
Administrative Services of Kansas (ASK)

**HIPAA 270/271 005010X279A1
Real-Time
Standard Companion Guide**

**Refers to the Implementation Guides
Based on ASC X12 version 005010**

Disclosure Statement

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Preface

This Companion Guide to the v5010 ASC X12N Technical Report Type 3 (TR3) and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with ASK. Transmissions based on this companion guide, used in tandem with v5010 ASC X12N TR3, are compliant with both ASC X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N TR3 adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the TR3's.

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1 INTRODUCTION

This section describes how ASC X12N Technical Report Type 3 (TR3) adopted under HIPAA will be detailed with the use of a table.

SCOPE

The Transaction Instruction component of this companion guide must be used in conjunction with an associated ASC X12 Implementation Guide. The instructions in this companion guide are not intended to be stand-alone requirements documents. This companion guide conforms to all the requirements of any associated ASC X12 Implementation Guides and is in conformance with ASC X12's Fair Use and Copyright statements.

Overview

This Companion Guide to the v5010 ASC X12N Technical Report Type 3 (TR3) and associated errata adopted under HIPAA clarifies and specifies the data content when exchanging electronically with ASK. Transmissions based on this companion guide, used in tandem with v5010 ASC X12N TR3, are compliant with both ASC X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N TR3 adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the TR3's.

References

Washington Publishing Company - <http://www.wpc-edi.com>
ASK Resource Center - <https://ask-edi.com/resource-center/>

2 GETTING STARTED

Working with Administrative Services of Kansas

Real Time Vendor Enrollment please contact askedi@ask-edi.com

Real Time Vendor Certification and Testing Overview please contact askedi@ask-edi.com

3 TESTING WITH THE PAYER

Real Time Vendor Testing

- BCBSKC (47171) requires 27X testing. Testing guidelines will be sent with enrollment confirmation.

4 USING THE WEB SERVICE

Real Time Transmission (Production) –

URL: <https://rtedi.bcbsks.com:8085/core>

Note: If trading partners wish to see the WSDL created, they may use:

URL: <https://rtedi.bcbsks.com:8085/core?WSDL>

4.1 Transmission Procedures

1. Using an internet browser, enter the URL provided. This will connect you to the ASK 27x Real Time API.
2. This Web Service has been implemented in SOAP (Simple Object Access Protocol). There is a parameter in the web service operation to identify the operation requested (270). The following parameter is expected: **X12_270_Request_005010X279A1**
3. Security is achieved via the use of TLS v 1.2 and an authentication to the service. The username and password are required to pass credentials to access the service.

4.2 Web Service Description (WSDL)

Trading Partners must include the following information in the SOAP Envelope:

- Username = 7 digit trading partner number assigned by ASK
- Password = Password assigned by ASK
- Sender ID = 7 digit trading partner number assigned by ASK
- Receiver ID = Assigned by ASK

See 270 sample below:

```
<env:Envelope xmlns:env="http://www.w3.org/2003/05/soap-envelope">
  <env:Header>
    <wsse:Security env:mustUnderstand="true" xmlns:wsse="http://docs.oasis-
open.org/wss/2004/01/oasis-200401-wss-wssecurity-secext-1.0.xsd">
      <wsse:UsernameToken>
        <wsse:Username>TP Number</wsse:Username>
        <wsse:Password Type="http://docs.oasis-open.org/wss/2004/01/oasis-200401-wss-username-
token-profile-1.0#PasswordText">Password</wsse:Password>
      </wsse:UsernameToken>
    </wsse:Security>
  </env:Header>
  <env:Body>
    <core:COREEnvelopeRealTimeRequest
xmlns:core="http://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd">
      <PayloadType>X12_270_Request_005010X279A1</PayloadType>
      <ProcessingMode>RealTime</ProcessingMode>
      <PayloadID>00000128-7dec-11d0-a765-00a0c91e6db1</PayloadID>
      <TimeStamp>2014-04-15T11:35:45+03:00</TimeStamp>
      <SenderID>TP Number</SenderID>
      <ReceiverID>Assigned by ASK</ReceiverID>
      <CORERuleVersion>2.2.0</CORERuleVersion>
      <Payload>ISA*00*      *00*      *ZZ*0003000      *ZZ*ASK INC
*160115*1333*^*00501*00000128*0*T*:-GS*HS*0003000*ASK
INC*20161015*1615112*128*X*005010X279A1~ST*270*0128*005010X279A1~BHT*0022*13*39203949
30203*20161015*1615112~HL*1**20*1~NM1*PR*2*BCBSK2****PI*47163~HL*2*1*21*1~NM1*1P*2*TE
ST*****XX*1234567891~N3*123
GARFIELD~N4*ANYTOWN*KS*66606~HL*3*2*22*1~NM1*IL*1*mouse*mickey****MI*abc111223333~HL
*4*3*23*0~TRN*1*200919706778*1234567998*500~NM1*03*1*mouse*minnie~DMG*D8*20080625~INS
*N*19~DTP*291*D8*20161021~EQ*30~SE*18*0128~GE*1*128~IEA*1*000000128~</Payload>
    </core:COREEnvelopeRealTimeRequest>
  </env:Body>
</env:Envelope>
```

See 271 sample below:

```

<env:Envelope xmlns:env="http://www.w3.org/2003/05/soap-envelope">
  <env:Header/>
  <env:Body>
    <core:COREEnvelopeRealTimeResponse
  xmlns:core="http://www.caqh.org/SOAP/WSDL/CORERule2.2.0.xsd">
      <PayloadType>X12_271_Response_005010X279A1</PayloadType>
      <ProcessingMode>RealTime</ProcessingMode>
      <PayloadID>00000128-7dec-11d0-a765-00a0c91e6db1</PayloadID>
      <TimeStamp>2017-02-07T14:34:42-06:00</TimeStamp>
      <SenderID>Assigned by ASK</SenderID>
      <ReceiverID>TP Number</ReceiverID>
      <CORERuleVersion>2.2.0</CORERuleVersion>
      <Payload>ISA*00*      *00*      *ZZ*ASK INC      *ZZ*0003000
*170207*1434*{00501*000000001*0*T*^~GS*HB*ASK
INC*0003000*20170207*14344378*1*X*005010X279A1~ST*271*0001*005010X279A1~BHT*0022*11*3
920394930203*20170207*14344378~HL*1**20*1~NM1*PR*2*BCBSK2*****PI*47163~PER*IC*CUSTOM
ER SERVICE CENTER*TE*8004323990~HL*2*1*21*1~NM1*1P*2*TEST*****XX*1234567891~N3*123
GARFIELD~N4*ANYTOWN*KS*66606~HL*3*2*22*1~NM1*IL*1*MOUSE*MICKEY*A***MI*ABC1112233
33~DMG*D8*19781015*M~INS*Y*18*001*25~HL*4*3*23*0~TRN*2*200919706778*1234567998*500~N
M1*03*1*MOUSE*MINNIE~REF*6P*96352~N3*999 E MAIN
ST~N4*SOMETOWN*KS*67770~DMG*D8*20080625*F~INS*N*19*001*25~DTP*472*D8*20161021~DT
P*291*RD8*20160101-
20161231~DTP*539*D8*20120301~EB*R~LS*2120~NM1*IL*1*****MI*111223333~NM1*PRP*2*BLUE
CROSS BLUE SHIELD OF KANSAS~N3*1133 S W TOPEKA
BLVD~N4*TOPEKA*KS*666290001~LE*2120~EB*1*FAM*30*GP*BLUE CHOICE - COMPREHENSIVE
MAJOR MEDICAL*22~MSG*THIS POLICY IS ELIGIBLE FOR ACA PREVENTIVE SERVICES, VISIT
WEB PAGE FOR COMPLETE LISTING OF LIMITATIONS
WWW.BCBSKS.COM/CUSTOMERSERVICE/PROVIDERS/PUBLICATIONS/PROFESSIONAL/MANUALS/PDF/PREVENTIVE-SERVICES-GUIDE.PDF~MSG*MEMBERS BENEFIT PLAN ONLY COVERS
URGENT AND EMERGENT SERVICES OUTSIDE OF THE KANSAS COMPANY SERVICE AREA FOR
SERVICES PROVIDED IN THE EMERGENCY ROOM. IF SERVICE RENDERED IS NOT DEEMED
URGENT/EMERGENT, SERVICE MAY NOT BE
COVERED~EB*C*IND*30***22*500*****Y~EB*C*IND*30***29*500*****Y~EB*C*FAM*30***22*1500*****Y
~EB*C*FAM*30***29*0*****Y~EB*G*IND*30***22*2500*****Y~EB*G*IND*30***29*2500*****Y~EB*G*FA
M*30***22*7500*****Y~EB*G*FAM*30***29*5963.93*****Y~EB*F*IND*33***22***VS*20**Y~MSG*CHIRO
PRACTIC SERVICES.~MSG*OUTPATIENT MODALITIES. OUTPATIENT MANIPULATIONS - OFFICE.
SPINAL
MANIPULATION.~EB*F*IND*33***29***VS*20**Y~EB*F*IND*48***22***VS*60**Y~III*ZZ*31~EB*F*IND*
48***29***VS*60**Y~EB*F*IND*47***22***VS*60**Y~III*ZZ*31~EB*F*IND*47***29***VS*60**Y~EB*F*IN
D*33***22***VS*40**Y~MSG*OUTPATIENT PHYSICAL
THERAPY.~EB*F*IND*33***29***VS*40**Y~EB*F*IND*48*****Y~MSG*COVERAGE IS AVAILABLE
FOR SEMI-PRIVATE ROOM ONLY. FOR A PRIVATE ROOM, THE PATIENT IS RESPONSIBLE FOR
THE CHARGE AMOUNT ABOVE THE SEMI-PRIVATE ROOM RATE.~LS*2120~NM1*X3*2*BLUE
CARD ELIGIBILITY~PER*IC**TE*8006762583~LE*2120~EB*F*IND*47*****Y~MSG*COVERAGE IS
AVAILABLE FOR SEMI-PRIVATE ROOM ONLY. FOR A PRIVATE ROOM, THE PATIENT IS
RESPONSIBLE FOR THE CHARGE AMOUNT ABOVE THE SEMI-PRIVATE ROOM
RATE.~III*ZZ*21~EB*A*IND*BZ{UC{33{48{50{51{52{86{98{47***22**}.25*****Y~MSG*UP TO A MAXIMUM
OF $2,000.00. THE AMOUNT REMAINING IS
$2,000.00.~EB*A*FAM*BZ{UC{33{48{50{51{52{86{98{47***22**}.25*****Y~MSG*UP TO A MAXIMUM OF
$6,000.00. THE AMOUNT REMAINING IS
$5,963.93.~EB*1**MH{1{35{88*****Y~EB*1*FAM*30*GP*BLUE CHOICE - COMP MAJOR MED -
OUT-OF-
NETWORK*22~EB*C*IND*51{52{86***22*500*****N~III*ZZ*23~EB*C*IND*51{52{86***29*500*****N~EB*
C*FAM*51{52{86***22*1500*****N~III*ZZ*23~EB*C*FAM*51{52{86***29*0*****N~EB*A*IND*51{52{86***2

```

```
2*.25****N~MSG*UP TO A MAXIMUM OF $2,000.00. THE AMOUNT REMAINING IS
$2,000.00.~EB*A*FAM*51{52{86***22*.25****N~MSG*UP TO A MAXIMUM OF $6,000.00. THE
AMOUNT REMAINING IS $5,963.93.~EB*1**BZ{UC{33{47{48{50{98*****N~EB*P~MSG*UNLESS
OTHERWISE REQUIRED BY STATE LAW, THIS NOTICE IS NOT A GUARANTEE OF PAYMENT.
BENEFITS ARE SUBJECT TO ALL CONTRACT LIMITS AND THE MEMBER'S STATUS ON THE DATE
OF SERVICE. ACCUMULATED AMOUNTS SUCH AS DEDUCTIBLE MAY CHANGE AS ADDITIONAL
CLAIMS ARE PROCESSED.~SE*84*0001~GE*1*1~IEA*1*00000001~</Payload>
  <ErrorCode>Success</ErrorCode>
  <ErrorMessage/>
</core:COREEnvelopeRealTimeResponse>
</env:Body>
</env:Envelope>
```

Error Conditions:

Unauthorized Authentication Failed - verify the user ID and password

Authorization Failed - verify the Sender ID or Receiver ID

Inbound Payload validation failed – verify the ISA06 (Sender ID/TP Number) in the Payload

5 CONTACT INFORMATION

EDI Customer Service:

Email: askedi@ask-edi.com

Phone: 1-800-472-6481

EDI Technical Assistance:

Email: askedi@ask-edi.com

Phone: 1-800-472-6481

Provider Service Assistance:

Blue Cross and Blue Shield of Kansas

<http://www.bcbsks.com/CustomerService/Providers/contact.shtml>

Blue Cross and Blue Shield of Kansas City

<https://providers.bluekc.com/ContactUs/Index>

6 CONTROL SEGEMENTS/ENVELOPES

See section 10

7 PAYER SPECIFIC BUSINESS RULES AND LIMITATIONS

An ANSI 270 transaction set is required to start the inquiry process. Trading Partners passing syntax and implementation guide editing will have responses returned via the ANSI 271 transaction set based on the implementation guide. Trading Partners not passing syntax and implementation guide editing will have responses returned via a TA1 and/or a 999 response.

1. ASK will reject an interchange (transmission) that is submitted with an identification number that is not authorized for electronic submission.
2. ASK will only process one transaction type (records group) per interchange (transmission); a Trading Partner must only submit one GS-GE (Functional Group) within an ISA –IEA (Interchange).
3. ASK will convert all lower case alphabetic characters submitted on an inbound 270 file to upper case when sending data to the payers processing system. Likewise, ASK will convert the 271 response file from the payer to all upper case alphabetic characters before sending to the trading partner.
4. If the membership eligibility request is for a FEP member or the certificate alpha prefix indicates that the membership is for another BCBS Plan, the membership eligibility response will be

developed outside of BCBSKC or BCBSKS (via BlueExchange – see appendix). The response may be more or less robust than that of BCBSKC or BCBSKS.

5. Confirmation of eligibility does not guarantee claims payment.
6. Eligibility inquiries must be submitted to the local Blue Plan. Requests submitted by providers outside of the local Blue Plan service area will be returned without eligibility information.
7. **BCBSKS:** Scheduled system maintenance occurs Sunday between 4:00 am – 10:00 am (all times listed are Central Time Zone)
8. **BCBSKC:** Real time eligibility inquiries are not available from midnight Sunday morning, to midnight Monday morning Sunday. (all times listed are Central Time Zone)
9. **BCBSKC:** Eligibility inquiries are only accepted in real time.
10. **BCBSKC:** Information received in the 271, including Accumulated Amounts, is based on the information available in the BCBSKC system at the day and time the 271 request was generated.
11. **BCBSKS:** Information received in the 271, is based on the information available in the BCBSKS system on the day the 271 was generated as long as the service is eligible for benefits under the patient's contract. Accumulated co-insurance and deductible amounts are based on the date of service for which the 270 is generated.
12. **BCBSKS:** The search range on a 270 request will be limited to 15 months in the past and up to 30 days in the future.
13. **BCBSKS & BCBSKC:** Electronic eligibility inquiries are not intended to comply with COBRA notification regulations. If a member is showing as inactive, but may be eligible for COBRA coverage, please contact Customer Service.
14. ASK accepts Basic and Extended Code Sets.
15. **BCBSKS:** It is recommended to use specific Service Type Codes rather than a "30 – Health Benefit Plan Coverage" for best results. For an explicit Service Type Codes see appendices 4.

8 ACKNOWLEDGEMENTS

Posted at: <https://ask-edi.com/resource-center/>

Report inventory

TRN Transaction Response Notification
 999 Acknowledgement for Health Care Insurance

9 TRADING PARTNER

An EDI Trading Partner is defined as an ASK customer (provider, billing service, software vendor, employer group, clearinghouse etc.) that transmits to, or receives electronic data from ASK.

Real Time Vendor Enrollment please contact askedi@ask-edi.com

10 TRANSACTIONS SPECIFIC INFORMATION

These tables contain one or more rows for each segment for which a supplemental instruction is needed.

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

Page	Loop	Seg.	Data Element	Comments
INTERCHANGE CONTROL HEADER/ISA				
C.4	N/A	ISA05	Interchange ID Qualifier	'ZZ'

Page	Loop	Seg.	Data Element	Comments
C.4	N/A	ISA06	Interchange Sender ID	Trading Partner Number assigned by ASK.
C.5	N/A	ISA07	Interchange ID Qualifier	'ZZ'
C.5	N/A	ISA08	Interchange Receiver ID	ASK
C.5	N/A	ISA11	Repetition Separator	BCBSKC = { (Curly Bracket)
C.5	N/A	ISA13	Interchange Control Number	Must be unique for each transaction.
C.6	N/A	ISA15	Usage Indicator	Must equal 'P'.
FUNCTIONAL GROUP HEADER/GS				
C.7	N/A	GS02	Application Sender's Code	Trading Partner Number Assigned by ASK. Real Time Trading Partner - number begins with Eight (800####)
C.7	N/A	GS03	Application Receiver's Code	BCBSKS = Blue Cross and Blue Shield of Kansas BCBSKC = Blue Cross and Blue Shield of Kansas City
LOOP 2100A – INFORMATION SOURCE NAME				
69	2100A	NM101	Entity Identifier Code	Must equal 'PR'.
71	2100A	NM108	Identification Code Qualifier	Must equal 'PI'.
71	2100A	NM109	Information Source Primary Identifier	The appropriate Payer number must be submitted. BCBSKS = 47163 BCBSKC = 47171
LOOP 2100C – SUBSCRIBER NAME				
92	2100C	N/A	N/A	BCBSKC : The subscriber name is required if the subscriber is the patient. The dependent name is required only when the dependent is the patient.
93	2100C	NM103	Subscriber Last Name	Required on all transactions. BCBSKC : Only the first 5 characters will be used to match eligibility. BCBSKS : The first 2 characters will be used to match eligibility if the subscriber ID is submitted. The full name may be used if multiple matches are made, or the subscriber ID is not present.
93	2100C	NM104	Subscriber First Name	BCBSKC : Only the first 5 characters will be used to match eligibility. BCBSKS : Will be used if multiple matches are made, or the subscriber ID is not present.
95	2100C	NM108	Identification Code Qualifier	Must equal 'MI'.

Page	Loop	Seg.	Data Element	Comments
96	2100C	NM109	Subscriber Primary Identifier	<p>BCBSKC: Must contain the subscriber ID including any prefix. Only the first 12 characters will be used.</p> <p>BCBSKS: Must contain the subscriber ID, including any prefix.</p> <p>BlueExchange: Must be 4 to 17 characters.</p>
108	2100C	DMG02	Subscriber Birth Date	<p>BCBSKS: The month and year will be used to match eligibility if the subscriber ID is submitted. The full date of birth may be used if multiple matches are made, or the subscriber ID is not present.</p>
LOOP 2110C – SUBSCRIBER ELIGIBILITY OR BENEFIT INQUIRY INFORMATION				
125	2110C	EQ01	Service Type Code	<p>Requests should be as specific as possible. The more specific the inquiry, the more specific the response will be.</p> <p>BCBSKC: Must provide a valid Service Type Code. Recommend submitting only one EQ and no procedure/diagnosis codes.</p> <p>BCBSKS: Only one service type per inquiry is accepted.</p>
LOOP 2100D – DEPENDENT NAME				
151	2100D	N/A	N/A	<p>BCBSKC: The subscriber name is required if the subscriber is the patient.</p>
152	2100D	NM103	Dependent Last Name	<p>Required when the dependent is the patient.</p> <p>BCBSKC: The dependent name is required only when the dependent is the patient. Only the first 5 characters will be used to match eligibility.</p>
152	2100D	NM104	Dependent First Name	<p>BCBSKC: Only the first 5 characters will be used to match eligibility.</p>
153	2100D	NM105	Dependent Middle Name	<p>BCBSKC: Only the first character will be used to match eligibility.</p>
165	2100D	DMG02	Dependent Birth Date	<p>BCBSKC: Required when the dependent is the patient.</p>
LOOP 2110D – DEPENDENT ELIGIBILITY OR BENEFIT INQUIRY INFORMATION				
182	2110D	EQ01	Service Type Code	<p>Requests should be as specific as possible. The more specific the inquiry, the more specific the response will be.</p> <p>BCBSKC: Must provide a valid Service Type Code. Recommend submitting only one EQ and no procedure/diagnosis codes.</p> <p>BCBSKS: Only one EQ can be submitted per 270 request.</p>

APPENDICES

1. BlueExchange

BlueExchange is a solution for managing the flow of standard transactions between Blue Cross Blue Shield Plans to satisfy customer needs. BlueExchange allows trading partners to send standard transactions for any Blue Cross Blue Shield Plan to their local Blue Cross Blue Shield Plan. The trading partners local Plan will route that transaction through BlueExchange to receive a response from the applicable Blue Cross Blue Shield Plan. The BlueExchange core hours of operation are Monday-Saturday 6:00 am to midnight

2. Batch and Real Time Scheduled Maintenance and Unscheduled Downtime or Non Routine Downtime

BCBSKS: Scheduled system maintenance occurs Sunday between 4:00 am –10:00 am (all times listed are Central Time Zone)

BCBSKC: Real time eligibility inquiries are not available from midnight Saturday through midnight Sunday. (all times listed are Central Time Zone)

Real Time - Email notification will be sent for unscheduled or non routine downtime. Email addresses from the Trading Partner agreement will be used. Trading Partners are responsible for notifying ASK when there are changes to contact or other Trading Partner information.

[ASK: Contact Us](#)

3. [Holiday Schedule](#)

4. Business Scenarios

BCBSKS (47163) Explicit Service Type Codes.

- When a Service Type Code is not listed as explicit a "30 Health Benefit Plan Coverage" will be returned.
- In some instance additional Service Type Codes will be supported explicitly for a few select products.
- At a minimum, other Blue Cross and Blue Shield Plans will provide explicit responses to the Service Type Codes located in the Blue Exchange Column.

Service Type (EQ01)	Service Type Description	*Blue Exchange Returns	BCBSKS Returns	Complex Services returned
1	Medical Care	Y	Y	2, 42, 45, 69, 76, 83, AG, BT, BU, DM
2	Surgical	Y	Y	7, 8, 20
3	Consultation	N	Y	
4	Diagnostic X-Ray	Y	Y	
5	Diagnostic Lab	Y	Y	
6	Radiation Therapy	Y	Y	
7	Anesthesia	Y	Y	
8	Surgical Assistance	Y	Y	
10	Blood Charges	N	Y	
12	Durable Medical Equipment Purchase	Y	Y	
13	Ambulatory Service Center Facility	Y	Y	
18	Durable Medical Equipment Rental	Y	Y	
20	Second Surgical Opinion	Y	Y	

21	Third Surgical Opinion	N	Y	
23	Diagnostic Dental	N	Y	
24	Periodontics	N	Y	
25	Restorative	N	Y	
26	Endodontics	N	Y	
30	Health Benefit Plan Coverage	Y	Y	1, 33, 35, 47, 48, 50, 51, 52, 86, 88, 98, AL, BZ, MH, UC
33	Chiropractic	Y	Y	4, 33
34	Chiropractic Office Visits	N	Y	
35	Dental Care	Y	Y	
36	Dental Crowns	N	Y	
39	Prosthodontics	N	Y	
40	Oral Surgery	Y	N	
41	Routine (Preventive) Dental	N	Y	
42	Home Health Care	Y	Y	A3
44	Home Health Visits	N	Y	
45	Hospice	Y	Y	
47	Hospital (Hospital Inpatient and Outpatient services (Excluding Hospital-Emergency Accident; Hospital – Emergency Medical; and Hospital Ambulatory Surgical) and supplies for a patient who may or may not have been admitted to a hospital, for the purpose of receiving medical care or other health services	Y	Y	51, 52, 53
48	Hospital - Inpatient	Y	Y	99
49	Hospital - Room and Board	N	Y	
50	Hospital - Outpatient	Y	Y	51, 52, A0
51	Hospital – Emergency Accident	Y	Y	
52	Hospital – Emergency Medical	Y	Y	
53	Hospital – Ambulatory Surgical	Y	Y	
59	Licensed Ambulance	N	Y	
60	General Benefits	Y	Y	
61	In-vitro Fertilization - Inpatient and outpatient services to treat infertility using IVF (In-vitro Fertilization) procedures.	Y	Y	
62	MRI/CAT Scan	Y	Y	
64	Acupuncture	N	Y	
65	Newborn Care	Y	Y	
68	Well Baby Care	Y	Y	80, BH
69	Maternity	Y	Y	
70	Transplant	N	Y	
73	Diagnostic Medical	Y	Y	4, 5, 62
74	Private Duty Nursing	N	Y	
75	Prosthetic Device	N	Y	
76	Dialysis – Outpatient dialysis services furnished by a Hospital, Community Health center, free-standing dialysis facility or physician. This coverage may	Y	Y	

	also include dialysis services rendered on an inpatient basis or in the patient's home.			
78	Chemotherapy- Outpatient chemotherapy services furnished by a Hospital, Community Health Center, free-standing radiation therapy and chemotherapy facility, physician or nurse practitioner.	Y	Y	
80	Immunizations	Y	Y	
81	Routine Physical	Y	Y	
82	Family Planning	Y	Y	
83	Infertility – Inpatient and outpatient services to diagnose and/or treat infertility. Covered services may include assisted reproductive technology procedures.	Y	Y	61
84	Abortion	Y	Y	
86	Emergency Services	Y	Y	51, 52, 98
88	Pharmacy	Y	Y	
93	Podiatry	Y	Y	
97	Anesthesiologist	N	Y	
98	Professional (Physician) Visit – Office	Y	Y	BZ, 98 with MSG01=SPECIALIST
99	Professional (Physician) Visit - Inpatient	Y	Y	
A0	Professional (Physician) Visit - Outpatient	Y	Y	
A3	Professional (Physician) Visit - Home	Y	Y	
A5	Psychiatric - Room and Board	N	Y	
A6	Psychotherapy	Y	Y	
A7	Psychiatric - Inpatient	Y	Y	
A8	Psychiatric - Outpatient	Y	Y	
AD	Occupational Therapy	Y	Y	
AE	Physical Medicine – Professional and Facility Services and care related to evaluation and treatment of injury or disorders	Y	Y	
AF	Speech Therapy	Y	Y	
AG	Skilled Nursing Care	Y	Y	
AI	Substance Abuse	Y	Y	
AJ	Alcoholism	N	Y	
AK	Drug Addiction	N	Y	
AL	Vision (Optometry)	Y	Y	
AM	Frames	N	Y	
AN	Routine Exam	N	Y	
AO	Lenses	N	Y	
BG	Cardiac Rehabilitation	Y	Y	
BH	Pediatric	Y	Y	
BT	Gynecological – Medical care related to	Y	Y	

	care and management of the female reproductive system and associated disorders provided by a physician or other healthcare provider.			
BU	Obstetrical	Y	Y	
BV	Gynecological/Obstetrical	Y	Y	BT, BU
BY	Physician Visit - Office: Sick	Y	Y	
BZ	Physician Visit - Office: Well	Y	Y	
CC	Surgical Benefits - Professional (Physician)	N	Y	
CD	Surgical Benefits - Facility	N	Y	
CE	Mental Health Provider - Inpatient	Y	Y	
CF	Mental Health Provider - Outpatient	Y	Y	
CG	Mental Health Facility - Inpatient	Y	Y	
CH	Mental Health Facility - Outpatient	Y	Y	
CI	Substance Abuse Facility - Inpatient	Y	Y	
CJ	Substance Abuse Facility - Outpatient	Y	Y	
CK	Screening Xray	Y	Y	
CL	Screening laboratory	Y	Y	
CM	Mammogram, High Risk Patient	Y	Y	
CN	Mammogram, Low Risk Patient	Y	Y	
CO	Flu Vaccination	Y	Y	
DM	Durable Medical Equipment	Y	Y	
MH	Mental Health	Y	Y	CE MH, CF MH, CG MH, CH MH
PT	Physical Therapy	Y	Y	
UC	Urgent Care	Y	Y	

CHANGE SUMMARY

This section describes the differences between the current Companion Guide and previous guide(s).

Page	Description of Change	Date and Version of
8	Section 7 removed 3. Compression of files is supported between the	03/08/2017
5	Corrected URL	03/10/2017
5	Removed Test URL	04/11/2017
5	Corrected Production URL	04/11/2017
5	Corrected ASK Resources URL	12/27/2017
9	Corrected Acknowledgment URL	12/27/2017

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