

## Electronic EOBR File Definition – DRAFT

### Purpose

The purpose of this document is to define the electronic Explanation of Benefits Report (EOBR) file format, selection criteria, generation criteria, and the sorts used to create files picked up by the IHS/CHS Area Offices.

### Records Included in EOBR

The following are the individual record types within the EOBR defined in this document:

- A Record – Only one sequence – 001. Claim Information: for payment, purchase order, and facility data.
- B Record – Only one sequence – 001. Claim Information: for patient and purchase order data.
- C Record – Sequence 001. Claim Information: for purchase order data.
- CA Record – Sequence 002. Claim Information: for Purchase Order Authorization Dates.
- D Record – Only one sequence – 001. Claim Information: for vendor data.
- E Record – Only one sequence – 001. Claim Information: for obligation and diagnosis data.
- F Record – Numerous sequence numbers (i.e. 001, 002, 003). Claim Information: for procedure and dates of service for claim.
- G Record – Only one sequence – 001. Claim Information: for ICD9 Surgical Procedure codes (up to three).
- H Record – Sequence 001. Summary information for facilities and fiscal years.
- HA Record – Sequence 002. Summary/break information for fiscal year, facility, or payment date.
- I Record – Only one sequence – 001. Claim information: for

interest data.

- **M Record** – Numerous sequence numbers (i.e. 001, 002, 003). Claim information: for messages with text from the FI message file. Only transmitted if changes were made to the message file during the week.

## **EOBR Generation**

Paper EOBRs are generated daily with the daily payment runs. If an Area Office has selected paper EOBRs to be suppressed, they will not receive the paper EOBRs. Otherwise the EOBRs are sent out daily. As the paper EOBRs are generated, a file is also generated with the same information to merge into the electronic EOBRs at the end of the week.

Electronic EOBRs are generated on a weekly basis. The file is created during the FI's Saturday night batch run. The weekly electronic EOBR file includes all payments processed during the week (Tuesday through Monday) and are merged into one file for the Area Offices to pick up for electronic posting.

An EOBR is generated whenever any payment, adjustments, or rejection activity is processed for a claim.

- **Payments** – an EOBR is generated for interim and final payments on a claim. In an EOBR run, a check number can appear several times depending on how many claims are being paid with the same paid date for a particular vendor.
- **Multiple claims** – There are times multiple claims will be processed for one purchase order. Each claim is assigned a unique claim number. Examples of multiple claims: spilt claims (facility and professional charges) or billing cycles for a provider (monthly billing for a patient). A separate EOBR will be generated for each claim – either as an interim or final payment. There is an Interim/Final indicator (I/F) on the EOBR in the “C” record. Multiple claims can be processed on the same EOBR run or a different day's EOBR run.
- **Blanket Purchase Orders/Multiple Claim** – When a blanket purchase order is created by the Service Unit, there will be multiple claims processed against that purchase order. There is

a blanket indicator (Y or N) on the EOBR. All claims processed against the blanket purchase order will be processed as Interim payments. On these particular claims there will be an "I" in the interim/final flag and a "Y" in the blanket indicator in the "C" record of the electronic EOBR.

- **Adjustments** – An EOBR is generated when an adjustment is processed for a claim. Adjustments for additional payments or late charges will show a positive payment amount, whereas adjustments for check refunds and offset recoveries will show a negative payment amount. When EOBRs are generated from an adjustment, asterisks will show in the obligation amount of the "E" record.
- **Rejections** – If a claim is rejected as interim or final, an EOBR will be generated showing a zero payment amount.

**Sort Criteria  
for Area File**

The primary sort for the electronic EOBR file is *payment date*.  
Within payment date the file is sorted in the following manner:

1. Facility Code – six characters (i.e. 808101, 202101)
2. Purchase Order Authorization POFY (i.e. 00,09,08)
3. Nature of Coverage – Dental Claims are placed after all the other types of service (I/P, O/P, Professional, Ancillaries)
4. Purchase Order Number (excludes two- digit FY; already accounted for above)
5. Vendor
6. Interim/final indicator (Interim payments appear before final payments)
7. Check Type (Zero Pays and then Payments)
8. Patient ID Number
9. FI Claim Number

**Record Type  
A**

The following table describes the format of Record Type A (Claim Information: for payment, purchase order, and facility data):

<b>Field #</b>	<b>Description</b>	<b>Example</b>	<b>Field Definition</b>
1 – 2	Area Office Number	20	PIC X(02) – Alpha/Num
3 – 4	Service Unit Number	21	PIC X(02) – Alpha/Num
5 – 6	Facility Number	01	PIC X(02) – Alpha/Num
7 – 8	Fiscal Year of Purchase Order	09	PIC X(02) – Alpha/Num
9 – 18	Claim Number	9929200146	PIC 9(10) – Numerical
19	Record Type	Always 'A'	PIC X(01) – Alpha/Num
20 – 22	Sequence Number	Always '001'	PIC 9(03) – Numerical
23 – 31	Claim Count Sequence (Sequential number of claims within transmission)	000000280	PIC 9(09) – Numerical
32 – 38	Check Number	1227286	PIC 9(07) – Numerical

<b>Field #</b>	<b>Description</b>	<b>Example</b>	<b>Field Definition</b>
39 – 45	Remittance Number	0000187	PIC 9(07) – Numerical
46 – 53	Paid Date – CCYYMMDD	19991102	PIC X(08) – Alpha/Num
54 – 65	Purchase Order Number	09-Q01-01916	PIC X(12) – Alpha/Num
66 – 72	FI Patient Number	0102325	PIC X(07) – Alpha/Num
73 – 78	Facility Code	202101	PIC X(06) – Alpha/Num
79 – 80	Documentation Type	64	PIC X(02) – Alpha/Num

**Record Type  
B**

The following table describes the format of Record Type B (Claim Information: for patient and purchase order data):

<b>Field #</b>	<b>Description</b>	<b>Example</b>	<b>Field Definition</b>
1 – 2	Area Office Number	20	PIC X(02) – Alpha/Num
3 – 4	Service Unit Number	21	PIC X(02) – Alpha/Num
5 – 6	Facility Number	01	PIC X(02) – Alpha/Num
7 – 8	Fiscal Year of Purchase Order	09	PIC X(02) – Alpha/Num
9 – 18	Claim Number	9929200146	PIC 9(10) – Numerical
19	Record Type	Always 'B'	PIC X(01) – Alpha/Num
20 – 22	Sequence Number	Always '001'	PIC 9(03) – Numerical
23 – 52	Patient Name	Jonathan Smith	PIC X(30) – Alpha/Num
53 – 59	Health Record Number	013546	PIC X(07) – Alpha/Num
60 – 67	Date Purchase Order Created/Authorized – CCYYMMDD	20010503	PIC X(08) – Alpha/Num
68 – 69	Actual – Days	Blank or 10	PIC 9(02) – Numerical
70 – 72	DRG	467	PIC 9(03) – Numerical
73 – 76	Service Class Code (SCC)	254D	PIC X(04) – Alpha/Num
77 – 80	Filler	Not Used	PIC X(04) – Alpha/Num

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**Record Type  
C**

The following table describes the format of Record Type C (Claim Information: for Purchase Order data):

Field #	Description	Example	Field Definition
1 – 2	Area Office Number	20	PIC X(02) – Alpha/Num
3 – 4	Service Unit Number	21	PIC X(02) – Alpha/Num
5 – 6	Facility Number	01	PIC X(02) – Alpha/Num
7 – 8	Fiscal Year of Purchase Order	09	PIC X(02) – Alpha/Num
9 – 18	Claim Number	9929200146	PIC 9(10) – Numerical
19	Record Type	Always 'C'	PIC X(01) – Alpha/Num
20 – 22	Sequence Number	Always '001'	PIC 9(03) – Numerical
23 – 38	Common Accounting Number (CAN)	J53AR74	PIC X(16) – Alpha/Num
39 – 42	Object Class Code (OCC)	256R	PIC X(04) – Alpha/Num
43	Type of Service Billed (A = Professional; B = Inpatient; C = Outpatient; D = Dental; E = Ancillary; F = Non Patient)	A	PIC X(01) – Alpha/Num
44	Blanket Purchase Order Indicator (Y or N)	N	PIC X(01) – Alpha/Num
45 – 54	Contract Number (Contract Number or Open Market)	OM	PIC X(10) – Alpha/Num
55	Interim/Final Payment Indicator	'F' or 'I'	PIC X(01) – Alpha/Num
56 – 68	Vendor (provider) Number	1856000642-A7	PIC X(13) – Alpha/Num
69 – 80	Filler	Not Used	PIC X(12) – Alpha/Num

**Record Type  
CA**

The following table describes the format of Record Type CA  
(Claim Information: for Purchase Order Authorization Dates):

<b>Field #</b>	<b>Description</b>	<b>Example</b>	<b>Field Definition</b>
1 – 2	Area Office Number	20	PIC X(02) – Alpha/Num
3 – 4	Service Unit Number	21	PIC X(02) – Alpha/Num
5 – 6	Facility Number	01	PIC X(02) – Alpha/Num
7 – 8	Fiscal Year of Purchase Order	09	PIC X(02) – Alpha/Num
9 – 18	Claim Number	9929200146	PIC 9(10) – Numerical
19	Record Type	Always 'C'	PIC X(01) – Alpha/Num
20 – 22	Sequence Number	Always '002'	PIC 9(03) – Numerical
23 – 30	PO Start Date CCYYMMDD	20010601	PIC X(08) – Alpha/Num
31 – 38	PO End Date CCYYMMDD	20010630	PIC X(08) – Alpha/Num
39 – 80	Filler	Not Used	PIC X(42) – Alpha/Num

**Record Type  
D**

The following table describes the format of Record Type D (Claim Information: for vendor data):

<b>Field #</b>	<b>Description</b>	<b>Example</b>	<b>Field Definition</b>
1 – 2	Area Office Number	20	PIC X(02) – Alpha/Num
3 – 4	Service Unit Number	21	PIC X(02) – Alpha/Num
5 – 6	Facility Number	01	PIC X(02) – Alpha/Num
7 – 8	Fiscal Year of Purchase Order	09	PIC X(02) – Alpha/Num
9 – 18	Claim Number	9929200146	PIC 9(10) – Numerical
19	Record Type	Always 'D'	PIC X(01) – Alpha/Num
20 – 22	Sequence Number	Always '001'	PIC 9(03) – Numerical
23 – 52	Vendor Name	UNM Hospital	PIC X(30) – Alpha/Num
53 – 61	Amount billed by Vendor	118.32	PIC S9(07)V99 Signed with 2 Decimals
62 – 70	Allowed Amount (per contract)	118.32	PIC S9(07)V99 Signed with 2 Decimals
71 – 79	Amount Paid by Third Party	93.70	PIC S9(07)V99 Signed with 2 Decimals
80	Filler	Not Used	PIC X(01) – Alpha/Num

**Record Type  
E**

The following table describes the format of Record Type E (Claim Information: for obligation and diagnosis data):

Field #	Description	Example	Field Definition
1 – 2	Area Office Number	20	PIC X(02) – Alpha/Num
3 – 4	Service Unit Number	21	PIC X(02) – Alpha/Num
5 – 6	Facility Number	01	PIC X(02) – Alpha/Num
7 – 8	Fiscal Year of Purchase Order	09	PIC X(02) – Alpha/Num
9 – 18	Claim Number	9929200146	PIC 9(10) – Numerical
19	Record Type	Always 'E'	PIC X(01) – Alpha/Num
20 – 22	Sequence Number	Always '001'	PIC 9(03) – Numerical
23 – 31	IHS Paid Amount (IHS Principle amount)	23.42	PIC S9(07)V99 Signed with 2 Decimals
32	Obligation Indicator	'1' = PO Number '2' = Open Document File	PIC X(01) – Alpha/Num
33 – 41	Obligation Amount	300.00	PIC S9(07)V99 Signed with 2 Decimals
42 – 50	Adjustment Amount (Difference between Obligation Amount and IHS Paid Amount)	276.58	PIC S9(07)V99 Signed with 2 Decimals
51 – 55	Diagnosis Code 1	ICD9 Code (i.e. 585)	PIC X(05) – Alpha/Num
56 – 60	Diagnosis Code 2	Blank or ICD9 Code (i.e. 585)	PIC X(05) – Alpha/Num
61 – 65	Diagnosis Code 3	Blank or ICD9 Code (i.e. 585)	PIC X(05) – Alpha/Num
66 – 70	Diagnosis Code 4	Blank or ICD9 Code (i.e. 585)	PIC X(05) – Alpha/Num
71 – 75	Diagnosis Code 5	Blank or ICD9 Code (i.e. 585)	PIC X(05) – Alpha/Num
76 – 80	Filler	Not Used	PIC X(06) – Alpha/Num

**Record Type  
F**

The following table describes the format of Record Type F (Claim Information; includes procedure and dates of service for claim):

*Note: An 'F' record is created for EACH line on a claim.*

Field #	Description	Example	Field Definition
1 – 2	Area Office Number	20	PIC X(02) – Alpha/Num
3 – 4	Service Unit Number	21	PIC X(02) – Alpha/Num
5 – 6	Facility Number	01	PIC X(02) – Alpha/Num
7 – 8	Fiscal Year of Purchase Order	09	PIC X(02) – Alpha/Num
9 – 18	Claim Number	9929200146	PIC 9(10) – Numerical
19	Record Type	Always 'F'	PIC X(01) – Alpha/Num
20 – 22	Sequence Number	Sequential starting with '001' and continues for # of lines on a claim	PIC 9(03) – Numerical
23 – 30	Beginning Date of Service from claim CCYYMMDD	20010601	PIC X(08) – Alpha/Num
31 – 38	Ending Date of Service from claim CCYYMMDD	20010604	PIC X(08) – Alpha/Num
39 – 43	Procedure Code	90925	PIC X(05) – Alpha/Num
44 – 46	Units Billed for Procedure	003	PIC 9(03) – Numerical
47 – 55	Billed Charge by Vendor for Procedure	18.20	PIC S9(07)V99 Signed with 2 Decimals
56 – 64	Allowed Amount (per contract) for Procedure	18.20	PIC S9(07)V99 Signed with 2 Decimals
65 – 68	Message Code (Identifies payment or reject reason)	M199	PIC X(04) – Alpha/Num
69 – 70	Tooth Number (for Dental Claims)	Will be 1 through 32	PIC X(02) – Alpha/Num
71 – 75	Tooth Surface	Up to five allowed (i.e. B D F G I)	PIC X(05) – Alpha/Num
76 – 80	Filler	Not Used	PIC X(05) – Alpha/Num

**Record Type  
G**

The following table describes the format of Record Type G (Claim Information; includes ICD9 Surgical Procedure codes (up to three)):

<b>Field #</b>	<b>Description</b>	<b>Example</b>	<b>Field Definition</b>
1 – 2	Area Office Number	20	PIC X(02) – Alpha/Num
3 – 4	Service Unit Number	21	PIC X(02) – Alpha/Num
5 – 6	Facility Number	01	PIC X(02) – Alpha/Num
7 – 8	Fiscal Year of Purchase Order	09	PIC X(02) – Alpha/Num
9 – 18	Claim Number	9929200146	PIC 9(10) – Numerical
19	Record Type	Always 'G'	PIC X(01) – Alpha/Num
20 – 22	Sequence Number	Always '001	PIC 9(03) – Numerical
23 – 26	ICD9 Surgical Procedure Code (Facility Claims – UB92)	9671	PIC X(04) – Alpha/Num
27 – 72	Filler	Not Used	PIC X(46) – Alpha/Num

**Record Type  
H**

The following table describes the format of Record Type H  
(Summary information for facilities and fiscal years):

<b>Field #</b>	<b>Description</b>	<b>Example</b>	<b>Field Definition</b>
1 – 2	Area Office Number	20	PIC X(02) – Alpha
3 – 4	Service Unit Number	21	PIC X(02) – Alpha
5 – 6	Facility Number	01	PIC X(02) – Alpha
7 – 8	Fiscal Year of Purchase Order	09	PIC X(02) – Alpha
9 – 18	Last Claim Number paid for Facility Code	9929200146	PIC 9(10) – Numerical
19	Record Type	Always 'H'	PIC X(01) – Alpha
20 – 22	Sequence Number	Always '001'	PIC 9(03) – Numerical
23 – 28	Facility Code	202101	PIC X(06) – Alpha
29 – 40	Filler	Not Used	PIC X(12) – Alpha
41 – 45	Type 43 Claims (Institutional)	125	PIC 9(05) – Numerical
46 – 50	Type 57 Claims (Dental)	125	PIC 9(05) – Numerical
51 – 55	Type 64 Claims (Outpatient)	125	PIC 9(05) – Numerical
56 – 65	Total IHS Paid Amount for Facility Code	34,456.66	PIC S9(08)V99 Signed with 2 Decimals
66 – 70	Total Number of OCC 4319 Payments (Interest Payments)	23	PIC S9(05) – Signed Numeric
71 – 80	Total IHS Interest Paid Amount for Facility Code	456.66	PIC S9(08)V99 Signed with 2 Decimals

**Record Type  
HA**

The following table describes the format of Record Type HA (Summary/break information for fiscal year, facility, or payment date.):

<b>Field #</b>	<b>Description</b>	<b>Example</b>	<b>Field Definition</b>
1 – 2	Area Office Number	20	PIC X(02) – Alpha/Num
3 – 4	Service Unit Number	21	PIC X(02) – Alpha/Num
5 – 6	Facility Number	01	PIC X(02) – Alpha/Num
7 – 8	Fiscal Year of Purchase Order	09	PIC X(02) – Alpha/Num
9 – 18	Claim Number	9929200146	PIC 9(10) – Numerical
19	Record Type	Always 'H'	PIC X(01) – Alpha/Num
20 – 22	Sequence Number	Always '002'	PIC 9(03) – Numerical
23 – 30	Payment From Date CCYYMMDD	20010911	PIC X(08) – Alpha/Num
31 – 38	Payment To Date CCYYMMDD	Left Blank	PIC X(08) – Alpha/Num
39 – 80	Filler	Not Used	PIC X(42) – Alpha/Num

**Record Type I**

The following table describes the format of Record Type I (Claim information; includes interest data.):

<b>Field #</b>	<b>Description</b>	<b>Example</b>	<b>Field Definition</b>
1 – 2	Area Office Number	20	PIC X(02) – Alpha/Num
3 – 4	Service Unit Number	21	PIC X(02) – Alpha/Num
5 – 6	Facility Number	01	PIC X(02) – Alpha/Num
7 – 8	Fiscal Year of Purchase Order	09	PIC X(02) – Alpha/Num
9 – 18	Last Claim Number paid for Facility Code	9929200146	PIC 9(10) – Numerical
19	Record Type	Always 'I'	PIC X(01) – Alpha/Num
20 – 22	Sequence Number	Always '001'	PIC 9(03) – Numerical
23 – 29	Interest CAN (Populated only if Interest is paid)	J54DR74	PIC X(07) – Alpha/Num
30 – 33	Interest OCC (Populated only if Interest is paid)	256R	PIC X(04) – Alpha/Num
34 – 38	Interest Rate	5.756	PIC S9(02)V999 Signed with 2 Decimals
39 – 41	Days Eligible for Interest	003	PIC 9(03) – Numerical
42 – 50	Interest Paid Amount	2.65	PIC S9(07)V99 Signed with 2 Decimals
51 – 56	Penalty Paid Amount	1.32	PIC S9(04)V99 Signed with 2 Decimals
57 – 66	Total Paid Amount for Claim	23	PIC S9(08)V99 Signed With 2 Decimals
67 – 80	Filler	Not Used	PIC X(14) – Alpha/Num

**Record Type  
M**

The following table describes the format of Record Type M (Contains messages with text from the FI message file. Only transmitted if changes were made to the message file during the week.):

<b>Field #</b>	<b>Description</b>	<b>Example</b>	<b>Field Definition</b>
1 – 3	Sequence Number	Sequential starting with '001' and continues for # of messages in FI file	PIC 9(03) – Numerical
4 – 7	Message Number	M199	PIC X(04) – Alpha/Num
8 – 46	Message Narrative	Pricing Determined at Contracted Rate	PIC X(39) – Alpha/Num
47 – 80	Filler	Not Used	PIC X(34) – Alpha/Num

**Sequence of Record Type in EOBR File**

The sequence of the record types is not alphabetical within the file processed. The sequence of the records are as follows:

- H002 – Will be the first record after the header record when received at the Area Office. Since the EOBRs are sorted by payment date within facility code and the identification of the payment dates are contained within the H002 record, this will be the first record in each batch. Whenever the payment date, fiscal year, *or* facility code changes, an H002 record will be written.
- A001
- B001
- C001
- D001
- E001
- I001
- G001 – Created only if there is a Surgical ICD9 Procedure code entered on claim (UB92 claim form only – facility claim)
- F001 through Fxxx (where xxx represents however many lines are paid on the claim processed for payment)
- H001 – Created only when the fiscal year changes within the facility. The EOBRs are sorted by payment date; therefore there could be an H001 record several times for the same facility/fiscal year within the batch (i.e. potentially five payment dates within batch; therefore there could be 5 H001 records for 808101 in POFY 01).