0522	HI*BF/ABF HI01-2	DIAGNOSIS CODE ICD9/ICD10	Required component in Required element in Situational segment - Institutional	999	If segment is used and DN0522 DIAGNOSIS CODE is null then error	1	Required Data Element Missing	R	181
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER='I' and DN0732 SERVICE ADJUSTMENT REASON CODE <= 146 or DN0544 BILL ADJUSTMENT REASON CODE <=146 and DIAGNOSIS CODE ICD9/ICD10 is not null and not exists in WCIS ICD9/ICD10 lookup table then error	058	Code/ID invalid	IR	182
			HI*_BF/ABF HI02-2 to HI12-2		Required component in Situational element in Situational segment - Professional, Dental, Institutional	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (P,I,D) and (DN0732 SERVICE ADJUSTMENT REASON CODE <= 146 or DN0544 BILL ADJUSTMENT REASON CODE <=146) and DIAGNOSIS CODE ICD9/ICD10 is not null and not exists in ICD9/ICD10 diagnosis code table then error	058	Code/ID invalid	IR	183
55	MC	0520	HI*PR/APR HI01-2	OUTPATIENT REASON FOR VISIT CODE ICD9/ICD10	Required component in Required element in Situational segment	999	If segment is used and DN0520 OUTPATIENT REASON VISIT CODE ICD9/ICD10 is null then error	1	Required Data Element Missing	R	184
					Required when BILL IDENTIFIER = 'I' and it involves" unscheduled" outpatient visit. "Unscheduled" defined according to NUBC definition.	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'I' and DN0520 OUTPATIENT REASON FOR VISIT CODE is null and ( DN0504 FACILITY CODE in (13, 85, 78) AND DN0577 ADMISSION TYPE CODE in (1,2,5) AND DN0576 REVENUE PAID CODE in ('0450', '0516', '0526', '0762')) then error  RED01 in 824 will contain message:NONE; Report when 0504=13,85,78; 0576='0450','0516','0526','0762'; 0577=1,2,5	001	Mandatory field not present	IR	185
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER='I' and DN0520 OUTPATIENT REASON VISIT CODE ICD9/ICD10 is not null and not exists in ICD9/ICD10 diagnosis code table then error	058	Invalid Code Value	IR	186
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'I' and DN0520 OUTPATIENT REASON FOR VISIT CODE is not null and DN0504 FACILITY CODE not in (13, 85, 78) then error  RED01 in 824 will contain message:<Incorrect DN#> <Incorrect value of DN#> Report only when DN0504 in (13,85,78);	064	Invalid data relationship	IR	187
56	MC	0525	HI*BR/BBR HI01-2	PRINCIPAL PROCEDURE CODE ICD9/ICD10	Required component in Required element in Situational segment	999	If segment is used and DN0525 PRINCIPAL PROCEDURE CODE ICD9/ICD10 is null then error	1	Required Data Element Missing	R	188
					Required when BILL IDENTIFIER = 'I' and DN0504 Facility Code equals an inpatient code according to the NUBC UB-04 manual, and DN0522 Diagnosis Code is present.	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER='I' and DN0525 PRINCIPAL PROCEDURE CODE ICD9/ICD10 is not null and not exists in WCIS ICD9/ICD10 procedure code lookup table then error.	058	Code/ID invalid	IR	189
					Required component in Required element in Situational segment	999	If segment is used and DN0525 PRINCIPAL PROCEDURE CODE is not null and DN0550 PRINCIPAL PROCEDURE DATE is null then error	1	Required Data Element Missing	R	190
					Required when DN0525 Principal Procedure Code is present.						

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
57	MC	0550	HI*BR/BBR HI01-4	PRINCIPAL PROCEDURE DATE	PRINCIPAL PROCEDURE DATE must be >= Date of Injury except for Occupational/Cumulative Injuries.	999	IF DN0550 PRINCIPAL PROCEDURE DATE is not null and format is not CCYYMMDD then error	8	Invalid Date	R	191
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER = 1 and DN0550 PRINCIPAL PROCEDURE DATE is not null and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <>G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <> G5 (for any of the lines)) ) and DN0550 PRINCIPAL PROCEDURE DATE < DN0031 DATE_OF_INJURY then error	034	Must be >= Date of Injury	IR	192
58	MC	0736	HI*BQ/BBQ HI01-2	OTHER PROCEDURE CODE ICD9/ICD10	Required component in Required element in Situational segment	999	If segment is used and DN0736 OTHER PROCEDURE CODE ICD9/ICD10 is null then error	1	Required Data Element Missing	R	193
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER = 1 and DN0736 OTHER PROCEDURE CODE ICD9/ICD10 is not null and not exists in WCIS ICD9/ICD10 procedure code lookup table then error.	058	Code/ID invalid	IR	194
59	MC	0524	HI*BQ/BBQ HI01-4	PROCEDURE DATE	Required component in Required element in Situational segment  Required when the corresponding DN0736 Other Procedure Code is present.	999	If segment is used and DN0736 OTHER PROCEDURE CODE is not null and DN0524 PROCEDURE DATE is null then error	1	Required Data Element Missing	R	195
						999	IF DN0524 PROCEDURE DATE is not null and format is not CCYYMMDD then error	8	Invalid date	R	196
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER = 1 and DN0524 PROCEDURE DATE is not null and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <>G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <> G5 (for any of the lines)) ) and DN0524 PROCEDURE DATE < DN0031 DATE_OF_INJURY then error	034	Must be >= Date of Injury	IR	197
60	MC	0556	HI*BG H101-2	CONDITION CODE	Required component in Required element in Situational segment  Required when jurisdiction implementation guides specify the condition codes that must be reported (or required when condition codes impact the adjudication of the medical bill, e.g., outlier payments).	999	If segment is used and DN0556 CONDITION CODE is null then error	1	Required Data Element Missing	R	198
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 1 and DN0556 CONDITION CODE is not null and not exists in WCIS condition code lookup table then error	058	Code/ID invalid	IR	199
						824	IF Bill Identifier in ( P, D) and BILL SUBMISSION REASON CODE in (02,05) and DN0556 CONDITION CODE not in (W2, W3, W4, W5) then error	058	Code/ID invalid	IR	200
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and Bill Identifier in (P, D) and DN0508 BILL SUBMISSION REASON CODE=00 and DN0556 CONDITION CODE is not null then error	064	Invalid data relationship	IR	201
61	MC	0549	HI01-2	PAID DRG CODE	Required component in Required element in Situational segment	999	If segment is used and DN0549 PAID DRG CODE is null then error	1	Required Data Element Missing	R	202
						824	IF BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER='I' and DN0504 FACILITY CODE in (11, 18, 21, 28, 41, 65, 66, 86,12, 22) and DN0515 CONTRACT TYPE CODE=1 (DRG) and DN0549 PAID DRG CODE is null then error	001	Mandatory field not present	IR	203
						824	IF BILL IDENTIFIER='I' and BILL SUBMISSION REASON CODE in (00,02,05) and DN0549 PAID DRG CODE is not null and not exists in WCIS DRG code lookup table then error	058	Code/ID invalid	IR	204

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
62	MC	0548	HI01-8	BILLED DRG CODE	Required component in Required element in Situational segment	999	If segment is used and DN0548 BILLED DRG CODE is null then error	1	Required Data Element Missing	R	205
						824	IF BILL IDENTIFIER='I' and DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0504 FACILITY CODE in (11, 12,18, 21, 22,28, 41, 65, 66, 86) and DN0515 CONTRACT TYPE CODE=1 (DRG) and DN0548 BILLED DRG CODE is null then error	001	Mandatory field not present	IR	206
						824	IF BILL IDENTIFIER='I' and DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0548 BILLED DRG CODE is not null and not exists in WCIS DRG code lookup table then error	058	Code/ID invalid	IR	207
64	M	0528	NM1*85 NM103	BILLING PROVIDER LAST/GROUP NAME	Required element in Required segment  If the billing provider is an individual, then the last name should be used. Individuals acting as an organization should have the organization's name entered on one line.	999	IF DN0528 BILLING PROVIDER LAST/GROUP NAME is null then error	1	Required Data Element Missing	R	209
65	MC	0529	NM104	BILLING PROVIDER FIRST NAME	Situational element in Required segment  Required when NM102 = '1'. Required when the billing provider is an individual	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILLING PROVIDER ENTITY TYPE = 1 and DN0529 BILLING PROVIDER FIRST NAME is null then error	001	Mandatory field not present	IR	210
66	MC	0634	NM1*85 NM109	BILLING PROVIDER NATIONAL PROVIDER ID	Situational element in Required segment  Invalid NPIs are allowed when reporting denied Bills	999	If NM108 contains qualifier 'XX' and NM109 DN0634 BILLING PROVIDER NATIONAL PROVIDER ID is null then error	2	Conditional required data element missing	R	211
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and ((DN0732 SERVICE ADJUSTMENT REASON CODE not in ('207', '208') AND DN0544 BILL ADJUSTMENT REASON CODE not in ('207', '208') and DN0634 BILLING PROVIDER NATIONAL PROVIDER ID is not null does not exist in WCIS NPI lookup table then error.	058	Code/ID invalid	IR	212
67	AR	0537	PRV*BI	BILLING PROVIDER PRIMARY SPECIALTY CODE	Required element in Situational segment	999	If segment is used and DN0537 BILLING PROVIDER PRIMARY SPECIALTY CODE is null then error	1	Required Data Element Missing	R	213
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0537 BILLING PROVIDER PRIMARY SPECIALTY CODE is null then error	001	Mandatory field not present	IR	214
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0537 BILLING PROVIDER PRIMARY SPECIALTY CODE is not null and not exists in WCIS specialty code lookup table then error.	058	Code/ID invalid	IR	215
68	M	0538	N301	BILLING PROVIDER PRIMARY ADDRESS	Required element in Required segment	999	If DN0538 BILLING PROVIDER PRIMARY ADDRESS is null then error	1	Required Data Element Missing	R	216
69	MC	0539	N302	BILLING PROVIDER SECONDARY ADDRESS	Situational element in Required segment	999	No validation				217
70	M	0540	N401	BILLING PROVIDER CITY	Required element in Required segment  Required when the address is in the United States of America, including its territories, or Canada.	999	If DN0540 BILLING PROVIDER CITY is null then error	1	Required Data Element Missing	R	218
71	MC	0541	N402	BILLING PROVIDER STATE CODE	Situational element in Required segment  Required if the provider is located in US. Not required for Lien Bills.	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0569 BILLING PROVIDER COUNTRY CODE is null or US and DN0541 BILLING PROVIDER STATE CODE is null then error	001	Mandatory field not present	IR	219
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0569 BILLING PROVIDER COUNTRY CODE is null or US and DN0541 BILLING PROVIDER STATE CODE is not null and not exists in WCIS STATE code lookup table then error	058	Code/ID invalid	IR	220

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
72	MC	0542	N403	BILLING PROVIDER POSTAL CODE	Situational element in Required segment Not required for Lien Bills.	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0569 BILLING PROVIDER COUNTRY CODE is null or US and DN0542 BILLING PROVIDER POSTAL CODE is null then error	001	Mandatory field not present	IR	221
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0569 BILLING PROVIDER COUNTRY CODE is null or US and DN0542 BILLING PROVIDER POSTAL CODE is not null and not exists in WCIS postal code lookup table then error	058	Code/ID invalid	IR	222
73	MC	0569	N404	BILLING PROVIDER COUNTRY CODE	Situational element in Required segment Required when the billing provider address is outside the United States.	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0569 BILLING PROVIDER COUNTRY CODE is not null and not exists in WCIS COUNTRY CODE lookup table then error.	058	Code/ID invalid	IR	223
75	M	0629	REF*EI REF02	BILLING PROVIDER FEIN	Required element in Required segment BILLING PROVIDER FEIN is mandatory. Must be a string of exactly nine numbers with no separators. All digits cannot be same	999	If DN0629 BILLING PROVIDER FEIN is null then error.	1	Mandatory field not present	R	225
						999	If DN0629 BILLING PROVIDER FEIN is not all digits (9) then error	6	Invalid Character In Data Element	R	226
						999	If length of DN0629 BILLING PROVIDER FEIN is < 9 then error	4	Data element too short	R	227
						999	If length of DN0629 BILLING PROVIDER FEIN is > 9 then error	5	Data element too long	R	228
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and all digits of BILLING PROVIDER FEIN are same then error	040	All digits cannot be the same	IR	229
76	AA	0630	REF*OB REF02	BILLING PROVIDER STATE LICENSE NUMBER	Situational element in Required segment	999	If segment is used and DN0630 BILLING PROVIDER STATE LICENSE NUMBER is null then error	1	Required Data Element Missing	R	230
						999	If DN0630 BILLING PROVIDER STATE LICENSE NUMBER contain characters other than A-Z, 0-9, or space then error.	6	Invalid Character In Data Element	R	231
78	MC	0638	NM1*82 NM103	RENDERING BILL PROVIDER LAST/GROUP NAME	Required element in Situational segment Required when the rendering provider is not the billing provider.	999	If segment is used and DN0638 RENDERING BILL PROVIDER LAST/GROUP NAME is null then error	1	Required Data Element Missing	R	233
79	MC	0639	NM104	RENDERING BILL PROVIDER FIRST NAME	Situational element in Situational segment Required when NM102 = '1'. Required when the rendering bill provider is a person	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and RENDERING BILL PROVIDER ENTITY TYPE=1 and DN0639 RENDERING BILL PROVIDER FIRST NAME is null then error	001	Mandatory field not present	IR	234
80	MC	0647	NM1*82 NM109	RENDERING BILL PROVIDER NATIONAL PROVIDER ID	Situational element in Situational segment Not validated for denied bills.	999	If NM108 contains qualifier 'XX' and NM109 DN0647 RENDERING BILL PROVIDER NATIONAL PROVIDER ID is null then error	2	Conditional required data element missing	R	235
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and RENDERING BILL PROVIDER LAST NAME is not null and (DN0732 SERVICE ADJUSTMENT REASON CODE not in ('207', '208') AND DN0544 BILL ADJUSTMENT REASON CODE not in ('207', '208') and DN0647 RENDERING BILL PROVIDER NPI is not null and not exist in WCIS NPI lookup table then error	058	Code/ID invalid	IR	236
81	MC	0648	REF*OB	RENDERING BILL PROVIDER STATE LICENSE NUMBER	Required element in Situational segment Required when the provider is not eligible for NPI. If provider is not eligible for state licensing reports all 9s.	999	If segment is used and DN0643 RENDERING BILL PROVIDER STATE LICENSE NUMBER is null then error	1	Required Data Element Missing	R	238
						999	If DN0643 RENDERING BILL PROVIDER STATE LICENSE NUMBER contain characters other than A-Z, 0-9, or space then error.	6	Invalid Character In Data Element	R	239

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
82	MC	0643	REF02	PROVIDER STATE LICENSE NUMBER		824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0638 RENDERING BILL PROVIDER LAST/GROUP NAME is not null and DN0647 RENDERING BILL PROVIDER NATIONAL PROVIDER ID is null and DN0643 RENDERING BILL PROVIDER STATE LICENCE NUMBER is null then error	001	Mandatory field not present	IR	240
83	MC	0651	PRV*PE PRV03	RENDERING BILL PROVIDER PRIMARY SPECIALITY CODE	Required element in Situational segment  Required when PRV01 = ' PE' Performing PXC= Health Care Provider Taxonomy code	999	If segment is used and DN0651 RENDERING BILL PROVIDER SPECIALTY CODE is null then error.	1	Required Data Element Missing	R	241
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0638 RENDERING BILL PROVIDER LAST/GROUP NAME is not null and DN0651 RENDERING BILL PROVIDER SPECIALTY CODE is null then error	001	Mandatory field not present	IR	242
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0651 RENDERING BILL PROVIDER PRIMARY SPECIALITY CODE is not null and not exists in WCIS specialty code lookup table then error	058	Code/ID invalid	IR	243
84	MC	0658	NM1*DQ NM103	SUPERVISING PROVIDER LAST/GROUP NAME	Required element in Situational segment  Required when NM101 equals "DQ".	999	If segment is used and DN0658 SUPERVISING PROVIDER LAST/GROUP NAME is null then error	1	Required Data Element Missing	R	244
85	AA	0659	NM1*DQ NM104	SUPERVISING PROVIDER FIRST NAME	Situational element in Situational segment	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0658 SUPERVISING PROVIDER LAST NAME is not null and SUPERVISING BILL PROVIDER ENTITY TYPE =1 and DN0659 SUPERVISING PROVIDER FIRST NAME is null then error	001	Mandatory field not present	IR	245
86	MC	0667	NM1*DQ NM109	SUPERVISING PROVIDER NATIONAL PROVIDER ID	Situational element in Situational segment	999	If NM108 contains qualifier 'XX' and NM109 DN0667 SUPERVISING PROVIDER NATIONAL PROVIDER ID is null then error	2	Conditional required data element missing	R	246
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and (DN0732 SERVICE ADJUSTMENT REASON CODE not in ('207', '208') AND DN0544 BILL ADJUSTMENT REASON CODE not in ('207', '208')) and DN0667 SUPERVISING PROVIDER NPI is not null and not exist in WCIS NPI lookup table then error	058	Code/ID invalid	IR	247
87	AR	0671	PRV*SU PRV03	SUPERVISING PROVIDER PRIMARY SPECIALTY CODE	Required element in Situational segment  Required PXC = Health Care Provider Taxonomy Code. Required SU = Supervising	999	If segment is used and DN0671 SUPERVISING PROVIDER SPECIALTY CODE is null then error	1	Required Data Element Missing	R	248
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0671 SUPERVISING PROVIDER SPECIALTY CODE is not null and not exists in WCIS specialty code lookup table then error.	058	Code/ID invalid	IR	249
88	MC	0678	NM1*77 NM103	FACILITY NAME	Required element in Situational segment  Required when the service facility information is different than the billing provider information (when the services were not provided at the billing provider's address).	999	If segment is used and DN0678 FACILITY NAME is null then error	1	Required Data Element Missing	R	250
89	MC	0682	NM1*77 NM109	FACILITY NATIONAL PROVIDER ID	Required element in Situational segment  Required when NM108 = XX	999	If NM108 contains qualifier 'XX' and NM109 DN0667 FACILITY NATIONAL PROVIDER ID is null then error	2	Conditional required data element missing	R	252
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0682 FACILITY NPI is not null and (DN0732 SERVICE ADJUSTMENT REASON CODE not in ('207', '208') AND DN0544 BILL ADJUSTMENT REASON CODE not in ('207', '208')) not exists in WCIS NPI lookup table then error	058	Code/ID invalid	IR	253

S.no#	Requirment Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
90	MC	0684	N301	FACILITY PRIMARY ADDRESS	Required element in Situational segment	999	If segment is used and DN684 FACILITY PRIMARY ADDRESS is null then error	1	Required Data Element Missing	R	255
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0678 FACILITY NAME is not null and DN0684 FACILITY PRIMARY ADDRESS is null then error	001	Mandatory field not present	IR	256
92	MC	0686	N401	FACILITY CITY	Required element in Situational segment	999	IF segment is used and DN0686 FACILITY CITY is null then error	1	Required data element missing	R	259
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0678 FACILITY NAME is not null and DN0686 FACILITY CITY is null then error	001	Mandatory field not present	IR	260
93	MC	0687	N402	FACILITY STATE CODE	Situational element in Situational segment	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0678 FACILITY NAME is not null and DN0689 FACILITY COUNTRY CODE is null or US and DN0687 FACILITY STATE CODE is null then error	001	Mandatory field not present	IR	262
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0689 FACILITY COUNTRY CODE is null or US and DN0687 FACILITY STATE CODE is not null and not exists in the code table then error	058	Code/ID invalid		263
94	MC	0688	N403	FACILITY POSTAL CODE	Situational element in Situational segment	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0678 FACILITY NAME is not null and DN0689 FACILITY COUNTRY CODE is null or US and DN0688 FACILITY POSTAL CODE is null then error	001	Mandatory field not present	IR	265
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0689 FACILITY COUNTRY CODE is null or US and DN0688 FACILITY POSTAL CODE is not null and not exists in WCIS postal code lookup table then error	058	Code/ID invalid	IR	266
95	MC	0689	N404	FACILITY COUNTRY CODE	Situational element in Situational segment	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0678 FACILITY NAME is not null and DN0688 FACILITY POSTAL CODE is null and DN0689 FACILITY COUNTRY CODE is null then error	001	Mandatory field not present	IR	268
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0689 FACILITY COUNTRY CODE is not null and not exists in database then error	058	Code/ID invalid	IR	269
96	MC	0680	REF*0B REF02	FACILITY STATE LICENSE NUMBER	Required element in Situational segment  REF01 =OB. Required when the Service Facility Location is not eligible for NPI. If the Service Facility Location is not eligibele for state licensing use all nines.	999	If segement is used and DN0680 FACILITY STATE LICENSE NUMBER is null then error	1	Required Data Element Missing	R	271
						999	IF DN0680 FACILITY STATE LICENSE NUMBER contain characters other than A-Z, 0-9, or space then error.	6	Invalid Character In Data Element	R	272
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0678 FACILITY NAME is not null and DN0682 FACILITY NATIONAL PROVIDER ID is null and DN0680 FACILITY STATE LICENCE NUMBER is null then error	001	Mandatory field not present	IR	273
97	MC	0690	NM1*DN NM103	REFERRING PROVIDER LAST/GROUP NAME	Required element in Situational segment  NM101 =DN. Required when the service provided involves a referral.	999	If segment is used and DN0690 REFERRING PROVIDER LAST/GROUP NAME is null then error	1	Required Data Element Missing	R	275
98	MC	0691	NM1*DN NM104	REFERRING PROVIDER FIRST NAME	Situational element in Situational segment  Required when NM102 = 1	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0690 REFERRING PROVIDER LAST/GROUP_NAME is not null and DN0691 REFERRING PROVIDER FIRST NAME is null then error	001	Mandatory field not present	IR	276

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
99	MC	0699	NM1*DN NM109	REFERRING PROVIDER NATIONAL PROVIDER ID	Situational element in Situational segment	999	If NM108 contains qualifier 'XX' and NM109 DN0699 REFERRING PROVIDER NATIONAL PROVIDER ID is null then error	2	Conditional required data element missing	R	277
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0699 REFERRING PROVIDER NPI is not null and (DN0732 SERVICE ADJUSTMENT REASON CODE not in ('207', '208') AND DN0544 BILL ADJUSTMENT REASON CODE not in ('207', '208')) not exists in WCIS NPI lookup table then error	058	Code/ID invalid	IR	278
100	MC	0209	NM1*Y2 NM103	MANAGED CARE ORGANIZATION NAME	Required element in Situational segment  Required when DN0507 PROVIDER AGREEMENT CODE = P	999	If segment is used and DN0209 MANAGED CARE ORGANIZATION NAME is null then error	1	Required Data Element Missing	R	279
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0507 PROVIDER AGREEMENT CODE = P and DN0209 MANAGED CARE ORGANIZATION NAME is null then error	064	Invalid data relationship	IR	280
101	MC	0208	NM1*Y2 NM109	MANAGED CARE ORGANIZATION IDENTIFICATION NUMBER	Situational element in Situational segment  Required when DN0507 PROVIDER AGREEMENT CODE = P	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0507 PROVIDER AGREEMENT CODE = P and DN0208 MANAGED CARE ORGANIZATION IDENTIFICATION NUMBER is null then error	064	Invalid data relationship	IR	281
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0208 MANAGED CARE ORGANIZATION IDENTIFICATION NUMBER is not null and not exists in WCIS lookup table then error	058	Code/ID invalid	IR	282
102	MC	0704	REF*EI REF02	MANAGED CARE ORGANIZATION FEIN	Required when DN0507 PROVIDER AGREEMENT CODE = P. Must be all digits. All digits cannot be same.  Do not send for cancellation	999	If segment is used and DN0704 MANAGED CARE ORGANIZATION FEIN is null then error	1	Required Data Element Missing	R	283
						999	If DN0704 MANAGED CARE ORGANIZATIN FEIN is < 9 then error	4	Data element too short	R	284
						999	If DN0704 MANAGED CARE ORGANIZATIN FEIN is > 9 then error	5	Data element too long	R	285
						999	If DN0704 MCO FEIN is not null and not all digits then error	6	Invalid Character In Data Element	R	286
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0704 MCO FEIN is not null and all digits of MCO FEIN are same then error	040	All digits cannot be the same	IR	287
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0507 PROVIDER AGREEMENT CODE = P and DN0704 MCO FEIN is null then error	064	Invalid data relationship	IR	288
103	MC	0543	CAS01	BILL ADJUSTMENT GROUP CODE	Required element in Situational segment  Required when adjustments apply to all service lines on a medical bill containing more than one line or when submitting aggregate or summary records. From Valid value table: Valid values are - CO = Contractual Obligations OA = Other Adjustments PI = Payer Initiated Reductions PR = Patient Responsibility RR = Regulatory Requirement	999	If segment is used and DN0543 BILL ADJUSTMENT GROUP CODE is null then error	1	Required Data Element Missing	R	289
						999	IF DN0543 BILL ADJUSTMENT GROUP CODE is not null and not in (CO, OA, PI, PR, RR) then error	7	Invalid Code Value	R	290
					Required element in Situational segment (CAS02) Situational element in Situational segment (CAS05,CAS08)  Required when adjustments apply to all service lines on a medical bill	999	If segment is used and CAS02 DN0544 BILL ADJUSTMENT REASON CODE is null then error	1	Required Data Element Missing	R	291

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
104	MC	0544	CAS02 CAS05 CAS08	BILL ADJUSTMENT REASON CODE	<p>Required when adjustments apply to all service lines on a medical bill containing more than one line or when submitting aggregate or summary records. DN0544 Bill Adjustment Reason Code must be present for a replacement bill (BSRC=05)</p> <p>If the Bill adjustment amount exists then Bill adjustment reason code must exist and vice versa.</p>	999	For others: If segment is used and DN0545 BILL ADJUSTMENT AMOUNT is not null and DN0544 BILL ADJUSTMENT REASON CODE is null then error	2	Conditional required data element missing	R	292
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0544 BILL ADJUSTMENT REASON CODE is not null and not exists in database then error	058	Code/ID invalid	IR	293
105	MC	0545	CAS03 CAS06 CAS09	BILL ADJUSTMENT AMOUNT	<p>Required element in Situational segment (CAS03) Situational element in Situational segment (CAS06,CAS09)</p> <p>Required when DN0544 Bill Adjustment Reason Code in CAS02 is present. Required when adjustments apply to all service lines on a medical bill containing more than one line or when submitting aggregate or summary records. When balancing amounts use this approach: • Adjustments DECREASE the payment when the adjustment amount is POSITIVE. • Adjustments INCREASE the payment when the adjustment amount is NEGATIVE (-).</p> <p>If the Bill adjustment amount exists then Bill adjustment reason code must exist and vice versa</p>	999	If segment is used and CAS03 DN0545 BILL ADJUSTMENT AMOUNT is null then error	1	Required Data Element Missing	R	294
						999	For others: If DN0544 BILL ADJUSTMENT REASON CODE is not null and DN0545 BILL ADJUSTMENT AMOUNT is null then error	2	Conditional required data element missing	R	295
						999	If DN0545 BILL ADJUSTMENT AMOUNT is not null and not numeric then error	6	Invalid Character In Data Element	R	296
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0501 TOTAL CHARGE PER BILL <> DN0516 TOTAL PAID PER BILL + SUM(DN0545 BILL ADJUSTMENT AMOUNT) + sum(DN0733 SERVICE ADJUSTMENT AMOUNT for all lines) then error	064	Invalid data relationship	IR	297
106	MC	0546	CAS04 CAS07 CAS10	BILL ADJUSTMENT UNITS	<p>Situational element in Situational segment</p> <p>Required when DN0545 Bill Adjustment Reason Code in CAS03 is present.</p>	999	If segment is used and DN0543 BILL ADJUSTMENT GROUP CODE is not null and CAS04 DN0544 BILL ADJUSTMENT UNIT is null then error	1	Required Data Element Missing	R	298
						999	If DN0546 BILL ADJUSTMENT UNITS is not null and not numeric then error	6	Invalid Character In Data Element	R	299
107	MC	0760	AMT*C4 AMT02	PRIOR ACTUAL AMOUNT PAID	<p>Required element in Situational segment</p> <p>Required for lien bills, when reporting bill adjudication actions related to a medical bill that has previously been reported. For Replacement Bills, Prior Actual Amount Paid must be reported.</p>	999	If segment is used and DN0760 PRIOR ACTUAL AMOUNT PAID is null then error	1	Required Data Element Missing	R	300
						999	If segment is used and DN0760 PRIOR ACTUAL AMOUNT PAID is not null and not numeric then error	6	Invalid Character In Data Element	R	301
						824	If DN0508 BILL SUBMISSION REASON CODE = 00 and BILL IDENTIFIER <> L and DN0760 PRIOR ACTUAL AMOUNT PAID is not null then error	064	Invalid data relationship	IR	302
						824	If DN0508 BILL SUBMISSION REASON CODE = '05' and (DN0760 PRIOR ACTUAL AMOUNT PAID is null and DN0761 LINE ITEM PRIOR ACTUAL AMOUNT PAID is null on all lines) then error	001	Mandatory field not present	IR	303
108	MC	0547	LX	LINE NUMBER	<p>Required element in Situational segment (LX) Do not send for lien bills and for cancellation</p> <p>Sequence number starting from 1</p> <p>Situational element in Situational segment (SVD)</p> <p>Bundled line number should not exceed total lines for the bills</p>	999	IF BILL IDENTIFIER = 'L' and bill has lines then IK3 error	2	Unexpected segment	R	304
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BUNDLED LINE NUMBER is not null and > total count of lines for the bill then error	064	Invalid data relationship	IR	305
					<p>Required component in Required element in Situational segment (SV1 and SV3) Required component in Situational element in Situational segment (SV2)</p>	999	If segment is used and (SV101-1 = HC or SV202-1 = HC or SV301-1=HC) and DN0714 HCPCS LINE PROCEDURE BILLED CODE is null then error	1	Required Data Element Missing	R	306

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
109	MC	0714	SV101-2 SV202-2 SV301-2	HCPCS LINE PROCEDURE BILLED CODE	Required when SV101 -1 = HC or SV201-1 = HC or SV301-1 = HC Required when DN0715 (Jurisdiction Procedure Billed code) and DN0721 (NDC Billed code) are not present. Applicable for BILL IDENTIFIER = I, P, D	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (P, I, D) and DN0732 SERVICE ADJUSTMENT REASON CODE <>181 and DN0714 HCPCS LINE PROCEDURE BILLED CODE is not null and not exists in WCIS procedure code lookup table then error	058	Code/ID invalid	IR	307
110	MC	0715	SV101-2 SV202-2	JURISDICTION PROCEDURE BILLED CODE	Required component in Required element in Situational segment (SV1) Required component in Situational element in Situational segment (SV2)  Required when SV101-1 = ER or SV202-1 = ER	999	IF segment is used and (SV101 -1 = ER or SV202-1 = ER) and DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0714 JURISDICTION PROCEDURE BILLED CODE is null then error	1	Required Data Element Missing	R	308
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (P, I) and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0715 JURISDICTION PROCEDURE BILLED CODE is not null and not exists in WCIS procedure code lookup table then error	058	Code/ID invalid	IR	309
111	MC	0721	SV1/LIN/K3 SV101-2 LIN03  SV4 SV402-2	NDC BILLED CODE	Required component in Required element in Situational segment (SV1, SV4) Required element in Situational segment (LIN)  Required when SV101-1 =N4 or SV402-1 = N4	999	IF segment is used and (SV101 -1 = N4 or SV402-1 = N4) and DN0721 NDC BILLED CODE is null then error	1	Required Data Element Missing	R	310
						999	If LIN segment is used and LIN03 is null then error.	1	Required Data Element Missing	R	311
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'R' and DN0732 SERVICE ADJUSTMENT REASON CODE <> 16 and DN0544 BILL ADJUSTMENT REASON CODE <> 16 and DN0721 NDC BILLED CODE is not null and not exists in WCIS NDC code lookup table then error	058	Code/ID invalid	IR	312
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'P' and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0721 NDC BILLED CODE is not null and not exists in WCIS procedure code lookup table then error	058	Code/ID invalid	IR	313
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'R' and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0721 NDC BILLED CODE is (NOT NULL and does not start with 'HC_' and not exists in WCIS procedure code lookup table) then error	058	Code/ID invalid	IR	314
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'R' and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0721 NDC BILLED CODE is (NOT NULL and starts with 'HC_' and characters after 'HC_' is null) then error	058	Code/ID invalid	IR	315
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'R' and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0721 NDC BILLED CODE is (NOT NULL and starts with 'HC_' and characters after 'HC_' is not null and not exists in WCIS procedure code lookup table) then error	058	Code/ID invalid	IR	316

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (P, R) and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0721 NDC BILLED CODE is not null and not exists in WCIS procedure code lookup table then error	058	Code/ID invalid	IR	317
112	AR	0717	SV101-3 to 6 SV202-3 to 6 SV301-3 to 6	HPCPS MODIFIER BILLED CODE	Situational component in Required element in Situational segment (SV1, SV3) Situational component in Situational element in Situational segment (SV2)	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (P, I, D) and DN0732 SERVICE ADJUSTMENT REASON CODE <> 182 (Procedure modifier was invalid on the date of service.) and DN0717 HPCPS MODIFIER BILLED CODE is not null and not exists in WCIS procedure code lookup table then error	058	Code/ID invalid	IR	318
113	AR	0718	SV101-3 to 6 SV202-3 to 6 SV301-3 to 6	JURISDICTION MODIFIER BILLED CODE	Situational component in Required element in Situational segment (SV1, SV3) Situational component in Situational element in Situational segment (SV2)	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (P, I) and DN0732 SERVICE ADJUSTMENT REASON CODE <> 182 (Procedure modifier was invalid on the date of service.) and DN0718 JURISDICTION MODIFIER BILLED CODE is not null and not exists in WCIS procedure code lookup table then error	058	Code/ID invalid	IR	319
114	MC	0551	SV101-7 SV202-7 SV301-7	PROCEDURE DESCRIPTION	Situational component in Required element in Situational segment (SV1, SV3) Situational component in Situational element in Situational segment (SV2)  No validation	999	If DN0551 PROCEDURE DESCRIPTION > 80 characters then error	5	Data element too long	R	320
115	M	0552	SV102 SV203 SV302	TOTAL CHARGE PER LINE	Required element in Situational segment  (From population restriction spreadsheet) For transactions that do not contain DN0545 (Bill Adjustment Amount), line level balancing is required and occurs independently for each individual service line reported in the transaction.	999	If segment is used and DN0552 TOTAL CHARGE PER LINE is null then error	1	Required Data Element Missing	R	321
						999	IF DN0552 TOTAL CHARGE PER LINE is not null and not numeric then error	6	Invalid Character In Data Element	R	322
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER <> R and DN0545 BILL ADJUSTMENT AMOUNT = 0 or is null and DN0552 TOTAL CHARGE PER LINE <> (sum(DN0574 TOTAL AMOUNT PAID PER LINE + DN0733 SERVICE ADJUSTMENT AMOUNT)) then error	064	Invalid data relationship	IR	323
116	M	0553	SV103 SV204 CTP05	DAYS(S)/UNIT(S) CODE	Required element in Situational segment  Valid values: DA = Days MJ = Minutes (Only for Professional Bills - SV1 ) UN = Unit ' (For compound drugs) F2 = International Unit GR = Gram ME = Milligram ML = Milliliter UN = Unit	999	If segment is used and DN0553 DAYS UNITS CODE is null then error	1	Required Data Element Missing	R	324
						999	If CTP segment is used and CTP05 is not null and not in (F2,GR,ME,ML,UN) then error	7	Invalid Code Value	R	325
						999	IF (SV1 segment is used and DN0553 DAYS UNITS CODE is not null and DAYS UNIT CODE not in (DA, MJ, UN)) or (SV2 segment is used and DN0553 DAYS UNITS CODE is not null and DAYS UNIT CODE not in (DA, UN)) then error	7	Invalid Code Value	R	326
117	M	0554	SV104 SV205	DAY(S) /UNIT(S) BILLED	Required element in Situational segment  Must be all digits	999	If segment is used and DN0554 DAYS UNITS BILLED is null then error	1	Required Data Element Missing	R	327
						999	IF DN0554 DAYS UNITS BILLED is not null and not all digits then error	6	Invalid Character In Data Element	R	328
118	MC	0600	SV105 SV303	PLACE OF SERVICE LINE CODE	Situational element in Situational segment  Must be a valid code. Applicable for BILL IDENTIFIER = P, D	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (P, D) and DN0600 PLACE OF SERVICE LINE CODE is not null and does not exist in WCIS lookup table then error	058	Code/ID invalid	IR	329
					Required component in Required element in Situational segment (SV107-1 and SV311-1)	999	If segment is used and SV107-1 DN0557 DIAGNOSIS POINTER is null then error	1	Required Data Element Missing	R	330

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
119	M	0557	SV107-1 to 4 SV311-1 to 4	DIAGNOSIS POINTER	Situational component in Required element in Situational segment (SV107-3 to 4 and SV311-2 to 4)  BillsReporting SV311 for Dental Bills is voluntary	999	If DN0557 DIAGNOSIS POINTER is not null and not between 1 to 12 then error	7	Invalid Code Value	R	331
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and Bill Identifier in (P,D) and DN0557 DIAGNOSIS POINTER = N and DN0522 DIAGNOSIS CODE ICD9/ICD10 in Nth position of HI diagnosis segment is null then error. Nth position (N = 1,2,3,4,5,6,7,8,9,10,11 12) .  DN0557 DIAGNOSIS POINTER VALUE must be between 1 to 12.	064	Invalid data relationship	IR	332
120	MC	0742	SV121 SV309	PROVIDER AGREEMENT LINE CODE	Situational element in Situational segment  Required when the provider agreement code at the line level is different than DN0507 Valid values are: H = Health Maintenance Organization (HMO) Agreement N = No Agreement P = Participation Agreement Y = Preferred Provider Organization (PPO) Agreement	999	If DN0742 PROVIDER AGREEMENT LINE CODE is not null and not in (H, N, P, Y) then error	7	Invalid Code Value	R	333
121	M	0559	SV201	REVENUE BILLED CODE	Required element in Situational segment  A valid code must be reported	999	If segment is used and DN0559 REVENUE BILLED CODE is null then error.	1	Required Data Element Missing	R	335
						824	If DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and BILL IDENTIFIER = I and DN0559 REVENUE BILLED CODE is not null and not exists in WCIS code lookup table then error.	058	Code/ID invalid	IR	336
122	MC	0625	SV202-2	HIPPS RATE CODE	Required component in Situational element in Situational segment  Required when SV202-1 = HP. A valid code must be reported	999	If segment is used and SV202-1 = HP and DN0625 HIPPS RATE CODE is null then error	1	Required Data Element Missing	R	337
						824	If DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and BILL IDENTIFIER = I and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0625 HIPPS RATE CODE is not null and not exists in WCIS HIPPS rate code lookup table then error	058	Code/ID invalid	IR	338
123	MG	0719	SV301-2	ADA PROCEDURE BILLED CODE	Required component in Required element in Situational segment  Required for dental bills. A valid code must be reported	999	If segment is used and SV301-1=AD and DN0719 ADA PROCEDURE BILLED CODE is null then error	1	Required Data Element Missing	R	339
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = D and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0719 ADA PROCEDURE BILLED CODE is not null and not exists in WCIS procedure code lookup table then error	058	Code/ID invalid	IR	340
124	M	0561	SV401	PRESCRIPTION LINE NUMBER	Required element in Situational segment  Required when reporting prescription drug services delivered by a retail pharmacy or mail order pharmacy. Cannot be ~ or *	999	If segment is used and DN0561 PRESCRIPTION LINE NUMBER is null then error	1	Required Data Element Missing	R	341
					Required element in Situational segment  Required for Pharmacy Bills	999	If segment is used and DN0562 DISPENSE AS WRITTEN CODE IS NULL then error	1	Required Data Element Missing	R	342

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
125	M	0562	SV405	DISPENSE AS WRITTEN CODE	Valid values are: 0 = Not Dispense as Written (DAW) 1 = Physician Dispense as Written (DAW) 2 = Patient Dispense as Written (DAW) 3 = Pharmacy Dispense as Written (DAW) 4 = No generic available 5 = Brand Dispensed as Generic Override 6 = Override 7 = Substitution not allowed – Brand Drug mandated by law 8 = Substitution allowed - Generic Drug not available 9 = Other	999	If DN0562 DISPENSE AS WRITTEN CODE is not null and not between 0 and 9 then error	7	Code/ID invalid	R	343
126	AA	0563	SV408	DRUG NAME	Situational element in Situational segment	999	If DN0563 DRUG NAME is not null and length > 80 then error	5	Data element too long		344
127	MC	0762	SV410	COMPOUND DRUG INDICATOR	Situational element in Situational segment  Required when DN0721 is billed as a compound drug. Valid values are: Y = Compound Drug N = Noncompound Drug U = Nonspecified Drug Compound	999	If DN0762 COMPOUND DRUG INDICATOR is not null and not in (Y, N, U) then error	7	Invalid Code Value	R	345
128	M	0605	DTP*472 DTP03	SERVICE LINE DATE(S) RANGE	Required element in Required segment when loop 2400 is used	999	If Loop 2400 is used and DN0605 SERVICE LINE DATE RANGE is null then error	1	Required Data Element Missing	R	346
					Valid dates must be reported. The occupational diseases or cumulative injuries are reported in the First Report of Injury (FROI) as Nature of Injury codes 60 through 80.	999	If DTP02 = D8 and DN0605 SERVICE LINE DATE RANGE < 8 then error	4	Data element too short	R	348
					Service Line Date Range must be >= Date of Injury except for Occupational/Cummulative Injuries.	999	If DTP02 = RD8 and DN0605 SERVICE LINE DATE RANGE < 17 then error	4	Data element too short	R	349
						999	If DTP02 = D8 and DN0605 SERVICE LINE DATE RANGE > 8 then error	5	Data element too long	R	350
						999	If DTP02 = RD8 and DN0605 SERVICE LINE DATE RANGE > 17 then error	5	Data element too long	R	351
						999	If DN0605 SERVICE LINE DATE TO format is not CCYYMMDD then error	8	Invalid date	R	352
						999	If DN0605 SERVICE LINE DATE FROM format is not CCYYMDD then error	8	Invalid Date	R	353
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0605 SERVICE LINE DATE FROM > DN0605 SERVICE LINE TO then error	075	Service date from should be less than Service date to	IR	354
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and (DN0544 BILL ADJUSTMENT REASON CODE <>110 OR DN0732 SERVICE ADJUSTMENT REASON CODE <> 110 ) and DN0510 DATE OF BILL is not null and DN0510 DATE OF BILL < DN0605 SERVICE LINE DATE FROM TO) then error  RED01 reads: DN0510 DATE OF BILL <value> is before DN605 SERVICE LINE DATE FROM	071	Must be >= Service Date	IR	355
	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <>G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <> G5 (for any of the lines)) ) and DN0605 SERVICE LINE DATE TO < DN0031 DATE OF INJURY then error	034	Must be >= Date of Injury	IR	356					

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <>G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <> G5 (for any of the lines)) ) and DN0605 SERVICE LINE DATE FROM < DN0031 DATE OF INJURY then error	034	Must be >= Date of Injury	IR	357
129	M	0604	DTP*471 DTP03	PRESCRIPTION LINE DATE	Required element in Situational segment	999	If segment is used and DN0604 PRESCRIPTION LINE DATE is null then error	1	Required Data Element Missing	R	358
					Required for Pharmacy Bills. PRESCRIPTION LINE DATE must be >= Date of Injury except for Occupational/Cummulative Injuries. The occupational diseases or cumulative injuries are reported in the First Report of Injury (FROI) as Nature of Injury codes 60 through 80.	999	If DTP02 = D8 and DN0604 PRESCRIPTION LINE DATE > 8 then error	5	Data element too long	R	359
						999	If DN0604 PRESCRIPTION LINE DATE format is not CCYYMMDD then error	8	Invalid date	R	360
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = R and DN0604 PRESCRIPTION LINE DATE RANGE is null then error	001	Mandatory field not present	IR	361
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = R and DN0604 PRESCRIPTION LINE DATE > DN0605 SERVICE LINE FROM then error	070	Must be <= Service Date	IR	362
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL_IDENTIFIER = R and (FROI NATURE OF INJURY CODE NOT between 60 and 80 or (DN0544 BILL ADJUSTMENT REASON CODE <>G5 and DN0732 SERVICE ADJUSTMENT REASON CODE <> G5 (for any of the lines)) ) and DN0604 PRESCRIPTION LINE DATE is not null and < DN0031 DATE OF INJURY then error	034	Must be >= Date of Injury	IR	363
130	M	0570	QTY*QB QTY02	DRUGS/SUPPLIES QUANTITY DISPENSED	Situational segment	999	If segment is used and BILL IDENTIFIER <> R then IK3 error	2	Unexpected segment	R	364
					Required element in Situational segment	999	If segment is used and DN0570 is null then error	1	Required Data Element Missing	R	365
					Required when the SV4 Drug Service segment is reported.	999	If DN0570 DRUGS/SUPPLIES QUANTITY DISPENSED and not all digits then error	6	Invalid Character In Data Element	R	366
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = R and DN0570 DRUGS/SUPPLIES QUANTITY DISPENSED is null then error	001	Mandatory field not present	IR	367
131	M	0571	QTY*SP QTY02	DRUGS/SUPPLIES NUMBER OF DAYS	Situational segment	999	If segment is used and BILL IDENTIFIER <> R then IK3 error	2	Unexpected segment	R	368
					Required element in Situational segment	999	If segment is used and DN0571 DRUGS/SUPPLIES NUMBER OF DAYS is null then error	1	Required Data Element Missing	R	369
					Required when the SV4 Drug Service segment is reported.	999	If DN0571 DRUGS/SUPPLIES NUMBER OF DAYS is not null and not all digits then error	6	Invalid Character In Data Element	R	370
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = R and DN0571 DRUGS/SUPPLIES NUMBER OF DAYS is null then error	001	Mandatory field not present	IR	371
					Required element in Situational segment	999	If segment is used and DN0741 CONTRACT LINE TYPE CODE is null then error	1	Required Data Element Missing	R	372
					Required if there is a contract between the Insurer and the sevice provider. Valid values are: 01 = Diagnosis Related Group (DRG) 02 = Per Diem	999	If DN0741 CONTRACT LINE TYPE CODE is not null and not exists in the valid values then error	7	Code/ID invalid	R	373

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
132	MC	0741	CN101	CONTRACT LINE TYPE CODE	03 = Variable Per Diem 04 = Flat 05 = Capitated 06 = Percent 09 = Other	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0507 PROVIDER AGREEMENT CODE in (H,P,Y) and DN0741 CONTRACT LINE TYPE CODE is null then error  RED01 to read: NONE when DN0507 PROVIDER AGREEMENT CODE = <content of DN0507 PROVIDER AGREEMENT CODE>	064	Invalid Date Relationship	IR	374
133	AR	0579	AMT*D7 AMT02	DRUGS/SUPPLIES DISPENSING FEE	Situational segment	999	If segment is used and BILL IDENTIFIER <> 'R' then IK3 error	2	Unexpected segment	R	375
					Required element in Situational segment	999	If segment is used and DN0579 DRUGS/SUPPLIES DISPENSING FEE is null then error	1	Required Data Element Missing	R	376
					Required when reporting prescription drug services delivered by a retail pharmacy or mail order pharmacy and the dispensing fee is not being reported as a separate service line. The dispensing fee field can also be used to report a compounding fee.	999	If DN0579 DRUGS/SUPPLIES DISPENSING FEE is not numeric then error	6	Invalid Character In Data Element	R	377
134	M	0572	AMT*PB AMT02	DRUGS/SUPPLIES BILLED AMOUNT	Required element in Situational segment	999	If segment is used and DN0572 DRUGS/SUPPLIES BILLED AMOUNT is null then error	1	Required Data Element Missing	R	378
					Required when reporting prescription drug services delivered by a retail pharmacy or mail order pharmacy.(From population restrictions spreadsheet) For transactions that do not contain DN0545 (Bill Adjustment Amount), line level balancing is required and occurs independently for each individual service line reported in the transaction. For each service line reported for bills that were not adjusted at the bill level, the amount reported for the total charge at the line level (DN0552, and DN0572) must balance to the sum of all payments and adjustments associated with that service line, including: • DN0574 (Total Amount Paid Per Line); and • DN0733 (Service Adjustment Amount) See 1.3.2 Line Level Balancing in the IAIABC Medical 2.0 Imp Guide for additional information and examples.	999	If DN0572 DRUGS/SUPPLIES BILLED AMOUNT is not null and not numeric then error	6	Invalid Character In Data Element	R	379
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'R' and DN0572 DRUGS/SUPPLIES BILLED AMOUNT is null then error	001	Mandatory data element missing	IR	380
						824	If BILL IDENTIFIER = R and DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0545 BILL ADJUSTMENT AMOUNT = 0 or is null and DN0572 DRUGS/SUPPLIES BILLED AMOUNT <> sum (DN0574 TOTAL AMOUNT PAID PER LINE + DN0733 SERVICE ADJUSTMENT AMOUNT) then error	064	Invalid data relationship	IR	381
135	MC	0721 <sup>1</sup>	K3 <sup>1</sup> K301	Original NDC Billed Code	Situational Segment K3 segment should only be used on Professional bills	999	If segment is used and BILL_IDENTIFIER <> P then IK3 error	2	Unexpected segment	R	382
					Required element in Situational segment	999	If segment is used and K301 is null then error	1	Required Data Element Missing	R	383
					The ORIGN4 is required as the prefix to the original NDC number	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = P and Original NDC Billed Code in K3 segment is not null and does not start with ORIGN4 then error	058	Code/ID invalid	IR	384
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = P and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0721 NDC BILLED CODE prefixed with ORGIN4 does not exist in WCIS look up table then error	058	Code/ID invalid	IR	385
136	MC		LIN	Drug Identificaton	Situational Segment LIN segment should only be used on Professional Bills	999	If segment is used and BILL IDENTIFIER <> P then IK3 error	2	Unexpected segment	R	386
137	MC		CTP	Drug Pricing	Situational Segment CTP segment should only be used on Professional Bills	999	If segment is used and BILL IDENTIFIER <> P then IK3 error	2	Unexpected segment	R	387
138	MC		CTP04	Quantity	Required element in situational segment	999	If segment is used and CTP04 is null then error.	1	Required Data Element Missing	R	388
					Numeric value of quantity	999	If CTP04 is not numeric then error	6	Invalid Character in Data Element	R	389
139	MC	0553	CTP05-1	UNIT OF MEASUREMENT CODE	Required element in situational segment Valid values are: F2 = International Unit GR = Gram ME = Milligram ML = Milliliter UN = Unit	999	If segment is used and CTP05 is null then error.	1	Required Data Element Missing	R	390
						999	If CTO05-1 is not in (F2, GR,ME,ML. UN) then error.	7	Invalid Code Value	R	391
140	MC		REF	Prescription or Compound Drug Association Number	Situational Segment REF*VY/XZ should only be used on Professional bills	999	If REF segment is used in loop 2410 and BILL IDENTIFIER <> P then IK3 error	2	Unexpected segment	R	392

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
141			REF01 <sup>1</sup> REF*VY/XZ1	Reference ID Qualifier	Required element in Situational Segment  Values VY = Link Sequence Number XZ = Pharmacy Prescription Number	999	If segment is used in loop 2410 and REF01 is null then error	1	Required Data Element Missing	R	393
						999	If REF segment is used in loop 2410 and REF01 is not null and not in (VY, XZ) then error	7	Invalid Code Value	R	394
142			REF02 <sup>1</sup>	Prescription Number	Required element in Situational Segment	999	If REF segment is used in loop 2410 and REF02 is null then error	1	Required Data Element Missing	R	395
144	MC	0589	NM1*82 NM103	RENDERING LINE PROVIDER LAST/GROUP NAME	Required element in Situational segment  Required when different than DN0638 Rendering Bill Provider Last/Group Name	999	If segment is used and DN0589 RENDERING LINE PROVIDER LAST/GROUP NAME is null then error	1	Required Data Element Missing	R	397
145	MC	0587	NM104	RENDERING LINE PROVIDER FIRST NAME	Situational element in Situational segment  Required when NM102 = 1	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and RENDERING LINE PROVIDER ENTITY TYPE = 1 and DN0587 RENDERING LINE PROVIDER FIRST NAME is null then error	001	Mandatory field not present	IR	398
146	MC	0592	NM109	RENDERING LINE PROVIDER NATIONAL PROVIDER ID	Situational element in Situational segment Required when DN0589 is present and the provider is eligible for NPI.	999	If NM108 contains qualifier 'XX' and DN0592 RENDERING LINE PROVIDER NATIONAL PROVIDER ID is null then error and vice versa	2	Conditional required data element missing	R	399
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and (DN0732 SERVICE ADJUSTMENT REASON CODE not in ('207', '208') AND DN0544 BILL ADJUSTMENT REASON CODE not in ('207', '208')) and DN0592 RENDERING LINE PROVIDER NATIONAL PROVIDER ID is not null and does not exist in WCIS NPI lookup table then error.	058	Code/ID invalid	IR	400
147	M	0595	PRV*PE PRV03	RENDERING LINE PROVIDER PRIMARY SPECIALTY CODE	Required element in Situational segment	999	If segment is used and DN0595 RENDERING LINE PROVIDER PRIMARY SPECIALTY CODE is null then error	1	Required Data Element Missing	R	401
						824	If DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and DN0589 RENDERING LINE PROVIDER LAST/GROUP NAME is not null and DN0595 RENDERING LINE PROVIDER PRIMARY SPECIALTY CODE is null then error	001	Mandatory field not present	IR	402
						824	If DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and DN0595 RENDERING LINE PROVIDER PRIMARY SPECIALTY CODE is not null and not exists in code table then error	058	Code/ID invalid	IR	403
148	MC	0599	REF*0B REF02	RENDERING LINE PROVIDER STATE LICENSE NUMBER	Required element in Situational segment  If license number is not available report all 9's. All 9's are valid	999	If segment is used and DN0599 RENDERING LINE PROVIDER STATE LICENSE NUMBER is null then error	1	Required Data Element Missing	R	404
						999	If DN0599 RENDERING LINE PROVIDER STATE LICENSE NUMBER contain characters other than A-Z, 0-9, or space then error.	6	Invalid Character In Data Element	R	405
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0589 RENDERING LINE PROVIDER LAST NAME is not null and DN0592 RENDERING LINE PROVIDER NATIONAL PROVIDER ID is null and DN0586 RENDERING LINE PROVIDER FEIN is null and DN0599 RENDERING LINE PROVIDER STATE LICENSE NUMBER is null then error	001	Mandatory field not present	IR	406
149	MC	0574	SVD02	TOTAL AMOUNT PAID PER LINE	Required element in Situational segment  Must be numeric	999	If segment is used and DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0574 TOTAL AMOUNT PAID PER LINE is null then error	1	Required Data Element Missing	R	407
						999	If DN0574 TOTAL AMOUNT PAID PER LINE is not null and not numeric then error	6	Invalid Character In Data Element	R	408
						824	If DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and Bill identifier <=> 'L' and DN0574 TOTAL AMOUNT PAID PER LINE is null then error	001	Mandatory field not present	IR	409

S.no#	Requirment Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
150	MC	0722	SVD03-2	ADA PROCEDURE PAID CODE	Required component in Situational element in Situational segment Required when SVD03-1 = AD	999	If segment is used and SVD03-1 = AD and DN0722 ADA PROCEDURE PAID CODE is null then error	1	Required Data Element Missing	R	410
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and BILL IDENTIFIER = 'D' and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0722 ADA PROCEDURE PAID CODE is not null and not exists in WCIS procedure code lookup table then error	058	Code/ID invalid	IR	411
						824	If DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and BILL IDENTIFIER = 'D' and DN0722 ADA PROC PAID CODE is nulland DN0726 HCPCS LINE PROCEDURE PAID CODE is null then error	001	Mandatory field not present	R	412
151	MC	0726	SVD03-2	HCPCS LINE PROCEDURE PAID CODE	Required component in Situational element in Situational segment Required when SVD03-1 = HC	999	IF segment is used and SVD03-1 = HC and DN0726 HCPCS LINE PROCEDURE PAID CODE is null then error.	1	Required Data Element Missing	R	413
						824	If DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and BILL IDENTIFIER= P and DN0726 HCPCS LINE PROCEDURE PAID CODE is null and DN0728 NDC PAID CODE is null and DN0729 JURISDICTION PROCEDURE PAID CODE is null then error	001	Mandatory field not present	IR	414
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00, 02, 05) and BILL IDENTIFIER in (P,I,D) and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0726 HCPCS LINE PROCEDURE PAID CODE is not null and not exists in code table then error	058	Code/ID invalid	IR	415
152	MC	0728	SVD03-2	NDC PAID CODE	Required component in Situational element in Situational segment Required when SVD03-1 = N4  Required for pharmacy bills and professional bills when DME or others prescription are dispensed by the rendering provider.	999	If segment is used and SVD03-1 = N4 and DN0728 NDC PAID CODE is null then error	1	Required Data Element Missing	R	416
						824	If BILL IDENTIFIER = R and DN0728 NDC PAID CODE is null then error	001	Mandatory field not present	IR	417
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER <> 'R' and DN0732 SERVICE ADJUSTMENT REASON CODE <> 16 and DN0544 BILL ADJUSTMENT REASON CODE <> 16 and DN0728 NDC PAID CODE is not null and not exists in WCIS NDC code lookup table then error	058	Code/ID invalid	IR	418
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'P' and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0728 NDC PAID CODE is not null and not exists in code table then error	058	Code/ID invalid	IR	419
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'R' and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0728 NDC PAID CODE is (NOT NULL and does not start with 'HC_' and not exists in WCIS procedure code lookup table) then error	058	Code/ID invalid	IR	420
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'R' and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0728 NDC PAID CODE is (not null and starts with 'HC_' and characters after 'HC_' is null) then error	058	Code/ID invalid	IR	421

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
						824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = 'R' and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0728 NDC PAID CODE is (NOT NULL and starts with 'HC_' and characters after 'HC_' is not null and not exists in WCIS procedure code lookup table) then error	058	Code/ID invalid	IR	422
153	MC	0729	SVD03-2	JURISDICTION PROCEDURE PAID CODE	Required component in Situational element in Situational segment	999	If segment is used and SVD03-1 = ER and DN0729 JURISDICTION PROCEDURE PAID CODE is null then error	1	Required Data Element Missing	R	423
					Required when SVD03-1 = ER	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (I, P) and DN0732 SERVICE ADJUSTMENT REASON CODE <> 181 and DN0729 JURISDICTION PROCEDURE PAID CODE is not null and not exists in WCIS procedure code lookup table then error	058	Code/ID invalid	IR	424
154	MC	0727	SVD03-3 to 6	HCPCS MODIFIER PAID CODE	Situational component in Situational element in Situational segment Required when the DN0726 HCPCS LINE PROCEDURE PAID CODE procedure has been modified.	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (P,I,D) and DN0732 SERVICE ADJUSTMENT REASON CODE <> 182 and DN0727 HCPCS MODIFIER PAID CODE is not null and not exists in WCIS modifier code lookup table then error	058	Code/ID invalid	IR	425
155	MC	0730	SVD03-3 to 6	JURISDICTION MODIFIER PAID CODE	Situational component in Situational element in Situational segmen Required when DN0727 JURISDICTION PROCEDURE PAID CODE procedure has been modified.	824	IF DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (I, P) and DN0732 SERVICE ADJUSTMENT REASON CODE <> 182 and DN0730 JURISDICTION MODIFIER PAID CODE is not null and not exists in code modifier code table then error	058	Code/ID invalid	IR	426
156	MC	0576	SVD04	REVENUE PAID CODE	Situational element in Situational segment Required for Institutional bills.	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = I and DN0576 REVENUE PAID CODE is null then error	001	Mandatory field not present	IR	427
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER = I and DN0576 REVENUE PAID CODE is not null and not exists in WCIS revenue code lookup table then error	058	Code/ID invalid	IR	428
157	MC	0580		DAYS(S)/UNIT(S) PAID	Situational element in Situational segment Required for Institutional and Professional	999	IF DN0580 DAY(S)/UNIT(S) PAID is not null and not all digits then error	6	Invalid Character In Data Element	R	431
						824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and BILL IDENTIFIER in (I, P) and DN0580 DAY(S)/UNIT(S) PAID is null then error	001	Mandatory field not present	IR	432
					Required element in Situational segment For non pharmaceutical bills, required when DN0574 Total Amount Paid Per	999	If segment is used and DN0731 SERVICE ADJUSTMENT GROUP CODE is null then error	1	Required Data Element Missing	R	433

S.no#	Requirement Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
158	MC	0731	CAS01	SERVICE ADJUSTMENT GROUP CODE	Line is not equal to DN0552 Total Charge Per Line and the sum of all DN0574 Total Amount Paid Per Line plus all DN0545 Bill Adjustment Amounts reported in the 2320 CAS segments plus all DN0733 Service Adjustment Amounts reported in the 2430 CAS segments does not equal DN0501 Total Charge Per Bill minus DN0516 Total Amount Paid Per Bill. Required when line level adjustments are applied. For pharmaceutical bills, required when DN0574 Total Amount Paid Per Line is not equal to DN0572 Drug/Supplies Billed Amount and the sum of all DN0574 Total Amount Paid Per Line plus all DN0545 Bill Adjustment Amounts reported in the 2320 CAS segments plus all DN0733 Service Adjustment Amounts reported in the 2430 CAS segments does not equal DN0501 Total Charge Per Bill minus DN0516 Total Amount Paid Per Bill Valid values are - CO = Contractual Obligations CR = Corrections and Reversals OA = Other Adjustments PI = Payer Initiated Reductions PR = Patient Responsibility RR = Regulatory Requirement CAS02	999	IF DN0731 SERVICE ADJUSTMENT GROUP CODE is not null and not in (CO, CR, OA, PI, PR, RR) then error	7	Invalid Code Value	R	434
159	MC	0732	CAS02 CAS05 CAS08 CAS11 CAS14	SERVICE ADJUSTMENT REASON CODE	Required element in Situational segment (CAS02)	999	IF segment is used and CAS02 DN0732 SERVICE ADJUSTMENT REASON CODE is null then error	1	Required Data Element Missing	R	435
					Situational element in Situational segment (CAS05, CAS08, CAS11, CAS14)	999	For CAS05,CAS08,CAS11,CAS14:If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and segment is used and DN0733 SERVICE ADJUSTMENT AMOUNT is not null and DN0732 SERVICE ADJUSTMENT REASON CODE is null then error	2	Conditional required data element missing	R	436
					Required when DN0733 Service Adjustment Amount is present. CAS03 is reported. If a duplicate bill is reported (18,B13) then the original bill should exist in database	824	If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and DN0732 SERVICE ADJUSTMENT REASON CODE is not null and not exists in WCIS adjustment reason code lookup table then error	058	Code/ID invalid	IR	437
160	MC	0733	CAS03 CAS06 CAS09 CAS12 CAS15	SERVICE ADJUSTMENT AMOUNT	Required element in Situational segment (CAS03)	999	IF segment is used and CAS03 DN0733 SERVICE ADJUSTMENT AMOUNT is null then error	1	Required Data Element Missing	R	438
					Situational element in Situational segment (CAS06, CAS09, CAS12, CAS15)	999	For CAS06,CAS09,CAS12,CAS15:If DN0508 BILL SUBMISSION REASON CODE in (00,02,05) and segment is used and DN0733 SERVICE ADJUSTMENT AMOUNT is not null and DN0732 SERVICE ADJUSTMENT REASON CODE is null then error	2	Conditional required data element missing	R	439
					When balancing amounts use this approach: • Adjustments DECREASE the payment when the adjustment amount is POSITIVE. • Adjustments INCREASE the payment when the adjustment amount is NEGATIVE (-).	999	If DN0733 SERVICE ADJUSTMENT AMOUNT is not numeric then error	6	Invalid character in data element	R	440
						824	If DN0732 SERVICE ADJUSTMENT REASON CODE (#N) is not null and corresponding DN0733 SERVICE ADJUSTMENT AMOUNT (#N) is null then error	064	Invalid data relationship	IR	441
161	MC	0734	CAS04 CAS07 CAS10 CAS13 CAS16	SERVICE ADJUSTMENT UNITS	Situational element in Situational segment  Note: This data element is required when DN0580 is reported in SVD05 and represents the difference between the quantity billed and the quantity paid.	999	If DN0734 SERVICE ADJUSTMENT UNITS is not null and not all digits then error	6	Invalid Character In Data Element	R	442
162	MC	0761	AMT*C4 AMT02	LINE ITEM PRIOR ACTUAL AMOUNT PAID	Required element in Situational segment	999	If segment is used with qualifier C4 in loop 2430 and DN0761 LINE ITEM PRIOR ACTUAL AMOUNT PAID is null then error	1	Required Data Element Missing	R	443
						999	If DN0761 LINE ITEM PRIOR ACTUAL AMOUNT PAID is not null and not numeric then error	6	Invalid Character In Data Element	R	444
163	M		ST*837		Segment is Required	999	If segment ST*837 is missing then error	3	Required Segment missing	R	445
164	M		BHT*0080		Segment is Required	999	If segment BHT*0080 is missing then error	3	Required Segment missing	R	446

S.no#	Requirment Indicator	DN	Segment Reference	Data Field Name	Requirement Description	999/824	Business Usage/Technical condition	Error Code	Error Message	Error Type	Requirement#
165	M		NM1*41		Segment is Required	999	If segment NM1*41 is missing in loop 1000A then error	3	Required Segment missing	R	447
166	M		NM1*40		Segment is Required	999	If segment NM1*40 is missing in loop 1000B then error	3	Required Segment missing	R	448
167	M		HL*20		Segment is Required	999	If segment HL*20 is missing in loop 2000A then error	3	Required Segment missing	R	449
168	M		DTP*582		Segment is Required	999	If segment DTP*582 is missing in loop 2000A then error	3	Required Segment missing	R	450
169	M		HL*EM		Segment is Required	999	If segment HL*EM is missing in loop 2000B then error	3	Required Segment missing	R	451
170	M		NM1*36		Segment is Required	999	If segment NM1*36 is missing in loop 2010BA then error	3	Required Segment missing	R	452
171	M		HL*CL		Segment is Required	999	If segment HL*CL is missing in loop 2000C then error	3	Required Segment missing	R	453
172	M		DTP*558		Segment is Required	999	If segment DTP*558 is missing in loop 2000C then error	3	Required Segment missing	R	454
173	M		NM1*CC		Segment is Required	999	If segment NM1*CC is missing in loop 2010CA then error	3	Required Segment missing	R	455
174	M		REF*Y1		Segment is Required	999	If segment REF*Y1 is missing in loop 2010CA then error	3	Required Segment missing	R	456
175	M		REF*Y4		Segment is Required	999	If segment REF*Y4 is missing in loop 2010CA then error	3	Required Segment missing	R	457
176	M		CLM*		Segment is Required	999	If segment CLM* is missing in loop 2300 then error	3	Required Segment missing	R	458
177	M		DTP*050		Segment is Required	999	If segment DTP*050 is missing in loop 2300 then error	3	Required Segment missing	R	459
178	M		DTP*434		Segment is Required	999	If segment DTP*434 is missing in loop 2300 then error	3	Required Segment missing	R	460
179	M		DTP*666		Segment is Required	999	If segment DTP*666 is missing in loop 2300 then error	3	Required Segment missing	R	461
180	M		AMT*TP		Segment is Required	999	If segment AMT*TP is missing in loop 2300 then error	3	Required Segment missing	R	462
181	M		REF*DD		Segment is Required	999	If segment REF*DD is missing in loop 2300 then error	3	Required Segment missing	R	463
182	M		REF*2I		Segment is Required	999	If segment REF*2I is missing in loop 2300 then error	3	Required Segment missing	R	464
183	M		NM1*85		Segment is Required	999	If segment NM1*85 is missing in loop 2310A then error	3	Required Segment missing	R	465
184	M		N3*85		Segment is Required	999	If segment N3*85 is missing in loop 2310A then error	3	Required Segment missing	R	466
185	M		N4*85		Segment is Required	999	If segment N4*85 is missing in loop 2310A then error	3	Required Segment missing	R	467
186	M		DTP*472		Segment is Required	999	If segment DTP*472 is missing in loop 2400 then error	3	Required Segment missing	R	468
187	M		SE		Segment is Required	999	If segment SE is missing in loop then error	3	Required Segment missing	R	469

\* To be implemented when CA Guide currently in rulemaking takes effect.