



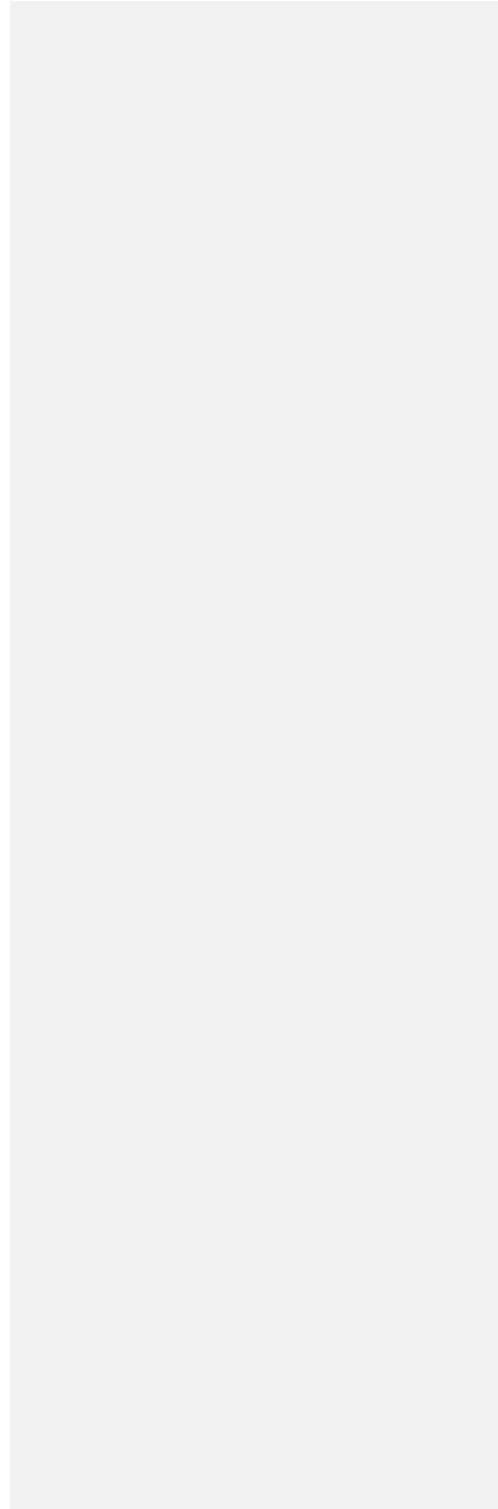
pVerify, Inc.

92 Corporate Park, Suite C127 \* Irvine, CA 92606  
(800) 974-2995 \* Support @pverify.com

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# Eligibility Rest API Testing

January 16, 2019





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## Testing introduction

Testing can be done in a HIPAA compliant manner by using the below endpoints with one of a small list of payers. This combination of endpoint and payer will give a response with same format as a normal patient, but in a HIPAA complaint manner for testing purposes.

API URL: <https://api.pverify.com/Test>

Test user / password: pverify\_demo / pverify@949

Test Payer list:

- a ) AETNA (pVerify® Payer-Id 00001)
- b ) United Healthcare (pVerify® Payer-Id 00192)
- c ) Medicare Part A & B (pVerify® Payer-Id 00007)
- d ) Ohio Medicaid (pVerify® Payer-Id 00165)
- e ) BCBS of Texas (pVerify® Payer-Id 00220)

You must first use the /Test/Token call. The procedure is as follows:

- 1) Perform the token request
- 2) From the response, get the token and assign to a variable
- 3) In the downstream request (EligibilityInquiry), add the token to the header: Authorization: Bearer <insert token string here>

## Example:

Token:

### Request:

POST /Test/Token HTTP/1.1

Host: [api.pverify.com](https://api.pverify.com)

cache-control: no-cache

Postman-Token: d327f18f-57d5-4621-93cf-70702665d6f2

username=pverify\_demopassword=pverify%40949grant\_type=password



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Response:

```
{
  "access_token": "0xoYxWn0Mo7-Cq-V_0MRTCcmS-1bziFNViGz0Ch5VCSCIk-
c4k3Pz8EZXRlBbCF1bRiJQUfyCJSWvCnY5exTr3AHR6YjBUCEP-qLiugv-
UHOfZ1A1RM1BfpCyBoFdMdZYQbtWhJedJSFZezY6QeZgxYaS9Q1nRCTrgLmvZ165n72ISrUh_Wg
yQt5ngtacg0mZoMgymL3umhy36LgruslfzkzV9fl48SwM_ylaDsFxm4",
  "token_type": "bearer",
  "expires_in": 28799
}
```

EligibilityInquiry

Request:

POST /Test/API/EligibilityInquiry HTTP/1.1

Host: [api.pverify.com](http://api.pverify.com)

Authorization: Bearer 0xoYxWn0Mo7-Cq-V\_0MRTCcmS-1bziFNViGz0Ch5VCSCIk-  
c4k3Pz8EZXRlBbCF1bRiJQUfyCJSWvCnY5exTr3AHR6YjBUCEP-qLiugv-  
UHOfZ1A1RM1BfpCyBoFdMdZYQbtWhJedJSFZezY6QeZgxYaS9Q1nRCTrgLmvZ165n72ISrUh\_Wg  
yQt5ngtacg0mZoMgymL3umhy36LgruslfzkzV9fl48SwM\_ylaDsFxm4

Client-User-Name: pverify\_demo

Client-Password: pverify@949

Content-Type: application/json

cache-control: no-cache

Postman-Token: 2d7fc20b-557c-48b9-8152-6005439c6845

```
{
  "payerCode": "00007",
  "provider": {
    "firstName": "",
    "middleName": "",
    "lastName": " test name",
    "npi": "1548223126"
  },
  "subscriber": {
    "firstName": "",
    "middleName": "",
    "lastName": "somelast",
    "dob": "12/21/2018",
    "memberID": "1234567890"
  },
}
```

**Commented [RD1]:** This is the token from the response in /Test/Token

**Commented [RD2]:** This is an artifact of using postman and not relevant to the call.

**Commented [RD3]:** The payer code MUST be from the list for testing purposes.

**Commented [RD4]:** This can be anything, it's not checked.



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```
"dependent": {
  "patient": {
    "firstName": "",
    "middleName": "",
    "lastName": "",
    "dob": "",
    "gender": ""
  },
  "relationWithSubscriber": ""
},
"isSubscriberPatient": "true",
"doS_StartDate": "12/21/2018",
"doS_EndDate": "12/21/2018",
"serviceCodes": [
  "30"
],
"requestSource": "RestAPI"
}
```

**Commented [RD5]:** In the testing interface we are always returning data for service code 30 Health Benefit Plan Coverage

Response:

```
{
  "ElgRequestID": 4465,
  "EDIErrorMessage": null,
  "VerificationStatus": "Processed",
  "VerificationMessage": "",
  "IsPayerBackOffice": "FALSE",
  "Status": "Active",
  "PayerName": "AETNA INC",
  "VerificationType": "Dependent Verification",
  "DOS": "01/15/2018 - 01/15/2018",
  "Plan": "AETNA CHOICE POS II - POS",
  "IsHMOPlan": false,
  "ExceptionNotes": "",
  "AdditionalInformation": null,
  "OtherMessage": "Allowed",
  "ReportURL":
  "https://premium.pverify.com/PremiumAccount/ViewDetailsForRecord?elqID=FT893STYoisU5QgeFg
  yQ6w~~",
  "EligibilityPeriod": {
```

**Commented [RD6]:** The status refers to the subscribers coverage status, active means they have insurance coverage.

**Commented [RD7]:** This is part of the canned response. Even though we submitted a subscriber only test, we just return one HIPAA compliant response object. In the real interface you will get this or Subscriber Verification

**Commented [RD8]:** The Plan field often contains special data that our customers want such as visual coverage, Medicare plan information, etc. This is an important field.

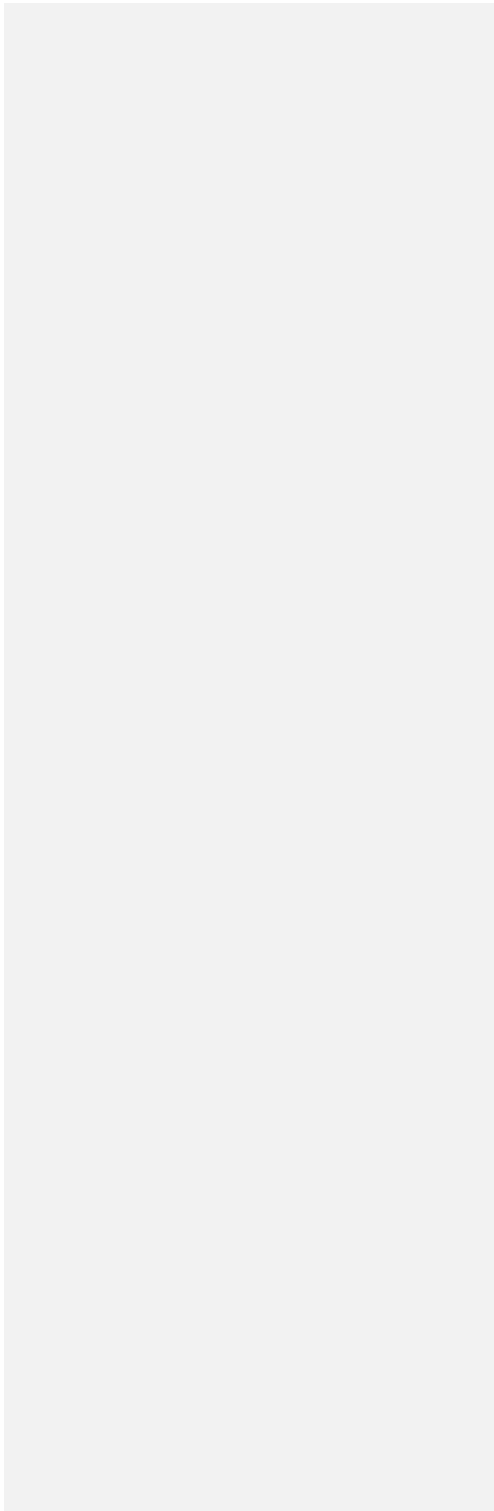
**Commented [RD9]:** Full text to the report. This leads to a login page in the canned response. Users must authenticate and must have access to the report.



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```
"Label": null,
"EffectiveFromDate": "01/01/2018",
"ExpiredOnDate": null
},
"DemographicInfo": {
  "Subscriber": {
    "Address1": null,
    "Address2": null,
    "City": null,
    "CommunicationNumber": null,
    "Date": null,
    "DOB_R": null,
    "Firstname": "SRxxxxxxx",
    "Gender_R": "",
    "Identification": [
      {
        "Code": "THIxxxxxxx",
        "Type": "Lastname_R",
        "Name": null
      },
      {
        "Code": "SRxxxxxxx",
        "Type": "Firstname",
        "Name": null
      },
      {
        "Code": "W2xxxxxxxxxxx",
        "Type": "Member ID",
        "Name": null
      },
      {
        "Code": "08686xxxxxxxx",
        "Type": "Group Number",
        "Name": null
      },
      {
        "Code": "ALTxxxxx",
        "Type": "Group Name",
        "Name": null
      }
    ]
  },
  "Lastname_R": "THxxxxxxxxxxx",
  "Middlename": null,
  "State": null,
  "Suffix": null,
  "Zip": null
}
```





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```
},  
"Dependent": {  
  "DependentInfo": {  
    "Address1": "8609xxxxxx BLVD",  
    "Address2": "APT 2003",  
    "City": "IRVING",  
    "CommunicationNumber": null,  
    "Date": [  
      {  
        "Date": "01/01/2018",  
        "Type": "Plan Begin"  
      },  
      {  
        "Date": "01/15/2018",  
        "Type": "Service"  
      },  
      {  
        "Date": "01/01/2018",  
        "Type": "Eligibility Begin"  
      }  
    ],  
    "DOB_R": "11/16/2008",  
    "Firstname": "Kxxxxxxx",  
    "Gender_R": "",  
    "Identification": [  
      {  
        "Code": "0868xxxxxx",  
        "Type": "Plan Number",  
        "Name": null  
      }  
    ],  
    "Lastname_R": "THLxxxxxxxx",  
    "Middlename": null,  
    "State": "TX",  
    "Suffix": null,  
    "Zip": "75063"  
  },  
  "Relationship": "Child"  
},  
"NetworkSections": [  
  {  
    "Identifier": "primary care",  
    "Label": "Primary Care",  
    "InNetworkParameters": [  
      {
```

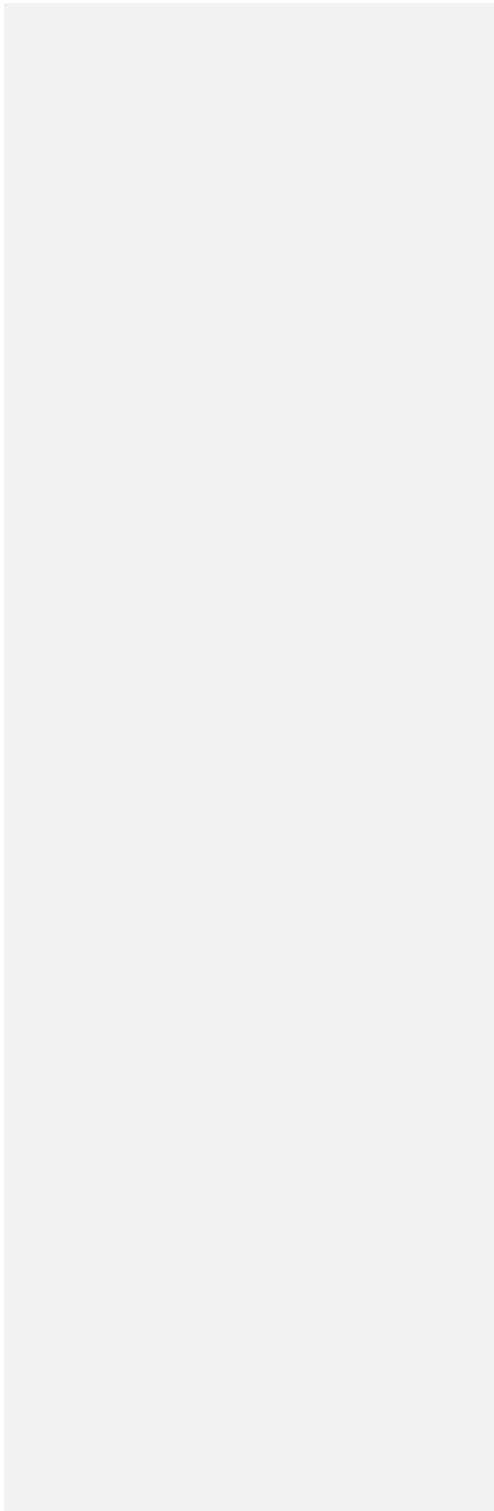
**Commented [RD10]:** This is our custom results fields, where pVerify is putting data that populates our dashboard. The structure of this object is always the same but the value is not guaranteed, it depends on parsing of the EDI271 object by us. If parsing values the value would be null. It is typically reliable for the common payers depending on the type of practice, for example the copay changes depending on primary care, specialist, PT, chiro, etc.



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```
    "Key": "Co-Ins",
    "Value": " 0",
    "Message": null
  },
  {
    "Key": "Co-Pay",
    "Value": " 40.00",
    "Message": null
  }
],
"OutNetworkParameters": null
},
{
  "Identifier": "Deductible",
  "Label": "Deductible",
  "InNetworkParameters": [
    {
      "Key": "Annual",
      "Value": " 900.00",
      "Message": null
    },
    {
      "Key": "Remaining",
      "Value": " 900.00",
      "Message": null
    }
  ],
  "OutNetworkParameters": null
},
{
  "Identifier": "OutOfPocket",
  "Label": "Out-Of-Pocket",
  "InNetworkParameters": [
    {
      "Key": "Maximum",
      "Value": " 3000.00",
      "Message": null
    },
    {
      "Key": "Remaining",
      "Value": " 3000.00",
      "Message": null
    }
  ],
  "OutNetworkParameters": null
}
}
```





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```
],  
"HealthBenefitPlanCoverageServiceType": {  
  "ServiceTypeName": "Health Benefit Plan Coverage",  
  "ServiceTypeSections": [  
    {  
      "Label": "",  
      "ServiceParameters": [  
        {  
          "Key": "Family Active Coverage (AETNA CHOICE POS II)",  
          "Value": null,  
          "Message": null  
        },  
        {  
          "Key": "Family Limitations ",  
          "Value": null,  
          "Message": [  
            "SELF FUNDED"  
          ]  
        },  
        {  
          "Key": "Family Primary Care Provider ",  
          "Value": null,  
          "Message": [  
            "PCP SELECTION NOT REQUIRED"  
          ]  
        },  
        {  
          "Key": "Family Lifetime Unlimited ",  
          "Value": null,  
          "Message": null  
        }  
      ]  
    },  
    {  
      "Label": "In Plan-Network Status",  
      "ServiceParameters": [  
        {  
          "Key": "Family Calendar Year Deductible",  
          "Value": "$2700.00",  
          "Message": [  
            "MED DENT,MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED  
PROVIDERS,DED INCLUDED IN OOP,EMERGENCY USE OF EMERGENCY ROOM,OUTPATIENT  
MEDICAL ANCILLARY,AMBULATORY MEDICAL ANCILLARY,MEDICAL ANCILLARY,SEMI  
PRIVATE ROOM AND BOARD,INTENSIVE CARE ROOM AND BOARD",  
            "OUTPATIENT SURGERY FACILITY,NON EMERGENCY USE OF EMERGENCY  
ROOM,EMERGENCY ROOM PHYSICIAN,URGENT CARE"  
          ]  
        }  
      ]  
    }  
  ]  
}
```

**Commented [RD11]:** Here you would find the general insurance eligibility information that is returned in the EDI 271. For example deductible.

**Commented [RD12]:** Here is the deductible (max)





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**Commented [RD13]:** Often these messages have important information for the billing staff. Be sure to pass this to the end user.

```
},
{
  "Key": "Family Remaining Deductible ",
  "Value": "$2700.00",
  "Message": [
    "MED DENT"
  ]
},
{
  "Key": "Individual Calendar Year Deductible ",
  "Value": "$900.00",
  "Message": [
    "MED DENT,MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED
    PROVIDERS,DED INCLUDED IN OOP,EMERGENCY USE OF EMERGENCY ROOM,OUTPATIENT
    MEDICAL ANCILLARY,AMBULATORY MEDICAL ANCILLARY,MEDICAL ANCILLARY,SEMI
    PRIVATE ROOM AND BOARD,INTENSIVE CARE ROOM AND BOARD",
    "OUTPATIENT SURGERY FACILITY,NON EMERGENCY USE OF EMERGENCY
    ROOM,EMERGENCY ROOM PHYSICIAN,URGENT CARE"
  ]
},
{
  "Key": "Individual Remaining Deductible ",
  "Value": "$900.00",
  "Message": [
    "MED DENT"
  ]
},
{
  "Key": "Individual Out of Pocket ",
  "Value": "$3000.00",
  "Message": [
    "MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED PROVIDERS"
  ]
},
{
  "Key": "Individual Remaining Out of Pocket ",
  "Value": "$3000.00",
  "Message": null
},
{
  "Key": "Family Out of Pocket ",
  "Value": "$9000.00",
  "Message": [
    "MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED PROVIDERS"
  ]
}
```



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```
    },  
    {  
      "Key": "Family Remaining Out of Pocket ",  
      "Value": "$9000.00",  
      "Message": null  
    }  
  ]  
},  
{  
  "Label": "Out of Plan-Network Status",  
  "ServiceParameters": [  
    {  
      "Key": "Family Calendar Year Deductible ",  
      "Value": "$9000.00",  
      "Message": [  
        "MED DENT,DED INCLUDED IN OOP,CHIROPRACTOR VISIT OR EVALUATION  
IN OFFICE,LAB PERFORMED BY CHIROPRACTOR IN OFFICE,XRAY BY CHIROPRACTOR IN  
OFFICE,MANIPULATION BY CHIROPRACTOR IN OFFICE,OCCUPATIONAL THERAPY BY  
CHIROPRACTOR IN OFFICE",  
        "PHYSICAL THERAPY BY CHIROPRACTOR IN OFFICE,EMERGENCY USE OF  
EMERGENCY ROOM,OUTPATIENT MEDICAL ANCILLARY,AMBULATORY MEDICAL  
ANCILLARY,MEDICAL ANCILLARY,SEMI PRIVATE ROOM AND BOARD,INTENSIVE CARE  
ROOM AND BOARD,INPATIENT MEDICAL ANCILLARY,OUTPATIENT SURGERY FACILITY",  
        "NON EMERGENCY USE OF EMERGENCY ROOM,EMERGENCY ROOM  
PHYSICIAN,URGENT CARE,GYN VISIT WHEN PERFORMED IN AN OFFICE,SPECIALIST VISIT  
OR EVALUATION WHEN PERFORMED IN AN OFFICE,PRIMARY CARE VISIT OR EVALUATION  
IN OFFICE"  
      ]  
    },  
    {  
      "Key": "Family Remaining Deductible ",  
      "Value": "$9000.00",  
      "Message": [  
        "MED DENT"  
      ]  
    },  
    {  
      "Key": "Individual Calendar Year Deductible ",  
      "Value": "$3000.00",  
      "Message": [  
        "MED DENT,DED INCLUDED IN OOP,CHIROPRACTOR VISIT OR EVALUATION  
IN OFFICE,LAB PERFORMED BY CHIROPRACTOR IN OFFICE,XRAY BY CHIROPRACTOR IN  
OFFICE,MANIPULATION BY CHIROPRACTOR IN OFFICE,OCCUPATIONAL THERAPY BY  
CHIROPRACTOR IN OFFICE",  
        "PHYSICAL THERAPY BY CHIROPRACTOR IN OFFICE,EMERGENCY USE OF  
EMERGENCY ROOM,OUTPATIENT MEDICAL ANCILLARY,AMBULATORY MEDICAL
```



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ANCILLARY, MEDICAL ANCILLARY, SEMI PRIVATE ROOM AND BOARD, INTENSIVE CARE ROOM AND BOARD, INPATIENT MEDICAL ANCILLARY, OUTPATIENT SURGERY FACILITY", "NON EMERGENCY USE OF EMERGENCY ROOM, EMERGENCY ROOM PHYSICIAN, URGENT CARE, GYN VISIT WHEN PERFORMED IN AN OFFICE, SPECIALIST VISIT OR EVALUATION WHEN PERFORMED IN AN OFFICE, PRIMARY CARE VISIT OR EVALUATION IN OFFICE"

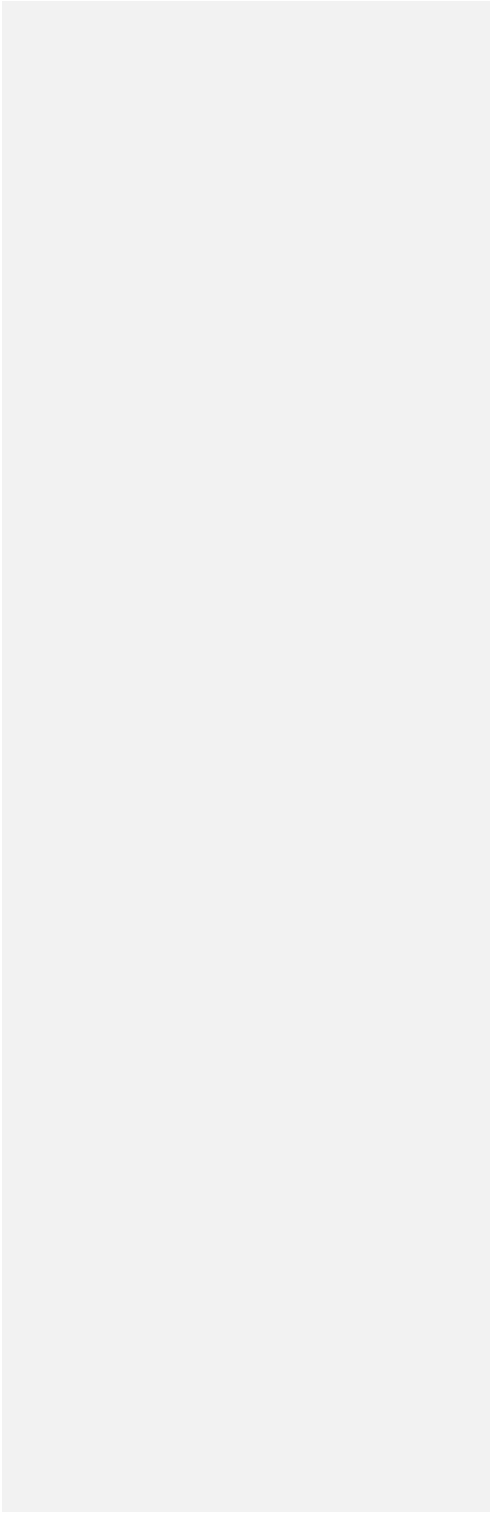
```
]
},
{
  "Key": "Individual Remaining Deductible ",
  "Value": "$3000.00",
  "Message": [
    "MED DENT"
  ]
},
{
  "Key": "Individual Out of Pocket ",
  "Value": "$6000.00",
  "Message": null
},
{
  "Key": "Individual Remaining Out of Pocket ",
  "Value": "$6000.00",
  "Message": null
},
{
  "Key": "Family Out of Pocket ",
  "Value": "$18000.00",
  "Message": null
},
{
  "Key": "Family Remaining Out of Pocket ",
  "Value": "$18000.00",
  "Message": null
}
]
},
{
  "Label": "Applies to In & Out Plan-Network Status",
  "ServiceParameters": [
    {
      "Key": "Family Limitations ",
      "Value": null,
      "Message": [
        "PLAN REQUIRES PRECERT"
      ]
    }
  ]
}
```



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```
    }
  ]
},
"ServicesTypes": [
  {
    "ServiceTypeName": "Others",
    "ServiceTypeSections": [
      {
        "Label": "",
        "ServiceParameters": [
          {
            "Key": "Other Source of Data ",
            "Value": null,
            "Message": null
          }
        ]
      },
      {
        "Label": "[Payer]",
        "ServiceParameters": [
          {
            "Key": "First Name",
            "Value": null,
            "Message": null
          }
        ]
      }
    ]
  }
],
{
  "ServiceTypeName": "Chiropractic",
  "ServiceTypeSections": [
    {
      "Label": "",
      "ServiceParameters": [
        {
          "Key": "Family Active Coverage (AETNA CHOICE POS II)",
          "Value": null,
          "Message": null
        },
        {
          "Key": "Family Limitations ",
          "Value": null,
          "Message": [
```





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```

    "PLAN INCLUDES NAP"
  ]
}
},
{
  "Label": "In Plan-Network Status",
  "ServiceParameters": [
    {
      "Key": "Family Co-Insurance ",
      "Value": "0%",
      "Message": [
        "MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED PROVIDERS",
        "CHIROPRACTOR VISIT OR EVALUATION IN OFFICE",
        "LAB PERFORMED BY CHIROPRACTOR IN OFFICE",
        "XRAY BY CHIROPRACTOR IN OFFICE",
        "MANIPULATION BY CHIROPRACTOR IN OFFICE",
        "OCCUPATIONAL THERAPY BY CHIROPRACTOR IN OFFICE",
        "PHYSICAL THERAPY BY CHIROPRACTOR IN OFFICE"
      ]
    }
  ],
  {
    "Key": "Family Co-Payment ",
    "Value": "$80.00",
    "Message": [
      "MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED PROVIDERS",
      "CHIROPRACTOR VISIT OR EVALUATION IN OFFICE,COPAY INCLUDED IN
    OOP",
      "LAB PERFORMED BY CHIROPRACTOR IN OFFICE,COPAY INCLUDED IN
    OOP",
      "XRAY BY CHIROPRACTOR IN OFFICE,COPAY INCLUDED IN OOP",
      "MANIPULATION BY CHIROPRACTOR IN OFFICE,COPAY INCLUDED IN
    OOP",
      "OCCUPATIONAL THERAPY BY CHIROPRACTOR IN OFFICE,COPAY
    INCLUDED IN OOP",
      "PHYSICAL THERAPY BY CHIROPRACTOR IN OFFICE,COPAY INCLUDED IN
    OOP"
    ]
  },
  {
    "Key": "Family Limitations ",
    "Value": null,
    "Message": [
      "MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED PROVIDERS",
      "CHIROPRACTOR VISIT OR EVALUATION IN OFFICE/PLAN DED WAIVED",
      "LAB PERFORMED BY CHIROPRACTOR IN OFFICE/PLAN DED WAIVED",

```



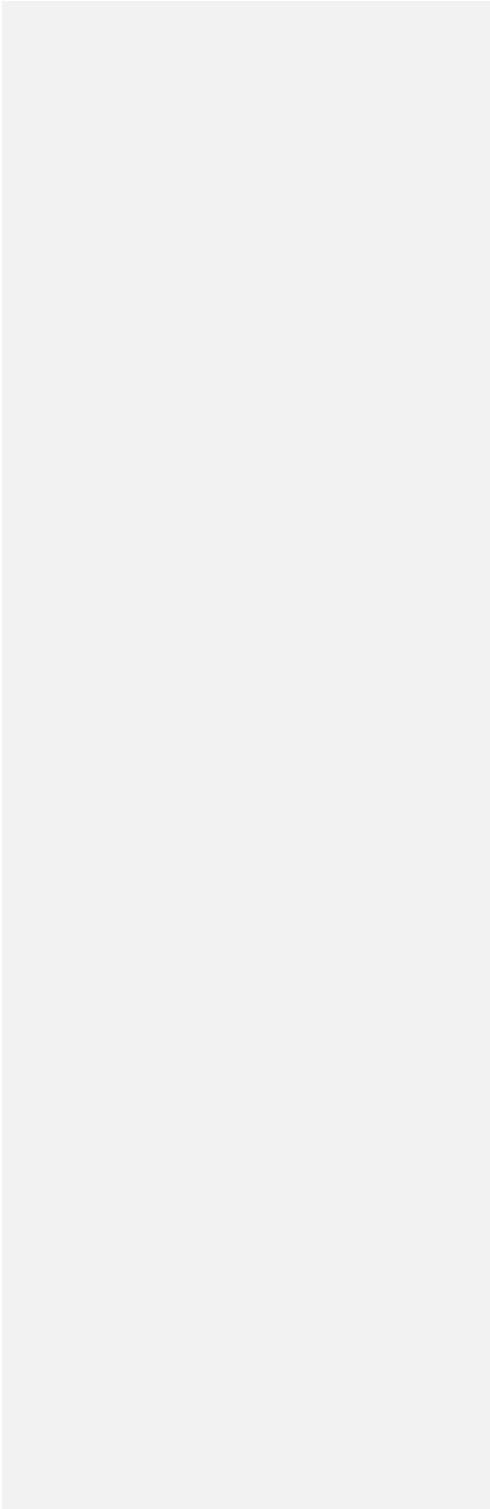
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```

"XRAY BY CHIROPRACTOR IN OFFICE/PLAN DED WAIVED",
"MANIPULATION BY CHIROPRACTOR IN OFFICE/PLAN DED WAIVED",
"OCCUPATIONAL THERAPY BY CHIROPRACTOR IN OFFICE/PLAN DED
WAIVED",
  "PHYSICAL THERAPY BY CHIROPRACTOR IN OFFICE/PLAN DED WAIVED"
]
}
]
},
{
  "Label": "Out of Plan-Network Status",
  "ServiceParameters": [
    {
      "Key": "Family Co-Insurance ",
      "Value": "40%",
      "Message": [
        "CHIROPRACTOR VISIT OR EVALUATION IN OFFICE,COINS APPLIES TO
OUT OF POCKET",
        "LAB PERFORMED BY CHIROPRACTOR IN OFFICE,COINS APPLIES TO OUT
OF POCKET",
        "XRAY BY CHIROPRACTOR IN OFFICE,COINS APPLIES TO OUT OF
POCKET",
        "MANIPULATION BY CHIROPRACTOR IN OFFICE,COINS APPLIES TO OUT
OF POCKET",
        "OCCUPATIONAL THERAPY BY CHIROPRACTOR IN OFFICE,COINS
APPLIES TO OUT OF POCKET",
        "PHYSICAL THERAPY BY CHIROPRACTOR IN OFFICE,COINS APPLIES TO
OUT OF POCKET"
      ]
    },
    {
      "Key": "Family Co-Payment ",
      "Value": "$0.00",
      "Message": [
        "CHIROPRACTOR VISIT OR EVALUATION IN OFFICE",
        "LAB PERFORMED BY CHIROPRACTOR IN OFFICE",
        "XRAY BY CHIROPRACTOR IN OFFICE",
        "MANIPULATION BY CHIROPRACTOR IN OFFICE",
        "OCCUPATIONAL THERAPY BY CHIROPRACTOR IN OFFICE",
        "PHYSICAL THERAPY BY CHIROPRACTOR IN OFFICE"
      ]
    }
  ]
}
],
{
  "Label": "Applies to In & Out Plan-Network Status",

```



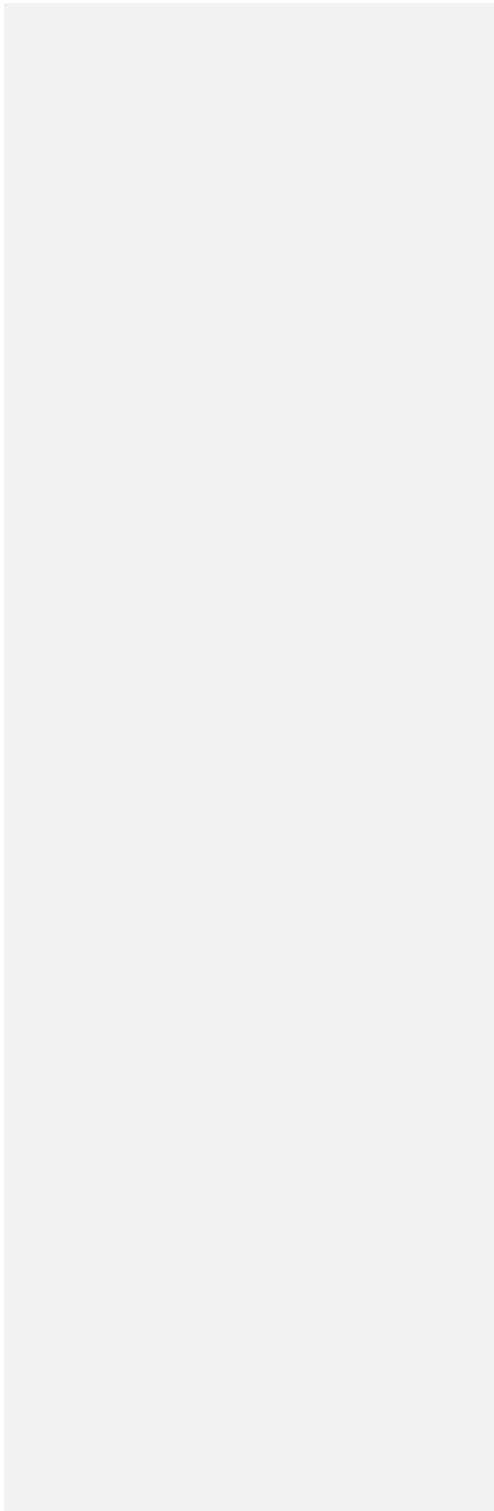


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```
"ServiceParameters": [
  {
    "Key": "Individual Years Limitations Visits",
    "Value": "30",
    "Message": [
      "SPINAL MANIP,MANIPULATION BY CHIROPRACTOR IN OFFICE"
    ]
  },
  {
    "Key": "Individual Remaining Limitations Visits",
    "Value": "30",
    "Message": [
      "SPINAL MANIP"
    ]
  },
  {
    "Key": "Individual Years Limitations Visits",
    "Value": "60",
    "Message": [
      "SHRT TRM REHAB,PHYSICAL THERAPY BY CHIROPRACTOR IN
OFFICE,OCCUPATIONAL THERAPY BY CHIROPRACTOR IN OFFICE"
    ]
  },
  {
    "Key": "Individual Remaining Limitations Visits",
    "Value": "60",
    "Message": [
      "SHRT TRM REHAB"
    ]
  }
]
},
{
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          "Value": null,
          "Message": null
        },
        {

```





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```
    "Key": "Family Limitations ",
    "Value": null,
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    ]
  }
]
},
{
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      "Value": "20%",
      "Message": [
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        "NON EMERGENCY USE OF EMERGENCY ROOM,COINS APPLIES TO OUT
OF POCKET",
        "EMERGENCY ROOM PHYSICIAN,COINS APPLIES TO OUT OF POCKET",
        "EMERGENCY USE OF EMERGENCY ROOM,COINS APPLIES TO OUT OF
POCKET"
      ]
    },
    {
      "Key": "Family Co-Insurance ",
      "Value": "20%",
      "Message": [
        "MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED PROVIDERS",
        "URGENT CARE,COINS APPLIES TO OUT OF POCKET"
      ]
    }
  ]
},
{
  "Key": "Family Co-Payment ",
  "Value": "$0.00",
  "Message": [
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    "NON EMERGENCY USE OF EMERGENCY ROOM",
    "EMERGENCY ROOM PHYSICIAN",
    "EMERGENCY USE OF EMERGENCY ROOM",
    "URGENT CARE"
  ]
}
]
},
{
  "Label": "Out of Plan-Network Status",
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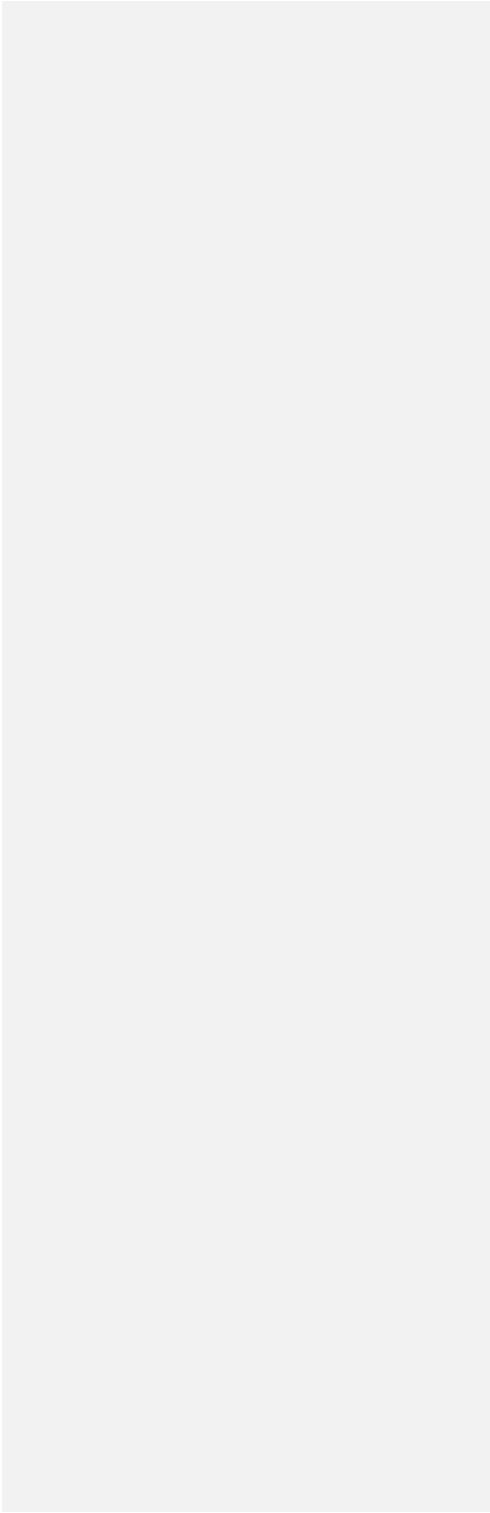




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```
"ServiceParameters": [  
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    "Message": [  
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OF POCKET",  
      "EMERGENCY ROOM PHYSICIAN,COINS APPLIES TO OUT OF POCKET",  
      "EMERGENCY USE OF EMERGENCY ROOM,COINS APPLIES TO OUT OF  
POCKET"  
    ]  
  },  
  {  
    "Key": "Family Co-Insurance ",  
    "Value": "40%",  
    "Message": [  
      "URGENT CARE,COINS APPLIES TO OUT OF POCKET"  
    ]  
  },  
  {  
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    "Value": "$0.00",  
    "Message": [  
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      "EMERGENCY USE OF EMERGENCY ROOM",  
      "URGENT CARE"  
    ]  
  }  
]  
,  
{  
  "Label": "Applies to In & Out Plan-Network Status",  
  "ServiceParameters": [  
    {  
      "Key": "Family Non-Covered ",  
      "Value": null,  
      "Message": [  
        "NON URGENT SERVICES AT AN URGENT CARE FACILITY/EXCLUSION"  
      ]  
    }  
  ]  
}  
]  
},  
{
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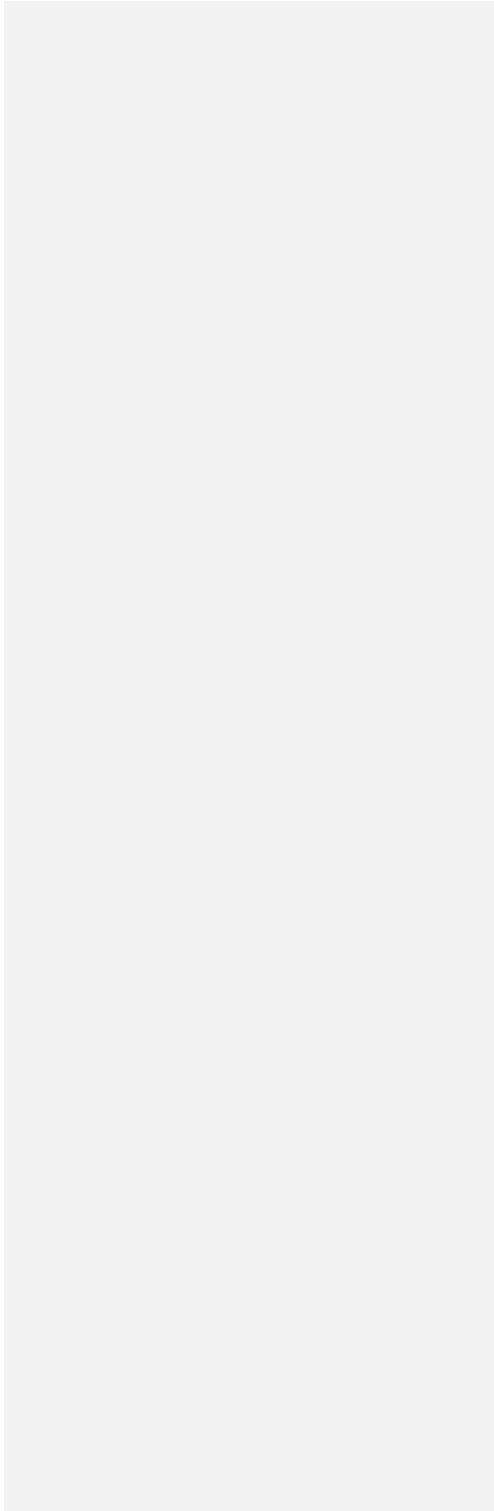




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        "Message": null
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  }
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  "ServiceTypeSections": [
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          ]
        }
      ]
    }
  ]
},
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  "ServiceParameters": [
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      "Value": "20%",
      "Message": [
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        "MEDICAL ANCILLARY,COINS APPLIES TO OUT OF POCKET",
        "SEMI PRIVATE ROOM AND BOARD,COINS APPLIES TO OUT OF POCKET",
        "INTENSIVE CARE ROOM AND BOARD,COINS APPLIES TO OUT OF
POCKET"
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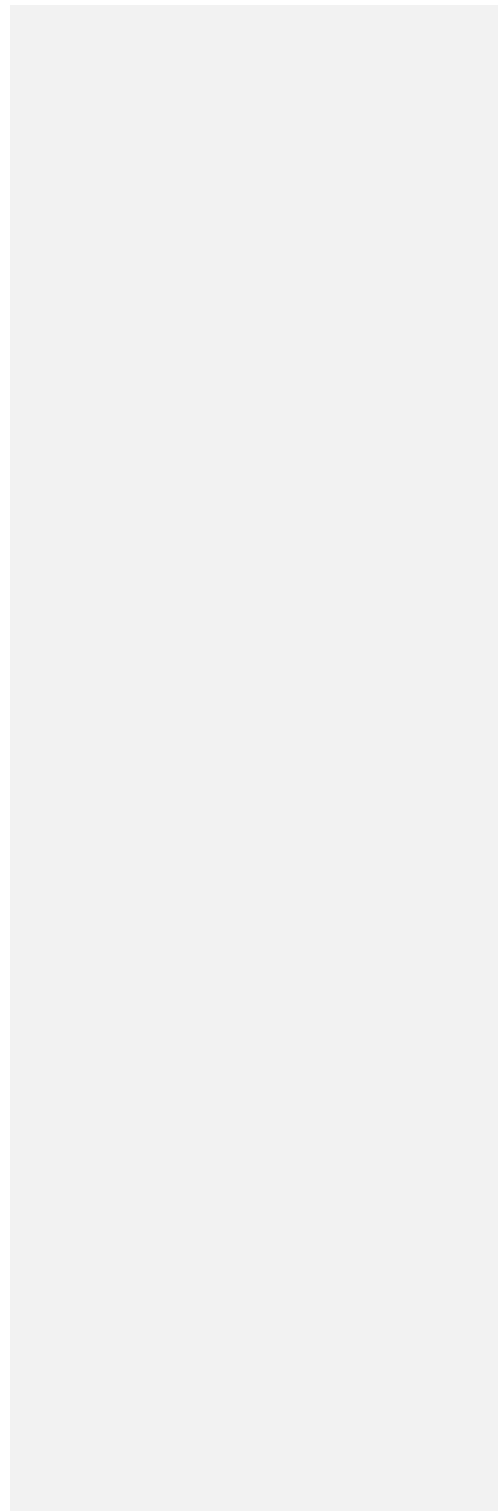




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    ]
  },
  {
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    "Message": [
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      "INTENSIVE CARE ROOM AND BOARD"
    ]
  }
]
},
{
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      "Message": [
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        "INTENSIVE CARE ROOM AND BOARD,COINS APPLIES TO OUT OF
POCKET",
        "INPATIENT MEDICAL ANCILLARY,COINS APPLIES TO OUT OF POCKET"
      ]
    }
  ],
  {
    "Key": "Family Co-Payment ",
    "Value": "$0.00",
    "Message": [
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      "INTENSIVE CARE ROOM AND BOARD",
      "INPATIENT MEDICAL ANCILLARY"
    ]
  }
]
},
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      "ServiceParameters": [
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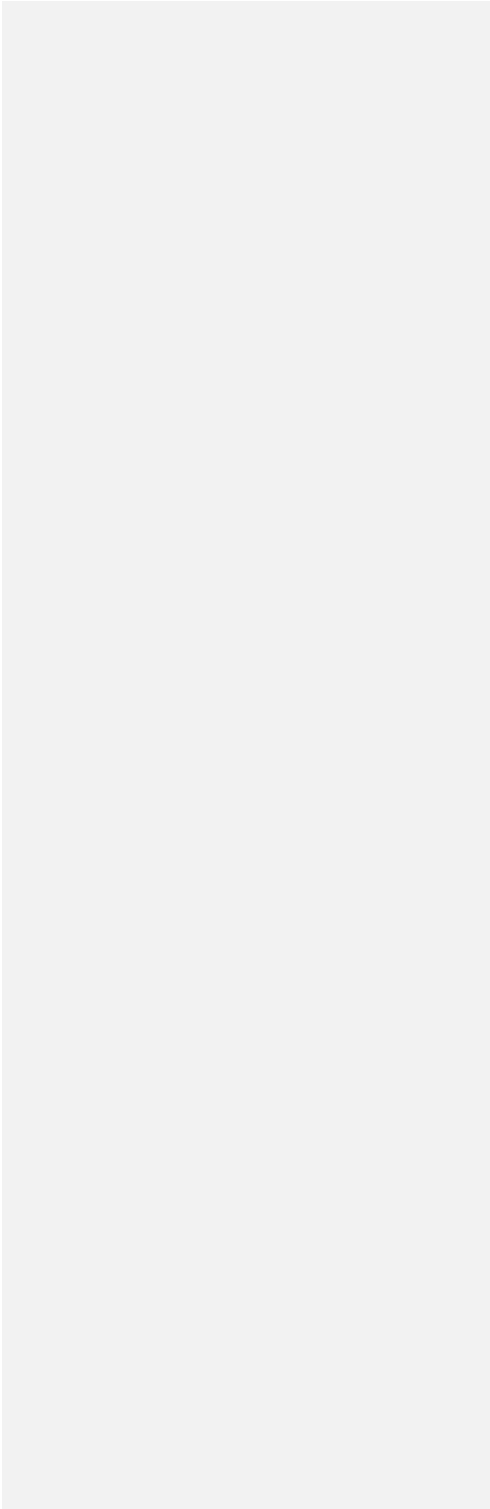




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```
{
  "Key": "Family Active Coverage (AETNA CHOICE POS II)",
  "Value": null,
  "Message": null
},
{
  "Key": "Family Limitations ",
  "Value": null,
  "Message": [
    "PLAN INCLUDES NAP"
  ]
}
]
},
{
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  "ServiceParameters": [
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      "Value": "20%",
      "Message": [
        "MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED PROVIDERS",
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        "OUTPATIENT MEDICAL ANCILLARY,COINS APPLIES TO OUT OF POCKET"
      ]
    },
    {
      "Key": "Family Co-Payment ",
      "Value": "$0.00",
      "Message": [
        "MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED PROVIDERS",
        "OUTPATIENT SURGERY FACILITY",
        "OUTPATIENT MEDICAL ANCILLARY"
      ]
    }
  ]
}
],
{
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  "ServiceParameters": [
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      "Key": "Family Co-Insurance ",
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      "Message": [
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      ]
    }
  ]
}
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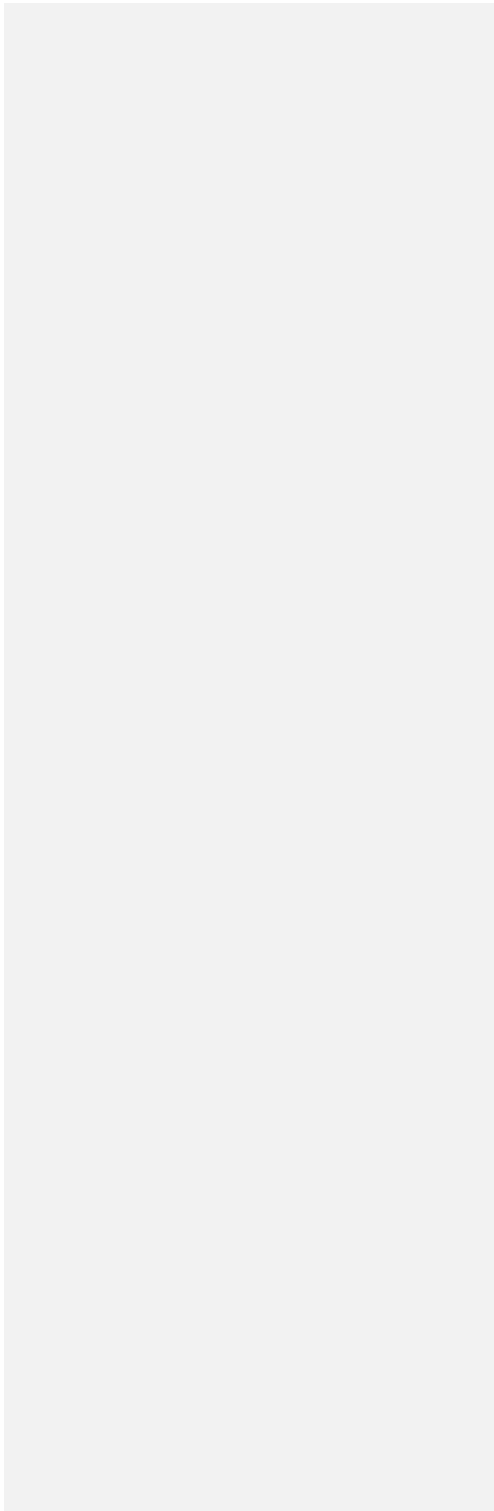




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```
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      "Message": null
    }
  ]
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],
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          "Message": null
        },
        {
          "Key": "Family Limitations ",
          "Value": null,
          "Message": [
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          ]
        }
      ]
    }
  ]
}
],
{
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          "Key": "Family Active Coverage (AETNA CHOICE POS II)",
          "Value": null,
          "Message": null
        }
      ]
    }
  ]
}
]
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},
{
  "ServiceTypeName": "Professional (Physician) Visit - Office",
  "ServiceTypeSections": [
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          "Message": null
        },
        {
          "Key": "Family Limitations ",
          "Value": null,
          "Message": [
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          ]
        }
      ]
    }
  ]
},
{
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      "Message": [
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        "SPECIALIST VISIT OR EVALUATION WHEN PERFORMED IN AN OFFICE",
        "PRIMARY CARE VISIT OR EVALUATION IN OFFICE"
      ]
    }
  ]
},
{
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    "GYN VISIT WHEN PERFORMED IN AN OFFICE,COPAY INCLUDED IN OOP",
    "SPECIALIST VISIT OR EVALUATION WHEN PERFORMED IN AN
OFFICE,COPAY INCLUDED IN OOP"
  ]
},
{
  "Key": "Family Co-Payment ",

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**Commented [RD14]:** This is where the copay for primary care or specialist providers would be

**Commented [RD15]:** Specialist copay. We know this because of the Message part of the object – the EDI 271 does not have a specific field for specialist copay but you can tell it's specialist by looking at the message. This is also in the "Network Sections". You can see because the information is payer and plan specific it's easy to get it wrong or come out with null data. However for most common commercial payers our Network Sections area is reliable.



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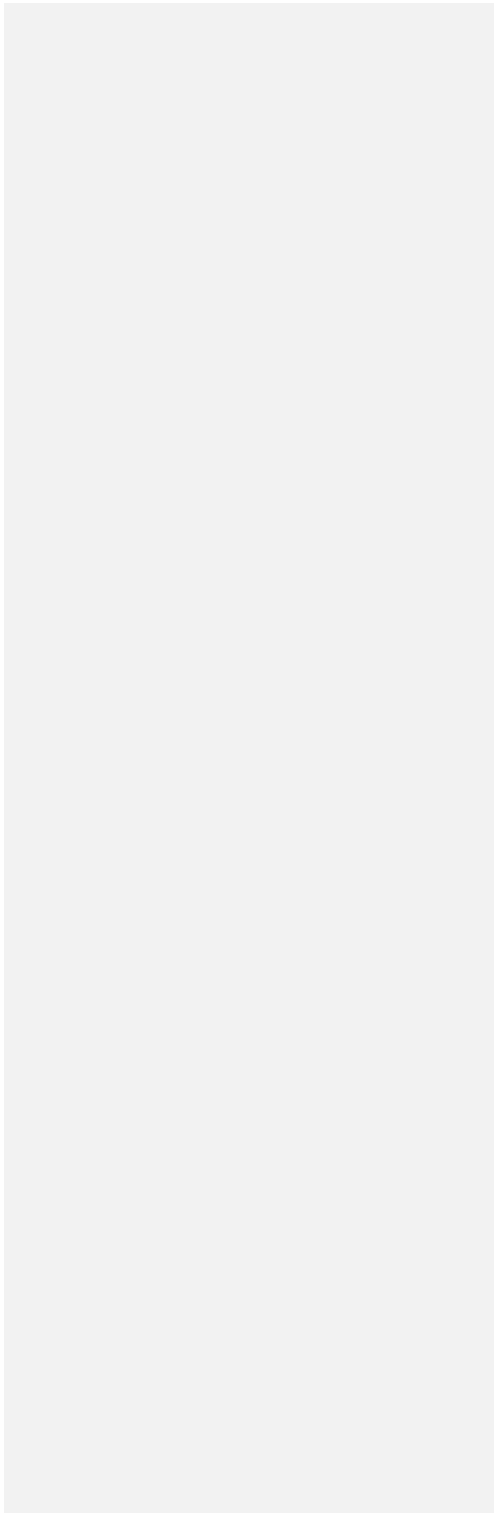
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OOP",
      "MAXIMUM SAVINGS,PATIENTS PRIMARY CARE PHYSICIAN",
      "GYN VISIT WHEN PERFORMED IN AN OFFICE,COPAY INCLUDED IN OOP"
    ]
  },
  {
    "Key": "Family Limitations ",
    "Value": null,
    "Message": [
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      "SPECIALIST VISIT OR EVALUATION WHEN PERFORMED IN AN
OFFICE/PLAN DED WAIVED",
      "PRIMARY CARE VISIT OR EVALUATION IN OFFICE/PLAN DED WAIVED"
    ]
  }
],
{
  "Label": "Out of Plan-Network Status",
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      "Key": "Family Co-Insurance ",
      "Value": "40%",
      "Message": [
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POCKET",
        "SPECIALIST VISIT OR EVALUATION WHEN PERFORMED IN AN
OFFICE,COINS APPLIES TO OUT OF POCKET",
        "PRIMARY CARE VISIT OR EVALUATION IN OFFICE,COINS APPLIES TO
OUT OF POCKET"
      ]
    }
  ],
  {
    "Key": "Family Co-Payment ",
    "Value": "$0.00",
    "Message": [
      "GYN VISIT WHEN PERFORMED IN AN OFFICE",
      "SPECIALIST VISIT OR EVALUATION WHEN PERFORMED IN AN OFFICE",
      "PRIMARY CARE VISIT OR EVALUATION IN OFFICE"
    ]
  }
}
```



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```
    ]
  }
]
},
{
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      "ServiceParameters": [
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          "Message": null
        },
        {
          "Key": "Family Limitations ",
          "Value": null,
          "Message": [
            "PLAN INCLUDES NAP"
          ]
        }
      ]
    }
  ]
},
{
  "Label": "In Plan-Network Status",
  "ServiceParameters": [
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      "Key": "Family Co-Insurance ",
      "Value": "20%",
      "Message": [
        "MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED PROVIDERS",
        "URGENT CARE,COINS APPLIES TO OUT OF POCKET"
      ]
    },
    {
      "Key": "Family Co-Payment ",
      "Value": "$0.00",
      "Message": [
        "MAXIMUM SAVINGS,HEALTH PLANS DESIGNATED PROVIDERS"
      ]
    }
  ]
},
{
  "Label": "Out of Plan-Network Status",
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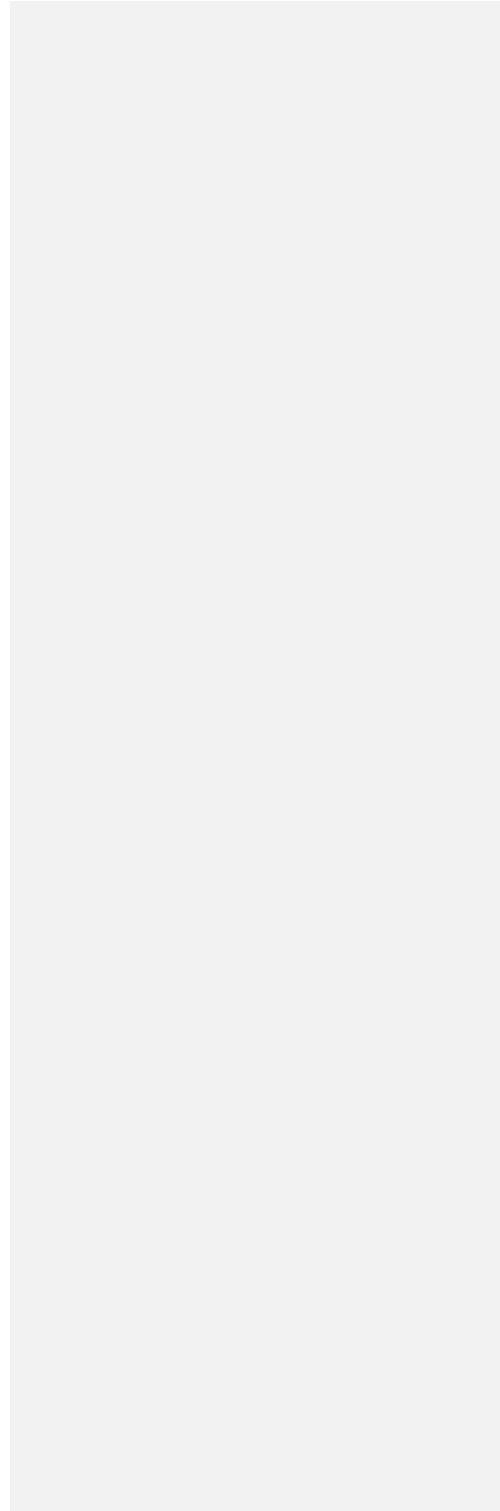




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    "Value": "40%",
    "Message": [
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    ]
  },
  {
    "Key": "Family Co-Payment ",
    "Value": "$0.00",
    "Message": null
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{
  "Label": "Applies to In & Out Plan-Network Status",
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      "Value": null,
      "Message": [
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      ]
    }
  ]
}
],
{
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  "ServiceTypeSections": [
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      "ServiceParameters": [
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          "Value": null,
          "Message": null
        }
      ]
    }
  ]
}
],
"CustomFields": [],
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  "PayerID": 205,  
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  "VerifiedOn": null,  
  "VerifiedBy": null  
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