



837 Transaction Companion Guide

ANSI x12 General Guidelines

May 2012

Establishing Electronic Access

CDPHP® will establish your organization as a trading partner within seven business days of receiving a fully completed *Provider/Group Access Information for 837 Transaction Set* form (available at the end of this document). A CDPHP EDI analyst will contact the trading partner to provide user name, password, and all pertinent information needed, enabling your organization to transfer files to CDPHP.

Testing Expectations

Testing is required to ensure that electronic information in the CDPHP processing system is accurate and readable.

CDPHP Expectations of Our Trading Partners

- CDPHP requires test files to have at least 25 claims.
- A variety of submissions, as applicable to your practice, should be submitted for testing.
- Send an e-mail to EDI_Team@cdphp.com to notify CDPHP that a test file is available for review after transmitting a file to your test folder.
- CDPHP recommends using Claredi* to test files for compliance.
- Remain proactive once the testing process commences.

What A Trading Partner Can Expect From CDPHP While Testing

- CDPHP will verify that test files are compliant.
- CDPHP will notify trading partners via e-mail when test files are found non-compliant.
- All issues will be communicated via e-mail during testing.

We Ask Trading Partners To Remember

- The number of tests required and the duration of the testing process is determined, in part, by the quality of the test data received from the trading partner.
- CDPHP will evaluate the results of testing and notify the trading partner when to increase files to normal production size.
- Test files are for testing purposes only. Test files will not be loaded into the production environment or processed for payment. In order to receive payment, claim files must be submitted through current channels until the trading partner has completed testing and is approved to submit files in the ANSI.x12N format.

*Claredi is an objective, third party, HIPAA-compliant transaction testing organization offering certification in HIPAA compliance. For more information regarding Claredi, please visit www.claredi.com.

Connecting to CDPHP

Technical Requirements

- An Internet connection.
- Ability to connect to a HTTPS Web site.
- Desktop Web browser. Browsers supported are:
 - Internet Explorer v.4.0 and higher
 - Netscape v.4.7 and higher
 - Mozilla v.1.0 and higher
 - Opera v.6.0 and higher

Advantages

- File transfers are not time consuming.
- Can use existing desktop browsers and Internet connectivity to transfer files.
- Browser-based solutions are well-suited for on-demand, manual transfers involving desktops and laptops because they are free, already installed, and end-users know how to use the existing software.
- Files are protected in transit by SSL (Secure Sockets Layer). There is no need to send encrypted files.

FTP and Automation

- Only FTP clients that implement standard Secure FTP may access the CDPHP server.
- Automation can be achieved through the use of a scripting language that supports HTTPS. Files can be securely exchanged on a scheduled, automated basis between desktops/laptops and CDPHP servers using FTP over SSL clients with built –in automation and/or scheduling capabilities which can be operated by batch files or scripts. An example of this is MoveIt Freely, freeware Windows command line FTP.
- Any FTP client that supports one or more of these FTP methods over SSL modes (IMPLICIT, EXPLICIT, TLS-P, or TLS-C) will work in connecting to CDPHP

List of FTP clients, by operating system.

- Apple Macintosh — NetFinder
- IBM OS/390 — OpenSSL
- IBM OS/400 — BlueZone FTP
- IBM z/OS — "TLS-Enabled FTP" on Communications Server, conditional mode
- JAVA — Glub FTPS
- Microsoft Windows — MOVEit Central, MOVEit Buddy, MOVEit Freely, CuteFTP Pro, SmartFTP, WS_FTP_Pro
- QNX — C-Kermit v.8.0
- SUN Solaris — LFTP, OpenSSL
- Unisys — OpenIT front end processor
- UNIX — C-Kermit v.8.0, LFTP, NetKit, SurgeFTP
- VMS — C-Kermit v.8.0

Passwords

Password Requirements

- Passwords must be changed upon first log on.
- Password must be changed every 30 days.
- Passwords and User Names are case sensitive.
- Passwords must be six characters.
- Passwords must contain at least one alpha and one numeric character.
- Passwords cannot resemble User Names.
- Passwords cannot contain dictionary words

Examples:

Unacceptable passwords: Security, Security 9

Acceptable passwords: Sec9urity, sec9urity

CDPHP Hours Of Operation

CDPHP business areas process non-inquiry files Monday through Friday. Files may be submitted 24 hours a day, 7 days a week, 365 days a year. Files received after 2 p.m. EST will be processed the next business day. CDPHP does NOT process claims on the following days:

- Saturday
- Sunday
- New Year's Day
- President's Day
- Memorial Day
- Independence Day
- Labor Day
- Thanksgiving
- Friday following Thanksgiving
- Christmas Eve Day
- Christmas Day

The above list is subject to change. Days may be added or removed from the list without notice.

Transaction File Naming Structure

File Name: Files submitted to CDPHP for processing must comply with the following naming convention. File names contain four parts separated by underscore characters, ending with an .x12 extension.

The four parts of the file name are:

Mailbox folder number: Typically four characters, the mailbox number assigned by CDPHP (Example: SFT0025 0025 would be the mailbox number)

Transaction Type: The three- or four-character designation of the transaction to be submitted, e.g., 837P, 276.

Day of Year Date (Julian Date): Five characters. For the purposes of EDI transactions with CDPHP, the date is defined as the two-character year designation concatenated with the number of days since January 0 of the current year (Day Of Year) to create a YYDDD format. For example the value of date June 3rd 2012 would be 12154. Trading partners can choose to use either the date the file was created or the date the file was sent to CDPHP for this date as long as usage is consistent.

Sequence number: Unlimited characters. The sequence number will be used by CDPHP to identify a file as unique for that Trading Partner on a given day. We ask Trading Partners to be aware if submitting more than one file per day, you **MUST** use a unique sequence number for each file submission.

.x12: File type extension. The .x12 file type extension designates this file as an ANSI .x12 formatted transaction file.

Example of filename: 0002_837P_09154.X.x12

General Statements

1. All Trading Partners are required to submit compliant 837 functional segments. All non-compliant functional segments will not be processed.
2. When transmitting version 5010 837 version, CDPHP will respond with a 999 transaction. If errors are reported in the 999, affected claims should be corrected and resubmitted.
3. All trading partners are required to submit the NPI as a Provider Identifier.
4. All transmissions submitted without a valid Trading Partner number will be rejected. A Trading Partner number can be obtained by completing the EDI Enrollment Form found on the website.
5. Only loops, segments, and data elements valid for the HIPAA Technical Report will be translated. Submitting data, not valid based on the Technical Report, will cause files to be rejected.
6. The incoming 837 transactions utilize delimiters from the following list: '>', '*', '~', '^', '|', and ':'. Submitting other delimiters may cause an interchange (transmission) to be rejected. These characters should not be used within the data if used as a delimiter.
7. Claim data submitted in the incoming 837 must use the basic character set as defined in Appendix A of the 5010 X12 Technical Report.
8. All lower case characters submitted on an inbound 837 file will be converted to upper case when sending data to the payers processing system including Coordination of Benefits data subsequently sent to Medicare.
9. All calendar dates on an incoming 837 claim transaction must be in the appropriate format based on the respective qualifier.
10. Compression (zipping of files) of files is not supported between the submitter and receiver.
11. File names should not contain any of the following characters: Dollar ("\$"), Ampersand ("&"), Plus ("+"), Comma (","), Forward slash/Virgule ("/"), Colon (":"), Semi-colon (";"), Equals ("="), Question mark ("?"), or 'At' symbol ("@").
12. Hyphen ("-"), or underscore ("_") as characters, with hyphen and underscore not acceptable as starting and ending characters.

Information for Professional Claims

The following information is intended to serve as a guide to the HIPAA ANSI X12 837 Technical Report for **Professional Claims**. Please refer to the complete HIPAA ANSI X12 837 Technical Report version 5010 for a full listing of required and situational fields. The rules in the Technical Report take precedence over the CDPHP Companion Guide.

| Loop | Segment | Field | Description | Suggestion |
|--------|---------|-------|---|---|
| - | ISA | 5 | Interchange ID Qualifier | 30 - Federal Tax ID # |
| - | ISA | 6 | Interchange Sender ID | Senders Tax ID |
| - | ISA | 7 | Interchange ID Qualifier | 30 - Federal Tax ID # |
| - | ISA | 8 | Interchange Receiver ID | 141641028 |
| - | GS | 2 | Application Sender's Code | Same value as what was used in ISA06 for consistency |
| - | GS | 3 | Application Receiver's Code | 141641028 |
| 1000A | NM | 109 | Identification Code | Submitter Tax ID |
| 1000A | PER | 3 | Communication Number Qualifier | EM |
| 1000A | PER | 4 | Communication Number | Email of Submitter's EDI Contact Information |
| 1000B | NM | 109 | Identification Code | 141641028 |
| 2010AA | NM1 | 8 | Identification Code Qualifier | Value "XX" - Health Care Financing Administration National Provider Identifier (NPI) |
| 2010AA | NM1 | 9 | Identification Code - Billing Provider Primary ID | Billing Provider NPI |
| 2010AA | REF | 1 | Reference Identification Qualifier | One occurrence of 'SY' (Social Security Number) or 'EI' (Employer's Identification Number) is required, if submitting 'XX' in the 2010AA NM108. |
| 2010AA | REF | 2 | Reference Identification | Billing Provider's TaxID or SS# |
| 2010BB | NM1 | 8 | Identification Code Qualifier | PI - Payor ID |
| 2010BB | NM1 | 9 | Identification Code | Use CDPHP's NAIC # "95491" |
| 2300 | REF | | Referral Number | Use Loop 2300 for Referral Number |
| 2310A | NM1 | 8 | Identification Code Qualifier | Value "XX" - Health Care Financing Administration National Provider Identifier(NPI) |
| 2310A | NM1 | 9 | Identification Code - Referring Provider Primary ID | Referring Provider NPI |

| | | | | |
|-------|-----|---|--|--|
| 2310B | NM1 | 8 | Identification Code Qualifier | Value "XX" - Health Care Financing Administration National Provider Identifier (NPI) |
| 2310B | NM1 | 9 | Identification Code - Rendering Provider Primary ID | Rendering Provider NPI |
| 2310B | PRV | 3 | Reference Identification | Appropriate taxonomy code |
| 2310B | REF | 2 | Reference Identification | Rendering Provider TIN |
| 2310B | PRV | 2 | ZZ - Mutually Defined to indicate Health Care Provider Taxonomy Code | |
| 2310C | NM1 | 8 | Identification Code Qualifier | Value "XX" - Health Care Financing Administration National Provider Identifier(NPI) |
| 2310C | NM1 | 9 | Identification Code - Facility Primary Identifier | Service Facility NPI |

Information for Institutional Claims

The following information is intended to serve as a guide to the HIPAA ANSI X12 837 Technical Report for **Institutional Claims**. *Please refer to the complete HIPAA ANSI X12 837 Technical Report for a full listing of required and situational fields. The rules in the Technical Report take precedence over the CDPHP Companion Guide.*

| Loop | Segment | Field | Description | Suggestion |
|-------|---------|-------|--|--|
| - | ISA | 05 | Interchange ID qualifier | 30 - Federal Tax ID # |
| - | ISA | 06 | Interchange Sender ID | Senders Tax ID |
| - | ISA | 07 | Interchange ID Qualifier | 30 - Federal Tax ID # |
| - | ISA | 08 | Interchange Receiver ID | 141641028 |
| - | GS | 02 | Application Senders Code | Same value as what was in ISA06 for consistency |
| - | GS | 03 | Application Receivers Code | 141641028 |
| - | BHT | 06 | Transaction Type Code | CH - Chargable. If a Trading Partner would like to use the RP (reporting) qualifier. They must contact EDI_Team@cdphp.com, prior to utilizing this qualifier |
| 1000A | NM1 | 09 | Identification Code - Submitter Identifier | Same value as what was in ISA06 for consistency |
| 1000A | PER | 3 | Communication Number Qualifier | EM |

| | | | | |
|-----------------------|-----|----|---|--|
| 1000A | PER | 4 | Communication Number | Email of Submitter's EDI Contact Information |
| 2010AA | NM1 | 08 | Identification Code Qualifier | Value "XX" - Health Care Financing Administration National Provider Identifier (NPI) |
| 2010AA | NM1 | 09 | Identification Code - Billing Provider Primary ID | Billing Provider NPI |
| 2010AA | REF | 1 | Reference Identification Qualifier | One occurrence of 'SY' (Social Security Number) or 'EI' (Employer's Identification Number) is required, if submitting 'XX' in the 2010AA NM108. |
| 2010AA | REF | 2 | Reference Identification | Billing Provider's Tax ID or SS# |
| 2010BC | NM1 | 08 | Identification Code Qualifier | Value "PI" - Payor Identification |
| 2300 | DTP | | Admission Date/Hour | CDPHP's policy criteria require use of segment DTP in loop 2300 to report admission date/hour and discharge hour on institutional, emergency room and observation claims |
| 2310A Inpatient Only | NM1 | 08 | Identification Code Qualifier | Value "XX" - Health Care Financing Administration National Provider Identifier (NPI) |
| 2310A Inpatient Only | NM1 | 09 | Identification Code - Attending Provider ID | Attending Provider's Provider NPI |
| 2310A Inpatient Only | REF | 01 | Reference Identification Qualifier | One occurrence of 'SY' (Social Security Number) or 'EI' (Employer's Identification Number) is required, if submitting 'XX' in the 2010AA NM108. |
| 2310A Inpatient Only | REF | 02 | Reference Identification | Attending Provider's Tax ID or SS# |
| 2310C Outpatient Only | NM1 | 08 | Identification Code Qualifier | Value "XX" - Health Care Financing Administration National Provider Identifier (NPI) |
| 2310C Outpatient Only | NM1 | 09 | Identification Code - Referring Provider ID | Referring Provider's NPI |



Provider/Group Access Information for 837 Transaction Set

To request initial set-up or to make changes for electronic claim submissions to CDPHP® via the HIPAA standard 837 transaction set, please complete this form for each provider in your office or group and **fax it to (518) 641-3302**.

For questions about completing this form or for matters concerning connectivity, please contact the CDPHP Provider Relations team at **(518) 641-4334, or EDI_Team@cdphp.com**.

You must have software, a practice management vendor, or clearinghouse that can send a compliant 837 file directly to CDPHP, with the ability to translate the file to your practice management accounts receivable system.

CDPHP Provider #: _____

If your organization already has a CDPHP user ID (e.g., SFT0001) please indicate: _____

Section I: Provider/Group Identification

This information must match with what is on CDPHP systems. (*Required fields.)

*Business Name: _____

*Tax ID#: _____

Current Paper Check Remit Address:

Address: _____

Address: _____

City, State, ZIP: _____

Section II: Provider Business Office Contact Information

Business Contact Name: _____ Title: _____

Telephone: _____ Ext.: _____ Fax: _____

Email Address: _____

Section III: Technical Contact Information (Vendor or IT Dept.) If other than business contact.

Technical Contact Name: _____

Title: _____

Telephone: _____ Ext.: _____ Fax: _____

Email Address: _____

Print Name: _____

Signature: _____

Date: _____