820 Payment Order/Remittance Advice

HIPAA/V5010X218/820 : 820 Payment Order/Remittance Advice

Version: 1.0

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820 Payment Order/Remittance Advice

Functional Group=RA

Purpose: This X12 Transaction Set contains the format and establishes the data contents of the Payment Order/Remittance Advice Transaction Set (820) for use within the context of an Electronic Data Interchange (EDI) environment. The transaction set can be used to make a payment, send a remittance advice, or make a payment and send a remittance advice. This transaction set can be an order to a financial institution to make a payment to a payee. It can also be a remittance advice identifying the detail needed to perform cash application to the payee's accounts receivable system. The remittance advice can go directly from payer to payee, through a financial institution, or through a third party agent.

Heading:

Pos	Id	Segment Name	Req	Max Use	Repeat	Notes	Usage
0100	ST	820 Header	M	1			Required
0200	BPR	Financial Information	M	1			Required
0350	TRN	Reassociation Trace Number	O	1		C1/0350	Required
0500	REF	Premium Receivers Identification Key	O	>1			Situational
0600	DTM	Coverage Period	O	1			Situational
0600	DTM	Creation Date	O	1			Situational
LOOP ID - 1000A					**1**	**C1/0700L**	
0700	N1	Premium Receiver's Name	O	1		C1/0700	Required
LOOP ID - 1000B					**1**	**C1/0700L**	
0700	N1	Premium Payer's Name	O	1		C1/0700	Required
0900	N3	Premium Payer's Address	O	1			Situational
1000	N4	Premium Payer's City, State, ZIP Code	O	1			Situational
1200	PER	Premium Payer's Administrative Contact	O	>1			Situational

Detail:

Pos	Id	Segment Name	Req	Max Use	Repeat	Notes	Usage
LOOP ID - 2000A					**1**	**CN2/0100L**	
0100	ENT	Organization Summary Remittance	O	1		CN2/0100	Situational
LOOP ID - 2200A					**>1**	**C2/0800L**	
0800	ADX	Organization Summary Remittance Level Adjustment for Previous Payment	O	1		C2/0800	Situational
LOOP ID - 2300A					**>1**	**C2/1500L**	
1500	RMR	Organization Summary Remittance Detail	O	1		C2/1500	Required
LOOP ID - 2000B					**>1**	**CN2/0100L**	
0100	ENT	Individual Remittance	O	1		CN2/0100	Situational
LOOP ID - 2100B					**>1**	**C2/0200L**	
0200	NM1	Individual Name	O	1		C2/0200	Situational
LOOP ID - 2300B					**>1**	**C2/1500L**	
1500	RMR	Individual Premium Remittance Detail	O	1		C2/1500	Required
1800	DTM	Individual Coverage Period	O	1			Situational
LOOP ID - 2320B					**>1**	**C2/2100L**	

2100	ADX	Individual Premium Adjustment for Current Payment	O	1		C2/2100	Situational

Summary:

Pos	Id	Segment Name	Req	Max Use	Repeat	Notes	Usage
0100	SE	Transaction Set Trailer	M	1			Required

ST 820 Header

Pos: 0100	Max: 1
Heading - Mandatory	
Loop: N/A	Elements: 3

User Option (Usage): Required
Purpose: To indicate the start of a transaction set and to assign a control number

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
ST01	143	**Transaction Set Identifier Code**	M	ID	3/3	Required
		Code / **Name** 820 / Payment Order/Remittance Advice				
ST02	329	**Transaction Set Control Number**	M	AN	4/9	Required
ST03	1705	**Implementation Convention Reference**	O	AN	1/35	Required

BPR Financial Information

Pos: 0200	Max: 1
Heading - Mandatory	
Loop: N/A	Elements: 6

User Option (Usage): Required
Purpose: To indicate the beginning of a Payment Order/Remittance Advice Transaction Set and total payment amount, or to enable related transfer of funds and/or information from payer to payee to occur

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
BPR01	305	**Transaction Handling Code**	M	ID	1/2	Required
		Code / **Name** I / Remittance Information Only				
BPR02	782	**Monetary Amount**	M	R	1/18	Required
BPR03	478	**Credit/Debit Flag Code**	M	ID	1/1	Required
		Code / **Name** C / Credit				
BPR04	591	**Payment Method Code**	M	ID	3/3	Required
		Code / **Name** NON / Non-Payment Data				
BPR10	509	**Originating Company Identifier**	O	AN	10/10	Required
BPR16	373	**Date**	O	DT	8/8	Required

TRN Reassociation Trace Number

Pos: 0350 **Max: 1**
Heading - Optional
Loop: N/A **Elements: 3**

User Option (Usage): Required
Purpose: To uniquely identify a transaction to an application

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
TRN01	481	**Trace Type Code**	M	ID	1/2	Required
		Code / **Name** 3 / Financial Reassociation Trace Number				
TRN02	127	**Reference Identification**	M	AN	1/50	Required
TRN03	509	**Originating Company Identifier**	O	AN	10/10	Situational

REF Premium Receivers Identification Key

Pos: 0500 **Max: >1**
Heading - Optional
Loop: N/A **Elements: 2**

User Option (Usage): Situational
Purpose: To specify identifying information

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
REF01	128	**Reference Identification Qualifier**	M	ID	2/3	Required
		Code / **Name** 14 / Master Account Number				
REF02	127	**Reference Identification**	X	AN	1/50	Required

DTM Coverage Period

Pos: 0600 **Max: 1**
Heading - Optional
Loop: N/A **Elements: 3**

User Option (Usage): Situational
Purpose: To specify pertinent dates and times

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
DTM01	374	**Date/Time Qualifier**	M	ID	3/3	Required
		Code / **Name** 582 / Report Period				
DTM05	1250	**Date Time Period Format Qualifier**	X	ID	2/3	Required
		Code / **Name** RD8 / Range of Dates Expressed in Format CCYYMMDD-CCYYMMDD				
DTM06	1251	**Date Time Period**	X	AN	1/35	Required

DTM Creation Date

Pos: 0600 **Max: 1**
Heading - Optional
Loop: N/A **Elements: 2**

User Option (Usage): Situational
Purpose: To specify pertinent dates and times

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
DTM01	374	**Date/Time Qualifier**	M	ID	3/3	Required
		Code / **Name** 097 / Transaction Creation				
DTM02	373	**Date**	X	DT	8/8	Required

N1 Premium Receiver's Name

Pos: 0700	Max: 1
Heading - Optional	
Loop: 1000A	Elements: 4

User Option (Usage): Required
Purpose: To identify a party by type of organization, name, and code

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
N101	98	**Entity Identifier Code**	M	ID	2/3	Required
		Code / **Name** PE / Payee				
N102	93	**Name**	X	AN	1/60	Situational
N103	66	**Identification Code Qualifier**	X	ID	1/2	Situational
		Code / **Name** FI / Federal Taxpayer's Identification Number				
N104	67	**Identification Code**	X	AN	2/80	Situational
		ExternalCodeList **Name:** 16 **Description:** D-U-N-S Number **ExternalCodeList** **Name:** 540 **Description:** Centes for Medicare and Medicaid Services PlanID				

N1 Premium Payer's Name

Pos: 0700	Max: 1
Heading - Optional	
Loop: 1000B	Elements: 4

User Option (Usage): Required
Purpose: To identify a party by type of organization, name, and code

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
N101	98	**Entity Identifier Code**	M	ID	2/3	Required
		Code / **Name** PR / Payer				
N102	93	**Name**	X	AN	1/60	Situational
N103	66	**Identification Code Qualifier**	X	ID	1/2	Situational
		Code / **Name** FI / Federal Taxpayer's Identification Number				
N104	67	**Identification Code**	X	AN	2/80	Situational
		ExternalCodeList **Name:** 16 **Description:** D-U-N-S Number				

N3 Premium Payer's Address

Pos: 0900	Max: 1
Heading - Optional	
Loop: 1000B	Elements: 2

User Option (Usage): Situational
Purpose: To specify the location of the named party

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
N301	166	**Address Information**	M	AN	1/55	Required
N302	166	**Address Information**	O	AN	1/55	Situational

N4 Premium Payer's City, State, ZIP Code

Pos: 1000	Max: 1
Heading - Optional	
Loop: 1000B	Elements: 5

User Option (Usage): Situational
Purpose: To specify the geographic place of the named party

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
N401	19	**City Name**	O	AN	2/30	Required
N402	156	**State or Province Code** **ExternalCodeList** **Name:** 22C **Description:** States and Provinces	X	ID	2/2	Situational
N403	116	**Postal Code** **ExternalCodeList** **Name:** 51 **Description:** ZIP Code **ExternalCodeList** **Name:** 932 **Description:** Universal Postal Codes	O	ID	3/15	Situational
N404	26	**Country Code** **ExternalCodeList** **Name:** 5 **Description:** Countries, Currencies and Funds	X	ID	2/3	Situational
N407	1715	**Country Subdivision Code** **ExternalCodeList** **Name:** 5 **Description:** Countries, Currencies and Funds	X	ID	1/3	Situational

PER Premium Payer's Administrative Contact

Pos: 1200 **Max: >1**
Heading - Optional
Loop: 1000B **Elements: 8**

User Option (Usage): Situational
Purpose: To identify a person or office to whom administrative communications should be directed

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
PER01	366	**Contact Function Code**	M	ID	2/2	Required
		Code / **Name** IC / Information Contact				
PER02	93	**Name**	O	AN	1/60	Required
PER03	365	**Communication Number Qualifier**	X	ID	2/2	Required
		Code / **Name** EM / Electronic Mail FX / Facsimile TE / Telephone				
PER04	364	**Communication Number**	X	AN	1/256	Required
PER05	365	**Communication Number Qualifier**	X	ID	2/2	Situational
		Code / **Name** EM / Electronic Mail EX / Telephone Extension FX / Facsimile TE / Telephone				
PER06	364	**Communication Number**	X	AN	1/256	Situational
PER07	365	**Communication Number Qualifier**	X	ID	2/2	Situational
		Code / **Name** EM / Electronic Mail EX / Telephone Extension FX / Facsimile TE / Telephone				
PER08	364	**Communication Number**	X	AN	1/256	Situational

ENT Organization Summary Remittance

Pos: 0100	Max: 1
Detail - Optional	
Loop: 2000A	Elements: 4

User Option (Usage): Situational
Purpose: To designate the entities which are parties to a transaction and specify a reference meaningful to those entities

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
ENT01	554	**Assigned Number**	O	N0	1/6	Required
ENT02	98	**Entity Identifier Code**	X	ID	2/3	Required
		Code / **Name** AG / Agent/Agency				
ENT03	66	**Identification Code Qualifier**	X	ID	1/2	Required
		Code / **Name** 24 / Employer's Identification Number				
ENT04	67	**Identification Code**	X	AN	2/80	Required
		ExternalCodeList **Name:** 16 **Description:** D-U-N-S Number				

ADX Organization Summary Remittance Level Adjustment for Previous Payment

Pos: 0800 **Max: 1**
Detail - Optional
Loop: 2200A **Elements: 2**

User Option (Usage): Situational
Purpose: To convey accounts-payable adjustment information for the purpose of cash application, including payer-generated debit/credit memos

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
ADX01	782	**Monetary Amount**	M	R	1/18	Required
ADX02	426	**Adjustment Reason Code**	M	ID	2/2	Required

Code	Name
52	Credit for Overpayment
53	Remittance for Previous Underpayment
80	Overpayment
81	Credit as Agreed
86	Duplicate Payment
BJ	Insurance Charge
H1	Information Forthcoming
H6	Partial Payment Remitted
RU	Interest
WO	Overpayment Recovery
WW	Overpayment Credit

RMR Organization Summary Remittance Detail

Pos: 1500	Max: 1
Detail - Optional	
Loop: 2300A	Elements: 5

User Option (Usage): Required
Purpose: To specify the accounts receivable open item(s) to be included in the cash application and to convey the appropriate detail

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
RMR01	128	**Reference Identification Qualifier**	X	ID	2/3	Required
		Code / **Name** 11 Account Number IG Insurance Policy Number				
RMR02	127	**Reference Identification**	X	AN	1/50	Required
RMR03	482	**Payment Action Code**	O	ID	2/2	Situational
		Code / **Name** PI Pay Item				
RMR04	782	**Monetary Amount**	O	R	1/18	Required
RMR05	782	**Monetary Amount**	O	R	1/18	Situational

ENT Individual Remittance

Pos: 0100 **Max: 1**
Detail - Optional
Loop: 2000B **Elements: 4**

User Option (Usage): Situational
Purpose: To designate the entities which are parties to a transaction and specify a reference meaningful to those entities

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
ENT01	554	**Assigned Number**	O	N0	1/6	Required
ENT02	98	**Entity Identifier Code**	X	ID	2/3	Required
		Code / **Name** 2J / Individual				
ENT03	66	**Identification Code Qualifier**	X	ID	1/2	Required
		Code / **Name** 34 / Social Security Number				
ENT04	67	**Identification Code**	X	AN	2/80	Required

NM1 Individual Name

Pos: 0200	Max: 1
Detail - Optional	
Loop: 2100B	Elements: 9

User Option (Usage): Situational
Purpose: To supply the full name of an individual or organizational entity

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
NM101	98	**Entity Identifier Code**	M	ID	2/3	Required
		Code / **Name** QE / Policyholder				
NM102	1065	**Entity Type Qualifier**	M	ID	1/1	Required
		Code / **Name** 1 / Person				
NM103	1035	**Name Last or Organization Name**	X	AN	1/60	Situational
NM104	1036	**Name First**	O	AN	1/35	Situational
NM105	1037	**Name Middle**	O	AN	1/25	Situational
NM106	1038	**Name Prefix**	O	AN	1/10	Situational
NM107	1039	**Name Suffix**	O	AN	1/10	Situational
NM108	66	**Identification Code Qualifier**	X	ID	1/2	Situational
		Code / **Name** N / Insured's Unique Identification Number				
NM109	67	**Identification Code**	X	AN	2/80	Situational

RMR Individual Premium Remittance Detail

Pos: 1500 **Max: 1**
Detail - Optional
Loop: 2300B **Elements: 4**

User Option (Usage): Required
Purpose: To specify the accounts receivable open item(s) to be included in the cash application and to convey the appropriate detail

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
RMR01	128	**Reference Identification Qualifier**	X	ID	2/3	Required
		Code / **Name** AZ / Health Insurance Policy Number				
RMR02	127	**Reference Identification**	X	AN	1/50	Required
RMR04	782	**Monetary Amount**	O	R	1/18	Required
RMR05	782	**Monetary Amount**	O	R	1/18	Situational

DTM Individual Coverage Period

Pos: 1800 **Max: 1**
Detail - Optional
Loop: 2300B **Elements: 4**

User Option (Usage): Situational
Purpose: To specify pertinent dates and times

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
DTM01	374	**Date/Time Qualifier**	M	ID	3/3	Required
		Code / **Name** 582 Report Period AAG Due Date				
DTM02	373	**Date**	X	DT	8/8	Situational
DTM05	1250	**Date Time Period Format Qualifier**	X	ID	2/3	Situational
		Code / **Name** RD8 Range of Dates Expressed in Format CCYYMMDD-CCYYMMDD				
DTM06	1251	**Date Time Period**	X	AN	1/35	Situational

ADX Individual Premium Adjustment for Current Payment

Pos: 2100 **Max: 1**
Detail - Optional
Loop: 2320B **Elements: 2**

User Option (Usage): Situational
Purpose: To convey accounts-payable adjustment information for the purpose of cash application, including payer-generated debit/credit memos

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
ADX01	782	**Monetary Amount**	M	R	1/18	Required
ADX02	426	**Adjustment Reason Code**	M	ID	2/2	Required

Code	Name
20	Balance Due Declined
52	Credit for Overpayment
53	Remittance for Previous Underpayment
AA	Prepaid Benefit or Advances
AX	Person No Longer Employed
H1	Information Forthcoming
H6	Partial Payment Remitted
IA	Invoice Amount Does Not Match Account Analysis Statement
J3	Promised Adjustment Not Received

SE Transaction Set Trailer

Pos: 0100 **Max: 1**
Summary - Mandatory
Loop: N/A **Elements: 2**

User Option (Usage): Required
Purpose: To indicate the end of the transaction set and provide the count of the transmitted segments (including the beginning (ST) and ending (SE) segments)

Element Summary:

Ref	Id	Element Name	Req	Type	Min/Max	Usage
SE01	96	**Number of Included Segments**	M	N0	1/10	Required
SE02	329	**Transaction Set Control Number**	M	AN	4/9	Required