

## Financial Edit Requirements

Revision:

<b>ELEMENT NAME: SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) (1-060)</b>		
<b>VALIDITY EDITS</b>		
REFER TO <a href="#">SECTION 5.1</a> .		
<b>RELATIONAL EDITS</b>		
<b>1-060-11F • TPR [SERVICE MEMBER]</b>		
<b>IF</b> HEADER TYPE INDICATOR =	5	VOUCHER HEADER NON-ADMIN CLAIM RATE-ELIGIBLE <b>OR</b>
	6	VOUCHER HEADER ADMIN CLAIM RATE-ELIGIBLE
<b>AND</b> ENROLLMENT/HEALTH PLAN CODE =	W	TPR SERVICE MEMBER - USA <b>OR</b>
	WA	TPR FOREIGN SERVICE MEMBER
<b>OR</b> ANY OCCURRENCE OF SPECIAL PROCESSING CODE =	GU	SERVICE MEMBER ENROLLED IN TPR
<b>AND</b> TYPE OF SUBMISSION ≠	B	ADJUSTMENT TO NON-TED RECORD (HCSR) DATA <b>OR</b>
	E	COMPLETE CANCELLATION OF NON-TED RECORD (HCSR) DATA
<b>AND</b> AMOUNT PAID BY GOVERNMENT CONTRACTOR (TOTAL) ≠ ZERO		
<b>THEN</b> SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) MUST =	A	ARMY <b>OR</b>
	C	COAST GUARD <b>OR</b>
	F	AIR FORCE <b>OR</b>
	H	PUBLIC HEALTH SERVICE <b>OR</b>
	M	MARINES <b>OR</b>
	N	NAVY <b>OR</b>
	O	NOAA <b>OR</b>
	Z	NOT PROVIDED FROM DEERS
<b>AND</b> HCC MEMBER CATEGORY CODE MUST =	A	ACTIVE DUTY <b>OR</b>
	G	NATIONAL GUARD MEMBER (MOBILIZED OR ON ACTIVE DUTY FOR 31 DAYS OR MORE) <b>OR</b>
	J	ACADEMY STUDENT <b>OR</b>
	N	NATIONAL GUARD (NOT ON ACTIVE DUTY OR ON ACTIVE DUTY FOR 30 DAYS OR LESS) <b>OR</b>
	S	RESERVE MEMBER (MOBILIZED OR ON ACTIVE DUTY FOR 31 DAYS OR MORE) <b>OR</b>

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	V	RESERVE MEMBER (NOT ON ACTIVE DUTY OR ON ACTIVE DUTY FOR 30 DAYS OR LESS) <b>OR</b>
	Z	UNKNOWN
<b>AND</b> HCC MEMBER RELATIONSHIP CODE MUST =	A	SELF <b>OR</b>
	Z	UNKNOWN
<b>1-060-18F • SHCP VOUCHER (SERVICE MEMBER CLAIMS ONLY)</b>		
<b>IF</b> ENROLLMENT/HEALTH PLAN CODE =	SR	SHCP - MTF/eMSM REFERRED CARE (EFFECTIVE 10/01/1999)
<b>OR</b> ANY OCCURRENCE OF SPECIAL PROCESSING CODE =	AR	SHCP - MTF/eMSM REFERRED CARE
<b>OR</b> TYPE OF SUBMISSION =	B	ADJUSTMENT TO NON-TED RECORD (HCSR) DATA <b>OR</b>
	E	COMPLETE CANCELLATION OF NON-TED RECORD (HCSR) DATA
<b>OR</b> AMOUNT PAID BY GOVERNMENT CONTRACTOR (TOTAL) = ZERO		
<b>THEN</b> BYPASS THIS EDIT		
<b>ELSE IF</b> HEADER TYPE INDICATOR =	5	VOUCHER HEADER NON-ADMIN CLAIM RATE-ELIGIBLE <b>OR</b>
	6	VOUCHER HEADER ADMIN CLAIM RATE-ELIGIBLE
<b>AND</b> ENROLLMENT/HEALTH PLAN CODE =	X	FOREIGN SERVICE MEMBER <b>OR</b>
	SO	SHCP - NON-TRICARE ELIGIBLE <b>OR</b>
	ST	SHCP - TRICARE ELIGIBLE
<b>OR</b> ANY OCCURRENCE OF SPECIAL PROCESSING CODE =	AD	FOREIGN ACTIVE DUTY CLAIMS (EFFECTIVE 06/30/1996) <b>OR</b>
	CE	SHCP - CCEP <b>OR</b>
	SC	SHCP - NON-TRICARE ELIGIBLE <b>OR</b>
	SE	SHCP - TRICARE ELIGIBLE <b>OR</b>
	SM	SHCP - EMERGENCY
<b>THEN</b> SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) MUST =	A	ARMY <b>OR</b>
	C	COAST GUARD <b>OR</b>
	F	AIR FORCE <b>OR</b>
	H	PUBLIC HEALTH SERVICE <b>OR</b>
	M	MARINES <b>OR</b>
	N	NAVY <b>OR</b>
	O	NOAA <b>OR</b>
	Z	NOT PROVIDED FROM DEERS <b>OR</b>
	1	FOREIGN ARMY <b>OR</b>
	2	FOREIGN NAVY <b>OR</b>
	3	FOREIGN MARINE CORPS <b>OR</b>
	4	FOREIGN AIR FORCE

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<b>ELEMENT NAME: SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) (1-060) (Continued)</b>		
<b>AND</b> HCC MEMBER CATEGORY CODE MUST =	A	ACTIVE DUTY <b>OR</b>
	G	NATIONAL GUARD MEMBER (MOBILIZED OR ON ACTIVE DUTY FOR 31 DAYS OR MORE) <b>OR</b>
	J	ACADEMY STUDENT <b>OR</b>
	N	NATIONAL GUARD (NOT ON ACTIVE DUTY OR ON ACTIVE DUTY FOR 30 DAYS OR LESS) <b>OR</b>
	S	RESERVE MEMBER (MOBILIZED OR ON ACTIVE DUTY FOR 31 DAYS OR MORE) <b>OR</b>
	T	FOREIGN MILITARY MEMBER <b>OR</b>
	V	RESERVE MEMBER (NOT ON ACTIVE DUTY OR ON ACTIVE DUTY FOR 30 DAYS OR LESS) <b>OR</b>
	Z	UNKNOWN
<b>AND</b> HCC MEMBER RELATIONSHIP CODE MUST =	A	SELF <b>OR</b>
	Z	UNKNOWN
<b>1-060-30F • SHCP - NON-MTF/eMSM REFERRED VOUCHER (SERVICE MEMBER CLAIMS ONLY)</b>		
<b>IF</b> TYPE OF SUBMISSION =	B	ADJUSTMENT TO NON-TED RECORD (HCSR) DATA <b>OR</b>
	E	COMPLETE CANCELLATION OF NON-TED RECORD (HCSR) DATA
<b>OR</b> AMOUNT PAID BY GOVERNMENT CONTRACTOR (TOTAL) = ZERO		
<b>THEN</b> BYPASS THIS EDIT		
<b>ELSE IF</b> HEADER TYPE INDICATOR =	5	VOUCHER HEADER NON-ADMIN CLAIM RATE ELIGIBLE <b>OR</b>
	6	VOUCHER HEADER ADMIN CLAIM RATE ELIGIBLE
<b>AND</b> ENROLLMENT/HEALTH PLAN CODE =	SN	SHCP - NON-MTF/eMSM REFERRED CARE
<b>OR</b> ANY OCCURRENCE OF SPECIAL PROCESSING CODE =	AN	SHCP - NON-MTF/eMSM REFERRED CARE
<b>THEN</b> SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) MUST =	A	ARMY <b>OR</b>
	C	COAST GUARD <b>OR</b>
	F	AIR FORCE <b>OR</b>
	H	PUBLIC HEALTH SERVICE <b>OR</b>
	M	MARINES <b>OR</b>
	N	NAVY <b>OR</b>
	O	NOAA <b>OR</b>
	Z	NOT PROVIDED FROM DEERS <b>OR</b>
	1	FOREIGN ARMY <b>OR</b>
	2	FOREIGN NAVY <b>OR</b>
	3	FOREIGN MARINE CORPS <b>OR</b>
	4	FOREIGN AIR FORCE
<b>AND</b> HCC MEMBER RELATIONSHIP CODE MUST =	A	SELF <b>OR</b>

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**ELEMENT NAME: SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) (1-060) (Continued)**

Z UNKNOWN

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<b>ELEMENT NAME: SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) (2-055)</b>		
<b>VALIDITY EDITS</b>		
REFER TO <a href="#">SECTION 6.1</a> .		
<b>RELATIONAL EDITS</b>		
<b>2-055-11F • TPR [SERVICE MEMBER]</b>		
<b>IF</b> HEADER TYPE INDICATOR =	5	VOUCHER HEADER NON-ADMIN CLAIM RATE-ELIGIBLE <b>OR</b>
	6	VOUCHER HEADER ADMIN CLAIM RATE-ELIGIBLE
<b>AND</b> ENROLLMENT/HEALTH PLAN CODE =	W	TPR SERVICE MEMBER - USA <b>OR</b>
	WA	TPR FOREIGN SERVICE MEMBER
<b>OR</b> ANY OCCURRENCE OF SPECIAL PROCESSING CODE =	GU	SERVICE MEMBER ENROLLED IN TPR
<b>AND</b> TYPE OF SUBMISSION ≠	B	ADJUSTMENT TO NON-TED RECORD (HCSR) DATA <b>OR</b>
	E	COMPLETE CANCELLATION OF NON-TED RECORD (HCSR) DATA
<b>AND</b> THE TOTAL OF ALL OCCURRENCES/LINE ITEMS OF AMOUNT PAID BY GOVERNMENT CONTRACTOR BY PROCEDURE CODE ≠ ZERO		
<b>THEN</b> SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) MUST =	A	ARMY <b>OR</b>
	C	COAST GUARD <b>OR</b>
	F	AIR FORCE <b>OR</b>
	H	PUBLIC HEALTH SERVICE <b>OR</b>
	M	MARINES <b>OR</b>
	N	NAVY <b>OR</b>
	O	NOAA <b>OR</b>
	Z	NOT PROVIDED FROM DEERS
<b>AND</b> HCC MEMBER CATEGORY CODE MUST =	A	ACTIVE DUTY <b>OR</b>
	G	NATIONAL GUARD MEMBER (MOBILIZED OR ON ACTIVE DUTY FOR 31 DAYS OR MORE) <b>OR</b>
	J	ACADEMY STUDENT <b>OR</b>
	N	NATIONAL GUARD (NOT ON ACTIVE DUTY OR ON ACTIVE DUTY FOR 30 DAYS OR LESS) <b>OR</b>
	S	RESERVE MEMBER (MOBILIZED OR ON ACTIVE DUTY FOR 31 DAYS OR MORE) <b>OR</b>
	V	RESERVE MEMBER (NOT ON ACTIVE DUTY OR ON ACTIVE DUTY FOR 30 DAYS OR LESS) <b>OR</b>
	Z	UNKNOWN
<b>AND</b> HCC MEMBER RELATIONSHIP CODE MUST =	A	SELF <b>OR</b>
	Z	UNKNOWN

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<b>ELEMENT NAME: SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) (2-055) (Continued)</b>		
<b>2-055-20F • SHCP VOUCHERS (SERVICE MEMBER CLAIMS ONLY)</b>		
<b>IF ENROLLMENT/HEALTH PLAN CODE =</b>	SR	SHCP - MTF/eMSM REFERRED CARE (EFFECTIVE 10/01/1999)
<b>OR ANY OCCURRENCE OF SPECIAL PROCESSING CODE =</b>	AR	SHCP - MTF/eMSM REFERRED CARE
<b>OR TYPE OF SUBMISSION =</b>	B	ADJUSTMENT TO NON-TED RECORD (HCSR) DATA <b>OR</b>
	E	COMPLETE CANCELLATION OF NON-TED RECORD (HCSR) DATA
<b>OR AMOUNT PAID BY GOVERNMENT CONTRACTOR (TOTAL) = ZERO</b>		
<b>THEN BYPASS THIS EDIT</b>		
<b>ELSE IF HEADER TYPE INDICATOR =</b>	5	VOUCHER HEADER NON-ADMIN CLAIM RATE-ELIGIBLE <b>OR</b>
	6	VOUCHER HEADER ADMIN CLAIM RATE-ELIGIBLE
<b>AND ENROLLMENT/HEALTH PLAN CODE =</b>	X	FOREIGN SERVICE MEMBER <b>OR</b>
	SO	SHCP - NON-TRICARE ELIGIBLE <b>OR</b>
	ST	SHCP - TRICARE ELIGIBLE <b>OR</b>
	SU	SHCP - REFERRAL DESIGNATION UNKNOWN
<b>OR ANY OCCURRENCE OF SPECIAL PROCESSING CODE =</b>	AD	FOREIGN ACTIVE DUTY CLAIMS (EFFECTIVE 06/30/1996) <b>OR</b>
	CE	SHCP - CCEP <b>OR</b>
	SC	SHCP - NON-TRICARE ELIGIBLE <b>OR</b>
	SE	SHCP - TRICARE ELIGIBLE <b>OR</b>
	SM	SHCP - EMERGENCY
<b>THEN SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) MUST =</b>	A	ARMY <b>OR</b>
	C	COAST GUARD <b>OR</b>
	F	AIR FORCE <b>OR</b>
	H	PUBLIC HEALTH SERVICE <b>OR</b>
	M	MARINES <b>OR</b>
	N	NAVY <b>OR</b>
	O	NOAA <b>OR</b>
	Z	NOT PROVIDED FROM DEERS OR
	1	FOREIGN ARMY OR
	2	FOREIGN NAVY OR
	3	FOREIGN MARINE CORPS OR
	4	FOREIGN AIR FORCE
<b>AND HCC MEMBER CATEGORY CODE MUST =</b>	A	ACTIVE DUTY <b>OR</b>
	G	NATIONAL GUARD MEMBER (MOBILIZED OR ON ACTIVE DUTY FOR 31 DAYS OR MORE) <b>OR</b>
	J	ACADEMY STUDENT <b>OR</b>

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<b>ELEMENT NAME: SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) (2-055) (Continued)</b>		
	N	NATIONAL GUARD (NOT ON ACTIVE DUTY OR ON ACTIVE DUTY FOR 30 DAYS OR LESS) <b>OR</b>
	S	RESERVE MEMBER (MOBILIZED OR ON ACTIVE DUTY FOR 31 DAYS OR MORE) <b>OR</b>
	T	FOREIGN MILITARY MEMBER <b>OR</b>
	V	RESERVE MEMBER (NOT ON ACTIVE DUTY OR ON ACTIVE DUTY FOR 30 DAYS OR LESS) <b>OR</b>
	Z	UNKNOWN
<b>AND HCC MEMBER RELATIONSHIP CODE MUST =</b>	A	SELF <b>OR</b>
	Z	UNKNOWN
<b>2-055-32F • SHCP - NON-MTF/eMSM REFERRED VOUCHER (SERVICE MEMBER CLAIMS ONLY)</b>		
<b>IF TYPE OF SUBMISSION =</b>	B	ADJUSTMENT TO NON-TED RECORD (HCSR) DATA <b>OR</b>
	E	COMPLETE CANCELLATION OF NON-TED RECORD (HCSR) DATA
<b>OR AMOUNT PAID BY GOVERNMENT CONTRACTOR (TOTAL) = ZERO</b>		
<b>THEN BYPASS THIS EDIT</b>		
<b>ELSE IF HEADER TYPE INDICATOR =</b>	5	VOUCHER HEADER NON-ADMIN CLAIM RATE-ELIGIBLE <b>OR</b>
	6	VOUCHER HEADER ADMIN CLAIM RATE ELIGIBLE
<b>AND ENROLLMENT/HEALTH PLAN CODE =</b>	SN	SHCP - NON-MTF/eMSM REFERRED CARE
<b>OR ANY OCCURRENCE OF SPECIAL PROCESING CODE =</b>	AN	SHCP - NON-MTF/eMSM REFERRED CARE
<b>THEN SERVICE BRANCH CLASSIFICATION CODE (SPONSOR) MUST =</b>	A	ARMY <b>OR</b>
	C	COAST GUARD <b>OR</b>
	F	AIR FORCE <b>OR</b>
	H	PUBLIC HEALTH SERVICE <b>OR</b>
	M	MARINES <b>OR</b>
	N	NAVY <b>OR</b>
	O	NOAA <b>OR</b>
	Z	NOT PROVIDED FROM DEERS <b>OR</b>
	1	FOREGIN ARMY <b>OR</b>
	2	FOREIGN NAVY <b>OR</b>
	3	FOREIGN MARINE CORPS <b>OR</b>
	4	FOREIGN AIR FORCE
<b>AND HCC MEMBER RELATIONSHIP CODE MUST =</b>	A	SELF <b>OR</b>
	Z	UNKNOWN

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<b>ELEMENT NAME: AGR SERVICE LEGAL AUTHORITY CODE (2-056)</b>
<b>VALIDITY EDITS</b>
REFER TO <a href="#">SECTION 6.1</a>
<b>RELATIONAL EDITS</b>
NONE

- END -