

The ASC X12 Standards for Electronic Data Interchange  
 Technical Report Type 3-Benefit Enrollment and  
 Maintenance (834), August 2006, ASC X12N/005010X220  
 TN 834 - Field

Field	Data Type	Length	Sending Data Format	STTN Description	Comments
	Standard 834			NULL ()	
[REF_OF_02]	Standard 834			Edison ID (Employee ID)	Will be present on all records. This represents the Head of Contract (HOC)
	Standard 834			NULL ()	
	Standard 834			NULL ()	
[NM1_IL_09]	Standard 834			SSN	This is individual SSN
	Standard 834			NULL ()	
[NM1_IL_04]	Standard 834			First name	
[NM1_IL_05]	Standard 834			Middle name	
[NM1_IL_03]	Standard 834			Last name	
[DMG_02]	Standard 834			Birth Sequence Number	
[DMG_03]	Standard 834			Gender Code	
[INS_02]	Standard 834			Individual Relationship	
[DMG_04]	Standard 834			Marital Status Code	
[N3_01]	Standard 834			Address Information	<b>See note below*</b>
[N3_02]	Standard 834			Address Information	<b>See note below*</b>
[N4_01]	Standard 834			City Name	<b>See note below*</b>
[N4_03]	Standard 834			Postal Code	Substring first 5 characters - <b>See note below*</b>
[N4_03]	Standard 834			Postal Code	Substring last 4 characters - <b>See note below*</b>
[N4_02]	Standard 834			State	<b>See note below*</b>
[N4_04]	Standard 834			NULL ()	Will Default to US
[DMG_05]	Standard 834			Race or Ethnicity Code	
[PER_04]	Standard 834			Communication Number	No dashes, numbers only
[PER_06]	Standard 834			Communication Number	No dashes, numbers only
[PER_08]	Standard 834			Communication Number	No dashes, numbers only



1) Mailing address following a [NM1*31*1] loop shall be loaded if available (Loop ID 2100C). Else, Residence address shall be loaded (Loop ID 2100A).			
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Relationship Code	
Member ID	Member Description
01	Spouse
09	Adopted Child
10	Foster Child
17	Stepson or Stepdaughter
18	Self
19	Child
23	Sponsored Dependent
25	Ex-Spouse
26	Guardian
31	Court Appointed Guardian
38	Collateral Dependent <sup>See Note below*</sup>

Marital Status Code	
Marital ID	Marital Description
W	Widowed
R	Unknown
I	Single
M	Married
U	Head Of Household
S	Separated
D	Divorced
U	Common-Law

Employee Status Code	
Status ID	Status Description
FT	Full time active employee
TE	Terminated
LI	Leave of Absence
RT	Retired

Benefit Plan (HD_05)	
Plan	Descr
PPLV1E	PPO Limited BCBS East
PPLV1M	PPO Limited BCBS Middle
PPLV1W	PPO Limited BCBS West
PPLV2E	PPO Limited Cigna East
PPLV2M	PPO Limited Cigna Middle
PPLV2W	PPO Limited Cigna West
PPPV1E	Partnership PPO BCBS East
PPPV1M	Partnership PPO BCBS Middle
PPPV1W	Partnership PPO BCBS West
PPPV2E	Partnership PPO Cigna East
PPPV2M	Partnership PPO Cigna Middle
PPPV2W	Partnership PPO Cigna West
PPOV1E	Standard PPO BCBS East
PPOV1M	Standard PPO BCBS Middle
PPOV1W	Standard PPO BCBS West
PPOV2E	Standard PPO Cigna East
PPOV2M	Standard PPO Cigna Middle
PPOV2W	Standard PPO Cigna West
PPOV3M	Standard PPO Cigna LocalPlus Middle
PPPV3M	Partnership PPO Cigna Local Plus Middle
PPLV3M	PPO Limited Cigna LocalPlus Middle
MEDSUP	Medicare Supplement
MSDJAL	Medicare Supplement - Dual Service
BVIS	Basic Vision
EVIS	Expanded Vision
PDON	Delta Preferred
PDRN	Delta Preferred Retiree
PPDN	Assurant Pre-Paid
PPRN	Assurant Pre-Paid Retiree
EAP	Employee Assistance Program

Benefit Program (REF_1L)		
Benefit Program	Benefit Program Description	Insurance Group (used for reporting entity)
CSA	Central State Active	State
CSO	Central State Out of State	State
FIR	Full Time Irregular Officer Cd	State
FML	FML Benefits Billing	State
GA1	Local Gov Active Prem Level 1	Local Gov
GA2	Local Gov Active Prem Level 2	Local Gov
GA3	Local Gov Active Prem Level 3	Local Gov
HED	Higher Education	State
MSC	Limited Term (i.e. Legislators)	State
OLA	Offline Actives	State
OLC	Offline Closed	State
PAR	Part Time Non-1450 Hours	State
PTN	Local Education 25 Hours	Local Ed
PTP	Part Time 1450 Hours	State
RCS	Retiree Central State	State
RG1	Local Gov Retiree Prem Level 1	Local Gov
RG2	Local Gov Retiree Prem Level 2	Local Gov
RG3	Local Gov Retiree Prem Level 3	Local Gov
RGF	Retiree Grandfathered	State
RSS	Loc Ed Retiree Support Staff	Local Ed
RTE	Loc Ed Retiree Teacher	Local Ed
SUR	Survivor Benefit Program	State
TEA	Local Education	Local Ed
WCP	Worker's Compensation	State
ASA	ASD Central State Active	Local Ed
ASL	ASD FMLA Benefits Billing	Local Ed
ASM	ASD Central State Limited Term	Local Ed
ASO	ASD Central State Out of State	Local Ed
ASP	ASD Worker's Compensation	Local Ed
PAA	ASD Part Time Non-1450 Hours	Local Ed
PTA	ASD Part Time 1450 Hours	Local Ed
RAS	ASD Retiree Central State	State

Coverage Code (HD_05)	
Coverage Code	Coverage Code Description
EMP	Employee Only
ESP	Employee and Spouse
ESD	Employee and One or More Dependents
EGD	Employee and Two or More Dependents
E1D	Employee and One Dependent
ESD	Employee and One or More Dependents
EGD	Employee and Two or More Dependents
EMP	Employee Only
FAM	Family
E1D	Employee and One Dependent
ESP	Employee plus Spouse
ECH	Split
ECH	Employee + Child(ren)
SPO	Spouse Only
IND	Dependent Only
TWO	2 Dependent Coverage
E2D	Employee plus two dependents
FAM	Generic coverage code for all Family Members
DEP	Multiple Dependents Only
CHD	Children Only
ECH	Employee and Children
SPC	Spouse + Children

\* The Relationship of '38' denotes a Child claimed on Income Tax (CT) or Child Intended to be claimed on Income Tax (CI).  
A dependent with a Relationship of '38' and a "F" in INS09 is not a Student. All other dependents with a "F" in INS09 are students.

### **Dependent Only Coverage**

Head of Contact records indicating Dependent Only coverage shall be identified by the below Coverage Codes:

SPO	Spouse Only
IND	Dependent Only
TWO	2 Dependent Coverage
DEP	Multiple Dependents Only
CHD	Children Only
SPC	Spouse + Children

### **Relationship Codes**

The below relationship codes are considered to be valid codes for the corresponding relationship.

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<u>Employee</u>	18
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<u>Spouse</u>	01
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<u>Dependent</u>	19
	09
	10
	23
	38

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### **Enrollment Status Codes**

All Enrollment Status Codes shall be accepted as valid.