

PRESBYTERIAN HEALTH PLAN

EDI COMPANION GUIDE

277ca Health Care Information Status Notification

(Refers to the Implementation Guides based on ASC X12 277ca Version (**005010X214**))

Disclosure Statement:

This Companion Guide has been prepared for Presbyterian Health Plan partners participating in sending the 277ca Claim Acknowledgement (X214). It is in conjunction with the ASC X12 277ca Version 005010X214 of HIPAA X12 Standards.

If there are any changes to this document, it will be incorporated and published as a newer version at <https://www.phs.org/EDI>

Preface:

Presbyterian Health Plan accepts 277ca Acknowledgements as mandated by the Health Insurance Portability and Accountability Act of 1996 (HIPAA) that supplements Technical Report Type 3 (TR3) of 5010.

This Companion Guide clarifies and specifies the data content when exchanging 277ca Responses electronically with Presbyterian Health Plan. Transmissions based on this companion guide, used in tandem with the ASC X12 277ca Version 005010X214 HIPAA Implementation Guides, are compliant with both ASC X12 syntax and those guides. This Companion Guide is intended to convey information that is within the framework of the ASC X12N Implementation Guides adopted for use under HIPAA. The Companion Guide is not intended to convey information that in any way exceeds the requirements or usages of data expressed in the Implementation Guides.

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1. INTRODUCTION

SCOPE

This Companion Guide has been prepared for Presbyterian Health Plan Trading Partners who are submitting the 277ca Responses to PHS. It provides all necessary information regarding submission to Presbyterian and will be used to clarify and receive relevant information about transactions and operating rules.

OVERVIEW

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires that all Health Insurance Payers in the United States comply with the EDI standards as established by the Secretary of Health and Human Services (HHS). This companion guide is meant to be used in conjunction with the 277ca Implementation Guide Version 005010X214 established by the ASC X12 Standards for EDI. This transaction set is not intended to replace the Health Care Claim Payment/Advice Transaction Set (835) and therefore, will not be used for account payment posting.

This Companion Guide covers the following topics:

- Connection and Exchange of Data
- 277ca Response Configuration Details
- File Testing and Validation
- Production 277ca Responses and Updates
- Reporting
- Support

Please refer to the full ASC X12 005010X214 Implementation Guide for the expanded information of industry standard details for a 277ca response file.

<http://www.x12.org>

2. SUPPORT CONTACT INFORMATION

For all technical and support related questions concerning file trade, existing partners may contact the Presbyterian Health Plan EDI Team via email at edi@phs.org.

3. TESTING WITH PRESBYTERIAN HEALTH PLAN

Testing Process

The following process can be followed to perform testing with a Presbyterian Health Plan representative.

1. Ensure all appropriate agreements are in place before the exchange of data.
2. Exchange all required details between PHP and your organization to configure SFTP connection.
3. Configure your 277ca response file based on this Companion Guide and the X12 277ca Standards.
4. Create and exchange the 277ca Testing scenarios.
5. Presbyterian Health Plan Business Teams will review the Test 277ca response files to validate acceptance. If the file is rejected, the Trading Partner will be contacted to correct the file and resubmit.
6. Once both parties agree to Production readiness, the Trading Partner will be approved to submit Production files.

277ca Testing Scenarios

To ensure a seamless implementation, please provide the following test scenarios:

- Individual claim information
- Dependent claim information
- Multiple claims within the file from Trading Partner by Billing Provider (ST to SE)

4. CONNECTIVITY/COMMUNICATIONS WITH PRESBYTERIAN HEALTH PLAN

PROCESS FLOW

1. Trading Partner submits 837P/837I file to Presbyterian Health Plan.
2. Submitted 837 data is processed through PHP claims system and the 277ca is submitted back to the Trading Partner.
3. PHP processes 277ca's as a batch report.

RETRANSMISSION PROCEDURE

Retransmissions will need to be made when the following occurs:

- Connectivity failure
- 277ca file is rejected with errors.

SYSTEM MAINTENANCE

In the case maintenance is required, Presbyterian Health Plan will notify Trading Partners via email of scheduled system downtime.

5. CONTROL SEGMENTS/ENVELOPES

General Notes

- Leading spaces must be omitted.
- Trailing spaces must be omitted unless necessary to fulfill a minimum field length.

The 277ca files are expected to follow the standard values for the ISA-IEA, GS-GE, BHT, and ST-SE control segment values. All other standard EDI segments specific to the transaction should be used as per X12 ASC 277ca Guide.

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Control Segment Hierarchy

ISA - Interchange Control Header segment

GS - Functional Group Header segment

First 277ca Transaction

ST - Transaction Set Header segment

SE - Transaction Set Trailer segment

Second 277ca Transaction

ST - Transaction Set Header segment

SE - Transaction Set Trailer segment

Third 277ca Transaction

ST - Transaction Set Header segment

SE - Transaction Set Trailer segment

GE - Functional Group Trailer segment

IEA - Interchange Control Trailer segment

Delimiters

The following delimiters should be used when a 277ca transaction is submitted:

LOCATION	CHAR	TYPE
Segment Terminator	~	Tilde
Data Element Separator	*	Asterisk
Component Element Separator	:	Colon
Value Type - Value	;	Semi-Colon
Repetition Separator	^	Carat

6. PRESBYTERIAN HEALTH PLAN SPECIFIC BUSINESS RULES AND LIMITATIONS

Submission Requirements:

1. 277ca Files must be syntactically correct according to HIPAA X12 Standards.
2. Required Loops/Segments/Fields must be included within the file.
3. Test files must contain "T" in the ISA-15.
4. Trading Partner must be established with Presbyterian before file submission.

File Names - PHP will establish file naming conventions directly with the trading partners.

E.g. <Original File Name>_277ca

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7. TRANSACTION SPECIFIC INFORMATION

Presbyterian has created the following grid to assist in the design of the specific segments and values accepted by our organization. This table includes only those fields that Presbyterian has a specific value set or provides additional guidance on the value sent. This table does not include all the necessary fields to submit a successful transaction.

Loop ID	Reference	Name	HIPAA Codes	Notes/Comments
Header	ISA	Interchange Control Header		Detail
Header	ISA01	Authorization Information Qualifier	00	
Header	ISA03	Security Information Qualifier	00	
Header	ISA05	Interchange Information Qualifier	ZZ	
Header	ISA06	Interchange Sender ID	Trading Partner ID	
Header	ISA07	Interchange Information Qualifier	ZZ	
Header	ISA08	Interchange Receiver ID	PRESBYTERIANHP	
Header	ISA11	Repetition Separator	^	
Header	ISA16	Component Element Separator	:	
Header	GS	Functional Group Header		Detail
Header	GS01	Functional Identifier Code	HN	HN= 277ca
Header	GS02	Application Sender's Code	Trading Partner ID	Same as ISA06
Header	GS03	Application Receiver's Code	PRESBYTERIANHP	Same as ISA08
Header	GS08	Implementation Guide Version Name		005010X214
Header	ST	Transaction Set Header		Detail
Header	ST02	Transaction Set Control Number	EX: 0001	The transaction set control numbers in ST02 and SE02 must be identical.
Header	ST03	Implementation Guide Version Name	005010X214	
Header	BHT	Beginning of Hierarchical Transaction		Detail
Header	BHT02	Transaction Set Purpose Code	08	Status
Header	BHT03	Submitter Transaction Identifier		Payer ID
Header	BHT04	Request Received Date		Date in CCYYMMDD format

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Loop ID	Reference	Name	HIPAA Codes	Notes/Comments
Header	BHT05	Request Received Time		Time in HHMMSS format
Header	BHT06	Transaction Type Code	TH	
Loop	Segment	Information Source Level		Detail
2000A	HL01	Hierarchical ID Number	1	
2000A	HL03	Hierarchical Level Code	20	
Loop	Segment	Information Source Name		Detail
2100A	NM101	Entity Identifier Code	PR	Payer
2100A	NM102	Entity Type Qualifier	1 or 2	1-Person 2-Non Person Entity
2100A	NM103	Information Source Name		
2100A	NM108	Identification Code Qualifier	PI	Payer ID Qualifier
2100A	NM109	Identification Code		Payer ID
Loop	Segment	Transmission Receipt Control Identifier		Detail
2200A	TRN01	Trace Type Code	1	
2200A	TRN02	Information Source Application Trace Number		Provides Unique Identification for a Transaction
2200A	DTP01	Date Time Qualifier	050	Received
2200A	DTP02	Date Time Period Format Qualifier	D8	
2200A	DTP03	Information Source Receipt Date	CCYYMMDD	
2200A	DTP01	Date Time Qualifier	009	Processed
2200A	DTP02	Date Time Period Format Qualifier	D8	
2200A	DTP03	Information Source Process Date	CCYYMMDD	
Loop	Segment	Information Receiver Level Loop		Detail
2000B	HL01	Hierarchical ID Number		
2000B	HL02	Hierarchical Parent ID		
2000B	HL03	Hierarchical Level Code	21	
Loop	Segment	Information Receiver Name		Detail
2100B	NM101	Entity Identifier Code	41	Submitter
2100B	NM102	Entity Type Qualifier		1-Person 2-Non Person Entity
2100B	NM103	Information Receiver Last or Organization Name		
2100B	NM108	Identification Code Qualifier	46	ETIN
2100B	NM109	Information Receiver Primary Identifier		Tax ID
Loop	Segment	Information Receiver Application Trace Identifier		Detail
2200B	TRN01	Trace Type Code	2	
2200B	TRN02	Claim Transaction Batch #		Provides Unique Identification for the Transaction
2200B	STC01	Health Care Claim Status		

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Loop ID	Reference	Name	HIPAA Codes	Notes/Comments
2200B	STC01/CO43-01	Health Care Claim Status Category Code		CODE SOURCE 507: Claim Status Category Code
2200B	STC01/CO43-02	Health Care Claim Status Code		CODE SOURCE 508: Health Care Claim Status
Loop cont.	Segment	Information Receiver Application Trace Identifier		Detail
2200B	STC02	Status Information Effective Date	CCYYMMDD	Coverage Start/End Dates
2200B	STC03	Status Information Action Code	WQ or U	WQ- Accept U- Reject
2200B	STC04	Total Claim Charge Amount		
Loop	Segment	Billing Provider Name		Detail
2100C	NM101	Entity Identifier Code	85	Billing Provider
2100C	NM102	Entity Type Qualifier	1 or 2	
2100C	NM103	Provider Last/Organization		
2100C	NM108	Identification Code Qualifier	XX	
2100C	NM109	Billing Provider Identifier		Provider NPI
Loop	Segment	Patient Name Loop		Detail
2100D	NM101	Entity Identifier Code	QC	Patient
2100D	NM102	Entity Type Qualifier	1	Person
2100D	NM103	Patient Last Name		
2100D	NM108	Identification Code Qualifier	MI	Member ID
2100D	NM109	Patient Identification Number		Insured ID Number
Loop	Segment	Claim Status Tracking		Detail
2200D	TRN01	Trace Type Code	2	Referenced Transaction Trace Numbers
2200D	TRN02	Patient Control Number		Unique identification for the transaction
2200D	STC01/CO43-01	Health Care Claim Status Category Code		CODE SOURCE 507: Claim Status Category Code
2200D	STC01/CO43-02	Health Care Claim Status Code		CODE SOURCE 508: Health Care Claim Status
2200D	STC02	Status Information Effective Date	CCYYMMDD	Coverage Start/End Dates
2200D	STC03	Status Information Action Code	WQ or U	WQ- Accept U- Reject
2200D	STC04	Total Claim Charge Amount		
2200D	DTP01	Date Time Qualifier	472	Service
2200D	DTP02	Date Time Period Format Qualifier	D8 or RD8	
2200D	DTP03	Claim Service Period		CCYYMMDD CCYYMMDD-CCYYMMDD
Loop	Segment	Service Line Detail		Detail

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Loop ID	Reference	Name	HIPAA Codes	Notes/Comments
2220D	STC01-CO43-01	Health Care Claim Status Category Code		CODE SOURCE 507: Claim Status Category Code
2220D	STC01-CO43-02	Health Care Claim Status Code		CODE SOURCE 508: Health Care Claim Status
2220D	STC03	Action Code	U	Reject
Loop cont.	Segment	Service Line Detail		Detail
2220D	REF01	Reference Identification Qualifier	FJ	Line- Item Control Number
2220D	REF02	Line Item Control Number		
Trailer	SE	Transaction Set Trailer		
Trailer	SE01	Number of Included Segments		
Trailer	SE02	Transaction Set Control Number		Same as ST02
Trailer	GE	Functional Group Trailer		Detail
Trailer	GE01	Number of Included Transaction Sets		
Trailer	GE02	Functional Group Control Number		Same as GS06
Trailer	IEA	Interchange Group Trailer		Detail
Trailer	IEA01	Number of Included functional Groups		
Trailer	IEA02	Interchange Group Control Number		Same as ISA13

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ISA*00* *00* *ZZ*SENDER *ZZ*RECEIVER *230915*1402*U*00401*000000001*0*T*>~
GS*HN*SENDERGS*RECEIVERGS*20230915*140226*000000001*X*005010X214~
ST*277*0003*005010X214~
BHT*0085*08*277X2140003*20230221*1025*TH~
HL*1**20*1~
NM1*PR*2*YOUR INSURANCE COMPANY*****PI*YIC01~
TRN*1*0091182~
DTP*050*D8*20230220~
DTP*009*D8*20230221~
HL*2*1*21*1~
NM1*41*1*JONES*HARRY*B***46*S00003~
TRN*2*2002022045678~
STC*A1>19>PR*20230221*WQ*365.5~
QTY*90*3~
QTY*AA*2~
AMT*YU*200.5~
AMT*YY*165~
HL*3*2*19*1~
NM1*85*1*JONES*HARRY*B**MD*FI*234567894~
HL*4*3*PT~
NM1*QC*1*PATIENT*FEMALE*****MI*222222222~
TRN*2*PATIENT22222~
STC*A2>20*20230221*WQ*100~
REF*1K*220216359803X~
DTP*472*D8*20230214~
HL*5*3*PT~
NM1*QC*1*PATIENT*MALE*****MI*333333333~
TRN*2*PATIENT33333~
STC*A3>21*20230221*U*65*****A3>187~
DTP*472*D8*20230229~
HL*6*3*PT~
NM1*QC*1*JONES*LARRY*****MI*444444444~
TRN*2*JONES44444~
STC*A7>21*20230221*U*100*****A7>249~
DTP*472*D8*20230211~
HL*7*3*PT~
NM1*QC*1*JOHNSON*MARY*****MI*555555555~
TRN*2*JOHNSON55555~
STC*A2>20*20230221*WQ*50.5~
REF*1K*220216359806X~
DTP*472*D8*20230210~
HL*8*3*PT~
NM1*QC*1*MILLER*HARRIETT*****MI*666666666~
TRN*2*MILLS66666~
STC*A2>20*20230221*WQ*50~
REF*1K*220216359807X~
DTP*472*D8*20230205~
SE*46*0003~
