
Provider eServices Companion Guide Series

Referral Inquiry and Response

For Clearinghouses and Providers
Connecting Directly or Indirectly to Aetna

Companion Guide

**Refers to the X12N Implementation Guide
004010X059: 278 Health Care Services Review
- Inquiry and Response**

Companion Guide Version Number: 1.0

November 2006



This document is intended for use by Aetna personnel and by clearinghouses and providers connecting either directly or indirectly to Aetna.

Preface

The **Provider eServices Companion Guide Series** clarifies and specifies the data format and content being requested when data is transmitted electronically to Aetna. For HIPAA-mandated provider transactions, the Companion Guides are based on the X12N Implementation Guides adopted under HIPAA. The Companion Guides are not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.



Aetna Provider Transaction Companion Guide Series

This is the 278 Referral Inquiry & Response Companion Guide from the Provider eServices Companion Guide Series. It follows the WEDI/CAQH “best practices” template for describing a payer’s implementation of a HIPAA-mandated transaction.

The WEDI/CAQH “best practices” companion guide template is designed to include all of the information needed by Aetna’s trading partners¹ to process HIPAA transactions with Aetna. Much of that information, such as Aetna-specific business rules and limitations, applies to any covered entity wishing to process transactions with Aetna, whether connected directly or indirectly. Other information, such as communication protocol specifications and control segments / envelopes, applies only to directly-connected trading partners.

Providers and clearinghouses connected indirectly to Aetna through a third party clearinghouse should contact that party for their companion guide documentation for communication protocol specifications, control segments / envelopes, etc.

Information	Directly-Connected Trading Partners	Indirectly-Connected Providers and Clearinghouses
Connectivity options, communication protocol specifications, interchange control envelope, implementation plans	Provider eServices Companion Guide Series - Master Guide	These entities should ask the clearinghouse with whom they are directly connected for that clearinghouse’s documentation
For each provider transaction, functional group envelope, implementation plans	Provider eServices Companion Guide Series - [Transaction] General Instructions	These entities should ask the clearinghouse with whom they are directly connected for that clearinghouse’s documentation
For each HIPAA-mandated provider transaction, clarification of Aetna’s usage of the HIPAA implementation guide for that transaction	Provider eServices Companion Guide Series - [Transaction] Companion Guide	Provider eServices Companion Guide Series - [Transaction] Companion Guide In addition, these entities should ask the clearinghouse with whom they are directly connected for that clearinghouse’s documentation
For each non-HIPAA provider transaction (e.g., roster, referral or precert ² inquiry, unsolicited claim status), either a listing of Aetna’s usage of the transaction set or clarification of Aetna’s usage of the named implementation guide for that transaction	Provider eServices Companion Guide Series - [Transaction] Companion Guide	These entities should ask the clearinghouse with whom they are directly connected for that clearinghouse’s documentation

¹ The term "trading partner" is used exclusively in this document to express the meaning ascribed to it by the Health Insurance Portability and Accountability Act. Physicians are independent contractors. Use herein of the HIPAA-defined term "trading partner" does not imply an agency relationship with Aetna.

² The term "precert" here means the utilization review process to determine whether the requested service, procedure, prescription drug or medical device meets the company's clinical criteria for coverage. It does not mean precertification as defined by Texas law, as a reliable representation of payment of care or services to fully insured HMO and PPO members.

Overview of Aetna's Referral 278 Inquiry and Response

Please note that the **004010X059: 278 Health Care Services Review – Inquiry and Response Implementation Guide**, which is not mandated by HIPAA, allows for three types of Request Category Code (UM01). Two of these types apply to precertifications only, and the third applies to referrals only:

• AR (Admission Review)	Applies to precertifications for inpatient services (Admission Requests)
• HS (Health Services Review)	Applies to precertifications for procedures
• SC (Specialty Care Review)	Applies to referrals to a specialist or specialty

The **278 Referral Inquiry Companion Guide** (this document) applies only to inquiries on previously submitted referrals. Aetna also has the following 278 Health Care Services Review Inquiry Companion Guide:

- 278 Precertification Inquiry Response Companion Guide

In addition, Aetna supports the **004010X094A1: 278 Health Care Services Review – Request for Review and Response Implementation Guide**, which is mandated by HIPAA. Aetna has the following 278 Health Care Services Review – Inquiry and Response Companion Guides:

- 278 Medical Precertification Request / Response Companion Guide
- 278 Pharmacy Precertification Request / Response Companion Guide
- 278 Dental Referral or Precertification Request / Response Companion Guide
- 278 Medical Precertification Appeals and Extensions Companion Guide
- 278 Referral Request / Response Companion Guide

Disclaimer

A **certification action** indicating “**Certified in total**” is **not** a guarantee of payment. Payment is subject to eligibility on date of service, plan benefits limitations and exclusions, pre-existing condition limitations, and patient liability under the plan.

Referral Inquiry Requests

To search for previously submitted referral, the following fields will be used:

Requesting Provider ID	Always required
Member ID	Always required
Patient Date of Birth	Required for non-HMO members
Patient First Name	Required for non-HMO members if multiple family members have the same date of birth (e.g., twins)
Previous Referral ID	Optional



Aetna's Usage of the 004010X059: 278 Health Care Services Review – Inquiry and Response for Referrals

This section describes Aetna's usage of loops, segments, data elements and code values when the information in the **004010X059: 278 Health Care Services Review – Inquiry and Response Implementation Guide** requires clarification for referrals. The tables contain a row for each item where Aetna has something additional to convey. The intention is to convey information that is within the framework of the *ASC X12N Implementation Guides*. The *Companion Guide* may, for example:

- Indicate a desired number of repeats of loops, or segments
- Specify a sub-set of the IG's internal code listings
- Clarify the use of loops, segments, composite and simple data elements
- Provide other information tied directly to a loop, segment, composite or simple data element pertinent to electronic transactions with Aetna, such as whether or not data that can be required at the payer's discretion is in fact required by Aetna to process the transaction, or whether Aetna has implemented or plans to implement specific edits

LEGEND:

SHADED rows represent "segments" in the X12N implementation guide

NON-SHADED rows represent "data elements" in the X12N implementation guide.

"Loop – specific" comments should be indicated in the first segment of the loop.

Notes and comments are placed at the deepest level of detail. For example, a note about a code value is placed on a row specifically for that code value, not in a general note about the segment.

Transaction	See Details Beginning on Page...
278 Health Care Services Review – Inquiry	8
278 Health Care Services Review – Inquiry Response	13

Change Control Log

10/13/2005 : Updated Request's 2010B NM108 and NM109 to support 10 byte National Provider Identifier [NPI], and 2010B REF (Supplemental Provider Identifier) to support 2-7 byte Carrier Assigned Reference Number when NPI submitted as Primary ID.

Updated Response 2000G : deleting AAA01 variance from standard ; HCR 02 & 03 - added NA & 89 as unsupported values effective 5/13/2005

9-18-06: Deleted use of the REF segments for the HL21 loop in request. Deleted the 'XX' qualifier in NM108 for HL21, HLP A and HL19 on the response due to a production release scheduled for 11/11/06 to accept, process and return NPI.

Aetna's Use of the 278 Referral Inquiry

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
58	Header	BHT03	Reference Identification			Instructions to clearinghouses on how to populate this data element are described in the Aetna Provider Transaction Companion Guide Series Master Guide document. Indirectly-connected clearinghouses or providers should discuss this info with the clearinghouse with which they are connecting to Aetna.
Utilization Management Organization Loop						
62	2010A	NM102	Entity Type Qualifier	1		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
62	2010A	NM103	Utilization Management Organization (UMO) Last or Organization Name			<i>AETNA is the correct organizational name</i>
62	2010A	NM104; NM105; NM107	Utilization Management Organization First Name; Utilization Management Organization Middle Name; Utilization Management Organization Name Suffix			Data element(s) situational in the X12 IG but will not be used by Aetna
63	2010A	NM108	Identification Code Qualifier	24; 34; 46; XV; XX		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
63	2010A	NM109	Utilization Management Organization (UMO) Identifier			<i>953402799 is the correct identification code</i>



Aetna's Use of the 278 Referral Inquiry

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
Requester Loop						
66	2010B	NM101	Entity Identifier Code	FA; PR; TV		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
67	2010B	NM102	Entity Type Qualifier	2		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
67	2010B	NM103; NM104; NM105; NM107	Requester Last or Organization Name; Requester First Name; Requester Middle Name; Requester Name Suffix			Data element(s) situational in the X12 IG but will not be used by Aetna
68	2010B	NM108	Identification Code Qualifier	24; 34; PI; XV		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
68	2010B	NM109	Requester Identification Code		<i>Min 2 Max 10</i>	
69	2010B	REF01	Reference Identification Qualifier			Segment is situational in the X12 IG but will not be used by Aetna
69	2010B	REF02	Requester Supplemental Identifier			Segment is situational in the X12 IG but will not be used by Aetna
71	2010B	N3	Requester Address			Segment is situational in the X12 IG but will not be used by Aetna
72	2010B	N4	Requester City/State/Zip Code			Segment is situational in the X12 IG but will not be used by Aetna
74	2010B	PER	Requester Contact Information			Segment is situational in the X12 IG but will not be used by Aetna
77	2010B	PRV	Requester Provider Information			Segment is situational in the X12 IG but will not be used by Aetna
Subscriber Loop						
79	2000C	HL	Subscriber Hierarchical Level			Only the first occurrence of this loop will be used by Aetna
84	2000C	HI	Subscriber Diagnosis			Segment is situational in the X12 IG but will not be used by Aetna

Aetna's Use of the 278 Referral Inquiry

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
94	2010C	NM103; NM104; NM105; NM107	Subscriber Last Name; Subscriber First Name; Subscriber Middle Name; Subscriber Name Suffix			Data element(s) situational in the X12 IG but will not be used by Aetna
95	2010C	NM108	Identification Code Qualifier	ZZ		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
95	2010C	NM109	Subscriber Primary Identifier		Min 2 Max 13	Numeric or alphanumeric (A-Z, upper case and/or 0- 9) – if value is NOT = [8 characters with at least one alpha byte] then Patient Date of Birth will also be required for referral inquiries
96	2010C	REF	Subscriber Supplemental Identification			Segment is situational in the X12 IG but will not be used by Aetna
99	2010C	DMG	Subscriber Demographic Information			When patient = subscriber, segment may be required for referral inquiries – see comments at 2010C: NM109
100	2010C	DMG03	Gender Code			Data element(s) situational in the X12 IG but will not be used by Aetna
Dependent Loop						
101	2000D	HL	Dependent Hierarchical Level			Only the first occurrence of this loop will be used by Aetna
105	2000D	HI	Dependent Diagnosis			Segment is situational in the X12 IG but will not be used by Aetna
115	2010D	NM103; NM105; NM107	Dependent Last Name; Dependent Middle Name; Dependent Name Suffix			Data element(s) situational in the X12 IG but will not be used by Aetna
116	2010D	REF	Dependent Supplemental Identification			Segment is situational in the X12 IG but will not be used by Aetna

Aetna's Use of the 278 Referral Inquiry

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
118	2010D	DMG	Dependent Demographic Information			<i>When patient = dependent, segment may be required for referral inquiries – see comments at 2010C: NM109</i>
119	2010D	DMG03	Gender Code			Data element(s) situational in the X12 IG but will not be used by Aetna
120	2010D	INS	Dependent Relationship			Segment is situational in the X12 IG but will not be used by Aetna
Referring Provider Loop						
123	2000E	HL	Hierarchical Level			Loop is situational in the X12 IG but will not be used by Aetna
Service Provider Loop						
135	2000F	HL	Hierarchical Level			Loop is situational in the X12 IG but will not be used by Aetna
Service Loop						
152	2000G	UM01	Request Category Code	SC		<i>SC is used for referral inquiries</i>
152	2000G	UM03; UM04	Service Type Code; Health Care Service Location Information			Data element(s) situational in the X12 IG but will not be used by Aetna
157	2000G	HCR	Health Care Services Review			Segment is situational in the X12 IG but will not be used by Aetna
160	2000G	REF02	Previous Certification Identification		<i>Min 9 Max 15</i>	
161	2000G	DTP	Service Date			Segment is situational in the X12 IG but will not be used by Aetna
163	2000G	DTP	Admission Date			Segment is situational in the X12 IG but will not be used by Aetna
165	2000G	DTP	Surgery Date			Segment is situational in the X12 IG but will not be used by Aetna
167	2000G	DTP	Certification Issue Date			Segment is situational in the X12 IG but will not be used by Aetna



Aetna's Use of the 278 Referral Inquiry

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
169	2000G	DTP	Certification Expiration Date			Segment is situational in the X12 IG but will not be used by Aetna
170	2000G	DTP	Certification Effective Date			Segment is situational in the X12 IG but will not be used by Aetna
172	2000G	DTP	Health Care Services Review Request Date			Segment is situational in the X12 IG but will not be used by Aetna
174	2000G	HI	Procedures			Segment is situational in the X12 IG but will not be used by Aetna



Aetna's Use of the 278 Referral Inquiry Response

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
Aetna's Use of the 278 Referral Inquiry Response						
196	Header	BHT06	Transaction Type Code			Data element(s) situational in the X12 IG but will not be used by Aetna
Utilization Management Organization Loop						
199	2000A	AAA	Request Validation			Segment is situational in the X12 IG but will not be used by Aetna
202	2010A	NM102	Entity Type Qualifier	1		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
202	2010A	NM104; NM105; NM107	Utilization Management Organization First Name; Utilization Management Organization Middle Name; Utilization Management Organization Name Suffix			Data element(s) situational in the X12 IG but will not be used by Aetna
203	2010A	NM108	Identification Code Qualifier	24; 34; 46; XV; XX		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
204	2010A	PER	Utilization Management Organization Contact Information			Segment is situational in X12 IG but will not be used by Aetna
208	2010A	AAA01	Valid Response Indicator	Y		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
209	2010A	AAA03	Reject Reason Code	04; 41; 79; 80; T4		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
209	2010A	AAA04	Follow-Up Action Code	Y		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna



Aetna's Use of the 278 Referral Inquiry Response

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
Requester Name Loop						
213	2010B	NM101	Entity Identifier Code	FA; PR; TV		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
214	2010B	NM108	Identification Code Qualifier	24; 34; PI; XV		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
216	2010B	REF	Requester Supplemental Identification			Segment is situational in X12 IG but will not be used by Aetna
218	2010B	AAA01	Valid Response Indicator	Y		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
219	2010B	AAA03	Reject Reason Code	04; 35; 41; 44; 45; 46; 46; 49; 50; 51; 79; 97		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
219	2010B	AAA04	Follow-Up Action Code	N; R		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
220	2010B	PRV	Requester Provider Information			Segment is situational in X12 IG but will not be used by Aetna
Subscriber Loop						
225	2000C	TRN01	Trace Type Code	1		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
227	2000C	AAA	Request Validation			Segment is situational in the X12 IG but will not be used by Aetna
229	2000C	DTP	Accident Date			Segment is situational in the X12 IG but will not be used by Aetna
230	2000C	DTP	Last Menstrual Period Date			Segment is situational in the X12 IG but will not be used by Aetna
231	2000C	DTP	Estimated Date of Birth			Segment is situational in the X12 IG but will not be used by Aetna

Aetna's Use of the 278 Referral Inquiry Response

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
232	2000C	DTP	Onset of Current Symptoms or Illness Date			Segment is situational in the X12 IG but will not be used by Aetna
234	2000C	HI01-01	Diagnosis Type Code	BJ; BK		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
234	2000C	HI02-01	Diagnosis Type Code	BJ		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
234	2000C	HI01-02	Industry Code		Min: 3 Max: 5	Alpha numeric or numeric
234	2000C	HI01-03 ; HI01-04 ; HI02-03 ; HI02-04 ; HI03-03 ; HI03-04	Date Time Period Format Qualifier; Date Time Period			Data element(s) situational in X12 IG but will not be used by Aetna
236	2000C	HI04 ; HI05 ; HI06 ; HI07 ; HI08 ; HI09 ; HI10 ; HI11 ; HI12	Diagnosis 4; Diagnosis 5; Diagnosis 6; Diagnosis 7; Diagnosis 8; Diagnosis 9; Diagnosis 10; Diagnosis 11; Diagnosis 12			Data element(s) situational in X12 IG but will not be used by Aetna
244	2010C	NM108	Identification Code Qualifier	ZZ		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
247	2010C	REF01	Reference Identification Qualifier	1L; 1W; 6P; A6; F6; HJ; IG; N6; NQ; SY		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
249	2010C	AAA01	Valid Response Indicator	Y		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
250	2010C	AAA03	Reject Reason Code	04; 15; 65; 66; 71; 72; 73; 74; 75; 76; 78; 79; 89		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna

Aetna's Use of the 278 Referral Inquiry Response

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
250	2010C	AAA03	Reject Reason Code	95		Code value(s) listed here are <u>not defined in X12 IG</u> for this data element, but <u>will be used by Aetna</u>
251	2010C	AAA04	Follow-Up Action Code	N; S		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
Dependent Loop						
256	2000D	TRN01	Trace Type Code	1		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
259	2000D	AAA	Request Validation			Segment is situational in the X12 IG but will not be used by Aetna
261	2000D	DTP	Accident Date			Segment is situational in the X12 IG but will not be used by Aetna
262	2000D	DTP	Last Menstrual Period Date			Segment is situational in the X12 IG but will not be used by Aetna
263	2000D	DTP	Estimated Date of Birth			Segment is situational in the X12 IG but will not be used by Aetna
264	2000D	DTP	Onset of Current Symptoms or Illness Date			Segment is situational in the X12 IG but will not be used by Aetna
267	2000D	HI01-01	Diagnosis Type Code	BJ; BK		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
267	2000D	HI02-01	Diagnosis Type Code	BJ		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
267	2000D	HI01-02	Industry Code		Min: 3 Max: 5	Alpha numeric or numeric
267	2000D	HI01-03 ; HI01-04 ; HI02-03 ; HI02-04 ; HI03-03 ; HI03-04	Date Time Period Format Qualifier; Date Time Period			Data element(s) situational in X12 IG but will not be used by Aetna



Aetna's Use of the 278 Referral Inquiry Response

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
269	2000D	HI04 ; HI05 ; HI06 ; HI07 ; HI08 ; HI09 ; HI10 ; HI11 ; HI12	Diagnosis 4; Diagnosis 5; Diagnosis 6; Diagnosis 7; Diagnosis 8; Diagnosis 9; Diagnosis 10; Diagnosis 11; Diagnosis 12			Data element(s) situational in X12 IG but will not be used by Aetna
279	2010D	REF01	Reference Identification Qualifier	A6; SY		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
281	2010D	AAA01	Valid Response Indicator	Y		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
282	2010D	AAA03	Reject Reason Code	04; 15; 33; 65; 66; 71; 89		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
282	2010D	AAA03	Reject Reason Code	95		Code value(s) listed here are <u>not defined in X12 IG</u> for this data element, but <u>will be used by Aetna</u>
282	2010D	AAA04	Follow-Up Action Code	N; S		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
286	2010D	INS	Dependent Relationship			Segment is situational in X12 IG but will not be used by Aetna
Referring Provider Loop						
292	2010E	NM102	Entity Type Qualifier	2		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
292	2010E	NM108	Identification Code Qualifier	24; 34		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna



Aetna's Use of the 278 Referral Inquiry Response

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
294	2010E	REF	Referring Provider Supplemental Identification			Segment is situational in the X12 IG but will not be used by Aetna
296	2010E	N3	Referring Provider Address			Segment is situational in the X12 IG but will not be used by Aetna
297	2010E	N4	Referring Provider City/State/Zip Code			Segment is situational in the X12 IG but will not be used by Aetna
299	2010E	PER	Referring Provider Contact Information			Segment is situational in the X12 IG but will not be used by Aetna
302	2010E	AAA	Referring Provider Request Validation			Segment is situational in the X12 IG but will not be used by Aetna
305	2010E	PRV	Referring Provider Information			Segment is situational in the X12 IG but will not be used by Aetna
Service Provider Loop						
311	2010F	NM101	Entity Identifier Code	IT; FA		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
311	2010F	NM102	Entity Type Qualifier	2		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
312	2010F	NM108	Identification Code Qualifier	24; 34		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
313	2010F	REF	Service Provider Supplemental Identification			Segment is situational in the X12 IG but will not be used by Aetna
315	2010F	N3	Service Provider Address			Segment is situational in the X12 IG but will not be used by Aetna
316	2010F	N4	Service Provider City/State/Zip Code			Segment is situational in the X12 IG but will not be used by Aetna
318	2010F	PER	Service Provider Contact Information			Segment is situational in the X12 IG but will not be used by Aetna



Aetna's Use of the 278 Referral Inquiry Response

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
321	2010F	AAA	Service Provider Request Validation			Segment is situational in the X12 IG but will not be used by Aetna
324	2010F	PRV01	Provider Code	AD; AS; AT; CO; CV; OP; OT; PC		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
Service Loop						
328	2000G	TRN	Service Trace Number			Segment is situational in the X12 IG but will not be used by Aetna
332	2000G	AAA03	Reject Reason Code	15; 33; 52; 57; 60; 61; 62; T5		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
332	2000G	AAA04	Follow-Up Action Code	S		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
333	2000G	UM01	Request Category Code	AR; HS		Data element(s) situational in the X12 IG but will not be used by Aetna
334	2000G	UM02; UM03; UM06	Certification Type Code; Service Type Code; Level of Service Code			Data element(s) situational in the X12 IG but will not be used by Aetna
338	2000G	UM04-2	Facility Code Qualifier	A		Data element(s) situational in the X12 IG but will not be used by Aetna
340	2000G	HCR01	Action Code	51; 71; A3; A4; A6; C; CT, NA		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
341	2000G	HCR03	Reject Reason Code	10; 35; 36; 37; 41; 53; 69; 70; 82; 83; 84; 86; 87; 88; 89; 90; 91; 92; 96; 98; E8		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna



Aetna's Use of the 278 Referral Inquiry Response

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
342	2000G	HCR04	Yes/No Condition or Response Code			Data element(s) situational in the X12 IG but will not be used by Aetna
345	2000G	DTP	Service Date			Segment is situational in the X12 IG but will not be used by Aetna
347	2000G	DTP	Admission Date			Segment is situational in the X12 IG but will not be used by Aetna
349	2000G	DTP	Discharge Date			Segment is situational in the X12 IG but will not be used by Aetna
351	2000G	DTP	Surgery Date			Segment is situational in the X12 IG but will not be used by Aetna
353	2000G	DTP	Certification Effective Date			Segment is situational in the X12 IG but will not be used by Aetna
357	2000G	DTP	Health Care Services Review Request Date			Segment is situational in the X12 IG but will not be used by Aetna
360	2000G	HI01-01; HI02-01; HI03-01; HI04-01; HI05-01	Valid Response Indicator	BQ; JP; NDC; ZZ		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
360	2000G	HI01-03; HI01-04; HI01-06; HI01-07; HI02-03; HI02-04; HI02-06; HI02-07 HI03-03; HI03-04; HI03-06; HI03-07; HI04-03; HI04-04; HI04-06; HI04-07; HI05-03; HI05-04; HI05-06; HI05-07	Date Time Period Format Qualifier; Procedure Date; Procedure Quantity; Version, Release, or Industry Identifier			Data element(s) situational in X12 IG but will not be used by Aetna

Aetna's Use of the 278 Referral Inquiry Response

Page #	Loop ID	Reference	Name	Codes	Length	Comments/Notes
365	2000G	HI06; HI07; HI08; HI09; HI10; HI11; HI12	Diagnosis 4; Diagnosis 5; Diagnosis 6; Diagnosis 7; Diagnosis 8; Diagnosis 9; Diagnosis 10; Diagnosis 11; Diagnosis 12			Data element(s) situational in X12 IG but will not be used by Aetna
376	2000G	HSD01	Quantity Qualifier	DY; FL; HS; MN		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
376	2000G	HSD03; HSD04; HSD07; HSD08	Unit or Basis for Measurement Code; Sample Selection Modulus; Ship, Delivery or Calendar Pattern Code; Delivery Pattern Time Code			Data element(s) situational in X12 IG but will not be used by Aetna
377	2000G	HSD05	Time Period Qualifier	6; 7; 21; 26; 27; 34; 35		Code value(s) listed here are defined in X12 IG for this data element, but will not be used by Aetna
380	2000G	CL1	Institutional Claim Code			Segment is situational in X12 IG but will not be used by Aetna
382	2000G	CR1	Ambulance Transport Information			Segment is situational in X12 IG but will not be used by Aetna
384	2000G	CR2	Spinal Manipulation Service Information			Segment is situational in X12 IG but will not be used by Aetna
389	2000G	CR5	Home Oxygen Therapy Information			Segment is situational in X112 IG but will not be used by Aetna
392	2000G	CR6	Home Health Care Information			Segment is situational in X12 IG but will not be used by Aetna