



Realtime Eligibility XML/JSON Reference

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Benefit Coverage Codes **benefit_code**

Code	Description
1	Active Coverage
2	Active - Full Risk Capitation
3	Active - Services Capitated
4	Active - Services Capitated to Primary Care Physician
5	Active - Pending Investigation
6	Inactive
7	Inactive - Pending Eligibility Update
8	Inactive - Pending Investigation
A	Co-Insurance

B	Co-Payment
C	Deductible
CB	Coverage Basis
D	Benefit Description
E	Exclusions
F	Limitations
G	Out of Pocket (Stop Loss)
H	Unlimited
I	Non-Covered
J	Cost Containment
K	Reserve
L	Primary Care Provider
M	Pre-Existing Condition
MC	Managed Care Coordinator
N	Services Restricted to Following Provider
O	Not Deemed a Medical Necessity
P	Benefit Disclaimer
Q	Second Surgical Opinion Required
R	Other or Additional Payor
S	Prior Year(s) History
T	Card(s) Reported Lost/Stolen
U	Contact Following Entity for Eligibility or Benefit Information
V	Cannot Process
W	Other Source of Data
X	Health Care Facility
Y	Spend Down

Benefit Level Codes `benefit_level_code`

Code	Description
CHD	Children Only
DEP	Dependents Only
ECH	Employee and Children
EMP	Employee Only
ESP	Employee and Spouse
FAM	Family
IND	Individual
SPC	Spouse and Children
SPO	Spouse Only

Benefit Type Codes `benefit_type_code`

Code	Description
1	Medical Care
2	Surgical
3	Consultation
4	Diagnostic X-ray
5	Diagnostic Lab
6	Radiation Therapy
7	Anesthesia
8	Surgical Assistance
9	Other Medical
10	Blood
11	Durable Medical Equipment Used

12	Durable Medical Equipment Purchase
13	Ambulatory Service Center Facility
14	Renal Supplies
15	Alternate Method Dialysis
16	Chronic Renal Disease (CRD) Equipment
17	Pre-admission Testing
18	Durable Medical Equipment Rental
19	Pneumonia Vaccine
20	Second Surgical Opinion
21	Third Surgical Opinion
22	Social Work
23	Diagnostic Dental
24	Periodontics
25	Restorative
26	Endodontics
27	Maxillofacial Prosthetics
28	Adjunctive Dental Services
30	Health Benefit Plan Coverage
32	Plan Waiting Period
33	Chiropractic
34	Chiropractic Modality
35	Dental Care
36	Dental Crowns
37	Dental Accident
38	Orthodontics
39	Prosthodontics
40	Oral Surgery

41	Routine (Preventive) Dental
42	Home Health Care
43	Home Health Prescriptions
44	Home Health Visits
45	Hospice
46	Respite Care
47	Hospital
48	Hospital - Inpatient
49	Hospital - Room and Board
50	Hospital - Outpatient
51	Hospital - Emergency Accident
52	Hospital - Emergency Medical
53	Hospital - Ambulatory Surgical
54	Long Term Care
55	Major Medical
56	Medically Related Transportation
57	Air Transportation
58	Cabulance
59	Licensed Ambulance
60	General Benefits
61	In-Vitro Fertilization
62	MRI/CAT Scan
63	Donor Procedures
64	Acupuncture
65	Newborn Care
66	Pathology
67	Smoking Cessation

68	Well Baby Care
69	Maternity
70	Smoking Cessation
71	Audiology Exam
72	Inhalation Therapy
73	Diagnostic Medical
74	Private Duty Nursing
75	Prosthetic Device
76	Dialysis
77	Otology
78	Chemotherapy
79	Allergy Testing
80	Immunizations
81	Routine Physical
82	Family Planning
83	Infertility
84	Abortion
85	HIV - AIDS Treatment
86	Emergency Services
87	Cancer Treatment
88	Pharmacy
89	Free Standing Prescription Drug
90	Mail Order Prescription Drug
91	Brand Name Prescription Drug
92	Generic Prescription Drug
93	Podiatry
94	Podiatry - Office Visits

95	Podiatry - Nurse Home Visits
96	Professional (Physician)
97	Anesthesiologist
98	Professional (Physician) Visit - Office
99	Professional (Physician) Visit - Inpatient
A0	Professional (Physician) Visit - Outpatient
A1	Professional (Physician) Visit - Skilled Nursing
A3	Professional (Physician) Visit - Home
A4	Psychiatric
A5	Psychiatric Room and Board
A6	Psychotherapy
A7	Psychiatric - Inpatient
A8	Psychiatric - Outpatient
A9	Rehabilitation
AA	Rehabilitation - Room and Board
AB	Rehabilitation - Inpatient
AC	Rehabilitation - Outpatient
AD	Occupational Therapy
AE	Physical Medicine
AF	Speech Therapy
AG	Skilled Nursing Care
AH	Skilled Nursing Care - Room and Board
AI	Substance Abuse
AJ	Alcoholism
AK	Drug Addiction
AL	Vision (Optometry)
AM	Frames

AN	Routine Exam
AO	Lenses
AP	Routine Eye Exam
AQ	Nonmedically Necessary Physical
AR	Experimental Drug Therapy
B1	Burn Care
B2	Brand Name Prescription Drug - Formulary
B3	Brand Name Prescription Drug - Non-Formulary
BA	Independent Medical Evaluation
BB	Psychiatric Treatment Partial Hospitalization
BC	Day Care (Psychiatric)
BD	Cognitive Therapy
BE	Massage Therapy
BF	Pulmonary Rehabilitation
BG	Cardiac Rehabilitation
BH	Pediatric
BI	Nursery Room and Board
BJ	Skin
BK	Orthopedic
BL	Cardiac
BM	Lymphatic
BN	Gastrointestinal
BP	Endocrine
BQ	Neurology
BR	Eye
BS	Invasive Procedures
BT	Gynecological

BU	Obstetrical
BV	Obstetrical/Gynecological
BW	Mail Order Prescription Drug: Brand Name
BX	Mail Order Prescription Drug: Generic
BY	Physician Visit - Office: Sick
BZ	Physician Visit - Office: Well
C1	Coronary Care
CA	Private Nursing - Inpatient
CB	Private Nursing - Home
CC	Surgical Benefits - Professional (Physician)
CD	Surgical Benefits - Facility
CE	Mental Health Provider - Inpatient
CF	Mental Health Provider - Outpatient
CG	Mental Health Facility - Inpatient
CH	Mental Health Facility - Outpatient
CI	Substance Abuse Facility - Inpatient
CJ	Substance Abuse Facility - Outpatient
CK	Screening X-ray
CL	Screening laboratory
CM	Mammogram, High Risk Patient
CN	Mammogram, Low Risk Patient
CO	Flu Vaccination
CP	Eyewear Accessories
CQ	Case Management
DG	Dermatology
DM	Durable Medical Equipment
DS	Diabetic Supplies

GF	Generic Prescription Drug - Formulary
GN	Generic Prescription Drug - Non-Formulary
GY	Allergy
IC	Intensive Care
MH	Mental Health
NI	Neonatal Intensive Care
ON	Oncology
PT	Physical Therapy
PU	Pulmonary
RN	Renal
RT	Residential Psychiatric Treatment
TC	Transitional Care
TN	Transitional Nursery Care
UC	Urgent Care
E0	Allied Behavioral Analysis Therapy
E1	Non-Medical Equipment (non DME)
E2	Psychiatric Emergency
E3	Step Down Unit
E4	Skilled Nursing Facility Head Level of Care
E5	Skilled Nursing Facility Ventilator Level of Care
E6	Level of Care 1
E7	Level of Care 2
E8	Level of Care 3
E9	Level of Care 4
E10	Radiographs
E11	Diagnostic Imaging
E12	Basic Restorative - Dental

E13	Major Restorative - Dental
E14	Fixed Prosthodontics
E15	Removable Prosthodontics
E16	Intraoral Images - Complete Series
E17	Oral Evaluation
E18	Dental Prophylaxis
E19	Panoramic Images
E20	Sealants
E21	Flouride Treatments
E22	Dental Implants
E23	Temporomandibular Joint Dysfunction
E24	Retail Pharmacy Prescription Drug
E25	Long Term Care Pharmacy
E26	Comprehensive Medication Therapy Management Review
E27	Targeted Medication Therapy Management Review
E28	Dietary/Nutritional Services
E29	Technical Cardiac Rehabilitation Services Component
E30	Professional Cardiac Rehabilitation Services Component
E31	Professional Intensive Cardiac Rehabilitation Services Component
E32	Intensive Cardiac Rehabilitation - Technical Component
E33	Intensive Cardiac Rehabilitation
E34	Pulmonary Rehabilitation - Technical Component
E35	Pulmonary Rehabilitation - Professional Component
E36	Convenience Care
EA	Preventive Services
EB	Specialty Pharmacy
EC	Durable Medical Equipment New

ED	CAT Scan
EE	Ophthalmology
EF	Contact Lenses
GF	Generic Prescription Drug - Formulary
GN	Generic Prescription Drug - Non-Formulary
GY	Allergy
IC	Intensive Care
MH	Mental Health
NI	Neonatal Intensive Care
ON	Oncology
PE	Positron Emission Tomography (PET) Scan
PT	Physical Therapy
PU	Pulmonary
RN	Renal
RT	Residential Psychiatric Treatment
SMH	Serious Mental Health
TC	Transitional Care
TN	Transitional Nursery Care
UC	Urgent Care

Place of Service Codes `place_of_service`

Code	Description
01	Pharmacy
03	School
04	Homeless Shelter
05	Indian Health Service Free-standing Facility

06	Indian Health Service Provider-based Facility
07	Tribal 638 Free-standing Facility
08	Tribal 638 Provider-based Facility
11	Office
12	Home
13	Assisted Living Facility
14	Group Home
15	Mobile Unit
20	Urgent Care Facility
21	Inpatient Hospital
22	Outpatient Hospital
23	Emergency Room - Hospital
24	Ambulatory Surgical Center
25	Birthing Center
26	Military Treatment Facility
31	Skilled Nursing Facility
32	Nursing Facility
33	Custodial Care Facility
34	Hospice
41	Ambulance - Land
42	Ambulance - Air or Water
49	Independent Clinic
50	Federally Qualified Health Center
51	Inpatient Psychiatric Facility
52	Psychiatric Facility - Partial Hospitalization
53	Community Mental Health Center
54	Intermediate Care Facility/Mentally Retarded

55	Residential Substance Abuse Treatment Facility
56	Psychiatric Residential Treatment Center
57	Non-residential Substance Abuse Treatment Facility
60	Mass Immunization Center
61	Comprehensive Inpatient Rehabilitation Facility
62	Comprehensive Outpatient Rehabilitation Facility
65	End-Stage Renal Disease Treatment Facility
71	State or Local Public Health Clinic
72	Rural Health Clinic
81	Independent Laboratory
99	Other Place of Service

Insurance Type Codes `insurance_type_code`

Code	Description
12	Medicare Secondary Working Aged Beneficiary or Spouse with Employer Group Health Plan
13	Medicare Secondary End-Stage Renal Disease Beneficiary in the 12 month coordination period with an employer's group health plan
14	Medicare Secondary, No-fault Insurance including Auto is Primary
15	Medicare Secondary Worker's Compensation
16	Medicare Secondary Public Health Service (PHS) or Other Federal Agency
41	Medicare Secondary Black Lung
42	Medicare Secondary Veteran's Administration
43	Medicare Secondary Disabled Beneficiary Under Age 65 with Large Group Health Plan (LGHP)
47	Medicare Secondary, Other Liability Insurance is Primary
AP	Auto Insurance Policy

C1	Commercial
CO	Consolidated Omnibus Budget Reconciliation Act (COBRA)
CP	Medicare Conditionally Primary
D	Disability
DB	Disability Benefits
EP	Exclusive Provider Organization
FF	Family or Friends
GP	Group Policy
HM	Health Maintenance Organization (HMO)
HN	Health Maintenance Organization (HMO) - Medicare Risk
HS	Special Low Income Medicare Beneficiary
IN	Indemnity
IP	Individual Policy
LC	Long Term Care
LD	Long Term Policy
LI	Life Insurance
LT	Litigation
MA	Medicare Part A
MB	Medicare Part B
MC	Medicaid
MH	Medigap Part A
MI	Medigap Part B
MP	Medicare Primary
OT	Other
PE	Property Insurance - Personal
PL	Personal
PP	Personal Payment (Cash - No Insurance)

PR	Preferred Provider Organization (PPO)
PS	Point of Service (POS)
QM	Qualified Medicare Beneficiary
RP	Property Insurance - Real
SP	Supplemental Policy
TF	Tax Equity Fiscal Responsibility Act (TEFRA)
WC	Workers Compensation
WU	Wrap Up Policy

Additional Codes

Time Period Codes

Code	Description
6	Hour
7	Day
13	24 Hours
21	Years
22	Service Year
23	Calendar Year
24	Year to Date
25	Contract
26	Episode
27	Visit
28	Outlier
29	Remaining
30	Exceeded

31	Not Exceeded
32	Lifetime
33	Lifetime Remaining
34	Month
35	Week
36	Admisson

Quantity Codes

Code	Description
99	Quantity Used
CA	Covered - Actual
CE	Covered - Estimated
DB	Deductible Blood Units
DY	Days
HS	Hours
LA	Life-time Reserve - Actual
LE	Life-time Reserve - Estimated
MN	Month
P6	Number of Services or Procedures
QA	Quantity Approved
S7	Age, High Value
S8	Age, Low Value
VS	Visits
YY	Years

Entity Codes

Code	Description
13	Contracted Service Provider
1I	Preferred Provider Organization (PPO)
1P	Provider
2B	Third-Party Administrator
36	Employer
73	Other Physician
FA	Facility
GP	Gateway Provider
GW	Group
I3	Independent Physicians Association (IPA)
IL	Insured or Subscriber
LR	Legal Representative
OC	Origin Carrier
P3	Primary Care Provider
P4	Prior Insurance Carrier
P5	Plan Sponsor
PR	Payer
PRP	Primary Payer
SEP	Secondary Payer
TTP	Tertiary Payer
VER	Part Performing Verification
VN	Vendor
VY	Organization Completing Configuration Change
X3	Utilization Management Organization

Y2	Managed Care Organization
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