

# Kansas Department of Revenue



## ***Kansas Insurance Reporting Map Example***

**Kansas Department of Revenue  
915 SW Harrison Street  
Topeka, KS 66626**







**FUNCTIONAL GROUP HEADER :: GS**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
GS01	479	Functional Identifier Code	ID M 2/2	“CI”	CI = Consolidated Service Invoice/Statement
GS02	142	Application Sender’s Code	AN M 2/15		Sender’s Duns, NAIC or FEIN
GS03	124	Application Receiver’s Code	AN M 9/9	“835107079”	Dept. of Revenue DUNS Number
GS04	373	Date	DT M 6/6	YYMMDD	Functional Group Creation Date
GS05	337	Time	TM M 4/4	HHMM	Functional Group Creation Time
GS06	28	Group Control Number	N0 M 1/9		Group Control Number (Generated by Sender) <b>(Same As GE02)</b>
GS07	455	Responsible Agency Code	ID M 1/2	“X”	Indicate ASC X12
GS08	480	Version/Release/Industry/Identifier Code	AN M 1/12	“003050”	Standards Version being used

**GS\*CI\*11111111\*835107079\*01328\*0947\*1\*X\*003050\**

**2.3 Header Level**

**811 HEADER :: ST**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
ST01	143	Transaction Set Identifier	ID M 3/3	“811”	Transaction Set Number
ST02	329	Transaction Set Control Number	AN M 4/9		Defined by Taxpayer <b>(Same as SE02)</b>

**ST\*811\*000000001\**

**AUTOMOBILE LIABILITY INSURANCE INFORMATION :: BIG**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
BIG01	373	Date	DT M 6/6	YYMMDD	This is the date the transaction was created in the Sender’s system.
BIG02	76	Invoice Number	AN M 1/22	“1”	1 = Assigned value

**BIG\*020312\*1\**

**SENDER NAME :: N1 (Occurrence 1 : Sender Information)**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
N101	98	Entity Identification	ID M 2/2	“IN” “SQ”	IN = Insurer SQ = Service Bureau
N102	93	Name	AN X 1/35		Sender’s Name
N103	66	Identification Code Qualifier	ID X 1/2	“NI” “FI”	NI = NAIC Code FI = Federal Tax ID Number
N104	67	Identification Code	AN X 2/20		Sender’s Code from NAIC table or Federal Tax ID Number

**N1\*IN\*FARMER STATE\*NI\*12345\**

**RECEIVER NAME :: N1 (Occurrence 2 : Recipient Information)**

N101	98	Entity Identification	ID M 2/2	“2F”	2F = State
N102	93	Name	AN X 1/35		KANSAS DMV (Recipient’s Name)

**N1\*2F\*KANSAS DMV\**

**2.4 Detail Level**

H I E R A R C H I C A L L E V E L 1 : I N S U R E R

**INSURER LEVEL :: HL (LEVEL 1: INSURER)**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
HL01	628	Hierarchical ID Number	AN M 1/12		HL Identifier
HL02	734	Hierarchical Parent ID			NOT USED
HL03	735	Hierarchical Level Code	ID M 1/2	"1"	Level code
HL04	736	Hierarchical Child Code	ID M 1/1	"1"	Child code

HL\*1\*\*1\*1\

**INSURER NAME :: NM1**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
NM101	98	Entity Identification	ID M 2/2	"IN"	IN = Insurer
NM102	1065	Entity Type Qualifier	ID M 1/1	"2"	2 = Non-person
NM103	1035	Last Name or Organization Name	AN M 1/35		Organization Name
NM104	1036	Name First			Not Used
NM105	1037	Name Middle			Not Used
NM106	1038	Name Prefix			Not Used
NM107	1039	Name Suffix			Not Used
NM108	66	Identification Code Qualifier	ID M 1/2	"NI"	NI = NAIC CODE
NM109	67	ID Code	AN M 5/5		NAIC Code

NM1\*IN\*2\*KANSAS INSURANCE COMPANY\*\*\*\*\*NI\*23456\

**INSURER REPORTING INFORMATION :: IT1**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
IT101	350	Assigned Identification			Not Used
IT102	358	Quantity Invoiced	R M 1/10	"1"	1 = Assigned Value
IT103	355	Unit	ID M 2/2	"IP"	IP = Insurance Policy
IT104	212	Unit Price	R M 1/17	"0"	Unit Price

IT1\*\*1\*IP\*0\

H I E R A R C H I C A L L E V E L 2 : S T A T E

**STATE LEVEL (LEVEL 2: OCCURS ONCE FOR THE STATE) :: HL**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
HL01	628	Hierarchical ID Number	AN M 1/12		HL Identifier
HL02	734	Hierarchical Parent ID	AN M 1/12	"1"	Parent ID
HL03	735	Hierarchical Level Code	ID M 1/2	"2"	Level Code
HL04	736	Hierarchical Child Code	ID M 1/1	"1"	Child Code

HL\*2\*1\*2\*1\





**POLICY INFORMATION ::IT1**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
IT101	350	Assigned Identification			Not Used
ITI02	358	Quantity Invoiced	R M 1/10	"1"	1 = Assigned Value
IT103	355	Unit	ID M 2/2	"IP"	IP = Insurance Policy
IT104	212	Unit Price	R M 1/17	"0"	Unit Price

**IT\*1\*IP\*0\**

**TRANSACTION PURPOSE :: SI**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
SI01	559	Agency Qualifier Code	ID M 2/2	"ZZ"	ZZ = Mutually Defined
SI02	1000	Service Characteristic Qualifier	ID M 2/2	"11"	11 = Insurance Policy Transaction Code
SI03	234	Product/Service ID	AN M 3/3	"LOD"	Policy Transaction Code

**SI\*ZZ\*11\*LOD\**

**POLICY OR BINDER NUMBER :: REF**

REF01	128	Reference No. Qualifier	ID M 2/2	"IG"	IG = Insurance Policy Number
REF02	127	Reference Number	AN M 1/20		Policy Number

**REF\*IG\*1645877\**

**POLICY DATES :: DTM**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
DTM01	374	Date/Time Qualifier	ID M 3/3	"036"	036 = Expiration Date
DTM02	373	Date	DT M6/6	YYMMDD	Policy Expiration Date
DTM03	337	Time			Not Used
DTM04	623	Time Code			Not Used
DTM05	624	Century	N0 M 2/2	CC	Century of Policy Expiration Date

**DTM\*036\*020910\*\*\*20\**

**HIERARCHICAL LEVEL 5:VEHICLE**

**VEHICLE LEVEL (LEVEL 5: VEHICLE)**

ID	REF	ELEMENT NAME	ATTRIBUTES	VALUE	DESCRIPTION
HL01	628	Hierarchical ID Number	AN M 1/12		HL Identifier
HL02	734	Hierarchical Parent ID	AN M 1/12		Parent Identifier
HL03	735	Hierarchical Level Code	ID M 1/2	"5"	Level Code
HL04	736	Hierarchical Child Code			Not Used

**HL\*4\*3\*5\**

**SECTION SEPARATOR – VEHICLE LEVEL :: LX**

LX01	554	Assigned Number	N0 M 1/6	"1"	1 = Assigned Value
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**LX\*1\**





