BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA

ASC X12N 270 (005010X279A1) HEALTH CARE ELIGIBILITY BENEFIT INQUIRY AND RESPONSE
PHASE II
SYSTEM COMPANION GUIDE VERSION 1.0

November 2023

DISCLOSURE STATEMENT

Please note that the information in this guide is subject to change. We will make any changes available at www.SouthCarolinaBlues.com.

You can use this transaction set to inquire about the eligibility, coverage or benefits associated with a benefit plan, employer, plan sponsor, subscriber or a dependent under the subscriber's policy. The transaction set is intended to be used by all lines of insurance such as health, life, and property and casualty.

The use of this document is solely for the purpose of clarification. The information describes specific requirements to be used in processing BlueCross BlueShield of South Carolina and its subsidiaries' ASC X12/005010X279 Health Care Eligibility Benefit Inquiry (270) transactions (1) (2).

The 271 Response returned by BlueCross BlueShield of South Carolina should not be interpreted as a guarantee of payment. Payment of benefits remains subject to all health plan terms, limits, conditions, exclusions, and the member's eligibility at the time services are rendered.

BlueCross BlueShield of South Carolina currently accepts one type of transaction per transmission. Therefore, all ST01 elements within the transmission will equal the same transaction number. For example, 14 270 transactions are acceptable within one enveloping sequence, but 13 270s and one 276 within one enveloping sequence is unacceptable.

PREFACE

This Companion Guide to the v5010 ASC X12/005010X279 Health Care Eligibility Benefit Inquiry (270) Implementation Guide and associated errata adopted under Health Insurance Portability and Accountability Act (HIPAA) clarifies and specifies the data content when exchanging electronically with BlueCross BlueShield of South Carolina and its subsidiaries' health plan.

Transmissions based on this companion guide, used in tandem with the v5010 ASC X12/005010X279 Health Care Eligibility Benefit Inquiry (270) Implementation Guides, are compliant with both ASC X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12/005010X279 Health Care Eligibility Benefit Inquiry (270) Implementation Guides adopted for use under HIPAA.

The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

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INTRODUCTION

This application for real-time and batch 270/271 transactions follows the CAQH Phase II guidelines.

Scope

Providers, billing services and clearinghouses are advised to use the ASC X12/005010X279 Health Care Eligibility Benefit Inquiry (270) Implementation Guide as a basis for their submission of Eligibility and Benefit inquiries. This companion document should be used to clarify the business rules for 270/271 data content requirements, batch and real-time acknowledgment, connectivity, response time and system availability, specifically for submissions through the system. These rules differ from the Companion Guide for submissions via BlueCross BlueShield of South Carolinas EC Gateway connection. This document is intended for use with CAQH compliant systems.

Overview

The purpose of this document is to introduce and provide information about BlueCross BlueShield of South Carolina's CAQH solution for submitting real-time 270/271 transactions.

What Is CAQH?

CAQH stands for the Council for Affordable and Quality Healthcare. It is a not-for-profit alliance of health plans, provider networks and associations with a goal to provide a variety of solutions to simplify health care administration.

References

ASC X12 Version 5010A1 Implementation Guides: **www.wpc-edi.com**

Blue Cross Blue Shield of South Carolina, EDI Gateway Technical Communication User's Manual:
EDI Gateway Technical Communications Manual (southcarolinablues.com)

CAQH: www.caqh.org/core/operating-rules

Additional Information

Submitters must have Internet (HTTPS) connection capability to submit a 270 request and receive 271 responses.

The submitter must be associated with at least one provider in the BlueCross BlueShield of South Carolina provider database.

Both real-time and batch 270 inquiries are supported.

This system supports inquiries for BlueCross BlueShield of South Carolina members only.

GETTING STARTED

Working with BlueCross BlueShield of South Carolina

Providers, billing services and clearinghouses interested in submitting 270 inquiries and receiving 271 responses via BlueCross BlueShield of South Carolina should contact EDI Services at: edi.services@bcbssc.com.

Trading Partner Registration

Enrollment with the EDI Gateway requires prospective trading partners to complete and submit the BlueCross BlueShield of South Carolina EDIG Trading Partner Enrollment Form and the Trading Partner Agreement. The purpose of the BlueCross BlueShield of South Carolina EDIG Trading Partner Enrollment Form is to enroll providers, software vendors, clearinghouses and billing services as trading partners and recipients of electronic data. It is important you follow these instructions and complete all the required information.

Note: We will return incomplete forms to the applicant, which could delay the enrollment process.

TESTING WITH THE PAYER

You can find testing procedures in the EDI Gateway Technical Communication User's Manual located on Web page:
EDI Gateway Technical Communications Manual (southcarolinablues.com)

CONNECTIVITY WITH THE PAYER/COMMUNICATIONS

You can find connectivity and communication procedures in the EDI Gateway Technical Communication User's Manual located on Web page:
EDI Gateway Technical Communications Manual (southcarolinablues.com)

ACKNOWLEDGMENTS AND/OR REPORTS

You can find acknowledgements and/or reports in the EDI Gateway Technical Communication User's Manual located on Web page:
EDI Gateway Technical Communications Manual (southcarolinablues.com)

TRADING PARTNER AGREEMENTS

You can find the following trading partner agreements at southcarolinablues.com:
- Clearinghouse EDI Trading Partner Agreement
- Provider EDI Trading Partner Agreement

CONTACT INFORMATION

EDI Customer Service and Technical Assistance

Please call the BlueCross BlueShield of South Carolina Technology Support Center at 803-736-5980 or 800-868-2505 with questions or to report problems.

EDI Gateway's production environment is accessible 24 hours a day, seven days a week; with the exception of weekly maintenance performed Sundays between 3 p.m. and 10 p.m. EDI Gateway's test environment is accessible Monday through Saturday from 5 a.m. to 10 p.m.

Notifications of EDI Gateway outages are sent to trading partners via email. Notifications of scheduled outages are sent with two days prior notice. Notifications of unscheduled outages are sent as quickly as the outage is reported.

Provider Services

If you have questions regarding information related to subscribers that are non-technical, please contact BlueCross BlueShield of South Carolina at 800-334-2583.

Applicable Web/Email Contact Information

Additional information is available online at: www.SouthCarolinaBlues.com

CONTROL SEGMENTS/ENVELOPES

EDIG Specifications for Enveloping X12 Transactions

This table lists envelope instructions for inbound (to EDI Gateway) HIPAA X12 transactions

Segment Id	Data Element	Description
ISA01	Authorization Info Qualifier	03
ISA02	Authorization Information	BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA Assigned Trading Partner ID
ISA03	Security Information Qualifier	00
ISA05	Interchange ID Qualifier	ZZ
ISA06	Interchange Sender ID	BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA Assigned Trading Partner ID
ISA07	Interchange ID Qualifier	30 (qualifier indicating U.S. Federal Tax Identification Number)
ISA08	Interchange Receiver ID	Destination Entity U.S. Federal Tax Identification Number*
ISA15	Usage Indicator	P, T (production or test indicator)
GS02	Application Sender's Code	BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA Assigned Trading Partner ID
GS03	Application Receiver's Code	Destination Entity U.S. Federal Tax Identification Number. Must be same as ISA08.*

*BlueCross BlueShield of South Carolina and Subsidiaries:

Entity	Federal Tin
BlueCross BlueShield of South Carolina	570287419
BlueChoice HealthPlan of South Carolina	570768835
Carolina Benefit Administrators	571001631
Federal Bureau Of Prisons (FBOP)	592876465
Healthy Blue SC Medicaid	570768835
Planned Administrators, Incorporated (PAI)	570718839
Thomas H. Cooper & Company (TCC)	571032566

Note: Additional explanations are available in the ASC X12 Standards for Electronic Data Interchange Technical Report Type 3. The ASC X12 TR3s that detail the full requirements for these transactions are available at http://store.x12.org/store.

Planned Administrators, Incorporated (PAI) and Thomas H. Cooper & Company (TCC) are separate companies that provide third party administrative services on behalf of BlueCross.

BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA SPECIFIC BUSINESS RULES AND LIMITATIONS

Service Types
Here is the list of service types and whether or not they are supported by BLUE CROSS BLUE SHIELD OF SOUTH CAROLINA .

270 - EQ01 - Service Types				
Description	**Code**	**Supported Y/N**	**Other service types returned on response**	**Notes/Additional Information**
Medical Care	1	Y	1 Medical Care* 2 Surgical 42 Home Health Care 45 Hospice 69 Maternity 76 Dialysis 83 Infertility AG Skilled Nursing Care BT Gynecological BU Obstetrical DM Durable Medical Equipment (DME)*	(* = Active/Inactive only)
Surgical	2	Y	2 Surgical 7 Anesthesia 8 Surgical Assistance 20 Second Surgical Opinion	
Consultation	3	Y		
Diagnostic X-ray	4	Y		
Diagnostic Lab	5	Y		
Radiation Therapy	6	Y		
Anesthesia	7	Y		
Surgical Assistance	8	Y		
Other Medical	9	N		
Blood Charges	10	Y		
Used DME	11	Y		
DME Purchase	12	Y		
Ambulatory Service Center Facility	13	Y		
Renal Supplies in the Home	14	Y		
Alternate Method Dialysis	15	N		
Chronic Renal Disease (CRD) Equipment	16	Y		
Pre-Admission Testing	17	Y		
DME Rental	18	Y		
Pneumonia Vaccine	19	Y		
Second Surgical Opinion	20	Y		

Third Surgical Opinion	21	N		
Social Work	22	Y		
Diagnostic Dental	23	Y		
Periodontics	24	Y		
Restorative Dental	25	Y		
Endodontic	26	Y		
Maxillofacial Prosthetics	27	Y		
Adjunctive Dental Services	28	Y		
Health Benefit Plan Coverage	30	Y	01 - Medical Care* 33 - Chiropractic 35 - Dental Care* 47 - Hospital 48 - Hospital Inpatient 50 - Hospital Outpatient 52 - Hospital Emergency 86 - Emergency Services 88 - Pharmacy* 98 - Professional Visit, Office: Physician 98 - Professional Visit, Office: Physician, MSG01 - "Specialist" AL - Vision/Optometry* BZ - Professional Office Visit, Well MH - Mental Health* UC - Urgent Care	(* = Active/Inactive only)
Plan Waiting Period	32	N		
Chiropractic	33	Y	4 Diagnostic X-Ray 33 Chiropractic	
Chiropractic Office Visits	34	Y		
Dental Care	35	Y		
Dental Crowns	36	Y		
Dental Accident	37	Y		
Orthodontics	38	Y		
Prosthodontics	39	Y		
Oral Surgery	40	Y		
Routine Dental	41	Y		
Home Health Care	42	Y	42 Home Health Care A3 Professional (Physician) Visit - Home	
Home Health Prescriptions	43	N		
Home Health Visits	44	Y		
Hospice	45	Y		
Respite Care	46	Y		

Hospital	47	Y	47 Hospital (Outpatient POS) 51 Hospital – Emergency Accident 52 Hospital – Emergency Medical 53 Hospital – Ambulatory Surgical	
Hospital - Inpatient	48	Y	48 Hospital Inpatient 99 Professional (Physician) Visit Inpatient	
Hospital - Room and Board	49	Y		
Hospital - Outpatient	50	Y	50 Hospital Outpatient 51 Hospital Emergency Accident 52 Hospital Emergency Medical A0 Professional (Physician) Visit Outpatient	
Hospital - Emergency Accident	51	Y		
Hospital - Emergency Medical	52	Y		
Hospital - Ambulatory Surgical	53	Y		
Long Term Care	54	N		
Major Medical	55	N		
Medically Related Transportation	56	N		
Air Transportation	57	Y		
Cabulance	58	N		
Licensed Ambulance	59	Y		
General Benefits	60	N		
In-vitro Fertilization	61	Y		
MRI/CAT Scat	62	Y		
Donor Procedures	63	N		
Acupuncture	64	Y		
Newborn Care	65	Y		
Pathology	66	N		
Smoking Cessation	67	Y		
Well Baby	68	Y		
Maternity	69	Y		
Transplants	70			
Audiology Exam	71	Y		
Inhalation Therapy	72	Y		
Diagnostic Medical	73	Y	4 Diagnostic X-Ray 5 Diagnostic Lab 62 MRI/CAT Scan 73 Diagnostic Medical	
Private Duty Nursing	74	Y		

Prosthetic Device	75	Y		
Dialysis	76	Y		
Otological Exam	77	Y		
Chemotherapy	78	Y		
Allergy	79	N		
Immunizations	80	Y		
Routine Physical	81	Y		
Family Planning	82	Y		
Infertility	83	Y		
Abortion	84	Y		
AIDS	85	N		
Emergency Services	86	Y	51 Hospital Emergency Accident 52 Hospital Emergency Medical 86 Emergency Services 98 Professional (Physician) Visit Office	
Cancer	87	N		
Pharmacy	88	Y		(Active/Inactive Response only)
Free Standing Prescription Drug	89	N		
Mail Order Prescription Drug	90	N		
Brand Name Prescription Drug	91	N		
Generic Prescription Drug	92	N		
Podiatry	93	Y		
Podiatry - Office Visits	94	Y		
Podiatry - Nursing Home Visits	95	Y		
Professional (Physician)	96	Y		
Anesthesiologist	97	Y		
Professional (Physician) Visit - Office	98	Y	98 - Professional (Physician) Visit Office BZ - Professional Visit Office: Well 98 - Professional (Physician) Visit - Office - Specialist	
Professional (Physician) Visit - Inpatient	99	Y		
Professional (Physician) Visit - Outpatient	A0	Y		
Professional (Physician) Visit - Nursing Home	A1	Y		
Professional (Physician) Visit - Skilled Nursing	A2	Y		
Professional (Physician) Visit - Home	A3	Y		
Psychiatric	A4	Y		
Psychiatric - Room and Board	A5	Y		

Psychotherapy	A6	Y		
Psychiatric - Inpatient	A7	Y		
Psychiatric - Outpatient	A8	Y		
Rehabilitation	A9	Y		
Rehabilitation - Room and Board	AA	Y		
Rehabilitation - Inpatient	AB	Y		
Rehabilitation - Outpatient	AC	Y		
Occupational Therapy	AD	Y		
Physical Medicine	AE	Y		
Speech Therapy	AF	Y		
Skilled Nursing Care	AG	Y		
Skilled Nursing Care - Room and Board	AH	Y		
Substance Abuse	AI	Y		
Alcoholism	AJ	N		
Drug Addiction	AK	N		
Vision (Optometry)	AL	Y		(Active/Inactive Response Only)
Frames	AM	Y		
Routine Exam - Vision	AN	Y		
Lenses	AO	Y		
Nonmedically Necessary Physical	AQ	N		
Experimental Drug Therapy	AR	N		
Burn Care	B1	N		
Brand Name Prescription Drug - Formulary	B2	N		
Brand Name Prescription Drug - Non-formulary	B3	N		
Independent Medical Evaluation	BA	N		
Partial Hospitalization (Psychiatric)	BB	N		
Day Care (Psychiatric)	BC	N		
Cognitive Therapy	BD	N		
Massage Therapy	BE	N		
Pulmonary Rehabilitation	BF	Y		
Cardiac Rehabilitation	BG	Y		
Pediatric	BH	Y		
Nursery	BI	N		
Skin	BJ	N		
Orthopedic	BK	N		
Cardiac	BL	N		
Lymphatic	BM	N		
Gastrointestinal	BN	N		
Endocrine	BP	N		
Neurology	BQ	N		

Eye	BR	N		
Invasive Procedures	BS	N		
Gynecological	BT	Y		
Obstetrical	BU	Y		
Obstetrical/Gynecological	BV	Y		
Mail Order Prescription Drug - Brand Name	BW	N		
Mail Order Prescription Drug - Generic	BX	N		
Physician Visit - Office: Sick	BY	Y		
Physician Visit - Office: Well	BZ	Y		
Coronary Care	C1	N		
Private Duty Nursing - Inpatient	CA	N		
Private Duty Nursing - Home	CB	Y		
Surgical Benefits - Professional (Physician)	CC	Y		
Surgical Benefits - Facility	CD	Y		
Mental Health Provider - Inpatient	CE	Y		
Mental Health Provider - Outpatient	CF	Y		
Mental Health Facility - Inpatient	CG	Y		
Mental Health Facility - Outpatient	CH	Y		
Substance Abuse Facility - Inpatient	CI	Y		
Substance Abuse Facility - Outpatient	CJ	Y		
Mammogram, Low-Risk Patient	CN	Y		Screening Mammogram Benefits
Mammogram, High-Risk Patient	CM	Y		Diagnostic Mammogram Benefits
Flu Vaccination	CO	Y		
Eyewear and Eyewear Accessories	CP	N		
Case Management	CQ	N		
Dermatology	DG	N		
DME	DM	Y	DM – DME 12 - DME Purchase 18 - DME Rental	(Active/Inactive Response Only)
Diabetic Supplies	DS	N		
Generic Prescription Drug - Formulary	GF	N		
Generic Prescription Drug - Non-formulary	GN	N		
Allergy Testing	GY	Y		
Intensive Care	IC	Y		

Mental Health	MH	Y	MH - Mental Health* CE - MH Provider - Inpatient (prof.) CF - MH Provider - Outpatient (prof.) CG - MH Provider Facility - Inpatient CH - MH Provider Facility - Outpatient	(*Active/Inactive only)
Neonatal Intensive Care	NI	Y		
Oncology	ON	N		
Physical Therapy	PT	Y		
Pulmonary	PU	N		
Renal	RN	N		
Residential Psychiatric Treatment	RT	Y		
Transitional Care	TC	N		
Transitional Nursery Care	TN	N		
Urgent Care	UC	Y		

APPENDICES

Change Summary

Date	Updated by	Revision Number	Changes Made
March, 2016	Patricia O'Cain	Original Document	Original Document
November, 2023	Kim Lewis	1.0	Updated contact information and links on p. 7. Added Healthy Blue Medicaid to the table on p.10. Made other formatting changes.