

# Medicare 5010A1 271 Transaction Example using the HETS Application

Not all of the information presented in this example will be on every Medicare 271 response. This example is for illustrative purposes only and shows the various eligibility information that a 271 response may contain, including Part A, Part B, SNF, Hospital, Preventive, Smoking Cessation, Blood Deductible, Hospice, MSP, Home Health, Medicare Advantage, Part D, Inactive Periods, Rehabilitation, and Occupational, Physical, & Speech Therapies.

Note: The information shown below is a representative example from the upcoming HETS R2013Q400 release.

**Table 1 - Medicare 5010A1 271 Transaction Example**

271 Segment	HETS Returned Values
ISA*00* *00* *ZZ*CMS *ZZ*SUBMITTERID *130531*0758*^*00501*111111111*0*P* ~	ISA06 = "CMS " (must be 15 bytes) ISA08 = Submitter ID plus spaces (must be 15 bytes)
GS*HB*CMS*SUBMITTERID*20130531*07580000*1*X*005010X279A1~	GS02 = "CMS" GS03 = Submitter ID
ST*271*0001*005010X279A1~	
BHT*0022*11*TRANSA*20130531*07582355~	
HL*1**20*1~	
NM1*PR*2*CMS*****PI*CMS~	NM101 = "PR" NM102 = "2" NM103 = "CMS" NM108 = "PI" NM109 = "CMS"
PER*IC**UR*http://www.cms.gov/HETSHelp/*UR*http://www.cms.gov/center/provider.asp~	
HL*2*1*21*1~	
NM1*1P*2*IRNAME*****XX*1234567890~	NM101 = "1P", "FA", or "80" NM103 = Information Receiver Last/Organization Name NM104 = Information Receiver First Name (when applicable) NM109 = Information Receiver NPI
HL*3*2*22*0~	
TRN*2*TRACKNUM*ABCDEFGHIJ~	
NM1*IL*1*LNAME*FNAME*M***MI*123456789A~	NM103 = Subscriber Last Name NM104 = Subscriber First Name NM105 = Subscriber Middle Initial NM109 = HICN
N3*ADDRESS LINE1*ADDRESS LINE2~	N301/N302 = Subscriber Street Address
N4*CITY*ST*ZIPCODE~	N401/N402/N403 = Subscriber City/State/ZIP
DMG*D8*19400401*F~	DMG02 = Subscriber Date of Birth DMG03 = Subscriber Gender
DTP*307*RD8*20120501-20130531~	DTP03 = Date(s) of Service from the 270 inquiry
<b>The following segments illustrate an Inactive (Alien, Deported, or Incarcerated) period.</b>	
EB*6**30~	
DTP*307*RD8*20120601-20120603~	DTP03 = Part A and Part B Entitlement Inactive Date(s)
<b>The following segment illustrates HETS supported Service Type Codes which are not covered by Medicare</b>	
EB*I**41^54~	
<b>The following segment illustrates active or inactive Pharmacy Coverage</b>	
EB*1**88~	EB01= Status of Coverage "1" or "6"

271 Segment	HETS Returned Values
<b>The following segments illustrate Part A Entitlement/Coverage</b>	
EB*1**30^10^42^45^48^49^69^76^83^A5^A7^AG^BT^BU^BV^MA~	EB03= "30" and applicable HETS supported Service Type Codes which are covered by Part A EB04= "MA"
DTP*291*D8*20050401~	DTP03 = Entitlement and Termination Dates (where applicable)
<b>The following segments illustrate Part A Deductible Financial Data</b>	
EB*C**30*MA**26*1184~	EB07 = Part A Base Deductible 2013
DTP*291*RD8*20130101-20131231~	DTP03=Calendar Year
EB*C**30*MA**26*1156~	EB07 = Part A Base Deductible 2012
DTP*291*RD8*20120101-20121231~	DTP03=Calendar Year
EB*C**30*MA**29*1184~	EB07 = Part A Base Deductible as Remaining 2013
DTP*291*RD8*20130101-20131231~	DTP03= Calendar Year
EB*C**30*MA**29*1156~	EB07 = Part A Base Deductible as Remaining 2012
DTP*291*RD8*20120101-20121231~	DTP03= Calendar Year
EB*C**30*MA**29*0~	EB07 = Part A Spell Deductible Remaining
DTP*291*RD8*20130514-20130520~	DTP03 = Part A Spell DOEBA-DOLBA for Deductible Remaining
<b>The following segments illustrate Part A Free Services</b>	
EB*C**42^45*MA**26*0~	EB03= Applicable HETS supported Service Type Codes which are 100% covered by Part A
DTP*292*RD8*20130101-20131231~	EB07 = 0 to display the Part A Base Deductible is not applicable
EB*C**42^45*MA**26*0~	DTP03= Calendar Year
DTP*292*RD8*20120101-20121231~	EB03= Applicable HETS supported Service Type Codes which are 100% covered by Part A
EB*C**42^45*MA**26*0~	EB07 = 0 to display the Part A Base Deductible is not applicable
DTP*292*RD8*20120101-20121231~	DTP03= Calendar Year
<b>The following segments illustrate Hospital Days Base</b>	
EB*B**30*MA**7*0~	<b>To receive Hospital Data the 270 request MUST contain STC= 47, 48, 49, A5, A7 and/or AG</b>
HSD***DA**30*0~	EB07 = \$0 for Medicare Part A Co-Payment days (Fully Covered Days)
HSD***DA**31*60~	HSD06= "0" (Illustrates days exceeding 0)
HSD****26*1~	HSD06= "60" (Illustrates through day 60)
DTP*435*RD8*20130101-20131231~	HSD06= "1" (per Part A Spell)
EB*B**30*MA**7*296~	DTP03= Calendar Year
HSD***DA**30*60~	EB07= \$296 for Part A Spell Daily Co-Payment Amount
HSD***DA**31*90~	HSD06= "60" (Illustrates days exceeding 60)
HSD****26*1~	HSD06= "90" (Illustrates through day 90)
DTP*435*RD8*20130101-20131231~	HSD06= "1" (per Part A Spell)
EB*B**30*MA**7*0~	DTP03= Calendar Year
HSD***DA**30*0~	EB07 = \$0 for Medicare Part A Co-Payment days (Fully Covered Days)
HSD***DA**31*60~	HSD06= "0" (Illustrates days exceeding 0)
HSD****26*1~	HSD06= "60" (Illustrates through day 60)
DTP*435*RD8*20120101-20121231~	HSD06= "1" (per Part A Spell)
EB*B**30*MA**7*289~	DTP03= Calendar Year
HSD***DA**30*60~	EB07= \$289 for Part A Spell Daily Co-Payment Amount
HSD***DA**31*90~	HSD06= "60" (Illustrates days exceeding 60)
HSD****26*1~	HSD06= "90" (Illustrates through day 90)

271 Segment	HETS Returned Values
HSD****26*1~	HSD06= "1" (per Part A Spell)
DTP*435*RD8*20120101-20121231~	DTP03= Calendar Year
<b>The following segments illustrate Hospital Days Base as Remaining</b>	<b>To receive Hospital Data the 270 request MUST contain STC= 47, 48, 49, A5, A7 and/or AG</b>
EB*B**30*MA**7*0~	EB07 = \$0 for Medicare Part A Co-Payment days (Fully Covered Days)
HSD***DA**29*60~	HSD06= "60" for Part A Spell Fully-Covered Days Remaining
HSD****26*1~	HSD06= "1" (per Part A Spell)
DTP*435*RD8*20130101-20131231~	DTP03= Calendar Year
EB*B**30*MA**7*296~	EB07= \$296 for Part A Spell Daily Co-Payment Amount
HSD***DA**29*30~	HSD06= "30" for Part A Spell Co-Payment Days Remaining
HSD****26*1~	HSD06= "1" (per Part A Spell)
DTP*435*RD8*20130101-20131231~	DTP03= Calendar Year
EB*B**30*MA**7*0~	EB07 = \$0 for Medicare Part A Co-Payment days (Fully Covered Days)
HSD***DA**29*60~	HSD06= "60" for Part A Spell Fully-Covered Days Remaining
HSD****26*1~	HSD06= "1" (per Part A Spell)
DTP*435*RD8*20120101-20121231~	DTP03= Calendar Year
EB*B**30*MA**7*289~	EB07= \$289 for Part A Spell Daily Co-Payment Amount
HSD***DA**29*30~	HSD06= "30" for Part A Spell Co-Payment Days Remaining
HSD****26*1~	HSD06= "1" (per Part A Spell)
DTP*435*RD8*20120101-20121231~	DTP03= Calendar Year
<b>The following segments illustrate Hospital Days Remaining in a Part A Spell</b>	<b>To receive Part A Spell Data the 270 request MUST contain STC= 47, 48, 49, A5, A7 and/or AG and spell must be present within 60 days of search request date.</b>
EB*B**30*MA**7*0~	EB07 = \$0 for Medicare Part A Co-Payment days (Fully Covered Days)
HSD***DA**29*56~	HSD06= Part A Spell Fully-Covered Days Remaining
HSD****26*1~	HSD06= "1" (per Part A Spell)
DTP*435*RD8*20130514-20130520~	DTP03 = Part A Spell DOEBA-DOLBA for Fully-Covd Days Remaining
EB*B**30*MA**7*296~	EB07= \$296 for Part A Spell Daily Co-Payment Amount
HSD***DA**29*30~	HSD06= Part A Spell Co-Payment Days Remaining
HSD****26*1~	HSD06= "1" (per Part A Spell)
DTP*435*RD8*20130514-20130520~	DTP03 = Part A Spell DOEBA-DOLBA for Fully-Covd Days Remaining
<b>The following segments illustrate SNF Days Base</b>	<b>To receive Skilled Nursing Facility Data the 270 request MUST contain STC= AG</b>
EB*B**AG*MA**7*0~	EB07 = \$0 for Medicare Part A SNF Co-Payment days (Fully Covered Days)
HSD***DA**30*0~	HSD06= "0" (Illustrates days exceeding 0)
HSD***DA**31*20~	HSD06= "20" (Illustrates through day 20)
HSD****26*1~	HSD06= "1" (per SNF Spell)
DTP*435*RD8*20130101-20131231~	DTP03= Calendar Year
EB*B**AG*MA**7*148~	EB07= \$148 for Part A Spell SNF Daily Co-Payment Amount
HSD***DA**30*20~	HSD06= "20" (Illustrates days exceeding 20)
HSD***DA**31*100~	HSD06= "100" (Illustrates through day 100)

271 Segment	HETS Returned Values
HSD****26*1~	HSD06= "1" (per SNF Spell)
DTP*435*RD8*20130101-20131231~	DTP03= Calendar Year
EB*B**AG*MA**7*0~	EB07 = \$0 for Medicare Part A SNF Co-Payment days (Fully Covered Days)
HSD***DA**30*0~	HSD06= "0" (Illustrates days exceeding 0)
HSD***DA**31*20~	HSD06= "20" (Illustrates through day 20)
HSD****26*1~	HSD06= "1" (per SNF Spell)
DTP*435*RD8*20120101-20121231~	DTP03= Calendar Year
EB*B**AG*MA**7*144.5~	EB07= \$144.50 for Part A Spell SNF Daily Co-Payment Amount
HSD***DA**30*20~	HSD06= "20" (Illustrates days exceeding 20)
HSD***DA**31*100~	HSD06= "100" (Illustrates through day 100)
HSD****26*1~	HSD06= "1" (per SNF Spell)
DTP*435*RD8*20120101-20121231~	DTP03= Calendar Year
<b>The following segments illustrate SNF Days Base as Remaining</b>	<b>To receive Skilled Nursing Facility Data the 270 request MUST contain STC= AG</b>
EB*B**AG*MA**7*0~	EB07 = \$0 for Medicare Part A SNF Co-Payment days (Fully Covered Days)
HSD***DA**29*20~	HSD06= "20" for Part A Spell SNF Fully-Covered Days Remaining
HSD****26*1~	HSD06= "1" (per SNF Spell)
DTP*435*RD8*20130101-20131231~	DTP03= Calendar Year
EB*B**AG*MA**7*148~	EB07= \$148 for Part A Spell SNF Daily Co-Payment Amount
HSD***DA**29*80~	HSD06= "80" for Part A Spell SNF Co-Payment Days Remaining
HSD****26*1~	HSD06= "1" (per SNF Spell)
DTP*435*RD8*20130101-20131231~	DTP03= Calendar Year
EB*B**AG*MA**7*0~	EB07 = \$0 for Medicare Part A SNF Co-Payment days (Fully Covered Days)
HSD***DA**29*20~	HSD06= "20" for Part A Spell SNF Fully-Covered Days Remaining
HSD****26*1~	HSD06= "1" (per SNF Spell)
DTP*435*RD8*20120101-20121231~	DTP03= Calendar Year
EB*B**AG*MA**7*144.5~	EB07= \$144.50 for Part A Spell SNF Daily Co-Payment Amount
HSD***DA**29*80~	HSD06= "80" for Part A Spell SNF Co-Payment Days Remaining
HSD****26*1~	HSD06= "1" (per SNF Spell)
DTP*435*RD8*20120101-20121231~	DTP03= Calendar Year
<b>The following segments illustrate SNF Spell Days Remaining</b>	<b>To receive Part A Spell SNF Data the 270 request MUST contain STC= AG and spell must be present within 60 days of search request date.</b>
EB*B**AG*MA**7*0~	EB07 = \$0 for Medicare Part A SNF Co-Payment days (Fully Covered Days)
HSD***DA**29*18~	HSD06 = Part A Spell SNF Fully-Covered Days Remaining
HSD****26*1~	HSD06= Per SNF Spell
DTP*435*RD8*20130514-20130520~	Part A Spell DOEBA-DOLBA for Fully-Covd Days Remaining
EB*B**AG*MA**7*148~	EB07= \$148 for Part A Spell SNF Daily Co-Payment Amount
HSD***DA**29*80~	Part A Spell SNF Co-Payment Days Remaining
HSD****26*1~	HSD06= Per SNF Spell
DTP*435*RD8*20130514-20130520~	Part A Spell DOEBA-DOLBA for Fully-Covd Days Remaining
<b>The following segments illustrate Lifetime Reserve</b>	<b>To receive Lifetime Reserve Data the 270 request MUST contain STC= 47, 48, 49, A5, A7 and/or AG.</b>

271 Segment	HETS Returned Values
EB*K**30*MA**32***DY*60~	EB10 = Lifetime Reserve base days
EB*K**30*MA**33***DY*58~	EB 10= Lifetime Reserve remaining days
EB*K**30*MA**7*592~	EB07= Co-Payment amount per day
DTP*435*RD8*20130101-20131231~	DTP03= Calendar Year
EB*K**30*MA**7*578~	EB07= Co-Payment amount per day
DTP*435*RD8*20120101-20121231~	DTP03= Calendar Year
<b>The following segments illustrate Lifetime Psychiatric Limitation Data</b>	<b>To receive Lifetime Psychiatric Limitation Data the 270 request MUST contain STC= A7. Submitters are only permitted to request STC A7 on behalf of Psychiatric/Mental Health professionals and institutions. Compliance will be monitored by CMS.</b>
EB*K**A7*MA**32***DY*190~	EB10=Lifetime Psychiatric Base Days
EB*K**A7*MA**33***DY*180~	EB10=Lifetime Psychiatric Remaining Days
<b>The following segments illustrate Part B Entitlement/Coverage</b>	
EB*1**30^2^3^10^14^23^24^25^26^27^28^33^36^37^38^39^40^42^50^51^52^53^67^69^73^76^83^86^98^A4^A6^A8^AD^AE^AF^AI^AJ^AK^AL^BF^BG^BT^BU^BV^DM^UC^MB~	EB03= "30" and applicable HETS supported Service Type Codes which are covered by Part B EB04= "MB"
DTP*291*D8*20050401~	DTP03 = Entitlement and Termination Dates (where applicable)
<b>The following segments illustrate Part B Plan Level Financial Data</b>	
EB*C**30*MB**23*147~	EB07 = Part B Base Deductible 2013
DTP*291*RD8*20130101-20131231~	DTP03= Calendar Year
EB*C**30*MB**23*140~	EB07 = Part B Base Deductible 2012
DTP*291*RD8*20120101-20121231~	DTP03= Calendar Year
EB*C**30*MB**29*0~	EB07 = Part B Remaining Deductible 2013 for this beneficiary
DTP*291*RD8*20130101-20131231~	DTP03= Calendar Year
EB*C**30*MB**29*0~	EB07 = Part B Remaining Deductible 2012 for this beneficiary
DTP*291*RD8*20120101-20121231~	DTP03= Calendar Year
EB*A**30*MB**27**.2~	EB08 = 20% Part B Plan Level Coinsurance
DTP*292*RD8*20130101-20131231~	DTP03= Calendar Year
EB*A**30*MB**27**.2~	EB08 = 20% Part B Plan Level Coinsurance
DTP*292*RD8*20120101-20121231~	DTP03= Calendar Year
<b>The following segments illustrate Part B Free Services Coinsurance</b>	
EB*A**5^42^67^AJ^MB**27**0~	EB08 = 0% Co-Insurance for Part B Free Services
DTP*292*RD8*20130101-20131231~	DTP03= Calendar Year
EB*A**5^42^67^AJ^MB**27**0~	EB08 = 0% Co-Insurance for Part B Free Services
DTP*292*RD8*20120101-20121231~	DTP03= Calendar Year
<b>The following segments illustrate Mental Health Coinsurance</b>	
EB*A**A4^A6^A8^AI^AK^MB**27**35~	EB08 = Mental Health Co-Insurance Percentage
DTP*292*RD8*20130101-20131231~	DTP03= Calendar Year
EB*A**A4^A6^A8^AI^AK^MB**27**4~	EB08 = Mental Health Co-Insurance Percentage
DTP*292*RD8*20120101-20121231~	DTP03= Calendar Year
<b>The following segments illustrate Part B Free Services Deductible</b>	
EB*C**5^42^67^AJ^MB**23*0~	EB07 = \$0 to display the Part B Base Deductible is not applicable
DTP*292*RD8*20130101-20131231~	DTP03= Calendar Year
EB*C**5^42^67^AJ^MB**23*0~	EB07 = \$0 to display the Part B Base Deductible is not applicable
DTP*292*RD8*20120101-20121231~	DTP03= Calendar Year

271 Segment	HETS Returned Values
<b>The following segments illustrate Plan Level Financial Data for HCPCS codes</b>	<b>Example of Multiple HETS Supported HCPCS codes requested. EQ02 =84478, 90670, G0106, G0120, G0117, G0118</b>
EB*C***MB**23*0*****HC 84478~	EB07 = Base Deductible Amount or "0" if deductible is waived for this service
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*C***MB**23*0*****HC 90670~	EB07 = Base Deductible Amount or "0" if deductible is waived for this service
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*C***MB**23*0*****HC G0106~	EB07 = Base Deductible Amount or "0" if deductible is waived for this service
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*C***MB**23*0*****HC G0120~	EB07 = Base Deductible Amount or "0" if deductible is waived for this service
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*C***MB**23*147*****HC G0117~	EB07 = Base Deductible Amount or "0" if deductible is waived for this service
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*C***MB**23*147*****HC G0118~	EB07 = Base Deductible Amount or "0" if deductible is waived for this service
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*C***MB**29*0*****HC G0117~	EB07 = Remaining Deductible Amount (This will not be returned if Base Deductible is waived) for this service
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*C***MB**29*0*****HC G0118~	EB07 = Remaining Deductible Amount (This will not be returned if Base Deductible is waived) for this service
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*A***MB**27*0*****HC 84478~	EB08 = Coinsurance Percentage or "0" if waived
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*A***MB**27*0*****HC 90670~	EB08 = Coinsurance Percentage or "0" if waived
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*A***MB**27*.2*****HC G0106~	EB08 = Coinsurance Percentage or "0" if waived
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*A***MB**27*.2*****HC G0120~	EB08 = Coinsurance Percentage or "0" if waived
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*A***MB**27*.2*****HC G0117~	EB08 = Coinsurance Percentage or "0" if waived

271 Segment	HETS Returned Values
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
EB*A***MB**27**.2*****HC G0118~	EB08 = Coinsurance Percentage or "0" if waived
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year of the date on which the 270 request was received
<b>The following segments illustrate eligibility for Part B preventive services.</b>	<b>EQ02 value must be requested on the 270</b>
EB*D***MB*****HC 84478~(Preventive HCPCS Sample)	EB13 = Preventive HCPCS Code
DTP*348*D8*20110101~	DTP03 = Next Eligible Date for Preventive
EB*D***MB*****HC 90670~(Preventive HCPCS Sample)	EB13 = Preventive HCPCS Code
DTP*348*D8*20110101~	DTP03 = Next Eligible Date for Preventive Service
EB*D***MB*****HC G0106~(Preventive HCPCS Sample)	EB13 = Preventive HCPCS Code
DTP*348*D8*20100524~	DTP03 = Next Eligible Date for Preventive Service
EB*D***MB*****HC G0120~(Preventive HCPCS Sample)	EB13 = Preventive HCPCS Code
DTP*348*D8*20120901~	DTP03 = Next Eligible Date for Preventive Service
EB*D***MB*****HC G0117~(Preventive HCPCS Sample)	EB13 = Preventive HCPCS Code
DTP*348*D8*20130625~	DTP03 = Next Eligible Date for Preventive Service
EB*D***MB*****HC G0118~(Preventive HCPCS Sample)	EB13 = Preventive HCPCS Code
DTP*348*D8*20130625~	DTP03 = Next Eligible Date for Preventive Service
<b>The following segments illustrate Smoking Cessation Sessions.</b>	<b>Only returned if STC=67 is requested on 270</b>
NOTE: HETS will return <i>either</i> Number of sessions remaining or Next Eligible Date.	
EB*F**67*MB**22***VS*8~	EB10= "8" (Base Number of Smoking Cessation Sessions)
HSD*VS*6***29~ (See note above)	HSD03= Number of Smoking Cessation Sessions Remaining
<b>OR</b>	
DTP*348*D8*20090101~ (See note above)	DTP03= Next Eligible Date for Smoking Cessation if all sessions have been used
<b>The following segments illustrate Therapy Benefit Detail</b>	<b>Only returned if STC=AD, AE or AF is requested on 270</b>
EB*D**AD*MB***1345~	EB03=AD for Occupational Therapy, EB07= Therapy Amount Used
DTP*292*RD8*20130101-20131231~	DTP03= Calendar Year
MSG*USED AMOUNT~	
EB*D**AD*MB***200~	EB03=AD for Occupational Therapy, EB07= Therapy Amount Used
DTP*292*RD8*20120101-20121231~	DTP03= Calendar Year
MSG*USED AMOUNT~	
EB*D**AE*MB***0~	EB03=AE for Physical/Speech Therapy, EB07= Therapy Amount Used
DTP*292*RD8*20130101-20131231~	DTP03= Calendar Year
MSG*USED AMOUNT~	
EB*D**AE*MB***0~	EB03=AE for Physical/Speech Therapy, EB07= Therapy Amount Used
DTP*292*RD8*20120101-20121231~	DTP03= Calendar Year
MSG*USED AMOUNT~	
<b>The following segments illustrate Rehabilitation Benefit Detail</b>	<b>Only returned if STC=BF or BG is requested on 270</b>
EB*F**BF*MB**29***CA*36~	EB10 = Number of Pulmonary Rehabilitation Sessions remaining
MSG*Professional~	
EB*F**BF*MB**29***CA*36~	EB10 = Number of Pulmonary Rehabilitation Sessions remaining
MSG*Technical~	

271 Segment	HETS Returned Values
EB*F**BG*MB****99*0~ MSG*Professional~	EB10 = No. of Cardiac Rehabilitation Sessions used
EB*F**BG*MB****99*0~ MSG*Technical~	EB10 = No. of Cardiac Rehabilitation Sessions used
EB*F**BG*MB****99*15~ MSG*Intensive Cardiac Rehabilitation – Professional~	EB10 = Number of Intensive Cardiac Rehabilitation Services Used <b>only if</b> MSG01 = Intensive Cardiac Rehabilitation
EB*F**BG*MB****99*15~ MSG*Intensive Cardiac Rehabilitation – Technical~	EB10 = Number of Intensive Cardiac Rehabilitation Services Used <b>only if</b> MSG01 = Intensive Cardiac Rehabilitation
<b>The following segments illustrate Home Health Data</b>	<b>Only returned if STC=42 is requested on 270</b>
EB*X**42***26~	
DTP*472*RD8*20120522-20120729~	DTP03 = Home Health Period Start & End Dates
DTP*193*D8*20120522	DTP03= Home Health Period DOEBA
DTP*194*D8*20120729	DTP03= Home Health Period DOLBA
LS*2120~	
NM1*PR*2*ORGNAME****PI*CONTR~	NM103 = Home Health Contractor Name NM109 = Home Health Contractor Number
NM1*1P*2*****XX*1234567890~ LE*2120~	NM109 = Home Health Service Provider NPI
EB*X*****HC G0180~	EB13 = Home Health Certification HCPC
DTP*193*D8*20120801~	DTP03 = Home Health Certification Start Date
DTP*193*D8*20120704~	DTP03 = Home Health Certification Start Date
DTP*193*D8*20120503~	DTP03 = Home Health Certification Start Date
EB*X*****HC G0179~	EB13 = Home Health Recertification HCPC
DTP*193*D8*20130501~	DTP03 = Home Health Recertification Date
DTP*193*D8*20121225~	DTP03 = Home Health Recertification Date
DTP*193*D8*20120501~	DTP03 = Home Health Recertification Date
<b>The following segments illustrate Hospice Episodes</b>	<b>Only returned if STC=45 is requested on 270</b>
EB*X**45*MA**26~	
DTP*292*RD8*20121115-20121205~	DTP03 = Hospice Period Date(s)
MSG*Revocation Code - 1~	MSG01 = Hospice Revocation Code
LS*2120~	
NM1*1P*2*****XX*1234567890~ LE*2120~	NM109 = Hospice Provider NPI
<b>The following segment illustrates Hospice Occurrence Count</b>	<b>Only returned if STC=45 is requested on 270</b>
EB*D**45*MA**26***99*1~	EB10=Hospice Occurrence Count
<b>The following segments illustrate ESRD data</b>	<b>Only returned if STC=14 or 15 is requested on 270</b>
EB*D**14*MB~	EB03 = 14 for Renal Supplies in the Home
DTP*356*D8*20100601~	DTP03 = ESRD Dialysis Method Start Date
DTP*096*D8*20120105~	DTP03 = Kidney Transplant Hospital Discharge Date
<b>OR</b>	
EB*D**15*MA~	EB03 = 15 for Alternative Method Dialysis
DTP*356*D8*20100601~	DTP03 = ESRD Dialysis Method Start Date
DTP*096*D8*20120105~	DTP03 = Kidney Transplant Hospital Discharge Date
<b>The following segments illustrate Blood Deductible Data</b>	<b>Only returned if STC=10 is requested on 270</b>
EB*E**10***23***DB*3~	EB10 = No. of Units Excluded



271 Segment	HETS Returned Values
HSD*FL*2***29~	HSD03= No. of Units Remaining
DTP*292*RD8*20130101-20131231~	DTP03 = Calendar year
EB*E**10***23***DB*3~	EB10 = No. of Units Excluded
HSD*FL*1***29~	HSD03= No. of Units Remaining
DTP*292*RD8*20120101-20121231~	DTP03 = Calendar year
<b>The following segments illustrate Part D Enrollment</b>	
EB*R**88*OT~	
REF*18*S0000 999~	REF02 = Part D Contract Number + Plan Number (concatenated)
DTP*292*D8*20120101~	DTP03 = Part D Plan Enrollment Date(s)
LS*2120~	
NM1*PR*2*ORGNAME~	NM103 = Part D Contract Name
N3*ADDRESSLINE1*ADDRESSLINE2~	N301/N302 = Part D Contract Address
N4*CITY*ST*ZIPCODE~	N401/N402/N403 = Part D Contract City/State/ZIP
PER*IC**TE*AAABBBCCCC*UR*www.website.com~	PER04 = Part D Plan Telephone Number PER06 = Contract Website Address
LE*2120~	
<b>The following segments illustrate MCO (Medicare Advantage) enrollment</b>	
EB*R**30*IN~	EB04 = MCO Contract Type (HMO, PPO, Indemnity, etc.)
REF*18*H0000 999~	REF02 = MCO Contract Number + Plan Number (concatenated)
DTP*290*D8*20090101~	DTP03 = MCO Plan Enrollment Date(s)
MSG*MCO Bill Option Code- C~	MSG01 = Bill Option Code
LS*2120~	
NM1*PRP*2*ORGNAME~	NM103 = MCO Contract Name
N3*ADDRESSLINE1*ADDRESSLINE2~	N301/N302 = MCO Contract Address
N4*CITY*ST*ZIPCODE~	N401/N402/N403 = MCO Contract City/State/ZIP
PER*IC**TE*AAABBBCCCC*UR*www.website.com~	PER04 = MCO Plan Telephone Number PER06 = MCO Plan Website Address
LE*2120~	
<b>The following segments illustrate MSP Enrollment</b>	
EB*R**30*13~	EB04 = MSP Insurance Type Code
REF*IG*POLICYNUMBER~	REF02 = Insurance Policy Number
DTP*290*RD8*20120701-20130401~	DTP03 = MSP Effective Date(s)
LS*2120~	
NM1*PRP*2*ORGNAME~	NM103 = MSP Name
N3*ADDRESSLINE1*ADDRESSLINE2~	N301/N302 = MSP Insurance Address
N4*CITY*ST*ZIPCODE~	N401 = MSP City, N402=MSP State, N403=MSP Zip
LE*2120~	
<b>The following segments illustrate the end of a transaction.</b>	
SE*233*0001~	
GE*1*1~	
IEA*1*11111111~□	