Guardian Electronic User Guide

834 Enrollment and Maintenance

Version 16.0
Last Updated April 2nd, 2020

The Guardian Life Insurance Company of America (Guardian) is pleased to provide you with this User Guide; however, it is a work in progress and may change from time to time. Therefore, Guardian reserves the right to change this document at any time without notice. The most current version of the document will be posted to the Guardian web site as updates are made.

Table of Contents

Section 1: Introduction to Online Enrollment

Overview

This User Guide will assist you with your implementation of the electronic transfer of eligibility information using the HIPAA X12 005010X220A1 (HIPAA834) format. This document should not replace the original Implementation Guide available from Washington Publishing. We encourage you to refer to the HIPAA Implementation Guide for further information on any item covered or not covered by this user guide.

The format of the ANSI X12 covered in this user guide is for use by Trading Partners who are not considered covered entities under HIPAA. It covers the transmission of eligibility data for **group life, voluntary life, medical, dental, vision, prescription drug**, and **disability** coverages. Since the inclusion of life and disability coverage enrollment data deems the transaction over HIPAA expectation, Trading Partners who are covered entities and choose to use this version of our User Guide will be outside of HIPAA compliance. If you would prefer not to use this version, other methods we offer are Excel Spreadsheet and Guardian Anytime which are available on our website. Please contact us and we will work with you to determine the most efficient way to transmit eligibility data regarding life or disability coverage.

Files are required to be submitted in the HIPAA – ANSI 834A1 Version 5010 file format.

At this time there is no cost to participate in the EDI process when using the HIPAA834 file format.

To ensure privacy and security, you also need to be able to send files via Secure File Transfer Protocol (SFTP).

What is in this Guide?

This Electronic Enrollment Guide outlines the criteria for establishing an electronic enrollment relationship with The Guardian Life Insurance Company of America, including:

❖ Options for submitting EDI files
       Example: Full files vs Change files
❖ HIPAA834 file specifications and examples

Questions

We want you to feel at ease using Electronic Enrollment submissions. If you have any questions, please feel free to contact the EDI Team Toll Free (800) 433 5982, option 1, then ext 7311 Monday through Friday between 8 a.m. and 5:00 p.m. EST or by secure e-mail at www.GuardianAnytime.com , click on "Secure Channel" on the Guardian Anytime home page and follow prompts to select Test_EDI@glic.com to be connected with a Representative.

Electronic Enrollment Requirements

The requirements for EDI enrollment transactions are as follows:

- ❖ Generate the required data elements that include effective and termination dates coinciding with each transaction.
- ❖ Provide employees' and eligible dependents' data
  (NOTEin order for dependents to have coverage, they need to be reflected on HIPAA file)**
- ❖ Submit files in an ANSI 834A1 (HIPAA)
- ❖ Send the EDI file to Guardian via SFTP (Secure File Transfer Protocol)
- ❖ Send the EDI file to Guardian on a mutually agreed upon schedule
- ❖ Exclude Medicare transactions from EDI submissions
- ❖ Collect and submit Primary Care Dentist data (PCD identification number) on all member and dependent enrollment transactions when applicable.
- ❖ Collect and submit Primary Care Physician data (PCP identification number) on all member and dependent enrollment transactions when applicable.

Shared Expectations

Telephone inquiries between our businesses should generally be acknowledged within one business day. Guardian has the right to suspend submission of EDI files based on your inability to comply with the accepted file format, processes, expectations and requirements.

In addition, the following guidelines will help ensure a smooth EDI submission process.
Some of our EDI process is "Real Time", however there is some manual intervention.
 Guardian will:
- ❖ Process your file within one to two business days of the date received or notify you of our inability to use the file as submitted.
- ❖ Within one business day, identify and communicate errors that need to be resolved by the client, if the file fails the HIPAA834 validation process.

In return, we ask Clients to:
- ❖ Submit files accurately and according to the agreed-upon submission schedule.
- ❖ Correct actionable errors within two business days from the date the errors are communicated.
- ❖ Submit any file specification changes to Guardian for approval before implementing the changes, as it may result in Guardian not being able to code changes appropriately.

According to the HIPAA guidelines, Guardian and our customers must agree **not** to :
- ❖ Modify the definition, condition, or use of the data element or segment in the ANSI 834 standard transaction.
- ❖ Add any additional data elements or segments.
- ❖ Use any code or data values which are not valid in the current version of the ANSI 834 transaction.
- ❖ Change the meaning or intent of the ANSI 834 transaction.

Required Paper Submissions

The following eligibility events require paper form submissions:

- ❖ GUL (Group Universal Life) enrollments/changes
- ❖ State-specific Disability (DBL) enrollments/changes
- ❖ Virginia Continued Health Benefits for Students
- ❖ Pennsylvania-Coverage for Military under Parent's policy
- ❖ EOI – Evidence of Insurability
- ❖ Domestic Partner documentation
- ❖ Conditional Underwriting documentation
- ❖ Certification of Prior Coverage
- ❖ Loss of Group Coverage
- ❖ Student Status, unless otherwise arranged with the client
- ❖ US Homeland Security Form I-9, Employment Verification Form
- ❖ Dependent Eligibility Form for Connecticut.
- ❖ Dependent Eligibility Form for Massachusetts
- ❖ State ARRA Election Form
- ❖ DD214 Certificate of Release or Discharge from Active Duty
- ❖ New York Dependent Eligibility Certification Form
- ❖ Ohio Dependent Eligibility Certification Form
- ❖ Pennsylvania Dependent Eligibility Certification Form
- ❖ California (CA), Massachusetts (MA), New Hampshire (NH), New Jersey (NJ), and New York (NY) mandate an employee and dependents must have inforce Medical coverage in order to be eligible to enroll for the Critical Illness (aka Specified Disease for the state of New York). When a member and/or dependent do not have Medical with another carrier, the member and/or dependents cannot elect the Critical Illness benefit.

Section 2: Electronic Enrollment Criteria - File Formats and File Types

EDI is a standard format for electronically exchanging business data. An EDI file contains a string of data elements and each data element represents a fact, such as a subscriber's name, hire date, etc. The entire string is called a data segment.

File Formats and Types

Guardian will accept information in the following format:

ANSI 834A1 (HIPAA) format Version 5010
Transaction Type Options:
❖ Change file
❖ Full File

ANSI 834 (HIPAA) Addenda Version 5010 Format

The Health Insurance Portability and Accountability Act (HIPAA) requires that all health plans accept a standard enrollment format, ANSI 834A1 Version 5010.

The ANSI 834A1 is the national standard for electronic enrollment and maintenance health plan. The file specifics are reflected in this User Guide.

File Transaction Types

Guardian accepts two types of files: Full Files or Transaction-only (Change) files.
1. Full Files (preferred type) and Full File Replacements must contain one record for each subscriber and any associated dependents. For each new file you send to Guardian, a compare process is run against our enrollment system to determine the specific add, change, or termination transactions included in the file. Our processing area then processes these transactions in Guardian's enrollment system.
2. Change files contain records for specific add, change, termination transactions, or does not contain all Guardian benefits.

Preference is given to full file transmissions because they provide an inherent audit benefit, allowing all systems to remain synchronous.

Section 3: Definitions/Guidelines

Definitions:

Dependent: A dependent is an individual who is eligible for coverage because of his or her association with a subscriber.

Enrollment: As defined in the Final Rule of "Standards for Electronic Transactions", the enrollment and disenrollment in a health plan transaction is the transmission of subscriber enrollment information to a health plan to establish or terminate insurance coverage.

Payer/Insurer: The payer is the party that pays claims and/or administers the insurance coverage, benefit or product. For purposes of this Guide, the payer is Guardian Life Insurance Company.

Providers: Health care providers are individuals and organizations that provide health care services. Health care providers can include physicians, hospitals, clinics, pharmacies, and long-term care facilities.

Sponsor: A sponsor is the party that ultimately pays for the coverage, benefit or product.

Subscriber: The subscriber is an individual eligible for coverages because of his or her association with a sponsor. Examples of subscribers include the following: employees, union member, and individuals covered under government programs, such as Medicare and Medicaid. Guardian refers to a 'Subscriber' as either a Member or Employee.

Third Party Administrator (TPA): A sponsor may elect to contract with a TPA or other vendor to handle collecting insured member data if the sponsor chooses not to perform this function. Note: Guardian must approve a TPA before any eligibility data will be transmitted or received.

Trading Partner: External entity with whom business is conducted, i.e. customer, vendor, broker, third party administrator. This relationship can be formalized via a trading partner agreement. (Note: a trading partner of an entity for some purposes may be a business associate of that same entity for other purposes.

Vendors/Intermediaries: Vendors and Intermediaries are organizations that distribute information about eligibility for specific benefits, but they do not actually administer the plan or make payments.

Guidelines:

Linking a Dependent to a Subscriber

Subscribers and dependents are sent as separate occurrences of Loop ID – 2000. The initial enrollment for the subscriber must be sent before sending the initial enrollment for any of the subscriber's dependents.

Note: Whenever a dependent record is transmitted, Guardian needs the dependent record(s) to follow directly after the member record for which they belong to.

To allow linking between subscribers and dependents, use the code "0F", Subscriber Number, in the REF segment, Loop ID – 2000. The subscriber's unique identifier (SSN) is sent in this segment in both the subscriber's (member/employee) and the dependent's Loop ID – 2000. The individual's SSN is sent and identified as such in NM108, Loop ID – 2000. This applies to both subscribers and dependents. If the SSN is used for linking, then the subscriber's SSN is sent in both locations on the subscriber's Loop ID – 2000. ****NOTE** any active dependents will need to be reflected on the file.**

Volume and Salary Amounts:

Benefits that require volume and salary amounts may be passed with a decimal value or without. (Example: Elected volume amount is $150,000.00. File should reflect 150000.00 or 15000000)

Employment termination

An employment termination is utilized when an employee leaves employment at the company.

If the termination date is passed at the INS level for a subscriber (member/employee) under Loop 2000, DTP segment, then all coverage for that subscriber and for all dependents linked to that subscriber will be terminated, effective on that date.

If the termination is based on 1st of the month, the termination date (last day worked) is passed at the INS level for a subscriber (member/employee) under Loop 2000 DTP segment. The benefit end date is passed at the HD level under Loop 2300, DTP segment for each specific product.

Benefit termination – Waive of benefit

A benefit termination, or waiver, is utilized when an employee is still actively employed at the company but does not elect the benefit.

If the termination date is passed at the HD level for any member under Loop 2300, DTP segment, then coverage for that specific insurance product for that member will be terminated, effective on that date. Coverage for other insurance products for that member will not be affected nor will the coverage for dependents linked to the member.

Recommendation: once a termination record is passed, it can be dropped from future files.

Full-time to Part-time

An employment termination is utilized when an employee is no longer eligible for the benefit but is still employed at the company (reduction in hours etc).

If the termination date is passed at the INS level for a subscriber (member/employee) under Loop 2000, DTP segment, then all coverage for that subscriber and for all dependents linked to that subscriber will be terminated, effective on that date.

If the termination is based on 1st of the month, the termination date (last day worked) is passed at the INS level for a subscriber (member/employee) under Loop 2000 DTP segment. The benefit end date is passed at the HD level under Loop 2300, DTP segment for each specific product.

Rehire / Return to full time status

An employee may be rehired or return to full time employment. The file should indicate the date of hire as the date the employee returned to eligible status, under Loop 2000 DTP segment. The benefit effective date is passed at the HD level under Loop 2300, DTP segment for each specific product.

Cobra

Guardian requires updates to the INS04, INS05 and DTP*337 segments for members electing COBRA. Please review the example in section 6 of the user guide for more information.

Updates Versus Full File Audits

The 834 transaction can be used to provide either updates to the enrollment database or full file audits.

An update is either an "add", "termination", or "change" request. The transaction only contains information about the changed members. This is identified in BGN08 by a code value of '2', Change (Update)

A full file audit and full file replacement lists all current members, whether involved in a change or not. This facilitates keeping the sponsor's and payer's system in sync. This is not intended to contain a history of all previous enrollments. The full file audit is intended to identify all active members, at a given point in time and may or may not include terminated members based on your Trading Partner Agreement.
Note: Guardian needs to see terminated members on the first file generated after the member's termination has been processed.
This type of transaction is identified by a BGN08 code value of '4', Verify.
Note: Any response back to the sponsor from the received transactions are outside the scope of the 834 and are the responsibility of the sponsor and payer. Guardian at this time has no transaction reporting system to identify for the sponsor what changes were processed.

Loop Usages

Loop usage within the 834 transaction can be confusing. Please read carefully the loop requirements in terms of context or location within the transaction. The usage designator of a loop's beginning segment indicates the usage of the loop (Required, Situational). Segments within a loop cannot be sent without the beginning segment of that loop. If the first segment is required, the loop must occur at least once unless it is in a Situational loop that is not being used. **Note: Guardian does use and needs some of the Situational loops, which is clearly noted in the Companion Guide.**

Product Identifiers

The 834 allows three locations for insurance product identifiers, such as policy numbers and group numbers.

Guardian requires the sponsor's plan number to be reflected in the Transaction set policy number, the Member policy number, and in the Health coverage policy number REF02 segments.

Delimiters

Guardian requires the use of the following delimiters:

* (Asterisk) – Data Element Separator
~ (Tilde) – Segment Terminator
> (Greater Than Sign) – Repetition Separator

Formats

Dates: All 834 dates are 8-character dates in the format of CCYYMMDD. The ONLY date data element that is in format YYMMDD is the Interchange Date data element in the ISA segment.

Social Security Numbers: SSN should be sent as a nine-digit number with no dashes or spaces.

Because of the mechanics of our file automation process we ask that filenames not contain hyphens (-), "special "characters, or spaces. A simple alpha-numeric file name is relatively descriptive of the file will almost always suffice.

Special Characters

The following special characters are accepted. Please note that a "space" is allowed, however a "tab" would not be.

A…Z	0…9	!	"	&	'	(	)	+	*
,	-	.	/	:	;	?	=		(space)

a...z		%	~	@	[	]	_		{
}				<	>	#	$		

Start-up

- ❖ Test files are to be sent to our test FTP site (which is identified in our plan specifications). An EDI connection set up team member will evaluate the files for complete and valid information. *NOTE* all test files must contain actual production data in order for testing be done properly.

- ❖ The test file will then go through our validation process to confirm formatting is accurate and complete in accordance of HIPAA law.

- ❖ Once validation is confirmed, the test file will be compared to our current eligibility system to assure accurate data in our production environment. If any discrepancies are found with either validation or compare, feedback will be supplied and a new test file may be requested for further evaluation.

- ❖ No live files will be accepted via e-mail.

- ❖ When testing has been successfully completed and verified, the EDI connection set up team member will provide formal sign off via email back to your organization. You will be provided with the production FTP information after sign off has been obtained.

Section 4: File Specifications for the HIPAA 834 (ANSI 834) Addenda Version 5010 Format

ISA – Interchange Control Header – Loop None

User Option (usage): Required

To start and identify an interchange of zero or more functional groups and interchange-related control segments.

The ISA is a fixed record length segment and all positions within each of the data elements must be filled. The first element separator defines the element separator to be used through the entire interchange. The segment terminator used after the ISA defines the segment terminator to be used throughout the entire interchange. Spaces in the example are represented by '.' for clarity.

Example:
ISA*00*..........*00*..........*30*SUBMITTERS.ID..*30*RECEIVERS.ID..*930602*1253*^*005
01*000000905*1*T*:~

Element Summary:

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
ISA01	I01	Authorization Information Qualifier **00 =** No authorization information. (**Guardian recommends this code**) **03 =** Additional Data Identification	M	ID	2/2	Required	1	This code identifies the type of information in the Authorization information.
ISA02	I02	Authorization Information ***fill with 10 blank spaces****	M	AN	10/10	Required	1	Information used for additional identification or authorization of the interchange sender or the data in the interchange, type of information is set by the Authorization information (I01)
ISA03	I03	Security Information Qualifier **00 =** No Security Information Present. (**Guardian recommends this code.** **01 =** Password	M	ID	2/2	Required	1	Code to identify the Type of information in the Security Information
ISA04	I04	Security Information ****fill with 10 blank spaces****	M	AN	10/10	Required	1	This is used for identifying the security information about the interchange sender or data in the interchange; the type of information is set by the Security Information Qualifier (I03)

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
ISA05	I05	Interchange ID Qualifier **01 =** Duns **14 =** Duns Plus Suffix **20 =** Health Industry Number (HIN) **27 =** Carrier Identification Number as assigned by Health Care Financing Administration (HCFA) **28 =** Fiscal Intermediary Identification Number as assigned by Health Care Financing Administration (HCFA) **29 =** Medicare Provider and Supplier Identification Number as assigned by Health Care Financing Administration (HCFA) **30 =** U.S. Federal Tax Identification Number. **(Guardian recommends this code.** **33 =** National Association of Insurance Commissioners Company Code (NAIC) **ZZ =**Mutually Defined	M	ID	2/2	Required	1	Code indicating the system/method of code structure used to designate the sender or receiver ID element being qualified
ISA06	I06	Interchange Sender ID **(Guardian requires using the Tax ID of the sender in this field)** **Pad left over with spaces**	M	AN	15/15	Required	1	Identification code published by the sender for other parties to use as the receiver ID to route data to them: the sender always codes this value in the sender ID element

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
ISA07	I05	Interchange ID Qualifier **01 =** Duns **14 =** Duns Plus Suffix **20 =** Health Industry Number (HIN) **27 =** Carrier Identification Number as assigned by Health Care Financing Administration (HCFA) **28 =** Fiscal Intermediary Identification Number as assigned by Health Care Financing Administration (HCFA) **29 =** Medicare Provider and Supplier Identification Number as assigned by Health Care Financing Administration (HCFA) **30 =** U.S. Federal Tax Identification Number. **(Guardian recommends this code.** **33 =** National Association of Insurance Commissioners Company Code (NAIC) **ZZ =** Mutually Defined	M	ID	2/2	Required	1	Code indicating the system/method of code structure used to designate the sender or receiver ID element being qualified
ISA08	I07	Interchange Receiver ID **Guardian requires:** 135123390	M	AN	15/15	Required	1	Identification code published by the receiver of the data; when sending, it is used by the sender as their ID, thus other parties sending to them will use this as receiving ID to route data to them
ISA09	I08	Interchange Date <YYMMDD>	M	DT	6/6	Required	1	Date of the interchange
ISA10	I09	Interchange Time <HHMM>	M	TM	4/4	Required	1	Time of the interchange

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
ISA11	I65	Repetition Separator **Guardian recommends the caret sign (^)** **NOTE: The character that is used here can not be used anywhere else in the file.**	M		1/1	Required	1	Type is not applicable; the repetition separator is a delimiter and not a data element; this field provides the delimiter used to separate repeated occurrences of a simple data element or a composite data structure; this value must be different than the data element separator, component element separator, and the segment terminator.
ISA12	I11	Interchange Control Version Number **Please utilize 00501**	M	ID	5/5	Required	1	Code specifying the version number of the interchange control segments
ISA13	I12	Interchange Control Number	M	N0	9/9	Required	1	A control number assigned by the interchange sender. **The Interchange Control Number, ISA13, must be identical to the associated Interchange Trailer IEA02 and must be a positive unsigned number.**
ISA14	I13	Acknowledgment Requested **0 =** No Interchange Acknowledgment Requested **1 =** Interchange Acknowledgment Requested. **Guardian recommends this code.**	M	ID	1/1	Required	1	Code indicating sender's request for an interchange acknowledgment
ISA15	I14	Interchange Usage Indicator **P =** Production Data **T =** Test Data	M	ID	1/1	Required	1	Code Indicating whether data enclosed by this Interchange envelope is test , production, or information
ISA16	I15	Component Element Separator **Guardian recommends a colon (:)** **NOTE: The character that is used here can not be used anywhere else in the file.**	M		1/1	Required	1	Type is not applicable; the component element separator is a delimiter and not a data element; this field provides the delimiter used to separate component data elements with composite data structure; this value must be different than the data element separator and the segment terminator.

GS – Functional Group Header – Loop None

User Option (usage): Required

To indicate the beginning of a functional group and to provide control information.

Example:
GS*BE*SENDER CODE*RECEIVER CODE*19991231*0802*1*X*005010X220A1~

Element Summary:

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
GS01	479	Functional Identifier Code **BE =** Benefit Enrollment and Maintenance (834)	M	ID	2/2	Required	1	Code identifying a group of application related transaction sets
GS02	142	Application Sender's Code **The Tax ID of the Sender is required in this field**	M	AN	2/15	Required	1	Code identifying party sending transmission; codes agreed to by trading partners
GS03	124	Application Receiver's Code **Guardian requires:** 135123390	M	AN	2/15	Required	1	Code identifying party receiving transmission; codes agreed to by trading partners
GS04	373	Date	M	DT	8/8	Required	1	Date expressed as CCYYMMDD
GS05	337	Time **Guardian recommends:** HHMM	M	TM	4/8	Required	1	Time expressed in 24-hour clock time as follows: HHMM, HHMMSS, or HHMMSSD, or HHMMSSDD, where H = hours (00-23), M = minutes (00-59), S = integer seconds (00-59), and DD = decimal seconds; decimal seconds are expressed as follows D = tenths (0-9) and DD = hundredths (00-99)
GS06	28	Group Control Number **Note: This value needs to match the value in the GE02 element**	M	N0	1/9	Required	1	Assigned number originated and maintained by the sender
GS07	455	Responsible Agency Code **X =** Accredited Standards Committee X12	M	ID	1 / 2	Required	1	Code identifying the issuer of the standard; this code is used in conjunction with Data Element 480

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
GS08	480	Version/Release/Industry/Identifier Code **Please utilize 005010X220A1**	M	AN	1/12	Required	1	Code indicating the version, release, subrelease, and industry identifier of the EDI standard being used, including the GS and GE segments; if code in DE455 in GS segment is X, then in DE480 positions 1 – 3 are the version number; positions 4-6 are the release and subrelease, level of the version; and positions 7-12 are the industry or trade association identifiers (optionally assigned by user); if code in DE455 in GS segment is T, then other formats are allowed

ST – Transaction Set Header – Loop None

User Option (Usage): Required

To indicate the start of a transaction set and to assign a control number

Example:
ST*834*0001*005010X220A1~

Element Summary:

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
ST01	143	Transaction Set Identifier Code **834 =** Benefit Enrollment and Maintenance	M	ID	3/3	Required	1	Code uniquely identifying a Transaction Set
ST02	329	Transaction Set Control Number **Note:** The transaction set control numbers in ST02 and SE02 must be identical. This unique number also aids in error resolution research.	M	AN	4/9	Required	1	Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set
ST03	1705	Implementation Convention Reference **Note:** The implementation convention reference should be the same value as GS08	O	AN	1/35	Required	1	Reference assigned to identify Implementation Convention

BGN – Beginning Segment – Loop None

User Option (Usage): Required

Example:
BGN*00*11227*19970920*1200*ES***4~

Element Summary:

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
BGN01	353	Transaction Set Purpose Code **00 =** Original (**Guardian recommends this code**) **15 =** Re-submission **22 =** Information Copy	M	ID	2/2	Required	1	Code identifying purpose of transaction set
BGN02	127	Reference Identification	M	AN	1/**50**	Required	1	Reference information s defined for a particular Transaction Set or as specified by the Reference Identification Qualifier Use the transaction set reference number assigned by the sender's application to uniquely identify this occurrence of the transaction for future reference
BGN03	373	Date	M	DT	8/8	Required	1	Date expressed as CCYYMMDD Use this date to identify the date that the submitter created the file
BGN04	337	Time **Guardian recommends: HHMM**	X	TM	4/8	Required	1	Time expressed in 24-hour clock time as follows: HHMM, HHMMSS, or HHMMSSD, or HHMMSSDD, where H = hours (00-23), M = minutes (00-59), S = integer seconds (00-59), and DD = decimal seconds; decimal seconds are expressed as follows D = tenths (0-9) and DD = hundredths (00-99)

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
BGN05	623	Time Code **01 =** Equivalent to ISO P01 **02 =** Equivalent to ISO P02 **03 =** Equivalent to ISO P03 **04 =** Equivalent to ISO P04 **05 =** Equivalent to ISO P05 **06 =** Equivalent to ISO P06 **07 =** Equivalent to ISO P07 **08 =** Equivalent to ISO P08 **09 =** Equivalent to ISO P09 **10 =** Equivalent to ISO P10 **11 =** Equivalent to ISO P11 **12 =** Equivalent to ISO P12 **13 =** Equivalent to ISO M12 **14 =** Equivalent to ISO M11 **15 =** Equivalent to ISO M10 **16 =** Equivalent to ISO M09 **17 =** Equivalent to ISO M08 **18 =** Equivalent to ISO M07 **19 =** Equivalent to ISO M06	O	ID	2/2	Situational	1	Code identifying the time. In accordance with International Standards Organization standard 8601, time can be specified by a + or – and an indication in hours in relation to Universal Time Coordinate (UTC) time; since + is a restricted character, + and – are substituted by P and M in the codes that follow CODE SOURCE 94: International Organization for Standardization (Date and Time) Use the time code if the sender and receiver are not in the same time zone. **Guardian requires data to be entered in this field.**

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
BGN05	623	Time Code						
		20 = Equivalent to ISO M05						
		21 = Equivalent to ISO M04						
		22 = Equivalent to ISO M03						
		23 = Equivalent to ISO M02						
		24 = Equivalent to ISO M01						
		AD= Alaska Daylight Time						
		AS = Alaska Standard Time						
		AT = Alaska Time						
		CD = Central Daylight Time						
		CS = Central Standard Time						
		CT = Central Time						
		ED = Eastern Daylight Time						
		ES = Eastern Standard Time						
		ET = Eastern Time						
		GM = Greenwich Mean Time						
		HD = Hawaii-Aleutian Daylight Time						
		HS = Hawaii-Aleutian Standard Time						
		HT = Hawaii-Aleutian Time						

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
BGN05	623	Time Code **LT =** Local Time **MD =**Mountain Daylight Time **MS =**Mountain Standard Time **MT =**Mountain Time **ND =**Newfoundland Daylight Time **NS=**Newfoundland Standard Time **NT =**Newfoundland Time **PD =**Pacific Daylight Time **PS =**Pacific Standard Time **PT =** Pacific Time **TD =** Atlantic Daylight Time **TS =** Atlantic Standard Time **TT =**Atlantic Time **UT =** Universal Time Coordinate						

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
BGN06	127	Reference Identification	O	AN	1/**50**	Situational	1	Reference Information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier **Guardian recommends this field to be blank**
BGN07	640	Transaction Type Code	O	ID	2/2	Not Used		**Not Used**
BGN08	306	Action Code **2 = Change 4 = Verify (Full file) RX = Replace (Full File)**	O	ID	1 / 2	Required	1	Code Indicating type of Action
BGN09	786	Security Level Code	O	ID	2/2	Not Used		**Not Used**

REF – Transaction Set Policy Number – Loop None

User Option (Usage): Situational

To specify identifying information

This Segment is REQUIRED by Guardian and is a specific number for each group.

Notes:
1. This segment can be used if a unique ID Number for a group applies to the entire transaction set.
2. The definition of the Guardian Master Policy Number is determined by the issuer of the policy, the Payer/Plan Administrator. The Master Policy Number may be used to meet various business needs such as indicating the line of business under which the policy is defined.
3. This segment is REQUIRED when the contract or trading partner agreement identify a Master Policy Number for use with electronic enrollment.

Example:
REF*38*00123456~

Element Summary:

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
REF01	128	Reference Identification Qualifier **38** = Master Policy Number	M	ID	2/3	Required	1	Code qualifying the Reference Identification
REF02	127	Reference Identification	X	AN	1/**50**	Required	1	Reference information as defined for a particular transaction set or as specified by the reference identification qualifier **This will reflect Guardian's group plan number, which is specific for each group. The format for the field should be an eight-digit number, Example: 00123456.**
REF03	352	Reference Identifier	X	AN	1/80	Not Used		**Not used**.
REF04	C040	Reference Identifier	O			Not Used		**Not used**.

DTP – File Effective Date – Loop None

User Option (Usage): Situational

To specify any or all of a date, a time, or a time period

Example:
DTP*007*D8*19961001~

Element Summary:

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
DTP01	374	Date/Time Qualifier **007** = Effective **(Guardian recommends this code)** **090** = Report Start **091 =** Report End **303** = Maintenance Effective **382** = Enrollment **388** = Payment Commencement	M	ID	3/3	Required	1	Code specifying type of date or time, or both date and time
DTP02	1250	Date time period format qualifier **D8** = Date expressed in format CCYYMMDD	M	ID	2/3	Required	1	Code indicating the date format, time format, or date and time format
DTP03	1251	Date time period	M	AN	1/35	Required	1	Expression of date, a time, or range of dates, times or dates and times **CCYYMMDD is required**

N1 – Sponsor Name – Loop 1000A

User Option (Usage): Required

To identify a party by type of organization, name, and code

Example:
N1*P5*Company Name*FI*112233445~

Element Summary:

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
N101	98	Entity identifier code **P5** = Plan sponsor	M	ID	2/3	Required	1	Code identifying an organizational entity, a physical location, property or an individual
N102	93	Name	X	AN	1/60	Situational	1	Free form name. **Guardian recommends the plan name in this field**
N103	66	Identification code qualifier **24** = Employer's Identification Number (This is the Employer Identification Number (EIN) issued by the IRS) **94** = Code assigned by the organization that is the ultimate destination of the transaction set. **FI** = Federal taxpayer's identification number (Guardian recommends this code)	X	ID	1/2	Required	1	Code designating the system/method of code structure used for identification code (67)
N104	67	Identifying code	X	AN	2/80	Required	1	Code identifying a party or other code. **Guardian recommends this field to reflect the plans Tax ID number.**
N105	706	Entity Relationship Code	O	ID	2/2	Not Used		**Not Used**
N106	98	Entity Identifier Code	O	ID	2/3	Not Used		**Not Used**

N1 – Payer – Loop 1000B

User Option (Usage): Required

To identify a party by type of organization, name, and code

Example:
N1*IN*Guardian*FI*135123390~

Element Summary:

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
N101	98	Entity identifier code **IN** =Insurer	M	ID	2/3	Required	1	Code identifying an organizational entity, a physical location, property or an individual
N102	93	Name	**X**	AN	1/60	Situational	1	Free form name. Guardian is required in this field.
N103	66	Identification code qualifier **94** = Code assigned by the organization that is the ultimate destination of the transaction set. **FI** = Federal taxpayer's identification number . **Guardian recommends this code.** **XV** = Health care financing administration national payer identification number (payerid). Required if the National Plan ID is mandated for use. Otherwise, one of the other listed codes may be used.	**X**	ID	1/2	Required	1	Code designating the system/method of code structure used for identification code (67)
N104	67	Identification code	**X**	AN	2/80	Required	1	Code identifying a party or other code. **Guardian requires 135123390 in this field.**
N105	706	Entity relationship code	O	ID	2/2	Not Used		**Not Used**
N106	98	Entity identifier code	O	ID	2/3	Not Used		**Not Used**

INS – Member Level Detail – Loop 2000

User Option (Usage): Required

To provide benefit information on insured entities

Note: Subscriber information **MUST** precede dependent information in a transmission.

Example:
If utilizing the INS06 to INS06-4 fields: INS*Y*18*030*XN*A*D:0*******FT~
If *not* utilizing the INS06 to INS06-4 fields: INS*Y*18*030*XN*A*E**FT~

Element Summary:

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
INS01	1073	Yes/No condition or response code **Y =**Yes (Indicates it is a subscriber record) **N =**No (Indicates it is a dependent record)	M	ID	1/1	Required	1	Code indicating a Yes or No condition or response

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
INS02	1069	Individual relationship code **01 =** Spouse **03 =** Father or Mother **04 =** Grandfather or Grandmother **05 =** Grandson or Granddaughter **06 =** Uncle or Aunt **07 =** Nephew or Niece **08 =** Cousin **09 =** Adopted Child **10 =** Foster Child **11 =** Son-in-law or Daughter-in –law **12 =** Brother-in-law or Sister-in-law **13 =** Mother-in-law or Father-in-law **14 =** Brother or Sister **15 =** Ward **16** = Stepparent	M	ID	2/2	Required	1	Code indicating the relationship between two individuals or entities. **This value should be 18 for the subscriber.**

		17 = Stepson or Stepdaughter						Due to Medicare Secondary Reporting (MSP) legislation, if the plan has medical benefits with a Domestic Partnership provision, the INS02=53 in the dependent record is required to identify a Domestic Partner Relationship.
		18 = Self						
		19 = Child						
		23 = Sponsored Dependent						
		24 = Dependent of Minor Dependent						
		25 = Ex-spouse						
		26 = Guardian						
		31 = Court Appointed Guardian						
		38 = Collateral Dependent						
		53 = Life Partner						
		60 = Annuitant						
		D2 = Trustee						
		G8 = Other Relationship						
		G9 = Other Relative						
INS03	875	Maintenance Type Code **001 =** Change	O	ID	3/3	Required	1	Code identifying the specific type of item maintenance
		021 = Addition						
		024 = Termination						
		025 = Reinstatement						
		030 = Audit or Compare (Full File)						

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
INS04	1203	Maintenance Reason Code **01 = Divorce** **02 = Birth** **03 = Death** **04 =** Retirement **05 = Adoption** **06 =** Strike **07 =** Termination of Benefits **08 = Termination of Employment** **09 = Consolidation Omnibus Budget Reconciliation Act (COBRA) Guardian recommends using this code for COBRA INS05 = C** **10 =** Consolidation Omnibus Budget Reconciliation Act (COBRA) Premium Paid **11 =** Surviving Spouse **14 =** Voluntary Withdrawal **15 =** Primary Care Provider (PCP) Change **16 =** Quit **17 =** Fired **18 =** Suspended **20 =** Active **21 =** Disability **22 =** Plan Change **25 =** Change in Identifying Data Elements	O	ID	2/3	Situational	1	Code identifying the reason for the maintenance change. **Guardian recommends utilizing the accurate reason code.**

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
		26 = Declined Coverage						
		27 = Pre-Enrollment						
		28 = Initial Enrollment						
		29 = Benefit Selection						
		31 = Legal Separation						
		32 = Marriage						
		33 = Personnel Data						
		37 = Leave of Absence with Benefits						
		38 = Leave of Absence without Benefits						
		39 = Lay Off with Benefits						
		40 = Lay Off without Benefits						
		41 = Re-enrollment						
		43 = Change of Location						
		59 = Non Payment						
		AA = Dissatisfaction with Office Staff						
		AB = Dissatisfaction with Medical Care /Services Rendered						
		AC = Inconvenient Office Location						
		AD = Dissatisfaction with Office Hours						
		AE = Unable to Schedule appointments in a Timely Manner						
		AF = Dissatisfaction with Physician's Referral Policy						
		AG = Less Respect and Attention Time Given than to Other Patients						

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
		AI = No Reason Given **AJ** = Appointment Times not met in a Timely Manner **AL** = Algorithm Assigned Benefit Selection **EC** = Member Benefit Selection **XN =** Notification Only **XT =** Transfer						
INS05	1216	Benefit Status Code **A =** Active **C =** Consolidated Omnibus Budget Reconciliation Act (COBRA) **S =** Surviving Insured **T =** Tax Equity and Fiscal Responsibility Act (TEFRA)	O	ID	1/1	Required	1	The type of coverage under which benefits are paid
INS06	C052	Medicare Status Code	O					
INS06-1	1218	Medicare Plan Code **A =** Medicare Part A **B =** Medicare Part B **C =** Medicare Part A and B **D =** Medicare **E =** No Medicare	**M**	ID	1/1	Required	1	Code identifying the Medicare Plan
INS06-2	1701	Medicare Eligibility Reason Code **0** = Age **1** = Disability **2** = End Stage Renal Disease (ESRD)	O	ID	1/1	Situational	1	Code specifying reason for Medicare Eligibility. **Not Used By Guardian**

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
INS06-3	1701	Eligibility Reason Code	O	ID	1/1	Not Used		**Not Used**
INS06-4	1701	Eligibility Reason Code	O	ID	1/1	Not Used		**Not Used**
INS07	1219	Consolidated Omnibus Budget Reconciliation Act (COBRA) **1 =** Termination of Employment **2 =** Reduction of work hours **3 =** Medicare **4 =** Death **5 =** Divorce **6 =** Separation **7 =** Ineligible Child **8 =** Bankruptcy of a Retired Employee **9** = Layoff **10** = Leave of Absence **ZZ** = Mutually Defined	O	ID	1 / 2	Situational	1	Qualifying Event Code **Guardian does not require this element. It can be sent in as blank**
INS08	584	Employment Status Code **AC** = Active **AO =** Active Military Overseas (Not used by Guardian **AU =** Active Military USA (Not used by Guardian **FT =** Full Time **L1 =** Leave of Absence **PT =** Part Time **RT =** Retired **TE =** Terminated	O	ID	2/2	Situational	1	Code showing the general Employment status of an employee/claimant **Guardian recommends this element for a subscriber**
INS09	1220	Student Status Code **F =** Full Time **N =** Not a Student **P =** Part Time	O	ID	1/1	Situational	1	Code indicating the Student status of the patient, not Handicapped, and not the insured. **This is used for non-spouse dependents**

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
INS10	1073	Yes/No Condition or Response Code **N =** No **Y =** Yes	O	ID	1/1	Situational	1	Code indicating a Yes or No Condition or Response **Handicap Indicator. This element is required if a dependent is disabled**
INS11	1250	Date Time Period Format Qualifier **D8 =** Date Expressed in format CCYYMMDD	X	ID	2/3	Situational	1	Code indicating the date format, time format, or date and time format
INS12	1251	Date Time Period	X	AN	1/35	Situational	1	Expression of a date, a time, or range of dates, times or dates and times.
INS13	1165	Confidentiality Code **R** = Restricted Access **U** = Unrestricted Access	O	ID	1/1	Situational	1	Code indicating the access to insured information
INS14	19	City Name	O	AN	2/30	Not Used		**Not Used**
INS15	156	State or Province Code	O	ID	2/2	Not Used		**Not Used**
INS16	26	Country Code	O	ID	2/3	Not Used		**Not Used**
INS17	1470	Number	O	N0	1/9	Situational	1	A generic number. Birth Sequence Number. Required if reporting family members with the same birth date, when needed for proper reporting, tracking, or response to benefit

REF – Subscriber Identifier – Loop 2000

User Option (Usage): Required

To specify identifying information

Example:
REF*0F*123456789~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
REF01	128	Reference Identification Qualifier **0F =** Subscriber Number	M	ID	2/3	Required	1	Code qualifying the reference identification
REF02	127	Reference identification	**X**	AN	1/**50**	Required	1	Reference information as defined for a particular transaction set or as specified by the reference identification qualifier. **Send the subscriber's social security number as a 9 digit number without embedded dashes.**
REF03	352	Description	X	AN	1/80	Not Used		**Not Used**
REF04	C040	Reference identifier	O			Not Used		**Not Used**

REF – Member Policy Number – Loop 2000

User Option (Usage): Situational

To specify identifying information

This Segment is REQUIRED by Guardian

Example:
REF*1L*00123456~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
REF01	128	Reference identification qualifier **1L =** Group or policy number	M	ID	2/3	Required	1	Code qualifying the reference identification
REF02	127	Reference identification	**X**	AN	**1/50**	Required	1	Reference information as defined for a particular transaction set or as specified by the reference identification qualifier. **This will reflect Guardian's group plan number, which is specific for each group. The format for this field should be an eight digit number. Example: 00123456.**
REF03	352	Description	X	AN	1/80	Not Used		**Not Used**
REF04	C040	Reference identifier	O			Not Used		**Not Used**

REF – Member Supplemental Identifier – Loop 2000

User Option (Usage): Situational

To specify identifying information

Note: This Loop can be used as an alternative of utilizing a combination of Loops 2700 – Additional Reporting Categories, 2710 – Member Reporting Category and Loop 2750 – Reporting Category. Guardian requires either this Loop **or** the combination of Loops 2700, 2710, and 2750.

Example:
REF*3H*0000*20050101~REF*DX*GUAR*20050101~REF*ZZ*0001*20050101~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
REF01	128	Reference identification qualifier **17 =** Client reporting category **23 =** Client Number – **Guardian uses this as the experience reporting division qualifier** **3H =** Case number **Guardian uses this as the division number qualifier** **4A =** Personal Identification Number (PIN) **6O =** Cross reference number – **Guardian uses this as the deceased employee SSN qualifier** **ABB** = Personal ID Number **Guardian uses this as the experience reporting location qualifier** **D3** = National Council for Prescription Drug Programs Pharmacy Number **DX =** Department / agency number – **Guardian uses this as the department code qualifier (if applicable)**	M	ID	2/3	Required	1	Code qualifying the reference identification

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
		F6 = Health insurance claim (HIC) number – not used by Guardian **P5** = Position Number **Q4 =** Prior identifier number **Guardian uses this as the experience reporting department qualifier** **QQ** = Unit Number **ZZ=** Mutually defined **Guardian uses this as the class code qualifier**						
REF02	127	Reference identification	**X**	AN	1/30	Situational	1	Reference information as defined for a particular transaction set or as specified by the reference identification qualifier.
REF03	352	Description	X	AN	1/80	Not Used	1	**Used to reflect the effective date of the division, class, and department. This field is required by Guardian in order to update our system accurately without manually reaching out for the date**
REF04	C040	Reference Identifier	O			Not Used		**Not Used**

DTP – Member Level Dates – Loop 2000

User Option (Usage): Situational

To specify any or all of a date, a time, or a time period

This Segment is REQUIRED by Guardian

Examples:
Active employee:
DTP*336*D8*19960705~DTP*300*D8*19960705~

Terminated/COBRA employee (no longer employed by the company):
DTP*336*D8*19960705~DTP*337*D8*20040101~DTP*300*D8*20040101~

Retired employee
DTP*336*D8*19960705~DTP*286*D8*20040101~(use retirement date in the 286 segment)

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
DTP01	374	Date/Time Qualifier **050** = Received - **Not Used by Guardian** **286 =** Retirement **Required if employee is retired = to date of retirement.** **296 =** Return to Work – **Not Used by Guardian** **297 =** Date Last Worked – **Not Used by Guardian** **300 =** Enrollment Signature Date **301 =** Consolidated Omnibus Budget Reconciliation Act (COBRA) Qualifying Event – **Not used by Guardian** **303 =** Maintenance Effective – **Not Used By Guardian** **336 =** Employment Begin Date - **Fulltime date of hire** **337 =** Employment End Date –	M	ID	3/3	Required	1	Code specifying type of date or time, or both date and time.

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
		338 = Medicare Begin – **Not used by Guardian**						
		339 = **Medicare End** – Not used by Guardian						
		340 = Consolidated Omnibus Budget Reconciliation Act (COBRA) Begin – **Not used by Guardian**						
		341 = Consolidated Omnibus Budget Reconciliation Act (COBRA) End – **Not used by Guardian**						
		350 = Education Begin – **Not used by Guardian**						
		351 = Education End – **Not used by Guardian**						
		356 = Eligibility Begin –This is used to convey the beginning date when a member could elect to enroll or begin benefits in any health care plan through the employer. This is not the actual begin date, which is conveyed in the DTP segment in position 270						
		357 = Eligibility End						
		383 = Adjusted Hire – **Not used by Guardian**						
		385 = Credit Service Begin						
		386 = Credit Service End – **Not used by Guardian**						
		393 = Plan Participation Suspension – **Not used by Guardian**						
		394 = Rehire – **Not used by Guardian**						
		473 = Medicaid begin – **Not used by Guardian**						
		474 = Medicaid end – **Not used by Guardian**						

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
DTP02	1250	Date Time Period Format Qualifier **D8 =** Date Expressed in format CCYYMMDD	M	ID	2/3	Required	1	Code indicating the date format, time format, or date and time format
DTP03	1251	Date Time Period	M	AN	1/35	Required	1	Expression of a date, a time, or range of dates, times, or dates and times

NM1 – Member Name – Loop 2100A

To supply the full name of an individual or organizational entity

User Option (Usage): Required

Example:
NM1*IL*1*SMITH*JOHN****34*123456789~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
NM101	98	Entity identifier code **74** = Corrected Insured **IL** = Insured or Subscriber. **Required by Guardian**	M	ID	2/3	Required	1	Code identifying an organizational entity, a physical location, property or an individual
NM102	1065	Entity type qualifier **1** = Person	M	ID	1/1	Required	1	Code qualifying the type of entity
NM103	1035	Name last or organization name	X	AN	1/**60**	Required	1	Individual last name or organizational name. **Last name with no punctuation**
NM104	1036	Name First	O	AN	1/**35**	Required	1	Individual first name. **First name with no punctuation.**
NM105	1037	Name Middle	O	AN	1/25	Situational	1	Individual middle name or initial. **Middle initial only is preferred**
NM106	1038	Name Prefix	O	AN	1/10	Situational	1	Prefix to individual name. **Leave blank**.
NM107	1039	Name Suffix	O	AN	1/10	Situational	1	Suffix to individual name. **Leave blank**.
NM108	66	Code qualifier **34** = Social security number – **Required by Guardian when passing dependent SSN** **ZZ** = Mutually defined	X	ID	1/2	Situational	1	Code designating the system/method of code structure used for Identification Code (67).
NM109	67	Identification code	X	AN	2/80	Situational	1	Code identifying a party or other code. **Subscriber SSN or the dependent SSN on a dependent record if available. *NOTE* The dependent SSN is required for all Medical benefits**
NM110	76	Entity relationship code	X	ID	2/2	Not used		**Not Used**
NM111	98	Entity identifier code	O	ID	2/3	Not used		**Not Used**
NM112	1035	Name Last or Organization Name	O	AN	1/60	Not Used		**Not Used**

PER – Member Communications Number – Loop 2100A

User Option (Usage): Situational

To identify a person or office to whom administrative communications should be directed

Example:
PER*IP**HP*8015554321~ (Recommended)
PER*IP**EM*testemail@test.com~ (Required)

Note: Guardian recommends HP (phone number) and requires it be followed by EM (email).

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
PER01	366	Contact function code **IP =** Insured Party	M	ID	2/2	Required	1	Code identifying the major duty or responsibility of the person or group named
PER02	93	Name	O	AN	1/60	**Not used**		
PER03	365	Communication number qualifier **AP** = Alternate Telephone **BN** = Beeper Number **CP** = Cellular Phone **EM =** Electronic mail **EX =** Telephone Extension **FX =** Facsimile **HP =** Home Phone Number **TE =** Telephone **WP =** Work Phone Number	X	ID	2/2	Required	1	Code identifying the type of communication number. **Guardian identifies HP, TE and EM.**
PER04	364	Communication number	X	AN	1/**256**	Required	1	Complete communications number including country or area code when applicable.
PER05	365	Communication number qualifier **AP** = Alternate Telephone **BN** = Beeper Number **CP** = Cellular Phone **EM =** Electronic mail	X	ID	2/2	Situational	1	Code identifying the type of communication number.

		EX = Telephone Extension FX = Facsimile						

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
		HP = Home phone number TE = Telephone WP = work number						
PER06	364	Communication number	X	AN	1/**256**	Required	1	Complete communications number including country or area code when applicable.
PER07	365	Communication number qualifier AP = Alternate Telephone BN = Beeper Number CP = Cellular Phone EM = Electronic mail EX = Telephone Extension FX = Facsimile HP = Home Phone Number TE = Telephone WP = Work Phone Number	X	ID	2/2	Required	1	Code identifying the type of communication number.
PER08	364	Communication number	X	AN	1/**256**	Required	1	Complete communications number including country or area code when applicable.
PER09	443	Contact Inquiry Reference	O	AN	1/20	Not Used		**Not Used**

N3 – Member Residence Street Address – Loop 2100A

User Option (Usage): Situational

To specify the location of the named party

This segment is REQUIRED by Guardian for employees

Example:
N3*50 ORCHARD STREET*APT 12~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
N301	166	Address information	M	AN	1/55	Required	1	Address information
N302	166	Address information	O	AN	1/55	Situational	1	

N4 – Member Residence City, State, Zip Code – Loop 2100A

User Option (Usage): Situational

To specify the geographic place of the name party

Example:
N4*ROCK HILL*FL*33131~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
N401	19	City name	O	AN	2/30	Required	1	Free form text for city name
N402	156	State or province code	**X**	ID	2/2	Situational	1	Code as defined by appropriate government agency. **State code**.
N403	116	Postal code	O	ID	3/15	Situational	1	Code defining international postal zone code excluding punctuation and blanks (zip code for United Stated). **Zip code should be the 5 digit code.**
N404	26	Country code	**X**	ID	2/3	Situational	1	Code identifying country. **Required only if country is not USA. Must be USA not US**
N405	309	Location qualifier **60** = Area Qualifier **CY** = County/Parish	**X**	ID	1/2	Situational	1	Code identifying type of location. **Send in blank**.
N406	310	Location identifier	O	AN	1/30	Situational	1	Code which identifies a specific location. **Send in blank.**
N407	1715	Country Subdivision Code	X	ID	1/3	Situational	1	Code identifying the country subdivision.

DMG – Member Demographics – Loop 2100A

User Option (Usage): Situational

To supply demographic information

This segment is REQUIRED by Guardian

Example:
If utilizing the DMG05 to DMG05-3 fields: DMG*D8*194509*F*M*H:0****1******~
If *not* utilizing the DMG05 to DMG05-3 fields: DMG*D8*19450915*F*M~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
DMG01	1250	Date time period format qualifier **D8 =** Date expressed in format CCYYMMDD	X	ID	2/3	Required	1	Code indicating the date format, time format, or date and time format
DMG02	1251	Date time period	X	AN	1/35	Required	1	Expression of a date, a time, or range of dates, times or dates and times. **Date of birth**.
DMG03	1068	Gender code **F =** Female **M =** Male **U =** Unknown – **Not used by Guardian**	O	ID	1/1	Required	1	Code indicating the sex of the individual
DMG04	1067	Marital status **B =** Registered domestic partner **D =** Divorced **I =** Single – **Recommended by Guardian** **M =** Married – **Recommended by Guardian** **R =** Unreported – **if marital status is "unknown", pass "R"** **S =** Separated **U =** Unmarried **W =** Widowed **X =** Legally separated	O	ID	1/1	Situational	1	Code defining the marital status of a person.
DMG05	C056	Composite Race or Ethnicity Information	X					

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
DMG05 -1	1109	Race or Ethnicity Code **7** = Not Provided **8** = Not Applicable **A** = Asian or Pacific Islander **B** = Black **C** = Caucasian **D** = Subcontinent Asian American **E** = Other Race or Ethnicity **F** = Asian Pacific American **G** = Native American **H** = Hispanic **I** = American Indian or Alaskan Native **J** = Native Hawaiian **N** = Black (Non-Hispanic) **O** = White (Non-Hispanic) **P** = Pacific Islander **Z** = Mutually Defined	O	ID	1/1	Situational	1	Code indicating the racial or ethnic background of a person.
DMG05-2	1270	Code List Qualifier Code **RET** = Classification of Race or Ethnicity	X	ID	1/3	Situational	1	Code identifying a specific industry code list.
DMG05-3	1271	Industry Code	X	AN	1/30	Situational	1	Code indicating a code from a specific industry code list
DMG06	1066	Citizen status code **1** = U.S. Citizen **2** = Non-Resident Alien **3** = Resident Alien **4** = Illegal Alien **5** = Alien **6** = U.S. Citizen – Non-Resident **7** = U.S. Citizen - Resident	O	ID	1/2	Situational	1	Code indicating citizenship status.
Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description

DMG07	26	Country code	O	ID	2/3	Not Used	1	**Not Used**
DMG08	659	Basis of verification code	O	ID	1/2	Not Used		**Not Used**
DMG09	380	Quantity	O	R	1/15	Not Used		**Not Used**
DMG10	1270	Code List Qualifier Code **REC** = Race or Ethnicity Collection Code	X	ID	1/3	Situational	1	Code identifying a specific industry code list.
DMG11	1271	Industry Code	X	AN	1/30	Situational	1	Code indicating a code from a specific industry code list

ICM – Member Income – Loop 2100A

User Option (Usage): Situational

To supply information to determine benefit eligibility, deductibles, and retirement and investment contributions

This segment is required by Guardian when submitting Disability and Life Benefits.

Example:
ICM*7*35000.00*40*20070101~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
ICM01	594	Frequency code **1 =** Weekly **2 =** Biweekly **3 =** Semimonthly **4 =** Monthly **6 =** Daily – **Not used by Guardian** **7 =** Annual **8 =** Two calendar months – **Not used by Guardian** **9 =** Lump sum separation allowance – **Not used by Guardian** **B =** Year to date – **Not used by Guardian** **C =** Single – **Not used by Guardian** **H =** Hourly **Q =** Quarterly – **Not used by Guardian** **S =** Semiannual – **Not used by Guardian** **U =** Unknown – **Not used by Guardian**	M	ID	1/1	Required	1	Code indicating frequency or type of payment
ICM02	782	Monetary amount	M	R	1/18	Required	1	Monetary amount. **Wage amount- decimal is required (see example). Wage must correspond with frequency code.**

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
ICM03	380	Quantity	O	R	1/15	Situational	1	Numeric value of quantity. **Work Hours Count – Weekly hours worked. This is REQUIRED when reporting Disability and Life benefits**
ICM04	310	Location Identifier	O	AN	1/30	Situational	1	Code which identifies a specific location. **Used to reflect the effective date of the Salary. This field is required by Guardian in order to update our system accurately without manually reaching out for the date.**
ICM05	1214	Salary Grade	O	AN	1/5	Situational	1	The salary grade code assigned by the employer. **Send in blank**
ICM06	100	Currency Code	O	ID	3/3	Not Used		**Not Used**

HLH – Member Health Information – Loop 2100A

User Option (Usage): Situational

To provide Health information

This segment is REQUIRED when indicated on Plan Specifications

Example:
HLH*T~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
HLH01	1212	Health-Related code **N =** None **S =** Substance abuse – **Not used by Guardian** **T =** Tobacco use **U =** Unknown – **Not used by Guardian** **X =** Tobacco use and substance abuse – **Not used by Guardian**	O	ID	1/1	Situational	1	Code indicating a specific health situation
HLH02	65	Height	O	R	1/8	Not Used		**Not Used**
HLH03	81	Weight	O	R	1/10	Not Used		**Not Used**
HLH04	81	Weight	O	R	1/10	Not Used		**Not Used**
HLH05	352	Description	O	AN	1/80	Not Used		**Not Used**
HLH06	1213	Current Health Condition Code	O	ID	1/1	Not Used		**Not Used**
HLH07	352	Description	O	AN	1/80	Not Used		**Not Used**

LUI – Member Language – Loop 2100A

User Option (Usage): Situational

To specify language, type of usage, and proficiency or fluency

Example:
LUI*LD*123**8~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
LUI01	66	Identification Code Qualifier **LD** = NISO Z39.53 Language Codes **LE** = ISO 639 Language Codes	X	ID	1/2	Situational	1	Code designating the system/method of code structure used for Identification Code (67)
LUI02	67	Identification Code	X	AN	2/80	Situational	1	Code identifying a party or other code
LUI03	352	Description	X	AN	1/80	Situational	1	A free-form description to clarify the related data elements and their content
LUI04	1303	Use of Language Indicator **5** = Language Reading **6** = Language Writing **7** = Language Speaking **8** = Native Language	O	ID	1/2	Situational	1	Code Indicating the use of a language
LUI05	1476	Language proficiency Indicator	O	ID	1/1	Not used		**Not used**

HD – Health Coverage – Loop 2300

User Option (Usage): Situational

To provide information on health coverage

This segment is REQUIRED by Guardian

Example:
HD*030**DEN*PPO*FAM~

Note: Examples are supplied at end of document for all benefits.

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
HD01	875	Maintenance type code **001** = Change **002** = Delete **021** = Addition **024** = Cancellation or termination **025** = Reinstatement **026** = Correction **030** = Audit or compare – **Guardian recommends this code** **032** = Employee information not applicable	M	ID	3/3	Required	1	Code identifying the specific type of item maintenance
HD02	1203	Maintenance reason code	O	ID	2/3	Not Used		**Not Used**
HD03	1205	Insurance line code **MM** = Medical **DEN** = Dental **PDG** = Prescription Drug **VIS** = Vision **LTD** = Long Term Disability **STD** = Short Term Disability **AH** = Basic Life	O	ID	2/3	Required	1	Code Identifying a group of insurance products. **Note: This field will 're-use' values in order to communicate Life, AD&D, Voluntary Life, and Voluntary AD&D, and other non-HIPAA coverage information. The misuse of this field causes the transaction to be out of HIPAA compliance, however we feel this is the most efficient way for a non-covered entity to communicate enrollment data to us for these coverages.**
Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
		AJ = Basic AD&D						

		HE = Dependent Life					
		FAC = Voluntary Life					
		HLT = Voluntary AD&D					
		LTC = Voluntary Long Term Disability					
		AK = Critical Illness/ Specified Disease					
		AG = Voluntary Critical Illness/ Specified Disease					
		EPO = Accident					
		PRA = Cancer					
		POS = Hospital Indemnity					
HD04	1204	Plan Coverage Description	O	AN	1/50	Situational	1	A description or number that describes the plan or coverage. **Guardian requires this element in certain situations. This will be a free form description based on the benefits being sent in for the plan. This will be discussed with the client at time of setup. For example: if the plan has two dental benefits, we may require PPO or HMO in this field. If insurance line is 'FAC' or 'HLT', used by Guardian for Voluntary Life, Voluntary AD&D, etc this field should contain the volume of coverage being elected.**

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
HD05	1207	Coverage Level Code **CHD =** Children only **DEP =** Dependents only **E1D =** Employee and one dependent (not Spouse) **E2D =** Employee and Two Dependents **E3D =** Employee and Three Dependents **E5D =** Employee and One or More Dependents E6D = **Employee and Two or More Dependents** **E7D =** Employee and Three or more Dependents **E8D =** Employee and Four or more Dependents **E9D =** Employee and Five or more Dependents **ECH =** Employee and Children **EMP =** Employee only **ESP =** Employee and Spouse **FAM =** Family **IND =** Individual – **Guardian does not use** **SPC =** Spouse and Children **SPO =** Spouse only **TWO =** Two Party – **Not used by Guardian**	O	ID	3/3	Situational	1	Code indicating the level of coverage being provided for the insured. **Guardian REQUIRES this element for all employee benefit elections. May be needed for dependent elections for Voluntary Life , Voluntary Accidental Death and Voluntary Critical Illness, See examples on pages: 90, 91, 93 and 96**

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
HD06	609	Count	O	N0	1/9	Not Used		**Not Used**
HD07	609	Count	O	N0	1/9	Not Used		**Not Used**
HD08	1209	Underwriting Decision Code	O	ID	1/1	Not Used		**Not Used**
HD09	1073	Yes/No Condition or Response Code **N** = No **Y** = Yes	O	ID	1/1	Situational	1	Code Indicating a Yes or No condition or response
HD10	1211	Drug House Code	O	ID	2/3	Not Used		**Not Used**
HD11	1073	Yes/No Condition or Response Code	O	ID	1/1	Not Used		**Not Used**

DTP – Health Coverage Dates – Loop 2300

User Option (Usage): Required

To specify any or all of a date, a time, or a time period

Example:
Active coverage (Begin Date): DTP*348*D8*19961001~
Waived coverage (End Date): DTP*348*D8*19961001~DTP*349*D8*20040101~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
DTP01	374	Date / time qualifier **300** = Enrollment Signature Date. **Not used by Guardian** **303** = Maintenance effective date. **Not used by Guardian**. **343** = Premium Paid to Date End. **Not used by Guardian** **348** = Benefit begin date. Date on which the subscriber's or dependent's benefit begins **349** = Benefit end date. Date on which the subscriber's or dependent's benefit ends. **543** = Last premium paid date. **Not used by Guardian**. **695** = Previous Period. **Not used by Guardian**	M	ID	3/3	Required	1	Code specifying type of date or time, or both date and time
DTP02	1250	Date time period format qualifier **D8** = Date expressed in format CCYYMMDD **RD8** = Range of Dates Expressed in Format CCYYMMDD-CCYYMMDD **Not used by Guardian**	M	ID	2/3	Required	1	Code indicating the date format, time format or date and time format.
DTP03	1251	Date time period	M	AN	1/35	Required	1	Expression of a date, a time, or range of dates, times or dates and times.

AMT – Health Coverage Policy – Loop 2300

User Option (Usage): Situational

Monetary Amount Information

Note: This loop can be used as an alternative of utilizing Loop 2300 – Health Coverages (HD04) for submitting in volume amount elections

Example:
AMT*FK*50000~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
AMT01	522	Amount Qualifier Code **B9** = Co – Insurance Actual **C1** = Co-Payment Amount **D2** = Deductible amount **EBA** = Expected Expenditure Amount **FK** = Other Unlisted Amount **Guardian utilizes this code** **P3** = Premium Amount **R** = Spend Down	M	ID	1/3	Required	1	Code to qualify amount **Guardian utilizes this Loop to identify volume amount elections for volume based benefits (i.e. 'FAC' or 'HLT' used by Guardian for Voluntary Life and Voluntary AD&D. this field should contain the volume of coverage being elected.**
AMT02	782	Monetary Amount	M	R	1/18	Required	1	Monetary Amount **This field should contain the volume of coverage being elected.**
AMT03	478	Credit / Debit Flag Code	O	ID	1/1	Not Used		**Not Used**

REF – Health Coverage Policy Number – Loop 2300

User Option (Usage): Situational

To specify identifying information

Example:
REF*1L*00123456~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
REF01	128	Reference identification qualifier **17**=Client reporting category **1L**=Group or policy number – **Required by Guardian** **9V =** Payment Category **CE** = Class of Contract Code **E8** = Service Contract (Coverage) Number **M7** = Medical Assistance Category **PID** = Program Identification Number **RB** = Rate Code Number **X9** = Internal Control Number **XM** = Issuer Number **XX1** = Special Program Code **XX2** = Service Area Code **ZX** = County Code **ZZ**=Mutually defined	M	ID	2/3	Required	1	Code qualifying the reference identification
Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description

REF02	127	Reference identification	X	AN	1/**50**	Required	1	Reference information as defined for a particular transaction set or specified by the reference identification qualifier. **This will reflect guardian's group plan number, which is specific for each group. The format for this field should be an eight digit number. Example: 00123456**
REF03	352	Description	X	AN	1/80	Not used		**Not Used**
REF04	C040	Reference identifier	O			Not used		**Not Used**

LX – Provider Information – Loop 2310

User Option (Usage): Situational

To reference a line number in a transaction set

Guardian recommends this Segment when a DHMO/HMO Dental benefit is present.

Example:
LX*1~

Please note: LX & NM1 segments are tied together - Do not pass one segment without the other segment

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
LX01	554	Assigned number	M	N0	1/6	Required	1	Number assigned for differentiation within a transaction set. **1 should be reflected in this field.**

NM1 – Provider Name – Loop 2310

User Option (Usage): Required

To supply the full name of an individual or organizational entity

Example:
NM1*QN*1******SV*0001111*72~

Please note: LX & NM1 segments are tied together - Do not pass one segment without the other segment

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
NM101	98	Entity identifier **1X** = Laboratory **3D** = Obstetrics and gynecology facility **80** = Hospital **FA** = Facility **OD** = Doctor of optometry **P3** = Primary care provider – Medical/Joint Venture **QA** = Pharmacy **QN** = Dentist – **Required by Guardian when plan has an HMO/MDG Dental benefit** **Y2** = Managed care organization	M	ID	2/3	Required	1	Code identifying an organizational entity, a physical location, property or an individual
NM102	1065	Entity type qualifier **1 =** Person **2 =** Non-person entity	M	ID	1/1	Required	1	Code qualifying the type of entity
NM103	1035	Name last or organization name	**X**	AN	1/**80**	Situational	1	Individual last name or organizational name
NM104	1036	Name first	O	AN	1/**35**	Situational	1	Individual first name
NM105	1037	Name middle	O	AN	1/25	Situational	1	Individual middle name or initial
NM106	1038	Name prefix	O	AN	1/10	Situational	1	Prefix to individual name
NM107	1039	Name suffix	O	AN	1/10	Situational	1	Suffix to individual name

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
NM108	66	Identification code qualifier **34** = Social Security Number **FI** = Federal Taxpayer's Identification Number **SV** = Service Provider Number **XX** = Centers for Medicare and Medicaid Services National Provider Identifier	X	ID	1/2	Situational	1	Code designating the system/method of code structure used for identification code (67). **Send SV when required**.
NM109	67	Identification code	X	AN	2/80	Situational	1	Code identifying a party or other code. **Send 7 digit PCD code when required**. **If not 7 numeric digits pad with leading zeros**
NM110	706	Entity Relationship Code **25 =** Established Patient **26 =** Not Established Patient **72 =** Unknown	X	ID	2/2	Required	1	Code describing entity relationship
NM111	98	Entity Identifier Code	O	ID	2/3	Not Used		**Not Used**
NM112	1035	Name Last or Organization Name	O	AN	1/60	Not Used		**Not Used**

LS – Additional Reporting Categories – Loop 2700

User Option (Usage): Situational

To indicate that the next segment begins a loop

This Loop in combination with Loops 2710 and 2750 can be used as an alternative of utilizing Loop 2000 – Member Supplemental Identifier. Guardian requires either the combination of Loops 2700, 2710 and 2750 **or** Loop 2000.

Example:
LS*2700~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
LS01	447	Loop Identifier Code	M	AN	1/4	Required	1	The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE. **Use the value 2700.**

LX – Member Reporting Categories – Loop 2710

User Option (Usage): Situational

To reference a line number in a transaction set

Example:
LX*1~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
LX01	554	Assigned number	M	N0	1/6	Required	1	Number assigned for differentiation within a transaction set.

N1 – Reporting Category – Loop 2750

User Option (Usage): Situational

To identify a party by type of organization, name, and code.

Example:
N1*75*Member Reporting ~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
N101	98	Entity identifier code **75 = Participant**	M	ID	2/3	Required	1	Code identifying an organizational entity, a physical location, property or an individual
N102	93	Name	X	AN	1/60	Required	1	Free-form name. **For Experience Reporting, when identifying a reporting class by product, please utilize:** **DEN** **STD** **LTD** **VIS** **LIFE** **ADD** **DEPLIFE** **VOLLTD** **VOLLIFE** **VOLADD**
N103	66	Identification Code Qualifier	X	ID	1/2	Not Used		**Not Used**
N104	67	Identification Code	X	AN	2/80	Not Used		**Not Used**
N105	706	Entity Relationship Code	O	ID	2/2	Not Used		**Not Used**
N106	98	Entity Identifier Code	O	ID	2/3	Not Used		**Not Used**

REF – Reporting Category Reference – Loop 2750

User Option (Usage): Situational

To specify identifying information

Example:
REF*19*0000~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
REF01	128	Reference Identification Qualifier **00 =** Contracting District Number **17** = Client Reporting Category **18** = Plan Number **19** = Division Identifier. **Guardian uses this as the division number qualifier** **26** = Union Number **3L** = Branch Identifier **Guardian uses this as the experience reporting class qualifier** **6M** = Application Number **9V =** Payment Category **9X** = Account Category **GE** = Geographic Number **LU** = Location Number. **Guardian uses this as the department code qualifier (if applicable)** **PID** = Program Identification Number **XX1** = Special Program Code **XX2** = **Service Area Code** **YY** = Geographic Key	M	ID	2/3	Required	1	Code qualifying the Reference Identification
Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
		ZZ = Mutually Defined. **Guardian uses this as the class code qualifier.**						

REF02	127	Reference Identification	X	AN	1/50	Required	1	Reference information as defined for a particular Transaction Set or as specified by the Reference Identification Qualifier
REF03	352	Description	X	AN	1/80	Not Used	1	**Not Used**
REF04	C040	Reference Identifier	O			Not Used	1	**Not Used**

DTP – Reporting Category Date – Loop 2750

User Option (Usage): Situational

To specify any or all of a date, a time, or a time period

Example:
DTP*007*D8*20100701~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
DTP01	374	Date / Time Qualifier **007** = Effective	M	ID	3/3	Required	1	Code specifying type of date or time, or both date and time.
DTP02	1250	Date Time Period Format Qualifier **D8** = Date Expressed in Format CCYYMMDD. **RD8 =** Range of Dates Expressed in Format CCYYMMDD-CCYYMMDD. **Guardian does not utilize this code**	M	ID	2/3	Required	1	Code indicating the date format, time format, or date and time format.
DTP03	1251	Date Time Period	M	AN	1/35	Required	1	Expression of a date, a time, or range of dates, times, or dates and times **Used to reflect the effective date of the division, class, and department. This field is required by Guardian in order to update our system accurately without manually reaching out for the date**

LE – Additional Reporting Categories Loop Termination

User Option (Usage): Situational

To indicate that the loop immediately preceding this segment is complete

Example:
LE*2700~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
LS01	447	Loop Identifier Code	M	AN	1/4	Required	1	The loop ID number given on the transaction set diagram is the value for this data element in segments LS and LE. **Use the value 2700.**

SE – Transaction Set Trailer – Loop None

User Option (Usage): Required

To indicate the end of the transaction set and provide the count of the transmitted segments (including the beginning (ST) and ending (SE) segments)

Please note: The HIPAA threshold limit of the INS count in a single ST/SE transaction set is 10,000.

Example:
SE*39*0001~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
SE01	96	Number of included segments	M	N0	1/10	Required	1	Total number of segment terminators (in most cases this will be a tilde (~)) contained in a transaction set including ST and SE segments. **Do not include: ISA, GS, IEA, GE.**
SE02	329	Transaction set control number	M	AN	4/9	Required	1	Identifying control number that must be unique within the transaction set functional group assigned by the originator for a transaction set. **Reference: The transaction set control numbers in ST02 and SE02 must be identical. This unique number also aids in error resolution research. For example, start with number 0001 and increment from there.**

GE – Functional Group Trailer – Loop None

User Option (Usage): Required

To indicate the end of a functional group and provide control information

Example:
GE*1*59160~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
GE01	97	Number of transaction sets included	M	N0	1/6	Required	1	Total number of transaction sets included in the functional group or interchange (transmission) group terminated by the trailer containing this data element
GE02	28	Group control number	M	N0	1/9	Required	1	Assigned number originated and maintained by the sender. Needs to match the GS06

IEA – Interchange Control Trailer – Loop None

User Option (Usage): Required

To define the end of an interchange of zero or more functional groups and interchange – related control segments

Example:
IEA*1*000000905~

Ref	ID	Element Name	Req	Type	Min/Max	Usage	Rep	Comments/Description
IEA01	I16	Number of included functional groups	M	N0	1/5	Required	1	A count of the number of functional groups included in an interchange
IEA02	I12	Interchange control number	M	N0	9/9	Required	1	A control number assigned by the interchange sender

Section 5: Sending the Enrollment File to Guardian

Options for Electronic Submission of the Enrollment File

You have two options for submitting your EDI files to Guardian. Your company's system capabilities should determine the appropriate method.

The two methods are:
1.   Secure File Transfer Protocol (SFTP)
2.   FTP with PGP

An SFTP questionnaire is available to set up new client credentials. Please email EDI_Implementation@glic.com.

Once the returned questionnaire is received and testing is in progress, our FTP Representative will contact the client to complete the File Transfer setup.

Section 6: Examples

Employee/spouse dental & vision coverage example is location billed (DX):

```
INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030**DEN**ESP~
DTP*348*D8*20070501~
HD*030**VIS**ESP~
DTP*348*D8*20070501~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030**DEN ~
DTP*348*D8*20070501~
HD*030**VIS ~
DTP*348*D8*20070501~
```

Dental HMO/PPO dental election passing LX segment for PCD code group is location billed. Example #1 is for the HMO election. Example #2 is for the PPO election:

EXAMPLE#1
INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030DEN*HMO*ESP~**
DTP*348*D8*20070501~
LX*1~
NM1*QN*1****XX*0001804*72~**
INS*N*01*030*XN*A**E*****N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030DEN*HMO ~**
DTP*348*D8*20070501~
LX*1~
NM1*QN*1****XX*0001804*72~**

Employee/spouse with dental PPO coverage (continued):

EXAMPLE#2
INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
PER*IP**EM*testemail@test.com~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030DEN*PPO*ESP~**
DTP*348*D8*20070501~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030DEN*PPO ~**
DTP*348*D8*20070501~

Employee electing Life and AD&D not salary based & dependent life group is location billed:
INS*Y*18*030*XN*A**E*****FT*N*N~ REF*0F*111111111~ REF*1L*00222222~ REF*3H*0000*20070501~ REF*DX*GUAR*20070501~ REF*ZZ*0001*20070501~ DTP*336*D8*20030213~ NM1*IL*1*Garcia*Carlos****34*111111111~ PER*IP**EM*testemail@test.com~ N3*2300 E Capital Dr~ N4*APPLETON*WI*54911~ DMG*D8*19851113*M*M~ **HD*030**AH**EMP~** DTP*348*D8*20070501~ **HD*030**AJ**EMP~** DTP*348*D8*20070501~ INS*N*01*030*XN*A**E******N*N~ REF*0F*111111111~ REF*1L*00222222~ REF*3H*0000*20070501~ REF*DX*GUAR*20070501~ REF*ZZ*0001*20070501~ DTP*336*D8*20030213~ NM1*IL*1*Garcia*Maria*A***34*222222222~ N3*2300 E Capital Dr~ N4*APPLETON*WI*54911~ DMG*D8*19850622*F~ **HD*030**HE~** DTP*348*D8*20070501~

Active employee with dependents for Voluntary Life FAC and Voluntary AD&D HLT (tied) (Example 1 of 2) life examples are location billed:

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030FAC*150000.00*FAM~**
DTP*348*D8*20070501~
HD*030HLT*150000.00*FAM~**
DTP*348*D8*20070501~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*222222222~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030FAC*75000.00~**
DTP*348*D8*20070501~
HD*030HLT*75000.00~**
DTP*348*D8*20070501~
INS*N*19*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Laura*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*20001022*F~
HD*030FAC*10000.00~**
DTP*348*D8*20070501~
HD*030HLT*10000.00~**
DTP*348*D8*20070501~

Active employee with dependents for Voluntary Life FAC and Voluntary AD&D HLT (tied) (Example 1 of 2) life examples are location billed.
ALTERNATIVE: Passing the volume in the AMT – Health Coverage Policy – Loop 2300 in place of passing of it in the HD – Health Coverage – Loop 2300.

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030FAC**FAM~**
DTP*348*D8*20070501~
AMT*FK*150000.00
HD*030HLT**FAM~**
DTP*348*D8*20070501~
AMT*FK*150000.00
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*222222222~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030FAC~**
DTP*348*D8*20070501~
AMT*FK*75000.00
HD*030HLT~**
DTP*348*D8*20070501~
AMT*FK*75000.00
INS*N*19*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Laura*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*20001022*F~
HD*030FAC~**
DTP*348*D8*20070501~
AMT*FK*10000.00~
HD*030HLT~**
DTP*348*D8*20070501~
AMT*FK*10000.00~

Active employee with dependents electing Voluntary Life FAC and Voluntary AD&D HLT tied (example 2 of 2)
INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030FAC*150000.00*EMP~**
DTP*348*D8*20070501~
HD*030HLT*150000.00*EMP~**
DTP*348*D8*20070501~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*222222222~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030FAC*75000.00*SPO~**
DTP*348*D8*20070501~
HD*030HLT*75000.00*SPO~**
DTP*348*D8*20070501~
INS*N*19*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Laura*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*20001022*F~
HD*030FAC**CHD~**
DTP*348*D8*20070501~
AMT*FK*10000.00~
HD*030HLT**CHD~**
DTP*348*D8*20070501~
AMT*FK*10000.00~

Active employee with dependents electing Voluntary Life FAC and Voluntary AD&D HLT tied (example 2 of 2)
ALTERNATIVE: Passing the volume in the AMT – Health Coverage Policy – Loop 2300 in place of passing of it in the HD – Health Coverage – Loop 2300.

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030FAC**EMP~**
DTP*348*D8*20070501~
AMT*FK*150000.00~
HD*030HLT**EMP~**
DTP*348*D8*20070501~
AMT*FK*150000.00~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*222222222~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030FAC**SPO~**
DTP*348*D8*20070501~
AMT*FK*75000.00~
HD*030HLT**SPO~**
DTP*348*D8*20070501~
AMT*FK*75000.00~
INS*N*19*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Laura*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*20001022*F~
HD*030FAC**CHD~**
DTP*348*D8*20070501~
AMT*FK*10000.00~
HD*030HLT**CHD~**
DTP*348*D8*20070501~
AMT*FK*10000.00~

Active employee electing Voluntary Life & Voluntary AD&D (HLT) benefits are tied employee only

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HLH*N~
HD*030FAC*100000.00*EMP~**
DTP*348*D8*20070501~
HD*030HLT*150000.00*EMP~**
DTP*348*D8*20070501~

Active employee electing Voluntary Life with AD&D (HLT) benefits are not tied for family - group is location billed

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
ICM*7*75000.00*40*20070326~
HD*030FAC*100000.00*ESP~**
DTP*348*D8*20070501~
HD*030HLT*150000.00*FAM~**
DTP*348*D8*20070501~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*222222222~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030FAC*75000.00~**
DTP*348*D8*20070501~
HD*030HLT*150000.00~**
DTP*348*D8*20070501~

Active employee with dependents electing Voluntary AD&D HLT (stand alone)

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030HLT*150000.00*EMP~**
DTP*348*D8*20070501~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*222222222~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030HLT*75000.00*SPO~**
DTP*348*D8*20070501~
INS*N*19*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Laura*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*20001022*F~
HD*030HLT*10000.00*CHD~**
DTP*348*D8*20070501~

Employee electing Critical Illness not salary based with dependents life group is location billed:

```
INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030**AK*20000*EMP~
DTP*348*D8*20070501~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*222222222~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030**AK*10000*SPO~
DTP*348*D8*20070501~
INS*N*19*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Mary*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19990630*F~
HD*030**AK*10000*CHD~
DTP*348*D8*20070501~
```

Active employee with dependents for Voluntary Critical Illness (Example 1 of 2) life examples are location billed:

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030AG*20000.00*FAM~**
DTP*348*D8*20070501~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~~
REF*DX*GUAR*20070501~~
REF*ZZ*0001*20070501~~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030AG*10000.00~**
DTP*348*D8*20070501~
INS*N*19*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Laura*A***34*444444444~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*20001022*F~
HD*030AG*10000.00~**
DTP*348*D8*20070501~

Active employee with dependents electing Voluntary Critical Illness (example 2 of 2)

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030AG*200000.00*EMP~**
DTP*348*D8*20070501~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030AG*10000.00*SPO~**
DTP*348*D8*20070501~
INS*N*19*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Laura*A***34*444444444~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*20001022*F~
HD*030AG*10000.00*CHD~**
DTP*348*D8*20070501~

Active employee with salary based benefits passing the ICM segment group is location billed
INS*Y*18*030*XN*A**E*****FT*N*N~ REF*0F*111111111~ REF*1L*00222222~ REF*3H*0000*20070501~ REF*DX*GUAR*20070501~ REF*ZZ*0001*20070501~ DTP*336*D8*20030213~ NM1*IL*1*Garcia*Carlos****34*111111111~ N3*2300 E Capital Dr~ N4*APPLETON*WI*54911~ DMG*D8*19851113*M*M~ **ICM*7*75000.00*40*20070326~** HLH*N~ HD*030**LTD**EMP~ DTP*348*D8*20070501~ HD*030**STD**EMP~ DTP*348*D8*20070501~ HD*030**AH**EMP~ DTP*348*D8*20070501~ HD*030**AJ**EMP~ DTP*348*D8*20070501~

Active employee requesting to end a benefit group is location billed
INS*Y*18*030*XN*A**E*****FT*N*N~ REF*0F*111111111~ REF*1L*00222222~ REF*3H*0000*20070501~ REF*DX*GUAR*20070501~ REF*ZZ*0001*20070501~ DTP*336*D8*20030213~ NM1*IL*1*Garcia*Carlos****34*111111111~ PER*IP**EM*testemail@test.com~ N3*2300 E Capital Dr~ N4*APPLETON*WI*54911~ DMG*D8*19851113*M*M~ ICM*7*75000.00*40*20070326~ HLH*N~ HD*030**DEN**EMP~ DTP*348*D8*20070501~ **DTP*349*D8*20070701~**

Active employee requesting to end a benefit for a dependent group is location billed

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
ICM*7*75000.00*40*20070326~
HD*030**DEN**EMP~
DTP*348*D8*20070701~
INS*N*01*030*XN*AE******N*N~**
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030**DEN~
DTP*348*D8*20070501~
DTP*349*D8*20070630~

Employment termination-1ˢᵗ of the month termination policy group is location billed

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
DTP*337*D8*20070413~
NM1*IL*1*Garcia*Carlos****34*111111111~
PER*IP**EM*testemail@test.com~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
ICM*7*75000.00*40*20070326~
HLH*N~
HD*030**DEN**EMP~
DTP*348*D8*20030301~
DTP*349*D8*20070430~

Employment termination non-1st of the month termination policy group is location billed
INS*Y*18*030*XN*A**E*****FT*N*N~ REF*0F*111111111~ REF*1L*00222222~ REF*3H*0000*20070501~ REF*DX*GUAR*20070501~ REF*ZZ*0001*20070501~ DTP*336*D8*20030213~ **DTP*337*D8*20070413~** NM1*IL*1*Garcia*Carlos****34*111111111~ PER*IP**EM*testemail@test.com~ N3*2300 E Capital Dr~ N4*APPLETON*WI*54911~ DMG*D8*19851113*M*M~ ICM*7*75000.00*40*20070326~ HLH*N~ HD*030**DEN**EMP~ DTP*348*D8*20030301~

Employment termination 1st of the month termination continuing on with COBRA group is location billed

Termination File:

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
DTP*337*D8*20070413~
NM1*IL*1*Garcia*Carlos****34*111111111~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
ICM*7*75000.00*40*20070326~
HLH*N~
HD*030**DEN**EMP~
DTP*348*D8*20030301~
DTP*349*D8*20070430~

Future COBRA files:

INS*Y*18*030***09*C***E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
DTP*337*D8*20070413~
NM1*IL*1*Garcia*Carlos****34*111111111~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
ICM*7*75000.00*40*20070326~
HLH*N~
HD*030**DEN**EMP~
DTP*348*D8*20070501~
DTP*349*D8*20081101~ (future COBRA end date)

Employment termination non-1ˢᵗ of the month termination continuing on with COBRA group is location billed

INS*Y*18*030***09*C***E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
DTP*337*D8*20070413~
NM1*IL*1*Garcia*Carlos****34*111111111~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030**DEN**EMP~
DTP*348*D8*20030301~ or DTP*D8*348*20070414~
DTP*349*D8*20081013~ (Future Cobra Term Date)

Dependent electing to use COBRA from a divorce of an employee for non 1ˢᵗ of the month termination group is location billed

INS*Y*18*030***09*C***E*****FT*N*N~
REF*0F*111111111~ **(dependents social security number)**
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20070121~ **(date of divorce)**
DTP*337*D8*20070121~ (date of divorce)
NM1*IL*1*Garcia*Carlos****34*111111111~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
ICM*7*75000.00*40*20070326~
HD*030**DEN****EMP~
DTP*348*D8*20070121~ **(date of divorce)**
DTP*349*D8*20081013~ (Future cobra Term Date)

Deceased employee with surviving dependents electing - non 1ˢᵗ of the month termination group is not location billed
INS*Y*18*030***03*C***E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
DTP*337*D8*20070821~ (date of death)
NM1*IL*1*Garcia*Carlos****34*111111111~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030**DEN***SPO*~
DTP*348*D8*20070501~
INS*N*01*030***03*A***E******N*N~
REF*0F*123456789~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria****34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19841013*F~
HD*030**DEN~
DTP*348*D8*20070501~
DTP*349*D8*20081013~ (Future cobra Term Date)

Dependent(s) electing to use COBRA from a death of an employee for non 1ˢᵗ of the month termination
INS*Y*18*030***09*C***E*****FT*N*N~
REF*0F*111111111~ **(dependents social security number)**
REF*1L*00222222~
REF*3H*0000*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20070821~ (date of death)
DTP*337*D8*20070821~ (date of death)
NM1*IL*1*Garcia*Maria****34*111111111~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*F*M~
HD*030**DEN***EMP*~
DTP*348*D8*20070821~ (date of death)
DTP*349*D8*20081101~ (future COBRA end date)

Employee Re-hire electing Dental.   Re-hire date =040107 group is location billed

```
INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20070401~ (actual rehire date)
NM1*IL*1*Garcia*Carlos****34*111111111~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
ICM*7*75000.00*40*20070401~
HD*030**DEN**EMP~
DTP*348*D8*20070401~
```

Retiree Record

```
INS*Y*18*030*XN*A***RT~ (RT=retiree)
REF*0F*111111111~
REF*1L*00340827~
REF*3H*0003~
REF*ZZ*0001~
DTP*336*D8*20000905~
DTP*286*D8*20100905~ (286=Retiree indicator/20100905=retiree date)
NM1*IL*1*GARCIA*CARLOS****34*111111111~
N3*2300 East Capitol Drive~
N4*Appleton*WI*54911~
DMG*D8*19851113*M*M~
ICM*7*150000.00*40*20080101*~
HLH*N~
HD*030**DEN**FAM~
DTP*348*D8*20040701~
REF*1L*00340827~
```

Employee/spouse dental & vision coverage example is location billed (LU) using combination of loops2700, 2710 and 2750 (LS – Additional Reporting Category, LX – Member Reporting, N1 Reporting Category, REF – Reporting Category Reference, DTP – Reporting Category Date, and LE – Additional Reporting Categories Loop Termination) to report division, department, class:

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030DEN**ESP~**
DTP*348*D8*20070501~
HD*030VIS**ESP~**
DTP*348*D8*20070501~
LS*2700~
LX*1~
N1*75*Member Reporting~
REF*19*0000~
DTP*007*D8*20100101~
LX*1~
N1*75*Member Reporting~
REF*LU*GUAR~
DTP*007*D8*20100101~
LX*1~
N1*75*Member Reporting~
REF*ZZ*0001~
DTP*007*D8*20100101~
LE*2700~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030DEN ~**
DTP*348*D8*20070501~
HD*030VIS ~**
DTP*348*D8*20070501~
LS*2700~
LX*1~
N1*75*Member Reporting~
REF*19*0000~
DTP*007*D8*20100101~
LX*1~
N1*75*Member Reporting~
REF*LU*GUAR~
DTP*007*D8*20100101~
LX*1~
N1*75*Member Reporting~
REF*ZZ*0001~
DTP*007*D8*20100101~

LE*2700~

Active employee with dependents electing Accident and Cancer Coverage

INS*Y*18*030*XN*A**E*****FT*N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Carlos****34*111111111~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19851113*M*M~
HD*030EPO**EMP~**
DTP*348*D8*20130101~
HD*030PRA**EMP~**
DTP*348*D8*20130101~
INS*N*01*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Maria*A***34*333333333~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*19850622*F~
HD*030EPO**SPO~**
DTP*348*D8*20130101~
HD*030PRA**SPO~**
DTP*348*D8*20130101~
INS*N*19*030*XN*A**E******N*N~
REF*0F*111111111~
REF*1L*00222222~
REF*3H*0000*20070501~
REF*DX*GUAR*20070501~
REF*ZZ*0001*20070501~
DTP*336*D8*20030213~
NM1*IL*1*Garcia*Laura*A***34*444444444~
N3*2300 E Capital Dr~
N4*APPLETON*WI*54911~
DMG*D8*20001022*F~
HD*030EPO**CHD~**
DTP*348*D8*20130101~
HD*030PRA**CHD~**
DTP*348*D8*20130101~

Member and Spouse Electing Hospital Indemnity Coverage

```
INS*Y*18*030*XN*A***FT~
REF*0F*555522244~
REF*1L*00512316~
REF*3H*0000~
REF*ZZ*0001~
DTP*336*D8*20150901~
NM1*IL*1*smith*robert~
N3*100 riverfront dr*Apt 1307~
N4*SACRAMENTO*CA*94203~
DMG*D8*19580226*F~
HD*030**POS*VOL*ESP~
DTP*348*D8*20151001~
HD*030**DEN**ESP~
DTP*348*D8*20151001~
INS*N*01*030*XN*A~
REF*0F*555522244~
REF*1L*00512316~
REF*3H*0000~
REF*ZZ*0001~
DTP*336*D8*20150901~
NM1*IL*1*smith*Kaitlyn~
N3*100 riverfront dr*Apt 1307~
N4*SACRAMENTO*CA*94203~
DMG*D8*19600803*F~
HD*030**POS*VOL*ESP~
DTP*348*D8*20151001~
HD*030**DEN**ESP~
DTP*348*D8*20151001~
```