



HIPAA X 12 Transaction Standards

Abbreviated Companion Guide

837 Institutional Health Care Claim Version 004010X096A1

Trading Partner Companion Guide Information and Considerations
837I

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Disclosure Statement

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The information contained in this Abbreviated Companion Guide does not contradict requirements defined in the ASC X12N HIPAA Implementation Guides.

1. General Transaction Protocol

- 1.1. What transactions will you be trading?
 - 837 P (HCFA), 837i (UB), 835 (Remit), EFT (Electronic Funds Transfer).
- 1.2. Bundling
 - One ISA/IEA interchange per file is required.
 - One GS/GE functional group per interchange is required.
 - Single claim or document/record per ST/SE transaction set is strongly recommended.
 - 5000 ST/SE transaction set limit per file is requested. If transmission requires more than 5000 ST/SE transaction sets, Magellan request EDI trading partner to send multiple files.
- 1.3. Delimiters
 - Up carrot (^) as a data element separator.
 - Tilde (~) as the segment terminator.
 - Pipe (|) as the component element separator.
- 1.4. Control #
 - ISA interchange control number (ISA13) must be unique across all files sent
 - GS group control number (GS06) must be unique across all files sent (this is numeric field, so no leading zero beyond the min.field size are acceptable. Other than leading zeros, the GS Control# is usually equal to the ISA control #).
 - Each ST transaction set control (ST02) must be unique within the GS/GE functional group.
 - BHT03 transaction reference identifier must be unique across all files sent
 - Loop 2300, REF "D9" must be present with a unique identifier across all files sent.
- 1.5. Reissue & Retransmission
 - BHT02 – a reissue should only be sent if coordinated with Magellan prior to the retransmission.
 - Any retransmission must be coordinated between Trading Partner and Magellan in advance.
- 1.6. Payer Identifier
 - Magellan's payerid is 01260 (the Magellan NAIC #) for 837 inbound to Magellan;
 - 1. ISA07 = 33 and ISA08 = 01260
 - 2. GS03 = 01260
 - 3. If sent: 837P: 2010BB REF01= NF and REF02= 01260
 - 4. If sent: 837I: 2010BC REF01= NF and REF02 = 01260
 - Magellan needs your Sender ID and qualifier at your earliest convenience.
 - ISA15 must be populated with "T" for test files and "P" for production files".
- 1.7. Magellan will reject any claim with 2000A CUR-02 not equal to USD (US Currency).
- 1.8. Acknowledgements
 - Magellan expects to trade TA1s and 997s in addition to transaction specific responses (277Unsolicited Version 3070 for 837 Claim transmissions).

2. Connectivity

2.1. Pushing of files

- Trading Partner will push transaction files to Magellan's ftp server. Magellan needs your IP address.
- Magellan will push outbound Trading Partner files to Trading Partner's ftp server.

2.2. PGP encryption

- PGP to encryption will be used for all files being transmitted.
- Keys will be shared with Trading Partner.
- Separate PGP key pairs for Test and Production.

2.3. FTP

- Separate FTP logon ID's and passwords for Test and Production.
- Unique files names to be used for each file to indicate sender, receiver, transaction type, transaction version, and date-time stamp. Magellan has a preferred name standard to share with the trading partner.

2.4. eMail

- Magellan would like to receive an email whenever files are transferred to Magellan as a secondary confirmation. If possible, include notice of transfer, file name, claim count and claim line count. Send this email to "edihipaa@magellanhealth.com."

2.5. Schedule

- Magellan request EDI trading partner to inform what is expected schedule and duration of their EDI file transmissions (daily, weekly, monthly?)
- Test files can be submitted for review either using the Test/Certification FTP or email exchange if file is encrypted and password protected using Winzip 8.0 or above.

3. Testing

- 3.1. Separate FTP logon ID's and passwords are issued for Test/Certification and Production
- 3.2. Separate PGP key pairs are issued for Test/Certification and Production
- 3.3. Use ISA15 to indicate Test/Certification or Production

4. 837I

4.1. Provider Primary Id

- Magellan will accept a National Provider Identifier (NPI) and its associated qualifier (NM109 using an 'XX' qualifier), but Magellan is requiring a dual usage of an NPI as the primary identifier with a federal tax ID (TIN) (REF02 using an 'EI' qualifier) and/or a social security number (SSN) (REF02 using an 'SY' qualifier) in their respective secondary identifier REF segments for the following provider loops:
 - 2010AA Billing Provider
 - 2010AB Pay-To Provider
 - 2310E Service Facility
- If an NPI is used for the above provider types without a TIN (REF02 using an 'EI' qualifier) and/or SSN (REF02 using an 'SY' qualifier) for a secondary identifier, claim will be rejected in a 997 or 277U.
- To comply with HIPAA regulations, Magellan will require NPI usage for provider primary identifiers after May 22, 2007.

4.2. Provider Secondary Ids

- 2010AA REF-02; 2010AB REF-02; 2310C REF-02; 2310E REF-02; 2420C REF-02 should be sent as outlined in the rules noted below:
 - The Magellan Provider Identifier (MIS#) is required for Anthem, Humana, Commonwealth Virginia, Unicare Virginia, Unicare Massachusetts, TennCare. (This is for PO Boxes 13000, 12700, 12400)
 - Roster providers for TennCare also require a Social Security Number along with the MIS#. (This is for PO Boxes 12700, 12400)
 - All other accounts: The Magellan Provider Identifier (MIS#) is requested for all providers. Use qualifier "G2" Commercial Number to report the MIS#, and "SY" SSN to report the Social Security Number.
 - In the future, the MIS# will be required for all non-Medicaid claims.
 - Omission of this data will not result in a rejection, however it improves claims processing and its submission is highly recommended.

4.3. Claim Office Identifier so claim is routed to appropriate area for processing. The identifier is the PO Box number where a paper claim would be mailed. **This identifier MUST be sent** or claim will be rejected. If the Identifier is incorrect for the specific claim being billed, the claim will either reject or deny.

- Preferred Location: 2010BC REF-02 where REF-01 = FY
- Alternate location: 2010BC N3-01.

4.4. 2400 LX-01: Magellan can only handle 99 claims lines per claim.

4.5. Magellan considers bill types 11x, 12x or 86X inpatient services. All other bill types are considered alternate or outpatient levels of care. Alternate levels of care may be submitted in an 837I with both revenue and HCPCS codes. Magellan expects these values to be passed to us.

4.6. Radiology NIA claims submission

- Radiology claims submission must use PO Box 1428.
- First procedure modifier position (SV202-2) must not be null if procedure modifier position 2-4 (SV202-3, SV202-4, SV202-5) are used.

5. Interface Certification Process Flow

- 5.1. Send initial file for review
 - Magellan will accept password-protected ZIP file from version 8.0 or greater.
 - Send password by other medium (fax or phone)
- 5.2. Magellan will review the file for compatibility
 - Issues will be documented and returned
 - TA1, 997, Status Report (997 info), and 277U from Companion Guide files will be returned as appropriate.
 - Test may not include host load cycle – successful claims from EDI perspective will not get a 277U Application Advice for this file
- 5.3. Establish connectivity
 - Test and Production paths
 - 3.1.1 Different PGP keys for Test and Production
 - 3.1.2 Different logon and password (IP address as needed)
 - 3.1.3 Use ISA15 to designate Test vs Production.
 - Share sender and receiver ID's.
 - Establish schedule
- 5.4. Process test files from FTP transmissions
 - Cycle 2 files for EDI certification
 - Minimum of 20 claims or 10% of expected weekly claim volume
 - Cycle 1 file for Magellan host load validation
 - Minimum of 20 claims or 10% of expected weekly claim volume.
 - Return TA1, 997, 277U, Status Report, 835
 - Resolve other issues
- 5.5. Certify for production transmission
- 5.6. Submit production
 - Monitor production for TP for 2 passes.