PRESBYTERIAN HEALTH PLAN

EDI COMPANION GUIDE

820 Payroll Deducted and Other Group Premium Payment for Insurance Products Notification

(Refers to the Implementation Guides based on ASC X12 820 Version (**005010X218**)

Disclosure Statement:

This Companion Guide has been prepared for Presbyterian Health Plan partners participating in sending the 820 Payroll Deducted and other Group Premium Transaction (X218). It is in conjunction with the ASC X12 820 Version 005010X218 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 820 Transactions 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 820 X12 Transactions with Presbyterian Health Plan. Transmissions based on this companion guide, used in tandem with the ASC X12 820 Version 005010X218 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 820 X12 (Version 218) Transactions 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 820 Implementation Guide Version 005010X218 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
- 820 Configuration Details
- File Testing and Validation
- Production 820 Transaction Details
- Reporting
- Support

Please refer to the full ASC X12 005010X218 Implementation Guide for the expanded information of industry standard details.
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 820 X12 file based on this Companion Guide and the X12 820 Implementation Standards.
4. Create and exchange the 820 Testing scenarios.
5. Presbyterian Health Plan Business Teams will review the Test 820 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.

4. CONNECTIVITY/COMMUNICATIONS WITH PRESBYTERIAN HEALTH PLAN

PROCESS FLOW

1. Trading Partner submits an 820 file to Presbyterian Health Plan.
2. Submitted 820 data is validated via SNIP Level 2 and data is then loaded into the appropriate tables.
3. If any errors are found, the entire file will be rejected and needs to be resubmitted.
4. Validated data is loaded into appropriate tables.

RETRANSMISSION PROCEDURE

Retransmissions will need to be made when the following occurs:

- Connectivity failure
- 820 file is rejected

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 820 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 820 Implementation Guide.

Control Segment Hierarchy
ISA - Interchange Control Header segment
    GS - Functional Group Header segment
        First 820 Transaction
      ST - Transaction Set Header segment
    SE - Transaction Set Trailer segment
        Second 820 Transaction
      ST - Transaction Set Header segment
      SE - Transaction Set Trailer segment
        Third 820 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 an 820 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. 820 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 820 file submission.

File Names - PHP will establish file naming conventions directly with the Trading Partners.

E.g. <TRADINGPARTNER>_<YYYYMMDD>_<HHMMSS>__<SEQ#>_820

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 Health Plan 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	ISA02	Authorization Information	ZZ	
Header	ISA03	Security Information Qualifier	00	
Header	ISA04	Security Information		
Header	ISA05	Interchange ID Qualifier	ZZ	
Header	ISA06	Interchange Sender ID	Trading Partner ID	
Header	ISA07	Interchange ID Qualifier	ZZ	
Header	ISA08	Interchange Receiver ID	PRESBYTERIANHP	
Header	ISA11	Repetition Separator	^	
Header	ISA15	Interchange Usage Indicator		**I** = Information **P** = Production **T** = Test
Header	ISA16	Component Element Separator	:	
Header	**GS**	**Functional Group Header**		**Detail**
Header	GS01	Functional Identifier Code	RA	Payment Order/Remittance Advice
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		005010X218
Header	**ST**	**Transaction Set Header**		**Detail**
Header	ST01	Transaction Set ID Code	820	
Header	ST02	Transaction Set Control Number	EX: 0001	The transaction set control numbers in ST02 and SE02 must be identical.
Header	ST03	Implementation Convention Reference	005010X218	

Loop ID	Reference	Name	HIPAA Codes	Notes/Comments
Header	**BPR**	**Financial Information**		**Detail**
Header	BPR01	Transaction Handling Code	C D I P U H	**C** = Payment accompanies remittance advice **D**= Make Payment Only **I** = Remittance Info Only **P** = Prenotification of Future Transfers **U** = Split Payment & Remittance **H** = Handling Party's Option to Split Payment & Remittance
Header	BPR02	Total Premium Payment Amount		
Header	BPR03	Credit or Debit Flag Code		**C** = Credit
Header	BPR04	Payment Method Code	ACH BOP CHK FWT NON SWT	**ACH** = Automated Clearinghouse **BOP** = Financial Institution Option **CHK** = Check **FWT** = Federal Reserve Funds Wire Transfer **NON** = Non- Payment Data **SWT** = S.W.I.F.T. Payment
Header	BPR10	Payer Identifier		
Header	BPR16	Check Issue or EFT Effective Date		CCYYMMDD
Header	**TRN**	**Reassociation Trace Number**		**Detail**
Header	TRN01	Trace Type Code		**1** = Current transaction Trace Number **2** = Financial Reassociation Trace Number
Header	TRN02	Check or EFT Trace Number		
Loop	**Segment**	**Premium Receiver's Name**		**Detail**
1000A	N101	Entity Identifier Code	PE	Payee
1000A	N102	Premium Receiver Name		
1000A	N103	Identification Code Qualifier	1 9 EQ FI XV	**1**= D-U-N-S Number- Dun & Bradstreet **9**= D-U-N-S +4 D-U-N-S Number plus 4 characters **EQ**= Insurance Company Assigned ID Number **FI**= Federal Tax Identification Number **XV**= Center for Medicare & Medicaid Services Plan ID

Loop ID	Reference	Name	HIPAA Codes	Notes/Comments
Loop	**Segment**	**Premium Payer's Name**		**Detail**
1000B	N101	Entity Identifier Code	PR	Payer
1000B	N102	Premium Payer Name		
1000B	N103	Identification Code Qualifier	1 9 24 75 EQ FI PI	**1**= D-U-N-S Number- Dun & Bradstreet **9**= D-U-N-S +4 D-U-N-S Number plus 4 characters **24**= Employer's Identification Number **75**= -State or Province Assigned Number **EQ**= Insurance Company Assigned ID Number **FI**= Federal Tax Identification Number **PI**= Payer Identification Number
Loop	**Segment**	**Intermediary Bank Information**		**Detail**
1000C	N101	Entity Identifier Code	DB D4 BW AK BE BK C1 C2 IAT MJ RB Z6 ZB ZL	**DB**= Interim Funding Organization **D4**= Asset Account Holder **BW**= Payment Address **AK**= Party to Whom Acknowledgment should be sent **BE**= Beneficiary **BK**= Bank **C1**= In Care of Party #1 **C2**= In Care of Party #2 **IAT**= Party Executing & Verifying **MJ**= Financial Institution **RB**= Receiving Bank **Z6**= Transferring Party **ZB**= Party to receive Credit **ZL**= Party Passing Transaction
1000C	N102	Intermediary Bank Name		
1000C	N103	Identification Code Qualifier	31 57 94 A3 A4 A6	**31**= Bank Identification Code **57**= Department **94**= Organization Code assigned to indicate ultimate destination **A3**= Assigned by Third Party **A4**= Assigned by Clearinghouse **A6**= Financial Identification Numbering System (FINS)

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Loop ID	Reference	Name	HIPAA Codes	Notes/Comments
Loop (cont)	**Segment**	**Intermediary Bank Information**		**Detail**
1000C	N103	Identification Code Qualifier	CF G PA	**CF**= Canadian Financial Institution Routing # **G**= Payee Identification # **PA**= Secondary Agent Identification
Loop	**Segment**	**Organization Summary Remittance**		**Detail**
2000A	ENT01	Assigned Number		Number assigned for differentiation within a Transaction Set
2000A	ENT02	Entity Identifier Code	2L AG NH RGA UN	**2L** = Corporation **AG**= Agent/Agency **NH**= Association **RGA**= Responsible Govt Agency **UN**= Union
2000A	ENT03	Identification Code Qualifier	1 9 24 FI	**1**= D-U-N-S Number/Dun & Bradstreet **9**= D-U-N-S +4 - D-U-N-S Number with 4 Character Suffix **24**= Employer's Identification Number **FI**= Federal Taxpayer Identification Number
2000A	ENT04	Organization Identification Code		Code Identifying a party or other code
Loop	**Segment**	**Transmission Receipt Control Identifier**		**Detail**
2200A	ADX01	Premium Payment Adjustment Amount		Monetary Amount
2200A	ADX02	Premium Payment Adjustment Reason	52 53 80 81 86 BJ H1 H6 RU WO WW	**52**= Credit or Overpayment **53**= Remittance for Previous Underpayment **80**= Overpayment **81**= Credit as agreed **86**= Duplicate Payment **BJ**= Insurance Charge **H1**= Information Forthcoming **H6**= Partial Payment Remitted **RU**= Interest **WO**= Overpayment Recovery **WW**= Overpayment Credit

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Loop ID	Reference	Name	HIPAA Codes	Notes/Comments
Loop	**Segment**	**Organization Summary Remittance**		**Detail**
2300A	RMR01	Reference Identification Qualifier	1L 1I CT IK	**1L**= Group or Policy Number **1I**= Account Number **CT**= Contract Number **IK**= Invoice Number
2300A	RMR02	Contract, Invoice, Account, Group, or Policy Number		
2300A	RMR03	Payment Action Code	PA PI PO PP	**PA**= Payment in Advance **PI**= Pay Item **PO**= Payment on Account **PP**= Partial Payment
2300A	RMR04	Detail Premium Payment Amount	Amount Paid	The Amount being paid on this remittance item
Loop	**Segment**	**Summary Line-Item Loop**		**Detail**
2310A	IT1	Summary Line Item		Line-Item Identification
Loop	**SLN**	**Member Count Loop**		**Detail**
2315A	SLN01	Line-Item Control Number		
2315A	SLN03	Information Only Indicator	O	**O**= Information Only
2315A	SLN04	Head Count		Number of Contract Holders Identified in SLN05-1
2315A	SLN05-C001-01	Units or Basis for Measurement Code	10 IE PR	**10**= Group **IE**= Person **PR**= Pair
Loop	**Segment**	**Information Receiver Name**		**Detail**
2300B	RMR01	Reference Identification Qualifier	9J 1I AZ B7 CT 1D 1G 1K KW	**9J**= Pension Contract **1I**= Account Number **AZ**= Health Insurance Policy Number **B7**= Life Insurance Policy Number **CT**= Contract Number **ID**= Insurance Certificate Number **1G=** Insurance Policy Number **1K**= Invoice Number **KW**= Certification
2300B	RMR02	Insurance Remittance Reference Number		
2300B	RMR04	Detail Premium Payment Amount		Amount Paid
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

Loop ID	Reference	Name	HIPAA Codes	Notes/Comments
Trailer	**IEA**	**Interchange Group Trailer**		**Detail**
Trailer	IEA01	Number of Included functional Groups		
Trailer	IEA02	Interchange Group Control Number		Same as ISA13

APPENDICES

Additional information can be found at:
[Health Insurance Reform: Standards for Electronic Transactions | ASPE](#)
Full Implementation Guides:
[Home | WPC](#)

Transmission Examples:
During Testing- ISA015 must be "T" for Test.

Sample Data for 820 Notification:

```
ISA*00*      *00*      *ZZ*777777      *ZZ*PRESBYTERIANPH *250225*0920*^*00501*000000001*0*T:~
GS*HS*7777777*PRESBYTERIANPH *20250225*0920*7*X*005010X218~
ST*820*0001*005010X218~
BPR*C*255*C*ACH*CTX*01*888888881*DA*12345678*1112223334**01*199999999*DA*44433*20250225~
TRN*1*88899*4567891230~
REF*14*88899~
N1*PE*DEPAUL HEALTH CTR*FI*999888777~
N1*PR*MEDICAID NM*PI*22222~
ENT*1*2L*FI*999888777~
RMR*IK*900000001*PI*66655~
IT1*1~
SLN*1**D*5*IE~
SLN*2**D*75*10~
RMR*IK*900000002*PI*250~
IT1*1~
SLN*1**0*25*IE~
SE*15*0001~
```