

PRICING EDIT REQUIREMENTS (ELN 000 - 099)

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**ELEMENT NAME: RECORD TYPE INDICATOR (4-001)**

VALIDITY EDITS

**4-001-01** MUST BE = '4'.

RELATIONAL EDITS

| RELATED TO ELEMENT | EDITED ELEMENT<br>RELATIONSHIP | ALSO RELATES TO ELEMENT(S) |
|--------------------|--------------------------------|----------------------------|
|--------------------|--------------------------------|----------------------------|

**0-025-02R** BATCH IDENTIFIER

**ELEMENT NAME: PRICING STATE OR COUNTRY CODE (4-005)**

VALIDITY EDITS

**4-005-01** MUST BE VALID STATE CODE **OR** FOREIGN COUNTRY CODE. SEE [CHAPTER 2, ADDENDUM A](#) AND [ADDENDUM B](#).

RELATIONAL EDITS

| RELATED TO ELEMENT | EDITED ELEMENT<br>RELATIONSHIP | ALSO RELATES TO ELEMENT(S) |
|--------------------|--------------------------------|----------------------------|
|--------------------|--------------------------------|----------------------------|

NONE

**ELEMENT NAME: PROCEDURE TEXT IDENTIFIER (4-010)**

VALIDITY EDITS

**4-010-01** MUST BE '4' (CPT-4 OR TMA ASSIGNED) **OR** '8' (ADA CODE)

RELATIONAL EDITS

| RELATED TO ELEMENT | EDITED ELEMENT<br>RELATIONSHIP | ALSO RELATES TO ELEMENT(S) |
|--------------------|--------------------------------|----------------------------|
|--------------------|--------------------------------|----------------------------|

NONE

**ELEMENT NAME: PROCEDURE CODE (4-015)**

**VALIDITY EDITS**

**4-015-01** MUST BE NUMERIC.  
 MUST BE VALID CPT-4 **OR** TMA ASSIGNED CODE.

**RELATIONAL EDITS**

| RELATED TO ELEMENT | EDITED ELEMENT<br>RELATIONSHIP | ALSO RELATES TO ELEMENT(S) |
|--------------------|--------------------------------|----------------------------|
| NONE               |                                |                            |

**ELEMENT NAME: CLASS OF PROVIDER (4-020)**

**VALIDITY EDITS**

**4-020-01** MUST BE '01' - '05'.

**RELATIONAL EDITS**

| RELATED TO ELEMENT | EDITED ELEMENT<br>RELATIONSHIP | ALSO RELATES TO ELEMENT(S) |
|--------------------|--------------------------------|----------------------------|
| NONE               |                                |                            |

**ELEMENT NAME: TYPE OF PRICING SERVICE (4-025)**

**VALIDITY EDITS**

**4-025-01** MUST BE '01' - '09'.

**RELATIONAL EDITS**

| RELATED TO ELEMENT | EDITED ELEMENT<br>RELATIONSHIP | ALSO RELATES TO ELEMENT(S) |
|--------------------|--------------------------------|----------------------------|
| NONE               |                                |                            |

**ELEMENT NAME: PREVAILING FEE (4-030)**

**VALIDITY EDITS**

**4-030-01** MUST BE NUMERIC.

**RELATIONAL EDITS**

| RELATED TO ELEMENT | EDITED ELEMENT<br>RELATIONSHIP | ALSO RELATES TO ELEMENT(S)  |
|--------------------|--------------------------------|---|
| CONVERSION AMOUNT  | SEE BELOW                      | RELATIVE VALUE UNIT<br>CONVERSION FACTOR<br>CATEGORY OF CARE FOR<br>CONVERSION FACTOR |

**ELEMENT NAME: PREVAILING FEE (4-030) (CONTINUED)**

**EDITED ELEMENT RELATIONSHIP**

**4-030-02R** IF CONVERSION AMOUNT = ZERO,  
AND CONVERSION FACTOR = ZERO,  
AND RELATIVE VALUE UNIT = ZERO,  
AND CATEGORY OF CARE FOR CONVERSION FACTOR ≠ 'B' (BY REPORT)  
PREVAILING FEE MUST ≠ ZERO.

**ELEMENT NAME: CONVERSION AMOUNT (4-035)**

**VALIDITY EDITS**

**4-035-01** MUST BE NUMERIC.

**RELATIONAL EDITS**

| RELATED TO ELEMENT                     | EDITED ELEMENT RELATIONSHIP | ALSO RELATES TO ELEMENT(S)                                    |
|--|-----------------------------|---|
| CONVERSION FACTOR                      | SEE BELOW                   | CATEGORY OF CARE FOR CONVERSION FACTOR<br>RELATIVE VALUE UNIT |
| PREVAILING FEE                         | SEE BELOW                   | CATEGORY OF CARE FOR CONVERSION FACTOR                        |
| CATEGORY OF CARE FOR CONVERSION FACTOR | SEE BELOW                   |   |
| PREVAILING FEE                         | SEE BELOW                   |   |

**EDITED ELEMENT RELATIONSHIP**

**4-035-02R** IF CONVERSION FACTOR ≠ ZERO AND RELATIVE VALUE UNIT ≠ ZERO AND CATEGORY OF CARE FOR CONVERSION FACTOR ≠ 'A' (ANESTHESIA),  
CONVERSION AMOUNT MUST NOT = ZERO.

**4-035-03R** IF PREVAILING FEE = ZERO AND CATEGORY OF CARE FOR CONVERSION FACTOR ≠ 'A' (ANESTHESIA) OR 'B' (BY REPORT),  
CONVERSION AMOUNT MUST ≠ ZERO.

**4-035-04R** IF CATEGORY OF CARE FOR CONVERSION FACTOR ≠ 'B' (BY REPORT),  
CONVERSION AMOUNT MUST = ZERO.

**4-035-05R** IF PREVAILING FEE ≠ ZERO,  
CONVERSION AMOUNT MUST = ZERO.

**ELEMENT NAME: RELATIVE VALUE UNIT (4-040)**

**VALIDITY EDITS**

**4-040-01** MUST BE NUMERIC.

**RELATIONAL EDITS**

|                  | RELATED TO ELEMENT                        | EDITED ELEMENT<br>RELATIONSHIP | ALSO RELATES TO ELEMENT(S)                |
|------------------|---|--------------------------------|---|
| <b>4-040-02R</b> | CONVERSION FACTOR                         | SEE BELOW                      | CONVERSION AMOUNT                         |
|                  | PREVAILING FEE                            | SEE BELOW                      | CATEGORY OF CARE FOR<br>CONVERSION FACTOR |
|                  | CATEGORY OF CARE FOR<br>CONVERSION FACTOR | SEE BELOW                      |   |
|                  | PREVAILING FEE                            | SEE BELOW                      |   |

**EDITED ELEMENT RELATIONSHIP**

- 4-040-02R** IF CONVERSION FACTOR  $\neq$  ZERO AND CONVERSION AMOUNT  $\neq$  ZERO,  
RELATIVE VALUE UNIT MUST  $\neq$  ZERO.
- 4-040-03R** IF PREVAILING FEE = ZERO AND CATEGORY OF CARE FOR CONVERSION FACTOR  $\neq$  'B' (BY  
REPORT),  
RELATIVE VALUE UNIT MUST  $\neq$  0.
- 4-040-04R** IF CATEGORY OF CARE FOR CONVERSION FACTOR = 'B' (BY REPORT),  
RELATIVE VALUE UNIT MUST = ZERO.
- 4-040-05R** IF PREVAILING FEE  $\neq$  ZERO,  
RELATIVE VALUE UNIT MUST = ZERO.

**ELEMENT NAME: CONVERSION FACTOR (4-045)**

**VALIDITY EDITS**

**4-045-01** MUST BE NUMERIC.

**RELATIONAL EDITS**

|  | RELATED TO ELEMENT                        | EDITED ELEMENT<br>RELATIONSHIP | ALSO RELATES TO ELEMENT(S)                |
|--|---|--------------------------------|---|
|  | CONVERSION AMOUNT                         | SEE BELOW                      | RELATIVE VALUE UNIT                       |
|  | PREVAILING FEE                            | SEE BELOW                      | CATEGORY OF CARE FOR<br>CONVERSION FACTOR |
|  | CATEGORY OF CARE FOR<br>CONVERSION FACTOR | SEE BELOW                      |   |
|  | PREVAILING FEE                            | SEE BELOW                      |   |

**EDITED ELEMENT RELATIONSHIP**

- 4-045-02R** IF CONVERSION AMOUNT  $\neq$  ZERO AND RELATIVE VALUE UNIT  $\neq$  ZERO,  
CONVERSION FACTOR MUST  $\neq$  ZERO.

**ELEMENT NAME: CONVERSION FACTOR (4-045) (CONTINUED)**

- 4-045-03R** IF PREVAILING FEE = ZERO AND CATEGORY OF CARE FOR CONVERSION ≠ 'B' (BY REPORT) CONVERSION FACTOR MUST NOT EQUAL ZERO.

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- 4-045-04R** IF CATEGORY OF CARE FOR CONVERSION FACTOR = 'B' (BY REPORT), CONVERSION FACTOR MUST = ZERO.

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- 4-045-05R** IF PREVAILING FEE ≠ ZERO, CONVERSION FACTOR MUST = ZERO.

**ELEMENT NAME: CATEGORY OF CARE FOR CONVERSION FACTOR (4-050)**

**VALIDITY EDITS**

- 4-050-01** MUST BE 'M', 'A', 'R', 'P', 'S', 'B', OR BLANK.

**RELATIONAL EDITS**

| RELATED TO ELEMENT | EDITED ELEMENT RELATIONSHIP | ALSO RELATES TO ELEMENT(S) |
|--------------------|-----------------------------|----------------------------|
| NONE               |                             |                            |

**ELEMENT NAME: MEDICARE ECONOMIC INDEX PRICE (4-051)**

**VALIDITY EDITS**

- 4-051-01** MUST BE NUMERIC.

**RELATIONAL EDITS**

| RELATED TO ELEMENT | EDITED ELEMENT RELATIONSHIP | ALSO RELATES TO ELEMENT(S) |
|--------------------|-----------------------------|----------------------------|
| AREA PREVAILING    | SEE BELOW                   | CONVERSION AMOUNT          |

**EDITED ELEMENT RELATIONSHIP**

- 4-051-02R** IF MEDICARE ECONOMIC INDEX PRICE ≠ ZERO, AREA PREVAILING AND CONVERSION AMOUNT CAN NOT BOTH = ZERO.

**ELEMENT NAME: PRICING PROFILE (4-052)**

**VALIDITY EDITS**

- 4-052-01** MUST BE = '91', '92', '93', '14', '94', '15', '16', '95', '96', '17', '97', '18', '19', '28', '98', OR '99'.

**RELATIONAL EDITS**

| RELATED TO ELEMENT | EDITED ELEMENT RELATIONSHIP | ALSO RELATES TO ELEMENT(S) |
|--------------------|-----------------------------|----------------------------|
| NONE               |                             |                            |

**ELEMENT NAME: PRICING EFFECTIVE DATE (4-055)**

**VALIDITY EDITS**

**4-055-01** MUST BE A VALID GREGORIAN DATE.

**RELATIONAL EDITS**

| RELATED TO ELEMENT | EDITED ELEMENT<br>RELATIONSHIP | ALSO RELATES TO ELEMENT(S) |
|--------------------|--------------------------------|----------------------------|
| NONE               |                                |                            |

**ELEMENT NAME: TRANSACTION CODE (4-060)**

**VALIDITY EDITS**

**4-060-01** MUST BE 'A' (ADD), 'M' (MODIFY), OR 'I' (INACTIVATE).

**RELATIONAL EDITS**

| RELATED TO ELEMENT | EDITED ELEMENT<br>RELATIONSHIP | ALSO RELATES TO ELEMENT(S)  |
|--------------------|--------------------------------|---|
| STATE/COUNTRY CODE | SEE BELOW                      | CLASS OF PROVIDER, TYPE OF PRICING SERVICE, PROCEDURE CODE, PRICING PROFILE, CATEGORY OF CARE FOR CONVERSION FACTOR |

**EDITED ELEMENT RELATIONSHIP**

**4-060-02R** IF TRANSACTION CODE = 'A'  
 THE COMBINATION OF STATE/COUNTRY CODE, CLASS OF PROVIDER, TYPE OF PRICING SERVICE, CATEGORY OF CARE FOR CONVERSION FACTOR, PRICING PROFILE, AND PROCEDURE CODE MAY NOT ALREADY EXIST ON THE PRICING FILE.

**4-060-03R** IF TRANSACTION CODE = 'M' OR 'I'  
 THE COMBINATION OF STATE/COUNTRY CODE, CLASS OF PROVIDER, TYPE OF PRICING SERVICE, CATEGORY OF CARE FOR CONVERSION FACTOR, PRICING PROFILE, AND PROCEDURE CODE MUST BE ON THE PRICING FILE.

**4-060-04R** IF TRANSACTION CODE = 'A',  
 THE COMBINATION OF STATE/COUNTRY CODE, CLASS OF PROVIDER, TYPE OF PRICING SERVICE, PROCEDURE CODE, AND PRICING PROFILE MAY NOT ALREADY EXIST ON THE PRICING FILE.