

No	Data Item	METeOR identifier	ECLIPSE identifier	Obligation	Position Start	Position End	Type & size	Format	Repetition	Coding description	Edit Rules	Error code/s
1	Insurer identifier			MAA	1	3	A(3)	Left justify	1	Insurer identifier from a list of registered private health insurers.	<b>Reject</b> record if not same as Source Identifier value in FILE HEADER item 2.	SE001.1
2	Person Identifier			MAA	4	24	A(21)	Left justify	1	This is an insurer-specific person identifier, unique within an establishment or agency, regardless of any change in membership. This number should be consistently used for each event or episode that a person receives so that a patient's journey can be constructed regardless of place of care.	<b>Reject</b> record if blank	SE002
3	Provider (hospital) code			MAA	25	32	A(8)	NNNNNNNA	1	The hospital provider number. Provider number must be 8 characters in length (include leading zeros) and in upper case. "OVERSEAS" = overseas provider Format: ONNNNNNA	<b>Reject</b> record if not (a valid 8 character Commonwealth provider number or 'OVERSEAS').	SE003
4	Hospital type			MAA	33	33	N(1)		1	The type of hospital. 1 = public 2 = private 3 = private day facility 4 = public day facility	<b>Reject</b> record if not (1, 2, 3 or 4). <b>Identify</b> if Hospital type does not match provider hospital table	SE004 SW004
5	Hospital contract status			MAA	34	34	A(1)		1	The payment arrangement the insurer has with the hospital Y = a hospital with which a Insurer has a contract N = a hospital with which the Insurer does not have a contract. T = a hospital is paid under 2nd Tier benefit arrangement B = a hospital is paid under a "Bulk payment" arrangement	<b>Reject</b> record if not ('Y' or 'N' or 'T' or 'B').	SE005
6	Service charge			MAA	35	43	N(9)	Right justify Zero prefix \$\$\$\$\$cc (omit decimal point)	1	The gross charge raised for the service event(s) or program reported in this record provided within the service start and end date. Reversals are permitted and the negative sign must be the first character – eg "-00010000". Zero fill if no amount charged.	<b>Reject</b> record if not numeric	SE006
7	Service benefit			MAA	44	52	N(9)	Right justify Zero prefix \$\$\$\$\$cc (omit decimal point)	1	The gross benefit paid for the service event(s) or program reported in this record provided within the service start and end date. Reversals are permitted and the negative sign must be the first character – eg "-00010000". Zero fill if no amount paid (treatment where no benefit is paid is out of scope for the collection, but will not be rejected if supplied).	<b>Reject</b> record if not numeric	SE007
8	Front end deductible			MAA	53	61	N(9)	Right justify Zero prefix \$\$\$\$\$cc (omit decimal point)	1	The amount of Front End Deductible (excess) deducted from the benefit otherwise payable by the Insurer to the hospital. Reversals are permitted and the negative sign must be the first character – eg "-00010000". Zero fill if not applicable.	<b>Reject</b> record if not numeric	SE008
9	Date of birth	<a href="#">287007</a>		MAA	62	69	A(8)	DDMMYYYY	1	The date of birth of the person.	<b>Reject</b> record if not in format DDMMYYYY	SE009
10	Sex	<a href="#">635126</a>		MAA	70	70	N(1)		1	The distinction between male, female, and others who do not have biological characteristics typically associated with either the male or female sex, as represented by a code. 1 = Male 2 = Female 3 = Other 9 = Not stated / inadequately described	<b>Reject</b> record if not (1, 2, 3 or 9).	SE010

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11	Postcode - Australian	<a href="#">611398</a>		MAA	71	74	N(4)	Right justify Zero prefix	1	The numeric descriptor for a postal delivery area, aligned with locality, suburb or place for the address of a person. Codes 9999 = unknown postcode and 8888 = overseas will be used instead of METeOR codes 0097, 0098, 0099.	<b>Reject</b> record if not (a valid Australian postcode or 9999 or 8888).	SE011
12	Service start date			MAA	75	82	A(8)	DDMMYYYY	1	The date on which a service event or program of treatment commenced. This may relate to an individual service event date, the date of the first service event in a program of care, or the first service event included in the claim for this record.	<b>Reject</b> record if not in format DDMMYYYY	SE012
13	Service end date			MAA	83	90	A(8)	DDMMYYYY	1	The date on which a service event(s) or program of treatment was completed. This may relate to an individual service event date, the date of the last service event in a program of care, or the last service event included in the claim for this record.	<b>Reject</b> record if not in format DDMMYYYY, or if not ≥ event start date.	SE013
14	Service specialty			MAA	91	93	N(3)	Left justify	1	A description of the service event or program for which the service relates. 001 = Acupuncture / Acupressure 002 = Chiropractic 003 = Community, Home, District Nursing 004 = Dental 005 = Dietetics 006 = Domestic Assistance 007 = Maternity Services 008 = Occupational Therapy 009 = Optical 010 = Orthoptics (Eye Therapy) 011 = Osteopathic Services 012 = Physiotherapy 013 = Podiatry (Chiropody) 014 = Psych/Group Therapy 015 = Speech Therapy 016 = Other 022 = Rehabilitation - General 023 = Oncology Maintenance Services 024 = Wound Management 025 = Minor Procedures and Consultations 026 = Major Procedures 027 = Stomal Therapy 028 = Care of Implanted Catheter 029 = Accommodation Preventative Health/Health Management Program: 017 = Cardiac Rehabilitation Program 018 = Diabetes 019 = Weight Loss Program 020 = Quit Smoking Program 021 = Other Program	<b>Reject</b> record if not valid code	SE014
15	Service codes			MAA	94	108	A(15)	Left justify	1	An insurer-specific code that represents the type of treatment provided. To be refined with the assistance of insurers and hospitals. Insurers to submit their in-house codes for inclusion in the Department's Enterprise Data Warehouse.	<b>Identify</b> if code not in insurer-specific list	SW015

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16	Number of service events			MAA	109	111	N(3)	Right justify Zero prefix	1	The number of service event(s) provided for the claim reported in this record. If this record relates to an individual service event, report 001. If this record relates to a group of service events or a program, report the total number of service events paid for. Reversals are permitted and the negative sign must be the first character – eg "-03". Report 000 where the number of service events actually provided is not known.	<b>Reject</b> record if not numeric	SE016

Total record length = 112 characters; record type of 'O' followed by 111 character record