

– Claims Data Specifications

File Formats

- The preferred file format is comma delimited formatting (.csv), but a pipe (|) delimited formatting is also a common and reliable format.
- All file types should include column headers in the first row for accurate data attribution

Data Elements

- **Eligibility**
 - Member ID – Unique identifier for the individual plan member
 - Gender – Male (M), Female (F), Unknown (U)
 - First Name
 - Last Name
 - Date of Birth
 - Member City
 - Member Zip Code
 - Member State
 - Effective Date
 - Termination Date – Leave this blank, if the member is still enrolled
 - Relationship to Subscriber – Member (M), Spouse (S), Dependent (D)
 - Group ID – Member’s group identifier as stated in the insurance card
 - Benefit Package ID – Benefits plan the individual is enrolled in (high deductible vs. PPO)
 - Member Status – (Active / Retiree / COBRA)
- **Medical Claims File**
 - Claim ID – Unique claim identifier
 - Claim Line Number - Unique number within a claim identifying a unique service line item rendered
 - Claim Form Type – A=Dental, D=Prescription Drug, L=Lab, V=Vision, U=UB
 - Claim Line Status – Paid (P), Denied (D), Reversed (R)
 - Claim Payment Date
 - Member ID
 - Service Start Date

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- COB Amount
- UB Discharge Status

- **Pharmacy Claims**
 - Claim ID – Unique claim identifier
 - Claim Line Status – Paid (P), Denied (D), Reversed (R)
 - Claim Payment Date
 - Fill Date
 - Member ID
 - Prescriber NPI
 - Prescriber TIN
 - Prescriber First Name
 - Prescriber Last Name
 - Pharmacy Name
 - National Drug Code (NDC)
 - Drug Days Supply
 - Drug Indigent Cost
 - Drug Dispensing Fee
 - Drug Retail or Mail Indicator – Retail (R), Mail (M), Unknown (U)
 - Service Units – Quantity of drug dispensed, such as total number of pills
 - Amount Billed
 - Allowed Amount
 - Amount Paid
 - Deductible Amount
 - Coinsurance Amount
 - Copay Amount

- **Control Total Reporting**
 - Year
 - Month
 - Number of Enrollment Records
 - Number of Medical Records

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- Number of Pharmacy Records
- Number of Unique Claims Medical
- Number of Unique Claims Pharmacy
- Member Months
- Subscriber Months
- Total Amount Paid Medical
- Total Amount Allowed Medical
- Total Amount Billed Medical
- Total Amount Paid Pharmacy
- Total Amount Allowed Pharmacy
- Total Amount Billed Pharmacy

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