

Infinedi Electronic Claims Submission

PROFESSIONAL CLAIMS COMPANION DOCUMENT

ASC X12N-837 v4010A1 Companion Guide

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OVERVIEW

Purpose

This document is to be used as a companion document to the Health Insurance Portability and Accountability Act (HIPAA) Implementation Guides. It is designed for implementation of the HIPAA Transaction for Professional Claims/Encounters: Health Care Claims: Professional 837 ASC X12N 837 (004010X098A1)

Implementation Guides

The HIPAA Implementation Guides are maintained by Washington Publishing Company and can be downloaded from their web site: <http://www.wpc-edi.com/> , the original documents are available as a PDF. This document is the transactional layout for the X12 Transactions as a continuous stream of data using delimiters to denote the end of the data. The Infinedi Claims Processing System standard is to receive and send data in the HIPAA ASC X12 837. Trading Partners who wish to transmit claim files under this format must test individual system files prior to production claim streams with Infinedi Claims Processing System.

Character Set

Infinedi Claims Processing System will support the Basic Character Set as defined by the American National Standards Institute (ANSI) with the following exceptions: The '#' and '@' are allowed and the ':' and '*' are not allowed. (The colon and asterisk are used as sub-element delimiters in the claim translations. The '#' is used in some addresses and the '@' is needed for email address.) All other characters will be removed from the content prior to transmitting to the receiver of the claim transaction.

A..Z	0..9	!	“	&	'	()	+	-	,	.	/	;	?	=	“	(Space)	#	@	
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Data Content

Background Payers who are operating under contingency plans under the Centers for Medicare and Medicaid Services (CMS) enforcement guidelines for HIPAA present special issues. Such payers may accept claims transactions in a HIPAA format, but may not be prepared to accept or use all of the data content. Infinedi, LLC continues to work with both submitters and receivers of claim transactions to ensure that the EDI transactions continue to flow. Providers should begin to submit data content using the rules in the HIPAA Implementation Guides.

Infinedi, LLC will enforce X12 syntax rules for all claims going to receivers of the 837 Transaction. Claims that fail to meet the syntax requirements will be rejected and must be corrected and resubmitted by the submitter.

DATA ELEMENTS

Interchange Control Header	
ISA05 - Interchange ID Qualifier	'30'
ISA06 - Interchange Sender ID	Your TaxID
ISA07 - Interchange ID Qualifier	'30'
ISA08 - Interchange Receiver ID	731572635
Functional Group Header	
GS02 Application Sender Code	Your TaxID
GS03 Application Receiver Code	731572635
Transaction Set	
ST02 Transaction Set Control	Identifying control number that must be unique within the transaction set functional group. The Transaction Set Control Numbers in ST02 & SE02 must be identical.
BHT02 Transaction Set Purpose Code	Must equal '00'
BHT06 Claim/Encounter Identifier	Must equal 'CH'
Loop 1000A - Submitter Name	
NM109 Sender Identification Code	Your TaxID
Loop 1000B - Receiver Name	
NM103 Receiver Name	INFINEDI
NM109 Receiver Ident Code	731572635

REQUIRED FIELDS	
Payer Address, City, State, Zip is required	Loop 2010BB N3, N4
When Sex fields are used they require:	'M' or 'F'
Subscriber Demographic Information	Loop 2010BA DMG03
Other Subscriber Demographic Information	Loop 2320 DMG03
Patient Demographic Information	Loop 2010CA DMG03

Method of Transmission

Infinedi's propriety software is issued under an EUL (End User Licensen) that allows your office to send claims using an analog modem, or over the internet using a Secure FTP transfer.

Electronic Payor List

Infinedi's current payer list is maintained at the website: http://www.infinedi.net/payor_lists.htm

Or can be obtained by contacting Infinedi's Customer Service Department at: 1-800-688-8087

Technical Contact Information

Paul Acee 1-800-688-8087; pacee@infinedi.net