

Sheet1

Loop	Segment	Element	Qualifiers	Reference Name	Instructions
1000A	NM1	09		Sender Name	EMC Receiver/EMC Submitter ID 2 is sent in NM109
2000A	PRV	03	ZZ	Provider Taxonomy Code	Program converts the NSF Specialty Code from Provider information, conversion is based on list provided by Medicare, place Taxonomy Code in Extra 2 to override
2010AA	NM1	09	XX	National Provider Id	In practice information, Extra 1 first 5 characters, @NPI<space>, next 10 characters are NPI
2010AA	REF	09	1J	Facility ID Number	For Payer Number BS085, Send EMC Receiver/Submitter ID 2 in REF02
2010AA	REF		0B	Provider License Number	EMC Payer Number = 80314 or 00621, Send License Number
2010BB	REF		2U FY NF TJ	Payer Secondary ID	Insurance Carrier/EMC Sub ID put 2 character qualifier, 1 space, Value of REF02
2300	REF		P4	Demonstration Project ID	Case Extra 3 = P4DEMO, 1 space, value of REF02
2300	NTE		ADD CER DCP DGN PMT TPO	Claim Note	Case EMC Notes, First character = @, 3 character qualifier, 1space, Value of NTE02
2300	REF		EW	Mammography Certification	Facility information,Extra 2, MC:, 1 space, Value of REF02
2300	CRC		ST S2 NU AV	EPSDT Referral	Case EPSDT is checked, in Case Extra 2, put 2 character value, leaving Extra 2 blank will send NU
2310B	PRV	03	ZZ	Provider Taxonomy Code	Program converts the NSF Specialty Code from Provider information, conversion is based on list provided by Medicare, place Taxonomy Code in Extra 2 to override
2310B	REF		N5	Provider Plan Network ID	EMC Payer Number = 90001, Provider ID is sent with N5 qualifier override in REF01
2310B	REF		0B	Provider License Number	EMC Number = 80314 or 00621, Provider State License Number

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2310D	NM1	9 XX	Facility NPI	In ID field put @NPI<1space><thenpi>
2310D	REF	0B 1A 1B 1C 1D 1G 1H G2 LU N5 TJ X4 X5	Facility Secondary ID	Facility information, ID field, put Character qualifier, 1 space, Value of REF02
2400	NTE	ADD DCP PMT TPO	Transaction Note	Documentation Type 1 through 6, First character = @, 3 character qualifier, 1space, Value of NTE02
2410	LIN	N4	National Drug Code	Medisoft Version 11 only, Procedure Information has National Drug Code field
2410	REF	XZ	Prescription Number	Transaction Note, Type=Other, first 3 = @XZ, 4 = space, Next 30 characters = Prescription Number, National Drug Code must be present
2420A	REF	0B	Provider License Number	Insurance Carrier/EMC Number = 80314 or 00621

Notes/Reference

2U FPPN22

Only applies in Group
or Facility billing

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